

Suffolk Choice of Accommodation Policy for Care Home Settings

2025





Adult Social Care Directorate Policy

Suffolk Choice of Accommodation Policy for Care Home Settings

Date: 31st August 2025

Effective Date: 1 September 2025

Summary: This policy advises of the process and underpinning ways of working that supports how Suffolk County Council purchases placements for individuals who are assessed as having eligible needs. This policy currently applies to long-term placements.

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Review Date: 31 August 2026

Version Control: v1

Amendment:

Date:

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1. Purpose

The purpose of the Choice of Accommodation (CoA) policy for Care Homes is to ensure that all individuals who have been assessed by Suffolk County Council (SCC) as having care and support needs that cannot be met in their own home environment or other alternatives (such as Extra Care Housing, Supported Living or Live-in care) are offered an appropriate care home placement. This policy aims to ensure that all placements offered meet people's individual needs and are of best value to Suffolk County Council. It supports the principle of the right service at the right time.

This policy enables the Adult Social Care directorate to work with Care Home providers who we can build positive and consistent relationships with. The policy also ensures a standardised, fair, supportive and transparent offer to the person, their representatives and the market.

2. Scope

This policy applies when Suffolk County Council intends to meet an older adult's eligible care needs through long-term care in a care home. It can also be applied when younger adults (under 65) require accommodation in any permanent care home setting, including where needs can be met in older adults' settings, and arrangements are being made by the Council. This may include people who are experiencing frailty, conditions such as early onset dementia, or people who have a specific requirement for nursing care.

The person may:

- Be moving into long-term care for the first time from community or hospital
- Be moving from one care home to another
- Be eligible for County Council financial support because they were previously self-funding and have/will soon have reached the threshold to receive local authority funding support
- Have been funded previously by another organisation, such as an NHS body under Continuing Health Care or Discharge to Assess funding and have now become the funding responsibility of the County Council
- Be moving to a long-term placement but funding may be on an interim basis, or the funding source may change over time. However, the placement remains the long-term place of residence for the individual.

When the County Council is arranging this type of care and certain conditions are met, the Care Act 2014 gives people the right to choose their preferred care provider or location. [Read the Care and Support and After-care \(Choice of Accommodation\) Regulations 2014.](#)

This policy sets out the conditions which apply to the choice of long-term care home accommodation arranged by the County Council. The County Council Adults Social Care community and hospital teams, the County Council Care staff, Brokerage and Billing, Contracts and Commissioning Teams must all follow this policy.

This policy will be subject to regular review, alongside any review required following planned governmental or legislative changes.

3. Legal context and references

This policy is based on appropriate legislation and government guidance, including

- The Care Act 2014, associated regulations and statutory guidance
- The Mental Capacity Act 2005
- Equality Act 2010
- Human Rights Act 1998

The County Council has written this policy to be read and understood alongside

- Paying for Care Policy
- Capital Depletion Policy
- Paying for care in a care home



4. Stakeholder Engagement

Engagement has been carried out with different stakeholders with the ASC services through three web based drop-in session to gather insights and feedback from different colleagues. There have been engagement sessions with the care market through three provider events in Waveney, Ipswich and East and West Suffolk. CHC colleagues from the ICBs have been part of the project group. Healthwatch will be providing independent support through engagement with people who currently use care home services, people who are likely to use these services as well as their families, friends and advocates

5. Introduction, Background and Exceptions

The County Council has a duty under the Care Act (2014) to meet the eligible care needs of its residents; therefore, a range of services are required to be purchased including residential and nursing care. Suffolk County Council's Adult Social Care market strategy continues to support individuals to be as independent as possible in their own home, however there will be situations in which a long-term placement in a care home is the most appropriate service to meet eligible need. As a public body, the County Council is required to manage its finances appropriately and proportionately to ensure that it offers best value for money services whilst also meeting the needs of its residents.

This policy ensures a standardised and transparent offer which enables the County Council to secure consistent and reliable services for individuals with assessed eligible care and support needs. The policy also ensures consistent costs for both the provider and the County Council to enable safe and appropriate provision of services, whilst supporting a sustainable market.

The County Council is obligated to ensure that any care home placement is identified as the right service for the individual's assessed needs. Individuals within care home placements should be supported to live meaningful lives, through person-centred services which ensure positive outcomes.



6. Implementation plan

Implementation of this policy across all areas of Adult Social Care will commence in September 2025. Monitoring of adherence to, and governance of this policy will be in place post implementation date through contract management and key performance indicators (KPIs) put in place for providers and KPIs set for internal teams to achieve. These will be shared and monitored through regular review points including relevant boards and a continuous improvement programme model.

A robust internal communication strategy and plan is in progress through face-to-face meetings with internal partners, shared written communications, utilisation of the ASC News, Transformation Tuesday updates, Team Briefings, Managers briefings, Senior Managers Team (SMT) Meetings, Quality, Engagement & Practice Board (QEP) and the Directorate's online internal practitioner guidance - Social Care Practice Manual. Additionally, a communications strategy people who use care homes services will be implemented.

7. Supporting long-term eligible care needs

The County Council's aim is to help people to maintain their independence, living in their own home without the intervention of paid-for care and support, for as long as possible.

However, the overriding priority always is for the County Council to fulfil its statutory duty under the Care Act 2014 to ensure that assessed eligible needs, including S117 after-care needs, are met. It is recognised that for some people, a long-term placement in a care home will be the most appropriate way of meeting their eligible care needs.

When a local authority is arranging a long-term care placement, an individual has the right to choose their preferred care home, subject to certain conditions. For the County Council to make these arrangements with the person's preferred care provider, the preferred accommodation must be:

- a. The same type of accommodation as agreed in their support plan
- b. Suitable to meet their assessed eligible needs
- c. Available at a cost that does not exceed the person's agreed assessed need unless the County Council has agreed to a top-up *
- d. Offered by a care provider who agrees to the County Council's terms and conditions for provision of care and support

8. Assessed Need/Personal Budgets

Engagement has been carried out with different stakeholders with the ASC services. This policy supports the County Council in making Care Home placements based on an individual's assessed eligible needs, ensuring that care is provided in the most cost-effective way using agreed rates. The Council is committed to meeting these needs while also achieving the desired outcomes for the individual. To do so, it will offer the most cost-effective option that fully meets assessed needs, balancing quality of care with responsible use of public funds.

9. Top-ups

The County Council has a duty under the Care Act (2014) to meet the eligible care if an individual wants to choose a home that is more expensive than the care homes the County Council has offered, and it has been determined that the care homes that the County Council has offered are reasonable for the person to move to, and suitable to meet their needs, they can still move there. However, someone must agree to pay the difference between what the County Council will pay and the preferred care home fee. This is known as a 'third party top-up payment'.

There are government rules about who can pay a top-up and normally it cannot be paid for from the assets of the resident. The only exceptions to this are listed in the 'first person top up' section below. A third-party top-up payment is usually made by a friend or relative of the person who receives the care. The person or people making the top-up payment is often called the 'third party'. Some people are able to get a Charity to be the third party. The 'third party' does not have to just be one person or organisation. Several people could pay a share of the third party top up payment. The third party (ies) must not use the assets of the person receiving the care to fund the top up payments. More information about top-ups can be found on our [guide to paying for adult social care services](#).

First party 'top ups' can be made from the funds/assets of the individual whose needs are to be met by the accommodation only in the following circumstances:

- During a 12-week property disregard period or
- Where they have a deferred payment agreement in place with the Council. In these cases, the terms of the agreement will reflect this arrangement,
- Where their accommodation is funded under s117 for mental health aftercare

For all third party top up payments, the third party should be entering into a separate contract with the care home for the top up amount, SCC will not be contracting with the care home for the top up element, only the LA rate.

The third party paying the top up must also sign an agreement with the Council to confirm that they are able to afford and sustain the payments, and understand the consequences to the cared for adult of ceasing to make the payments as set out in section 5 of The Care and Support and After-care (Choice of Accommodation) Regulations 2014.

<https://www.legislation.gov.uk/uksi/2014/2670/regulation/5/made>

The care home should not ask for any top ups to be made that are outside of the agreement with Suffolk County Council.

There is no legal requirement for family members, friends or anybody else to agree to pay a third-party top-up payment and the County Council will always offer a care home place that does not require a top-up to be paid. The decision to make a top-up payment is voluntary and is only required if the choice of care home is more expensive than the care home the County Council has offered. Anyone considering paying a top-up payment will need to be sure they are able to afford it on a long-term basis, as an individual may need to move to a less expensive room or alternative care home if the person paying the top-up is no longer able to pay it. Budgeting tools can help people to decide whether they can afford to pay a top-up payment for someone else. For example, there is a budgeting tool on the [Citizens Advice website](#) (search 'work out your budget').

Top up payments are paid directly to the care home. They are different to the contribution that the person will be assessed to pay towards the cost of their care which is also paid directly to the care home. Both payments must be made.

Please note that if the individual requests accommodation in another local authority area, for example to be closer to their family, the Care Act 2014 requires that the local authority considers the cost of care in that area, and the funding may need to be adjusted to take account of the market conditions in that area. If the care arrangements for a care home in another Local Authority area are made without the involvement of Suffolk County Council, then it is likely to be the new Local Authority who will be responsible for funding the placement.



10. Self-funders

The Care Act enables an individual who can afford to pay for their own care and support in full to ask local authorities to arrange care on their behalf when they are still living at home. Where an individual requires care in a care home to meet their needs, the Council will only agree to arrange the care in certain circumstances. For example, where the Council have agreed to accrue the care fees because the person lacks the mental capacity to make decisions about their finances and an application for Court of Protection deputyship is being made.

In supporting self-funders, the Council may choose to enter into a contract with a preferred provider or may broker a contract on behalf of the individual. Where the Council is arranging and managing the contract with the provider the Council will ensure that there are clear arrangements in place as to how the costs will be met, including any 'top-up' element. The Council will assure itself that robust contractual arrangements are in place which clearly sets out responsibility for costs and ensure that the individual understands the arrangement. Self-funders will have to pay the costs of their care and support including, (in cases where they choose a setting that is more expensive than the amount identified in their individual budget), the top-up element of the cost for that setting.

11. How Suffolk County Council will source long-term care to meet eligible needs

If it has been identified in an individual's needs assessment that they will be best supported in a long-term care home placement, their allocated worker will refer to the Brokerage Team to find out the availability of suitable care home placements. The Council will always offer options that meet the individual's needs, and which are personalised to the individual's reasonable requirements, using the pen picture supplied. (A pen picture is the information supplied by the social care practitioner to the Brokerage Team in relation to the individual for whom care is being sourced.)

To make best use of care beds available, the Council, will offer the person options in the order as laid out below, rather than all options at the same time.

Please note that options for younger adults seeking older adult care settings may be limited due to the provider's Care Quality Commission (CQC) registration.



First offer: Block bed contracts, this includes Care UK beds.

In the first instance, the Brokerage Team will confirm if there is a suitable block bed available to meet the individual's needs. This judgement needs to be made by the care provider, not by the Brokerage Team, initially based on the information given by the practitioner in the pen picture. In some instances, the provider will not be able to offer a suitable placement, either because of the type of needs an individual has or because no beds are available in a suitable location. If there is availability in one or more of the care homes, the Brokerage team will offer that placement most suitable to meet the individual care needs and individual's preferences. This option will form the first offer to the individual. If this offer is accepted, the Council will arrange for the individual to move into the care home.

Second offer: Homes accredited with Suffolk County Council

If no option can be offered via the block bed contracts the Council will work with the individual or their family/representative to source a minimum of two cost-effective care homes. These homes will be able to meet the individual's assessed needs and will be accredited by the Council and accept the Council's published rate/s and terms and conditions for provision of care and support. This is known as our second offer to the individual.

Alternative choices

If the individual does not wish to accept either a first or second offer care home placement by the Council, they can request care in an alternative care home. If the placement in the individual's preferred alternative care home meets the conditions set out above in Section 2, the Council can arrange for the individual to move into this accommodation.

If a top-up is required to supplement the individual's preferred choice, because the care home exceeds the local authority rate, this will also be arranged via the Council.

If a top-up is required, then the amount of the top-up will be the differential between the local authority rate and the cost of the chosen placement.

Please note that if the individual requests accommodation in another local authority area, for example to be closer to their family, the Care Act 2014 requires that the local authority considers the cost of care in that area, and the funding may need to be adjusted to take account of the market conditions in that area.

12. What constitutes a reasonable choice of accommodation offer?

If an individual does not wish to take up any of the offers made to them by the Council, if they have not put forward an alternative themselves that meets their assessed need and there is nobody willing to pay a top-up to assist with accessing a more expensive placement, the Council will inform the relevant Heads of Service or Operational and Partnership Manager who will need to assess whether they believe a reasonable choice of accommodation has been offered.

'Reasonableness' needs to be determined by the facts relating to each individual, however, to assist the Head of Service/Operations and Partnerships Managers as decision makers in determining whether a reasonable accommodation choice has been offered, the factors that should be considered include those set out below:

- **First offer (where available) and second offer choice of appropriate accommodation will have been given so the individual can meet their assessed eligible social care needs within the agreed local authority rate, and without a top-up payment. This will have been confirmed by the social care practitioner who would have made the Choice of Accommodation referral to the placement and brokerage team.**
- **Offers made should take account of eligible needs that have been identified such as specific ethnic or cultural requirements or preferences, or needs connected to prevent a deterioration in the individual's wellbeing. An individual's human rights should always be considered, for example the right to a family life.**
- **Individuals and their representatives can identify a preference for a general geographical area for long-term placements. This will need to be within 20 miles radius, some specific postcode or areas may be too small to be considered due to the market availability of provision, the Council reserves the right to source a reasonable placement which might be further, up to 25 miles, which is suited to an individual's needs. This does not necessarily mean that it will be the closest geographical location to a relative's own home address or the individual's original home address. Where the individual is placed out of county the ordinary residence of the individual remains with Suffolk who will also remain responsible for any DoLS assessments/ authorisation.**
- **An offered placement should be in a location that those who visit regularly are able to access – by a mode of transport that is practical and affordable. This may mean that visiting can be facilitated by public transport, that the placement is on a transport route that can be accessed by relatives/visitors, voluntary sector transport access could be considered and use of a relative's own finances to pay for taxis or access to family support for visiting must all be considered.**
- **A 'standard' circumference of search is not cited in this policy as an individual may wish to move to a placement in a different part of the county to where their usual place of residence is; or family members or important contacts may have moved to or be in a different part of the County.**

- **A particular care home, just because it is the home of preference for the individual or a family member, may not be a home that the County will agree to fund if it is either unable to meet need or support the individual safely or is above the local authority rate and there is no top-up available.**
- **All individuals or their legal representatives can find/source their own long-term placement, if it is within the local authority rate agreed by the Council or where a third party has agreed and is able to pay a third-party top-up. The provider would need to be accredited by the County Council and work to the terms and conditions within the ADASS residential and Nursing contract.**

13. Agreeing exceptions to the Policy

Any exceptions would need to be agreed at locality practice and funding forums or agreed via local authorisation processes, and any disputes would be dealt with according to the established local dispute processes. Individuals could also take up via the Customer Rights process <https://residents.suffolk.gov.uk/complaint>.

Any exceptions would need a specific and robust assessment, considering risk, and may include situations such as a spouse already being in a long-term placement in a specific home and their partner wishing to be placed with them and it would be in the interests of their wellbeing to be placed in the same home.

If a high-cost placement is authorised, this will be undertaken in line with the Scheme of Delegation for financial decision making.

It should be noted that most placements for younger adults will remain out of scope of this policy due to the complexity of the placement process.



14. Timeframes for choosing a care home

Delays in organising the appropriate care can be detrimental to the individual and/or their current carer if the individual is being cared for in a setting that is no longer suitable for their needs. However, it is recognised that choosing a long-term care home or supporting a loved one with this choice can be difficult and often this is a stressful time for the individual and their family. It is understandable that individuals and/or their family/representative may wish to visit care homes that have been offered by the Council, and reasonable time will be allowed for this to take place. The decision for an offer to be accepted or declined needs to be timely, but it is recognised that this may not always be possible. The social care practitioner will alert the relevant manager if concerns arise about the length of time being taken for a placement decision to be reached.

The aspiration is for a person to choose a care home within 72 hours once the offer from the council has been given. Social care practitioners play a key role in preparing individuals and their families for this decision by discussing the process in advance, sharing information about the Choice of Accommodation Policy, and helping them consider what support they may need. These conversations should typically take place as part of the individual's Care Act Assessment.

If an individual or their family/representative declines the reasonable offers given by the Council in the 72 hours post initial referral, then the individual or their family/representative will be afforded a seven-day period to source an alternative placement if they are residing in the community. If the person is residing in an acute/hospital environment, they may be discharged to a temporary placement pending the decision for an alternative permanent placement, this may be a chargeable service.

The family/representative will be required to immediately share the provider information with the Council to ensure all appropriate checks are completed if they are not already accredited with the Council. If the alternative placement is deemed suitable to meet eligible needs and meets the financial agreement of the Council, then it will be expected that the individual will normally move within a maximum of seven days of the alternative placement being identified.



15. Individuals already in a care home and newly eligible for the County Council funding

In cases where an individual is already living in a care home, and they are seeking financial support from the Council for the first time, they should be referred for an assessment of their needs and for a financial assessment in the first instance. This will include self-funders whose capital has depleted, and other individuals who were previously funded by the NHS.

<https://www.suffolk.gov.uk/asset-library/information-for-potential-residents-on-the-councils-care-home-rates.docx>

<https://www.suffolk.gov.uk/asset-library/considerations-for-residents-affected-by-capital-threshold-drops.docx>

<https://www.suffolk.gov.uk/asset-library/capital-threshold-drop-poster-2024.pdf>

Once their eligible needs have been clarified, if their current care home is able to continue meeting their needs, the individual wishes to remain there and the provider accepts the Council's published rates/ is a provider who is able to meet needs within their contract, the Council will take on responsibility for paying for the placement at the agreed rate. This will be from the agreed date and the provider will collect any client contribution that is required, based on the individual's financial assessment.

Cases where the care home will not accept the guided rate based on the Care Needs Profile/local authority rate

If the care home will not accept the agreed local authority rate that the Council would expect to pay based on the individual's assessed needs but it is considered as part of the Care Act assessment and care and support planning, and signed off via agreed local Practice and Escalation Forum that it would inappropriate to move the individual to an alternative placement, the Council will need to take on responsibility for the full cost even if this means it becomes a 'high cost placement'.

In relation to the potential for a **top-up payment**:

- Where it has been agreed, following needs and risk assessment, that the Council does not consider it safe to move the individual, and will therefore not be offering an alternative available placement, then a top-up at the existing care home cannot be taken forward. The Council will negotiate the best price possible with the provider to enable the individual to continue living in the current placement.
- If the needs and risk assessments identify that it would be possible to move the individual to a lower cost alternative placement, the Council will explore Offer 1 and 2 options with the individual and their family in the usual way and will make appropriate offers that meet the individual's needs. In this situation, **a top-up can be explored**, if the individual wishes to stay in their current home, and there is someone willing to pay a third-party top-up.

Self-funders

The Care Act enables an individual who can afford to pay for their own care and support in full to ask local authorities to arrange care on their behalf. Where an individual requires care in a care home to meet their needs, the Council may, in certain circumstances, choose to respond to this request. For example, where an application for deputyship is required.

In supporting self-funders, the Council may choose to enter into a contract with a preferred provider or may broker a contract on behalf of the individual. Where the Council is arranging and managing the contract with the provider the Council will ensure that there are clear arrangements in place as to how the costs will be met, including any 'top-up' element.

The Council will assure itself that robust contractual arrangements are in place which clearly sets out responsibility for costs and ensure that the individual understands the arrangement. Self-funders will have to pay the costs of their care and support. It is the providers responsibility to ensure that the individual has at least 2 years' worth of funding before accepting them into their service.

It would be appropriate for self-funders and their LPA or deputy to be notified in writing that they are under an obligation to inform the local authority that they are nearing the funding threshold as soon as possible. If the local authority is informed after they have dropped below the threshold, the local authority may not backdate paying the fees to the date they fell below the threshold.

16. Equality Impact Assessment

The purpose of the policy is to clarify and improve the process of identifying appropriate placements for individuals who need support from Adults' Health and Care for Residential and Nursing Care.

The adoption of the CoAP is expected to have a positive impact by providing people with clarity and in reality, is a formalisation of existing practice, therefore won't have a major impact on any protected characteristics.

This policy supports individuals to make decisions in an evidenced and supported way about options for their residential and nursing care. This is relevant to whether the individual is making choices and is self-funding or is funded by the County Council. Individuals may have to make choices about where they live initially that they might otherwise not have chosen and to have regard to future funding. However, there are positive impacts, for example, people have a choice of providers that are accredited by the County Council with contract management support.

This is consistent with how our policies operate for people requiring funding from a Local Authority.

Clear and accessible communication materials for the public will be produced to explain the process in an open and transparent way.

17. Care Home CQC Ratings

The Council will place people in a care home which has a Care Quality Commission (CQC) rating of Excellent, Good or Requires Improvement (R.I). Placements will be made into R.I rated homes where the Council is confident that the issues leading to that rating have been addressed, the provider has worked in partnership with the Council and other key professionals and deems the service to be safe. The Council will not place a person in a care home that has a rating of Inadequate by the CQC or if the service is suspended due to care quality issues.



Thank you
for reading our
document.