

Adult Social Care and Health

Disability Related Expenditure Assessment (DREA) Practice Guidance

2023-2024



Serving Kent, serving you

Document Information

Owners:	
KCC	<p style="text-align: center;">Sarah Denson. Assistant Director, Strategic Safeguarding, Practice, Policy, and Quality Assurance (SSPPQA) Kent County Council Adult Social Care & Health Directorate 3rd Floor, Invicta House, Maidstone, Kent. ME14 1 XX</p> <p style="text-align: center;">Email Policy&StandardsEnquiries@kent.gov.uk</p>

	Stat	Date	Issued by/ Amended	Next Review Date	Changes
V5	Final	3 July 2023	Jean Wells	February 2024	Paragraph 4.11.9 amended, removed "because the practitioner has not confirmed with CFS no change to individual DRE allowance"
V4	Final	3 April 2023	Jean Wells	February 2024	Updated National Association of Financial Assessment Officers (NAFAO) figures 2023-24 (Fig1 and Appendix 1) Heating costs. Fuel prices increased by 92% in the last 12 months. Fig 1 (page 9) updated accordingly. Link to Disability Related Expenditure Assessment Factsheet DREA form on MOSAIC document library
v.3	Final	15.03.2022	Catriona Brodie	Feb 2023	Updated NAFAO figures for 2022 – 2023 References to KNet changed to Tri-x click here
v.2	Final		Jean Wells		Updated National Association of Financial Assessment Officers (NAFAO) figures Internet access amount amended to read: <i>internet access costs necessitated by disability such as sight impairment.</i> Disability Related Expenditure Assessment form: The revised form on Tri-x templates only pending MOSAIC document library update.

Document Governance

Sign Off	Date	
	15 th Oct 2019 22 nd Oct 2019, 28 Oct 2019	Mark Walker Richard Smith (LD 26+ and MH), Janice Duff (OPPD),

References

Care and Support Statutory Guidance Annex C Treatment of income	Link here
Care and Support Statutory Guidance: section 1. Promoting wellbeing	
The Care and Support (Charging and Assessment of Resources) Regulation 2014	Link here
The Care and Support (Eligibility Criteria) Regulations 2015	Link here
Care Act 2014	Link here
Disability Related Expenditure Assessment Form	KNet template
Disability Related Expenditure Assessment Factsheet	www.kent.gov.uk
Authorisation (of funding) Levels Policy	Tr-x policy
National Association of Financial Assessment Officers (NAFAO)	
Client Financial Services	KNet link
Disability Related Expenditure Assessment	DREA
Disability Related Expenditure	DRE
Standard DRE Allowance (KCC)	£17 pw
System Record	MOSAIC

Glossary

CFS	Client Financial Services
DLA	Disability Living Allowance
DRE	Disability Related Expenditure
DREA	Disability Related Expenditure Assessment
KCC	Kent County Council
MIG	Minimum Income Guarantee
NAFAO	National Association of Financial Assessment Officers
PIP	Personal Independence Payment

Contents

1. [Key Principles](#)
 2. [Definition](#)
 3. [National Guidance](#)
 4. [Practice Guidance](#)
 - 4.1 [Disability Related Expenditure \(DRE\)-why it is important](#)
 - 4.2 [Eligibility to request an individual Disability Related Expenditure Assessment](#)
 - 4.3 [Evidence how purchase relates to the disability](#)
 - 4.4 [How KCC look at utility costs](#)
 - 4.5 [Other miscellaneous DRE costs](#)
 - 4.6 [How DRE is calculated and applied](#)
 - 4.7 [Obtaining delegated authority approval](#)
 - 4.8 [How to inform the person the outcome of the assessment](#)
 - 4.9 [If the person disagrees with the outcome](#)
 - 4.10 [Date DRE allowance will be applied](#)
 - 4.11 [DRE annual review](#)
 5. [Monitoring](#)
- Appendix
1. [Costs of Disability](#)
 2. [DRE examples](#)
 3. [Example how DRE allowance included in Means Tested Financial Assessment](#)
 4. [Disability Related Expenditure Form example](#)
 5. [Timescale's summary](#)

1. Key Principles

- 1.1 Local authorities must promote the wellbeing of the adult when carrying out functions under the Care Act 2014.
- 1.2 Expenses directly related to a person's disability will be taken into account when assessing a person's finances.
- 1.3 Disability Related Expenditure (DRE) will be discussed face to face and determined on an individual basis.
- 1.4 Decisions will be made having regard to all the individual's circumstances.
- 1.5 DRE should not be limited to what is necessary for care and support.
- 1.6 Consideration will be given to everything a person has to buy or pay for because of their disability.
- 1.7 Reasonable additional costs directly related to a person's disability will be considered in the individual Disability Related Expenditure Assessment (DREA).

2. Definitions

DRE is an additional cost that arises from a disability or long-term health condition. It is expenditure over and above what a non-disabled person would spend.

3. National Guidance

- 3.1 The Department of Health Care and Support Statutory Guidance places a duty on local authorities to promote the wellbeing of adults with care and support needs. Section 1.3 says "The wellbeing principle applies in all cases where a local authority is carrying out a care and support function, or making a decision, in relation to a person".
- 3.2 Section 1.5 of the statutory guidance seeks to define "wellbeing". The various definitions include "social and economic wellbeing".
- 3.3 After charging, a person must be left with the minimum income guarantee (MIG), as set out in the Care and Support (Charging and Assessment of Resources) Regulation 2014.
- 3.4 In addition, where a person receives benefits to meet their disability needs which are not being met by the local authority, the charging arrangements must ensure that they keep enough money to cover the cost of meeting these disability-related costs.
- 3.5 The statutory guidance Annex C section 39 details specifically how DRE should be considered.
- 3.6 The statutory guidance Annex C section 40 includes a list of what a local authority should include in assessing DRE, but it states the list is not intended to be exhaustive.

- 3.7 Local authorities are required to offer a DREA to anyone who is in receipt of disability related benefits when these are taken into account in the means tested financial assessment.
- 3.8. The DRE is ignored in the means tested financial assessment reducing a person's financial contribution towards their care and support. See Appendix 2 for illustration.

4. Practice Guidance

4.1 Disability Related Expenditure (DRE)-why it is important.

- 4.1.1 People who receive care and support in their own home or other non-residential settings, will need to pay for daily living costs such as rent, food and utilities; therefore, the charging rules must ensure people have enough money to meet these costs.
- 4.1.2 Some people will receive disability benefits which will be used to contribute to the costs of their disability. For some people who are eligible for care and support from Kent County Council (KCC), they may seek additional means tested financial support to offset some of the additional costs against their assessed contribution to their care and support.

4.2 Eligibility to request an individual Disability Related Expenditure Assessment (DREA)

- 4.2.1 KCC automatically ignores £17 per week from a person's income when working out how much they can afford to contribute to their care. This is called a standard DRE allowance and means that for many people there is no need to complete a DRE assessment.
- 4.2.2 **The practitioner must advise the person about the standard DRE and provide the opportunity to request an individual DRE assessment.**
- 4.2.3 If a person in receipt of a disability benefit believes they have DRE more than the standard DRE allowance, they (*or their representative*) can request an individual DREA, by contacting their practitioner. If the person has not been allocated a practitioner, for example a new chargeable package of care post Kent Enablement at Home up until the initial review, the person/representative should contact Support Services who will allocate a practitioner.
- 4.2.4 Disability benefits for the above purpose are:
- Attendance Allowance;
 - Disability Living Allowance Care Component (middle or higher rates only);
 - Personal Independence Payment Care Component (standard or enhanced rates only);
 - Constant Attendance Allowance;
 - Exceptionally Severe Disablement Allowance.

4.2.5 DRE would only be made where those costs are:

- met entirely by the person;
- specifically relate to the disability or medical condition in question; **and**
- exceed what a person without the disability or medical condition would reasonably be expected to spend.

4.2.6 Expenditure is unlikely to be approved where:

- the person is receiving a personal budget¹ (including a direct payment) that already incorporates some of the identified DRE;
- the person has chosen to buy items/services when there is a cheaper alternative that meet the need;
- ²any additional disability related services or equipment is provided and available from the NHS for free in the person's area– such as physiotherapy, chiropody, psychotherapy, osteopathy, specialist treatment, incontinence pads, glasses, wheelchairs/maintenance and transport for hospital appointments;
- any additional disability related services or equipment facilitated by or provided through KCC;
- any additional disability related services or equipment met by a payment of a Grant or where another source of funding has been provided.

4.2.7 Travel costs will not normally be included in the DREA as these are met through a person's Disability Living Allowance, Independence Payment Mobility component (if eligible) and other travel concessions. See Fig 2 for further details.

Key Message

Expenditure: The practitioner/authoriser should be prepared to make exceptions based on every individual circumstance.

Act reasonably when making decisions taking into account individual circumstances.
Consider impact on person's wellbeing, individual financial hardship/outgoings;
medical need for certain treatment not provided by NHS in person's area;
not possible to evidence every spend; not eligible for a Blue Badge, etc.

¹ Personal Budget: "This is a statement that sets out the cost to the local authority of meeting an adult's care needs" ref Care and Support Statutory Guidance Annex J: Glossary.

² When the person has a medical need, the person should speak to their GP to ask if treatment/service available through NHS in their area. If GP confirms not available, practitioner may consider a reasonable DRE.

4.3 Evidence how purchase relates to the disability

- 4.3.1 DRE only includes costs due to a disability (or long-term health condition) that someone without a disability would not have to pay. It can include privately arranged care services³.
- 4.3.2 The person (*or their representative*) must provide evidence (e.g. bills/invoices/receipts, contracts, bank statements) of extra expense incurred as a result of their disability or medical condition.
- 4.3.3 The practitioner carrying out the DREA is responsible for ensuring that the person (or their representative) produces documentary evidence of any expenses to be allowed.
- 4.3.4. If it is not possible for the person (or their representative) to provide a receipt for every spend or provide a detailed breakdown of every cost, the practitioner may include the spend in the DREA (e.g. if item is universally known, and other evidence to show both the expense is being paid and its regularity). The person must be asked to keep receipts for future expenditure.
- 4.3.5. Receipts and /or evidence required must be for at least a three-month period⁴ to show the regularity of the expense. For some expenses KCC may need evidence of payments covering longer period than this or evidence to be provided yearly at the DRE review⁵; the practitioner will confirm with the person if this is the case.
- 4.3.6. Receipts for one off expense must be dated and purchased during the current financial year.
- 4.3.7 Additional supporting evidence may be needed from a qualified medical professional if certain items are requested e.g. health related conditions or dietary requirements.
- 4.3.8 Other information from the person (or their representative) will be required within 20 working days to show how the expense or items meets disability related needs.

4.4 How KCC look at utility costs

- 4.4.1 Only metered water can be considered as relating to disability needs.
- 4.4.2 As utility costs fluctuate during the year, annual costs will need to be considered.
- 4.4.3 Fuel costs will be compared to the national average for the size of household and property type, by means of the usual annual statistics compiled by the government and other relevant organisations.

³ **Privately arranged care services:** The allocated personal budget must always be an amount sufficient to meet the person's eligible care and support needs which KCC is required/decides to meet. Therefore, an individual DRE allowance must not be used to cover a shortfall in the personal budget/costs to meet eligible needs.

⁴ Some utility companies may only invoice every 6-12 months. If this is the case, use the most recent receipt of payment. ⁵ See section 11 about DRE reviews.

4.4.4 Any DRE allowance will be the difference between the standard fuel cost and the actual cost incurred above this amount. See Fig 1 below for standard weekly heating costs (gas or electric).

For example, if the standard cost of heating is £2,761.73 per year and a person can evidence £3,761.73, the disability related amount is £100 per year equating to £1.923 per week.

Fig 1 2023/24 Figures⁵

Property type. Average Heating Cost.	Weekly cost	Annual
Single person - Flat/Terrace	£53.11	£2,761.73
Couple – Flat/Terrace	£70.07	£3,643.68
Single person – Semi Detached	£56.41	£2,933.32
Couples – Semi Detached	£74.47	£3,872.45
Single – Detached	£68.63	£3,568.76
Couples – Detached	£90.47	£4,704.40

4.4.5. Evidence of annual usage will be required to ensure correct allowance calculated. This will be monthly/quarterly or, if set regular monthly amounts are paid, then KCC will require the annual statement. The set monthly amount paid cannot be used if it is based on estimate cost as this is not the actual cost of the utility.

4.5 Other miscellaneous DRE costs

Fig 2 (Appendix 1, page 15) provides guidance with recommended allowances for possible identified items and examples of reasonable evidence requirements prepared by National Association of Financial Assessment Officers (NAFAO) 2023-2024 unless indicated by an Asterix (*). The list is not intended to be exhaustive. Everyone’s costs will be different.

4.6 How DRE is calculated and applied

4.6.1 Once all the information has been gathered and reviewed, any allowed DRE above KCC cumulative standard DRE weekly allowance will be applied to the financial assessment as a weekly cost.

4.6.2 The weekly costs are calculated by frequency x cost = annual cost/52 = weekly allowance.

⁵ Sourced from NAFAO (2023-2024) Heating allowance standard. Annual inflationary update based on RPI Fuel index at November 2022. At this date fuel prices had increased by 92% in the last 12 months.

- 4.6.3 For agreed one off large expense, the cost will normally be applied over a one-year period:
cost/52 = weekly amount. Exceptions are a wheelchair, powered bed, turning bed, powered reclining chair, stair-lift and hoist which are calculated by actual cost/ 500 (10year life) = weekly amount. See Fig 2 above for precise details about these items.
- 4.6.4 Each weekly amount is then added together to determine if the amount actually spent is over the standard DRE allowance already applied by KCC. See Appendix 3 form illustration.
- 4.6.5 If the amount is higher than the £17 standard DRE allowance, then the higher amount is applied. If the amount is less, the £17 standard DRE allowance remains the same. If no allowance applied because no disability benefits received, the £17 standard DRE allowance remains. See Appendix 1 for examples (Zach) how this works in practice.

See Appendix 2 for an example how DRE allowance is ignored in the means tested financial assessment.

4.7 Obtaining delegated authority (budget holder) approval

- 4.7.1 During the need's assessment⁶ and through the care and support planning process, the practitioner must consider the care and support needs and expenses each person has, recognising that individuals have different needs. The practitioner must advise the person about the standard DRE and provide the opportunity to request an individual DRE assessment.
- 4.7.2 It may be possible the person (or representative) talks about DREA during the means tested financial assessment. In these circumstances, Client Financial Services (CFS) officers must contact the practitioner to request they carry out the individual DREA.
- 4.7.3 The practitioner must check the person is in receipt of a disability benefit listed in 4.2.4 in order to be eligible for an individual DREA. CFS officers can provide this information to the practitioner on request, if the person has difficulty.
- 4.7.4 The practitioner must discuss in depth with the person (or their representative) all expenses the person requests to be considered in the DREA and review the evidence/information supplied. Timescales will be agreed when evidence/information required (evidence etc normally within 20 working days). See 4.3 for more details about evidence.

⁶ "The aim of the assessment is to identify what needs the person may have and what outcomes they are looking to achieve to maintain or improve their wellbeing" - Care and Support Statutory Guidance Chapter 6 Assessment and Eligibility 6.5

- 4.7.5 All DREA discussions with the person/representative will be recorded on the System Record by the practitioner within 10 working days.
- 4.7.6 The practitioner will decide whether the disability related costs and evidence/information supplied by the person (or representative) represents a reasonable cost in the context of their disability/health condition and KCC wider duty to promote person's wellbeing.
- 4.7.7 The "Disability Related Expenditure Assessment Form" available via MOSAIC, must be completed and, together with the evidence, submitted by email to the relevant delegated authority for the division (in line with Authorisation (of funding) Levels Policy). (Note individual DREA process is not a MOSAIC/LPS workflow, it is off system form).
- 4.7.8 Within 2 working days, the delegated authority will consider the items listed on the DREA form and evidence provided with the DREA form and notify the practitioner the outcome of decision (approve, decline, request more evidence)

The authoriser will either:

- approve all items on the DREA form and email the practitioner
- request more evidence from the practitioner and wait for resubmission
- reject all or some items and inform practitioner

- 4.7.9 Within 2 working days, when the delegated authority approves the individual DREA, the authoriser will email CFS with the completed DREA form requesting a means tested financial reassessment. <mailto:FinanceReferrals@kent.gov.uk> .

4.8 How to inform the person the outcome of the assessment

- 4.8.1 The practitioner will inform the person and representative (in writing within 5 working days) of the outcome of the DREA and place the authorised DREA form on the System record when approved by the delegated authority.

- 4.8.2 The practitioner must include the following details in the written correspondence:

- Outcome of the DREA decision
- Full reasoning/rationale for the decision (*particularly important if some or all items not approved by delegated authoriser*)
- Other evidence/receipts required if applicable (what, why, by when and to whom)
- Details of other/further actions if required by person/representative or practitioner
- Date DRE allowance applies
- If unhappy with outcome, who to contact⁷

⁷ See paragraph 4.9 if person disagrees with the outcome.

4.8.3 If more evidence required or individual items not approved by the delegated authoriser, the practitioner will discuss with the person and their representative within 5 working days of notification, revise the DREA form and resubmit if person agrees as detailed in paragraph 4.7 “Obtaining delegated authority (budget holder) approval”.

4.9 If the person disagrees with the outcome

4.9.1 The person (*or their representative*) disagrees with the outcome of the DREA, the person/representative should discuss with the practitioner who carried out the DREA in the first instance, or alternatively their line manager or contact the Customer Care and Complaints Team.

4.9.2 If the disagreement has not been resolved locally, the person/representative has the right to complain to the Customer Care and Complaints Team using the contact methods [available here](#). The complaint will be thoroughly investigated and responded to.

4.9.3 The person/representative has the right to escalate their complaint to the Local Government Social Care Ombudsman after completing KCC’s complaints process. The fact that a complaint has been referred to the Ombudsman should not prevent KCC from trying to reach a local settlement.

4.10 Date DRE allowance will be applied

4.10.1 The DREA may take some time to complete, especially where more information is required, or receipts are not currently being kept.

4.10.2 Until the DREA agreed, the standard DRE allowance per week will be used to calculate the assessed contribution towards care and support.

4.10.3 If all the information and appropriate evidence is provided within the timeframes set during the DREA, the outcome of the review, and reduction of the person’s contribution will be backdated to the date the last piece of suitable supporting evidence supplied by the person/representative.

4.11 DRE annual review

4.11.1 A person (*or their representative*) may request an individual DREA (or review) at any time and may be supported by a family member/friend/legal representative.

4.11.2 DRE must be reviewed at least annually by the practitioner as part of the planned care and support plan review process. This ensures any changes to needs and DRE continue to be accounted for in the means tested financial assessment/reassessment.

- 4.11.3 Depending on the DRE item/s approved the previous financial year, practitioner may seek on going evidence/information of the extra expense incurred as a result of their disability or medical condition each year. The person/representative should have been advised of this yearly requirement when DREA requested and approved. (See 4.3.5).
- 4.11.4 When the care and support plan review results in a revision of the plan and the actual personal budget adjustment includes some or all the current DRE items, the DRE allowance must be reviewed. Remember, the actual personal budget (or direct payment) should not incorporate identified DRE items. This must be explained to the person/representative.
- 4.11.5 If needs change during the year or additional DRE incurred, an earlier review will be completed by the practitioner. Evidence will be required as detailed in 4.3 above and the practitioner may consider if appropriate to review the DRE in full at this time, rather than at the planned annual care and support review date.
- 4.11.6 When the review results in additional DRE allowance, the practitioner must seek delegated authoriser approval described in 4.7 above.
- 4.11.7 The practitioner updates System Record accordingly with revised DRE allowance.
- 4.11.8 Client Financial Services (CFS) undertake a financial review (each January). Through this process, CFS will email the practitioner asking for confirmation that the individual's DRE allowance (over the standard DRE allowance of £17) remains unchanged.
- 4.11.9 If DRE reverts to the standard DRE allowance, in these circumstances, a charging adjustment will be made taking into account the correct DRE allowance for the person and backdated to the date the DRE allowance reverted.
- 4.11.10 CFS will inform the person (and their representative) in writing (letter) the outcome of the means tested financial reassessment and the assessed contribution towards their care and support which includes the approved DRE allowance.

5 Monitoring

5.1 Required Outcomes

As part of the care and support planning process, the practitioner will consider appropriately, confidently, and equitably additional expenditure over the standard £17 in the individual DREA.

- 5.1.2 Any additional expenditure will require authorisation by the appropriate delegated authoriser, so ensuring that every penny spent by KCC improves the lives of people with a disability or medical condition to continue to live independently in the community.

5.2 Review of Outcomes.

5.2.1 The complaints database will be monitored and communicated to adult social care Good Practice forums. Managers should take the opportunity to understand where things may have gone wrong and understand whether it is necessary to review current practices, policies, and processes to ensure this does not happen again to other people.

5.2.2 Where there are lessons to be learnt staff will be fully briefed on what went wrong and how this could be avoided in the future. This could include team meetings, keeping accurate records and addressing training or development issues through action plans.

Appendix 1

Fig 2 Costs of Disability Sourced from NAFAO (2023 – 2024).

ITEM	AMOUNT	EVIDENCE
Community Alarm System	Actual cost, if reasonable	Bills from or payments to provider
Privately arranged care Private domestic support	Actual cost where this is not provided as part of the care and support plan and personal budget allocation, but the amount is reasonable and necessary for their care and support	Evidence of employment arrangement and/or legally correct payments to an employee under UK employment and tax law. Where agency arranged evidence of billing and payment.
Specialist washing powder/detergent or exceptional laundry	£4.56 per week	<p>The assessment or care and support plan may identify a need (i.e. incontinence or other illnesses such as a skin condition and the person will need to spend money on additional laundry in excess of “normal” needs.</p> <p>If not evidence from other sources and consideration of the nature and impact of any health problem or disability may provide a guide.</p> <p>Identify more than 4 loads per week</p>
Special clothing or footwear/additional wear and tear to clothing and footwear. Extra bedding	<p>Reasonable amount for extra cost caused by disability e.g. specially tailored garments or through exceptional disability related wear and tear</p> <p>*Reasonable expenditure over and above the normal replacement cycle for bedding.</p>	<p>The assessment or care and support plan may identify a need. If not evidence from other sources, which may include medical evidence, and consideration of the nature and the impact of any health problem or disability may provide a guide.</p> <p>Evidence of purchase and payment</p>

<p>Internet access</p>	<p>internet access costs necessitated by disability such as sight impairment.</p>	<p>Evidence that costs are higher due to disability. Evidence of purchase and payment.</p>
<p>Transport /travel costs necessitated by illness or disability</p>	<p>Reasonable amounts over and above the mobility component of Personal Independence Payment (PIP) or disability Living Allowance (DLA) (*) or amounts over and above existing travel concessions/ bus pass.</p> <p>(*) Parking costs would normally be covered by using the Blue Badge Scheme.</p> <p>(*) Payments to people who have a mobility vehicle and who choose not to use it will not be considered.</p> <p>(*) reasonable amounts where this is not provided as part of the care and support plan and personal budget allocation (including a direct payment).</p> <p>if not incorporated in the persons personal budget/direct payment.</p>	<p>Evidence of payment and purchase</p> <p>(*) DRE will not be considered where support with costs are available from other sources such as transport to hospital appointments, KCC provided transport to a day centre, transport provision as part of care and support plan i.e. to enable eligible needs under The Care Act to be met (this will form part of the personal budget)</p> <p>All travel options should be considered in the assessment and care and support planning development. All agreed transport arrangements must be set out in the persons Pathway Plan /Care and Support Plan. If the personal budget (including a direct payment) already incorporates transport/travel costs, DRE unlikely to be approved.</p>

Special dietary needs	Reasonable amount where demonstrated above average dietary costs	<p>The assessment or care and support plan may identify a need.</p> <p>Medical condition that means person has to eat/drink specialist foods such as coeliac disease, or person diabetic.</p> <p>If not evidenced from other sources, which may include medical evidence, and consideration of the nature and the impact of any health problem or disability may provide a guide.</p> <p>Details of special purchases, including evidence of payment</p>
Basic gardening maintenance	Based on individual costs of garden maintenance (*) to a basic safe standard (such as lawn cutting, pruning and path clearance)	Evidence of costs of a privately employment gardener, arrangement and/or legally correct payments to an employee under UK employment and tax law. Where agency arranged evidence of invoice and payment.
Wheelchair purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £4.75 per week manual £11.55 per week powered	Evidence of purchase. No allowance if equipment provided free of charge, through a funded Grant
Powered bed purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £5.25 per week	Evidence of purchase if available

Turning bed purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £9.19 per week	Evidence of purchase
Powered reclining chair purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £4.16 per week	Evidence of purchase
Stair-lift purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £7.42 per week	Evidence of purchase without Disabled Facilities Grant input
Hoist purchased privately	Actual cost divided by 500 (10 yrs. life) up to a maximum of £3.64 per week	Evidence of purchase without Disabled Facilities Grant input
(*) Specialist gadgets for the kitchen or around the house	(*) Actual cost if not provided by Occupational Therapy	Evidence of purchase
(*) Prescriptions, medical and chemist items.	May be considered if actual cost not supplied free by NHS	People who are not on income support or Pension Credit may be liable to prescription charges. Click for link to www.NHS.uk "Am I entitled to free prescriptions?"
(*) Complimentary or natural health care treatments/therapies	(*) May be considered when there is not a cheaper alternative available	Specifically relates to disability or person's medical condition in question. Usually used alongside conventional medical treatments prescribed by a doctor. May help person cope better with a medical condition

<p>Heating costs, electricity, and water meter charges</p>	<p>Reasonable amount for extra cost caused by disability.</p> <p>See Fig 1 for current average standard heating costs.</p> <p>(*) Annual metered water amounts in excess of average annual amount of costs on similar properties.</p>	<p>May need home to be heated more due to condition. For example, may spend more time at home because of disability and use more power.</p> <p>Use more water due to extra laundry.</p> <p>Bills. Research average water metered charges for a household in the persons geographical area.</p>
<p>(*) Telephone installation landline rental</p>	<p>Reasonable amount over and above what a nondisabled person would spend.</p>	<p>May consider cost towards installation of a landline where this is linked to significant risks and part of the care and support plan.</p> <p>Call costs and line rental are the responsibility of the individual.</p>
<p>(*) Other disability related expenses</p>	<p>Other disability related expenses may be allowed. Responsibility for decisions about DRE items are outlined below (4.7)</p> <p>Includes one off expenses (See 4.6.3 below)</p>	<p>Proof of cost required (see section 4.3 above)</p>

Appendix 2

Example 1: disability related expenditure (Reference: Care and Support Statutory Guidance: Disability Related Expenditure Annex C: Treatment of Income).

Zach is visually impaired and describes the internet as a portal into the seeing world – in enabling him to access information that sighted people take for granted. For example, he explains that if a sighted person wants to access information they can go to a library, pick up a book or buy an appropriate magazine that provides them with the information they need.

The internet is also a portal into shopping. For example, without the internet if Zach wanted to shop for clothes, food or a gift he would have to wait until a friend or family member could accompany him on a trip out, he would be held by their schedule and they would then have to explain what goods were on offer, what an item looked like, the colour etc. and would inevitably be based on the opinion and advice of said friend. A sighted person would be able to go into a shop when their schedule suits and consider what purchase to make on their own. The internet provides Zach with the freedom and independence to do these things on his own.

The Internet access costs £5 per week, and he has no other disability related expenditure. Because the cost of the internet is less than the £17, he already receives from KCC for DRE, he will receive £17 only. (*Note there must be clear evidence that this is related to his disability need*)

Example 2: disability related expenditure (DRE)

Zach has internet access and has other DRE costs to help with basic private domestic help and gardening. These costs are £15 per week. This means his total disability related expenditure is £20 (£5 internet and £15 basic help). This means that his DRE is in excess of the £17 he already receives, so he will receive the £20 only (not £17 plus £20).

Appendix 3

Example how an individual DRE allowance affects a person's financial contribution towards their care and support. **Figures for illustration only**

KCC Standard DRE Allowance £17	Individual DRE Allowance (£35)
Sarah is aged 58. Care package is £180 per week. She receives the standard (lower rate) PIP (Daily living component).	Sarah is aged 58. Care package is £180 per week. She receives the standard (lower rate) PIP (Daily living component).
Sarah's Income £194.90 Employment Support Allowance £68.10 Standard PIP Daily Living Component	Sarah's Income £194.90 Employment Support Allowance £68.10 Standard PIP Daily Living Component
£263.00 Total Income	£263.00 Total Income
What KCC disregard (ignore) from the income £149.50 Minimum Income Guarantee £17.00 Standard DRE Allowance	What KCC disregard from the income £149.50 Minimum Income Guarantee £35.00 Individual DRE Allowance
£166.50 What KCC disregard (total)	£186.45 What KCC disregard (total)
£96.50 Amount remaining (£263.00-£166.50)	£76.55 Amount remaining (£263.00-£186.45)
£96.50 Sarah's Charge (Assessed contribution)	£76.55 Sarah's Charge (Assessed contribution)
Note: As the cost of the care package (£180) is more than the assessed contribution, Sarah's financial contribution towards her care and support is £96.50	Note: Sarah's financial contribution has reduced because more DRE ignored in the means tested financial assessment

Appendix 4.

Disability Related Expenditure Form on MOSAIC

(**Illustration purposes only**) see supplemental notes below illustration.

Item	Expenditure evidenced	Column A. Calculated weekly disability related expenditure over and above non-disabled person use
Heating cost (based on Single person - Flat/ Terrace)	£27.13	£1.92*
Multiple Sclerosis related supplements	£60	£60
Transport to hydrotherapy	£44	£0 Service available through NHS in the person's area
Subtotal weekly expenditure		£61.92
One off purchase if relevant	Expenditure evidenced	Calculated expenditure per week
Powered bed purchased privately	£599.00	£1.20
Subtotal one off purchase	£599.00	£1.20
TOTAL		£63.12
Add the extra expenditure for each item in column A to find the total DRE.		

- *Heating cost- refer to Fig 1 for average heating cost per household. DRE is the difference between the average fuel cost and the actual cost incurred above this amount.
- Powered bed purchased privately the purchased (fictitious price), divided by 500 (ten-year life) see Fig 1. Remember some large expenses are calculated cost/52.

- MS supplements. Not supplied free by NHS. No cheaper alternative available
- Transport to hydrotherapy. For the purpose of this illustration, free NHS transport is available. Important to note for some individuals this may not be the case, so may be considered a reasonable DRE for example amounts over and above the mobility component of Personal Independence Payment/Disability Living Allowance, amounts over existing travel concessions.

Appendix 5.

Timescale summary: responding to a request.

The following timeframes when person/representative contacts KCC requesting a DREA.

Task	Responsible person	Timeframe
Evidence/receipts of expenditure	Person drawing on support /representative	⁸ Three-month period minimum
Allocate practitioner	Support Services	Within five working days
Discuss if more evidence required from person drawing on support /representative	Practitioner	Five working days
Submit other information (if required) to Practitioner	Person drawing on support t/representative	Twenty working days
Submit DREA form to delegated authoriser	Practitioner	Five working days
DREA form submission decision, inform practitioner	Delegated authoriser	Two working days
DREA approval – email Client Financial Services	Delegated authoriser	Two working days
Inform person drawing on support / representative outcome of DREA submission once notified by delegated authoriser	Practitioner	Within five working days
Agreed DRE allowance applied	Client Financial Services	Backdate to when last piece of supporting evidence supplied by the person drawing on support /representative
DRE allowance review	Practitioner	Annual or sooner if circumstances/needs change
Update System Record with agreed DRE allowance and all discussions.	Practitioner	Ten working days (in line with Recording with Care Guidance)

⁸ Some utility companies may only invoice every 6 or 12 months. If this is the case, use the most recent receipt of payment.

Financial Review	Client Financial Services	Annually (Jan-Feb)
Outcome of annual financial review which includes reviewed DRE allowance	Client Financial Services	Annually (April)