

SUNDERLAND CITY COUNCIL

CONTRIBUTIONS POLICY FOR ADULT SOCIAL CARE SERVICES

1 INTRODUCTION

- 1.1 The Contributions Policy has been designed to comply with the Care Act 2014, which provides a legal framework for charging for Adult Social Care.
- Section 14 of the Care Act provides Local Authorities with the power to ask adults to make a contribution for the cost of their social care.
 - Section 17 of the Care Act allows Local Authorities to carry out a financial assessment to determine the amount a customer can afford to contribute towards the care services they receive.
- 1.2 The policy has been designed in line with Care and Support Regulation (Statutory Instruments) and Care and Support Guidance and Annexes issued under the Care Act 2014.
- 1.3 This updated policy is effective from **7 April 2025**.

2 PRINCIPLES

- 2.1 The key principles of the policy are as follows:
- The personalisation of services and contributions;
 - Fairness for all customers;
 - The promotion of social inclusion and independence;
 - The calculation of contributions in a timely, efficient manner;
 - Calculations of contributions based on an ability to pay;
 - Calculations of contributions that are clear and easy to understand;
 - Contributions will not exceed the cost of providing the service, and they will not include any administrative costs relating to the calculation or collection of the contribution;
 - Compliance with the Care Act and related regulations / guidance;
 - Welfare benefits advice and assistance offered to all with the aim of maximising their income;
 - Commitment to Equal Opportunities through ensuring that no one is treated less favourably on the grounds of race, ethnicity, religion, marital status, disability, marital status, gender, sexuality or sexual orientation.

3 SERVICES COVERED BY THE POLICY

- 3.1 Sunderland's Contributions Policy covers all adults social care services, whether these are provided through a non-residential personal budget, or in a residential care setting.
- 3.2 This can include:
- Permanent placement in Residential or Nursing Care;
 - Direct Payments – and the range of services that can be purchased with them;
 - Services managed and provided through the Council, including:
 - Home Care;

- Day Care;
- Short Break or respite care in Residential or Nursing Care;
- Companionship;
- Shared Lives;
- Extra Care;
- Supported Living

3.3 The list of services provided in 3.2 is not exhaustive – personalisation offers customers the opportunity to develop their own flexible support plan to meet their own individual needs.

4 EXEMPTIONS TO THE POLICY

4.1 The policy will apply to all recipients of social care except where:

- Aftercare services are provided under Section 117 of the Mental Health Act 1983;
- The recipient is a sufferer of Variant Creutzfeldt Jacobs Disease;
- The support is provided as a Reablement Service and is for a period of 6 weeks or less.
- The service comprises the provision of an aid (i.e. equipment) or is an adaption to property that costs £1000 or less.

5 FINANCIAL ASSESSMENT

5.1 The financial assessment will be carried out, where possible, in advance of the provision of services.

5.2 The Financial Assessment will assess the customer's ability to pay, covering:

- Income;
- Capital;
- Allowable Housing Costs;
- Disability Related Expenditure (if applicable).

6 TREATMENT OF INCOME

6.1 Most forms of income (including most benefits) are taken into account. The following list contains the main income types that are taken into account; however this list is not exhaustive;

- AA – see 6.2;
- DLA Care Component – see 6.2;
- PIP Daily Living Component;
- Carers Allowance;
- Employment and Support Allowance
- Incapacity Benefit
- Severe Disablement Allowance
- Income Support
- Job Seekers Allowance;
- Pension Credit;
- State Retirement Pension;
- Industrial Injuries Disablement Benefit;
- Occupational (works) Pensions;
- Working Tax Credit (except for non-residential cases where it is fully disregarded);
- 'Tariff income' – see 7.3
- Universal Credit (less Payments made for housing or child costs)

6.2 AA and DLA Care will be assessed as follows:

- For those who are provided with care and support at home or in the community, the difference between the lower and higher rates of AA and the middle and higher rates of DLA Care Component will be disregarded unless services are provided at night time or if someone has access to 24-hour care in an Extra Care Scheme or Supported Accommodation, in which case the full rate will be taken into account;
- For those in Residential or Nursing Care it is included in full however, the benefit will cease after 4 weeks unless the customer is funding their own placement in full.

6.3 There are some income types that are fully disregarded – these are as follows:

- Earnings;
- Child Tax Credit;
- Child Benefit (except in circumstances where the adult is accompanied by the child for whom Child Benefit is paid, and accommodation is provided for that child under the Care Act);
- Pension Savings Credit for those provided care and support at home or in the community (See 6.4 for treatment in a residential care setting);
- DLA Mobility Component;
- PIP Mobility Component;
- War Disablement Pension;
- War Pensioners Mobility Supplement;
- War Widows Special Pre 1973 Supplementary Pension;
- Guaranteed Income Payments made under the Armed Forces Compensation Scheme to disabled ex-service personnel;
- Charitable or Voluntary Payments;
- Fostering Allowance;
- New Deal payments linked to work-based activity;
- Exceptionally Severe Disablement Allowance;
- Education Maintenance Allowance.

6.4 There are some income types that are partially disregarded – these are:

- The first £10 of War Widows and War Widowers pension, survivors Guaranteed Income Payments from the Armed Forces Compensation Scheme, Civilian War Injury pension, any War Disablement pension paid to non-veterans and payments to victims of National Socialist persecution (paid under German or Austrian law)
- For those living in a residential care setting, the full amount of Pension Savings Credit should be taken into account less a savings disregard if entitled which is based on qualifying income.

7 TREATMENT OF CAPITAL

7.1 Most forms of capital are taken into account. The following list contains the main capital types that are taken into account; however this list is not exhaustive:

- Bank / Building Society Balances;
- Stocks and Shares;
- Premium Bonds;
- National Savings Certificates;
- Income from any Trust Funds (except for any personal injury funds administered by the High Court, the County Court or the Court of Protection, which income is disregarded);
- The value of the customer's interest in a property that is not their main or only home.

7.2 A customer whose capital exceeds the upper capital limit – currently £23,250 (or £46,500 for a couple non-residential 'better off' assessments) – will be assessed as able to pay in

full for the service provided, as will a customer who fails to provide full details of their income and capital.

- 7.3 A customer who has capital between the upper and lower capital limit – currently £14,250 (or £28,500 for a couple non-residential ‘better off’ assessments) – will be assessed as having ‘tariff income’ of £1 per week for every £250 they have between the upper and lower capital limits.

8 TREATMENT OF PROPERTY

- 8.1 The value of a customer’s interest in their main or only home must be disregarded where:

- They are not in a care home;
- They are in a care home but the stay is temporary and either intend to return to their home or they are selling it in order to buy a more suitable home;
- They are in a care home but their home is occupied wholly or in part by a ‘qualifying relative’ (as defined – see 8.2), as their main or only home provided they have occupying it continuously since before the customer went into the care home.

- 8.2 A ‘qualifying relative’ is:

- The customer’s partner, former partner or civil partner, except where they are estranged;
- A lone parent who is the customer’s estranged or divorced partner;
- A relative defined in 8.3 who is either aged 60 or over or is a child of the customer or is incapacitated.

- 8.3 A relative in relation to a customer is a:

- Parent (including an adoptive parent), or their partner;
- Parent-in-law, or their partner;
- Son (including an adoptive son), or their partner;
- Son-in-law, or their partner;
- Daughter (including an adoptive daughter), or their partner;
- Daughter-in-law, or their partner;
- Step-parent;
- Step-son;
- Step-daughter;
- Brother;
- Sister;
- Grandparent;
- Grandchild;
- Uncle;
- Aunt;
- Nephew;
- Niece.

- 8.4 The Council has discretion to further disregard a property for those in a care home in the following circumstance:

- A relative, as described in 8.3, has resided in the property for over 5 years, but is not incapacitated, over 60 years old or under 18 years old. The property will be disregarded for as long as the person resides there.

- 8.5 If a property is taken into account in the financial assessment and the customer does not wish to sell their property or does not have access to funds, they can ask the Council for a Deferred Payment. This allows them to defer or delay some of their care costs and repay

them when the property sells or the customer dies (Details of the scheme can be found in the Deferred Payments Scheme).

9 DEPRIVATION OF ASSETS – CAPITAL, PROPERTY OR INCOME

- 9.1 Where the Council is satisfied that a customer has deprived themselves of capital, i.e. an asset, in order to avoid paying in full or in part for their care, they will be assessed as though they still own that asset. This could result in them being found to have capital in excess of the upper limit and so have to pay in full for their care.
- 9.2 The asset could be a property or savings or any other form of capital that has, for example, been given or otherwise transferred to another person or placed into trust.
- 9.3 Where the Council is satisfied that a customer has intentionally deprived themselves of income (this being income that would be available on application but has not been applied for) in order to avoid paying in full or in part for their care, they will be assessed as though they are in receipt of that income. This could result in them being found to have sufficient income to pay in full for their care.
- 9.4 In deciding whether there has been deprivation, the Council will take into account in particular if the customer was in receipt of services at the time or, if not, that they must have anticipated they would need services.

10 ALLOWABLE EXPENDITURE

- 10.1 For those customers in Residential Care, the Council does not take into account as income a Personal Expenses Allowance ('PEA') of £30.65 a week (and if they have entered into a Deferred Payment Agreement this can be up to £144.00 a week).
- 10.2 For those customers who are provided with care and support at home or in the community, the Council does not take into account, as income, a personal allowance that is equal to the Department of Health's Minimum Income Guarantee ('MIG') rates released each year based on age, disability and responsibility for children. The figures in the table below represent these rates i.e. they are the personal allowances.

Single Person	
£162.15	Single person under pensionable age in receipt of a qualifying disability benefit
£163.05	Single person under 25 in receipt of the highest rate of either DLA Care Component or PIP Daily Living Component
£186.40	Single person under pensionable age in receipt of the highest rate of either DLA Care Component or PIP Daily Living Component
£232.60	Single person over pensionable age
Couple	
£212.10	Couple under pensionable age where only one is in receipt of a qualifying disability benefit
£229.55	Couple under pensionable age where only one is in receipt of a qualifying benefit and they are in receipt of the highest rate of either DLA Care Component or PIP Daily Living Component
£247.50	Couple under pensionable age where both are in receipt of a qualifying disability benefit
£264.95	Couple under pensionable age where both are in receipt of a qualifying disability benefit and one is in receipt of the highest rate of either DLA Care Component or PIP Daily Living Component
£282.40	Couple under pensionable age where both are in receipt of a qualifying disability benefit and both and both are in receipt of the highest rate of either DLA Care Component or PIP Daily Living Component
£355.10	Couple over pensionable age

- 10.3 Also for those customers who are provided with care and support at home or in the community, housing related costs can be disregarded in the calculation. These costs are:
- Mortgage repayments
 - Rent and ground rent;
 - Council Tax
 - Service charges (but note that some are not disregarded)

- 10.4 For customers in residential care these costs are disregarded for up to 6 weeks while a decision is made as to whether they will remain in the home on a permanent basis.

11 DISABILITY RELATED EXPENDITURE

- 11.1 Disability Related Expenditure applies only to those customers in receipt of non-residential care and support – it is not applicable to those in residential care.

- 11.2 Where a customer is in receipt of a disability benefit that is being taken into account in their financial assessment (Disability Living Allowance Care Component / Attendance Allowance / Personal Independence Payment) and they have additional expenditure that relates directly to their disability or illness that are an assessed care need but not provided for in their care and support agreed budget, certain disregards can be made towards this.

Allowable rates are shown in Appendix One.

- 11.3 Any additional expenditure not covered in Appendix One can be requested (full evidence will be required) by the customer through a separate reconsideration process.

12 CONTRIBUTION CALCULATION

- 12.1 Once the financial assessment has been carried out in accordance with the sections described above, the Council will make a decision about how much they must pay for their care and support. The information detailed in sections 6 – 11 is gathered for each customer.

- 12.2 Where a customer has capital above the upper limit (see 7.2), they must pay in full for their care and support.

- 12.3 Where a customer has capital below the upper limit (see 7.2), the Council will carry out this calculation:

- Total of all income, including 'tariff income' from capital between the upper and lower limits (See 7.3);
- Less any disregarded income;
- Less their Personal Expenses Allowance or allowable expenditure;
- Less any agreed DRE (if applicable);
- Equals the assessed maximum contribution.

- 12.4 If a customer has been assessed to pay the full cost maximum contribution, they will pay no more than the actual cost to the Council of their care and support services (which does not include any contribution from the NHS).

13 NOTIFICATION OF CONTRIBUTION

- 13.1 Once the financial assessment process is complete, the customer will be notified, in writing, of their assessed maximum personal weekly contribution by the Council's Social Care Financial Assessment Team. The customer will also be informed of the actual weekly contribution by the team when services have been agreed and authorised by the Adult Social Care Team.

- 13.2 The customer will also be informed that their maximum personal annual contribution will be collected and used towards meeting the cost of their care before the Council makes any financial contribution, but they will never pay more personal contribution than the cost of the care they receive.

14 PAYMENT OF CONTRIBUTION

- 14.1 Payment of contribution by the customer will commence from the date that service commences. For those in residential or nursing care, this is the date of admission.
- 14.2 For those customers in residential or nursing care, you will receive an invoice confirming any amounts due from start of service and the payment to be made to the Council on a weekly basis thereafter. An alternative payment frequency can be set to fortnightly, 4-weekly, monthly or annual if this better meets the customer circumstances.
- 14.3 For those being provided with care and support at home or in the community, payment is to be made as follows:
- Customers who receive direct payments in order to pay for their care and support will receive their payment net of any contribution they are required to make.
 - Customers who receive services managed or provided by the Council will receive an invoice confirming the amount they are required to pay on an annual basis, which can be paid in manageable instalments at an agreed frequency.

15 RECONCILIATION OF PAYMENTS (CUSTOMER'S PROVIDED WITH CARE AND SUPPORT IN OWN HOME OR IN THE COMMUNITY)

- 15.1 Where a customer is required to make a financial contribution towards the cost of their care and this care ends, a reconciliation process will be undertaken. The reconciliation process will compare the cost of the services the client has received to the amount of their personal annual contribution that has been paid at that point in time.
- 15.2 If the reconciliation process confirms that the customer has paid more personal annual contribution than the cost of the services they have received they may receive a refund.
- 15.3 If the reconciliation process confirms that the amount of personal annual contribution paid by the client at that point is less than the cost of the services they have received the customer will be expected pay the difference, up to their maximum personal annual contribution.

16 REVIEW OF CONTRIBUTIONS

- 16.1 Each customer's contribution will be reviewed periodically but no more often than annually or sooner if their circumstances change.

17 RECONSIDERATION / APPEAL

- 17.1 If a customer considers their financial assessment is incorrect or that they cannot afford to pay the assessed contribution they can ask for this decision to be reconsidered and the outcome will be determined by a panel including a Senior Manager from Adult Social Care in the Council. This can happen following the initial financial assessment or following a review, whether an annual review or because of a change of circumstances.
- 17.2 If the customer is unhappy with the outcome of the reconsideration, the customer can request an appeal against this decision. The outcome of the appeal will be determined by a panel including the Head of Adult Social Care in the Council.

APPENDIX 1 – DISABILITY RELATED EXPENDITURE (NON-RESIDENTIAL SERVICES)

Introduction

The Care and Support Statutory Guidance by the Department of Health and Social Care (DHSC) state where disability related benefits are taken into account in a financial assessment for adult social care and support services in the community, the local authority should consider making an allowance for any necessary disability related expenditure to help meet assessed care needs which are not being met by the local authority.

What is Disability Related Expenditure?

These are additional costs that are incurred or that arise because of someone's disability, impairment, or long-term illness.

People may have to spend money on items and / or services that help them manage or cope with their disability, impairment or long-term illnesses assessed care needs.

These costs are called Disability Related Expenditure (DRE).

Eligibility for Disability Related Expenditure

To qualify for DRE, someone must be in receipt of one of the following: Disability Living Allowance (Care Component), Personal Independence Payment (Daily Living Component) or Attendance Allowance and these benefits are taken into account in the financial assessment for adult social care and support services. If someone is only in receipt of Disability Living Allowance (Mobility Component), Personal Independence Payment (Mobility Component) then travel and mobility-related expenses can only be considered.

The person's adult needs assessment and care and support plan should also clearly identify any disabilities or medical conditions which demonstrate the need for DRE. The care and support plan will be used as a starting point for considering DRE allowances.

Evidence will need to be provided for DRE requested. DRE requests which are identified as excessive, then a comparison of three suppliers will be carried out and an average of this cost will be considered as a DRE request.

Financial Assessment

A Caseworker will complete the financial assessment for adult social care and support services to identify how much they should pay towards these services.

This contribution is based on someone's income, benefits, and capital assets (less any income, benefits or capital that should be disregarded) that are taken into account in the assessment.

A personal allowance that is equal to the Minimum Income Guarantee (MIG) rates as set out in the DHSC's Care and Support (Charging and Assessment of Resources) Regulation 2014 each year is deducted along with any eligible housing related costs and DRE if applicable.

The remaining amount is your assessed maximum contribution. The financial assessment will be reviewed annually each year on the anniversary of the financial assessment along with any DRE previously allowed.

Reconsideration and Appeal process

If someone disagrees with the assessed maximum contribution or treatment of DRE, they can ask for a reconsideration, they should state why they disagree and provide evidence to support the request wherever possible. This will be considered by a senior manager in the council.

If someone disagrees with the outcome of the reconsideration, they can ask for an appeal, they should state why they disagree with the outcome and provide any further evidence to support the appeal wherever possible. This will be considered by the Head of Adult Social Care or Director of Adult Services.

Bedding / Mattress Protectors

This expenditure may be allowed as DRE where this is demonstrated as a need within the Care and Support Plan.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Replacement Bedding above average Mattress Protectors above average	Excluding any incontinence aids, which can be considered under the Incontinence aids section (see below)	More than - £69.50 per year, capped at £2.50 per week	Care and Support Plan Receipts	NAFAO

Carers/Befrienders - Meals/Refreshments

This expenditure may be allowed as DRE where this is an assessed care need within the Care and Support Plan and there are no funds received for these items within the Personal Budget.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This expenditure may be allowed as DRE where this is an assessed care need, agreed by Adult Social Care and not covered by any Personal Budget.	Not Allowable: Family and Friends Where this is covered in the Personal Budget	Max of £5.00 per meal per day if applicable	Evidenced in the Care and Support Plan and agreed by Adult Social Care Clarification of why it is necessary for cost of carers meal to be included Receipts	

Chiropody

This expenditure may be allowed as DRE where this is demonstrated as a need within the Care and Support Plan and/or confirmed by GP.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
If GP confirms treatment is essential and not provided free by the NHS Customers must request this service from the NHS and if this service can not be provided then this could be considered.	Not Allowable: If provided free of charge from NHS Manicure / Pedicure Limitations: If this is provided Free by NHS, evidence why this service is not appropriate or available Normal allowance up to 3 times per year	Up to the cost of the service, up to 3 times per year	Invoice/Bill	

Clothing and footwear (wear and tear)

This expenditure may be allowed as DRE where the excessive wear and tear is evidenced within the Care and Support Plan.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Replacement clothing due to your disability / medical conditions, where supported / evidenced within the Care and Support Plan	Not Allowable: General Wear and Tear	Clothing and Footwear: In excess of £6.27 per person/per week Capped at £8.73 per/person per week Clothing Only: in excess of £5.36 Capped at £3.37 Footwear Only: in excess of £0.91 Capped at £5.36	Care and Support Plan Receipts 3 months initial Assessment- to be reviewed annually	Office for National Statistics

Court Appointed Deputyships

If this has been incurred due to illness or disability and it is evidenced within the care and support plan that there is no mental capacity.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Not Allowable: Lay Deputies (Family / Friends) costs	Up to the cost of the one-off fees, calculated over a 52-week period agreed by the Court of Protection Up to the cost of the Annual Fee agreed by the Court of Protection	Invoice/Receipts (Proof of payment)		

Dietary Requirements

This expenditure may be allowed as DRE where this is demonstrated as a need within the Care and Support Plan and/or confirmed by GP. This will be a discretionary allowance as this may not be more expensive than a 'normal' diet.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Products purchased due to disability / medical condition	Not Allowable: A low fat, high fibre healthy diet is not a special dietary requirement. Fresh fruit and vegetables are part of a normal healthy diet. Additional amounts for diabetic foods without confirmation from GP as it can be controlled by healthy diet. Meals on wheels or ready meals/ Meal	Spend in excess of £25.18 (average spend per week/per person) before consideration can be given for disability/medical	Care and Support Plan Receipts – Identified Items	Office for National Statistics

	<p>delivery services (inc. weight loss/convenience meals) Products supplied by NHS</p> <p>Limitations: Spend more than £25.18 on food per week/per person (excluding alcohol) before consideration can be given for disability/medical related items. All items considered would need to be part of a specialist diet and more expensive than regular products. Only the cost difference of the items may be considered</p>	related items and the cost difference of the item may be considered		
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Domestic Care - Cleaning

This expenditure may be allowed as DRE where this is an assessed care need within the Care and Support Plan and there are no funds received for these items within the Personal Budget.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
<p>Assessed Need within Care and Support Plan and not paid within Personal Budget</p> <p>Limited to formal arrangements with a registered provider / self-employed person</p> <p>Standard Clean Only</p>	<p>Not Allowable: If in Care and Support Plan and this is an assessed need - and it is provided in the personal budget</p> <p>If this is not an assessed need within the care and support plan</p> <p>Limitations: No allowance will be given if provided by friends and family unless in exceptional circumstances and agreed and evidenced within Adult Social Care records</p>	<p>If provided by Friends and Family allowance up to £15.75 per hour</p> <p>If provided by Private Agency (formal arrangement) allowance up to £22.92 per hour</p>	<p>Evidenced within the Care and Support Plan</p> <p>Invoices/Receipts</p> <p>Payment for friends and Family - evidence of payments i.e. bank transfers/statements</p>	Local Authority

Domestic Care - Shopping

This expenditure may be allowed as DRE where this is an assessed care need within the Care and Support Plan and there are no funds received for these items within the Personal Budget.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
<p>Assessed Need within Care and Support Plan and not paid within Personal Budget Limited to Formal Arrangement (i.e. not friends and family, must be a registered provider)</p> <p>Limited to formal arrangements with a registered provider / self-employed person</p>	<p>Not Allowable: If in Care and Support Plan and this is an assessed need - and it is provided in the personal budget If this is not an assessed need within the care and support plan</p> <p>Limitations: No allowance will be given if provided by friends and family unless in exceptional circumstances and agreed and evidenced within Adult Social Care records</p>	<p>If provided by Friends and Family allowance up to £15.75 per hour</p> <p>If provided by Private Agency (formal arrangement) allowance up to £22.92 per hour</p>	<p>Evidenced within the Care and Support Plan</p> <p>Invoices/Receipts</p> <p>Payment for friends and Family - evidence of payments i.e. bank transfers/statements/receipts</p>	Local Authority

Equipment				
This expenditure may be allowed as DRE providing this has been identified in the Care and Support Plan and there is a contribution to be made by the customer.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
<p>Equipment purchased can be allowed if this is evidenced in the care and support plan and is not provided free of charge</p> <p>Ongoing Maintenance costs can be allowed if this is evidence in the care and support plan and is not provided free of <i>charge</i></p>	<p>Not Allowable: No allowance will be made for equipment where a customer assessed needs in this area are to be met by the council and partner agencies and provided free of charge</p> <p>If customers choose to purchase equipment of a higher specification than they have been assessed as needing by the Council / NHS, then this is considered as a lifestyle choice and will not be given as an allowance</p> <p>Limitation: Consideration to be given if the waiting times for LA assistance to provide this are lengthy and the requirement for the equipment is urgent.</p> <p>This should be agreed and confirmed by the social worker/OT</p>	<p>If weekly payment plan set up for the purchase of the equipment, then allowance for the actual weekly payment can be applied</p> <p>However, if the purchase of equipment was paid for in full, then divide over agreed period i.e. 1 year, then allowance will be removed</p>	<p>Receipts yearly ongoing maintenance</p> <p>Invoice</p>	Local Authority / NFAFO Guidance
Gardening				
This expenditure may be allowed as DRE providing that the need for the gardening has been identified within the Care and Support Plan.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
<p>Based on cost of maintaining to a basic standard, i.e. Pruning, weeding, mowing lawn and general tidy</p> <p>Limited to formal arrangements with a registered provider / self-employed person</p>	<p>Not Allowable: If someone else lives in the property and they are considered 'able' to undertake</p> <p>Limitations: No allowance will be given if provided by friends and family unless in exceptional circumstances and agreed and evidenced within Adult Social Care records.</p>	<p>If provided by Friends and Family allowance up to £15.75 per hour</p> <p>If provided by Private Agency (formal arrangement) allowance up to £22.92 per hour</p>	<p>Evidenced within the Care and Support Plan</p> <p>Invoices/Receipts</p> <p>Payment for friends and Family - evidence of payments i.e. bank transfers/ statements</p>	Local Authority
Gas and Electricity				
This expenditure may be allowed as DRE. Any allowance will be based on the rates shown. These are based on average heating costs for properties in the North East. If a customer spends more on fuel (due to their disability) than the relevant threshold amount the council will take this additional expenditure into account providing proof of expenditure incurred can be provided.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference

Any amount of household fuel costs over and above that of the rates identified below for relevant accommodation type	Not allowable: No debt included in payments No Higher than required (usage) direct debits	See below	Bills Annual Review - needs to be a years' worth The last 4 quarters fuel bills, but the council may choose to exercise its discretion and allow expenditure based on acceptable proof of payment Instalment plans	Office for National Statistics (ons.gov.uk)
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These rates have been frozen to last years rates (2022/23):

Accommodation Type	Annual Cost	Monthly Cost	Weekly Cost
Single person - Flat/Terrace	£1,559.22	£129.94	£29.99
Couple – Flat/Terrace	£2,055.05	£171.25	£39.52
Single person – Semi Detached	£1,656.11	£138.01	£31.85
Couples – Semi Detached	£2,180.90	£181.74	£41.94
Single – Detached	£2,013.54	£167.80	£38.72
Couples – Detached	£2,654.08	£221.17	£51.04

Gym membership / Cinema Visits / Swimming

This expenditure is not allowed as DRE.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This expenditure is not allowed	N/A	N/A	N/A	N/A

Hairdressing

This expenditure is not allowed as DRE.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This Expenditure is not allowed	N/A	N/A	N/A	N/A

Holidays (Carers accompanying)

This expenditure may be allowed as DRE where this is an assessed care need within the Care and Support Plan and there are no funds received for these items within the Personal Budget.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Costs associated to the Carer supporting you on Holiday (via an agreed care provider) and is	Not Allowable: Payments for / towards Family and Friends	Up to the actual cost of the holiday for the carer	Receipt / Invoice of holiday	

evidenced in the care and support plan as an assessed need and agreed by Adult Social Care	Limitations: Reasonable actual cost for 1 carer only, for 1 holiday per year, in any given 12-month period	(accommodation / travel ONLY)		
Holidays (customer)				
This expenditure is not allowed as DRE.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This expenditure is not allowed	N/A	N/A	N/A	N/A
Incontinence Aids				
This expenditure may be allowed as DRE providing this has been identified as an assessed need in the Care and Support Plan. However, a continence assessment should be requested by the customer, from the NHS prior to requesting anything over the capped amount.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
NHS/CCG provision is exceeded or unsuitable (will be required to be confirmed within the Care and Support Plan via the Social Worker)	Not Allowable: Where the items provided are suitable by the NHS/CCG	Capped at max of £10.00 per week	Receipts	
Internet Provider Costs				
This expenditure may be allowed as DRE providing this has been identified in the Care and Support Plan.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Where this has had to be installed to support you i.e. Assisted Technology	Not Allowable: If this was already present in the property and you were paying for this, prior to the assessed need being identified. If this is not due to your disability	£5.31 per week	Evidenced within the Care and Support Plan Bills - showing breakdown of all costs	Comparison of Virgin, Talk Talk, Sky and Plus Net
Laundry				
This expenditure may be allowed as DRE where this is demonstrated as a need within the Care and Support Plan, i.e. where incontinence has been identified.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Average use – 4-8 loads per week High use – over 8 loads per week	Not Allowable: 0 - 4 loads per week	4 - 8 Loads £4.86 Over 8 loads additional 75p per load	Care and Support Plan Medical letter to support	

Life Insurance, Medical Insurance / Sickness Insurance				
This expenditure is not allowed as DRE.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This Expenditure is not allowed	N/A	N/A	N/A	N/A
Mobile Phone Contracts				
This expenditure is not allowed as DRE.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This expenditure is not allowed	N/A	N/A	N/A	N/A
Pre Payment Cards – Specific to Financial Safeguarding Team (FST) Customers				
This is a method used by FST customers to enable them to receive payments				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
The total amount for the cost of the card can be allowed	Allowed			
Prescription Charges				
This expenditure may be allowed as DRE where the items required are not provided free. The medication must be required because of the customer's recognised disability / illnesses and acceptable proof of expenditure provided, in the form of receipts, copies of repeat prescriptions or other similar details.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
<p>The amount that can be allowed where the item is on prescription but not free and is the lower of the following 2 amounts:</p> <p>The cost of an annual season ticket apportioned over the year</p> <p>The cost of actual prescriptions up to the cost of an annual season ticket</p>	<p>Not Allowed: Where provided by the NHS free of charge</p> <p>Limitations: Discretionary allowance can be given for small items of medication is purchased without prescription (for example paracetamol /other painkillers or indigestion remedies)</p>	Capped at the cost of the annual NHS Season Ticket which is £2.20 per week / £114.50 per year	<p>Pre-Paid Prescription Receipt/payments</p> <p>Receipts (for non-prescription medication i.e. paracetamol)</p>	NHS Pre Payment Certificate
Privately Arranged Personal Care				
This expenditure may be allowed as DRE where this is an assessed care need within the Care and Support Plan and there are no funds received for these items within the Personal Budget.				
Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference

Assessed Need within Care and Support Plan and not paid within Personal Budget Limited to formal arrangements with a registered provider / self-employed person	<p>Not Allowable: If in Care and Support Plan and this is an assessed need - and it is provided in the personal budget</p> <p>If this is not an assessed need within the care and support plan</p> <p>Limitations: No allowance will be given if provided by friends and family unless in exceptional circumstances and agreed and evidenced within Adult Social Care records</p>	<p>Friends and Family allowance up to £15.75 per hour</p> <p>Private Agency (formal arrangement) allowance up to £22.92 per hour</p>	<p>Care and Support Plan</p> <p>Invoices/Receipts</p> <p>Friends and Family - evidence of payments i.e. bank transfers/statement</p>	Local Authority
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Replacement Mattress / Bed

This expenditure is not allowed under DRE

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This Expenditure is not allowed	<p>Not Allowable: Mattresses and Bed frames</p> <p>Limitations: Mattress Protectors to be considered as above</p>	N/A	N/A	N/A

Specialist clothing and footwear

This expenditure may be allowed as DRE where the specialised clothing is evidenced within the Care and Support Plan.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Specifically Made Alterations needed due the Disability	<p>Not Allowable: Cost of specialist clothing if in receipt of War Disablement Pension, as this income includes an allowance for clothing (this income is disregarded in FA)</p> <p>Where provided by the NHS/free of charge</p>	<p>Combined: In excess of £6.27 per person/per week up to the full cost of the item per / person per week</p> <p>Clothing Only: in excess of £5.36 Up to the full cost of the item</p> <p>Footwear Only: in excess of £0.91 Up to the full cost of the item</p>	<p>Evidenced in the Care and Support Plan</p> <p>Supported by GP/Medical Letter</p> <p>Receipts</p>	Office for National Statistics

Telecare and Community Alarms

This expenditure may be allowed as DRE only where the social worker / care manager has identified the service as an assessed care need.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
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Where this has had to be installed to support i.e. Assisted Technology	Limitations: The customer cannot use any of their personal budget to pay for the Telecare or the social worker / care manager cannot increase the customer's personal budget to cover this cost. In these circumstances the actual costs will be considered.	Standard rate of Telecare - £6.65 Per Week	Evidenced within the Care and Support Plan Bills - showing breakdown of all costs	Local Authority Rates
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Telephone Line

This expenditure may be allowed as DRE providing this has been identified in the Care and Support Plan.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Not Allowable: If this was already present in the property and you were paying for this, prior to the assessed need being identified. If this is not due to your disability	£5.10 per week	Evidenced within the Care and Support Plan Bills - showing breakdown of all costs	Comparison of BT / Direct save telecom Higher rate used	

Travel/Transport Costs

This expenditure may be allowed as DRE where evidenced in the Care and Support Plan.

Any allowance made will also be reduced by the amount of Disability Living Allowance/Personal Independence Payment (PIP) Mobility Component in payment, or other travel concession.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Regular Medical Appointments: Where it is not reasonable for the NHS free transport service to be used Social Inclusion: If in Care and Support Plan and this is an assessed need - however no element provided in the personal budget	Not Allowable: Purchase of Vehicles / Hire Purchase / Loans / Insurance Limitations: Medical Appointments: If transport can be provided free of charge - i.e. Hospital/Patient Transport if reasonable Social Inclusion: if not in the Care and Support Plan and not an assessed need - not considered as DRE Will not include social inclusion if you are receiving payment within your personal budget, specifically for social inclusion transport costs	Petrol Costs/Mileage Allowance: 45p per mile not exceeding the full cost of the travel, this will be allowed on all journeys including if you wish to travel by taxi or any other alternative method	Petrol VAT Receipts Medical Appointment Letters Taxi Receipts Bus Fare/Tickets/Pass	Local Authority

Water

This expenditure may be allowed as DRE. Any allowance will be based on the rates shown. These are based on average Water costs for properties in the North East. If a customer spends more on Water (due to their disability) than the relevant threshold amount the council will take this additional expenditure into account providing proof of expenditure incurred can be provided.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
Metered Water Only - evidence linked to disability	<p>Not Allowable:</p> <p>Unmetered Water</p> <p>No debt included in payments</p> <p>No Higher than required (usage) direct debits</p>	See below	Water Bills Annual Review - needs to be a years' worth	Northumbria Water

No. of people living in the property				
1	2	3	4	5+

Average user				
• Frequent showers/few baths				
• Regular use of washing machine	£213	£278	£334	£390
• No dishwasher				
• No hosepipe				

These figures are annual costs

Window Cleaning

This expenditure is not allowed as DRE.

Allowable DRE Expenses	Not Allowable DRE Expenses / Limitations	Value/Cap	Evidence	Reference
This expenditure is not allowed	N/A	N/A	N/A	N/A

Other / Miscellaneous

The above list may not cover all the items that can potentially be classed as a DRE. Therefore, the council invites customers who think that their disability related expenses are not taken into account by the above to write in and provide further details of these expenses, proof of expenditure, why they need to be incurred and how it links into your disability.

The Department of Health and Social Care (DHSC) statutory guidance recognises that customers may consider other expenditure not covered by council schemes to be related to their own disabilities and gives councils some discretion in this area.