

Claiming Disability Living Allowance 1

Disability Living Allowance (DLA) is a benefit paid to people who have an illness or disability, and who have problems getting around or need help with personal care or both of these. You must be under the age of 65 when you first claim.

Normally, you can only get DLA if you have had care needs or mobility problems for three months, and you must be likely to continue having these needs or problems for at least six months after you claim.

Many people with arthritis claim this benefit. DLA payments are tax-free and the benefit is non-means tested. You can claim whether or not you are working and your claim is not affected by savings or earnings. You do not have to have made national insurance contributions to claim.

This benefit is being reviewed and is planned to be replaced in 2013/14 with the Personal Independence Payment. For the latest information, go to your local Jobcentre or equivalent or visit www.direct.gov.uk (www.nidirect.gov.uk in Northern Ireland).

About DLA

DLA is aimed at helping you cope with the extra costs of living with a disability. It is divided into two parts – the mobility component (help with getting around) and the care component (help with personal care). You can claim for one or both of these. Each of the components has different levels (see the *What you can claim* section below).

At present DLA is a self-assessed benefit – it is up to you to describe how your condition affects you on the claim form. This information sheet aims to help you understand how to fill in the claim form but you should ask a local advice agency for more help.

This benefit is being reviewed and is planned to be replaced in 2013/14 with the Personal Independence Payment.

What you can claim

DLA has two parts: a mobility component and a care component. You may be eligible for either one or for both. Each component has different award levels.

The DLA mobility component is payable at one of two rates:

- the higher rate (£51.40 per week) is payable if you are unable, or virtually unable, to walk. For most people with arthritis, this is the component to look at. Time, distance, speed and manner of walking are all considered. Any distance you can walk after experiencing severe discomfort should be completely ignored (this is explained later in this factsheet).
- the lower rate (£19.55 per week) is payable to people who can walk, but need

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someone guiding or assisting them. This may be relevant if your legs give way from time to time, or you have a tendency to fall or stumble, but is generally not applicable to people whose only health problem is arthritis.

The DLA care component is payable at one of three rates:

- the higher rate (£73.60 per week) is payable if you satisfy both the daytime and the night-time disability tests.
- the middle rate (£49.30 per week) is payable if you satisfy either the daytime disability test or the night-time test.
- the lower rate (£19.55 per week) is payable if you need help with personal care for a significant portion of the day. For example, you might need help (for about an hour or so in total) to get up in the morning and to go to bed at night, or if you are over 16 and cannot prepare a cooked meal for yourself – even if you have all the ingredients.

You will satisfy the daytime test if you need help with personal care frequently throughout the day (during the middle of the day as well as in the morning and evening) or you need continual supervision to avoid substantial danger to yourself or others (such as, if you are prone to falling).

You will satisfy the night-time test if you need prolonged help or repeated help with personal care; or you need someone to be awake at night to watch over you to avoid substantial danger.

Who can claim DLA

You can qualify for DLA if:

- you submit a completed claim pack; and
- you pass at least one of the disability tests relating to your care need or mobility problems; and
- you satisfy the age test (there is no lower age limit for DLA care component and the upper age limit is 65. Children can get higher rate mobility component from age 5 and lower rate mobility component from age 3); and
- you pass the residence and presence tests (you have the relevant immigration status and normally live in the UK and have been living here for at least 26 of the last 52 weeks); and
- you pass both the backwards and forwards qualifying period test (your care needs or mobility problems began three months before your claim and your condition is likely to last for at least a further six months).

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If you are terminally ill you may be able to claim under what the Department for Work and Pensions (or the Disability and Carers Service in Northern Ireland) calls the 'Special Rules' and your claim will be given high priority.

You can carry on receiving DLA indefinitely after your 65th birthday providing you make your initial claim before you reach 65 and you continue to satisfy the disability and other tests for the benefit. It is up to the decision maker to decide if your award will run for a fixed or an indefinite period.

'Life' awards are no longer made. You don't need to pass the qualifying period before your 65th birthday, but you must satisfy all the other conditions of entitlement including one of the disability tests no later than the day before your 65th birthday.

Once you turn 65, if you are claiming for the first time, you should claim Attendance Allowance if you have any care needs. See Arthritis Care's factsheet *Claiming Attendance Allowance* for details at www.arthritiscare.org.uk/Factsheets

Children aged under 16 years claim DLA using a different claim pack from adults. There is an extra disability test for children and the cooking test is not relevant.

If you are still unsure if you are eligible, complete the checklist available at www.arthritiscare.org.uk/Benefits

Completing the form

The DLA claim pack consists of the claim form and some explanatory notes. Read the notes first, and have a look through the claim form before completing any of it. You may wish to write in pencil first, or alternatively make some notes on paper or on a photocopy of the claim form, before writing in pen. You should photocopy the claim form after you have completed it, so you have a record of what you wrote.

The claim form is long but mostly straightforward. You do not have to complete it all at one sitting. Much of the form has a multiple-choice format: you are just asked to tick whichever box or boxes apply to you.

Occasionally you are given a short space to write down further details.

Questions 1 to 22

The first part of the claim form simply asks about who you are and where you live. The second part asks about your illnesses or disabilities and the treatment or help you receive. You are asked to list your illnesses or disabilities, without going into detail about how they affect you; there is room later in the form for that. You are also asked to list any medicines or treatments that you have been receiving; you can either list them on the form or attach a printed prescription list.

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Questions 23 to 34

This part relates to the mobility component. You are asked how far you can normally walk before you feel severe discomfort and how long this would take.

Question 24

Severe discomfort does not mean just pain, but can also include extreme fatigue. Normally, when you are in severe discomfort you would not want to go any further, until the symptoms subside.

Do not make guesses here. If you are not sure how far you can walk before feeling severe discomfort, go outside and test yourself. It would help if you had someone with you, to measure the distance in paces. One pace of an average healthy male adult is about three quarters of a metre. Don't forget to time how long it takes you to walk the distance.

Question 25

This question asks how many minutes you can walk before you feel severe discomfort. The answer you give here should reflect what you have already written in reply to the previous question.

Question 26

This question asks you to describe your walking speed. Again, if you are unsure of this, an outside walking test as described above would help. You are asked to describe the way you walk in **Question 27**.

Question 28

This question asks if you need physical support from another person to help you walk. You may need such support if your knee or ankle joints frequently give way or if you cannot bear to put all your weight on to either one leg or the other.

Question 29

This question asks how many days a week you have difficulty walking. If your answer is less than seven days for any reason, try to say how many days a week are worse and how many are better. It may help to keep a diary and attach a copy of this to the claim form. There is room to provide details of any variation in your condition later under.

Questions 30 to 34

You are asked if you fall or stumble in **Question 30**. You may fall or stumble because of joint stiffness, or because one of your legs gives way at the knee or ankle. You may fall at different times for different reasons, or for a combination of reasons. List any injuries that you have had when you have fallen and any treatment that you may have needed afterwards.

Give examples of occasions when you were unable to get up for any length of time following a fall. Why were you unable to get up? Did someone have to help you?

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Alternatively, has someone else stopped you from falling? If you state how often you have fallen to the ground, clarify how often you have hurt yourself as a result. If someone has stopped you from falling, how often has this happened? A diary may make it easier to answer all these questions (see Keeping a diary below).

You are asked if you need someone with you to guide or supervise you when walking outdoors in unfamiliar places (**Question 31**). This relates to the lower rate of the mobility component. It could be relevant if your legs give way from time to time, or you have a tendency to fall or stumble but these problems are not so serious that you actually need physical support to walk (which is dealt with in **Question 28**).

You should concentrate on the problems that you have walking unfamiliar routes, rather than going to places that you know well, such as the local shop. If you have no one to accompany you outdoors and therefore do not walk unfamiliar routes, make this clear. Explain where you would like to go if you had someone to accompany you.

List any incidents that may have already occurred when you have been outdoors or where dangerous situations have arisen that could have been avoided if help was at hand.

You are asked in **Question 32** how many days a week you need someone with you when you are outdoors. Assume you need to go out every day. If you need someone with you whenever you go out, but currently have no one to accompany you and therefore do not go out, the correct answer to this question would be seven days. On the other hand, if your condition varies, you may need guidance or supervision outdoors on some days, but not on others. There is room to provide details of any variation in your condition under the next question.

Finally, you are asked in **Question 34** to provide the date when your walking difficulties started. This information is needed to check whether or not you satisfy the three month qualifying period. Note that you are being asked about the length of time that you have had your current walking difficulties, not the length of time that you have had arthritis. If there has been a slow deterioration in your condition, you may well find it impossible to give an exact date. In this case you should state roughly when the difficulties started.

If you have previously claimed DLA, were turned down and are making a new claim because your condition has deteriorated, you need to clearly state that the date the deterioration began was after the date of your original unsuccessful claim.

Questions 35 to 54: Help with your care needs

This part relates to the care component. Each question in this part looks at a different area of day-to-day life:

During the day

- Getting out of bed in the morning and into bed at night (**Question 35**).

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- Going to the toilet (**Question 36**).
- Washing, bathing, showering and looking after your appearance (**Question 37**).
- Getting dressed and undressed (**Question 38**).
- Moving around indoors (**Question 39**).
- Falls or stumbles indoors (**Question 40**).
- Cutting up food, eating or drinking at mealtimes (**Question 41**).
- Help taking medication or with medical treatment (**Question 42**).
- Communicating with other people (**Question 43**).
- Taking part in hobbies, interests, social or religious activities (**Question 44**).
- Number of days each week you need help with care needs (**Question 45**).
- Supervision from another person (**Question 46**).
- Preparing and cooking a main meal for yourself (**Question 48**).

During the night (**Questions 49-52**)

- Turning over or changing position when in bed.
- Going to the toilet.
- Help taking medication or with medical treatment.
- Someone to watch over you.

In each case you will need to concentrate on what you cannot do, rather than what you are able to do. This can be difficult, because normally you are encouraged to focus on the positive. Some people find completing this part of the claim form distressing and demoralising. Try not to be discouraged. It is very important that you give a clear picture of the problems you face, including what your worst days are like. This will greatly increase your chances of receiving an award of DLA.

You may live alone, and thus manage alone because you have no choice. In this case it is important to state what help you would ask for, if it were available. You might be managing by yourself at the moment, but some of the activities mentioned may cause you pain or take a great deal of time or might be risky for you without assistance from someone else.

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Your condition may well be variable. If this is the case, do not concentrate on what you can or cannot do on a good day. What is important is the help that you need on a regular basis. So try to focus on an average day (keeping a diary may help you form a picture of an average day – see below). If there is not enough room on the page to explain things fully, you can use the large box at the end of the claim form to continue.

Questions in detail

We now look at a few of the questions in more detail.

Help with your toilet needs

Two questions relate to any problems you have coping with your toilet needs during the day (**Question 36**) and during the night (**Question 49**).

This is one of the most difficult subjects to write about, because the questions are so personal. Try to include as much information as you can and remember that the forms are treated with strict confidentiality.

If you have difficulty walking, the most difficult part of going to the toilet may be getting to and from the toilet, especially if there are stairs involved. In this case, it may be suggested that a commode could solve the problem, so you will need to explain why using a commode would not be easier; for instance, if there is no private space for one on the level that you are living in.

Mention any difficulties you may have in using the toilet, including sitting down or getting back up, wiping yourself, adjusting your clothing or washing afterwards.

If you need to visit the toilet more often than is usual, explain why. It might be as a consequence of the medication you are on.

If you have difficulties getting to and from the toilet at night (this can include getting in and out of bed), you will need to make it clear why you could not use a commode or a bottle instead. Alternatively, you might already be using a commode or a bottle, but still need help.

If you are incontinent, write about the help that you need in dealing with it. This can include changing your clothes, washing yourself, changing your bedding and rinsing the bedclothes if this needs to be done straight away.

Preparing and cooking a main meal for yourself

Question 48 asks if you would have difficulty in preparing and cooking a main meal for yourself. This relates to the 'cooking test'. Even if you have no other care or supervision needs but can satisfy this test, you could be awarded the lowest rate of the care component.

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The test applies even if you would not normally cook; what matters is whether or not you are able to cook. So write down any help you would need in preparing a cooked main meal for yourself even if your partner normally cooks, you use meals on wheels or you eat out most of the time.

A cooked main meal means a proper meal cooked on a traditional cooker, not a ready-made microwave meal or a convenience snack. Describe any part of cooking such a meal that you would have difficulties with. For instance, if your finger or wrist joints are painful then you may have difficulties with peeling and chopping vegetables, using cooking utensils, opening tins, bottles and packets or turning taps on and off. Poor grip could make it dangerous for you to use hot pans. Painful knee or hip joints may make it difficult to stand to use the oven.

Supervision or watching over

Questions 45 and 47 ask about the supervision or watching over you need from another person. If you need such supervision because you have a tendency to fall, you can cross-refer to what you may have already written for **Question 40** (Do you fall or stumble indoors?).

You may also need supervision if you get confused. Confusion can arise as a side effect from certain types of medication, including strong painkillers. Try to give examples of potential dangers that could result from the confusion, such as turning on the gas and not lighting it or leaving a hot appliance on. If you can, write down when such incidents have already taken place.

When your care needs started

In **Question 54** you are asked to provide the date when your care needs started. This information is needed to check whether or not you satisfy the three month qualifying period. You are being asked about the length of time that you have had your current care needs, not the length of time that you have had arthritis. If there has been a slow deterioration in your condition, you may well find it impossible to give an exact date. In this case you should state roughly when the problems started.

If you have previously claimed DLA, were turned down and are making a new claim because your condition has deteriorated, you need to clearly state that the date the deterioration began was after the date of your original unsuccessful claim.

Questions 55-57 of the claim form ask for details about any time you have spent in a hospital, care home or independent hospital. **Question 58** asks about any other benefits, pensions or tax credits you may be receiving. **Question 59** asks for your bank account details so you can be paid the benefit, if it is awarded. If you are signing the form for someone else, you should complete **Question 60**. **Question 61** simply provides space for you to provide any extra information that you think you should include.

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Question 60: Statement from someone who knows you

Here there is space for a statement from someone who knows you. The best person to complete this part of the form is the person who is most involved with your treatment or care. It would be better if this person is medically qualified, such as your GP, consultant or a specialist nurse or carer. If possible, make an appointment with them to discuss this. They will need to know about your mobility problems and care or supervision needs. If you have written a diary, give them a copy of it.

There is a box on this page where the person providing the statement is asked to write down what your illnesses and disabilities are and how they affect you. In this box they can clarify specific points that are central to your claim. The person may wish to confirm whether or not in their opinion, you meet the conditions for the benefit.

Question 62: Declaration

Sign the declaration when you consider that what you have written on the claim form is correct and complete.

Keeping a diary

If you are claiming the care component of DLA, writing a short diary of your care and supervision needs can greatly improve your chances of success. It can also be very important when trying to explain symptoms that fluctuate either during a single day or over a longer period.

The simplest form of diary is an account of your care and supervision needs over a typical day. Start from the time you get up in the morning, through a 24-hour period. Record the time and help you need – why you need the help and the length of time you need help (for example, '8.00am, needed help getting out of bed due to stiffness in joints/back – 15 minutes'). If your needs vary from day to day, you could keep the diary over a few days, to get a clearer picture of your care needs.

Your claim can take a few weeks to process. Sometimes the person making the decision on whether to award you the benefit (the decision maker) may need further information. If this is the case they may contact one of the health professionals you see regularly. If they need still more information, they can arrange for a doctor to visit you to carry out a medical examination. It is a good idea to have a family member or friend who knows your condition well with you when the doctor comes.

If your claim is unsuccessful, you can appeal. See Arthritis Care's factsheet, *If you are unhappy with the decision regarding your benefit*, for more information at www.arthritiscare.org.uk/Factsheets

Other benefits

Receiving DLA does not affect your eligibility for other benefits. It may actually entitle you to extra money, such as the disability premiums on means-tested benefits in recognition of the extra costs of disability.

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If you receive the higher rate mobility component of DLA you may be able to hire or buy a car through the Motability scheme. To be eligible to hire a car you must have at least 12 months' award length remaining. To buy a car through the scheme you need to receive DLA for the full length of the agreement.

You will also be entitled to a Blue Badge for use in the car. This provides you with parking concessions enabling you to park close to shops, public buildings and other places you may wish to visit. You may also be exempt from paying road tax.

Further help

If you need further information about what you might be entitled to and how to fill in a claim form, you can call the free Benefit Enquiry Line. The person you speak to will not have your personal papers but will be able to give you some general advice which must not be taken as a decision. Local disability or Age UK groups often have a benefits adviser.

Sources of information

- Arthritis Care factsheets – www.arthritiscare.org.uk/Factsheets
- Benefits Enquiry Line – 0800 882 200 or 0800 220 674 (Northern Ireland)
- Citizens Advice – www.adviceguide.org.uk
- Directgov (England, Wales and Scotland) – www.direct.gov.uk
- Disability Alliance factsheets – www.disabilityalliance.org/fact.htm
- nidirect (Northern Ireland) – www.nidirect.gov.uk

Where can I get more information and support?

Arthritis Care is the UK's largest charity working with and for all people who have arthritis.

- Talk to someone in confidence about your arthritis by contacting our free helplines:

**0808 800 4050 (10am-4pm weekdays)
or Helplines@arthritiscare.org.uk**

- Our website has information and discussion forums where you can find support from others with arthritis:

www.arthritiscare.org.uk

- Make a contribution to our work by donating:

020 7380 6540 or online

Our information is regularly reviewed.

This factsheet was last reviewed in 2011. It will be next reviewed in 2012.

Note

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