



The Tithebarn

At RMBI Care Co., we provide care to people who are paying for their own care fees both Masonic and non-Masonic, as well as Freemasons who are funded by their local authority. New residents moving into the Home **that are funded by their local authority** must have an eligible Masonic connection (see [Eligibility Guide](#) for more information.)

The Tithebarn provides care and support for people who, following an assessment, require residential care (low and high dependency) or residential dementia support.

Outline fee structure

Our care fees are subject to a pre-admission needs assessment, which is a requirement of admission, so the Home can fully understand the level of care and support required by each person. For a range of prices, please contact the Home directly, but note these are subject to a full assessment.

The Home offers respite care (short stays) subject to availability, and this will depend on an assessment of a person's care needs. *(Please note all fees are subject to review on the 1st April every year.)*

All rooms are single occupancy; however, some may carry a premium due to their size and/or facilities. *The Home is able to provide shared facilities for couples if required, but this will be subject to meeting the care needs of both individuals and charged as a rate per person.*

The age that people can enter an RMBI Care Co. Home is 55 and above, however, people under this age may apply and our Trustees will consider their application.

Every resident who comes into the Home will have a financial assessment to ascertain his or her individual circumstances and how their care fees will be paid. All applicants will be required to complete the RMBI Care Co. Application form.

If a resident reaches a stage where they are no longer able to pay for their care, RMBI Care Co. will continue to support them, as long as their care needs can still be met and is funded by the local authority.

If a property needs to be taken into account for part of a person's care fees, RMBI Care Co. may offer a deferred payment scheme as an option. Details of the scheme are available on request. Please note: You should check with your local authority in the first instance to confirm whether they offer a Deferred Payment Scheme, as availability and eligibility criteria may vary.

For more advice about care fees, there are a number of useful resources, which provide up to date information, including www.ageuk.org.uk or www.payingforcare.org

The weekly care fees cover the following items:

- care and support identified in the assessment and a regular review of care plans
- accommodation
- all meals, snacks and drinks freshly prepared by the Home's catering team
- tea, coffee and cakes available during the day
- a full and varied activities programme (**certain activities may incur an additional cost*)
- all utilities (*light and heating and other accommodation costs*)
- housekeeping and laundry services undertaken on the premises (*this does not include the cost of articles requiring dry cleaning*)
- WIFI internet access in communal areas
- TV licence (a concessionary licence may be required if under the age of 75.)
- Insurance cover to a maximum of £2,500, which is limited to £1,000 per item. Personal money is covered up to £100. This excludes bankers' cards, credit and debit cards. Residents will need to make their own arrangements if additional cover is required.

Please note that the weekly fee does not include hairdressers, chiropody, private therapies e.g. physio, toiletries, items purchased from internal bar (if applicable) newspapers or magazines. It also excludes over the counter medications and those not prescribed by a GP, taxis for private or external medical appointments, satellite or cable television for personal use, contracts entered into on entering into the Home e.g. private telephone or personal items of clothing.

It is not always possible for a member of staff to accompany residents for private or external medical appointments. Please check with the Home Manager as this may incur an extra cost.

Prior to Admission

An Admission Agreement (AA) must be signed and countersigned by a witness and residents paying for their care fees will be required to complete a Direct Debit mandate. All care fees must be paid monthly in advance by Direct Debit and the Direct Debit collection schedule will be issued upon admission. For all residents supported by the local authority, the resident will need to arrange to pay their assessed contributions by standing order.

If the resident does not have capacity to sign the AA, the Power of Attorney (POA) will be required to sign on the resident's behalf. We will require a copy of the POA otherwise, we will be unable to accept the AA signed by the POA. If there is no POA and the applicant does not have the capacity to sign the AA, there will be a requirement for a Guarantor to sign. Any person acting as a Guarantor takes on all responsibility for payment of care fees, therefore it is important that the Guarantor understands their responsibility and, if in doubt, to seek independent advice.

If you require any further information, please do not hesitate to contact the Home Manager or the Business Relationship Manager.