

— DEMENTIA

Caring for someone with dementia at home: a practical guide

Set up dementia care at home in London: routines, safety steps, visiting or live-in carers, 2026/27 funding rules, and the signs home is no longer working.

By the JNP Sidona team · 23 October 2026 · 12 min read

Yes, someone with dementia can often be cared for at home if four things are in place: a steady daily routine, a home adapted to reduce confusion and risk, enough paid or family help, and the money sorted out early. Start with a free needs assessment from the council and, if your parent is over State Pension age, a claim for Attendance Allowance, which is not means-tested. Home stops working when the person is no longer safe, needs care day and night that nobody can sustain, or when the main carer is close to breaking.

KEY POINTS

- Ask the council for a free needs assessment. For care at home, the value of your parent's home is not counted.
- Over State Pension age, claim Attendance Allowance now (under it, PIP). In 2026/27 it pays £76.70 or £114.60 a week, and supervision counts.
- Make Lasting Powers of Attorney while your parent still has mental capacity. Once it has gone, so has the option.
- Fill in a Herbert Protocol form in case your parent goes missing, and use the London Fire Brigade's online checker to see if they can have a free home fire safety visit.
- Sudden confusion is an emergency, not "the dementia getting worse". The NHS says to call 999 or go to A&E.
- Plan the next step before you need it, such as what you would do if nights became impossible.

Can someone with dementia be cared for at home?

For many people, yes. The Alzheimer's Society says staying at home "is the preference for some carers and people with dementia", as long as the person can "remain safe and well and get the support they need at home." Dementia changes over time, so treat care at home as a plan you review, not a decision made once.

Not safe at home? Care home

No longer safe at home

4. Live-in care

Someone there day and night

Needs someone there
most of the day and night

3. More visits, plus breaks

Day centre or respite for you

Gaps between visits
become risky

2. Visiting carers

Prompts, meals, tablets, washing

Tasks missed or
safety slipping

1. Family, routine, safer home

Memory aids, labels, telecare

Care at home usually steps up as dementia progresses. The care home threshold follows the Alzheimer's Society's guidance on when a move may be needed. Ask for a fresh needs assessment at each step.

Where do you start? The first five things to do

- 1 Get the care plan from the diagnosis.** The NHS says everyone diagnosed should have a care plan that names a health or social care coordinator and is "reviewed at least once a year." If your parent never got one, ask the GP or memory service.
- 2 Ask the council for a needs assessment.** Contact adult social care at your parent's London borough. The Alzheimer's Society notes that it "must be provided free of charge, no matter what the person's financial situation." You can be there to explain and take notes. Ask for a copy of the care and support plan.
- 3 Ask for a carer's assessment for yourself.** It is free and can lead to breaks, training and support for you.
- 4 Claim Attendance Allowance, or PIP if your parent is under State Pension age.** It is not means-tested, so it is worth claiming straight away. See below.
- 5 Sort out Lasting Powers of Attorney.** GOV.UK says the person must "have mental capacity" when they make one. [GOV.UK says registering costs £92 \(https://www.gov.uk/power-of-attorney/register\)](https://www.gov.uk/power-of-attorney/register) for each one, and it takes 8 to 10 weeks if there are no mistakes. Without one, the family may have to apply to the Court of Protection to make some decisions.

How do you build a daily routine for someone with dementia?

A predictable day reduces confusion and distress. The NHS advice comes down to this:

- **Keep them involved.** Laying the table, gardening, a walk to the shop.
- **Make the toilet part of the routine.** Regular toilet times, the door left open, and a light on at night.
- **Give meals time.** Smaller portions, and finger food if cutlery is hard.
- **Watch drinks closely.** People with dementia may not realise they are thirsty, which the NHS says raises the risk of urine infections and constipation that can make confusion worse.

- **Protect sleep.** Daylight and activity in the day, fewer daytime naps, no caffeine or alcohol in the evening.

Write the routine on one page (wake time, meals, tablets, what calms and upsets them) and give it to every new carer or nurse.

Sudden change is not just "the dementia". The NHS says to go to A&E or call 999 if someone suddenly becomes confused (urine infections are a common cause in people with dementia). For a gradual change, book a GP appointment. If you are unsure, call NHS 111.

How do you handle changes in behaviour and medication?

The NHS says behaviour often changes in the middle to later stages, from repeated questions and pacing to agitation or hallucinations. These behaviours "may be how someone is communicating their feelings."

- **Look for the trigger.** The NHS suggests a diary for 1 to 2 weeks to spot what sets it off.
- **Answer the feeling, not the fact.** Be patient with repeated questions, reassure them they are safe, speak slowly in short sentences and give simple choices. If they become aggressive, stay calm and leave the room for a while.
- **Ask for a medicines review.** NICE's guidance on medicines support at home says health professionals should check whether tablets can be simplified or stopped, and that blister packs should only follow an assessment by someone like a pharmacist.
- **Agree who does what.** The care plan should say whether a carer reminds your parent or gives the tablets. Medicines must never be hidden in food or drink unless agreed under the Mental Capacity Act and written into the care plan.

How do you make the home safer for someone with dementia?

The NHS suggests a few changes:

- **Light:** bright, even lighting on the stairs and the way to the toilet, with sensor lights at night.
- **Floors:** remove rugs and mats, and avoid shiny floors that look wet.

- **Contrast:** contrasting colours for doors, banisters and the toilet seat.
- **Mirrors:** cover or remove any that cause distress.
- **Labels:** words and pictures on cupboards and doors, placed a little lower than usual.
- **A key safe:** so carers and paramedics can get in.

After a needs assessment, the council may provide telecare, such as alarms and movement sensors linked to family or a monitoring centre. You may be asked to contribute. For grab rails or a level-access shower, ask the council about a [Disabled Facilities Grant](https://www.gov.uk/disabled-facilities-grants) (<https://www.gov.uk/disabled-facilities-grants>). GOV.UK gives dementia as an example of a condition the grant can help with, but for adults it [depends on household income and savings](https://www.gov.uk/disabled-facilities-grants/what-youll-get) (<https://www.gov.uk/disabled-facilities-grants/what-youll-get>). For a room-by-room list, see our dementia home safety checklist.

Three London safety steps

- **A free fire safety visit.** The London Fire Brigade offers free Home Fire Safety Visits to people at higher risk of fire, and can fit smoke alarms. Fill in its [Home Fire Safety Checker](https://www.london-fire.gov.uk/safety/the-home/home-fire-safety/home-fire-safety-checker-hfsc/) (<https://www.london-fire.gov.uk/safety/the-home/home-fire-safety/home-fire-safety-checker-hfsc/>) for your parent and it will arrange a visit if they are eligible.
- **The Herbert Protocol.** This is a [form promoted in London by the Metropolitan Police with the Alzheimer's Society](https://www.newham.gov.uk/downloads/file/1854/the-herbert-protocol-leaflet-final) (<https://www.newham.gov.uk/downloads/file/1854/the-herbert-protocol-leaflet-final>) (leaflet, PDF). It records your parent's medication, phone numbers, places they have been found before and a recent photo. If your parent goes missing, hand it straight to the police. The leaflet says to download the form from the Metropolitan Police website; if you cannot find it, ask the Alzheimer's Society Dementia Connect support line (number below).
- **Driving.** [GOV.UK says "You must tell DVLA if you have dementia"](https://www.gov.uk/dementia-and-driving) (<https://www.gov.uk/dementia-and-driving>), and not reporting it can mean a fine of up to £1,000.

Visiting carers or live-in care: what fits your parent?

Main ways to arrange dementia care at home

Option	What it covers	Tends to suit	Watch for
Visiting carers	Planned visits for washing, dressing, meals, medication	Earlier stages; someone who is safe alone between visits	Risks in the hours between visits, such as wandering,

Option	What it covers	Tends to suit	Watch for
	prompts, company		cooking or missed drinks
Sit-in or companionship	A carer stays for a longer block so the family carer can go out or rest	A family carer who needs regular time off	It supports the carer; it does not replace personal care
Day centre or respite	Activity outside the home, or short-term cover for a carer's break	Families sharing care; people who enjoy company	Some people find new places unsettling; try short sessions first
Live-in care	A carer lives in the home and is there through the day and night	Later stages; someone who cannot be left alone but is settled at home	The carer needs their own bedroom and proper breaks. A parent awake most nights may need extra cover

The Alzheimer's Society notes that full-time professional carers "can be confusing for some people with dementia", so introduce new people gradually. If your parent pushes back, our guide on what to do when a parent with dementia refuses care has approaches to try. To weigh the bigger choice, see live-in care versus a care home.

Questions to ask any agency, including us

NICE's dementia guideline says care staff should be trained to understand each person as an individual, with their own life story, and that care should be as consistent as possible. Use that as your yardstick:

- Is the agency CQC-registered? Check its page on the CQC website yourself.
- What dementia training do carers get?
- How do you keep the same carers, and who comes when the regular carer is off?
- What happens if Mum refuses a wash or her tablets?
- What changes would make you review the care plan, and how quickly?

Who pays for dementia care at home?

A diagnosis on its own does not unlock funding. What counts is the help your parent needs and, for council help, what they can afford. Figures are for 2026/27.

Attendance Allowance (not means-tested)

Attendance Allowance is for people over State Pension age who have needed help or supervision for at least 6 months. [For 2026/27, GOV.UK sets the lower rate](https://www.gov.uk/attendance-allowance/what-youll-get) (<https://www.gov.uk/attendance-allowance/what-youll-get>) at £76.70 a week for "frequent help or constant supervision during the day, or supervision at night", and the higher rate at £114.60 for help or supervision "throughout both day and night". Under State Pension age, for example with young-onset dementia, your parent claims [Personal Independence Payment \(PIP\)](https://www.gov.uk/pip) (<https://www.gov.uk/pip>) instead. See our guide to Attendance Allowance for dementia.

Council funding (means-tested)

If the needs assessment finds eligible needs, the council does a financial assessment to work out what your parent pays. The [2026/27 limits are set by the government](https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2026-to-2027/social-care-charging-for-care-and-support-2026-to-2027-local-authority-circular) (<https://www.gov.uk/government/publications/social-care-charging-for-local-authorities-2026-to-2027/social-care-charging-for-care-and-support-2026-to-2027-local-authority-circular>), and the [Care Act statutory guidance](https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance) (<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance>) sets the rules:

- **Savings over £23,250:** your parent normally pays for their own care. They can still ask the council to arrange it, but the council may charge an arrangement fee.
- **Savings between £14,250 and £23,250:** they contribute.
- **Their home:** the home they live in is not counted for care at home.
- **Money left to live on:** they must keep at least £241.45 a week (a single person over Pension Credit age).
- **Attendance Allowance:** it usually counts as income, so do not treat it as extra money on top.
- **Extra costs:** list disability-related costs the council is not meeting, such as a community alarm, extra laundry or above-average heating.

Councils have some freedom in how they charge, so rules differ between London boroughs.

NHS continuing healthcare

Some people with complex health needs get their care fully funded by the NHS, including at home. Eligibility depends "on your assessed needs, and not on any particular diagnosis or condition", so dementia alone does not qualify. As needs grow more complex, ask the GP or social worker for the initial checklist.

Other help worth claiming

- **Council tax:** [GOV.UK says](https://www.gov.uk/council-tax/discounts-for-disabled-people) (<https://www.gov.uk/council-tax/discounts-for-disabled-people>) a person who is "severely mentally impaired" gets a 100% discount if they live alone, or 25% off if they live with one other adult. It needs a GP's or other medical professional's certificate and a qualifying benefit such as Attendance Allowance. A live-in carer changes the sums. They only count as disregarded if they give at least 35 hours of care a week, are not your parent's partner, and your parent gets a qualifying benefit such as Attendance Allowance. Even then, [GOV.UK says](https://www.gov.uk/council-tax/who-has-to-pay) (<https://www.gov.uk/council-tax/who-has-to-pay>) a home where everyone is disregarded gets 50% off, not 100%. Ask the council.
- **Carer's Allowance:** [£86.45 a week in 2026/27](https://www.gov.uk/carers-allowance) (<https://www.gov.uk/carers-allowance>) if you care for at least 35 hours a week and your parent gets a qualifying benefit. Check the effect on your parent's benefits first.

What care actually costs

Agencies set their own prices. For context, the [Homecare Association calculates a minimum price](https://www.homecareassociation.org.uk/about-us/research-and-reports.html) (<https://www.homecareassociation.org.uk/about-us/research-and-reports.html>) for homecare in England of £34.42 an hour for April 2026 to March 2027 (published December 2025). That is a floor, not a typical London price. Our page on [paying for care in London](/paying-for-care-london) (</paying-for-care-london>) sets out the options in more detail.

Looking after yourself as the carer

NICE's dementia guideline warns that carers are at increased risk of depression, and says they should be offered training in understanding dementia and responding to changes in behaviour. Ask the memory service what runs locally, and register as a carer with your GP.

Advice lines (checked 9 October 2026):

- Alzheimer's Society Dementia Connect support line: 0333 150 3456
- Dementia UK Admiral Nurse Dementia Helpline: 0800 888 6678
- Carers UK Helpline: 0808 808 7777
- Age UK Advice Line: 0800 678 1602

Plan regular breaks before you need them. A regular sitter or [respite care at home](/respite-care-london) (</respite-care-london>) is easier to arrange calmly than in a crisis.

When does dementia care at home stop working?

The Alzheimer's Society says a care home may be needed when the person is "no longer safe at home", when "they now need continuous care, day and night", or when "needs become too challenging for others to manage at home." It also asks families to weigh whether "the benefit the person gets from staying at home outweighs the risk."

Ask yourself honestly:

- Is your parent safe in the gaps when nobody is there? If not, can more hours or live-in care close those gaps?
- Are nights sustainable for whoever is in the house?
- Is the main carer's own health suffering?

There is no failure in choosing a care home when home has become the less safe or less kind place to be.

Who makes the decision?

If your parent has capacity to decide where to live, it is their decision, even if you disagree. If they lack capacity for that decision, it must be made in their best interests under the Mental Capacity Act 2005. That means weighing their wishes, beliefs and values, and the views of family and carers. A health and welfare attorney can decide if the LPA allows it. If the family cannot agree, talk to the council's adult social care team.

Questions families ask

Is dementia care at home free in the UK?



My mum has dementia and I can't cope. What can I do today?



Can I lock the front door so Dad does not wander?



Do we need a diagnosis before arranging care?



How we can help

JNP Sidona is a CQC-registered homecare agency based on Lewisham High Street, and dementia is one of the specialisms on our registration. We have not yet been inspected, so we do not have a rating. Our [dementia care at home](/dementia-care-london) (/dementia-care-london) can be visiting carers or a live-in carer, and we also offer respite and companionship. Jackie, our registered manager, starts with a free home assessment and writes a care plan around your parent's routine. We give a quote after that. If the council funds the care, you can ask it for a direct payment, which lets you choose the provider. Live-in care is available across London; visiting care depends on carer availability in your area, so [check the areas we serve](/areas-we-serve) (/areas-we-serve).

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About this guide

Written by the JNP Sidona team using the official sources listed above, which we checked on 9 October 2026. Rules, rates and thresholds change, usually each April, so always confirm the current position with the source or your council. This guide is general information, not medical, legal or financial advice. If you spot something out of

date, email info@jnpsidonasupportservices.co.uk (mailto:info@jnpsidonasupportservices.co.uk) and we will correct it.