Things to consider when completing a child’s DLA

Don’t forget to photocopy your form or take photos of it so that you have a record of what you said. This will help if you have any problems with the form being processed by the DWP, or need to appeal a decision. It will also be useful to look at when you need to do a renewal in a few years’ time.

Remember to include all the evidence you have, such as an Education Health and Care Plan or evidence from healthcare professionals.

The form is broken into sections. If you need to write more than fits in the box given you can write around the edges, it will still be read by DWP.

It can be difficult to think of just what it is that makes your child different from other children his/her age, or difficult finding the right words to describe them. The following phrases may be helpful:

Supervision and guidance outdoors – would any of the following apply?

- Is inappropriately affectionate with strangers
- Starts conversations with people he doesn’t know
- Gets anxious and distressed in crowds
- Will run across the road to get to something he wants without any regard for traffic/danger
- Runs away and hides
- Climbs on walls / goes into other people’s gardens
- No sense of fear or danger
- Poor spatial awareness / walks into people / falls over
- Gets distressed by loud / sudden noises e.g. lorries
- Shouts and swears and makes offensive comments
- Has to be held onto constantly
- Will drop to floor and refuse to continue walking
- Is completely dependent on adults outdoors
- Cannot judge when it is safe to cross the road
- Cannot communicate and ask for help or directions
- Has taxi transport to and from school – provided by LA
Waking up and getting to bed – would any of the following apply?

(When calculating timings - if child gets up 10 times for 5 mins each time then put this, so that the DWP realise you have to physically get them/check back in bed and you are not just telling a child to return. This is the same for all the timings.)

- Has a rigid bedtime routine that must be adhered to – any change to the routine results in stress / anxiety / meltdowns
- Has rituals that must be performed in a specific order
- Needs to talk through anxieties before he will settle to sleep
- Parent has to lay with him / stroke hair / rub legs until he falls asleep.
- Any attempt to leave the room whilst he is awake causes anxiety / crying / meltdown
- Gets out of bed repeatedly and needs resettling
- Uses delay tactics to avoid settling
- Has to be physically put into / lifted out of bed.
- When gets up parents have to physically take them back to bed not just tell them to return

Toileting – do any of the following apply?

*compare their toileting with that of a child of the same age*

- Wees and poos in inappropriate places
- Has accidents but doesn’t inform parent
- Hides soiled pants / clothing
- Has no concept of toileting
- Will not to go to the toilet alone
- Doesn’t know or indicate when he needs to use the toilet
- Struggles and fights during nappy changing
- Medication affects bowel movements (more frequent / loose / constipation)
- Puts hands in dirty nappies / pants
- Frequently touches genitals / shows genitals to other people
- Smears poo intentionally
- Attempts to clean up after accidents but gets poo on walls / floors / towels etc
- Refuses to use toilets outside of the home and withholds
- Gets distressed by the sound of hand driers in public toilets
- Obsessed with toilets - requests to go frequently especially when out of house
- Uses the toilet as an excuse to get out of doing things
- Has toilet pass at school
- Puts objects down the toilet e.g. toys / whole rolls of paper
- Needs help with sanitary towels – reminding to change and to dispose of correctly
Moving around indoors - do any of the following apply?

- Constantly climbs on worktops / furniture / window sills
- No concept / fear of danger will jump off top step of staircase
- Tries to climb out of windows
- Poor spatial awareness, bumps into things / people
- Will come downstairs on bottom
- Has to be physically moved around the home in a wheelchair / lifted
- Have to clear walk ways so the child does not fall / trip over objects

Washing and bathing - do any of the following apply?

- No concept of personal care / no interest in appearance
- Will start the process but needs encouragement to complete the task
- Will wash same area of the body repeatedly, needs prompting to move onto the next part
- Has fixed rituals for washing
- Has sensory issues that make rubbing hair or brushing teeth feel painful
- Tips out contents of bottles / tries to drink them
- Stands up in bath and needs encouragement to sit down
- Cannot sit up unsupported / needs to be held onto constantly
- Gets very distressed during the bathing process
- Would not wash / bathe if not prompted
- Refuses to get out of bath / doesn’t get cold
- Finds drying sensation painful, has to be left to drip dry
- Needs drying carefully to prevent sores
- Is still physically dried or would attempt to put clothes on wet

Getting dressed - do any of the following apply?

*compare their ability to dress with that of a child of the same age*

- Cannot stand unsupported, has to be laid down to dress
- Doesn’t co-operate with the dressing process
- Doesn’t lift arms / legs when clothing brought towards him
- Removes clothes as soon as they have been put on
- Hypersensitivity / sensory issues around certain types of fabric / clothing / labels
- Will only wear baggy / loose / tight clothing
- Bites /chews / sucks sleeves / collars
- Rips holes in clothes / cuts clothes
- Puts clothes on inside out / back to front
• Frequently spills food / has accidents and needs clothing changed
• Will wear dirty clothes including underwear unless prompted to change
• Wants to wear same clothes repeatedly and gets distressed if they need washing
• Prefers to be naked
• Can’t choose appropriate clothing for the weather or occasion
• Won’t wear anything new
• Clothing has to be chosen for ease due to Pegs / equipment or easily removable due to needing changing

Eating meals - do any of the following apply?

• Limited diet / will eat the same food every day
• Food has to be presented in a specific way / on specific plate
• Will refuse to eat food he has previously enjoyed
• Will not eat food that is mixed with other food / has sauce / is touching other food on the plate
• Doesn’t indicate when hungry / will go all day without eating if he isn’t prompted / encouraged to eat
• Is constantly hungry
• Shoves food in mouth without biting or chewing / gags on food
• Will make himself vomit to avoid eating
• Easily distracted at meal times and needs frequent reminders to sit still / stay at table and finish meal
• Will start a meal but needs physically feeding to complete the task
• Spills food / throws food
• Takes food from other people’s plates
• Steals food
• No impulse control / will eat a whole packet of biscuits
• Eats inedible items e.g. paper, wood, plastic
• Cannot cope with changes to packaging
• Will lick things rather than eat them
• Finds eating in public distressing
• Expects food to arrive as soon as he has ordered it (in café / restaurant)
• Uses fingers rather than cutlery
• Several meals have to be prepared before he will eat something

Medication and therapy - do any of the following apply?

• Refuses to take medication / fights / struggles when administering it
• Says he has taken it when he hasn’t - parent has to check
• Risk of overdose
• Refuses to attend therapy or engage with services / support
Hearing - do any of the following apply?

- Can hear normally but is hypersensitive to sounds
- Gets distressed by loud / sudden noises
- Can hear sounds / noise that others can’t e.g. Dripping tap / humming sounds – gets very distressed by these

Speech - do any of the following apply?

*compare their speech with that of a child of the same age

- Has limited vocabulary
- Is supported by speech and language therapy service
- Mispronounces words / sounds
- Doesn’t speak clearly / mumbles

Communication - do any of the following apply?

- Needs clear simple instructions, one at a time with regular prompting
- Doesn’t understand the rules of conversation / will interrupt / invade personal space
- Doesn’t give eye contact
- Gives pre learnt responses to questions rather than saying how he really feels
- Struggles to find the words to express his feelings / gets very frustrated
- Non-verbal - cannot get needs met effectively
- Has difficulty with verbal instructions
- Takes things literally
- Makes inappropriate comments / swears
- Talks obsessively about topics that interest him
- Needs time to process information before responding
- Cannot get “to the point”

Supervision during the day - do any of the following apply?

- Doors and windows have to be locked as he will try and escape
- Self-harms / hits / bites / scratches / says he wants to die
- Lashes out at others
- Destroys property including his own
- Often no obvious trigger to his outbursts
- Is disruptive in shops – gets sensory overload
- Wanders off / approaches strangers
- Does not notice dangerous situations
- Doesn’t respond to “stop” “no”
Development - do any of the following apply?

- Needs help to co-operate, negotiate and take turns
- Needs help to interact appropriately
- Struggles to make and maintain friendships
- Watches from the side-lines
- Plays alongside other children rather than with them
- Doesn’t play with toys with for their intended purpose
- Invites friends to play but then ignores them
- Doesn’t get invited to birthday parties
- Has to be in control of play situations
- Cannot cope with losing
- Will lash out and hurt other children / make offensive comments

Night time needs - do any of the following apply?

- Wakes frequently during the night
- Once awake he is up for the rest of the night and will not go back to sleep – is then very tired the next day
- Often still awake when parents go to bed
- Parents have to physically get up every time they hear the child is awake for safety reasons.
- Parents never get a full night’s sleep due to the needs
- Medication has to be given overnight so parents have to set alarms to do this
- Melatonin helps to get her asleep but does not keep her asleep

Cerebra has also produced a very useful 56 page guide to DLA for children with brain conditions, which can be difficult to describe on a form. This includes conditions like autistic spectrum conditions, ADHD, cerebral palsy, Down’s syndrome, epilepsy, learning difficulties, global developmental delay and acquired brain injuries. It can be downloaded at https://www.cerebra.org.uk/help-and-information/guides-for-parents/dla-guide/