

National English Concession Disability Guidance for Local Authorities

"(a) is blind or partially sighted"

33 'Blind' means having a high degree of vision loss i.e. seeing much less than is normal or perhaps nothing at all. 'Partially sighted' is a less severe loss of vision. Partially sighted people can see more than someone who is blind, but less than a fully sighted person. Blind and partially sighted people can register with their local council. The register is held by the social services or social work department, or by a local voluntary agency, and is confidential.

34 For registration purposes, the term 'blind' now becomes 'severely sight impaired (blind)' and partially sighted becomes 'sight impaired (partially sighted)'. The formal notification required to register as "severely sight impaired" or "sight impaired" is a Certificate of Vision Impairment (CVI), signed by a Consultant Ophthalmologist (eye specialist). However, registration is voluntary. The individual should have a copy of their CVI and should be encouraged to register, if they have not already done so, as they may be entitled to various other benefits too.

35 In general terms a person can be registered as severely sight impaired (blind) if they cannot see (with glasses, if worn) the top letter of the eye test chart (used by doctors and opticians) at a distance of 3 metres or less. Some people who can read the top letter of an eye test chart at 3 metres, but not at 6 metres, may still be eligible for registration as blind if their field of vision is also severely restricted. Only being able to read the top letter at 3 metres is sometimes referred to as 3/60 vision: the person can see at 3 metres what a person with normal vision can see at 60 metres.

36 A person can be registered as sight impaired (partially sighted) if they have a fullfield of vision but can only read the top letter of the eye test chart at a distance of 6 metres or less (with glasses, if worn). However, if they can read the next three lines down at the same distance, but the field of vision is either moderately or severely restricted, they may still qualify for registration.

37 The Department advises that concessionary travel passes should be issued to people whose sight is so impaired that they would be able to register as severely sight impaired (blind) or sight impaired (partially sighted). Local authorities may, where a person is not on the local authority register, require evidence from an eye specialist, for example an optometrist, that the applicant would qualify to be registered as severely sight impaired (blind) or sight impaired (partially sighted). Advice on how to register can be found on the Royal National Institute for the Blind (RNIB) website at:
http://www.rnib.org.uk/xpedio/groups/public/documents/publicwebsite/public_registration_home.hcsp

"(b) is profoundly or severely deaf"

38 Hearing loss is measured in decibels across the normal hearing spectrum, as dBHL (Hearing Level). People are generally regarded as having a severe hearing loss if it reaches 70-95 dBHL and a profound loss if it reaches 95+ dBHL. The Department

advises that the statutory minimum concession should be made available to people in these categories.

39 There is no statutory registration system for deaf people. However, many will be registered on a voluntary basis with their local authority social services department. The register is open to people who have varying degrees of hearing loss, so in checking the register a local authority is advised to check that the applicant is profoundly or severely deaf before issuing a national concession bus pass.

40 As in the case of blind and partially sighted people, local authorities may, where appropriate, require applicants to provide evidence of registration before issuing a pass, or evidence that they could register, for example, an audiological report, or a report from an aural specialist.

"(c) is without speech"

41 Included within this category are people who are unable to communicate orally in any language. Those people will be: unable to make clear basic oral requests e.g. to ask for a particular destination or fare; unable to ask specific questions to clarify instructions e.g. 'Does this bus go to the High Street?'

42 This category would not, in the Department's opinion, cover people who are able to communicate orally but whose speech may be slow or difficult to understand, for example because of a severe stammer.

43 In considering an application on these grounds the local authority may reasonably require medical evidence to support the application in appropriate cases.

"(d) has a disability, or has suffered an injury, which has a substantial and long-term adverse effect on their ability to walk"

44 To qualify under this category, a person would have to have a long term and substantial disability that means they cannot walk or which makes walking very difficult.

45 It is envisaged that passes will be issued to people who can only walk with excessive labour and at an extremely slow pace or with excessive pain. Their degree of impairment should be at comparable level to that required to claim the Higher Rate Mobility Component of Disability Living Allowance. This is set out below:

(i) they cannot walk or...

Being unable to walk means that they cannot take a single step. They need to show that because of their disability they cannot put one foot in front of the other. Walking involves always having one foot on the ground. If their only way of getting about is to swing through crutches then they will be considered unable to walk.

(ii) ...they are virtually unable to walk, or...

They will need to show that, as a result of a physical disability, they are unable to walk very far without experiencing severe discomfort. This question does not apply to people with mental disabilities, your inability to walk very far must stem from a physical condition.

The Department for Works and Pensions take a number of factors into account when deciding whether or not someone meets this criterion. For example:

Discomfort can mean either pain or breathlessness. Extreme fatigue and stress may also be taken into account. It has been accepted that discomfort is subjective and that some people have higher pain thresholds than others. Unless both legs are missing then they will need to show that they experience severe discomfort even when using an artificial aid. When deciding whether they are virtually unable to walk the following factors should be taken into account:

- the distance over which they can walk without experiencing severe discomfort
- the speed at which they can walk
- the length of time for which they can walk
- the manner in which they can walk

If they can only walk up to 27 metres without severe discomfort then they will qualify for the higher rate. If they can only walk between 27 and 64 metres without severe discomfort then it is likely that they will qualify for the higher rate. If they can walk more than 64 metres without severe discomfort then they will need to show that the other three factors mean that they are virtually unable to walk. For example, if they can show that it takes them five minutes to walk 100 metres, they should qualify for the higher rate.

As a guide, the average person can walk the following in a minute:

- 90 metres at a brisk pace
- 60-70 metres at a moderate speed
- 40-50 metres at a slow pace
- 30-40 at a very slow pace

It does not matter whether the severe discomfort occurs at the time of their walk or later. What counts is that the discomfort is a direct result of their attempt to walk.

(iii) The exertion required to walk would "constitute a danger to their life or would be likely to lead to a serious deterioration in their health"

The test here is whether the exertion required to walk would constitute a danger to their life or whether it would be likely to lead to a serious deterioration in their health. They need to show that they should not walk very far because of the danger to their health. This criterion is intended for people with serious chest, lung or heart conditions. Some people with haemophilia may also qualify for the higher rate in this way. The serious deterioration does not need to be permanent but it should require medical intervention for them to recover. They will need to show that any danger to their health is a direct result of the physical effort required to walk. People with epilepsy will need to show that any fits were brought about by the effort required to walk

46 In all cases, entitlement depends on the applicant's difficulty in walking and considerations, such as difficulty in carrying parcels, are not to be taken into account.

47 The fact that a walking aid is or is not used may be relevant to the eventual decision, but these alone should not determine whether or not a person qualifies. For example, if a person can walk relatively normally with the use of an artificial leg, then they should not be considered eligible. Alternatively, a person who can only swing through on crutches could be considered eligible, as they would be seen as having considerable difficulty walking (provided it is due to a long term disability and not due to legs being in plaster).

48 The Department advises that the authority should normally require medical evidence to support the claim that the applicant's walking ability is long term and substantially impaired.

"(e) does not have arms or has long-term loss of the use of both arms"

49 This category includes people with a limb reduction deficiency of both arms; bilateral upper limb amputation; muscular dystrophy; spinal cord injury; motor neurone disease; or a condition of comparable severity.

50 In the Department's opinion, it also covers both people with deformity of both arms, and people who have both arms, if in either case they are unable to use them to carry out day-to-day tasks, for example, paying coins into a fare machine. In these latter cases the Department advises that a local authority should normally require independent medical evidence to support the application.

"(f) has a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning"

51 A person with a learning disability has a reduced ability to understand new or complex information, a difficulty in learning new skills, and may be unable to cope independently. These disabilities must have started before adulthood and have a lasting effect on development. The person should be able to qualify for specialist services and he or she may have had special educational provision.

52 The Department of Health adopted the term 'learning disability' in 1992. It has the same meaning as its predecessor 'mental handicap' but it is seen as more acceptable, particularly in reducing the confusion with mental illness.

53 In determining eligibility in a case where there has been no previous contact with specialist services a local authority should normally require independent medical advice, or check any register of people with learning disabilities which might be held by the Social Services Department of the applicant's local council.

"(g) would, if he applied for the grant of a licence to drive a motor vehicle under Part III of the Road Traffic Act 1988, have his application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the ground of persistent misuse of drugs or alcohol."

54 Under Section 92 of the Road Traffic Act 1988 the Secretary of State may refuse to issue a driving licence on the grounds of the applicant's medical fitness. Those who are currently barred from holding a licence are people with:

- i. epilepsy (unless it is of a type which does not pose a danger - see below);
- ii. severe mental disorder;
- iii. liability to sudden attacks of giddiness or fainting (whether as a result of cardiac disorder or otherwise);
- iv. inability to read a registration plate in good light at 20.5 metres (with lenses if worn);
- v. other disabilities which are likely to cause the driving of vehicles by them to be a source of danger to the public.

55 It will be seen that specific reference is made to people who **persistently misuse drugs or alcohol**. Those people are not covered by the definition of 'disabled person' under the Act and are thus not entitled to the statutory minimum travel concession.

56 It is not a condition of entitlement under this category that the disabled person should apply for and be refused a driving licence (which would be unduly burdensome for everyone involved). If, for people with any of the disabilities (ii) - (iv) listed above, the local authority can be confident that a licence would be refused it should therefore be able to issue the travel pass automatically. For (i) epilepsy - the bar is not automatic and depends on the circumstances.

57 The Motor Vehicles (Driving Licences) Regulations 1999 permit the grant of a driving licence to a person with epilepsy if that person:

- (a) has not had an epileptic attack whilst awake for a year or more; or
- (b) has a history of attacks whilst asleep, and only whilst asleep, over the past three years or more, provided that the driving of a vehicle by that person is not likely to cause danger to the public.

58 There are a number of categories of "severe mental disorder" under which people may qualify. Authorities will need to assess individuals on a case-by-case basis as eligibility may depend on the severity of the condition. Such conditions include (but are not limited to) dementia (or any organic brain syndrome); behaviour disorders (including post head injury syndrome and Non-Epileptic Seizure Disorder); and personality disorders.

59 Other groups include:

- People with restricted visual fields, who will be refused a licence if they do not have a horizontal field of vision of at least 120 degrees, or if they have significant scotoma encroaching within 20 degrees of the central fixation point in any meridian or, sometimes, if they have restricted vertical fields of vision;
- Insulin dependent diabetics. In general people with insulin dependent diabetes can continue to drive - though their licence may be renewable on a 1, 2, or 3-yearly basis. However, where the person experiences disabling hypoglycaemia they will be prevented from driving until their diabetes is controlled.