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Tips on completing the Disability Living Allowance form

On this page is a brief explanation of some of the more difficult parts of the DLA1A Child form with comments about the kind of information to include.

It is important to read all the questions carefully. It is also worth reading the information booklet that comes with the form and using the 'daily diary' sheet at pages 29-31 of the booklet.

Take your time and don't try to finish it in one go. Give as much information as possible, and read through the form before you send it to make sure you've answered everything.

Please remember that a decision on your child's claim will be made by someone who has never seen your child and who may have little or no knowledge about your child's condition. It is important that you make clear all the extra care and support that your child needs - don't assume that the decision maker will already have this understanding.

Questions 1-18: General information about your child

These questions gather general information about your child including details about their identity, nationality, disability, and details of any medical or health professionals involved in their care. This section also asks you about any stays your child has had in hospital or residential care within the last 12 months.

Question 20: Statement from someone who knows the child

A paid carer, relative or friend, health care professional, social worker or a teacher can fill this in. Ideally, it should be written by a professional with regular involvement in your child's care, like a medical specialist, or if your child's needs are mainly to do with learning, ask a specialist teacher.

It is very important to check that the statement is supportive and not harmful to the claim. Copy the blank statement page and give it to the person writing the statement. You can attach it to your claim. If you're unhappy with what they have said, you can ask them to change it, but if they won't, you can ask another professional to write this part or just leave it blank.

Question 22: Your child's illnesses or disabilities

You don't need to enter a lot of detail here, but make sure you write the name of each condition your child has been diagnosed with, for example 'ADHD' or 'Down syndrome'.

If your child doesn't have a diagnosis, or if they have difficulties separate from a diagnosis you've already mentioned, put a general description of these too (for example 'eating and feeding problems' or 'behavioural problems').

Question 24

If your child's condition varies, you can still get DLA as long as there is a pattern of substantial care needs or mobility problems. They might have days or weeks when they need less help.

When filling in the form, tick any of the boxes which apply to your child, even if it doesn't apply all the time. You can explain more about any variation in needs in the boxes below each set of tick box questions and at question 65 about 'more information'.

It is a good idea to keep a diary over a period of a week or longer if your child's condition varies a lot.

Use the terms 'bad days' and 'better days' to describe the changes in your child's condition if they have a fluctuating condition. Using terms like 'good days' or 'normal days' can imply your child needs no extra help on these days.

Questions 25-36: Mobility

Remember, help with mobility applies to children whose problems getting around are caused by learning or behavioural conditions, as well as children with a physical disability.

If your child has physical problems which affect their walking outdoors, you should answer questions 25-31 and questions 33-36.

If your child can walk it is important to describe how they walk (for example with a limp or shuffle).

List the effects walking has on their condition. This may include fatigue, breathlessness or nausea, or that walking makes their condition worse.

When assessing how far your child can walk, remember that any distance covered after they've started to feel severe discomfort is not counted. Ask yourself:

- does your child walk more slowly than other children of the same age?
- does their manner of walking make it difficult to get along?
- do they get uncomfortable or tired after a short distance?
- do they fall or stumble a lot?
- does the effort of walking seriously affect their health?

If your child can walk but needs guidance or supervision, you should answer questions 32-36.

The notes on page 13 of the form suggest that you should only complete questions 32-34 if your child is aged five or over. But if your child is aged three or four and has severe behavioural

problems or refuses to walk, you should fill in these questions. Some children with learning disabilities or autism spectrum disorders can qualify for higher rate mobility because of severe behavioural problems from age three.

Think about why your child needs more guidance or supervision than children the same age:

- does your child have behavioural problems which could lead to danger?
- do they have a learning or communication problem which means they could get lost or are more vulnerable to danger?
- does your child have a visual or hearing impairment and need extra help with following directions and avoiding obstacles?
- does your child's hearing impairment mean they can't hear dangers coming from behind?
- are they likely to stumble or fall without someone's help?

Help with mobility applies to children whose problems getting around are caused by learning or behavioural conditions, as well as children with a physical disability.

Question 32

Also asks about unpredictable behaviour, the need for restraint and refusal to walk. These questions relate to the higher rate mobility and severe behavioural problems.

If this describes your child's behaviour then it is important to give as much detail as possible. Here are some examples:

- does your child regularly refuse to walk, or do they have to go through rigid regimes to get anywhere?
- do they get distressed and likely to hit out at you or other people, or harm themselves in some way?
- do they run away suddenly without attention to dangers like traffic?

Question 36

This asks you the date your child first started to have the problems with getting around you have described. Your child must have had mobility problems for at least three months before they can get any payment of the mobility component. An exception to this is made if a child is terminally ill under the special rules.

Questions 37-55: Your child's personal care needs

These sections cover the extra help your child needs with their day-to-day care. Fill them in not only if your child needs physical help or support but also if they need encouragement or verbal prompting, with tasks.

Try to think about how your child's needs differ from a child of the same age without any disabilities. Make clear if you have to do more to help your child or if things take longer to do.

Question 37: Getting into and out of bed

Explain any discomfort your child experiences because of pain or stiffness when waking up.

They may be physically unable to get out of bed without help. Or they might not have the motivation to get up because of their condition and need lots of reassurance and persuasion to get out of bed. Medication may also affect your child's sleep and waking up.

Explain if you have to get up straight away in case they do something dangerous or are disruptive.

Think about similar difficulties when going to bed. Your child may still be wide awake when put to bed or refuse to settle.

Explain what help you give them to overcome this, like comfort and reassurance techniques, or medication, or treatments. You should also say how long this takes.

Question 38: Toileting needs

You will need to explain any difficulties during the night at Question 53. As well as writing about what help you give your child to stay clean and manage their continence (washing, bathing, applying creams, changing pads, checking clothing or changing bedding), you also need to give information about any difficulties. These can include:

- more frequent bowel movements or episodes of wetting
- any resulting pain or distress
- constipation
- problems with transfer to and off the toilet
- not wiping themselves
- playing with faeces or missing the toilet
- problems with undoing zips or buttons
- taking underwear or clothing on and off
- prompting and reminding your child to use the toilet and to wash their hands afterwards
- help with any equipment
- refusing to use the toilet.

Question 39: Your child's needs when moving about indoors

Include here a description of the help your child needs getting around inside. For example, your child may have mobility difficulties that mean they:

- need extra help moving from room to room, or
- getting on and off chairs and other furniture, or
- getting up and down internal stairs, or

- need help transferring in and out of a wheelchair they use indoors, or
- if they have a visual impairment they might need help to get around safely
- if your child does not have mobility problems indoors they might need prompting to move around, or reminded which room to go to, or they might need you to go with them.

Question 40: Bathing, showering and hygiene

Washing and bathing includes all issues with personal hygiene.

Your child may need extra help bathing, washing, or showering and they might take longer than other children of the same age. For example:

- they may need help to stand to wash or shower
- if they're sensitive to touch, then brushing teeth or hair may be painful so could take longer
- you might have to supervise them while they bathe or wash, if for example, they can't tell the difference between hot and cold, and risk being burnt
- your child may refuse to get in or out of the bath or may be too tired
- they may need to wash more often than other children, or you may need to remind and encourage them to wash
- washing and bathing may be difficult because of dressings, or a line into a vein that needs to be kept dry or sterile
- or you might need to take off other equipment which makes it more difficult for you to communicate with your child.

Question 41: Getting dressed or undressed

Include things like:

- help your child needs with fastenings like buttons, zips, buckles and laces which may be painful or problematic for them
- help they need if reaching to pull items of clothing on or off is difficult

- if they are uncomfortable with dressing or undressing in front of others because of a physical difference
- if they are visually impaired or have a learning difficulty, they may need help to choose clothes that are appropriate for the weather, that match, and help to put them on in the right order
- if your child needs to follow a rigid routine which can make dressing or undressing take longer
- if your child has a behavioural difficulty and becomes easily distracted and needs lots of persuasion and encouragement to come back to the task.

Question 42: Eating and drinking (including breastfeeding)

Here you should list any problems your child has with sucking, chewing and swallowing, and any equipment like a feeding tube to help overcome those difficulties. For example:

- does your child have a special diet which needs special and careful preparation?
- do they have to eat regularly at specific times of the day?
- does eating cause pain or nausea which discourages them from eating?
- children with visual impairments may need help to locate and eat food
- children with learning difficulties, visual impairments or food allergies may need supervising to make sure they don't eat anything harmful.

Question 43: Your child's medical and therapy needs

Medications

As well as giving details about medicines, include any difficulties your child has receiving them or taking them by themselves (forgetfulness, discomfort, distress, side effects). Describe how you help overcome this (encouragement and reassurance, even after medication has been given).

As well as injections and tablets, include information about any eye drops, creams, dressings and enemas your child needs.

Therapy

Include details of any physiotherapy, speech therapy, hydrotherapy, play therapy, counselling and behavioural therapy. Include any exercises you have to do at home.

Therapy also means help with any medical equipment. This includes nebulisers, monitoring equipment, meters, needles for injections or blood tests, thermometers, tube feeding, catheters and breathing equipment.

List any difficulties with using equipment, help you give to your child and the length of time it takes. Include time spent on preparing and cleaning equipment.

Question 44: Difficulties with seeing

This section gathers information about the extent of any visual impairment your child has.

As well as filling in this section, it's important to make sure you also explain how your child's visual impairment impacts on any of the specific areas covered in the other parts of the form.

For example, a child with a visual impairment may need help with dressing, with washing, teeth brushing and looking after their appearance, help at mealtimes and help to get around safely both indoors and outside.

Young children with a visual impairment may also need more help in learning through play.

If a child can't see everyday objects, they are less likely to become spontaneously curious about things around them. As a result, you may need to spend much more time actively introducing objects through touch or verbal description. This should be taken into account as extra care and support.

School-age children may require help with reading, not only school books and texts but also from boards and projectors. They may need help in describing graphs, pictures, charts or scientific experiments.

They may also need guidance and supervision, not only to get to and from school but also to get around the school and playground, and to take part in physical education (PE).

If your child has a certificate of visual impairment you should send a copy of this along with the form.

It is important to say what help your child needs because of problems with vision or hearing. You may have to spend more time explaining everyday things such as what is happening on the television.

Question 45: Difficulties with hearing

This section is to find out the extent of your child's hearing impairment.

As well as completing the questions on the form, it is important to explain help your child needs because of hearing loss. You may be able to explain their need for extra help or supervision throughout the rest of the form.

Perhaps it takes longer for your child to receive instructions about how to carry out certain activities. You may have to spend more time explaining everyday things such as what is happening on the television, or bringing to their attention certain sounds such as traffic, alarms or announcements.

Things to consider might be your child's need for extra supervision because they can't hear danger approaching. They may become upset easily as they don't get a warning of when things happen.

You might have to make more effort to get their attention so that you can speak to them face to face. They may need help with

hearing aids - taking them off, putting them on and adjusting them.

Include any evidence from a specialist which shows the extent of your child's hearing loss.

If your child needs help to communicate with other people fill in questions 46-47.

Questions 46-47: Speaking and communicating with people

A child may be unwilling to communicate because they have a limited understanding of their environment, or only choose to talk about things they feel are relevant to them and are comfortable with. Your child may become angry or frustrated trying to communicate. For example:

- a child with hearing loss may only be able to communicate with people who sign, or may be able to lip read, but only people they know well
- a child with a learning difficulty may also depend on a form of non-verbal communication but find this difficult with people they don't know
- they may have difficulties understanding facial expressions and body language.

Write down the different ways your child is helped with communication and what would happen without this help.

Question 48: Blackouts, fits and seizures

This applies if your child has symptoms like fits, convulsions, fainting, dizziness, loss of consciousness, or asthma attacks.

Explain when these attacks happen, how often, and if there are any warning signs beforehand. What happens during and after an attack?

For example:

- is your child incontinent?

- do they injure themselves?
- do you need to clean up after them, change bedding, clothing, and attend to injuries? How long does this take?
- are they left feeling dizzy, exhausted, or aggressive and take a long time to fully recover? How long do they need to rest or need reassurance?

Remember - if your child has attacks and needs someone to keep an eye on them all the time, write this here.

Question 49: Supervision your child needs during the day

This section looks at whether your child needs someone to watch over them during the day to make sure that they are safe and to ensure that they are not a risk to themselves or to others.

All young children, whether disabled or not, routinely require supervision. So the younger your child is, the more important it is for you to say how the supervision they need is greater, or different, to another child of their age.

Think about what could happen to your child without regular or frequent supervision. For example:

- a child with poor coordination may fall and hurt themselves
- children with hearing or sight difficulties may not be able to hear or see dangers
- a child may have seizures, asthma attacks or breathing problems, particularly if they over-exert themselves or become excitable and no-one's there to stop and calm them
- eating the wrong food or drinking the wrong amount of liquid may have serious consequences
- your child may be prone to dribbling, or there are other bodily fluids you need to check to make sure they are constantly dry to avoid sores and other complications
- a child with behavioural problems may harm themselves or another person.

Question 50: Help with development

This section includes help that your child needs to interact with and make sense of the world around them.

For example, your child may find it difficult to interact or play with others. This may be due to problems with understanding or communication.

They may need to spend time on their own because their behaviour becomes aggressive or inappropriate. This may affect your child's development through play. They may need help to play with other children and in how they should behave.

Any physical difficulties can also make it harder for children to play because of difficulties with coordination or manipulation. A visually-impaired child may need more attention than others.

Specially adapted toys or tactile toys don't necessarily mean difficulties with play are resolved, because your child might need help finding or manipulating the toy, otherwise they'll become frustrated. They might need help maintaining their interest which means you need to give them extra attention. Or you may need to supervise to prevent harm to your child or other children.

Question 51: Encouragement, prompting or physical help at school or nursery

This section gathers information about any extra support, care or supervision your child needs at school or nursery.

This can include any extra support to help them learn, but also any extra help they need to manage behaviour, get around the school or nursery safely or to mix with other children in the playground. You should also think about whether they need help at school with things like using the toilet, taking medication or having their lunch.

If your child has a statement of special educational need, Individual Behaviour Plan, Education, Health and Care plan, or in

Scotland a co-ordinated support plan the claim form asks you to send these (see page 6 of claim form). However, if you feel that your child's statement or plan does not fully reflect all of their needs it is important that you make this clear somewhere on the claim form and highlight any other needs not identified in the school or nursery report.

If you feel that the school report misrepresents your child's needs you may choose not to submit it at all. Call our freephone helpline for further advice.

Question 52: Help with hobbies and social activities

Include here details of any help your child needs when they go out during the day or night for social and leisure activities, and any support needed for hobbies.

This includes visits to the park, clubs, sport activities, going to the cinema, swimming, visiting relatives, drawing, playing on the computer, and watching television. These are just some examples and you should include any interests that your child has and what help they need.

If there are activities your child would like to do if only they had extra help, then list the additional support that would be needed to allow this.

Question 53: Any help your child needs during the night

Complete this section if you have to get up in the night to help with your child's care needs.

Night-time is the time between when you go to bed until you get up. If you stay up later than you want to because your child does not settle in bed, or if you get up very early, these times also count as night-time.

These are just some examples of night-time needs:

- some children require physical help to get back into bed after falling out, or to turn over during the night
- re-arranging bedclothes if they become tangled or fall off
- your child may have problems with continence or night sweats and you need to change the bedding and to deal with any wetting or soiling
- your child may need help with medication or equipment at night, such as an inhaler or nebuliser, or feeding tube.

Use this section to say if you need to get up at night to give comfort to your child because they wake up upset and agitated, if they have a disturbed sleep pattern and can't settle or if they get up and wander.

Question 55

This asks you the date that your child first started to have the care needs that you have described.

Normally your child must have needed extra care or supervision for at least three months before they can receive any payments of the care component. An exception to this is made where a child is terminally ill and claiming under the special rules - see page 8.

Questions 54 and 70: Extra information and details of any attached additional documents to support your claim

You may wish to use the space provided to explain more about your child's condition and how it affects them. For example, how their condition might vary, or how their mental health is affected by their condition.

Any document, letter or statement can be sent with the claim but it is very important to check that any evidence you send accurately describes your child's needs. If it doesn't then this may harm your claim.

Evidence can include information from a health professional involved with your child's care, like a GP, nurse, paediatrician,

speech and language therapist, or occupational therapist. Call the Contact a Family freephone helpline for more information.

Giving detailed medical information may lead to a quicker decision and reduce the chances of the Department for Work and Pensions (DWP) arranging for more reports on your child's condition (see section on page 6 of the form, 'Do you have any reports, letters or assessments about the child's illnesses or disabilities?').

Evidence of your child's special educational needs can also be attached (but see Question 51).

You can ask friends, carers or relatives to give supporting evidence.

A diary of the past week giving an account of your child's difficulties, the help you gave and how long it took each time can be very helpful.

If you're nearing the six week deadline, you should send the completed form off without waiting for additional evidence. Attach a letter saying you will send more evidence and when they can expect it.

If further medical information is needed for your claim

Your claim will be assessed by a 'decision maker.' If they're still unclear about how your child's condition affects their care and mobility needs, they can arrange for a DWP approved doctor to visit you to examine them and prepare a medical report. This can lead to delays.

If you feel the claim is taking too long, then you can make a complaint to the customer services manager at the office dealing with your claim.

Mental Health

There are no specific questions in the form about your child's mental health.

Children with disabilities, coping with their condition, can feel frustrated, isolated and upset at times. These can be described as mental health difficulties.

This could apply if your child is withdrawn, anxious or depressed, behaves aggressively or gets angry and is uncooperative. They might act impulsively, have nightmares, or have difficulty coping with routine changes.

You may have been able to fit this into your answers to some of the other questions but if not, then it is important to give more details at Question 63 'Extra Information', or as an attached sheet.

Say what the difficulties are that your child experiences and also what help you give to overcome or minimise their effects. You might include:

- providing encouragement, motivation and reassurance
- techniques to manage any difficult behaviour like taking 'time out'
- monitoring your child's mood
- helping them to plan their day and to help them to deal with their feelings.