

WARWICKSHIRE BLUE BADGE GUIDE

**This guide is aimed to help you with
your application for a blue badge.**



A Blue Badge helps people with disabilities to park closer to their destination. Not all disabilities are visible, some are hidden and are not immediately obvious. Living with any disability, visible or non-visible, can make daily life more demanding for people. It can also be difficult for others to identify, acknowledge or understand the challenges that people with a disability face.

Warwickshire County Council (WCC) works with people and their carers to promote independence and enable people to live their best lives.



Things you will need **before you apply or renew**



- Your National Insurance number (if you have one)
- The details of your current blue badge (if you are re-applying)



- A credit or debit card to pay the £10 fee
The quickest and easiest way to pay is during the online application process. If you are unable to pay online during your application, you will be sent a payment link with a reference number once your application has been received.



- Proof of your address:
 - a current Council Tax bill
 - a utility bill dated within the last 3 months
 - a bank statement dated within the last 3 months
 - a benefit/pension letter dated in the last 12 months
 - a letter from a care home to confirm you are a permanent resident



- Proof of automatically qualifying benefits (if you get any) more information on this can be found on page 2
- Supporting documents relating to your disability



- A photo or scan of:
- Proof of your identity
 - birth/adoption certificate
 - marriage/divorce certificate
 - valid driving licence or passport



- A passport style photo
Your photo can be taken on a mobile phone or tablet and uploaded to your online application. The photo should be taken with a plain background and clearly show your head and shoulders.

About the application

To complete your application, you will need to apply online through the gov.uk website. You can find the link [here](#)

You can save your application and come back to it if you have a valid email address.

The form will ask you some questions about your circumstances. If you are identified as eligible based on your answers, you will be asked to complete further questions that will provide the information needed to complete your Blue Badge application.

Please note, if you have not fully completed the application, or provided sufficient evidence we will not be able to progress your application further.



Completing the application (the questions)

Questions for applicants applying with automatic eligibility

You will be automatically eligible for a badge if you are over three years old, can satisfy residency and identity checks, and meet at least one of the eligibility criteria listed below.

• Registered as Severely Sight Impaired (blind)

If you are registered as severely sight impaired, we will ask for your permission to contact your local council to confirm your details on their register.

If you are not registered, you will need to provide proof in the form of a DB8 or CVI (certificate of visual impairment) form.

• War Pensioner's Mobility Supplement (WPMS)

An applicant receiving WPMS will have an official letter from Veterans UK

• Armed Forces and Reserve Forces (Compensation) Scheme within tariff levels 1-8 (inclusive)

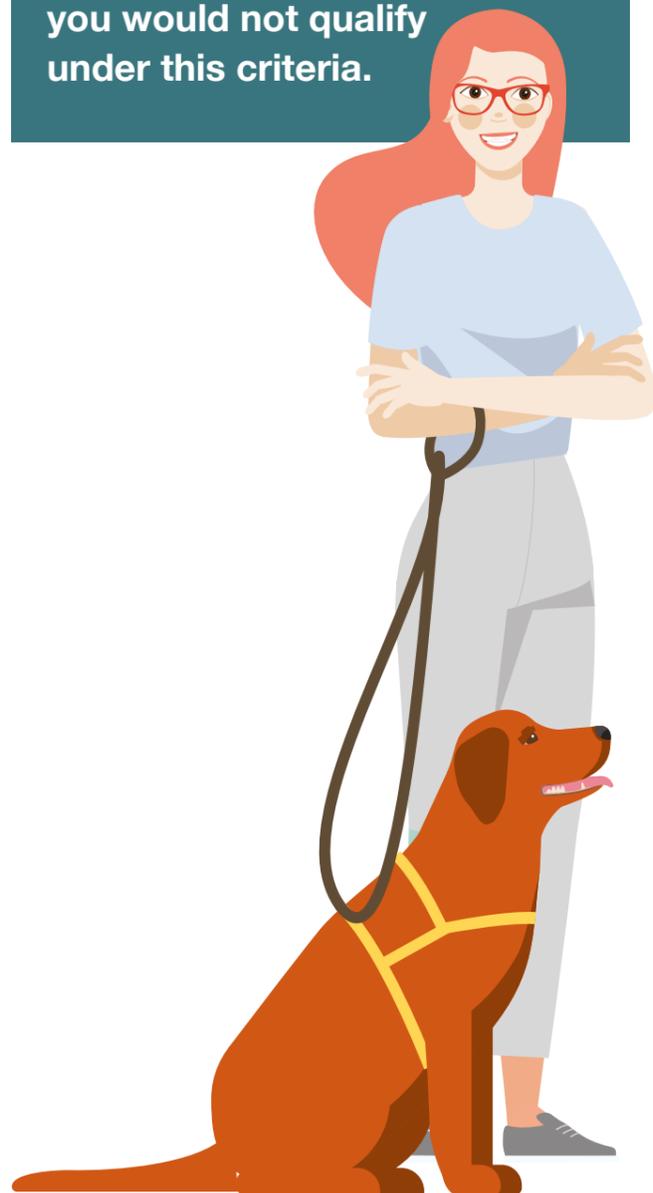
You will have been assessed and certified by the Service Personnel and Veterans Agency, and issued with a letter from Veterans UK confirming the level of your award, and that you have been assessed as having a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking.

• Higher Rate of the Mobility Component of Disability Living Allowance (HRMCDLA)

You will need to provide a photo/scan of the letter dated in the last 12 months.

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Partially sighted is not considered to be the same as severely sight impaired and therefore you would not qualify under this criteria.



• Personal Independence Payment (PIP) Planning and Following a Journey

An applicant receiving PIP will have a decision letter that states you meet the following 'Planning and Following a Journey' descriptor

Activity	Descriptors	Points
Planning and following journeys	a. Can plan and follow the route of a journey unaided	0
	b. Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant	4
	c. Cannot plan the route of a journey	8
	d. Cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid	10
	e. Cannot undertake any journey because it would cause overwhelming distress to the claimant	10
	f. Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid	12

• Personal Independence Payment (PIP) Moving Around

An applicant receiving PIP will have a decision letter that states you meet one of the following 'Moving Around' descriptors within the Mobility Component

Activity	Descriptors	Points
Moving around	a. Can stand and move more than 200 metres, either aided or unaided	0
	b. Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided	4
	c. Can stand and then move unaided more than 20 metres but no more than 50 metres	8
	d. Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres	10
	e. Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided	12
	f. Cannot either aided or unaided: - stand, or - move more than 1 metre	12

IMPORTANT



Your decision letter can be used as proof of receipt of the relevant PIP award.

Questions for ‘subject to further assessment’ applicants with walking difficulties

Applicants who are unable to walk or have very considerable difficulty walking

Medical conditions

Please only give details of any enduring and substantial medical conditions or disabilities you have that directly impact on your walking ability (for example conditions that cause excessive pain, excessive breathlessness or impact on the way you walk (for example, they cause an uneven walking pattern or limp). Please also include the date you were diagnosed.

Surgeries, treatment and specialist clinics

Please provide the most recent (within the last 3 years) and/or most relevant information for procedures or treatments that you have received.

Please give the month and year that the treatment commenced, or when the surgery was completed.

Some examples of this might be; physiotherapy, chemotherapy, pain clinic, pulmonary rehabilitation, hip or knee replacements.

Medications

Please provide details of any medication(s) you take on an ongoing basis to manage any medical condition(s) or disability that impact on your walking ability. This includes daily, weekly or monthly and/or ‘PRN’ (as required) medications.

Please also provide the dosage and how frequently you take the listed medication(s).

TOP TIP 

If your ability to walk or complete a journey by foot is impacted due to a physical and/or non-physical disability, please select all that apply within the main reasons for you needing a badge section.



Description of walking difficulties

Questions in this section are primarily intended for people with considerable difficulty walking due to a physical disability. Please only tick the sections relevant to you, those that you experience on a day-to-day basis.

Excessive pain

It is helpful if you give details about what kind of day-to-day activities you are able/not able to do in your day-to-day life due to the impact of the pain you experience, including frequency of good and bad days.

Please tell us if any of the pain medications (or other coping strategies you might have) change what you are able to do/ not do. If your pain levels vary, please give information about what you are able to do on a day where pain is having the most impact, and when it is having the least impact.

Breathlessness

Please indicate using the tick box options all statements which describe the breathlessness you experience.

If your breathlessness is very variable, and/or you do not feel any of the statements describe the breathlessness you experience accurately, please tick the box to indicate ‘other’.

It is helpful if you can give detail about what kind of day-to-day activities you are able/not able to do in your day-to-day life due to the impact of the breathlessness you experience, including frequency of good and bad days.

Please tell us if any medications (or other coping strategies you might have) change what you are able to do/ not do. If your breathlessness levels vary, please give information about what you are able to do on a day when breathlessness has the most impact, and when it has the least impact.

Balance, coordination or posture

Describe how the way you walk is affected by your coordination, (for example, if your posture is affected or you struggle to take full steps).

It is helpful if you can describe the way you walk (for example, do you walk with a slight or heavy limp? Do you have very limited range of movement in your legs, hips or ankles which mean you cannot walk with a ‘normal’ walking pattern?)

MYTH BUSTERS



A Blue Badge is not issued for temporary illnesses or conditions whilst awaiting surgery or treatment. It is for conditions which are likely to last for 3 years or longer and cause enduring or substantial walking difficulties.

Questions for ‘subject to further assessment’ applicants with walking difficulties

Have you seen a healthcare professional for any falls in the last 12 months?

This could be a GP, Consultant, Physiotherapist or Occupational Therapist. Please provide details about any known cause of the falls identified, and any recommendations that were made by the healthcare professional to help you reduce the number of falls you are having.

Walking is dangerous to my health and safety (describe how your condition makes walking dangerous)

This question is designed for people with serious chest, lung or heart conditions. Do you have a chest, lung or heart condition, or epilepsy?

Please note, if you are applying due to a severe chest, lung or heart condition then we are likely to require evidence of this from a medical professional involved in your care to be able to consider your eligibility.

Something else

Please tell us how your medical condition or disability causes you considerable difficulty with walking. Use this section

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Please submit supporting evidence you have available with your application where possible, as this will assist us to make eligibility decisions as efficiently as possible.

to provide us with information about how your ability to walk a short distance is affected if the above questions have not covered the difficulties you have.

TOP TIP



If the dangers or difficulties you face arise for other reasons, such as behavioural factors, then please complete the questions that are designed for non-physical (or hidden) disabilities.



Describe somewhere you can walk from and to

Please state a walk you are able to complete. This could be from your home to a local destination, for example, from ‘home’ to ‘local shop on (road name)’.

If you live in a rural location, or never walk to a local destination from your home, please give details of a walk you might complete when out in the community. For example, from ‘Car park on (road name) in (town/city) to (specific shop/destination)’.

Walking aids

Please tick all of the walking or mobility aids listed that you use on a daily basis or that you would need to use to walk a short distance outdoors.

If the type of aid you use is not listed, please tick ‘other’ and provide details of the aid used (for example, a mobility scooter or a specialist walking frame).

Duration of walking

Please tick the box that most accurately describes how long you can walk for without stopping.

If you need to stop to take a rest when you walk, please indicate the duration of time you can usually walk for before you need to rest.

If you use a walking aid, then your answer should be the duration you can walk for when using that aid.

Health Care Professionals

Please give details of any healthcare professionals, or specialists involved in the treatment or management of the medical conditions/ disabilities you have listed.

We will not contact these individuals unless we need to, and will contact only if you have confirmed consent in the relevant application declaration.



Questions for ‘subject to further assessment’ applicants **with non-visible (hidden) disabilities**

The range of potential ‘non-physical’ disabilities which cause difficulty whilst walking is broad, and they can affect people differently - both in isolation, and in combination with other impairments. We therefore ask that you include with your application:

- a proforma completed by a professional who provides you with ongoing care or support further information on this can be found [here](#)
- any relevant supporting evidence you have regarding the impact of your disability on your day-to-day life, and where possible, around your ability to complete journeys in the community. Some examples of supporting evidence are: (for applicants of all ages)
 - Diagnosis letters
 - Care plans
 - Patient summaries
 - Disability benefits
 - Risk assessments detailing recommended control measures (particularly those relating to community access)

For applicants who are children and young people

- Education Health and Care Plan (EHCP),
- Special Education Needs and/or Disabilities (SEND) report

If you do not have any of the above supporting evidence available, we will make attempts to seek relevant insight from any social care records if you have indicated your consent for us to do so your application declaration.

What affects you taking a journey between a vehicle and your destination?

Please only tick the boxes that apply to you and that are relevant when you complete a journey between a vehicle and your destination.

I am a risk to myself or others near vehicles, in traffic or car parks

Please also give an example of when you are risk near vehicles in traffic or car parks (e.g. example of a trip you take), and the reason(s) you are at risk of harm to yourself, or to others in this type of environment (what exactly causes the risk to yourself of others e.g. lack of hazard awareness).

I struggle to plan or follow a journey

Please tick to indicate the type of journey

you would struggle to plan or follow (unfamiliar journeys, or every journey).

I find it difficult or impossible to control my actions and lack awareness of the impact they could have on others

Please also give specific example(s) of the kind of incidents that have occurred, or are likely to occur during the course of a journey (e.g. this might be verbal or physical aggression, self-harm).



TOP TIP

Evidence from GPs in most circumstances will only be considered where this is not the only source of evidence used to determine the eligibility, therefore alternative supporting evidence should be provided wherever possible. Please follow the [link](#) to the ‘What I need to provide?’ page for a full list of acceptable examples of supporting evidence.

Questions for ‘subject to further assessment’ applicants **with non-visible (hidden) disabilities**

I regularly have intense responses to overwhelming situations causing temporary loss of behavioural control

Please give examples of the situations that cause temporary loss of behavioural control (e.g. are there any known causes/triggers, or do they appear random). Please also provide information about the sorts of things that happen during the episode where you lose behavioural control.

I can become extremely anxious or fearful of public/open spaces

Please also give examples of the level of anxiety or fear you experience in these situations or circumstances (e.g. describe any physical or non-physical reactions you might have in these situations).

Something else

Please give details of any other reasons (that have not been covered in the other questions in this section) that your disability causes you to severely struggle with journeys between a vehicle and your destination.

How would a Blue Badge improve journeys between a vehicle and your destination?

Please explain in detail why (with your specific needs) the use of a Blue Badge would improve journeys between a vehicle and your destination.

MYTH BUSTERS



A Blue Badge is not issued based on specific conditions such as Autism, Diabetes etc it is on an individual’s circumstances and how their condition affects their walking, or causes very considerable psychological distress.



What measures are currently taken to try to improve journeys for you between a vehicle and your destination?

Please list the measures that are being taken to try to improve journeys for you in any of the areas of difficulty you have identified. For example, any coping strategies you might use yourself, or are supported to use, or what level and nature of supervision you might have when you complete journeys. Please explain how effective measures you list are in helping you manage journeys.

It is also helpful to explain any measures or strategies you have tried already that have not been effective.

Medications

Please provide details of any medication(s) you take on an ongoing basis to manage any medical condition(s) or disability that impact on your walking ability. This includes daily, weekly, monthly and/or ‘PRN’ (as required) medications.

Please also provide the dosage and how frequently you take the listed medication(s).

Health Care Professionals

Please give details of any healthcare or associated professionals involved in the treatment and/or management of your disability. Examples of these professionals are; Clinical Psychologists, Educational Psychologists, Gastroenterologists, Neurologists, Occupational Therapists, Physiotherapists, Psychiatrists, Rheumatologists, Social Workers.

We will not contact these individuals unless we need to, and will contact only if you have confirmed consent in the relevant application declaration.

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Please submit any supporting evidence you have available with your application, as this will assist us to make eligibility decisions as efficiently as possible. Please follow the link to the ‘What I need to provide?’ page for a full list of acceptable examples of supporting evidence.

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Questions for 'subject to further assessment'

Applicants with severe disabilities in both arms (aged over 2)

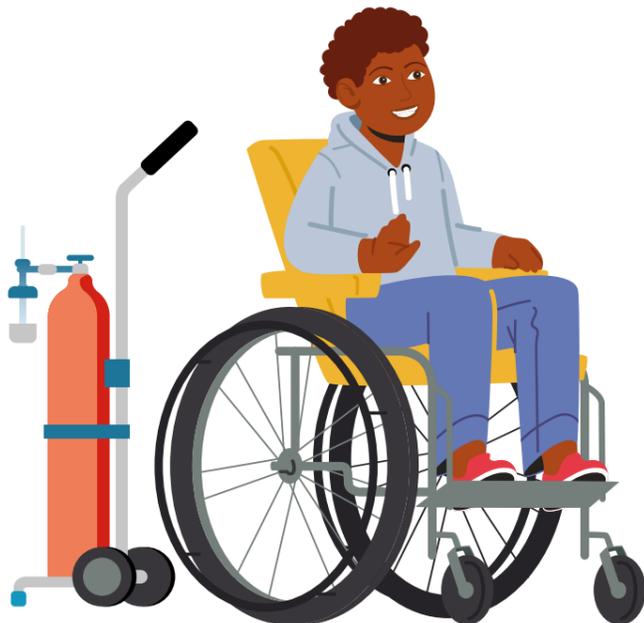
You will need to show that you drive a vehicle regularly, that you have a severe disability in both arms and that you are unable to operate, or have considerable difficulty operating, all or some types of on-street parking equipment.

You will need to satisfy all three conditions above in order to obtain a badge.

We may make arrangements to meet applicants applying under this criterion.

Applicants under the age of three

- children under three years of age who have a medical condition which means that they must always be accompanied by bulky medical equipment which cannot be carried around with the child without great difficulty; or
- children under three years of age who have a medical condition which means that they need to be kept near a vehicle at all times, either for treatment, or for transportation to a location where treatment can be performed.



A parent or guardian must apply on behalf of a child under the age of three. The list of bulky medical equipment referred to above may include:

- ventilators
- suction machines
- feed pumps
- parenteral equipment
- syringe drivers
- oxygen administration equipment
- continuous oxygen saturation monitoring equipment
- casts and associated medical equipment for the correction of hip dysplasia

We may issue a badge if the equipment is always needed and cannot be carried without great difficulty.

Examples of highly unstable medical conditions that mean children who have them may need quick access to transport to hospital or home are:

- tracheostomies
- severe epilepsy/fitting
- highly unstable diabetes
- terminal illnesses that prevent children from spending any more than brief moments outside and who need a quick route home

Please note that the above lists are not exhaustive, to allow for new advances in technology and treatment equipment.

IMPORTANT



- Upload information, declarations and pay.
- Mandatory declarations apply to all applicants, since they underpin the terms of applying for a Blue Badge. Please take the time to read and understand these declarations to speed up your application and improve the service you receive from us.
- You will be providing specific consent to WCC to allow us to share information about you with relevant departments and service providers within the authority.
- WCC may refuse to issue a badge if we have reason to believe that the applicant is not who they claim to be or that the badge would be used by someone other than the person to whom it has been issued.
- All applicants must include payment with the application.



Useful contacts

Warwickshire Blue Badge Team **01926 410410**

Veterans UK **0808 191 4218**

Disability Living Allowance (DLA)
0800 731 0122 (if you were born
on or before 8th April 1948)

0800 121 4600 (if you were
born after 8th April 1948)

Personal Independence Payment (PIP)
0800 121 4433

The DWP helpline is open from
8am to 6pm Monday to Friday,
and further details can be found online at:
www.gov.uk/disability-benefits-helpline

Citizens Advice:
Adviceline (England): **0800 144 8848**
Advicelink (Wales): **0800 702 2020**

Age UK Advice Line:
0800 678 1602

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Information in other formats

If this information is difficult to understand, we can provide it in another format, for example, in large print, on audio tape, easy read, or in another language. Please contact the Blue Badge Team on 01926 410410

