



DISABILITY LIVING ALLOWANCE for children under 16

Rates of Benefit

<u>Care Component</u>	
Higher	£67.00 per week
Middle	£44.85 per week
Lowest	£17.75 per week

<u>Mobility Component</u>	
Higher	£46.75 per week
Lower	£17.75 per week

How To Claim

To obtain a claim form telephone **0800 882200**

DLA provides help with the extra costs of bringing up a disabled child. It is paid on top of almost any other income you may have, and also gives you access to other kinds of help.

There are two parts to DLA:

a **care component** – for children needing a lot of extra personal care, supervision or watching over because of their disability. This is paid at 3 different rates. It can be paid from the age of 3 months, or from birth for a terminally ill baby;

a **mobility component** – for children aged 3 or over who cannot walk or have walking difficulties or who need extra guidance or supervision walking outdoors. It can also be paid to children getting the higher rate care component who are severely mentally impaired with extremely disruptive behaviour. It is paid at two different rates. The lower rate mobility component has an extra disability test for children under 16. This can only be paid for children aged 5 or over.

There is a separate leaflet, which deals with the main rules for DLA.

DLA care component

This is payable from 3 months old, if your child needs much more help than a non-disabled child of the same age (or from birth if s/he is terminally ill).

The *Disability Handbook* gives guidance to DSS decision makers about the care needs of children, both generally and in relation to specific disabilities. It points out that all young babies require extensive care and that mobility inevitably leads to increased supervision needs. Thus, even though your child may have had a specific disability or condition diagnosed, that does not necessarily mean that s/he will also qualify for DLA care component at that stage. If your child is not mobile, while that actually reduces his/her supervision needs, it may increase other needs, or lead to other needs at a later stage – for example, if you routinely have to carry your 1-2 year old from room to room. What counts for the care component is the practical effect of that disability in terms of the child's needs for personal care, supervision or watching over.

Extra care or supervision needs – For a child under 16, such requirements must also be '*substantially in excess*' of what is '*normally required*' by a child of the same age. This extra test does not apply to children who are terminally ill.

Such needs might be '*in excess*' of the care and supervision required by a non-disabled child because they are more frequent or take longer to attend to. Or the child might need a greater quality or degree of attention or supervision. For example, a child who needs to be fed has needs in excess of a non-disabled child of the same age who just needs food cut up, even though both might need help or the same length of time during meal times. For extra care or supervision needs to count as '*substantially*' more than what is normally required, they must be outside the range of attention or supervision that would normally be required by the '*average*' child. But needs may be '*substantially*' in excess if they are within the range of that required by a particularly needy or difficult child.

Under 1s – the guidance in the *Disability Handbook* essentially rests on the incidence of non-standard interventions or actions which the child requires because of his/her disability. For example, all babies require feeding, but if your baby has severe feeding problems or requires feeding by tube into the stomach or vein, s/he would be likely to qualify for the care component.

Babies with disabilities which involve or require the following types of actions or interventions are also likely to qualify: regular mechanical suction, regular administration of oxygen, tracheotomy; dealing with a gastrostomy, ileostomy, jejunostomy, colostomy, or nephrostomy. Babies are likely to qualify who are: severely hearing or vision-impaired; babies with severe multiple disabilities; frequent losses of consciousness; fits which are secondary to asphyxia at birth or to a rare metabolic disease; babies with renal failure, cystic fibrosis, cerebral palsy, asthma, or who are extremely premature.

Under 2s – further examples are given of children whose care needs may increase from age 1. Likely to qualify are children with brittle bones or haemophilia at risk of fractures or haemorrhage from bumps and falls; mobile children with hearing or visual problems who cannot respond to a warning shout or see a potential danger; children with cerebral palsy with impeded mobility who need their parents to change their position frequently to reduce the risk of postural deformity; children with severe learning disabilities who need extra stimulation to maximise their potential, or who eat undesirable substances or mutilate themselves.

Developmental delay may mean that a child needs a continued level of attention more appropriate to a younger child. The guidance gives a chart of normal development in children up to age 6 as a comparison.

The guidance stresses that this is not an exhaustive list. For example, it does not mention the care needs created by severe eczema/ichthyosiform erythroderma and similar skin conditions. These can often involve a substantial

amount of extra care, eg frequent bathing, nappy changing, applying preparations and dressings, comforting a child whose sleep is disturbed.

If your child qualifies for the care component and it seems that the condition(s) giving rise to a need for help are likely to continue, the decision maker may well make an award until the 6th birthday. This is to avoid undue stress on parents and to enable the child's care needs to be re-assessed after the end of the first year at school. An award for a very severely disabled child with considerable and lasting care needs can be indefinite.

Refused DLA care component? - if your child is refused the care component, or awarded only the lower rate, seek advice and ask for a revision or appeal. Even if you are not successful, you will get written reasons for that decision. These reasons may give you a clear picture of why the current claim failed. The reasons may also give you some idea of the type of changes which might lead to entitlement in the future. If s/he does not qualify now, s/he may well qualify at a later stage in childhood. The borderline between entitlement and non-entitlement and between the different rates, is always difficult to assess, so, if s/he has not been awarded the care component, it is sensible to seek expert advice, make regular claims, and if the claim is again unsuccessful, appeal.

DLA mobility component – The lower rate of the mobility component is for people who can walk but who need someone with them to guide or supervise them most of the time when they are in unfamiliar areas. It is particularly aimed at people with visual impairments or learning disabilities, but others can also qualify.

For example a hearing-impaired child may need such guidance or supervision.

Children under age 16 must also show that they need '*substantially more*' guidance or supervision than a child of the same age would require, or that a child of the same age would not require such guidance or supervision.

Although most young children would need guidance or supervision in unfamiliar places, what matters is the nature and extent of your child's needs compared with another child of the same age. For example if a child has a lack of awareness of danger from traffic and other outdoor hazards, or could not give their name and address if they got lost, or would become disorientated or distressed, all these might suggest a need for guidance or supervision beyond that normally required.

OTHER BENEFITS

Carers Allowance – If your child gets the middle or higher rate of DLA care component, you may get Carers Allowance (CA) for looking after her or him. CA is not means tested but if you are working, you must not earn more than £87 a week net.

Low Income Benefits – a child under 16 is dependent on you and cannot claim any benefits in their own right. If you as a family are entitled to income support, the fact that your child becomes entitled to DLA could increase the amount of benefit you are paid. If you are not in receipt of income support because your income is too high, you may become entitled to income support following an award of disability living allowance to your child. There are two additional premiums which may be paid to you, one is Disabled Child Premium – this is included in your income support or income based job seekers allowance assessment for each child who is registered as blind or gets DLA. Second, Carer Premium – if you or your partner are entitled to invalid care allowance a carer premium is included in the assessment.

Tax Credits – you receive a tax credit for a disabled child in your assessment of working tax or child tax credit if your child is registered blind or gets DLA.

You should ask for your benefits to be checked by an adviser if your child receives DLA. There could be an effect on all the benefits above and on any other means tested benefit, such as housing benefit or council tax benefit.

If you need adaptations in the home, you could request help from your Social Services or a disabled facilities grant from your local housing authority.

You can also have included in your income support assessment, interest on a loan used to adapt your home for the special needs of your disabled child. You should seek advice either from the local DSS office or from an independent adviser before you take out such a loan.

The Family Fund Trust

The purpose of the Family Fund Trust is to ease the stress on families who care for very severely disabled children under 16, by providing grants and information related to the care of the child. It is an independent charity financed by the government.

Do you qualify?

Any family caring at home for a very severely disabled child under the age of 16 may apply for help from the Trust. The Trust is discretionary but works within general guidelines agreed with the Department of Health. You cannot get help for a child in the care of a local authority.

What kind of help is there?

The Trust can help with:

- holidays or leisure activities for the whole family;
- a washing machine or tumble dryer if a child causes extra washing;
- bedding and clothing if there is extra wear and tear;
- transport expenses if the child does not get higher rate DLA mobility component but has difficulty getting around;
- driving lessons for the child's main carer;
- play equipment related to the child's special needs.

The Trust will consider other things related to the care of the child.

The Trust also produces a number of information sheets about: adaptations, bedding, benefits, equipment, hearing impairment, holidays, hyperactivity and transport.

Applying to the Family Fund Trust

You can get an application form from the Family Fund Trust, Unit 4, Alpha Court, Huntington, York, YO32 9WN (0845 130 4542), or apply on line (www.familyfund.org.uk).

The Trust may ask one of their visitors to arrange to see you if it is the first time you've applied. The visitor will discuss your application with you in greater detail. You will be notified as soon as possible about the outcome of your application.

If you wish to appeal against a decision or make a complaint, you can write to the Chief Executive who will arrange for the matter to be investigated.

APPEALS

If you are turned down it is always worth asking advice about an appeal. If you get a lower rate than you expected you should seek advice as you can lose what you already have. You have one month to appeal from the date of the letter telling you the decision.

Coventry Law Centre will advise you about appealing and may represent you at the hearing. The Law Centre offers free legal advice and representation.

You can contact the Law Centre for an appeal appointment on 024 7622 3053.

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The Bridge
Broadgate
Coventry CV1 1NG

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