

Witness Name: Janet Morgan
Statement No: WITN2515001
Exhibits: WITN2515002- WITN2515006
Dated: 17th April 2019

INFECTED BLOOD INQUIRY

EXHIBIT WITN2515004 OF JANET MORGAN

Walking outdoors

By this we mean walking on reasonably level ground, not up or down hills or slopes.

Do you have physical problems walking?

No

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Go to page 4.

Some examples might be

- walking causes you severe discomfort, or makes you breathless
- a heart complaint
- a learning disability or behavioural problems
- an amputation
- you were born without legs or feet
- paralysis.

Yes

☒

Or something else.

Describe in your own words the problems you have and the help you need with walking.

Some examples might be that you

- need someone to physically support you
- need to stop and take a tablet
- get out of breath easily
- have problems with your balance or your manner of walking.

Or something else.

If you have an amputation, please tell us the level of the amputation.

GET OUT OF BREATH EASILY
BECOME VERY FATIGUED QUICKLY
ANKLE JOINTS BECOME VERY PAINFUL

EXPERIENCE VERTIGO AND
BECOME FAINT IF I DO NOT
REST OR HALT OFTEN/FREQUENTLY
SUFFER FROM WEARINESS

Tell us about anything you use to help you walk.

Some examples might be crutches, a walking stick or walking frame, an artificial leg, or something else.

WALKING STICK. BUT THIS IS A PROBLEM BECAUSE OF HAEMOPHILIC PROBLEMS
RECEIVE SUPPORT AND/OR ASSISTANCE FROM ANOTHER PERSON.

If the effort of walking would be dangerous for you, tell us about this.

AM FEARFUL OF BEING STRANDED
EXPERIENCE VERTIGO AND FAINTNESS THEREBY SOMETIMES STUMBLE
AND FALL.
MY HAEMOPHILIA IS AN OXIDISED COMPLICATION THAT I AM MOST AWARE OF

Tell us roughly how far you can walk before you feel severe discomfort.

For example, before you need to stop and rest.

100 metres/yards
ON AN AVERAGE DAY
WHEN FEELING
ON A BAD DAY CANNOT GET OUT OF BED.

Tell us how long on average it takes you to walk this far.

20-25 MIN

How many days a week do you have this amount of difficulty walking?

3/4 days a week
DAD HAS - 7/7 DAYS A WEEK

Having someone with you when you are outdoors

Do you need to have someone with you when you are outdoors?

Some examples might be that you

- are blind or partially sighted
- are deaf
- need someone with you when you are in places you do not know well
- have behavioural problems or a learning disability
- suffer from a phobia or obsession that means you cannot walk outdoors
- suffer anxiety or panic attacks, or cannot concentrate because you hear voices or see things
- may forget where you are going, or wander off
- have no road sense or traffic sense
- might fall
- might put yourself or other people in danger
- need someone with you to make sure you are safe
- need someone to show you the way.

Or something else.

No

☐

Go to page 5.

Yes

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Describe in your own words the problems you have and the help you need when you are outdoors.

CHRONIC FATIGUE. MUSCLE PAIN

VERTIGO. WEAKNESS

FAINTNESS.

SEVERE PAIN IN ANKLE JOINTS. WRIST + FINGERS SHOULDER
DUE TO HAEMOPHILIC ARTHRITIS.

ANXIETY + PANIC ATTACKS

MIGHT FALL

I NEED SOMEONE WITH ME TO ~~ENSURE~~ ENSURE MY SAFETY ON ABAO TO ADELPHI
DAM

BECAUSE OF MY HAEMOPHILIA AM VERY CONCERNED THAT IF I GO OUT
I MAY/CAN CAUSE BLEEDS ~~AND FALL THROUGH MYSELF~~
TRAUMATIC

I SUFFER ANXIETY ATTACKS AND GET FEARFUL OF STRANGERS

How many days a week do you need someone with you when you are outdoors?

7

days a week.

Falls or stumbles

Do you sometimes fall or stumble, even in places you know well because of your disability or the effect of your medication? This could be indoors or outdoors.

No

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Go to page 6.

Yes

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Why do you fall or stumble?

Some examples might be that you have dizzy spells, or your legs give way, or something else.

CHRONIC FATIGUE. VERTIGO. FAINTNESS.
CHRONIC PAIN IN ANKLE JOINTS WRISTS FINGERS
AND SHOULDER VIA HAEMOPHILIC ARTHRITIS.
MUSCLE PAIN. WEAKNESS

Tell us where you might fall or stumble.

ANYWHERE. INDOORS OR OUTDOORS

Describe in your own words the problems you have and the help you need when you fall or stumble.

For example, you may not be able to get up by yourself, or you may injure yourself, or you may be confused, or something else.

I NEED PHYSICAL HELP TO GET UP IF I FALL BECAUSE OF WEAKNESS.
I NEED SUPPORT AND ASSISTANCE IN MOVING ABOUT DUE TO
THE REASONS STATED ABOVE WALKING STICKS CATCHES
ETC ARE OF LIMITED USE DUE TO ARTHRITIS AND MUSCLE PAIN.
AS A HAEMOPHILIAC INJURY IS A VERY REAL HAZARD.

Tell us roughly how often you fall or stumble.

ON A BAD TO AVERAGE DAY IF UNASSISTED I WILL STUMBLE
AND SOMETIMES FALL WHENEVER I MOVE AROUND.

Claiming under the Special Rules

Go straight to page 20.

You do not have to answer any more questions until that page.

Moving about indoors

Do you have problems moving about indoors?

No

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Some examples might be

- getting out of chairs
- walking around indoors
- going up or down stairs
- using a wheelchair
- transferring from a wheelchair to something else.

Yes

☒

Or something else.

Does someone have to tell you or encourage you to move about indoors?

No

☐

Yes

☒

Describe in your own words the problems you have and the help you need moving about indoors.

ON A BAD TO AVERAGE DAY I HAVE THE FOLLOWING PROBLEMS

1, GETTING OUT OF CHAIRS

2, WALKING AROUND.

3, GOING UP AND DOWN STAIRS (I DO NOT ATTEMPT UNASSISTED)

4, USING SHOWER/BATH/W.C.

Tell us about any ways your home has been adapted or about any equipment you use to help you move about indoors. Tell us if someone helps you to use the equipment.

HAND RAILS AND GRABBARS. 2ND STAIR HANDRAIL. ALL FOOT PATHS ARE RAMPED. NO STEPS EXCEPT STAIRS.

ALL THE ABOVE HAVE BEEN PROVIDED BY MYSELF AT MY OWN EXPENSE.

How long on average do you need help moving about each time?

FOR DURATION

How many days a week do you need help moving about indoors?

3/4

days a week

How many times a day do you need help?

WHenever I

times a day

Getting out of bed in the morning and into bed at night

Do you have problems getting out of bed in the morning or into bed at night?
By night we mean when the household has closed down at the end of the day. If you want to tell us about any problems you have getting into bed or out of bed during the day, use the box on page 19.

No

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Yes

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Does someone have to tell you or encourage you to get out of bed in the morning or into bed at night?

No

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Yes

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Describe in your own words the problems you have and the help you need getting out of bed in the morning or into bed at night.

ON A BAD DAY I DON'T GET UP.

ON AN AVERAGE DAY I NEED ASSISTANCE/ENCOURAGEMENT TO GET UP BECAUSE OF FATIGUE, VERTIGO, FAINTNESS AND ARTHRITIS IN MY LEFT HAND AND RIGHT SHOULDER, PLUS STIFFNESS/ARTHRITIS OF BOTH ANKLE JOINTS, AND WEAKNESS

Tell us about any equipment you use to help you get out of bed in the morning or into bed at night. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you to use the equipment.

AS YET I HAVE NO EQUIPMENT OR APPARATUS TO FACILITATE GETTING UP FROM OR RETAINING TO BED.

BUT, I WOULD BE MOST APPRECIATIVE OF ANY HELP THAT MAY BE PROVIDED.

How many days a week do you need help to get out of bed in the morning or into bed at night?

5/6 days a week

How long on average do you need help for each time?

10 to 15 mins

Remember: If you need help filling in any part of this form, phone 0800 882 291

When you are in bed

Do you have problems when you are in bed?

No

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Go to page 9.

Some examples might be

- changing your sheets or nightclothes in the night
- turning over, settling, or staying in bed
- being propped up
- getting into position to sleep if you need to be in a special position
- getting your bedclothes back on the bed if they fall off.

Yes

☒

Or something else.

Describe in your own words the problems you have and the help you need when you are in bed.

ON A BAD DAY/NIGHT I NEED HELP TO TURN OVER AND BE PROPPED UP.

ON AN AVERAGE DAY/NIGHT I NEED HELP WITH MUSCLE MASSAGE BY LYING IN ONE POSITION TOO LONG. THE PAIN/DISCOMFORT WILL WAKE ME UP.

Tell us about any equipment you use to help you when you are in bed. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you use the equipment.

NONE.

How long on average do you need help for each time?

5 MIN

How many nights a week do you need help when you are in bed?

3/4 nights a week

How many times a night do you need help?

5/6 times a night

Help with your toilet needs

Do you have problems coping with your toilet needs?

Some examples might be

- getting to the toilet
- using the toilet
- using something like a commode, bedpan or bottle instead of the toilet
- using or changing incontinence aids
- using a catheter
- cleaning yourself.

Or something else.

No

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Yes

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By night we mean when the household has closed down at the end of the day.

Does someone have to tell you, remind you or encourage you to deal with your toilet needs?

No

☐

Yes

☒

Describe in your own words the problems you have and the help you need with your toilet needs.

ON A BAD DAY During the day
CANNOT GET TO TOILET
UNASSISTED.

During the night
AS DAY

How long on average do you need help each time during the day?

5/10 min

How long on average do you need help each time during the night?

10/15

How many days a week do you need help with your toilet needs?

1/2 days a week

How many nights a week do you need help with your toilet needs?

1/2 nights a week

How many times a day do you need help with your toilet needs?

4/5 times a day

How many times a night do you need help with your toilet needs?

2/3 times a night

Please tell us where the toilet is in the house, and about any special equipment you use to help you with your toilet needs.

For example, rails by the toilet, a commode, a bottle or something else. Tell us how useful the equipment is and if you need someone to help you to use the equipment.

MAIN BATHROOM IS ON FIRST FLOOR ADJACENT TO BEDROOMS
I HAVE HAD INSTALLED A GROUND FLOOR W/C IN AN E-
AST BATHROOM AT MY HOME

Washing, bathing and looking after your appearance

Do you have problems washing, having a bath or shower, or looking after your appearance?

No

☐

Some examples might be

- getting into or out of the bath or shower
- cleaning your teeth
- washing your hair
- shaving
- checking your appearance
- personal hygiene
- coping with periods.

Yes

☒

Or something else.

Does someone have to tell you, remind you or encourage you to wash or take a bath or shower?

No

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Yes

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Describe in your own words the problems you have and the help you need washing, bathing or showering, or looking after your appearance. If you need to wash or bath or shower more than once a day, please tell us why. If you have bed baths, tell us how long they take.

I CANNOT GET INTO OR OUT OF THE BATH UNASSISTED.
I NEED HELP BATHING. WASHING MY HAIR I HAVE TO BE ENCOURAGED
TO CLEAN MY TEETH AND SHAVE.

Tell us about any equipment you use to help you with washing, bathing or showering, or looking after your appearance. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you use the equipment.

HAVE HAD INSTALLED A WALK-IN SHOWER ROOM WITH A SEAT
AT MY OWN EXPENSE.

How long on average does it take you to wash or to have a bath or shower?

15 mins

How many days a week do you need help with washing, bathing or showering, or looking after your appearance?

4/5 days a week

How many times a day do you need help with washing, bathing or showering, or looking after your appearance?

3 times a day

Getting dressed or undressed

Do you have problems getting dressed or undressed?

No

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Some examples might be you

- need someone to help you or it may take a long time
- get breathless or feel pain
- need someone to help you choose suitable clothing
- need someone to remind you to change your clothes.

Yes

☒

Or something else.

Does someone have to tell you, remind you or encourage you to get dressed or undressed?

No

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Yes

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Describe in your own words the problems you have and the help you need getting dressed or undressed.

IF NOT ENCOIRAGED AND HELPED I WILL/WOULD NOT BOTHER.
JOINT DAMAGE, ARTHRITIS AND MUSCLE PAIN MAKE DRESSING/UNDRESSING
UNNAIDED IMPOSSIBLE.
FATIGUE MAKES THINGS EVEN WORSE

Tell us about any equipment you use to help you get dressed or undressed. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you use the equipment.

NONE.

How long on average does it take you to get dressed or undressed each time?

20/25 mins

How many days a week do you need help getting dressed or undressed?

4/5 days a week

How many times a day do you need this help?

2/3 times a day

Preparing a cooked main meal for yourself

Would you have problems because of your illness or disability if you prepared a cooked main meal for yourself?

No

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Go to page 13.

Yes

☒

We mean cooking proper meals on a traditional cooker, not using a microwave or convenience foods. Some examples might be that you cannot

- plan the meal
- peel or chop vegetables
- use taps
- use a cooker
- use cooking or kitchen tools
- cope with hot pans
- tell when food is cooked properly.

Or something else.

Describe in your own words the problems you would have and the help you would need if you prepared a cooked main meal for yourself.

I HAVE DIFFICULTY STANDING FOR ANY LENGTH OF TIME.
 I CANNOT PREPARE FOOD I.E. OPEN A TIN CAN.
 I CANNOT OPERATE A COOKER.
 I CANNOT USE UTENSILS
 I CANNOT PLAN A MEAL

How many days a week would you have these problems?

4/5 days a week

At mealtimes

Do you have problems at mealtimes?

No

☐

For example

- cutting up food on your plate
- eating
- being fed
- drinking.

Yes

☒

Does someone have to tell you, remind you or encourage you to feed yourself or have a drink?

No

☐

Yes

☒

Describe in your own words the problems you have and the help you need at mealtimes.

ON A BAD TO AVERAGE DAY I DO NOT FEEL LIKE EATING
AND IF I DO NOT THIS MAKES EVERYTHING WORSE.
VERY
ON A BAD DAY I NEED HELP EG. NEED TO BE FED

Tell us about any equipment you use to help you at mealtimes. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you use the equipment.

NONE.

How long on average do you need help for each time?

20 mins

How many days a week do you need help at mealtimes?

2 days a week

How many times a day do you need help at mealtimes?

3 times a day

Help with medical treatment

Do you have problems coping with medical treatment?

Some examples might be

- taking tablets or medicines
- taking the right tablets or medicines at the right time
- having injections
- using an inhaler
- having physiotherapy
- having oxygen therapy
- monitoring treatment
- coping with side effects
- having help from mental health services.

Or something else.

No

☐

Yes

☒

By night we mean when the household has closed down at the end of the day.

Does someone have to tell you, remind you or encourage you to take your medication?

No

☐

Yes

☒

Describe in your own words the problems you have and the help you need with medical treatment. And tell us what would happen if you did not take your medication.

During the day

NEED ASSISTANCE WITH
INJECTIONS (INTERFERON ALPHA)
DRUGS (ZALDIVIR) (LIVIVIRIN)
PREVENTING AND SPOTTING BLOODS
MASSAGING ACHING MUSCLES
MOVING STIFFENING JOINTS
PHYSIOTHERAPY.

During the night

SAME AS DAYS

How long on average do you need help each time during the day?

30 mins

How many days a week do you need help with your medical treatment?

3/4 days a week

How many times a day do you need help with your medical treatment?

7/7 times a day

How long on average do you need help each time during the night?

30

How many nights a week do you need help with your medical treatment?

7/7 nights a week

How many times a night do you need help with your medical treatment?

7/7 times a night

Someone keeping an eye on you

Do you need someone to keep an eye on you?
Some examples might be that you

- get confused
- might wander off
- do not realise when there is danger
- do not realise when your condition is getting worse
- might hurt yourself or someone else
- might be destructive and cause danger to yourself or someone else.

Or something else.

No

☐

Go to page 16.

Yes

☒

By night we mean when the household has closed down at the end of the day.

Describe in your own words why you need someone with you.

During the day
ON A BAD DAY I NEED HELP
BECAUSE,
I SOMETIMES GET CONFUSED
I DO NOT REALISE WHEN I'M
GETTING WORSE IE MORE ILL
AND JOINT / MUSCLE BLEEDS.
QUITE OFTEN I DO NOT REALISE
HOW ILL I AM AND ATTEMPT
TO DO THINGS THAT ARE
BEYOND MY PHYSICAL CAPABILITIES.

How long on average do you need someone with you each time during the day?

ALL DAY

How many days a week do you need someone with you?

1 1/2 days a week

How many times a day do you need someone with you?

ALL DAY times a day

Describe in your own words why you need someone to be awake to watch over you.

During the night

SAME AS DAY

How long on average do you need someone to be awake during the night to watch over you?

ALL NIGHT

How many nights a week do you need someone to be awake to watch over you?

1 nights a week

How many times a night do you need someone to be awake to watch over you?

ALL NIGHT times a night

Dizzy spells, blackouts, fits, seizures or something like this

Do you have dizzy spells, blackouts, fits, seizures or something like this?

For example

- epilepsy
- hypoglycaemia (low blood sugar)
- loss of awareness or concentration
- altered states of consciousness or awareness.

No

☐

Go to page 17.

Yes

☒

By night we mean when the household has closed down at the end of the day.

Tell us what happens.

We need to know about things like

- what happens before you have a dizzy spell, blackout, fit or seizure
- if you get any warning of what is going to happen such as an unusual taste or smell or tingling
- if you have epilepsy, what type of fit you have
- what happens during the fit or seizure
- if you lose consciousness or if your limbs shake, or you bite your tongue or are incontinent or have a convulsion
- if you get aggressive, or injure yourself, or suffer behavioural problems
- what happens after a fit or seizure – if you need to sleep, or if you are confused, or if you might wander off.

Describe in your own words the problems you have and the help you need with dizzy spells, blackouts, fits, seizures or something like this.

During the day

ON BAD/AVERAGE DAYS EXTREME
FATIGUE CAUSES VERTIGO.
THIS IS BROUGHT ON BY NOT
RESTING WHEN NECESSARY.

During the night

AS DAY

How long on average do you need help each time during the day?

5 mins

Tell us roughly how often you have a dizzy spell, blackout, fit or seizure during the day.

3/4 times a day

How long on average do you need help each time during the night?

Tell us roughly how often you have a dizzy spell, blackout, fit or seizure during the night.

times a night

If you keep a record or a diary of your dizzy spells, blackouts, fits or seizures, you

The way you feel because of your mental health

Do you have problems because of your mental health?

No

☐

Go to page 18.

Yes

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Some examples might be

- getting anxious or panicky
- feeling someone may harm you
- feeling you may harm yourself
- feeling you may get aggressive
- feeling you cannot cope with even the slightest change to your daily routine
- neglecting your personal hygiene or the way you look
- hearing voices or experiencing thoughts that disrupt your thinking and may put you at risk.

Or something else.

Describe in your own words the things you do or cannot do, or the experiences you have had, because of your mental health.

EXPERIENCE ANXIETY AND PANICK ATTACKS.

OFTEN FEEL I CANNOT COPE WITH EVEN SLIGHT CHANGES TO DAILY ROUTINE.

HORRIBLE MOOD SWINGS AND DEPRESSION.

Tell us roughly how often this happens, and how long you need help for when it happens.

THIS HAPPENS MOST WHEN ON ALPHA INTERFERON TREATMENT
THIS IS A RECOGNISED SIDE EFFECT, BUT APPARENTLY IT IS ALSO
DUE TO LIVER DYSFUNCTIONS

Communicating with other people

Do you have problems communicating with other people?

For example, you

- have difficulty understanding or being understood
- have a learning disability
- have difficulty with unfamiliar people or places or situations
- have difficulty concentrating or remembering things
- have difficulty reading letters
- have difficulty filling in forms or answering or using the phone
- have difficulty speaking to someone who does not know you well
- cannot ask for help when you need it
- need to use sign language
- have difficulty hearing.

Or something else.

No

☐

Go to page 19.

Yes

☒

Describe in your own words the problems you have and the help you need communicating with other people.

ON A BAD ~~WAVE~~ AVERAGE DAY
I HAVE DIFFICULTY UNDERSTANDING AND BEING UNDERSTOOD.
I HAVE DIFFICULTY WITH UNFAMILIAR PEOPLE AND PLACES.
I HAVE DIFFICULTY CONCENTRATING AND REMEMBERING THINGS.
I ~~DO NOT~~ ^{CANNOT} READ LETTERS. FILLIN FORMS OR ANSWER THE TELEPHONE.

Tell us about any equipment you use to help you communicate with other people. Tell us how the equipment helps you and how useful it is. Tell us if someone helps you use the equipment.

NONE AT THIS TIME BUT AM ENQUIRING ABOUT AVAILABILITY OF A LIFE LINE SERVICE.

How long on average do you need help each time?

AS NECESSARY

How many days a week do you need someone to help you communicate with other people?

1/2 days a week

How many times a day do you need someone to help you communicate with other people?

More about the way your illnesses or disabilities affect you

Describe in your own words any ways that your illnesses or disabilities affect you that you have not been able to put anywhere else on this form.

The more you can tell us about the problems you have, the easier it is for us to get a complete picture of the help you need.

You may want to tell us if your condition changes from day to day, or over a period of time or in different conditions which means that the amount of help you need varies.

Tell us about any equipment you use that you have not already told us about on this form.

We need to know about the help you need, even if you do not actually get that help. But we do not need to know here about the help you need with domestic duties.

IN SPITE OF BEING A HAEMOPHILIAC I HAVE WORKED ALL MY LIFE AND PURSUED A PROFESSIONAL CAREER AS A BUILDING SURVEYOR AND PRINCIPLE LOCAL GOVERNMENT OFFICER. RECENTLY, THAT IS THIS LAST ^{FOUR} ~~THREE~~ YEARS MY CONDITION HAS WORSEND/DETERIORATED THROUGH HAEMOPHILIC ARTHRITIS AND JOINT PAIN. BUT BY FAR THE BIGGEST PROBLEM IS THE OVERALL ILL EFFECTS OF CHRONIC LIVER DISEASE VIA HEPATITIS "C" CONTRACTED THRU FACTOR VIII CONCENTRATE TREATMENT FOR BLEEDS. I CONTRACTED HEPATITIS "C" IN 1981 AND WAS DIAGNOSED AS HAVING CHRONIC LIVER DISEASE ETC IN 1995, I HAVE CONTINUED TO WORK UP UNTILL VERY RECENTLY THRU THE GREAT HELP AND ASSISTANCE GIVEN BY MY FAMILY, FRIENDS, COLLEAGUES AND EMPLOYER.

ON A GOOD DAY I OPERATE/FUNCTION AT 35% OF NORMAL. (DAY AVERAGE)
ON AN AVERAGE DAY I'M HOUSE/GARDEN BOUND AT BEST
ON A BAD DAY I'M BED RIDDEN 2/3 DAYS A WEEK

SUFFICE TO SAY IT HAS TAKEN ME THE BEST PART OF TWO WEEKS TO FILL OUT THIS FORM AS I WANTED TO DO IT IN MY OWN HAND AND UNDER MY OWN STEAM.

NOT BAD FOR A MEMBER OF A CHARTERED INSTITUTE WHO UNTILL RECENTLY WAS HEAD OF A PROFESSIONAL OFFICE FOR THE SECOND LARGEST LOCAL AUTHORITY IN WALES

When your problems started

If you have problems getting around, tell us when you started to have the problems you have told us about.

Tell us the exact date if you can. But if you cannot remember, you must tell us roughly when this was.

05 10 1 1998

If you have problems with personal care, tell us when you started to have the problems you have told us about.

Tell us the exact date if you can. But if you cannot remember, you must tell us roughly when this was.

09 10 1 1995

Do you think you will have these problems for at least 6 months?
You must tick one of these boxes

No

☐

We will write to you about this.

Yes

☒

Declaration

Please sign this form here.

Even if you have already signed section 1 for someone else, still sign this form here.

I declare the information I have given about the way my illnesses or disabilities affect me is correct and complete.

Warning -- to knowingly give false information may result in prosecution.

Signature

Date

GRO-C: D Morgan

13 10 7 1998

If you are signing this form for someone else, please tell us your name and address.

Your name

Your address

Postcode

What to do now

Get the statement on the next page filled in if you can. It will help us deal with your claim quickly. If you cannot get the statement filled in, do not worry. We may need to write to your doctor or to someone else who can tell us about your illnesses or disabilities.

If you are not sure where to send this form, phone the Benefit Enquiry Line. The number is 0800 882 200.