# Disability Living Allowance Guide



DLA (Disability Living Allowance) is a non means tested benefit for children up to the age of 16 to help with extra costs due their disability.

DLA has two components - Care and Mobility. You can get one or both components and each component has different rates.

# Claim Form questions:

Questions 1-18 are general questions about your child

# Q 19 Statement fram someone who knows your child:

This can be a carer, relative or friend. If it is going to be completed by a healthcare professional, it should be someone who has regular contact with the child.

Make sure that the report is supportive and not detrimental to your claim. Schools tend to emphasise how well the child is doing, rather than what they cannot do.

A good idea is to copy the page, give it to the person who is going to complete it. That way if you are unhappy, you can ask them to change it.

### Q 21 Childs illness or disabilities

Make sure that you write every illness/disability, your child has a diagnosis for. If your child does not have a diagnosis, write a general description e.g. behavioural problems.

### Q 24 When the child needs help

If you tick 'varies,' you can still get DLA, but there must be a pattern of 'substantial care needs or and mobility needs. Tick every box that applies to your child, even if it doesn't apply all the time. You are given the opportunity to explain later in the form. Therefore, it is good to keep a diary.

### Q 25-36 Mobility

Mobility also applies to children with ASD; they are likely to have behavioural and possibly a LD.

Some children with severe ASD can qualify for high rate mob, from the age of 3.

# Q31 Explain

Behavioural problems, autism, LD, communication difficulties. If your child becomes lost they would be vulnerable to danger, they cannot ask for help. They may have a sensory impairment, child walks much more slowly than a child of the same age, walk with an odd gait, they become tired, walking affects their mental health-meltdowns, needs constant reassurance, guidance and supervision.

### **Q32 Outdoors**

This section is for children age 5 upwards. However, if the child is between 3-4 and ref uses to walk, you can still complete the form.

### Pointers for questions 25-36:

Why does your child need more guidance?

May get lost and more vulnerable to danger

Unpredictable behaviour

Rigid routines

Does your child get easily distressed?

Run off without warning

Screams when responding to loud noises outdoors, child puts hands over ears

Hypermobile, making the act of walking tiring

Stop walking to look at an obsessive interest

Over anxious outdoors

Road sense- can your child safely cross the road

Does your child respond to verbal warnings?

Noises or smells that upset your child

Do you have to prepare your child before a trip outdoors? Explaining exactly where you are going etc

Do you have to protect your child from angry people; maybe your child has been abusive

### Additional information for teenager's mobility component:

You would expect teenagers to have developed some independence skills by the time they reach adolescence. A young person with ASD may still need to be accompanied by an adult.

Examples:

Unsafe behaviour that may result in a fight, if not supervised

Getting caught up in illegal practices

Other young people laughing at your child

Easily influenced to do things that they shouldn't-stealing, smoking, drinking

Easily led in order to be accepted as part of the crowd.

### Q37-55 Personal care needs

This includes not only physical and support help with care needs, but verbal prompting.

# Q 37 Getting in and out of bed

Does your child need a rigid routine to settle them into bed? Explain in detail the routine you have and why you and your child must follow it. Do they need to wrapped tightly or have a weighted blanket? Do they have a particular toy or music? Do they have difficulty failing asleep? Do they get in and out of bed? What do you do to soothe them back to sleep? Does your child understand they need to go to bed? Is it difficult to wake your child after a difficult night? Is it difficult to motivate the child to get out of bed? Do you have to constantly reassure your child?

# **Q38 Toileting needs**

Has your child achieved toileting yet? Do they still wear nappies? Do they wear special clothing to stop them touching a nappy? Do you have to supervise toilet needs? Can they clean themselves and the toilet after using it? Do they smear? Do they need reminding to use the toilet? Does your child have obsessive rituals after using the toilet? Do you have to remind your child to flush and clean the toilet? Are public toilets an issue, do you have to take your teenage child into public toilets with you? Remember you can obtain a RADAR key from your local council for around £3.50v

# Q39 Moving about indoors

For a child with ASD this is likely to include, poor spatial awareness and poor motor skills. Your child might not be able to safely transfer up and down stairs. Do they use postural support seating/cushions?

# Q40 Bathing and showering

Does your child have to follow a rigid routing? Does your child stay in the shower /bath longer than they should (sensory), No sense of danger, might eat soap, drink bath water, and leave taps on? Unable to tell the difference between hot and cold taps. Does your child suffer with OCD and, need to wash more than other children? Do they need encouragement and reminding to wash? Do they need help and supervision, to make sure they have washed properly?

If they can wash/shower independently, do you have to monitor what they are doing and prompt/remind them to do it? Do they not like their hair being washed or toenails being cut, due to sensory issues? If you have a daughter, how does she manage with her periods?

### Q41 Dress and undress

This will include fastening buttons, zips and laces due to fine motor skill problems. Is your child unable to put clothes on, do they put clothes on inside out? Do they have sensory issues with certain clothes, or clothes touching their skin? Do you have to remove all clothes labels? Do they wear unseasonal clothing- fleece in summer and sandals in winter? Will they wear the same clothes, ref using to take them off? Include dressing and undressing for activities-sport, swimming. Does your child get easily distracted? Does your child get undressed at inappropriate times and in public?

# Q42 Eating and drinking

Does your child have to follow a special diet? Is your child unable to use standard, cutlery or crockery? Does eating and drinking take a long time, because your child becomes distracted? Does your child require close supervision, because he/she may eat something inedible? Does your child only eat certain foods, and do they need to be presented in a certain way? Do they eat in an anti-social way? Does the child need to be prompted and reminded to eat?

# Q43 medicines and therapy

Your child may not like taking medicines; do you have to disguise them? Older children may need reminding to take medication, otherwise they forget. Physically helping with therapy, such as speech and language, physiotherapy, teaching Makaton, hydrotherapy, play therapy, counselling.

### Q44 Difficulty with seeing

If your child has sensory issues with light or cannot see the writing in a book without tinted glasses say so.

### Q45 Difficulty with hearing

Can your child hear when there is background noise? Do you have to get your child to face you when talking? Is their hearing made worse by sensitivity to noise? Does your child use visual aids, to support hearing? Do they get confused when more than one person is talking?

# **Q46 Difficulty speaking**

Is your child's speech difficult to understand? Do they have echolalia rather than communicating? Do they have speech of a much younger child? Is your child receiving speech therapy? Do they get upset if they are not understood?

### **Q47 Communicating**

Does your child understand the process of conversation (taking turns)? Do they have difficulty understanding what is being said or making themselves understood? Do they use PECS or Makaton? Is your child unable to communicate and interact with others? Your child might have difficulty developing language skills and understanding what others say to him/her. They also may have difficulty communicating nonverbally, such as through hand gestures, eye contact, and facial expressions. Does your child just want to talk about specific subjects? How do you help your child communicate?

### **Q48 Fits and Seizures**

This question is in relation to a child having fits, convulsions, fainting, dizzy spells, asthma attacks which may result in unconsciousness. Explain how the fits and seizures happen and how often? Are there any warning signs? Does your child become incontinent? Do they hurt themselves?

# Q49 Supervision during the day

All children require supervision, the younger the child the more important it is to state how much greater your child's supervision needs are. State if your child cannot cope with planned changes to routine. Does your child worry, get upset, frustrated about things that would not bother a child of the same age? Do they think someone might harm them? Does your child ignore instructions, run off and have unpredictable behaviour? Do they behave dangerously and aggressively towards other children/adults? Does your child self-harm, have no fear of traffic, heights etc? Does your child become emotionally upset? If you were not supervising your child, would their basic needs not be met?

# Q50 help with development

Does your child find it difficult to play and interact with other children? Do you have to explain things to your child, in a way that provides lots of support and encouragement? Does your child need extra time for things to be explained? Do you use play to develop skills i.e.: speech and language? Does your child need help not to dominate a situation? Does your child have difficulty making friends? Do they have difficulty understanding other children/adults? Are your child's physical/sensory/learning skills delayed? Can they throw a ball, does your child require support to aid play skills? Is your child learning at a slower pace than other children of the same age? Does your child need help to practice new skills?

### Q51 Help at nursery or school

Does your child need help to go to the toilet at school? Does your child need support to move safely between lessons? Would they wander off, if they did not get that support? Include any educational documents SEN/EHCP /IEP etc. Is your child at a SEN school or in a special unit? Do they have a buddy system at school? Does your child have a quiet place they can go to? Do they use any visual aids at school i.e.: traffic light system? Does your child have any aids or adoptions at school? Does the school use different more simplified language, to help your child understand? Does the teacher/TA have to repeat instructions several times, in order for them to understand? Is your child impulsive and not always able to stay on track? Does your child feel overwhelmed and anxious at school? Does your child receive support for exams and homework? Is your child isolated and lonely at school? Does your child need to take medicines/therapy at school? Has your child been excluded/expelled?

### Q52 Hobbies and activities

Include all help and supervision your child needs to carry out activities. Do they require help with motivation and to keep them interested? Activities include, dance classes, going to the park, cinema, swimming, visiting relatives, drawing, playing on the computer, watching TV, going to church, holidays, Brownies, Guides, Cubs, Scouts, library, museums etc. How do you help them get to an activity? How do you supervise at the activity- reminding to go to the toilet, tell them to eat, help with communication?

### Q53 Help at night

Night means when everyone in the house is in bed. Do you have to get up with your child throughout the night? How long does your child remain awake for? Does your child need help with toileting needs in the night? Does the child take medication in the night? Do you have to soothe/cuddle your child until they go back to sleep? Does your child ref use to go back to sleep because of anxiety? Do you have to stay up with your child, to ensure they are safe? Does your child take melatonin; does this have the desired effect? Does your child have incontinence needs in the night? Would your child be unable to sleep without help and supervision? Do you have to re-make your child's bed?

### **Q54 Extra information**

If you feel you haven't covered anything on care needs, add it here.

### **Q55-69 General questions**

### **Q70 Extra information**

This can be used to explain more about your child's condition and how it affects them. You might want to set how your child's needs vary and how their mental health is affected.

### The decision:

You can wait up to 11 weeks for a decision; it might be longer if DWP want more information. A letter will advise whether or not your child has been awarded DLA If you are not happy with the decision, you must ask for a mandatory reconsideration first. You are no longer able to appeal against a decision until you have asked for a mandatory reconsideration. If you do not get award at mandatory reconsideration, the next step is appeal.

### Getting a DLA claim farm:

Forms are available from your local Job Centre Plus or by calling the

DWP on: 0800 121 4600

You can also print off a form by going to gov.uk website.