

Social Care and Health Gofal Cymdeithasol a Iechyd Monmouthshire County Council County Hall, The Rhadyr, Usk, NP15

Cyngor Sir Fynwy Neuadd y Sir, Y Rhadyr, Brynbuga, NP15 1GA Tel/Ffôn: 01633 644451 / 01633 644772

E-Mail/Ebost:

incomeassessors@monmouthshire.gov.uk Web/Gwefan: www.monmouthshire.gov.uk

RE: Deferred Payment Agreement

Your Financial Assessment has been completed and the value of your property has been included in the assessment. You have been assessed as requiring to pay the full cost of your care home placement. If you are unable to fund your placement from income (or other sources) and require Local Authority support whilst you access the equity in your property you may wish to be considered for a Deferred Payment Agreement.

A Deferred Payment Agreement does not alter the fact that you are responsible for the full cost of your placement. Under a Deferred Payment Agreement, you will pay a weekly charge, based on your income, to the Local Authority on a 4-weekly basis in arrears and the Local Authority will pay your care home costs at the time they fall due. The difference between the Local Authority's payment to the care home and the weekly charge you pay must be repaid by you at a later date.

Please find attached an Information Pack to assist in explaining a Deferred Payment Agreement.

If you do not wish to enter into a Deferred Payment Agreement after any property disregard period you will need to ensure you have another way of paying for your care home placement. Many people choose to deal directly with the care home and to pay the care home directly – this is referred to as you being a 'self-funder'. If you ask the Local Authority to deal with the care home for you, you will have to pay the full amount of your care home fees to the Local Authority on a 4-weekly basis and the Local Authority may also charge you an administration fee.

If you require any clarification, please contact an Income Assessor on the number above.

Please return the enclosed form within 2 weeks of receipt of this letter to enable us to act on your decision.

If we do not receive a response to this letter, we will assume that you no longer require Local Authority support and will be undertaking alternative arrangements directly with the Care Home.

Yours sincerely

Jennie Janes / Lauren Davies

enc: Deferred Payment Information Pack

Notice of Intention Form



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Notice of Intention Form

	ccept this as confirmation that I,reference would
like to pro	oceed with the following option in relation to funding for my residential care:
	I will be self-funding and enter into a contract directly with the Care Home and do not require any further assistance from the Local Authority.
	I wish to be considered for a Deferred Payment Agreement to defer a part of my fees until full payment is possible.
	I do not wish to enter into a Deferred Payment Agreement, but I do still need further assistance from the Local Authority. I understand I will need to pay for my care even if assistance is provided by the Local Authority (This option would be subject to a 4 weekly administration fee of 8% plus the current Bank of England interest rate which will be added to the 4 weekly care home fee, payable by Direct Debit).
Signed _	Date