Social care: ways to use your personal budget

This factsheet is relevant to you if you have had a care needs assessment or carer’s assessment and you qualify for council support.

Your personal budget is the amount of money that the council has calculated is needed to meet your social care needs. Direct payments are one way of receiving this personal budget, so you can arrange your own social care support.
About Independent Age

Whatever happens as we get older, we all want to remain independent and live life on our own terms. That’s why, as well as offering regular friendly contact and a strong campaigning voice, Independent Age can provide you and your family with clear, free and impartial advice on the issues that matter: care and support, money and benefits, health and mobility.

A charity founded over 150 years ago, we’re independent so you can be.

The information in this factsheet applies to England only.

If you’re in Wales, contact Age Cymru (0800 022 3444, ageuk.org.uk/cymru) for information and advice.

In Scotland, contact Age Scotland (0800 12 44 222, ageuk.org.uk/scotland).

In Northern Ireland, contact Age NI (0808 808 7575, age.org.uk/northern-ireland).

In this factsheet, you’ll find reference to our other free publications. You can order them by calling 0800 319 6789, or by visiting www.independentage.org/publications
# Contents

1. **What are personal budgets?**  
   4
2. **How can I receive my personal budget?**  
   7
3. **How are personal budgets worked out?**  
   9
4. **Planning your support**  
   Support planning and brokerage services  
   10
5. **Ways to receive your personal budget**  
   Direct payments  
   12  
   Managed budgets  
   13
   User-controlled trusts  
   14
6. **Understanding direct payments**  
   If your direct payments stop  
   15
   How can your direct payments be paid?  
   16
   What you can’t use direct payments for  
   17
   Direct payments in a care home  
   18
   If you’re considering moving out of a care home  
   18
   Direct payments and hospital stays  
   18
   Reviewing your direct payments  
   19
   If you have problems managing your personal budget as a direct payment  
   19
7. **Direct payments for people who lack mental capacity**  
   20
8. **Employing someone through direct payments**  
   Getting help with employing someone  
   21
   Health and safety responsibilities  
   22
   Getting insured  
   22
   Deciding who to employ  
   23
   Criminal records checks  
   24
   Once your care worker starts  
   25
   Timesheets  
   25
9. **Making a complaint if you’re unhappy about your personal budget or direct payment**  
   26
1. What are personal budgets?

The government wants all social care support to be ‘personalised’. Personalisation is about making sure that social care services work for each person. It means that you should have as much choice and control as possible over the care and support you need to live your daily life and stay independent. It’s about looking at the whole of your life – your needs, preferences and wishes – and tailoring your care and support.

This is why personal budgets were introduced – so people could have more say in the way their care and support is provided.

Your personal budget is the amount of money that the council has worked out it would cost them to meet your assessed needs. Rather than just having care and support arranged for you by the council, you can be involved in deciding how it is to be spent or could have the money and spend it yourself.

If you need care and support, the first step to having a personal budget is a care needs assessment. This is when a social care professional from the council looks at your needs to see if they qualify for support. For more information, read our factsheet First steps in getting help with your care needs.

If you are a carer and the council has assessed you as eligible for support, or is choosing to meet your needs, you must also have a personal budget. For more information about carer’s assessment, read our factsheet Getting help from the council as a carer.

If your needs do qualify for council support, the next step is to start planning your care and support. This involves working out your personal budget and any financial contribution you may need to make.

If the council is arranging or paying for some of your care or support, you must be informed of your personal budget.
You will usually only get financial help from the council if you have capital, such as savings, investments or property, below £23,250. Some councils may have a higher capital limit when you are getting care at home or choose not to charge carers. They will also look at your income, including your pension and benefits. If it’s above a certain amount, you’ll have to pay towards your care costs.

Depending on your finances, your personal budget could be:

- made up totally from money provided by the council
- a combination of some money from the council, and some of your own money

**If you end up paying for all your support yourself**

If your income and capital are higher than the council’s upper limit and you are receiving care at home, the council must arrange your support if you ask them to. However, you may need to pay for it all yourself and the council may charge an arrangement fee. This means you will have a personal budget.

People who lack mental capacity who have eligible needs must also be allocated a personal budget. This is the case even if their capital is above the upper limit and there is no one suitable to help arrange their care. See chapter 7 for more information about people who lack mental capacity.

**If you’re already getting support from the council**

If you already receive care or support from your council, you must be told what your personal budget is. If this doesn’t happen, ask what your personal budget is.

You may then be given the option to receive this budget as a direct payment (see chapter 5) so you can arrange your own support instead of the council arranging services for you.
If the next review of your care and support plan or carer’s support plan isn’t for some time and you’re keen to receive your support in a different way, you can ask for an earlier review and discuss personal budgets during this.
2. How can I receive my personal budget?

If the council is contributing towards your care or support costs, there are several ways that you can use your personal budget.

- Direct (cash) payments – allowing you to buy your own care and support services.

- An account managed by the council – with support being provided in line with your wishes. This is the most common arrangement for older people.

- An Individual Service Fund (ISF) – the council pays an organisation that provides support services in line with your wishes. This option doesn’t apply to carers.

You could also choose a mixture of these options. For instance, you could take some of your personal budget as direct payments and leave the rest with the council to arrange some services for you.

See chapter 6 of this factsheet for more details about these options.

The council must help you decide which option, or mixture of options, to use.

What you can expect from the council

The council:

- must be clear about how they have calculated your personal budget

- must make sure that the budget is enough to meet your particular needs. Care or support may cost more if your
needs are complex. It should take into account the costs of care or support where you live

- should let you know what your budget is in good time. It should give you an estimate at the start of the planning process so that you can jointly start planning your care and support knowing how much money is likely to be available.

**Personal health budgets**

A personal health budget is an amount of money to support someone’s health and wellbeing needs. It is different to a personal budget for social care, as it’s provided by your local NHS Clinical Commissioning Group (CCG). It can be provided as direct payments and may be used for a range of things to meet someone’s needs. They should be available for people who are eligible for NHS Continuing Healthcare.

It may be possible to merge a personal health budget and a personal budget for social care if you take both as direct payments.

For further information, see our factsheet *Continuing Healthcare: should the NHS be paying for your care?*. 
3. How are personal budgets worked out?

The way your personal budget is calculated varies from council to council, but the council must explain to you how your personal budget is worked out.

First, they should give you an estimate, called your indicative personal budget. This will give you an idea of how much money is likely to be available.

The council must then make sure that this amount is enough to meet all of the needs as set out in your care and support plan or support plan for carers. They should consider which options are best for you and offer value for money, rather than just picking the cheapest option.

They should check it against the actual costs of providing the particular support you need – they shouldn’t just use general amounts. This may mean your indicative personal budget is then increased or decreased.

If you disagree with the personal budget amount

If you feel your personal budget isn’t enough to meet your needs or that your contribution is unreasonable, you can ask the council to review it (see chapter 10 for more details). The council can’t withdraw services if you refuse to pay the charges, but they can pursue this debt if it’s established that the charges have been calculated correctly.

If your circumstances change

If your needs change at a later date (or the personal budget becomes too low for some other reason), you can ask the council to review the amount.
4. Planning your support

Once you’ve been told you qualify for support, the council must put together a care and support plan, or support plan for carers, to show how your needs will be met using your personal budget. The council must involve you in this, take your wishes and preferences into account and take all reasonable steps to agree the plan with you.

The plan must set out:

- your care needs or support needs as a carer
- what you want to achieve in your day-to-day life, such as being able to go out more
- your personal budget amount, including your assessed contribution towards the cost of your care if applicable
- how your support will be organised, such as the type of services you will get and who will arrange them
- the support that others (such as friends and family members) are willing and able to provide.
- arrangements for a direct payment if you get one.

It may also say:

- how any risks to your safety will be managed
- who to contact if you have a problem or your needs change
- what to do in an emergency – such as if care arrangements go wrong.

Your care and support plan, or support plan for carers, should be reviewed initially within six to eight weeks and then at least once a year.
Good to know

If you feel you’re not being listened to, you may want to discuss this with an independent advocate. The council must appoint an independent advocate to support you if you have substantial difficulty in being involved in the assessment or care planning process and there isn’t anyone suitable (like a friend or family member) who you’d like to support you. For further information, see our factsheet Independent advocacy.

Support planning and brokerage services

Some voluntary organisations offer a support planning service (also called a brokerage service) to help you plan your support and manage your personal budget. This is particularly useful if you decide to take your budget as direct payments – see chapter 6. They can help you to decide on and arrange suitable support to meet your needs.

Brokerage services can be used alongside any free support and advice that you’re entitled to from your council. The council should refer you to local support and brokerage services.

If the brokerage service isn’t free, you may need to pay for it.

If you need help to find local support planning services, you can try contacting:

- Age UK (0800 169 6565, ageuk.org.uk) - for contact details of your nearest local Age UK

- Disability Rights UK has a personal budgets helpline open on Tuesday and Thursday from 9.30am to 1.30pm (0300 555 1525, disabilityrightsuk.org). They can advise on some of the more practical aspects of employing a personal assistant.
5. Ways to receive your personal budget

There are different ways you can receive your personal budget. You could choose one or more of these options.

**Direct payments**

Direct payments are one way of using your personal budget. Before agreeing to use them, your council must be sure they’re a good option for you and that you can manage them.

You receive a cash payment from your council into your bank account (or sometimes onto a pre-paid card if this would suit you). You then use this payment to arrange the care and support you need, as agreed in your care plan.

This is useful if you want to have flexibility about when you receive services or want to choose a care worker, as you can employ someone directly rather than social services providing the service for you.

For example, you could use your direct payment to:

- employ someone to provide care at home at a time that suits you
- employ someone to help you attend activities outside your home such as going shopping or to a lunch club
- take part in social and educational activities in your community, such as exercise sessions or a book club

You can only use the money to meet those needs that the council has agreed to meet, as set out in your care and support plan or support plan for carers. As long as you are meeting those needs, you have the flexibility to buy the services or equipment that best suit you. So if you’ve been assessed as needing help to avoid becoming isolated, you could use your
personal budget to pay someone to help you attend social events with friends instead of going to the local day centre. Direct payments can’t currently be used to pay for residential care.

However, whether you have direct payments is a choice for you to make. The council can’t insist on you having them. If you don’t want direct payments but do want your care, or support as a carer, provided in a particular way, tell your social worker while planning your care.

The amount you receive in a direct payment can alter as your needs change. A direct payment won’t affect any benefits you receive and isn’t taxable.

See chapter 6 for more details about direct payments.

**Managed budgets**

If you want to arrange your care but don’t want to have the responsibility of managing your personal budget yourself, you can have a managed budget. There are various options for this, including:

- your council can manage your budget for you, taking into account your preferences. This is sometimes known as a ‘virtual budget’ and is the most common option for older people
- your care provider can hold your budget. This is also sometimes known as an Individual Service Fund (ISF, available for adults with care needs)
- you could ask for an account to be set up for a carer, family member or friend. This is called a user-controlled trust (see below)
- a mixture of all of the above mentioned options, which best suits you and your particular needs.
**User-controlled trusts**

Having a user-controlled trust (also known as an independent living trust) means that although the money belongs to you, it’s managed by trustees. There must be a minimum of two trustees, but it's better to have at least three.

The trustees could be:

- friends or family
- a solicitor or an accountant (they may charge)
- an independent advocate
- another appropriate person.

The trustees have legal authority, but you should be in charge of decisions about how your care needs are met and how the money is spent.

The trustees can manage the practical side of things, such as:

- employing care staff
- operating bank accounts and managing money on your behalf
- making sure arrangements are in place should something go wrong with your care.

The trustees should make sure that your needs are met in the way that you want.

It is advisable to get help from a solicitor to set up a trust, which may be expensive.

Contact your local independent living centre to get help or advice. Ask your local council about local organisations. The personal budgets helpline run by Disability Rights UK may also be able to help you (0300 555 1525, disabilityrightsuk.org). The helpline is open on Tuesday and Thursday from 9.30am to 1.30pm.
6. Understanding direct payments

As long as the council thinks direct payments are an appropriate way to meet your needs, you’re entitled to have them if you can manage them yourself or with help. It’s your choice whether to have direct payments or not. It’s a good idea to weigh up the pros and cons: for example, you may have more control, but will also take on extra responsibilities.

Direct payments must be offered to carers in the same way as the people they care for.

Your care and support plan, or support plan for carers, must say which of your needs are to be met through direct payments, how much each payment will be and how often it will be made.

Before your direct payment start, it’s a good idea to discuss and agree the following things with your council:

- what outcomes or goals the direct payments will help you to achieve
- what direct payments can and can’t be used for
- which services you intend to spend your direct payments on
- whether you need help to manage your direct payments
- what arrangements are in place to cover emergencies
- when the payments will start
- how much of your own money you have been assessed as having to contribute towards the cost of your care
- what information you need to give the council about how your money is spent, and how the council will monitor your spending
- any conditions attached to the direct payments
• the date when your arrangements will next be reviewed

• any circumstances under which the council might stop your
direct payments, and the notice period the council will give if
it decides to discontinue the direct payments

• how any outstanding payments will be handled if the direct
payments are discontinued, and the circumstances under
which the council might ask you to repay the money.

It is important that both you and the council are clear about
any arrangements that are agreed. These decisions should be
recorded in your care and support plans, or support plans if
you are a carer.

If your direct payments stop

If your direct payments stop, but the council agrees that you
still need support, they should review your care and support
plan or support plan. They must also ensure that there is no
gap in your care and support.

Sometimes the council may stop your direct payments
temporarily, perhaps because you need more support to
manage them. Or it may be that your condition fluctuates and
you don’t need care and support when it improves.

How can your direct payments be paid?

There are two ways for councils to pay direct payments to you.

1. The council may pay the full personal budget amount
(gross) to you in direct payments, and then invoice you
for the amount they assess you as having to contribute;
or

2. the council can pay the net personal budget amount to
you in direct payments after it has deducted the amount
that they assess as your contribution
The council may have a usual practice but should be flexible depending on your preference and circumstances.

**Good to know**

Your direct payments can be paid to someone you nominate to manage them on your behalf, if you wish.

**Spending your direct payments**

If you receive direct payments, you are accountable to the council for the way you spend the money.

The council may require you to have a separate bank account for the payments and keep careful records of how you spend them. If you spend the money on items or services that it wasn’t intended for, the council can request that some or all of the money is paid back to them. They may also stop your direct payments altogether.

If you’re being refused direct payments for a service that you believe is suitable to meet your needs, you may wish to challenge that decision (see chapter 10).

**What you can’t use direct payments for**

You can’t normally use direct payments to employ close family members to provide care. Close family includes:

- a spouse, partner or civil partner
- a close relative living with you, such as a son or daughter, brother or sister
- a spouse or partner of that close relative.

However, if the local council finds that only one of these people can meet your care and support needs, they can make an
exception. For example, it may be that you have severe dementia and you will only accept care from your spouse. Or it may be that your first language isn’t English and you could only make your wishes known if you were cared for by someone who spoke your language, such as a close relative.

**Direct payments in a care home**

At the moment, direct payments can’t be used to pay for permanent care in a care home. However, the government may introduce this in future.

You can use direct payments to pay for a short stay in a care home. This is limited to four consecutive weeks in a year. If you stay in a care home for less than four weeks at a time, the amounts are added together unless the gap in between is more than four weeks.

You can also use the payments for other types of care and support in your care plan such as day centre visits,

**If you’re considering moving out of a care home**

If you’re already living in a care home, you may be able to use direct payments for a trial period of independent living before you move out permanently.

**Direct payments and hospital stays**

If you have to go into hospital, your direct payments should usually continue. This is so you can still get social care help in hospital if you need it, and to avoid losing your personal assistant if you employ them directly (see chapter 9).
**Reviewing your direct payments**

Your direct payments should be reviewed within six months of your first payment to see if you’re comfortable with them and that things are working smoothly. Ideally, this should be part of your care plan review after six to eight weeks. After this, you should have a full review every year.

**If you have problems managing your personal budget as a direct payment**

If you have problems with managing your personal budget as a direct payment, you may decide not to use direct payments any more or the council may decide you cannot manage the direct payment even with help. If so, they will stop your direct payments. In either case, they must then make sure you have the care you need. The council should also review your care and support plan, or support plan if you are a carer.
7. Direct payments for people who lack mental capacity

Direct payments are available to people who lack mental capacity to make decisions about their care if an authorised person asks on their behalf.

An authorised person can be:

- someone who has a lasting power of attorney for health and welfare for that person
- someone who has been appointed by the Court of Protection as a deputy for health and welfare under the Mental Capacity Act 2005
- someone who is approved by the attorney or deputy
- someone the council agrees is suitable if there is no attorney or deputy.

The council is responsible for making sure that the authorised person is suitable for the role: that they will act in the person’s best interests and can manage the direct payment, with or without help. They must consult with all relevant family members, carers, close friends and people involved in the person’s care. They must also take into account the person’s wishes, feelings and views as far as possible.

If someone without mental capacity has direct payments, the council must still, as far as possible, involve them in their care and support planning. For example, they must communicate in ways that the person understands, or take into account what the person had previously said their wishes were.

Our factsheet Managing my affairs if I become ill has more information on supporting people who lack mental capacity.
8. Employing someone through direct payments

If you decide to employ someone directly with your direct payments, there are some legal responsibilities you will have to consider as an employer. These include:

- providing your care workers with a contract and terms of employment
- observing the National Living Wage if an employee is 25 or over or the National Minimum Wage if they are under 25.
- deducting income tax and National Insurance contributions
- managing holiday and sick pay
- following health and safety legislation.
- potentially enrolling your care worker in a pension scheme.
- When working out the amount of your direct payment the council should include all the costs of becoming an employer.

You can find out more about filing accounts and paying taxes by calling the HMRC New Employer Helpline (0300 200 3211) or visiting gov.uk/employing-staff. For more information about pensions, contact the Pension Regulator helpline (0345 600 1011, gov.uk/workplace-pensions-employers)

Getting help with employing someone

A local disability organisation or centre for independent living may be able to help you to find a suitable carer. They may also tell you about direct payments support services – such as payroll services that can administer the wages, tax and National Insurance for your care worker(s) to make direct payments easier for you to manage. Contact Scope (0808 800 3333, scope.org.uk) for details of local organisations.
Health and safety responsibilities

If you are receiving care at home, you need to be aware of relevant health and safety requirements: for example, storing things safely and appropriate training on, for instance, manual handling or emergency procedures. Your care workers also have a responsibility to work in a way that avoids risk to them and to you. They should raise any safety concerns with you using common sense will avoid most dangers and causes of accidents. Talk to your care workers about what tasks you need doing and the safest way of carrying them out.

You should also get advice from the council's social services department. Your care needs assessment may have identified possible risks and suggest ways of managing them, such as storing cleaning materials in a safe place.

Good to know

You can get advice on becoming an employer from Acas (0300 123 1100, acas.org.uk), including advice on payroll, recruitment, and health and safety.

If you use your direct payments to employ a care worker through a home care agency, the agency must make sure their care workers have relevant, up-to-date training and that you have any necessary equipment. Read our factsheet Getting care services at home to find out more.

Getting insured

To cover you and your care workers against accidents, you must take out employers’ liability insurance and public liability insurance.

- Employers’ liability insurance will cover you if your care worker is injured or becomes ill as a result of an accident in your home.
• Public liability insurance covers you for any damage or injury you or your carer cause to anyone else while your carer is working for you.

Check any insurance policies you take out to make sure they give you enough cover for your circumstances.

**Good to know**

As insurance is compulsory for employers, the cost should be included in the direct payments given to you by your council. Similar cover may also be available through your household insurance policy. Get advice from your insurance company or local support service.

**Deciding who to employ**

When thinking about employing someone yourself, it may be useful to consider:

• what kind of person you want to employ

• how many people you will need (including back-up for holidays and sick leave)

• what tasks you want them to do

• what skills and qualities the person will need. For example, if you want to be driven to places, they will need a driving license and a vehicle with the correct car insurance

• what hours you need them to work

• the rate of pay. Rates are often higher in the evenings and weekends so you have to make sure that you have enough money in your personal budget to cover this. All wages must meet either the National Minimum Wage or the National Living Wage (see page 22). The rates change every year. You can check them at [gov.uk/national-minimum-wage-rates](http://gov.uk/national-minimum-wage-rates)
• how you will recruit staff. This could be by word-of-mouth, through friends or relatives, or by placing an advert in your local post office, newspaper or Jobcentre Plus.

At interview, be sure to ask all questions that may be important to you – such as does the person smoke? What are their dietary preferences? For instance, if they’re vegetarian, are they willing to prepare meat? You should also check whether they provide their own special clothing, if needed (such as overalls and rubber gloves), or if you will have to provide these. It’s a good idea to have someone with you when interviewing candidates for safety reasons and to get a second opinion.

Once you’ve found a possible candidate, it’s advisable to ask for two references from previous employments.

You must also ask for identification documents, such as a passport or visa, and keep a copy, to prove that they have the right to work in the UK.

If you prefer not to have the responsibility of being an employer, you could employ a care worker through an agency, or find someone who is self-employed. Contact the UK Homecare Association if you need help finding a suitable agency (020 8661 8188, ukhca.co.uk). You can see details of how the Care Quality Commission has rated a home care agency on their website (cqc.org.uk, 03000 61 61 61).

You could also read our factsheet Getting care services at home.

Criminal records checks

It isn’t essential for people employed directly by personal budget holders to have a Disclosure and Barring Service (DBS) check, but it is advisable.
If you do want to have your carers DBS-checked, or you have been advised to do so by social services, any costs for this should be included within your personal budget amount.

**Once your care worker starts**

When your new care worker starts, you could get a friend, or someone you trust, to spend some time with you both. If you’re unhappy with the person caring for you, as a responsible employer you may need to give them feedback about what isn’t working and give them a chance to improve before you look elsewhere. You may wish to get advice from a local support service or independent living centre. Contact Scope (0808 800 3333, scope.org.uk) for details of local organisations.

**Good to know**

As a care worker employed directly by you doesn’t have to be registered with and monitored by the Care Quality Commission, it’s even more important that the council makes sure the arrangement is working for you. You can call them for advice and support any time if you have a problem.

**Timesheets**

Independent living centres or local support services may offer administrative services to help you manage timesheets and general record keeping for your care worker.

When you receive care from a care worker, it’s important to check and sign the timesheet to record the help you have been provided with. This is to make sure that you are only charged for the care you have actually received.
9. Making a complaint if you’re unhappy about your personal budget or direct payment

You may disagree with a decision made by the council about your personal budget, direct payment or any other part of the service. Often problems can be sorted by talking to the social worker or their manager. But if this doesn’t work what can you do?

There are two main ways of trying to resolve disagreements:

- making a complaint
- using a solicitor to pursue a legal case

**Remember**

There is a time limit for using each of these procedures. It is important not to miss it because you’re trying to sort things out direct with the social worker.

A complaint must be made within 12 months, but it’s usually better to start the complaint as soon as possible.

If you decide to pursue a legal case, the time limit is much shorter. If it becomes necessary to start court proceedings, the relevant type is likely to be judicial review. Proceedings must be started within three months of the date when there were first grounds for a legal challenge. Judicial review is only used in a small proportion of cases.

It is sometimes (but not always) possible to pursue a late complaint or a late legal challenge.
More information, including about how the time limits work, can be found in our factsheet Complaints about care and health services.

To do

If you need support to make a complaint or communicate your views to staff, you may be entitled to help from an independent advocate – see chapter 10.

If you want specialist legal advice, you will need to find a solicitor who specialises in community care law. If you decide to get legal advice, you may want to contact Civil Legal Advice (0345 345 4345, gov.uk/civil-legal-advice) to find out whether you would qualify for legal aid.

Whether or not you might qualify for legal aid, the Civil Legal Advice service can give you details of organisations or solicitors specialising in community care law. You could also visit find-legal-advice.justice.gov.uk to find a solicitor.

If you use direct payments to make your own arrangements with a care provider such as a home care agency and you are unhappy with their service, you may decide to move to a new provider. You may even decide you don’t want direct payments anymore and the council will then become directly responsible for making arrangements for your care. This should trigger a care plan review. This gives you a chance to explain what went wrong and why you don’t want that care provider to be used again.

Whether or not you move to a new provider, you can make a formal complaint. If you’re still unhappy with the council’s response, you can contact the Local Government and Social Care Ombudsman and ask that your complaint is investigated further (0300 061 0614, lgo.org.uk). They will look at how the council acted and whether they were at fault. You can also make a complaint to the Care Quality Commission (03000 61 61 61, cqc.org.uk) which regulates all home care agencies in
England. They don’t investigate individual complaints but can check that the agency is dealing with your complaint and learning from it. In more serious cases, they may carry out or bring forward an inspection.

If your complaint is about abuse or neglect, contact your local authority’s adult social services department or their safeguarding team. For confidential help and advice on reporting abuse, contact Action on Elder Abuse (0808 808 8141, elderabuse.org.uk).
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The sources used to create this publication are available on request. Contact us using the details below.

Thank you

Independent Age would like to thank those who shared their experiences as this information was being developed, and those who reviewed the information for us

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