

18 Special rules

If your death can reasonably be expected within six months because of a progressive disease your claim is dealt with under the Special Rules. The DWP aim to deal with such claims in just eight working days. You do not need to complete the whole claim pack if you are claiming under these rules as, if your claim is accepted, you will automatically qualify for the highest rate of the care component for 3 years even if you don't currently need that level of care. You will still have to prove any entitlement to the mobility component, however.

A claim under the Special Rules can also be made on the claimant's behalf by somebody else, their carer or GP for example, if they are not well enough to do so or have not been told the prognosis.

Please read the notes about the Special Rules in the DWP guidance notes very carefully. It is **extremely important** that, whoever completes the claim pack **ticks the box on this page** to say that you are claiming under the special rules, as decision makers have refused to apply the Special Rules in the past simply because this box was not ticked.

Along with the claim pack you should also include a form DS1500 which your GP completes. You shouldn't need to actually see your GP to get this form completed, but if there is any delay send off the claim pack straight away and send the DS1500 afterwards.

If you are certain that your GP or other health professional believes that your death can reasonably be expected within six months then **you do not need to complete the section of the form dealing with your care needs.**

19 Do you have any reports about your illness or disabilities?

If you have a copy of any reports or a care plan which you consider to be accurate and up-to-date and you think it would help the decision maker come to an accurate decision, then include it with your claim pack.

20 Are you on a waiting list for surgery

Being on a waiting list for surgery may be strong evidence of the seriousness of your condition. It might, however, also be evidence that your care needs may reduce in the future, after surgery and any necessary period of convalescence.

21 Have you had any tests?

There doesn't seem to be any guidance as to how far back you should go with test results. So, even if the results are some years ago, if they support your claim and demonstrate how serious your condition is – particularly if it is one that is known to deteriorate over time - then include details here. If you don't have the test results, you may be able to get copies from the hospital that carried them out. But don't miss the deadline for returning your form if you don't receive them in time. You can always send them afterwards.

22 Aids and adaptations

Column 1 Aids and adaptations

As the previous DLA form explained, aids and adaptations may include things such as:

- a hoist, monkey pole or bed-raiser may help you get out of bed
- a commode, raised toilet seat or rails may help you with your toilet needs
- bath rails, a shower seat or a hoist may help you bath or shower
- a long-handled shoehorn, button hook, zip pull or sock aid may help you dress
- a stairlift, raised chair, wheelchair or rails may help you move about indoors
- a walking stick, walking frame, crutches or artificial limbs may help you get around outdoors
- special cutlery or a feeding cup may help you eat and drink, or
- a hearing aid, Textphone, magnifier or Braille terminal may help you communicate.

Column 2 Tick boxes

You are asked to tick next to any aids or adaptations that have been prescribed for you by a health professional.

Decision makers are told not to take into account any aids or adaptations that you have provided yourself – presumably on the grounds that if you really needed them you would have been prescribed them.

We think this is shameful. In some areas there is a wait of a year or more just for an occupational therapy assessment, let alone to actually have any aids or appliances fitted. If you provided an aid or appliance yourself we suggest that you write 'See page 39' or 'See attached sheet' in the tick box – you might have to spread into the next box. Then explain in detail why you chose to buy an aid or adaptation rather than waiting to see if one would be prescribed. Would it be possible to get a specialist nurse, GP or other health professional to provide written evidence to say that in their opinion your use of the adaptation is reasonable?

Column 3 How does this help you?

Explain what you use the aid or adaptation for – even if it should be obvious.

Column 4 What difficulty do you have using this aid or adaptation?

Aids and adaptations can work both ways – they may support your claim by showing how severe your condition is, but they may undermine it by suggesting that help from the aid or adaptation means that you don't need help from another person. So, if you have an aid or adaptation, but still have difficulties with the activity then it's vitally important that you say so.

For example, you may have a stair lift which means that you no longer need help with getting up and down the stairs. But you may need someone to help you get onto the stair lift and get off it again and to make sure that you are safe while going up or down in the stair lift. So, although you have a stair lift, you still need attention from another person when going up or down stairs.