

Cheshire West & Chester Council



**Integrated Adult Social Care and Health
Charging Policy: Disability Related
Expenditure (DRE)**



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and Chester

REVIEW SHEET			
Version:	2	Date Reviewed:	21/05/2025
		Next Planned Review:	3 yearly, or sooner as required
Reason for this review:		Scheduled review – Appendix of DRE allowances updated annually	
Were changes made:		Yes - The Appendix of annual DRE allowances has been updated inline with new guidance issued around the delivery of transport.	
Summary:		The aim of this DRE Charging policy is to provide a consistent and fair framework for charging all service users who receive Non-Residential care, following an assessment of their individual needs, and their individual financial circumstances.	
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Service Area:		Adult Social Care	
Director Assistant Director Signature:			
Director Assistant Director:		Stella Higgin	
Date Approved:		21/05/2025	
Action/s following approval:		<ul style="list-style-type: none"> • Encourage sharing the policy through the use of team meetings and supervisions • Ensure relevant staff are aware of the content of the whole policy 	
Location of Document:		Tri.X Council Website	

CONTENTS

Introduction.....	4
Charging For Care – Legislative Framework.....	4
Principles of the Disability Related Expenditure Charging Policy	5
Disability Related Expenditure (DRE) Options	5
DRE in the Financial Assessment	5
DRE Options	6
Standard (banded) DRE allowance	6
Individual full assessment DRE allowance	6
Individual full assessment DRE approvals.....	8
Reconsideration Request	8
Local Government and Social Care Ombudsman	8
Appendix 1 - Standard (banded) DRE Allowance	9
Appendix 2 – Individual Full Assessment DRE	10
Related Documents / Appendices.....	15



INTRODUCTION

- 1.1 The aim of this DRE Charging policy is to provide a consistent and fair framework for charging all service users who receive Non-Residential care, following an assessment of their individual needs, and their individual financial circumstances. The policy sets out the principles and procedures used by Cheshire West and Chester Council (CW&C) when assessing service users' contribution towards the cost of their Non-Residential care services and their Disability Related Expenditure. This policy replaces existing provisions from the date of approval.
- 1.2 Where disability-related benefits are taken into account within a financial assessment, the Council shall make an assessment and allow the person to keep enough benefit to pay for necessary disability-related expenditure to meet any needs which are not being met by the Council.
- 1.3 The policy applies to older people, adults with learning disabilities, adults with physical disabilities and adults with mental health needs who are assessed as having 'eligible needs' within the meaning of the Care Act 2014. For the purposes of this policy an adult is a service user aged 18 and above.
- 1.4 Cheshire West and Chester Council have a duty to meet eligible care and support needs of people who require Non-Residential care, where they meet the threshold for financial assistance and are either ordinarily resident in Cheshire West and Chester or are present in its area but of no settled residence.
- 1.5 This policy uses the term 'Service User' as a broad phrase to refer to those who are in receipt of services provided by Adult Social Care.
- 1.6 This policy will be reviewed annually and be updated to take best practice guidance and changes in statute.

CHARGING FOR CARE – LEGISLATIVE FRAMEWORK

- 2.1 Cheshire West and Chester's Non-Residential charging policy correlates with the statutory guidance on charging for care and support under the Care Act 2014 provided in the Department of Health Care and Support Statutory Guidance (CASS) published in October 2014. The Care Act came into force on 1 April 2015.
- 2.2 Section 14 of the Care Act 2014 gives Local Authorities the power to charge adults for care and support. This applies where adults are being provided with care and support to meet needs identified under Section 18, Section 19, or Section 20 of the Care Act 2014. These needs are sometimes referred to as 'identified or assessed needs'.
- 2.3 Section 17 of the Care Act requires Local Authorities to undertake an assessment of an individual's financial resources to determine the amount, if any that they will be required to pay towards the cost of their care if charges are to be made. The amount a service user is calculated to be able to pay is known as the assessed contribution.
- 2.4 Local Authorities must follow the regulations and guidance issued under the Care Act 2014 and ensure policies on charging and financial assessment comply with 'The Care and support (Charging and Assessment of Resources) Regulations 2014' which sets out:
 - How a Local Authority is to carry out a financial assessment if the Local Authority is to charge for care and support.



- Rules on treatment and calculation of income and capital within a financial assessment (including notional income and notional capital where a person has deliberately deprived themselves of an asset)
- Rules on minimum allowances to be given within a financial assessment.
- The power to charge the costs of putting arrangements into place in specific situations.

2.5 Further information relating to the Care Act 2014 can be found by following the links below to the Government website:

[Care Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk)

PRINCIPLES OF THE DISABILITY RELATED EXPENDITURE CHARGING POLICY

- 3.1 Revenue received from service users' financial contributions for the cost of the services, is reinvested to enable the Council to provide care and support for more people within the Borough. Income from charging is an essential contribution to Adult Social Care's budget to support the delivery of services to help people live and age well.
- 3.2 The Council's approach to charging individuals for Adult Social Care is laid out in the following:
- the Council's Non-Residential Charging Policy (with reference to the separate Direct Payment Policy and the Management of Top Ups policy).
 - the Council's Residential Charging Policy (approved July 2024)
 - the Fees and Charges report and Scheme of Delegated Charges (SoDC) which is updated annually and provides details on the annual Care Provider rates and the basis of charging service users.

DISABILITY RELATED EXPENDITURE (DRE) OPTIONS

- 4.1 DRE are the costs that arise from having a disability or long-term health condition. Disability Related Expenditure (DRE) is expenditure which service users incur in addition to their day to day living costs where the cost is more than normal expenditure and incurred due to disability rather than choice.

DRE in the Financial Assessment

- 4.2 DRE is taken into account within the financial assessment in order to reduce the amount a person has to pay for their Non-Residential care. This will be based on either the banded standard DRE allowance, or the specific individual full assessment DRE allowance, depending on what the service user has opted for, and is effectively disregarded as available income, therefore reducing the amount of a service user's contribution payable. In general, more DRE income may be allowed to be retained where support needs are higher, and any service user contributions are based on affordability and should be payable.
- 4.3 The Care Act suggests what DRE could include but does not provide an exhaustive list or any figures but does say that any **reasonable** request for additional disability related expenditure could be considered.
- 4.4 Disability related expenses are considered when:



- The extra cost is needed to meet a service user's specific need due to a medical condition or disability, as identified in the Care Act Assessment of care and support needs (Care Act 2014); **and**
- The cost is relevant, reasonable and can be verified; **and**
- It is not reasonable for a lower cost or free alternative item or service to be used. If a lower cost alternative item or service could have been used, the expense considered will be the lower cost.

4.5 Service users are sent a breakdown of how their charge has been calculated , after an individual financial assessment and then annually as part of the fee uplift process, and asked to inform the Council of any changes to income and outgoings which are then reflected in revised rates where appropriate.

4.6 If the service user or their appointed representative disagrees with their assessed contribution calculation or feels that they have insufficient funds to pay the charge, they have the right to a review of the amount of their assessed contribution.

4.7 Service users will be made aware of their right to appeal their assessed calculation within a 30-day period if, following the outcome of a review, they still consider they cannot afford to pay.

DRE Options

4.8 The Council operates both a banded model DRE and also an individual full assessment DRE model (service users can choose which they want to apply to themselves).

Standard (banded) DRE allowance

4.9 The aim of the standard (banded) model is to offer standard weekly DRE allowances based on a service user's disability related benefit income (see below). This is easier to administer as it reduces the requirements for DRE evidence to be produced by the service user and verified by the Council. These standard allowances are increased in line with annual inflationary increases. The current standard (banded) rates are set out in Appendix 1.

Banded DRE model	
Band 1	Not in receipt of disability related benefits.
Band 2	Lower or middle rate care component of Disability Living Allowance (DLA), standard daily living component of Personal Independence Payment (PIP) or lower rate Attendance Allowance (AA)
Band 3	Higher rate care component of Disability Living Allowance (DLA), Enhanced daily living component of Personal Independence Payment (PIP) or higher rate Attendance Allowance (AA)

Individual full assessment DRE allowance

4.10 Should a service user feel that the standard weekly allowance they have been offered does not accurately reflect their disability related expenditure under this policy, they may request an individual DRE full assessment. This may involve a home visit by a member of staff from the Client Finance team, who will require supporting evidence of all expenditure. An individual assessment of DRE may result in a lower or higher assessment than the standard award as a result.



4.11 Types of expenditure made necessary by any disability might include:

- Payment for community alarm system.
- Privately arranged care or domestic help.
- Higher than usual fuel bills.
- Additional costs due to a special diet.
- Purchase of equipment such as a stair lift or electric wheelchair.
- Additional laundry costs.
- Additional cost of clothing, bedding and footwear.
- Basic garden maintenance.

4.12 The above list is not exhaustive, and any reasonable additional costs related to disability will be considered in light of individual needs. Appendix 2 contains additional information and sets out the Council's usual standard or maximum allowances for a specific individual DRE full assessment.

4.13 In terms of DRE, the National Association of Financial Assessment Officers (NAFAO) provide advice on best practice, allowances and how to calculate DRE, the Council has its own procedures based on both the Care Act guidance and NAFAO guidance. These are in line with the following principles:

- If the service user has more than one of the expenses listed, the Council will usually allow the actual amount spent up to the maximum amount indicated. The Council will only consider a higher allowance in exceptional circumstances;
- Costs for disability related services that support the whole household (like a cleaner) will be treated as shared equally between all the adults in the household (unless the service user has a good reason for the Council to consider a different way of sharing costs);
- Where a service is made up of different elements, the Council will only consider costs for the part(s) that meet a disability-related need. For example – hairdressing – the cost of hair washing could be allowable if disability prevents this, and the Council are not already provided this support however, the cost of hair cutting / styling would not be allowable as most people would also need to pay for this service; and
- Allowances for special equipment needed due to a disability or condition will be based on the life span of the equipment and either the purchase price paid or a lower cost alternative if the Council believes that would be reasonable to meet the service user's identified needs.

4.14 Types of expenditure **not** typically included as DRE expenses within the Council policy and outside of the remit of Council funded costs, include:

- General Items or services required for daily living and used by the general population;
- Any item or service met by a payment from a Government grant e.g. Disability Facilities Grant), or where another funding source has been provided or is available;
- Health related items provided via GPs;



- NHS related – e.g. where a person is eligible for help with NHS costs but have opted to buy goods and services privately. This includes help paying for hospital travel, sight tests, glasses, contact lenses, NHS wigs, surgical supports and medication.
- Where an item exceeds the allowance given (as detailed above), or is not named within the list. For these items, service users will need to provide the Council with information as to why the additional cost should be considered. This is covered below.

Individual full assessment DRE approvals

- 4.15 All requests for individual full assessment DRE items must be submitted and verified by the Council. In deciding if a cost can be allowed in a service user's financial assessment the Council will consider what is included in their agreed care and support plan, although allowable costs are not restricted to what is stated in the support plan, certain items may need senior ASC officer approval and will be agreed by a DRE Panel which meets on a monthly basis.
- 4.16 When requesting a full assessment of DRE, the service user will be asked to answer the 3 questions below for each item of DRE under consideration:
- **Whether the costs are disability-related** – i.e. there is little or no choice but to incur the cost
 - **Whether the costs are necessary and reasonably incurred** – i.e. they are closely connected to the need and operate to meet or help alleviate it and are viewed fairly and objectively, also, that the expenditure must be reasonable and not extravagant or disproportionate to the need it addresses
 - **Whether the costs are for care and support** - i.e. it is important that the service user tells the Council why they believe an expenditure item is related to their medical condition and/or disability
- 4.17 The service user must provide expenditure evidence in the form of bills, invoices, website order history and statements, to support any requested DRE items. If these are not provided, the Council will use its discretion to decide if the expenses can be agreed without the required evidence.
- 4.18 The service user will be informed of the Panel decision within 10 working days of the Panel meeting.

RECONSIDERATION REQUEST

- 5.1 Service users have the right to appeal a Panel decision. They must provide additional information supporting their case, in order for the appeal to be heard as a Reconsideration. Service users are advised that, as any reconsideration decision is final, no further right of appeal to the Council is available. The service user will be informed of the Panel decision within 10 working days of the Panel meeting.
- 5.2 Should service users remain dissatisfied with the actions of the Council, they may wish to register a formal complaint by accessing the Council's complaints procedure. [Adult social care complaint | Cheshire West and Chester Council](#)

Local Government and Social Care Ombudsman

- 5.3 If a service user has been through all stages of our complaints procedure and are still unhappy, they can ask the Local Government and Social Care Ombudsman (LGSCO) to review their complaint. The Ombudsman investigates complaints in a fair and independent way - it does not take sides. It is a free service. The Ombudsman can investigate written complaints about whether the council has followed a proper decision-making process (but not the decision itself).



- 5.4 The Ombudsman expects the service user to have given the Council chance to deal with their complaint before they contact them. If a service user has not heard from the Council within a reasonable time, it may decide to look into their complaint anyway. This is usually up to 12 weeks but can be longer for social care complaints that follow a statutory process.

APPENDIX 1 - STANDARD (BANDED) DRE ALLOWANCE

CW&C operates a standard weekly (banded) Disability Related Expenditure model which will be increased in line with annual inflationary increases.

If a service user receives Attendance Allowance (AA), Personal Independence Payment (PIP) or Disability Living Allowance (DLA), an allowance is made in their Non-Residential financial assessment for additional expenses due to a disability or medical condition.

The rates for 2025-26 are as follows:

Banded DRE model		2025-26 rate
Band 1	No disability benefits in payment	£0
Band 2	Lower or middle rate care component of DLA, standard daily living component of PIP or lower rate AA	£9.43
Band 3	Higher rate care component of DLA, Enhanced daily living component of PIP or higher rate AA	£33.67

Should a service user feel that the standard weekly allowance they have been offered does not accurately reflect their disability related expenditure under this policy, they may request an individual DRE full assessment.



APPENDIX 2 – INDIVIDUAL FULL ASSESSMENT DRE

Cheshire West and Chester Council uses the National Association of Financial Assessment Officers (NAFAO) guide to DRE allowances. The following table contains allowance rates for 2025-26.

Disability-related expense item	Amount considered in assessment	Evidence required
Community Alarm System	Actual cost paid unless included in Housing Benefit award	Bills/bank statements
Privately-arranged registered [1] care services and medical treatments/therapies – if it is part of the agreed care and support and council-arranged support is reduced accordingly	Actual cost paid up to a maximum of £1855.36 per year (average £35.68 per week)	Bills/receipts from provider
Private domestic help [2] – where Social Care Assessment confirms this is necessary due to disability and isn't provided through Council-arranged support.	Cleaner/laundry - Actual cost paid up to £35.68 per week. Garden maintenance - Actual cost paid up to £27.67 per week (between March-October only) Where there is more than one adult in the household, costs will be shared equally.	Bills/receipts from provider for at least 4 weeks
Additional laundry and replacement bedding costs (where more than 4 loads washing/week needed due to incontinence or other disability-related or medical reason)	Laundry - £4.89 Wear & Tear of Bedding - £2.61	Care Assessment confirms need. If costs exceed the maximum amount, you will be asked to provide evidence this.
Additional cost of specialist dietary items required due to confirmed medical condition or disability	Difference between the cost paid for specific dietary items purchased and cost of supermarket brand (dependent on where service user shops) due to illness or disability	Details and receipts of specialist dietary purchases
Essential equipment purchased due to disability/condition to support independent living (if not supplied free of charge, through Adult Care or	Manual wheelchair – actual cost paid divided by 250 weeks, up to a maximum of £5.10 per week.	Evidence of purchase (bill, receipt, website order history) The social care manager or



Disability-related expense item	Amount considered in assessment	Evidence required
Health, or supplied through a Disabled Facilities Grant)	<p>Powered wheelchair or mobility scooter – actual cost paid divided by 500 weeks up to a maximum of £12.38 per week</p> <p>Powered riser/recliner chair – actual cost paid divided by 500 weeks up to a maximum of £4.47per week.</p> <p>Powered bed- actual cost paid divided by 500 weeks up to a maximum of £5.63 per week.</p> <p>Turning bed- actual cost paid divided by 500 weeks up to a maximum of £9.86 per week.</p> <p>Stair Lift- actual cost paid divided by 500 weeks up to a maximum of £7.96 per week</p> <p>Hoist- actual cost paid divided by 500 weeks up to a maximum of £3.91 per week</p> <p>Other essential equipment :</p> <p>1 – Item costing £1,000 or more – actual cost paid, divided by 500[4]</p> <p>2 – Equipment costing £100 – £1000 – actual cost paid divided by 250[5]</p> <p>3 – Equipment costing less than £100 – actual cost paid divided by 52 weeks</p>	occupational therapist to confirm purchase is an essential requirement



Disability-related expense item	Amount considered in assessment	Evidence required																					
	Other equipment may include other mobility equipment-[6].																						
Essential equipment maintenance/repair (if not maintained by Adult Social Care)	Actual cost of maintaining equipment – costs need to be linked to the items listed above	Bills/receipts from provider, bank statements, or maintenance contract showing cost.																					
Specialist clothing and footwear and replacements due to wear and tear	Expenditure on footwear over £43.18 per pair of specialist shoes (averaged over 1 year). For specialist clothing, adaptations of clothing and frequent replacement of clothing, (where this is identified within the care and support plan)	Receipts, website order history																					
Additional heating Allowance	Actual gas and electricity paid, averaged over one year, minus the annual average amounts Annual Average fuel amounts for Northwest 2025/2026: <table border="1"> <thead> <tr> <th>Figures for 2025/2026</th><th>N West</th><th>W Midlands</th></tr> </thead> <tbody> <tr> <td>Single person - Flat/Terrace</td><td>£2391.56</td><td></td></tr> <tr> <td>Couple – Flat/Terrace</td><td></td><td>£3151.91</td></tr> <tr> <td>Single person – Semi Detached</td><td>£2540.19</td><td></td></tr> <tr> <td>Couples – Semi Detached</td><td>£3345.45</td><td></td></tr> <tr> <td>Single – Detached</td><td>£3093.15</td><td></td></tr> <tr> <td>Couples – Detached</td><td>£4072.94</td><td></td></tr> </tbody> </table>	Figures for 2025/2026	N West	W Midlands	Single person - Flat/Terrace	£2391.56		Couple – Flat/Terrace		£3151.91	Single person – Semi Detached	£2540.19		Couples – Semi Detached	£3345.45		Single – Detached	£3093.15		Couples – Detached	£4072.94		Bills from Provider
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Disability-related expense item	Amount considered in assessment	Evidence required
Chiropody (based on an average of three chiropody visits in the area)	Actual cost up to a maximum £378.44 averaged over one year (equivalent to max £7.28 per week) if NHS chiropodist not available (based on 6 weekly visits).	Receipts, Bills
Travel and transport costs where Adult Social Care have confirmed that transport, to meet an eligible need, is necessary and proportional.	<ul style="list-style-type: none"> • If a person has a mobility car, check with the driver for consent and willingness to provide transport and if not, why? • Assess financial affordability, are there lower cost alternatives for the person, and the appropriateness of using these? • Direct the person to patient transport for health appointments. 	Bills/Receipts where applicable
Hair Washing (where the care and support plan identifies this as a support need and equipment considered): costs based on sample of hairdressers across the borough.	Actual cost paid for washing & drying service if service user can't do this, and it is not part of the care package. Actual average weekly cost up to £18.46 per week.	Bills/Receipts
Water Meter Charges (costs based to United Utilities guide to average costs)	<p>Metered amounts in excess of:</p> <p>Single person £395.58 per year</p> <p>Couple/family – Detached House £756.28 per year</p> <p>Couple/family – Semi-detached House £687.71 per year</p> <p>Couple/family – Other type of property £550.47 per year</p> <p>(For couples/families cost proportionately divided by the number of other adult household members).</p>	Bills
Continence products (where social care assessment confirms need and products are not available through the NHS). Costs Based on average price of pack of 28 pads (1300-1600 ml absorbency)	<p>Actual cost paid for waterproof under sheet / bed pads</p> <p>An amount of up to £12.60 per week for up to six weeks</p>	Bills/Receipts/Internet order history



Disability-related expense item	Amount considered in assessment	Evidence required
obtained from 3 companies. Average price per pad £0.30 x 6 pads per day	where buying own incontinence pads ahead of an NHS continence assessment. (Incontinence pads are available through the NHS Continence Service free of charge and may not be considered as an ongoing expense. Where a service user uses own incontinence pads in addition to those provided by the NHS the inclusion of the additional cost will be authorised by Adult Social Care.)	
Other disability related expenses [7]	Other specific disability-related expenses may be allowed with good reason and proof of costs.	Proof of costs required

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- [1] Registered with the Care Quality Commission (CQC) or other professional body.
 [2] May include cleaning, shopping, domestic tasks, basic garden maintenance (e.g., grass cutting)
 [3] Need confirmed by Adult Social Care or NHS
 [4] Divided by 500 to reflect a 10-year equipment life.
 [5] Divided by 250 to reflect a 5-year equipment life.
 [6] Mobility equipment cost allowed is net of any DLA/PIP mobility allowance received.
 [7] Related to disability will be considered based on individual needs.



RELATED DOCUMENTS / APPENDICES

There are currently no documents attached to this policy.



Accessing Cheshire West and Chester Council information and services

Council information is also available in audio, Braille, large print or other formats. If you would like information in another format or language, including British Sign Language, please email us at:

equalities@cheshirewestandchester.gov.uk

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Pokud byste požadovali informace v jiném jazyce nebo formátu, kontaktujte nás

Jeżeli chcieliby Państwo uzyskać informacje w innym języku lub w innym formacie, prosimy dać nam znać.

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如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。

Türkçe bilgi almak istiyorsanız, bize başvurabilirsiniz.

اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھیے۔

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