

APPENDIX B

Pilot studies - core principles IMA proforma and resources

The core principles IMA proforma was developed by the research team, drawing on significant input from expert advisers to the review and experienced practitioners from local authorities that have established IMA procedures. It was designed to accompany the model application form that is included as an Appendix to the Blue Badge Scheme Guidance for local authorities which DfT published in June 2011. It was used as part of the eligibility assessment pilots that were conducted as part of the review. The main aim of these pilots was to test the accuracy of different approaches to eligibility assessment, including desk-based by a trained administrator, desk-based by and independent mobility assessor and face-to-face with an independent mobility assessor.

The use of this proforma is neither mandated nor endorsed by the Department for Transport. However, local authorities wishing to adopt independent mobility assessment approaches may wish to use the tool as a guide or starting point to aid development of their own assessment tools. It remains the responsibility of each local authority to determine their own assessment procedures and to ensure that their procedures are in line with the legislation that governs the Blue Badge scheme.

The pilot healthcare professionals will use this proforma to conduct assessments with volunteer members of the public. Each assessment will take between **30 - 45 minutes** and will consist of:

- Collecting the applicant from reception and observing their walk to the assessment room over a distance of at least 10 – 20 metres, whilst timing this walk with a stopwatch (5 mins)
- Checking photo ID, confirming personal details and discussing their journey to the centre (10-15 mins)
- Asking the applicant to describe their mobility impairment, including medical details, and the impact it has upon their ability to get around (10-20 mins)
- Closing the assessment by asking the applicant whether they have anything further to add about their condition and, if required, observing them leaving the assessment room/centre (5 mins)

Decision-making

The assessor will use the prompts in section 9 of this proforma to reflect on information gathered through the application form and assessment process to record their recommendation on whether the applicant is eligible for a Blue Badge under the subject to further assessment criteria. The assessor will consider:

- **Observed manner of walking.** Observations on posture, rhythm, coordination, balance, speed and stride will inform the assessor's view on the quality of the applicant's walking ability.
- **Walking aids.** If the applicant is using an aid correctly the assessor should determine whether they experience considerable difficulty in walking based on other factors listed below. If an aid is used incorrectly, or the applicant's walking ability could be improved with a walking aid, the assessor should note this in their recommendation and signpost the applicant to an appropriate local NHS service.
- **Speed of walking.** If you do not believe the applicant could walk 40 metres in a minute (e.g. a pace slower than 0.67 metres/second), including any stops to rest, then this is likely to make walking very difficult for them.
- **Distance the applicant is able to walk.** If you believe an applicant is unable to walk 30 metres in total, then this is likely to make walking very difficult for them. An applicant might be able to walk 30-80 metres without severe discomfort, but demonstrate very considerable difficulty in walking through a combination of other factors (e.g. extremely slow pace and/or their manner of walking). Applicants who you feel can walk more than 80-100 metres and do not demonstrate very considerable difficulty in walking through any other factors should not be considered as eligible.
- **Pain reported by the applicant** in the context of what they normally experience and whether today represents a 'good' or 'bad' day. Also consider whether they experience pain while/after walking. Since pain is subjective we advocate that applicants reporting pain levels of 8, 9 or 10 on the visual analogue scale can be considered as having 'excessive pain', but this should always be supported by evidence in the form of medication being used to manage the condition, attendance at pain clinics, or the use of coping strategies. Assessors should bear in mind that applicants with chronic pain may not demonstrate any visual signs of being in pain, and pain thresholds vary from one person to another.
- **Breathlessness.** An applicant rated at MRC Grade 3 or above should be considered for a Blue Badge in the context of 'severe discomfort', provided the assessor's observations support the applicant's self-reported degree of breathlessness. Assessors will wish to consider whether the primary cause of breathlessness is deemed to be a result of disability, rather than due to being unfit through inactivity. An applicant rated at MRC Grade 1 or 2 may still qualify for a Blue Badge under the other criteria described in this note.

The factors listed above need to be considered first in isolation, then in combination, to determine whether the applicant demonstrates very considerable difficulty in walking. Insights gained from observing the applicant walking, medical evidence, information the applicant has provided through responses to questions in the assessment, and the details on their application form should all be considered.

In exceptional cases where it is not possible to make a clear recommendation at the end of the assessment, the assessor should note whether they would ordinarily have contacted healthcare professionals involved in the applicant’s treatment for further evidence/information.

Assessment date:		Assessment location:	
Assessment time:		Name of assessor:	

Section 1 – At the start of the assessment (in reception area)

Inform applicant that the assessment has started as soon as they are met by the healthcare professional

Check applicant’s ID / likeness against photo (Tick)	True likeness (Proceed):		Not a true likeness (Refuse & report as fraud):		
Note any observations of applicant mobilising to the assessment room, including functional difficulties with standing up / sitting down / removing coat, recovery from effort of walking etc					
To what extent do the following have an effect on the applicant’s manner of walking?	None	Minimal	Moderate	Substantial	Comment
Speed					
Posture					
Rhythm					
Co-ordination					
Balance					
Stride					
Respiratory rate (breathing) observed by assessor while walking. Tick as appropriate:	Abnormally slow		Normal		Abnormally fast
Any other general observations of the applicant’s demeanour while walking? (e.g. signs of pain, shortness of breath)					
Time taken to mobilise from waiting area to assessment room (mm:ss from stopwatch):			Distance walked by applicant (pre-measured):	m	
Calculated walk-speed (distance walked ÷ time taken) in m/s:	: metres/second				
Description of any rests / stops / pauses by applicant during the walking test:	Total number of stops	Started at approx distance...		Proportion of walking time spent resting	
		m			

Section 2 – About the applicant (* take from application form, confirm in assessment as required)			
Name*:			
Postcode*:		Contact Tel*:	
Date of Birth*:		Age*:	
First language*:		Interpreter used?	
Other people present?		Relation to applicant:	

Section 3 – Getting here today								
How did you travel here today? (Tick below relevant mode)	Drove myself	Given a lift	Bus	Train	Tube	Walked	Cycled	Other
If 'other', please describe:								
Did you experience any difficulties with the journey?								
Where did you walk to the assessment centre from today? (e.g. after car/bus journey) – use local area map provided								
Roughly how long (in minutes) did this take you?								

Section 4 – About your impairment		
Please describe:	Medical condition / disability	Surgery / treatment
<ul style="list-style-type: none"> Any medical conditions or disabilities which impact upon your ability to walk without severe discomfort. Any surgery / treatment you have undergone in relation to each of these conditions Any relevant medical diagnoses which the applicant has been advised of by a healthcare professional <p>(Probe for underlying conditions/disabilities)</p>		

<p>How often do you receive treatment for this condition(s) / disability(s)? (Probe for location treatment is delivered and name/role of medical professionals involved in treatment / diagnosis) Keep in mind that many people living with long term disabilities are likely not to be receiving active treatment/therapy.</p>						
<p>Are you waiting for any courses of treatment, consultations or surgery in relation to this condition(s) / disability(s)? (Probe nature and anticipated wait for treatment/surgery)</p>						
<p>Do you anticipate your condition(s) will improve in the near future? (Tick)</p>	Yes:		No:		Don't Know:	
<p>What medication do you currently take in relation to your condition(s) / disability(s)?</p>	Medication			Dosage		
<p>Evidence provided through... (tick as appropriate):</p>	Prescription/note from medical professional:		Bottles/packaging:		None provided:	
<p>Have you had any involvement with a pain clinic?</p>	Yes:		No:			
<p>Do you take all of the medication you have been prescribed?</p>	Yes:		No:			
<p>Any additional details:</p>						

Section 5 – Impact of your impairment(s) / condition(s) on your ability to walk

<p>How does your condition(s) / disability(s) affect your ability to walk? (Any home adaptations? Dog walking?)</p>	
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Assessor's notes on any visual signs of pain at rest – ask them whether today is a 'good' or 'bad' day in terms of pain										
If pain is experienced, then probe to explore: - Origin of pain - Location of pain - Duration of pain - Description of pain - Management of pain										
Would your pain change at all / Would you experience any pain... (Note applicant's description of pain)	While you were walking?					After you had walked?				
If appropriate, probe for how using the same scale as above: (1 = No pain, 10 = worst pain imaginable. Tick as stated)	1	2	3	4	5	6	7	8	9	10

Section 7 – Range of Functional Movement test

The Range of Functional Movement test involves asking the applicant to conduct a series of exercises that:

- move their head and neck (e.g. look up and down);
- rotate their trunk (turn body to face left and right whilst standing);
- raise their arms in turn;
- flex and rotate the ankle;
- raise one leg off the floor whilst seated; and
- flex hip and knee of one leg whilst standing on the other leg.

NB – Under no circumstances should the applicant be asked to complete any movement or exercise which is clearly outside of their capability, or which may cause them undue discomfort

Note the observed degree of limited movement in...	None	Minimal	Moderate	Substantial	Comment
Head and Neck					
Trunk					
(R) Upper Limb					
(L) Upper Limb					
(R) Lower Limb					
(L) Lower Limb					
Ankles					
Overall effect on walking					
Limb / joint swelling (if shown)					
Note whether the applicant was able to complete all exercises / any differences in the level of achievement of tasks					
Does the applicant have any further information to add about their disability or walking impairment?					

Section 8 – Close of assessment			
That is the end of the assessment, so thank the applicant for their time and observe them leaving the assessment room/assessment centre if required.			
Applicant observed leaving the assessment centre	Yes:		No:
Observations of applicant leaving the assessment centre, including discrepancies with the degree of mobility presented during the assessment.			
Any other notes or comments			

Section 9 – Decision-making checklist for assessor (circle as appropriate)				
The assessor will reflect on information gathered through the assessment and the application form before recording their recommendation			Yes	No
Does the applicant have a permanent (lasting for at least 3 years) and substantial disability? (Circle to indicate eligibility)			Proceed	Refuse
Is the applicant able to take a single step, putting one foot in front of the other?			Proceed	Support
Is the applicant only able to walk without always having one foot on the ground (e.g. swinging through two crutches)?			Support	Proceed
Is the applicant able to walk more than 30 metres in total, without experiencing severe discomfort?			Proceed	Support
Is the applicant only able to walk with excessive labour (gait, manner of walking, breathlessness and exertion) <u>and</u> at an extremely slow pace (<0.67m/s)?			Support	Proceed
Is the applicant only able to walk with excessive labour (gait, manner of walking, breathlessness and exertion) <u>and</u> with excessive pain?			Support	Proceed
The applicant should not walk far because of a danger to their health posed by the effort required to walk?			Support	Proceed
Does the applicant have a serious chest, lung or heart condition (such as, Chronic Obstructive Pulmonary Disease (COPD) or Emphysema) which poses a danger to their health from the effort required to walk?			Support	Proceed
Would the applicant experience a serious (but not necessarily permanent) deterioration in their health which would require medical intervention for them to recover from the effort required to walk?			Support	Check above
Were statements provided by the applicant <u>consistent</u> with the assessor's observations of the applicant's walking ability/behaviour			Describe below	Proceed
Description of any inconsistencies between information provided and walking ability demonstrated:				
Recommend that Blue Badge is awarded?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Await further info from healthcare professionals:	
Reassess applicant on renewal in 3 years time?	Yes: <input type="checkbox"/>	No: <input type="checkbox"/>	Await further info from healthcare professionals:	
If no to either of the questions above then please note why / make any other comments...				
Signed by assessor:		Date:		