# Help for completing attendance allowance and disability allowance forms



Advice and guidance on applying for these benefits



Luton Borough Council aims to help people to be as independent as possible. There are a range of benefits which can provide important finacial support.

Completing Attendance Allowance or Disability Living Allowance forms

Attendance Allowance (AA) and Disability Living Allowance (DLA) are tax free, non-contribution, non-means tested benefits. If you are 65 or over, you will need to apply for the Attendance Allowance. If you are under 65, you will need to complete the forms for Disability Living Allowance.

If you do not have a form, you will need to ring the Department of Work and Pension Benefits Unit. Call them on 08457 12 34 56 and ask for a leaflet to be sent to you.

Both forms can be fairly daunting at first sight. Please don't be put off by the

questions on them! A successful claim may entitle you to extra Income Support. If you do not have a current Income Support claim, it would be a good idea to claim it at the same time. If you think it will take a while to complete section 2 of the forms, send

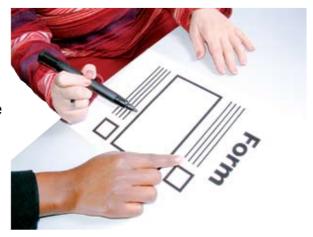
section 1 in order to register the claim before turning your attention to section 2.

If you think that you would find it difficult to complete the form yourself, please call us on 01582 54 76 59, and we will try to provide help for you.

The DLA has two components - the care component (which is the

equivalent of AA) and a mobility component. The mobility component will not be awarded if you are over 65 unless you were already receiving it.

You do not have to be physically receiving the care to qualify for either claim. You will need



to state how you manage different tasks within your daily routine. You should think in terms of 'what difficulties you have' rather than 'what help you need'.

The national AA/DLA unit looks at how you cope with daily or weekly tasks which they term 'bodily functions' (by this, they mean anything to do with your body and how it works. This includes washing, bathing, dressing, moving around indoors, getting in and out of bed etc). They also look at whether you need motivation,

considered equipment that helps you perform the task (e.g. sitting on a chair while washing).

Explain why you have the problems and all illnesses or disabilities that affect you in completing the task. Some tasks may not be a problem in themselves, but your level of mobility may prevent you from completing them quickly or easily. If you can only do certain tasks with pain or difficulty, or if someone has to remind you to do them, say so on the form.

It is important to remember that for an award to be made, the person assessing your claim will only be looking at the effects on your 'bodily functions' mentioned earlier. They are not concerned with the difficulties you have with domestic chores such as housework or shopping.

Do not worry about repeating the difficulties you face on different sections of the form. This helps to show how often these things affect you and will be taken into account in your assessment.

Parts of section 1 and 2 need to be completed by someone else. The blue statement on section 1 can be filled in by anyone. This can be a spouse, partner, friend, relative or carer. The pink statement on section 2 should be completed by your doctor or any other health professional you see regularly. Both sections may be completed by the same person or professional.

encouragement or supervision to complete these tasks. For the mobility component of the DLA they will also look at whether you need help to walk or move around. They will also see if you feel discomfort or pain when trying to walk.

The person assessing your claim makes decisions based solely on what is written on the form. You must put in as much detail as possible. Use extra paper if there is not enough space. Do not assume the decision maker will be able to read between the lines. You must spell things out for them.



You may find it helpful to keep a diary. Write in it whether you find certain tasks difficult and how long it takes you to complete them. When answering questions on the form, try and look at the bigger picture. Don't just look at whether you can complete a task. Look at how you complete it, describing the process where necessary.

You may perform some tasks differently to how you used to do them. Write how you have adapted the way you perform the tasks so you are able to cope. Explain whether you need help from people or need to use furniture to do certain things. This may be

If a health care professional (such as a doctor, nurse or physiotherapist) has not completed section 2, then the Department of Work and Pensions is likely to arrange for an independent doctor to visit you for an assessment. If so, you may find it helpful to have a friend, relative or carer with you when the doctor visits. This should ensure that all aspects of your problems are discussed.

You can send in letters of support written by any specialists who are involved in your care (e.g. district nurse, occupational therapist, community psychiatric nurse) together with your application. If it takes extra time obtaining these supporting letters, explain on the form that you will forward them when you get them.

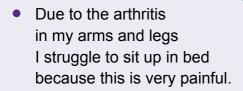
# **Examples of problems you may experience**

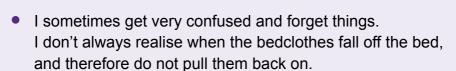
## Getting in and out of bed/while in bed

- Due to my angina, I have to sit on the edge of my bed for a few minutes in order to steady myself and catch my breath before I can get to my feet.
- I have to use my walking frame for support in order to get to my feet due to the arthritis in my legs.

 Because my balance is poor, I can't stretch out if my bedclothes fall off as I fear I may fall out of bed.

 I sleep on four pillows to keep upright in bed as this helps ease the breathing problems caused by my asthma.





- I am depressed and not motivated to do anything and I need a lot of encouragement to get out of bed.
- Because my legs are weak, I need to have something to help lever myself to my feet.
- My mobility is very poor and I need someone to help me off the bed and onto my feet.

## Washing and bathing

 My arthritis means I need help to shave, wash my hair and check my appearance.

 My bad back means I cannot step into, or out of, the bath or shower unassisted.

 Most days I feel too depressed to bother with washing unless someone encourages me and checks that I have done it.

 My mobility and balance are poor and I need to sit while washing my face or brushing my teeth.

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## **Getting dressed or undressed**

- The pain in my back and legs means I have difficulty bending to get clothes out of cupboards and drawers. Someone has to help me.
- Chronic asthma means I become very breathless and therefore have to rest between putting on or removing each item of clothing.
- My severe rheumatism means I need help to fasten buttons, zips and laces as it is too painful to do it myself.
- My hands are contorted due to arthritis and therefore I can't grip fastenings to do them up.
- Sometimes I am in too much pain to want to get dressed unless someone encourages me to.
- Due to confusion they don't wear the appropriate clothing (for example, not enough clothing on cold days or too many layers on a warm day).

#### **Mealtimes**

- The trembling in my hands, due to Parkinson's, makes it difficult to eat and drink without spilling.
- Due to my blindness, I need someone to check I am clean after meals.
- Since my stroke, I am unable to use my left/right side and therefore need my meals to be pre-cut.
- The rheumatoid arthritis in my hands makes it difficult to grip cutlery and hold cups for drinking.
- Due to my depression, I have no motivation to eat and need to be encouraged to have regular meals.
- Due to their short-term memory loss they forget whether they have eaten and need supervision.

#### **Medical treatment**

- Due to my deteriorating sight I am unable to read the labels and need someone to set out the correct medication for me.
- My short-term memory loss means
   I often need to be reminded several times to take my medication.
- My fingers are deformed due to arthritis and I have trouble opening medicine bottles or blister packs.

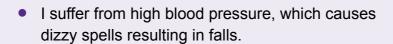


#### **Falls and Stumbles**

 I have to walk very slowly and hold onto things. I tend to shuffle when I walk. This causes me to stumble

frequently.

 I have poor circulation which often results in numbness in my legs causing me to fall.



- My deteriorating eyesight means I knock into things and this also affects my balance causing me to stumble or fall.
- When I fall, I don't have enough strength to pick myself up and need to call for help.

## **Moving about indoors**

 I have very weak legs and can only climb the stairs by putting both feet on each step rather than on alternate steps.

 My arthritis means I can get very stiff sitting in a chair and need to rock to gain the momentum to get to my feet.

 I am very unsteady on my feet and need to hold onto the walls and furniture.

 I suffer from chronic arthritis and get extremely breathless.
 When I climb the stairs, I need to take a break and sit on them.



- I suffer from dizzy spells and experience them when getting to my feet or trying to go upstairs.
- I get very depressed and often don't want to do anything. I need encouragement to get up or move around.

## Help with toilet needs

- The water retention in my feet means I can only walk very slowly so I sometimes do not reach the toilet on time.
- My arthritis makes it difficult to undress myself in order to use the toilet, the flush handle or turn the taps to wash my hands. I always need help with these tasks.
- Due to my mobility

   and balance problems
   I have a commode by my
   bed at night. I am not able to
   empty or clean this myself
   because of my arthritis.



- Because I can't see, someone needs to check whether I have washed and cleaned my hands properly after using the toilet.
- After using the toilet/commode, I need help to put my clothes back on

## Communicating with other people

- I cannot see to read, answer letters or fill in forms.
   Someone must read them for me and write the reply.
- I can't hear, and rely on sign language to communicate so I cannot use the phone.
- My speech is slurred due to suffering a stroke and I have difficulty being understood when talking to anyone who does not know me well.

 My deafness means I have problems trying to communicate with unfamiliar people and therefore often

have problems asking for help when needed.

 As a result of shortterm memory loss, they find it difficult to hold a conversation because they forget the topic of conversation and start talking about something else.

 Due to mental illness, they would find it difficult to cope in unfamiliar surroundings and with unfamiliar people. This is a leaflet about filling in Attendance Allowance and Disability Living Allowance Forms and sets out help and guidance for people who need to fill in the forms and make a claim.

If you need this in large print, on tape or in

বাংলা ગુજરાતી ਪੰਜਾਬੀ اُررُو Polski
ত 01582 54 76 59



This information can be made available in a range of styles and formats, for example in other languages, in Braille, larger print or on audio tape.

For further information, phone 01582 54 76 59 or visit www.luton. gov.uk.