

Please tell us

About help with personal care



Remember if you want to ask anything about Disability Living Allowance, or about filling in this form - phone free on **0800 882 200**.

■ About section 2

Your answers in this section will help us to get a clear picture of the help that you need with personal care.

You will see that you can answer most of the questions just by ticking a box. And you will also see that we have given you space to tell us things that will help us to understand your own situation.

■ Filling in section 2

If you fill in this section it will help us to deal with your claim quickly. And we will not normally ask a doctor to examine you.

But if you have problems filling in this section, do not worry - someone else can fill it in for you. Just ask a friend, relative or carer. The **notes** about Disability Living Allowance tell you who else can help you. Read the section called **Help and advice**.

If we cannot get a clear picture of the help that you need with personal care we may ask a doctor to examine you.

At the end of this section there are **2 statements** for other people to fill in. Please get these statements filled in if you can. These statements will also help us to get a clear picture of how your illness or disability affects you. And this will help us to deal with your claim quickly.

■ Personal details

Please fill in these details again. This will help us to make sure that we know who this form is about.

If you are filling in this form for a child or for someone else please tell us about them here. And tell us how their illness or disability affects them in this form.

Fuli name

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Letters	Numbers	Letter
National Insurance	GRO-C	
(NI) number	ORD-C	

If you cannot find your NI number - do not worry. And do not wait to send us your claim.

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Personal details - contin	uea	
Please tick any of these statements		
that apply to you.		
You are blind or partially sighted		
You have problems with hearing,		
even with a hearing aid		
You have problems with speech,		
which mean that you cannot	and the say you side the first light	
communicate well with other peopl	e La	
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	No help needed 1 to 3 days 4 to 5 days 6 to 7 days
Roughly how many days a	
week do you need help -	
getting out of a chair? AS PART / PAGE 3	
walking around indoors?	
DEPENDING ON	
SEVERITY OF Spoing upstairs?	
BLEE)S /	
going downstairs?	
Please tell us about any	WALKING STICKS
equipment that you use to help you when you are	OR CRUTCHES
moving about indoors.	ON CRUICITES
This could be a stair lift,	
hand rails, a special chair tha you can get in and out of,	
	# (Barana Barana) - Barana (Barana)
or something like this. Tell us anything here that will help us to understand your own situation.	
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	need - during the day - continued
In the bathroom	Ma bala
	No help needed 1 to 3 days 4 to 5 days 6 to 7 days
Roughly how many days a	
week do you need help -	
getting washed ?	
having a bath? NABAE つりられていた	
NAISLE TO BATH.	
having a shower ?	
VABLE TO HAVE	
SHOWER IF BLEET	Roughly how long do you need help for when you are
ESES TO WASH	need help for when you are 201/1/18 - 301/11/18 in the bathroom?
Please tell us about any equipment that you use to	WHEN UNABLE TO STOND A
help you when you are	STOOL IS NEEDED WHITE GETTING
in the bathroom.	WASHES
- 11	
Tell us anything here that will help us to understand	
your own situation.	
For example, you may need	
more than one bath or showe	
each day. Or you may need help with other things like	
cleaning your teeth, or	α
washing your hair, or shavin	g. AS ELBOUS AND JOINS
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HELD IS NEED	6) WHEN SHAVING AND WASHIN
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ENERAL	
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Coping with your toil	그리고 그렇게 되었다면 하는 사람들이 되었다. 하는 회사들이 되었다면 하는 사람들이 가지 않는데 하는 것이 없다.
Roughly how many days a week do you need help - using the toilet?	No help needed 1 to 3 days 4 to 5 days 6 to 7 days
using something like a commode, bedpan or bottle instead of the toilet?	
coping with incontinence of the bladder?	
coping with incontinence of the bowel ?	
using a colostomy bag ?	
using nappies, pads or incontinence aids?	
	How many times a day do you need help coping with your toilet needs ?
	Roughly how long do you need help for each time ?
Please tell us about any equipment that you use to help you with your toilet needs. This could be rails by the toilet, a special toilet seat, or something like this.	
Tell us anything here that will help us to understand your own situation. For example, if you are a woman you may need help coping with your periods.	
HHLN BLEE)ING (BETTING TO AN	CCUNS - HELP IS NEEDED THE TOILET.

about your dialysis on page	you need with any other medical treatment.
Roughly how many days a week do you need help - taking tablets or medicines or making sure that you take the right tablets or medicines at the right time	No help needed 1 to 3 days 4 to 5 days 6 to 7 day
having injections ?	
using an inhaler ?	
having physiotherapy ?	
having oxygen therapy ?	
with something else ?	
	Please tell us what this might be
	How many times a day do you need help with medical treatment? WSUALLY TWICE DCCUAS
	Roughly how long do you need help for each time ?
Cell us anything here that will help us to understand your own situation.	HELD WITH INSCUTIONS IS WILLAWY N(E)E) ON I ON 2 DAYS TO CONTROL BLEEDING.

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■ Part 1 Help that you	need - during the day - continued
■ At mealtimes	
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Roughly how many days a	needed 1 to 3 days 4 to 5 days 6 to 7 days
week do you need help - cutting up food ?	
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eating or being fed?	
fought has many days a.	The second secon
drinking ?	
red to do three teach is a second of the control of	Roughly how long do you need help for at mealtimes ?
Please tell us about any	
equipment that you use to	
help you at mealtimes. This could be a special knife	
and fork, a special dish or	
something like this.	
Tell us anything here that	HELP IS NECOSES IF A BLEES ET
will help us to understand your own situation.	account of the same
your own situation.	
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Part 1 Help that you need - during the day - continued

Preparing a cooked main meal

Only fill in this page if you are 16 or over.

Please tell us about the help that you need with the things on this page. If you do not normally do these things, please try and tell us about the help you would need if you tried to do them.

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No help needed

Roughly how many days a week do you need help or would need help, if you tried to do these things peeling and chopping vegetables?

6 to 7 days

4 to 5 days

1 to 3 days

using taps?

main meal.

using a cooker?

coping with hot pans?

Please tell us about anything else you would need help with if you prepared a cooked main meal. For example, you may need help with planning a cooked

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Tell us anything here that will help us to understand your own situation.

IF BLEEDING OCCURS IT WOULD NOT BE POSSIBLE TO DO PATTHING IN THE KITCHEN DUE TO RESTRICTED USE OF ARMS. IT IS ALSO DIFFICULT TO STAND FOR ANY LENGTH Of Time Dut To ANTHAITIE IN PAKLET FROM BLEEDS WER MANY YEARS.

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	needed 1 to 3 days 4 to 5 days 6 to 7 c
Roughly how many days a	Performance Control Co
week do you need help - getting into your wheelchair?	
getting into your wheelchair?	
getting around at home?	
	WHILL BLEDING OCCURS
transferring from your	
wheelchair to somewhere	
else ?	
Please tell us about any	
ways that your home has	
been adapted so that you	
can use your wheelchair at home.	
Tall	
Tell us anything here that will help us to understand	HELD IS NEEDED WHEN GENERALLY MOVING ABOUT AT HOME JURING TIMBS WHEN BLEEDING
your own situation.	MOVING ABOUT ATHOME
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lease tick why you need someone to eep an eye on you.	
ou could hurt yourself	Little Bases with the latter and a fact with the control of the
You could hurt someone else	
You do not realise when there is danger	
You do not realise when your condition is getting worse	
You get confused	
You could wander off	
The second second was the best find	
	Please say why
Some other reason	Trease say Willy
Roughly how many days a week do you need someone to keep an eye on you during the day?	Trease say Willy
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Roughly how many days a week do you need someone to keep an eye on you during the day? Roughly how much of the day do you need someone to keep an eye on you for? Tell us anything here that will help us to understand	

Part 2 Keeping safe - duri i			
Fits, blackouts or something	g like this		
Do you have fits, blackouts or something like this?			
Yes	Roughly how often does this happen ?		
	When did it happen last ?		
Please tell us what happens when you have a fit, a blackout or something like this.			
For example, you may get some warning about what is going to happen.			
Tell us anything here that will help us to understand your own situation. For example, you may have hurt yourself and needed treatment.			

Part 3 Help that you	need - going to bed
Going to bed Roughly how many days a	No help needed 1 to 3 days 4 to 5 days 6 to 7 days
week do you need help - getting undressed?	
getting into bed ?	
	Roughly how long do you need help for when you are going to bed ?
Please tell us about any equipment that you use to help you when you are going to bed. This could be a monkey pole, a hoist, something to help you get undressed or	
something like this.	1000 0000 anjacro
Tell us anything here that will help us to understand your own situation.	HELD IS NECJED BETTING UNINESSED 7 GETTING INTO BED DURING BLEGING

When y	ou are in bed	
		No help
		needed 1 to 3 nights 4 to 5 nights 6 to 7 night
	now many nights a	
	you need help -	
turning o	ver?	According to the second
	ne bedcovers back	
on the be	ed, if they come off	? L
	sheets or	
nightclot	hes?	
nettina i	nto the right positio	n
	ing, if you need to	
	a particular position	?
		How many times a night do
		you need help?
		Roughly how long do you 5-10 MINS
		need help for each time ?
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Coping with your toile	t needs at	night			
	No help needed	1 to 3 nights	4 to 5 nigh	ts 6 to 7 r	night
Roughly how many nights a week do you need help - getting to the toilet?	BLEES	Ja occum			
using the toilet?					
using something like a commode, bedpan or bottle instead of the toilet?					
coping with incontinence of the bladder?			And consistency of the constitution of the con		
coping with incontinence of the bowel?					
using a colostomy bag?				Account of the Control of the Contro	
using nappies, pads or incontinence aids ?	How many tir you need hel your toilet ne	mes a night do p coping with eds?			
	Roughly how need help for	long do you			
Please tell us about any equipment that you use to help you with your toilet needs. This could be rails by the toilet, a special toilet seat, or something like this.					
Tell us anything here that will help us to understand your own situation. For example, if you are a woman you may need help coping with your periods.					

Part 4 Help that you need - during the night - continued Help with medical treatment at night

Remember if you need help with dialysis do not tell us about it here - we will ask you about your dialysis on **page 19**.
But tell us here about help you need with any other medical treatment.
And keep filling in this form.

Roughly how many nights a	No help needed	1 to 3 nights	4 to 5 nights	6 to 7 nights
week do you need help - taking tablets or medicines or making sure that you take the right tablets or medicines at the right time?				
having injections ?				
using an inhaler?				
having physiotherapy?				
having oxygen therapy?				
with something else?	Please tell	us what this might l	De .	
	How many do you nee medical tre	times a night d help with atment ?		
		ow long do you for each time ?		
Tell us anything here that will help us to understand your own situation.	MELP H AN IN	242) BE NE (65,00)41 BLEED OCCU	ests HAV	1N6 NIGHT
	IF A IS	ment Till	ne) or intertis	70 N 61VEN
	1)42146	DATIME		

Someone getting up or bei	ng awake
and the first that the second of the second	
Please tick why you need someone to make sure that you are safe.	
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You could hurt yourself	
You could hurt someone else	
You do not realise when there	
is danger	
You do not realise when your condition is getting worse	
You get confused	
You could wander off	
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Some other reason	Please say what
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Roughly how many nights a week d	ONCE OR TWICE WHILE
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When did you start on d	lialysis ?
Please tick what sort of o	dialysis you are on.
CAPD Continuous ambul peritoneal dialysis	
Haemodialysis	
CCPD Continuous cycle peritoneal dialysis	
Other	Please say what sort
Has the sort of dialysis y	OII are
on changed in the last 3 months?	No No
Market and the second of the s	Yes When did it change ?
	F. Alla Media
	f dialysis
Please tell us what sort of	f dialysis ge.
Please tell us what sort of you had before this change CAPD Continuous ambula	f dialysis ge.
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About help with personal can

Part 6 For people on How many sessions a week do you have ?	Antidopolius Antid	
Has the number of sessions a week changed in the last 3 months ?	No L	
	Yes L	When did this change?
How many sessions a week did you have before this change ?		
Please tick when you normally o	lialyse.	
During the night Do you need someone to help you or to keep an eye on you when you are on dialysis? They could be hospital staff, a relative, someone who looks after you or someone else.	No L	How do they help?
		Who are they?
Are you on a waiting list for a kidney transplant?	No Yes	Please tell us how long it is likely to be before you have a kidney transplant, if you know this.
Tell us anything here that will help us to understand your own situation.		

_{Roug} hly how long have you needed help with personal care?	ALL MY LIFE
Do you think that you will need this amount of help for the next 6 months ? No	We will write to you about this. But please still fill in any of this form that applies to you.
Yes	
Please tell us about any equipment that you use to help you, that you have not already told us about in this form.	
Please use this space to tell us anything else about the help you need with personal care.	
our signature	
rlease sign this form here. If you have already filled in section 1 f or signed section 1 for someone else p	nease sign uns form here.
he information I have given about the	help needed with personal care
correct and complete.	
Signature	GRO-C

What to do now

please check that you have filled in as much of this form as you can. And check that you have signed this form.

Statements from other people

Please get the statements on the next 2 pages filled in, if you can.

Statement 1

is from someone who knows how your illness or disability affects you this could be someone who looks after you.

Statement 2

is from your doctor or someone like this.

This could be an occupational therapist, a physiotherapist, a teacher or someone like this.

Please ask the person who knows the most about how your illness or disability affects you - they will not need to look at the answers you have given on this form.

If you cannot get these statements filled in, do not worry - we will normally write to your doctor or to someone else who can tell us about your illness or disability.

Sending your claim back

Send section 1 and section 2 together.

Use the envelope we have sent you. It does not need a stamp.

Remember send everything to us so that we will get it by the date stamped on the front of section 1.

If you wait you could lose money.

Please allow a few days for your claim to reach us by post.

Disability Living Allowance Statement 1 -	ne who knows how your ability affects you	from so

in this statement

Anyone who knows how your illness or disability affects you can fill in this statement. This could be someone who looks after you or someone else who knows you well.

Note for people filling in this statement

Please fill in this statement straight away. Even if you have already filled in the rest of this form for someone else, please fill in this statement. What you tell us will help us to make sure that we know as much as we can about how their illness or disability affects them.

Please fill in the name and address of the person who this form is about	
Their name	Your signature
[현실하다 [현실성 전략 기본 보다 기계시설 전략 기본 전략 	
Their address	Your full name
	Address
Diagram to the court bing you think that we	
Please tell us anything you think that we should know about how their illness or	
disability affects them	
	Phone number
	Date
	Occupation
	Relationship (if any)

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