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Farway Grange

Admission Schedule

Amrial Care Ltd • Version 1.0 April 2026

How this Schedule works

This Admission Schedule is completed for every resident admitted to Farway Grange, regardless of the funding source. It records the details of the placement, the agreed fee, and how fees are apportioned between funding sources.

- For permanent self-funded placements, this Schedule is issued alongside the **Consent to Care** and **Financial Terms** documents.
- For respite and short-stay placements, this Schedule is issued alongside the **Consent to Care** and **Respite & Short Stay Addendum**.
- For residents funded by a Local Authority or NHS Continuing Healthcare, this Schedule is issued alongside the **Consent to Care** document only.

1. Resident Details

Full Name:	
Date of Birth:	
NHS Number:	
Address:	
Post Code:	
Email Address:	

2. Admission Details

Date of Admission:	
Room Number:	
Type of Residency:	☐ Permanent Placement ☐ Respite / Short Stay
Site:	☐ Residential ☐ Nursing
If Respite — Agreed Departure Date:	

3. Funding Sources (Weekly)

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Funding Source	Weekly Amount (£)
Total Fee (gross weekly fee; at the nursing site inclusive of nursing costs)	
Local Authority Contribution (12-week property disregard: ☐ Yes ☐ No)	
NHS Continuing Healthcare (CHC) Contribution	
Funded Nursing Care (FNC) Contribution (nursing site only, where eligible)	
Third Party Top-Up Contribution	
Net Resident Liability (amount payable by or on behalf of the Resident after all contributions above)	

Nursing site note: The Total Fee does not change according to FNC eligibility. Where FNC has not yet been assessed at the date of this Schedule, the Net Resident Liability shown is the amount currently payable pending NHS confirmation. Any FNC award will be confirmed by separate written notice and will reduce the Net Resident Liability from the date NHS payments begin.

4. Additional Notes / Special Arrangements

5. Nominated Representative / Key Contacts

Please provide details of the person(s) we should contact regarding the Resident's welfare and affairs. Providing these details does not of itself create any personal financial liability.

Full Name:	
Relationship to Resident:	
Address:	
Telephone:	
Email:	
LPA / Legal authority in place:	☐ Yes (details on file) ☐ No

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6. Agreement by Farway Grange (Amrial Care Ltd)

On behalf of Farway Grange (Amrial Care Ltd), I confirm that the information in this Admission Schedule is correct and that the placement is accepted on the terms set out in the applicable Resident Contract documents.

Authorised Signatory Name:	
Position:	
Date:	
Signature:	

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Farway Grange

Consent to Care

Terms and Conditions of Residence

Amrial Care Ltd • Version 1.0 April 2026

Important Notice
This document sets out the non-financial terms of your residence at Farway Grange — the care and services we will provide, your rights and responsibilities, the House Rules, and the basis on which consent to the placement has been given.
For permanent self-funded placements, the financial terms are set out in a separate Financial Terms document (Document 2), which you will be asked to sign alongside this one. For respite and short-stay placements, the financial terms are contained in the Respite & Short Stay Addendum (Document 3), which replaces Document 2 for that placement. For placements fully funded by NHS Continuing Healthcare or a Local Authority with a direct commissioning agreement, neither Document 2 nor Document 3 may be required at admission.
Please read this document carefully before signing. If anything is unclear, ask the Home Manager. You are encouraged to seek independent legal advice.

DEFINITIONS

Throughout this document, the following terms have the meanings given below.

"The Home"	Farway Grange, 23 & 31–33 Howard Road, Queens Park, Bournemouth, BH8 9EA.
"You" / "Your"	The Resident named in this document.
"We" / "Us" / "Our"	Amrial Care Ltd, trading as Farway Grange.
"Nominated Representative"	The person you have informed us will handle your affairs, including an Attorney under a Lasting Power of Attorney or a Court of Protection Deputy.
"Contract"	This document together with the Admission Schedule and, where applicable, the Financial Terms document and/or the Respite & Short Stay Addendum.

PART A — TERMS OF RESIDENCE

1. Services Included in Your Care

The weekly fee covers the full range of services provided by the Home, including:

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- Accommodation in your room
- All meals, including provision for special dietary requirements, and drinks
- Laundry of machine-washable personal belongings (excluding dry cleaning or hand-washing of delicate items). Please ensure all clothing is clearly labelled.
- Use of all facilities of the Home
- Access to the telephone for UK calls, subject to fair and reasonable use
- Newspapers and reading material in the lounge
- Terrestrial television in your room
- Use of books, music CDs and DVDs from the library
- Occasional treat take-away meals
- Fitness and activities classes
- Birthday celebrations and day trips
- Internet access via personal device, subject to lawful use and the service available to the Home

2. Additional Services

The following optional services can be arranged at additional cost and will be invoiced separately in accordance with the Financial Terms document:

- Dry cleaning
- Hairdressing
- Private treatments such as chiropody, dentistry, physiotherapy or similar
- Daily newspapers (where not included in the Total Fee)
- Long-distance and international telephone calls
- Private ambulance and/or escort (non-emergency)
- Personal medical supplies (other than those available on prescription) and home remedies

3. Your Room

3.1 From your admission date, where possible, you will be allocated the room identified in the Admission Schedule. We do not grant you exclusive possession of your room and no tenancy is created by this Contract. You occupy your room as a licensee, not a tenant.

3.2 We will endeavour not to move you from your room. Where a move is necessary — for example due to refurbishment, a change in your care needs, or resident welfare reasons — we will discuss the proposed move with you or your Nominated Representative in advance. Except in emergencies, we will give at least 14 days' notice.

3.3 If you are not happy with any proposed new room, you may terminate this Contract by giving at least 14 days' written notice to the Home Manager.

3.4 We require unrestricted access to your room to provide the services under this Contract.

3.5 Audio, video or photographic recording on the Home's premises must not take place in a way that infringes the privacy, dignity, confidentiality or safety of other residents, staff or

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visitors. We may require recording to stop where reasonably necessary. Any concerns should be discussed with the Home Manager in advance where practicable.

4. Trial Period

For a permanent placement, the first 28 days will be treated as a trial period to allow an ongoing assessment of suitability. During the trial period, either party may end the placement by giving at least 7 days' written notice.

We will only end the placement during the trial period for a fair reason — for example where we cannot safely meet your assessed needs, there are serious behaviour or safety concerns, or agreed funding arrangements are not in place despite reasonable efforts.

The financial implications of ending the placement during the trial period are set out in the Financial Terms document. There is no automatic trial period for a pre-booked respite or short-stay placement; those terms are in the Respite & Short Stay Addendum.

5. Ending the Placement

5.1 Termination by Us

In addition to the provisions of clause 4, we may end this Contract by written notice if:

- Care needs: In our reasonable opinion we can no longer provide the level of care required. At least 28 days' written notice will be given.
- Welfare concerns: In our reasonable opinion your behaviour or circumstances may be detrimental to the welfare of other residents or our employees. Where urgent: at least 48 hours' notice. Where not urgent: at least 28 days' written notice.
- Material breach: You materially breach any term of the Contract and the breach is not remedied within 28 days of our written request. At least 28 days' written notice will be given.
- Funding problems: There are unresolved funding problems, as further described in the Financial Terms document. At least 28 days' written notice will be given.

Before giving notice for care needs, welfare concerns, or material breach, we will, where reasonably practicable, consult with you, your Nominated Representative, and relevant professionals. We will consider whether reasonable adjustments could enable the placement to continue safely before notice is served. This does not prevent us from taking immediate action where there is a genuine emergency, safeguarding concern, or urgent welfare issue.

Where we end the placement because we can no longer safely meet your assessed needs, we will liaise with the relevant Local Authority, NHS body, ICB, GP, social worker, or other appropriate professional to support safe discharge planning. We will keep you and your Nominated Representative informed.

5.2 Termination by You

You or your Nominated Representative may end this Contract by giving not less than 28 days' written notice to the Home, unless a shorter period is agreed or termination is required more

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urgently because of hospital admission, safeguarding, or other welfare reasons. The financial obligations during the notice period are set out in the Financial Terms document.

6. Personal Belongings

Residents are encouraged to bring personal items and small items of furniture, subject to fire, health and safety requirements. Please discuss and agree this with the Home Manager before admission.

On death or when the placement ends, we will liaise with the estate or Nominated Representative about collection of belongings. Any storage or administration charges for belongings not collected will be reasonable, clearly explained, and reflect only actual costs properly incurred after we have made reasonable efforts to arrange collection.

If belongings remain uncollected, we may serve notice under the Torts (Interference with Goods) Act 1977, specifying the goods concerned, where they are held, any charges due, and the date after which we may sell or otherwise dispose of them. If the goods are sold, we may deduct our reasonable costs and will account to the owner or estate for any balance remaining.

7. Insurance and Valuables

The Home maintains an insurance policy covering residents' personal effects up to a maximum of £200 per item. Please notify the Home Manager if you intend to keep higher-value items in your room. We strongly advise against keeping large amounts of cash in your room; a safe is available for the safekeeping of valuables.

8. Pets

Pets are not generally accepted at the Home. In exceptional circumstances, requests may be considered at the Home Manager's discretion. Please raise this before admission if relevant.

9. Smoking

Smoking is permitted only in the designated outdoor smoking area. The Home is otherwise entirely non-smoking.

10. Clothing

Please ensure all clothing is clearly and permanently labelled with your name before admission. Whilst we take every reasonable care, we cannot accept liability for clothing that is lost or damaged during the laundry process.

11. Medication

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11.1 If you wish to self-administer prescription or non-prescription medications and treatment creams, a capability assessment will be completed at or before admission. If approved, you or your Nominated Representative will sign a separate self-medication agreement. We will not be liable for outcomes relating to self-administered medication, save where arising from our negligence.

11.2 If you wish to self-administer non-prescribed medications (e.g. paracetamol) without a formal agreement, please notify the Home Manager beforehand. We accept no liability for outcomes in such cases, save where arising from our negligence. All self-medication arrangements will be reviewed on an ongoing basis.

12. Complaints

We are committed to resolving complaints promptly and fairly. Please speak in the first instance to the Home Manager or a senior member of staff. We will acknowledge your complaint within 3 working days and provide a full written response within 28 days. If you remain unhappy, you may refer your complaint to the Local Government and Social Care Ombudsman or contact the CQC. Our written complaints procedure is available on request and is displayed in the Home.

13. Advocacy and Representatives

If the Resident cannot sign this document personally, it may be signed by a person with legal authority to act, or by an appropriate person on a best-interests basis as set out in Part B. A person signing only in a representative capacity does not become personally liable for fees solely by reason of doing so, unless they have separately agreed in writing to act as Guarantor or Third Party Contributor.

We encourage all residents to consider establishing a Lasting Power of Attorney. If you would like support from an independent advocate, we will facilitate this and direct you to relevant local advocacy services.

14. Gifts, Signatories and Beneficiaries

Gifts: No member of staff may accept personal gifts from residents. Gifts to the Home should be notified to the Home Manager for recording.

Signatories: No member of staff may witness any legal documents relating to you.

Beneficiaries: No member of staff may be named as a beneficiary in your Will or receive any benefit under your estate.

15. Data Protection

We collect and process your personal information to manage your care, issue invoices, communicate with you and your representatives, and fulfil our legal and regulatory obligations. We may share information with medical professionals bound by duties of confidentiality, statutory bodies with a legitimate interest in your welfare or safety, and relevant local authorities or NHS

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bodies in connection with funding. We will not share your information for marketing purposes. Our Privacy Notice, which explains how we use your information and your rights under UK GDPR, is available from the Home Manager on request.

16. House Rules

All residents are asked to respect the rights of others, to treat staff and other residents with courtesy, and to observe the Home's reasonable rules on conduct, safety, and the use of communal areas. A copy of the full House Rules is provided at admission and is available on request.

PART B — CONSENT AND CAPACITY

How to complete this section
One of the three sections below must be completed at admission, depending on the Resident's capacity and the arrangements in place. Only one section should be completed. The Home will guide you on which section applies.
Signing in a representative capacity does not create personal financial liability for the Resident's fees.

Section A — Resident has capacity to consent to this placement

Complete this section if the Resident has capacity to understand and agree to these terms at the time of signing.
Declaration: I confirm that I have read and understood this document and have had the opportunity to ask questions. I agree to be bound by the terms and conditions set out in it and in the Admission Schedule. I understand that the financial terms of my placement are contained in the Admission Schedule and, where applicable, the Financial Terms document or the Respite & Short Stay Addendum. Where the Admission Schedule records this placement as funded by NHS Continuing Healthcare, I also confirm that I have received and read the CHC Funding Notice in Part C of this document and understand that if CHC funding is reduced or withdrawn, a new financial agreement will be required before any personal financial obligation takes effect.

Resident's full name:	
Resident's signature:	
Date:	
Nominated Representative co-signature (optional):	

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Section B — Resident does not have capacity: LPA or Court of Protection Deputy in place

Complete this section if the Resident lacks capacity and a Lasting Power of Attorney (LPA) or Court of Protection Deputy is in place.

An LPA for Health & Welfare gives the attorney authority to consent to care arrangements on the donor's behalf. An LPA for Property & Financial Affairs does not of itself authorise health and welfare decisions. However, that attorney may sign documents relating to payment obligations or administrative arrangements within the scope of their authority.

Declaration: I confirm that: (a) the Resident lacks capacity to consent to this placement at this time; (b) I have legal authority to act on their behalf under the instrument described below; and (c) I am making this decision in the Resident's best interests and within the scope of my legal powers. Signing in this capacity does not of itself make me personally liable for the Resident's fees unless I separately agree in writing to act as Guarantor or Third Party Contributor. Where the Admission Schedule records this placement as funded by NHS Continuing Healthcare, I also confirm that I have received and read the CHC Funding Notice in Part C of this document and understand that if CHC funding is reduced or withdrawn, a new financial agreement will be required before any personal financial obligation takes effect.

Full name of attorney / deputy:	
Instrument type:	☐ LPA — Health & Welfare ☐ LPA — Property & Financial Affairs ☐ Court of Protection Deputy
OPG registration / instrument reference:	
Signature:	
Date:	

Section C — Admission on a best-interests basis (no LPA or Court of Protection Deputy)

Use this section where the Resident is not signing personally and there is no Lasting Power of Attorney or Court of Protection Deputy in place. It applies in two situations — tick the one that applies:

☐ The Resident lacks capacity for this decision at the time of admission. A capacity assessment has been carried out and is recorded in the care file.

☐ The Resident's capacity is uncertain or fluctuating. At the time this decision had to be made, the Home reasonably considered that the Resident could not provide informed consent. The basis for this assessment is recorded in the care file.

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In either case, this section should be signed by a family member, close friend, or other person who knows the Resident and their wishes. The Home Manager countersigns to confirm that a capacity assessment (or record of the basis for uncertainty) is on the care file.

Declaration: I confirm that: (a) a capacity assessment, or a record of the basis for uncertainty about capacity, has been completed and is held in the Resident's care file; (b) I am signing as a person who knows the Resident and their wishes; (c) to the best of my knowledge, this placement is in the Resident's best interests; and (d) I am not a member of staff of Farway Grange. Signing in this capacity does not of itself make me personally liable for the Resident's fees unless I separately agree in writing to act as Guarantor or Third Party Contributor. Where the Admission Schedule records this placement as funded by NHS Continuing Healthcare, I also confirm that I have received and read the CHC Funding Notice in Part C of this document and understand that if CHC funding is reduced or withdrawn, a new financial agreement will be required before any personal financial obligation takes effect.

Full name of person signing:	
Relationship to Resident:	
Signature:	
Date:	
Home Manager's full name:	
Home Manager's countersignature:	
Capacity record on care file:	☐ Confirmed

Agreement by Farway Grange (Amrial Care Ltd)

Authorised signatory: **Full name:** **Position:** **Signature:**	**Date of Contract:**

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PART C — NHS CONTINUING HEALTHCARE FUNDING NOTICE

For CHC-funded placements only

This section applies only to placements funded by NHS Continuing Healthcare (CHC) at the date of admission. For all other placements, leave this section blank. Where this section applies, the declarations in Part B already include acknowledgement of this notice — no separate signature is required here.

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This placement is funded by NHS Continuing Healthcare at the date of admission. The following terms apply:

- The financial relationship for this placement is currently between the Home and the relevant NHS body / ICB. Neither the Resident nor their representative is personally liable for the weekly fee while CHC funding remains in payment.
- The Financial Terms document (Document 2) is not normally signed at admission for a fully CHC-funded placement. It will be required if CHC funding is reduced or withdrawn.
- CHC eligibility is determined by the NHS and may change following reassessment. If CHC funding is reduced or withdrawn, we will discuss revised funding arrangements promptly with you or your representative and, where relevant, the Local Authority. Any direct private payment obligation will only take effect once it has been clearly set out in writing and agreed.
- For transparency, the current Total Fee for the placement is recorded below. This is the gross weekly fee and is provided now so that any later change in funding does not come as a surprise.
- If CHC funding ceases and no lawful and workable alternative funding arrangement can be put in place within a reasonable period, the placement may need to end in accordance with the Contract.

Total Fee (weekly, gross, for information only):	£
Integrated Care Board / NHS funding body:	
CHC reference number (if known at admission):	

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Farway Grange

Financial Terms

Amrial Care Ltd • Version 1.0 April 2026

Important Notice

This document sets out the financial terms for permanent placements at Farway Grange where the Resident, their representative, or another private payer has a direct payment obligation to the Home. It is not used for respite or short-stay placements, which are governed by the Respite & Short Stay Addendum. A separate Admission Schedule records the specific details of the placement and the agreed fees.

Please read this document carefully and seek independent financial and legal advice before signing. If anything is unclear, ask the Home Manager. Signing this document does not affect any rights you have under the Consumer Rights Act 2015 or other applicable consumer protection legislation.

DEFINITIONS

Throughout this document, the following terms have the meanings given below. Terms used but not defined here have the meanings given in the Consent to Care & Terms of Residence document.

"Total Fee"	The full weekly fee for your care and accommodation as set out in the Admission Schedule (a separate document), as varied in accordance with this Contract. At the nursing site, the Total Fee is always the gross amount inclusive of nursing costs, regardless of whether Funded Nursing Care is payable.
"Net Resident Liability"	The amount payable by or on behalf of the Resident after deducting any Funded Nursing Care (FNC) contribution. At the residential site this equals the Total Fee. At the nursing site it is the Total Fee less any FNC payment.
"Authority Funding"	The amount a Funding Authority has agreed to contribute towards the Total Fee.
"Top Up Contribution"	Any shortfall between the Authority Funding rate and the Total Fee, payable by the person or persons who have lawfully agreed, or are otherwise legally responsible, to pay it.
"Third Party Contributor"	Any person, other than a Funding Authority, who agrees to pay all or part of the Total Fee.
"Funding Authority"	Any Local Authority, NHS body or other statutory body that has agreed to pay all or part of your fees.

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"Due Date"	The 1st day of the month to which the invoice relates, or the next working day if the 1st falls on a weekend or bank holiday.
"Reservation Fee"	Has the meaning given in clause 11.
"Guarantor"	A person specifically requested by us to provide a guarantee, who has agreed in writing to accept personal liability for fees due under this Contract. A Guarantor is only required in the circumstances described in clause 10.

PART A — FINANCIAL TERMS

1. Total Fee

1.1 The fee payable from your admission to the Home is the Total Fee set out in the Admission Schedule. All fees are stated exclusive of VAT. If VAT becomes chargeable on any element of the Total Fee, it will be added and notified to you in writing.

1.2 The Total Fee is agreed before admission, based on your care needs at that time. It is payable by the person or persons responsible for payment under this Contract and any applicable funding arrangements.

1.3 The Total Fee will be reviewed annually in accordance with clause 9. We may also review fees at any other time if your assessed care needs change materially; any such review will be discussed with you and your Nominated Representative before taking effect.

2. Paying for Your Care

Affordability and your duty to notify

Paying for care is a significant financial commitment. We strongly encourage you to take independent financial advice before signing this Contract.

2.1 Affordability assessment: Before admission, we carry out a reasonable affordability assessment. By signing this document, you (or your Nominated Representative) confirm that, to the best of your knowledge, you have or expect to have sufficient funds to meet the cost of care for approximately two years from admission. This is a good-faith indication, not a guarantee.

2.2 Duty to notify: If you or your Nominated Representative know, or ought reasonably to know, that the Resident's capital is falling towards the level at which Local Authority funding may need to be considered, you must notify both us and the relevant Local Authority promptly so that any financial assessment can be started in good time. As a guide, we would usually expect notification once capital is at or approaching £60,000. You must also inform the Home Manager promptly of any application made to a Funding Authority and of any relevant changes in your financial circumstances.

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2.3 Our right to contact the Local Authority: If you do not notify us as described above, or if we reasonably consider that early contact with the Local Authority is needed — including where we assess that the Resident's remaining funds are likely to cover less than six months of the Total Fee — we may contact the Local Authority ourselves to alert them that a financial assessment may be required. We will notify you or your Nominated Representative at the same time and, where practicable, copy you into that correspondence. We are not responsible for delays in Local Authority funding resulting from late notification, and the Total Fee remains payable in full during any period before Authority Funding is confirmed and in payment.

2.4 Annual financial confirmation: Each year on or around the anniversary of your admission, we will write to you or your Nominated Representative asking for written confirmation that your financial position remains sufficient to continue meeting the Total Fee. You must return the completed confirmation within 28 days. If we do not receive a response after a reminder and we have a genuine concern about the continuity of funding, we may contact the Local Authority to alert them that a financial assessment may be required. If your financial circumstances change and you become unable to continue paying the Total Fee, please notify the Home Manager as soon as possible.

3. Change in Funding Status, Third Party Contributions and Funding Authority Payments

3.1 Fees remain payable pending funding confirmation: Until the Home has received written confirmation that Local Authority, NHS or other third-party funding has been approved and will begin from a specified date, the Resident remains liable for all fees and charges properly due under this Contract. The full Total Fee remains payable while a funding application is pending.

3.2 Transitional arrangements and retrospective adjustments: If public funding is approved, the Home may revise the charging arrangements with effect from the date confirmed by the relevant funding authority. Any sums paid for a period later covered by confirmed public funding will be credited or refunded, as appropriate, once the Home has received the relevant payment. If Authority Funding is awarded retrospectively for periods already paid, we will refund the relevant amounts promptly on receipt of payment from the Authority.

3.3 If public funding does not fully cover the Home's fees: If the Resident becomes eligible for Local Authority or other public funding but the amount payable by the funding authority is less than the Home's usual fees, the continued placement will be subject to one of the following being agreed within a reasonable period: (a) the funding authority agreeing the placement at the Home; (b) an approved third-party contribution being put in place through the relevant authority process; or (c) another lawful funding arrangement being agreed. If no such arrangement can be agreed, the Home may review whether it can continue the placement and, if necessary, may bring this Contract to an end in accordance with the termination provisions, after consultation with the Resident and/or their Representative and, where relevant, the funding authority.

3.4 Local Authority funded placements and top-up contributions: Where a placement is funded in whole or in part by a Local Authority or NHS body, any resident contribution, third party

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contribution or top-up contribution must be arranged and documented through the relevant authority's placement documentation. The Home will not enter into, vary or accept a third-party top-up arrangement except as permitted and approved in writing through the relevant authority process.

3.5 No personal liability unless expressly agreed: No family member, representative or other third party becomes personally liable for the Resident's fees or any top-up contribution unless they separately and expressly agree to that liability in writing in the form required for the relevant arrangement.

3.6 Funding Authority payments: Payments due from any Funding Authority are governed by a separate legal agreement between us and that Authority and do not form part of this Contract.

4. Funded Nursing Care and Site-Specific Fee Arrangements

Farway Grange operates both a residential care home (23 Howard Road) and a nursing home (31-33 Howard Road) . The Admission Schedule (a separate document) will make clear which site this Contract relates to.

Residential placements

The Total Fee stated in the Admission Schedule is the full amount payable for a residential placement. Funded Nursing Care does not apply to residential placements. If nursing needs arise, we will discuss whether the placement can continue at the residential site or whether a transfer to the nursing site is necessary.

Nursing placements

At the nursing site, the Total Fee is always the gross amount inclusive of nursing costs, whether or not Funded Nursing Care (FNC) is payable by the NHS. The Total Fee reflects the room, level of care required, and other placement factors, and does not vary based on FNC eligibility. Where a Resident is not eligible for FNC, the Net Resident Liability is the full Total Fee.

Where the NHS determines the Resident is eligible for FNC, the FNC payment is made directly to the Home. The amount payable by the Resident (the Net Resident Liability) is the Total Fee less the FNC contribution. The Total Fee, expected FNC contribution, and resulting Net Resident Liability are set out in the Admission Schedule.

Change in FNC eligibility

FNC eligibility is determined by the NHS and may change at any time. The Total Fee does not change; only the Net Resident Liability is affected:

- FNC newly awarded: Net Resident Liability reduces from the date NHS payments begin. We will notify you promptly.

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- FNC withdrawn: Net Resident Liability increases to the full Total Fee. We will give at least 28 days' written notice, or such shorter period as the NHS assessment timetable makes unavoidable.

Where an FNC award is made with a backdated start date covering a period during which the Resident has paid the full Total Fee, we will calculate the difference and refund that amount to the Resident or their estate promptly following receipt of the backdated NHS payment.

5. Calculation of the Total Fee

5.1 The Total Fee is expressed as a weekly rate in the Admission Schedule. For invoicing it is converted to a daily rate so monthly invoicing reflects the actual number of days in each month.

6. Invoices and Payment

6.1 Invoicing: We invoice you monthly for the Total Fee. Invoices are issued on or around the 20th of each calendar month for the following month. The initial invoice will be prorated from your admission date to the end of the first full calendar month.

6.2 Due Date: Payment is due on or before the 1st day of the month to which it relates. Where the 1st falls on a weekend or bank holiday, payment must be received by the next working day. Direct Debit collections are taken automatically on the Due Date.

6.3 Additional Services are invoiced monthly in arrears on or around the 10th of each month and are due within 14 days of the invoice date.

6.4 Invoices are issued by email. To receive invoices by post, notify the Home Manager or contact finance@amrial.co.uk. Our preferred payment method is Direct Debit via GoCardless. Where Direct Debit is not possible, BACS bank transfer is accepted. Card payments may be accepted at our discretion; no surcharge will be added for consumer card payments.

6.5 Grace Period: We allow a 5-day grace period from the Due Date for banking processing. Payment received within this period will not be treated as late.

6.6 Failed Payment Charge: Where a payment is returned unpaid by your bank, we will pass on the charge levied on us by our payment processor (typically £5–25), with no markup applied.

6.7 First Reminder and Administration Fee: If payment has not been received by the end of the grace period, we will issue a first written reminder and add a £25 administration fee to your account.

6.8 Late Payment Interest: If payment (including the £25 fee) remains outstanding 14 days after the Due Date, interest will accrue at 4% per annum above the Bank of England base rate, calculated daily from the Due Date.

6.9 Second Reminder: If payment remains outstanding 28 days after the Due Date, we will issue a second reminder and add a further £25 administration fee.

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6.10 Disputes: If you dispute any invoice, notify us in writing within 14 days of receipt. We will investigate and respond within 14 days. Undisputed amounts remain payable on time; disputed amounts will not attract late payment interest while under active investigation.

6.11 Where an invoice remains wholly unpaid 90 days after the Due Date, we may treat this as grounds for termination in accordance with clause 12.

7. Absence

7.1 We will keep your room available during temporary absences. The Total Fee remains payable in full for absences of up to 7 days. For absences of more than 7 days, we may where practical deduct any savings we are able to make as a result of your absence (for example, reduced food, heating and lighting costs).

7.2 If we are unable to contact you or your Nominated Representative for a continuous period of 7 days during an absence, and this materially impairs our ability to plan safely for your return or to justify continued retention of the room, we may give written notice to terminate this Contract. Except in urgent circumstances, we will give not less than 14 days' written notice before termination takes effect.

8. Death

8.1 Any fees outstanding at the time of your death will be charged to your estate and/or any other person legally responsible under this Contract.

8.2 We may continue to charge the room rate until the earlier of: (a) the date the room is cleared of your possessions; (b) 7 days from the day after death; or (c) the date the room is re-occupied. We will not charge for the same room twice. Under normal circumstances, we ask that your room be cleared within 3 days.

8.3 Any overpayment or money held on your behalf will be refunded to your estate promptly.

8.4 Any Third Party Contributor liable for a Top Up Contribution will remain liable for any Top Up Contribution owing at the time of your death.

9. Fee Reviews

Provided there are no changes to your needs or the services you require, the Total Fee may be reviewed once in each calendar year with reference to 1 April (the "Review Date"), applying the following formula:

Type of cost	% of Total Fee	How we calculate the increase
Staff costs	80%	Increased by the same percentage as the increase in the standard basic hourly rate for Healthcare Assistants at

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Type of cost	% of Total Fee	How we calculate the increase
		Farway Grange in force on the Review Date compared with the equivalent rate on 1 April in the previous year. In most cases this will rise in proportion to the National Living Wage.
Non-staff costs	20%	Increased by the same percentage as the annual increase in the Retail Price Index (RPI All Items, 12-month rate) published by the Office for National Statistics for the February immediately preceding the Review Date.

We will normally notify you or your Nominated Representative of any revised Total Fee during April, with the revised fee taking effect from 1 May, provided at least 28 days' written notice has been given.

A Resident first becomes eligible for the annual review only if admitted on or before 31 December immediately preceding the Review Date. Residents admitted after that date will join the following annual review cycle.

At the nursing site, this review applies to the Total Fee. The FNC rate is set independently by the NHS; any change in FNC rate or eligibility affects only the Net Resident Liability in accordance with clause 4.

We may also increase the Total Fee by a fair and reasonable amount where a significant and unexpected change in law or regulation results in increased costs not already captured in the annual review. We will give at least 28 days' written notice of any such change.

10. Guarantee

10.1 A Guarantor will only be required where this is clearly justified and explained before admission. We will confirm any requirement in the Admission Schedule and ensure the Guarantor receives a copy of this Contract with sufficient opportunity to take independent advice before signing.

10.2 The Guarantor's liability is limited to the specific payment obligations identified in the Admission Schedule or a separate written guarantee. The Guarantor agrees to be personally liable for undisputed sums due under this Contract to the extent not paid by you or another Third Party Contributor.

10.3 We will notify the Guarantor promptly if overdue undisputed sums arise and provide reasonable details before seeking payment.

10.4 We will use reasonable endeavours to contact the Guarantor if we may need to make a claim, and will try to resolve matters within 28 days before commencing court proceedings.

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11. Reservation Fee

11.1 Where you wish to reserve a specific room pending admission, we may ask you to pay a reservation fee of one week's Total Fee (the "Reservation Fee"). The Reservation Fee is optional.

11.2 The Reservation Fee will be applied in full against your first invoice on admission. It is not a security deposit and is not held against future liabilities.

11.3 If we cannot accommodate you on the agreed date for reasons within our control, the Reservation Fee will be refunded in full within 7 days.

11.4 If you give at least 14 days' written notice of cancellation before the agreed admission date, the Reservation Fee will be refunded in full.

11.5 If you give fewer than 14 days' notice of cancellation, or do not arrive on the agreed date without prior notice, the Reservation Fee may be retained to cover administrative and occupancy costs of holding the room. We will use reasonable endeavours to re-let the room and will refund any amount recovered after deducting our reasonable costs.

12. Termination: Financial Obligations and Grounds

12.1 Financial grounds for termination by us

In addition to the grounds set out in the Consent to Care document, we may terminate this Contract by written notice if:

- Non-payment: Any undisputed amount remains unpaid 90 days after the Due Date. At least 28 days' written notice will be given.
- Funding problems: In our reasonable opinion there are unresolved funding problems — for example where Authority Funding has been less than the Total Fee for a continuous period of at least 3 months and the shortfall is not being covered. At least 28 days' written notice will be given.

12.2 Financial obligations during notice period

During any notice period, the Total Fee remains payable in accordance with this Contract.

If the Resident leaves the Home before the end of the notice period, the Total Fee remains payable only until the earlier of: (a) the expiry of the notice period; and (b) the date on which the room is re-occupied or re-booked for the same period. We will not charge twice for the same room for the same period.

Any prepayment relating to days after the end of the Resident's liability will be refunded promptly.

If the Resident leaves without giving the required written notice, we may charge the Total Fee for the period that would have been covered by the required notice, subject to the same duty not to charge twice for the same room.

Upon termination, all outstanding amounts must be paid. If, after the expiry of a valid notice to leave, you or your Nominated Representative unreasonably fail to arrange vacation of the room and we are required to take formal legal steps to recover possession, we reserve the right to seek recovery of our reasonable legal costs in accordance with applicable law.

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13. Admission Requirements

Before your admission to the Home we require:

- A signed copy of the Consent to Care & Terms of Residence document, including the completed capacity section
- Where applicable, a signed copy of this Financial Terms document
- Payment of the first month's fees (or Top Up Contribution if applicable)
- Payment of the Reservation Fee (if applicable, in accordance with clause 11)
- A completed Direct Debit mandate where ongoing direct private payments are to be made to the Home, unless otherwise agreed in writing

Where applicable, we will also require before admission: any relevant social security forms; a copy of any Enduring or Lasting Power of Attorney; a copy of any Court of Protection appointment; and a completed financial assessment form.

Payment Details

Our preferred payment method is Direct Debit via GoCardless. Where not possible, BACS bank transfer is accepted. Card payments may be accepted at our discretion; no surcharge will be added.

Bank: [Provided on admission]	
Account Name: [Provided on admission]	
Sort Code: [Provided on admission]	
Account Number: [Provided on admission]	
Payment Reference: [Provided on admission]	

Agreement and Signatures

Agreement by Resident or Nominated Representative

I have read and understood the Consent to Care & Terms of Residence document and this Financial Terms document, and I agree to be bound by them. I confirm that all sums lawfully due to Amrial Care Ltd under this Contract will be paid on the due date. Signing as the Resident's Nominated Representative does not of itself make me personally liable for the Resident's fees or other charges unless I separately agree in writing to act as Guarantor or Third Party Contributor.

Full Name:	
Capacity / Relationship:	

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Signature:	
Date:	

Agreement by Farway Grange (Amrial Care Ltd)

Authorised Signatory **Full Name:** **Position:** **Date:**	**Signature:**

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Financial Assessment Form

This Financial Assessment Form helps us better understand your financial situation to ensure appropriate support and long-term care planning. All information provided will remain confidential and used solely for assessing care requirements.

Financial Sustainability Requirement

In signing this agreement you (or your Nominated Representative) confirm that you have sufficient financial resources to meet the full cost of their care for a minimum period of two years from the date of admission. We have taken reasonable steps to verify this and reserve the right to request evidence of financial means where necessary.

Should your financial circumstances change and you become unable to meet the full cost of your care, you (or your Nominated Representative) must notify us as soon as possible. This agreement does not guarantee that local authority funding will be available should personal funds become depleted, and you acknowledge that, in such circumstances, you may need to move to an alternative care setting depending on the funding arrangements and contractual terms agreed with the local authority.

1. Personal Details

Name: _____

Date of Birth: _____

Contact Number: _____

Address: _____

_____

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2. Financial Overview

A. Income

Approximate monthly income (e.g., pensions, benefits, investments): £_____

B. Savings and Investments

Current total liquid savings (e.g., bank accounts, ISAs): £_____

Other investments (e.g., stocks, bonds): £_____

C. Property Ownership

Do you own property? ☐ Yes ☐ No

Estimated property value (if owned): £_____

Is the property currently being rented or mortgaged? ☐ Rented ☐ Mortgaged ☐ Owned outright

D. Other Assets

Do you have any other significant assets (e.g., vehicles, businesses)? ☐ Yes ☐ No

If yes, please provide a brief description: _____

_____

E. Liabilities

Do you have any significant debts or ongoing financial commitments? ☐ Yes ☐ No

If yes, please provide a brief description and estimated amount: _____

_____

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3. Planning for Care

Do you have a financial plan in place for long-term care? ☐ Yes ☐ No

Estimated timeline before personal funds may run out: _____ months/years

4. Declaration

I confirm that the information provided above is accurate to the best of my knowledge.

Signature: _____

Date: _____

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