

Charging Policy – Annex C – Disability Related Expenses

Disability Related Expenses (DRE) will be considered for customers in receipt of disability benefits such as Attendance Allowance and Disability Living Allowance care component or Personal Independence Payment (Daily Living Component). A weekly figure of £10 will be assumed as a DRE in each assessment where someone is in receipt of either of these benefits and submits on the assessment form that they incur disability related expenses. Anyone in this situation who feels they have DRE's over £10 per week will be able to submit evidence for each cost.

These will be allowed up to a maximum level, which is set at the lower level of Attendance Allowance/ middle level Disability Living Allowance or Allowance or Standard - Personal Independence Payment (Daily Living Component).

Customers with higher expenses due to extenuating circumstances will still be considered on an individual level.

Customers submitting receipts for higher costs will need to follow the following policy. Annex D provides further information on National Association of Financial Assessment Officers (NAFAO) guidelines.

ITEM	AMOUNT	EVIDENCE REQUIRED
HEATING ALLOWANCE	As per NAFOA guidelines	Bill from the provider –
	(Annex D)	covering a period of a
	Calculated on the	minimum of 6 months.
	difference between the	If bills were not retained,
	NAFAO figure for the year	copies are to be provided
	and actual fuel payment	
	divided by 52	
COMMUNITY ALARM	Actual cost unless	Bills from provider or
SYSTEM	included in Housing	proof of payment (e.g.
	/benefit or Supported	bank statement) for a
	People Grant	period covering at least 4
		weeks. If provided by
		Mascot, amount can be
		checked on services
		user's Ash Billing Account



ITEM	AMOUNT	EVIDENCE REQUIRED
DIETARY NEEDS	Additional costs of special dietary needs due to illness of disability. Discretionary as special dietary needs will not necessarily be more expensive than normal	Details and bills of special purchases covering a period of at least 8 weeks
BASIC GARDENING	Reasonable costs of basic garden maintenance if necessitated by the users disability or illness and not met by social services. Consideration of whether the costs are reasonable would take into account the capacity of the user, the circumstances and health of others living in the household, the availability of voluntary help and the size of the garden. Also seasonal fluctuations have to be taken into account.	Evidence of purchase
POWERED BED / TURNING BED	As per NAFAO guidelines Actual cost devided by 500 (10 year life) up to NAFAO current maximum (see Annex D)	Evidence of purchase
POWERED RECLINING CHAIR	As per NAFAO guidelines Actual cost devided by 500 (10 year life) up to NAFAO current maximum (see Annex D)	Evidence of purchase
STAIRLIFT	As per NAFAO guidelines Actual cost divided by 500 (10 year life) up to NAFAO current maximum	Evidence of purchase without Disabled Facility Grant
HOIST	As per NAFAO guidelines Actual cost divided by 500 (10 year life) up to NAFAO current maximum	Evidence of purchase without Disabled Facility Grant



ITEM	AMOUNT	EVIDENCE
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SPECIALIST HOLIDAYS	Actual additional cost in excess of normal costs for a similar holiday divided by 52. Consider companion's actual travel costs if service user is unable to go out alone and this is noted in assessment	Evidence of actual cost of comparison purposes. Discretion of normal cost
PRESCRITIONS	Cost of a prepay ticket divided by 52 or actual cost of prescriptions, whichever is the less	Evidence of purchase
EXTRA TOILETRY/CLEANING/WASHING POWDER COSTS	Actual additional cost n excess of normal costs (more that 4 loads per week or specialist washing powders) up yo NAFAO current maximum guidelines (see Annex D)	Bills for a period covering at least 4 weeks if Care assessment has identified an incontinence problem where NHS supplies cannot be used or are inadequate or skin allergy aggravated by ordinary washing powders.
SPECIAL CLOTHING/SHOES/BEDDING	Actual additional cost in excess of normal costs (more expensive than for people who are not disabled). For bedding actual cost based on average cost of replacing 4 times per year.	Evidence of purchase covering a period of at least 6 months. Care plan should refer to identified needs, such as abnormal wear and tear on clothing or footwear specially made or adapted for disability or additional cost of bedding, for example, because of incontinence



ITEM	AMOUNT	EVIDENCE
	AIVIOUNT	REQUIRED
MOBILITY NEEDS	Actual Cost	Bills for a period covering at least 4 weeks. Travel costs net of any DLA mobility component, travel concessions and Taxicard scheme will be allowed if they are incurred solely or mainly due to the Service User's disability, only by the Service User and where the need is identified in the assessment
WHEELCHAIR	As per NAFAO guidelines Actual cost divided by 500 (10 year life) up to NAFAO current maximum (See Annex D)	Evidence of purchase. No allowance if equipment provided free of charge.
PHYSIOTHERAPIST	Actual cost, if identified in care assessment and NHS physiotherapist not available or if physiotherapist provides note stating that treatment is a requirement.	Receipts for a period of at least 8 weeks
CHIROPODIST/PODIATRIST	Actual cost if identified in care assessment and NHS chiropodist/podiatrist not available	Receipts for a period of at least 8 weeks
HAIR WASHING	Actual cost of washing & drying only if identified in care assessment	Receipts for a period of at least 8 weeks



ITEM	AMOUNT	EVIDENCE REQUIRED
PRIVATELY ARRANGED CARE	Actual cost if included in care assessment and LBM care is reduced accordingly	Signed receipts for at least 4 weeks using a proper receipt book. Payments to immediate members of the family or friends cannot be taken into account.
PRIVATE DOMESTIC HELP	Actual cost if included in care assessment and LBM care is reduced Accordingly.	Signed receipts for at least 4 weeks using a proper receipt book. The cost of private cleaning should be allowed when they are not provided through social services, for cleaning which the user is unable to do for himself, where there is no other member of the household who can reasonably be expected to carry it out.