

Guide to completing Attendance Allowance Forms

Contact Department of Work and Pensions (01224 618000) or the Benefit Enquiry Line (0800 88 22 00) for an Attendance Allowance (AA) Claim Pack.

General Information

AA is a **non-means tested benefit** for people 65 years and over who have difficulties due to the effect of a long term disability or illness. The main qualifying condition is that you have had these difficulties for six months. There are two rates, higher and lower. Higher rate can be awarded if you have difficulties both day and night, lower rate can be awarded if you have difficulties during either day or night.

Open the pack, read the notes and look through the claim form.

Be very careful about completion!

Start thinking now about how your conditions are affecting you – but remember AA (Attendance Allowance) does not cover problems with domestic chores, walking outdoors or cooking. It's about difficulties you have with looking after your 'personal care' that is washing, bathing, dressing, undressing, going to the toilet, any continence issues, moving about indoors including going up and down stairs, falls or stumbles (indoors or outdoors), help with medication, eating and drinking or needing someone to help you with any of these activities. It also covers needing someone to keep an eye on you to ensure your safety if, for example, you fall a lot or you tend to wander or forget to take medication, or have difficulty seeing or hearing or if you need to be encouraged to do any of these things for yourself.

Sometimes it's difficult to separate the 'personal care' issues which count from the 'domestic' issues which don't count. Think through the activities, for example, if you can't bend down to put clothes in the washing machine or put a casserole in the oven, that probably means you have difficulty bending to wash and dry your feet or put on tights or shoes. If you have problems with stretching or reaching perhaps into a cupboard or closing the curtains, you might also have difficulty getting your arms into a cardigan or coat or not be able to wash your own hair. Think about all the activities you have difficulty with and how they impact on your ability to look after yourself and the extra time taken to do these things.

NOTES TO HELP COMPLETION

Part 1 – personal details - you do not have to put in your phone number if you don't want to

Part 2 – this is if someone else is signing the form for you for any reason

Part 3 – this is if the claim is under 'special rules' or involves dialysis

Part 4 –

illnesses and disabilities – how long you've had them and what part of the body is affected. Don't forget ailments that you've learnt to live with but still cause you pain or difficulty
medication - for what condition, what dosage, how long you've been taking them and whether a repeat prescription. It's helpful if you have a copy of a current prescription and attach a photocopy of it to the form.

Part 5 – details of GP, hospital specialists or other people involved in your care.

Part 6 – details about the difficulties or pain you might have doing all the day-to-day activities listed on pages 8 & 9. You might get 'help' from another person if you can't manage these activities for yourself. Or if you have no one to help you, whether these activities take extra time or might be risky without assistance. You might be able to manage things yourself, but have to be encouraged or reminded because you're becoming forgetful.

Be very clear about how many times per day or night you would need 'help' and how long in total that 'help' would be on a daily basis. Keeping a diary of your care or supervision needs is a good way of realising just what your difficulties are because most people adapt to their problems and don't actually think about them in terms of time or degree of difficulty or whether life would be easier if someone else was there to help out. Sometimes an eye has to be kept on someone for safety reasons – for example, they might fall a lot or someone with dementia might wander off.

Part 7 – extra information about day-to-day difficulties or help that's needed in order to pursue leisure

pursuits, going to church, visit the library, and include things you've had to give up because they've become more difficult to do. If the restrictions on your life cause you to become fed-up or frustrated or even angry, or you have a mental health condition that affects you, tell them about it here.

Remember – if you don't tell them about the effects of your conditions on you, they won't know!

The DBC (Disability Benefits Centre) gets thousands of applications – so you must provide all the information they need in order to correctly assess your application. They don't know you—so remember to put down all your difficulties and any help that does or would make it easier or less painful for you seeing to your 'personal care'.

Part 8 – when your care or supervision needs began – there is a six-month qualifying period before AA can be awarded

Part 9 – straightforward questions about hospital/ residential care and benefits received

Part 10 – ask whoever is involved in looking after you on a day-to-day basis and who knows about your difficulties to fill this in. They may wish to clarify certain points such as falls, incontinence problems, need for encouragement etc

Part 11 – your consent for DBC to contact various people mentioned in respect of your claim

Part 12 – AA payments will be made in same way as your retirement pension or pension credit

Part 13 – sign and date

Part 14 – if you have attached any extra information, list it here. Make sure all extra information includes your name and national insurance number

NOTES

Don't assume that because you suffer from a particular illness that they will know how it affects you – they won't – **you have to tell DBC** how your day-to-day life is affected – in detail. Give examples of difficulties if you can.

It's best to **make your GP aware** exactly how your conditions affect you day-to-day and any help that you need both for benefits purposes and also because the GP should know anyway of increasing pain or difficulties. We have a checklist which you can fill in and take to your GP and ask that it's kept in your notes in case the DBC sends for a factual report from the GP to help assess your claim.

Take a copy of your form before you send it away to DBC if you can. You can always come along to the Carers Centre where we can copy it for you.

You will be sent an acknowledgement of the claim followed usually a few weeks later by a decision notice which will inform you that

- a you have been **awarded** AA at either the higher or lower rate
- b your application has been **turned down** completely
- c a **DBC doctor** will be coming to **visit you** for more information and then your application will be decided. Contact us for advice if this is the case.

There is normally **only 28 days** in which to lodge an appeal if you do not agree with the decision.

Contact us or Aberdeen Welfare Rights (AWR) (advice line 648247) as soon as possible for advice.

Upgrades (also known as supersessions)

If you were initially awarded the lower rate and later on your difficulties increase to both day and night, you can apply for an upgrade to the higher rate. However, it is always advisable to seek expert advice about this procedure before you contact the DBC.

Renewals

If you are awarded AA for a limited period of time, you will be sent renewal forms approximately six months before the end of the award. It is helpful to refer to the copy of the original claim to remind yourself how your condition(s) previously affected you. Complete your renewal form as soon as you can so you don't lose benefit. If in doubt about the procedure, seek advice from an advice agency.

An award of AA might make you eligible for **Pension Credit** (PC) for the first time or, if you already get PC, the amount might increase. Or a carer might be entitled to **Carers' Allowance** (CA) for helping look after you. Contact us or AWR for a benefits check to ensure you're getting all the benefits you're entitled to.

SAMPLE DIARIES OF DAY-TO-DAY DIFFICULTIES

This is a diary of a 75-year-old woman who lives alone in a two-storey house. She suffers from arthritis. We have listed some of the difficulties she encounters and help she needs (but doesn't always receive) which would make life easier for her. This is a very detailed example—you may want to just make notes.

Morning

- 7.30 – 7.45 Due to the stiffness and pain in my joints after lying all night, I take a long time to get up on my own. I really need a hand to get me into a seated position, help to swing my legs out and steady me when I stand up. The walking stick doesn't give enough support, I need to move as quickly as possible to the toilet as I've have fallen recently because my balance is poor. If I take my time, I sometimes have an 'accident' before getting to the toilet and this is upsetting.
- 7.45 – 8.15 Need a cup of tea but do without as it's easier to stay upstairs to shower and dress and then attempt to go downstairs. I have great difficulty in climbing in over the bath, I've slipped twice recently and now am very wary. Sit on the bath seat under the shower for a while – the warm water helps the aches and pains. Have to use a bath brush to reach my feet but it doesn't do a proper job. Great difficulty holding soap and opening lotions and potions due to pain in fingers. I would love to be able to soak in a bath again but there is no way I could get out. Put on towelling gown which helps dry me – have to stand on towel to dry feet but can't dry between toes and get broken skin. Sometimes I use a hair dryer to dry areas. Cannot shampoo myself and daughter does this twice a week for me.
- 8.15 – 8.30 Dressing takes a while – difficulty bending and stretching. I have to wear easy, pull-on clothes with as few fastenings as possible. It upsets me that I can't wear some of the lovely clothes I have because of the difficulty of getting them on and off. I also have trouble with earrings and brooches because my fingers are just too stiff for 'fiddly' jobs now. However I persevere because of personal pride although it takes me a long time. It is easier when family come in and help me although it's upsetting that I can't do these things for myself any more.
- 8.30 – 8.35 I am finally able to go downstairs slowly. I have my stick in one hand and hold on to the bannister. I go down one step at a time taking great care as I find I get light-headed easily and can misjudge the step. I fell down from top to bottom a few weeks ago and had to go to Accident and Emergency. Luckily my daughter called in half an hour after I fell or I might have been lying there all day.
- 8.45 – 9.00 Make a cup of tea – I have a tilting kettle and just put in a mugful of water as I'm unable to lift anything heavier. Make some toast and marmalade – the lid has to be kept off as it's too stiff for me. Take medications – I never forget but sometimes my fingers fumble them and they will fall. I can't pick them up and have to do without until my daughter comes in to make some lunch for me.
- 10.00 – 10.10 It would be good if someone was there to help support me and keep an eye on me getting up and down the stairs when I visit the toilet. Because I take so long on the stairs, I find I go long before I really need to in case I get caught short and have an accident on the stairs. The district nurse mentioned a commode but there is nowhere suitable downstairs and I couldn't use one in the hall or living room in case one of my children came in to see me which they do at odd times to check I'm OK.
- 11am – 11.10 Again would appreciate help to go to the toilet

Afternoon

- 12.00–12.15 My daughter visits to bring my shopping and heats up some soup for us. I'm not able to prepare food anymore and rely on frozen micro-meals and meals my family has made for me. I find this upsetting as I was a good cook and took pleasure in cooking for my family.
- 12.30 – 1.00 My daughter makes us a cup of tea and we watch lunchtime news and discuss what's happening. I enjoy talking about current affairs with people as it helps keep my mind sharp.
- 1.30pm Struggled again to go upstairs to the toilet

- 2.00– 3.00 A neighbour pops in for company – she makes afternoon tea for us and we do a jigsaw together. I look for the pieces and she lifts them out as the arthritis affects my hands badly.
- 4.30 – 5.00 My son isn't able to pop in tonight to get my tea ready so I manage to put a frozen meal in the micro but I have great difficulty lifting the film off without scalding myself with the heat. I don't really like these meals and most of it goes in the bin – my family think I eat it all but I don't.

Evening

- 6.30 – 8.30 Have to struggle with the stairs again to visit the toilet and tidy myself up. It's bingo night in a nearby hall and my neighbour comes in, helps me get my coat on (it's too heavy for me to lift and too painful to get my arms into the sleeves) and drives me along to the hall – it's not far but I couldn't get there without transport. Although I can't hold the pen anymore, I 'spot' for my friend. I enjoy the company and getting out the house. If I couldn't get out regularly, I think I'd quickly get quite depressed and I don't like always having to rely on my family – they have their own lives. Visit the toilet before I leave as it's on the same floor – no stairs!
- 9.30 – 9.45 Tea, biscuits and medication before bed. Luckily nothing goes on the floor this time. It's difficult getting up the stair holding both my stick and a glass of juice.
- 10.00 – 10.30 Toilet, teeth, undress and into bed at last – takes about 20 minutes in total. Hopefully I'll be up just twice tonight to the toilet as it takes me a good 10-15 minutes to get up, there and back again. I'm always so worried about having an accident in bed as I can't change the bedding myself. I was so ashamed telling my daughter about it although she is very good and washes and changes the bed linen when she does all the rest of my laundry.

Night Time

- 1am—1.10 Up to the toilet, I've difficulty getting out of bed as I've seized up. Taken a painkiller—try to do without during the night but sometimes it just gets too much.
- 4.30—4.40 Up again to the toilet. Find it difficult to get back to sleep.

DIARY 2

This is a diary of an 85-year-old man who suffers from dementia and a heart problem. His adult son has had to give up his job to stay with him to ensure his safety 24 hours a day. As the son has already been granted appointeeship to deal with his father's affairs, the son fills in the 'diary'.

Morning

- 9am – 9.15 Go in to wake up father. Find him fully dressed and lying on the bed. Try to persuade him to wash and shave but he says no.
- 9.30 – 10am Make breakfast for him – he wants porridge. Once I've made it he changes his mind and wants toast. Make him toast which he eats and doesn't notice that he has dropped marmalade on his jumper. Give him his medication as he doesn't know himself what he takes when or whether he has taken it. His heart medication is really important.
- 10.30 Remind him to visit the toilet. He often gets in a mess as he doesn't clean himself properly and I have to clean up him and the toilet which is upsetting for both of us.
- 11am – 11.15 He's asking about porridge again and did he have his breakfast as he can't remember. Make coffee for us and he talks about when my mother was alive and they were first married. Sometimes he remembers she died last year and sometimes he doesn't. He gets upset when I remind him that she is dead.
- 11.30 – 12.00 Community Psychiatric Nurse from old-age psychiatry comes in to have a chat with him. She visits every fortnight. She's trying to get him to go to the day-care centre but he doesn't like being around other people now because he gets frightened that they want to steal from him.

Afternoon

- 12.30 – 1pm Make some lunch. He loves his food but spills it on himself and doesn't wipe his mouth. I remind him to wipe his mouth and he puts his face up to me to do it for him, just like a child would.
- 2pm – 3pm Remind dad to go to the toilet again. I have to go out to pick up his prescription and it's a lovely day for him to get out for some fresh air and exercise. We get to the door then he changes his mind and wants to watch TV instead. I can't leave him alone as last time he tried to tune in the radio and didn't manage properly. He got frustrated and ended up breaking the radio. I get the next-door neighbour to sit in with him for half an hour while I get to the chemist quickly.
- 3.30 – 4pm We play cards for half an hour. I try to get dad to count up the numbers to try to keep his mind active. He tells me about all the whist drives he and mum used to go to before I was born. However, he can't remember what we had for lunch when I ask him.
- 5pm – 5.30 Make the tea. Dad spills it all again down his shirt but doesn't seem to notice at all. Give him his medications again.

Evening

- 6pm – 8pm We sit and watch television. Dad doesn't follow the storyline of the soaps well so I try to tell him what's happening but he doesn't really take it all in.
- 8.30 Try to persuade him to have a bath before bed, especially after the accident today. However, he says no – like he has done for the last 2 nights. He won't change his clothes regularly either and gets upset when I try to encourage him to wash and change more frequently.
- 9pm – 10pm Make some supper and give him his last medications. I have to wait until dad goes to bed before I do so I can check all the switches etc and ensure the door is locked and take out the key. As his sleeping has become poorer he gets up and wanders around at night, looking at photographs and asking where my mother is and when she's coming home. He wandered off in the middle of the night a few months ago, looking for her and I had to alert the police. He was very distressed and the doctor had to be called to give him a sedative.

Night-time

- 2.30 – 3am Heard dad wandering around and got up, made him a cup of tea and just sat with him until he wanted to go back to bed.
- 5am – 5.30 Heard him up at the toilet, got up to check he was OK. Been 'caught short' so I had to clean him up, persuade him to change his pyjamas and clean up the toilet.
- 8.30 Go in to wake him up and find he is fully dressed again – this means another day when he won't wash, shave, bathe or change his clothes.

Handy Reminder

Date sent form off

Date received acknowledgement

Dates and times of any communication whether by telephone or by letter.

Checklist

Complete the checklist below, tear it out or copy it and give it to your GP

Activity	√	Brief details of the problems you have—the time it takes to do things or pain or needing help of any sort to make the activity easier for you—day and night.
Falls or stumbles (indoor or outdoor)		
Getting into and out of bed		
Getting out of chairs etc. and moving about indoors		
Climbing stairs		
When you are in bed during the night		
Toilet difficulties—day and night		
Washing, shampooing, shaving and bathing		
Getting dressed and undressed		
Eating and drinking		
Help with medical treatment		
Problems with memory, confusion, wandering		
Frustration, depression etc. due to situation		
Needing to be encouraged to do things or needing to be supervised for safety		
Speaking to people, reading, writing, hearing		
Social contact and leisure activities		