



Disabled Persons' Freedom Pass - London Borough of Hounslow

This scheme entitles pass holders to travel for free on public transport across London, and on local bus services across England (subject to restrictions). You, or the person you are applying for, must be over the age of four, and have one of the disabilities listed below. If you are aged 60 or over please do not complete this form, as you should be applying for the Mayor of London's 60+ Oyster card instead. Please check Transport for London's website f or further info:

www.tfl.gov.uk/fares-and-payments/adult-discounts-and-concessions/60-london-oyster

You will be eligible for a Disabled Persons' Freedom Pass if:-

- A) You are partially sighted or severely sight-impaired (blind). You should complete Sections 1, 2, 3, 9, 10 and 11.
- B) You are profoundly or severely deaf. You should complete Sections 1, 2, 3, 9, 10 and 11.
- C) You are without speech. You should complete Sections 1, 2, 3, 9, 10 and 11.
- D) You have a disability or injury which has a substantial and long-term adverse effect on your ability to walk.

You will qualify without the need for an assessment under this category if you receive one of the following benefits:-

- The Higher Rate of the Mobility Component of Disability Living Allowance.
- Personal Independence Payments (PIP) providing you have been awarded 8 points or more for the 'Moving around' category of the Mobility Component.
- The War Pensioner's Mobility Supplement.
- A lump sum benefit at tariffs 1-8 of the Armed Forces Compensation Scheme (AFCS). You must also have been certified as having 'a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking.

You should complete Sections 1, 2, 3, 9, 10 and 11.

If you do not receive one of the above benefits your application will be need to be assessed and you should complete Sections 1, 2, 3, 4, 5, 6, 7, 9, 10 and 11.

E) You are without arms or suffer from the long-term loss of use of both arms.

You should complete Sections 1, 2, 3, 9, 10 and 11.

F) You have been diagnosed as having a learning disability, <u>not</u> learning difficulties.

A learning disability that is defined as 'a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning'

Please complete Sections 1, 2, 3, 4, 5, 6, 7, 9, 10 and 11.

G) You have either had your driving license revoked, or would have one refused, under Part III of the Road Traffic Act 1988, on the grounds of physical fitness (other than through the persistent misuse of drugs or alcohol).

This category includes, amongst numerous different disabilities, people who have certain types of epilepsy, severe mental disorders, are liable to sudden attacks of giddiness or fainting or are unable to read license plates at 20.5 metres in good light (with lenses if necessary). Please complete Sections 1, 2, 3, 8, 9,10 and 11.



You must complete the form in black ink and block capitals.

Disabled Persons' Freedom Pass - Application Form

Please make sure that you answer every question which applies to you, giving full answers where required. If you do not provide the necessary documentation with your application this will result in delays. If you are completing the form on behalf of someone who is under the age of 16, or unable to complete it themselves, please enter their details and sign it yourself, making sure to indicate your relationship to the applicant.

Section 1 - Personal/Contact details

Title First and Middle Names	Surname
Date of Birth National Insurance Nu	lumber Gender
Address:	Photograph:
	Please attach two
Postcode: Telephone:	colour passport sized photographs
Mobile:	taken within the last three months
Email:	
Do you currently hold a Blue Badge? Yes ☐ No ☐ If yes, which local authority issued it?	
Has your badge been issued within the last six months? Ye	es 🗆 No 🗆
Please enter the first six digits/numbers of the badge:	
And the expiry date:	
Do you hold a driving license? Yes ☐ No ☐	
If you do, please enter the serial number below	
Do you have an existing Freedom Pass? Yes ☐ No ☐	
If yes, which local authority issued it?	



Section 2 - Proof of identity and address

In order for us to process your application you must provide the following:

- A) TWO COLOUR PHOTOGRAPHS passport-sized and dated within the last 3 months.
- B) PROOF OF IDENTITY please provide a copy of one of the following (please tick):

*Birth / Adoption Certificate	Current driving license (the paper counterpart is no longer
Passport / EU Identity Card	NHS Medical Card
*Civil Partnership / Dissolution Certificate	HM Forces ID Card
*Marriage / Divorce Certificate	*UK Citizenship Certificate

C) PROOF OF ADDRESS – You may find it easier if you give us permission to verify your address with other Council departments (please tick if applicable):

Either:	
I confirm that I am liable for Council Tax on the property (your name must appear on the bill) and I give you permission to check the register:	
Or: I do not pay Council Tax, I am a registered elector, and I give you consent to check the Electoral Roll:	

Alternatively, please provide **a copy** of one of the following (please tick):

Current Council Tax Bill/Letter/Payment Book	
Current Council/Housing Association Rent Book/Statement/Letter	
Current Television Licence/exemption letter	
**Current driving license (the paper counterpart is no longer valid)	
Benefit letter from DW P/Pensions Service - dated within 3 months	
Benefit letter from UK Veteran's Service - dated within 6 months	
Letter from school confirming child's address (if under 19) - dated within 3 months	
Letter from HM Revenue and Customs - dated within 3 months	
Residential utility bill (excluding mobile phone bills) – dated within 3 months	

^{*} The names on both the proof of address and identity must match each other.

DO NOT SEND US ORIGINAL DOCUMENTS - IF YOU DO YOU WILL BE REQUIRED TO COLLECT THEM IN PERSON FROM COUNCIL OFFICES, AS WE WILL NOT POST THEM BACK TO YOU.

Section 3 - Who is eligible?

In order to be eligible for the scheme you must qualify via one of the categories below. If you are unsure whether or not any of them apply to you please check the guidance notes for a more detailed explanation. Please tick if any of the following apply to you:

^{**}You cannot rely on your driving license as both proof of address and proof of identity



Category A – I am partially sighted or severely sight-impaired (blind)
☐ I enclose a copy of a recent Certificate of Visual Impairment (CVI) signed by a Consultant Ophthalmologist.
Category B – I am severely or profoundly deaf
☐ I enclose a copy of a recent audiogram/audiology report along with a letter from my GP confirming which category I fall into (this letter will not be necessary if the audiogram/audiology report is sufficiently clear). Any loss of hearing must be across both ears.
Category C – I am without speech
☐ I enclose a letter from a Consultant/speech therapist detailing the extent of the speech impairment, including the cause or suspected cause.
☐ I receive Personal Independence Payments, and have been awarded 8 points or more in the 'Communicating verbally' category. I enclose a letter from the Department of Work and Pensions (dated within 12 months) confirming this, and the length of the award
If you ticked one of the above categories please go straight to Section 9.
Category D – I have a disability or injury which has a substantial and long- term adverse effect on my ability to walk
I confirm that I am in receipt of:-
☐ The Higher Rate of the Mobility Component of Disability Living Allowance. I enclose a letter from the Department of Work and Pensions (dated within 3 months) confirming this, and the length of the award.
☐ Personal Independence Payments (PIP), and have been awarded 8 points or more for the
'Moving around' category of the Mobility Component. I enclose a letter from the Department of Work and Pensions (dated within 6 months) confirming this, and the length of the award.
☐ The War Pensioner's Mobility Supplement. I enclose a letter from Veterans UK (dated within 12 months) confirming this, and the length of the award.
☐ A lump sum benefit at tariffs 1-8 of the Armed Forces Compensation Scheme (AFCS) and have been certified as having 'a permanent and substantial disability which causes inability to walk or very considerable difficulty in walking. I enclose a letter from Veterans UK (dated within 12 months) confirming this.
If you ticked one of the above please go straight ─ to Section 9.
☐ I do not receive one of the above benefits, however I feel that my mobility is sufficiently impaired that I would qualify under this category (see guidance notes for further info).
If you ticked the above please go straight 📥 to Section 4.
Category E – I am without arms, or have long-term loss of the use of them
☐ I enclose a recent medical report detailing the extent of my loss or impairment. This category applies to people whose impairment impacts on them in such a way that they cannot carry out day-to-day tasks such as paying coins into a fare machine.
If you ticked the above please go straight 📥 to Section 9.
Category F – I have a diagnosed learning disability
☐ I enclose a copy of my EHCP (Educational Health Care Plan) / SEN Statement (Statement of Educational Needs) confirming that I have a learning disability, that is defined as "a state of arrested or incomplete development of mind, which includes significant impairment of intelligence and social functioning" (for further Information go to page 16) (If you are unable to provide either of the above please complete the rest of the application form). If you ticked the above please go straight → to Section 4.



Category G – I would either be refused a driving license, or have had one revoked, under Part III of the Road Traffic Act 1988 on the grounds of physical fitness (other than through the persistent misuse of drugs or alcohol I provide a letter from the Driver and Vehicle Licensing Agency (DVLA) confirming that I have either had my driving license revoked, or an application for one refused, for the above reasons, Any letter must include the reason for the refusal/revocation, including whether or not the underlying cause was due to the misuse of drugs or alcohol. If you ticked the above please go straight to Section 9. Alternatively, I complete Section 8 giving details about my condition, and provide a letter from my GP or Consultant (where specified) advising why, in their opinion, my condition meets the criteria for refusal of a license. If I am applying because I have a severe mental disorder, that letter must come from my Psychiatrist, Community Psychiatric Nurse (CPN) or Support Worker. If you ticked the above please go straight to Section 8. Section 4 – Travel and Transport A) Please explain your reason for applying for a Disabled Persons' Freedom Pass. B) Tick which of the following modes of transport (if any) you have used within the last 12 months: Dial-a-Ride Train Tube Buses (of any kind) C) We would like to know what other types of assisted transport services you have available to you. Please tick if you use any of the following: Access to work scheme Community transport services Social Services transportation Taxis/Minicabs Friends/relatives vehicles Other (please specify): D) How often do you use the above modes of transport, and what do you use them for? E) Do you have any difficulties, or need any assistance in using, any of these modes of transport? If so, please give details below:



Section 5 - Health and disability

around, and provide evidence of this (eg GP/Consultant letters, hospital reports or similar). Medical condition/disability How long have you had this? B) Do you take any prescribed medication for the above? This could include things like inhalers, sprays, injections etc. Yes \quad No \quad \text{If yes, please attach copies of prescriptions.} C) Do you receive any specialist treatments or therapies for the above? This could include things like pain management clinics or regular physiotherapy. Yes \(\Bar{\pi}\) No \(\Bar{\pi}\) If yes, list below: (including where) How often do you receive it? **D)** Are you on the waiting list for any surgery? (eg. orthopaedical, heart, other) Yes \(\Bar{\pi}\) No \(\Bar{\pi}\) If yes please give details: E) Have you experienced, or do you experience falls? Yes ☐ No ☐ If yes, please describe how often you fall and what causes you to fall:

A) Please list any medical conditions/disabilities you have which impact on your health/ability to move



Section 6 - Mobility

A) (i) Are you able to stand? Yes No
(ii) Do you experience any difficulty standing Yes ☐ No ☐
(iii) If yes, how long are you able to stand for?
(iv) What prevents you from standing longer?
B) (i) Are you able to walk? Yes □ No □
(ii) If you are, which of the following best describes the way you walk? (please tick) ←
Normal: no specific problems walking.
Adequate: for example you walk with a slight limp.
Poor: for example, you walk with a heavy limp/shuffle, or have problems balancing?
Extremely poor: for example, you drag your leg or swing through two crutches.
(iii) Which of the following statements (if any) applies to you? (please tick) ❖
You get short of breath when hurrying on level ground or walking up a slight hill.
You get short of breath walking with other people of your own age on level ground.
You have to stop for breath when walking at your own pace on level ground.
You get too breathless to leave your home, or after dressing.
C) How far can you usually walk in meters or yards? This includes using walking aids. As a guide the length of a bus is 15 metres and the length of the average football field is 110 metres.
DV VA II
D) What prevents you from walking further?



E) Do you have good days and bad days, and if so how does this affect your ability to walk?
F) Can you climb steps and stairs without difficulty? Yes ☐ No ☐
If not, please explain your difficulty:
in not, please explain your dimounty.
G) Please tick which of the following apply to you:
I use a walking frame: Sometimes ☐ Always ☐ Never ☐
I use a walking stick: Sometimes ☐ Always ☐ Never ☐
I use other walking equipment (please specify):I
use this equipment: Sometimes Always
My walking aid was recommended by:
H) Please use the space below, if you feel it necessary, to give further information about your disability which you believe may help your application.
Section 7 – Activities of daily living
N) What type of property do you live in? eg house, flat or maisonette.



you live in a erty.	flat or maisonette please tell us on which floor you live, and how you access your
C) Do you e	experience difficulties in carrying out everyday activities in your home? (eg personal care,
	eaning). Yes No If yes, please provide details below:
D) Do you r	receive help to carry out these activities? Include paid or unpaid help or help provided by
family.	eceive help to carry out these activities: Include paid of dripaid help of help provided by
<u></u>	
C) Have you	u been provided with any equipment for any of the above? Yes \(\bigcap\) No \(\bigcap\) If yes, please ails below:
D) Has you	r home been adapted in any way to help you with any of the above? Yes ☐ No ☐ If y
-	ride details below:

If you have previously been assessed by your local council for any home adaptations please provide us with a copy of your assessment (where available).



Section 8 - Fitness to drive

The relevant guidance for fitness to drive standards in the UK is the 'Assessing fitness to drive

- a guide for medical professionals', produced by the Driver and Vehicle Licensing Agency (DVLA). The

most recent version of this guidance was published in March 2016. It is only the rules as they relate to Group 1 licences (cars and motorcycles) which are taken into account for this category.				
A) Epilepsy – Do you have a history of epilepsy? Yes ☐ No ☐ If yes, what types of seizure do you get?				
If solely at night, when did they first start?				
When was the date of your last unprovoked daytime seizure?				
☐ I attach a recent letter from my GP or Consultant				
B) Severe mental disorder - Please describe:				
Is your disorder in the acute stage? Yes ☐ No ☐				
If you are stable, how long have you been stable for?				
Do you currently have a Care Plan? Yes No If yes, please provide a copy.				
☐ I attach a recent letter from my Psychiatrist, CPN or Support Worker				
C) Other - Please advise which, if any, of the following apply:				
☐ I am liable to sudden attacks of giddiness or fainting:				
☐ I am unable to read a registration plate in good light at 20.5 metres, even with corrective lenses if needed:				
☐ I have a disability not listed above, which prevents me from obtaining or keeping a driving license: (please describe)				
I attach a recent letter from my Consultant □				

Please note: Supporting letters for either **A**, **B** or **C** above must detail your disability, how long you have had it, and in what way (in their opinion), it would prevent you from applying for or keeping a license. The person completing the letter must show that they have had regard to the relevant DVLA guidance. They must also confirm whether or not (again in their opinion) your disability was caused by the persistent misuse of drugs or alcohol.



Section 9 - Declaration

I confirm that the information I have given on this form is true and accurate. I understand that you may prosecute me if I have knowingly given false information.

I understand that I must promptly inform my local issuing authority of any changes to my circumstances which may affect my Freedom Pass. This includes if I stop receiving a qualifying benefit or if I move from my current address.

I confirm that the photographs I have submitted with my application are a true likeness. If my appearance changes significantly, I will send you a new photograph.

I understand that you will deal with all documents relating to this application in line with data protection law and you may share them with other local authorities, the police to detect and prevent fraud.

I understand that the medical information I have supplied to support this application is deemed to be "special category data" (also known as sensitive personal data) and will be disclosed to third parties responsible for the assessment of eligibility, operation and administration of the Freedom Pass and other departments or agencies, to validate proof of entitlement.

I understand that I may be required to undertake a mobility assessment with a healthcare professional in order to determine my eligibility for a Freedom Pass.

I agree to you contacting an accredited health professional, if necessary, for the purpose of obtaining information to support my application.

I agree that, if my application is successful, I will not allow any other person to use or lend my Freedom Pass for their benefit. I agree that I will use the pass in accordance with the rules.

Under section 6 of the Audit Commission Act 1998, we must take part in the National Fraud Initiative (NFI) data matching exercise. This means that the information we hold about your Freedom Pass will be used for cross-system and cross-authority comparisons to prevent and detect fraud.

Data Sharing

The London Borough of Hounslow (LBH) Council is a data controller as defined by the new Data Protection Laws, (We will use the information you provide for the purpose of processing your application for Concessionary Travel (Blue Badges, Freedom Passes and Taxicards) to a) deal with your request and administer its departmental functions; b) meet its statutory obligations; c) prevent and detect fraud.

LBH Council will share relevant information with those with responsibility in relation to the processing your application, with other departments within LBH Council (including elected members), central government departments, law enforcement agencies, statutory and judicial bodies, contractors that process data on its behalf.

LBH Council may also use and disclose information that does not identify individuals, for research and strategic development purposes.

Under data protection laws you have various rights to yours and your child's information.

Further information about how your personal data is handled and your data protection rights can be found on our website :

https://www.hounslow.gov.uk/info/20110/open_data_and_information_requests/1368/privacy_notice/5

If you do not have access to the Internet or would like a paper copy of the privacy notice, please contact the Freedom Pass Team on 020 8583 3073. Alternatively, you can email the team at Freedom.Pass@hounslow.gov.uk or write to The Concessionary Transport Unit, London of Borough of Hounslow. Hounslow House, 7 Bath Road, Hounslow, Middlesex, TW3 3EB.



Signature:	_ Date:
Print name:	_
If completing the form for someone else, please indi-	cate how you know them:
Relationship to applicant:	
For further information on Data Protection and Information Governance Team by email at Information	
If you do not sign the declaration the form w	ill be returned back to you.
Section 10 – Ethnic Monitoring	
The purpose of this section is to provide inform	nation on whether we are delivering services in an If you do not wish us to know this information please v. The categories are taken from 2011 Census.
A) White – British ☐ Irish ☐ Gypsy/Irish travell	er Dother:
B) Black or Black British - Caribbean	n
C) Mixed – White/Black Caribbean ☐ White/Asia	n White/Black African
Other mixed (please state)	
D) Asian or Asian British – Indian ☐ Pakistani	☐ Bangladeshi ☐ Chinese ☐
Other Asian or Asian British:	
E) Other – Arab Other:	
F) I do not wish to say:	
Section 11 - Checklist	
Make sure that you enclose the following (please	tick): Proof of
Eligibility:	
Supporting medical evidence if you need to be asses	ssed: □
Proof of identity: □	Please return this form to:
Proof of address: ☐ Two colour photographs: ☐	Concessionary Transport Unit
	London Borough of Hounslow Hounslow House, 7 Bath Road, Hounslow, TW3 3EB
	Email: Freedom.pass@hounslow.gov.uk

For any enquiries regarding the application process not covered in the 'Guidance Notes' please contact us on (020) 8583 3073 or via email at Freedom.pass@hounslow.gov.uk.

Please be advised that the application process can take between 6/8 weeks to complete.



Disabled Persons' Freedom Pass - Guidance Notes

Section 1 - Information about you

This section asks for your personal details including name, date of birth, National Insurance number (NINO), address, telephone number and email address. All fields must be filled in (where applicable). You can find your NINO number on payslips or letters from the Department for Work and Pensions or other benefits agencies.

If you are applying on behalf of someone under the age of 16, or who cannot complete the form themselves, please put their details down in this section, and indicate your relationship to the applicant when signing the declaration.

There is a question for those who already have a Blue Badge. If you have been assessed for a badge within the preceding six months, we may use this as evidence when considering your eligibility for a Freedom Pass.

Section 2 - Proof of your identity and address

You must provide proof of identity and address before we will process your application. The London Borough of Hounslow only has a duty to process applications for people whose sole or principle address is within the borough. If you are not a resident, please contact your own local authority. If you own more than one property you are classed as residing at the property for which you pay Council Tax as your main place of residence, rather than as a second home.

Any proof of identity and address which you provide must be in the form specified in this section. We will not process your application without these proofs. Please provide copies of any documents not originals, as these will not be returned. If we have any doubts or suspicions about the authenticity of any of the documents provided we reserve the right to ask you to present them at Council offices for inspection.

You may find it easier to give consent for us to check the Council Tax register or the Electoral Roll than to provide physical proof of your address. If you are relying on us checking the Council Tax register you *must* make sure that your name is on the Council Tax bill.

Photographs must be passport-sized, in colour, and taken recently (i.e. within three months). You must be facing forwards in front of a plain background, your head must not be covered (unless for religious reasons) and your face must be clearly visible. You must write your name and post code on the back of the photographs.

Section 3 – Who is eligible?

The Freedom Pass scheme is governed by the Concessionary Bus Travel Act 2007, however those who are applying because they have a disability must meet one of the criterion set out in Section 151 of the Transport Act 2000, which are as follows:-

- a) Those who are blind or partially sighted;
- **b)** Those who are profoundly or severely deaf;
- c) Those who are without speech;
- **d)** Those who have a disability, or has suffered an injury, which has a substantial and long- term adverse effect on his ability to walk;
- e) Those who do not have arms or have long-term loss of the use of both arms;
- **f)** Those who have a learning disability, that is, a state of arrested or incomplete development of mind which includes significant impairment of intelligence and social functioning;
- g) Those who would, if they applied for the grant of a licence to drive a motor vehicle under

Part III of the Road Traffic Act 1988, have their application refused pursuant to section 92 of the Act (physical fitness) otherwise than on the grounds of persistent misuse of drugs or alcohol.

The relevant guidance from the Department for Transport (DfT) for assessing eligibility can be found here https://www.gov.uk/government/publications/guidance-for-local-authorities-on-eligibility-for-disabled-people and was last published in April 2013.



The DfT is clear that the onus is firmly on the person applying for a pass to provide evidence to show that they meet the criteria. Please note however that the London Borough of Hounslow will not pay any charges that GPs or Consultants/Specialists may seek to impose on you for the provision of any supporting evidence.

Included below are descriptions of the eligible categories, including excerpts from the DfT guidance.

Category A - 'those who are partially sighted or severely sight-impaired (blind)'

For this category the DfT advises that "In general terms a person can be registered as severely sight-impaired (blind) if they cannot see (with glasses, if necessary) 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.

A person can be registered as sight impaired (partially sighted) if they have a full field 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."

Please see Section 3 for the types of evidence which we accept for this category.

Category B - 'those who are severely or profoundly deaf'

For this category, the DfT advises that "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."

Please see Section 3 for the types of evidence which we accept for this category. To qualify the level of hearing loss in *both* ears must be greater than 70dBHL.

Category C - 'those without speech'

For this category, the DfT advises "Included within this category are people who are unable to communicate orally in any language. Those people will be:

- a) unable to make clear basic oral requests e.g. to ask for a particular destination or fare;
- b) unable to ask specific questions to clarify instructions e.g. 'Does this bus go to the High Street?'

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."

Please see Section 3 for the types of evidence which we accept for this category. If providing a medical report/letter it must state the cause (or suspected cause) of the person's inability to communicate verbally.

Category D – 'ability to walk'

This category is for people who have a long-term and substantial disability that means they cannot walk or which makes walking very difficult. If you receive one of the following benefits you will qualify without the need for further assessment:

Higher Rate Mobility Component of the Disability Living Allowance – Any letter must show your full name and address and state whether your award is indefinite or time limited. Replacements can be obtained from the DW P by calling 03457 123 456 (if born before 08/04/1948) or 0345 605 6055 (if born on or before that date). Please note that Disability Living Allowance is not the same as Attendance Allowance, which is awarded f or personal care in the home rather than mobility.

A score of 8 points or more in the 'Moving Around' category of the Mobility Component of Personal Independence Payments (PIP) – You must include every page of your PIP letter. Replacements can be obtained from the DW P by calling 0345 850 3322.

The War Pensioner's Mobility Supplement or a lump sum in the Armed Forces Compensation Scheme (and certification) – Any letter must show your full name and address and the length of your award. Replacements can be obtained by calling Veterans UK on 0800 169 2277 or by going online at www.veterans-uk.info



Please note: if your entitlement to one of these benefits is set to expire within the lifetime of the pass, we will review your eligibility closer to that date, at which point you will have to reprove your entitlement.

Those who do not receive one of the above benefits will need to provide evidence of their disability and may be required to attend an assessment. For this category, the DfT advises "(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 they are unable to walk very far without experiencing severe discomfort. 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 statutory concession. If they can only walk between 27 and 64 metres without severe discomfort then it is likely that they will qualify for the statutory concession. 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 statutory concession."

The guidance also suggests that people with serious chest, lung or heart conditions could also qualify if walking the distances involved would constitute a danger to their life or would be likely to lead to a serious deterioration in their health. This means that some people with heamophilia or epilepsy may qualify in this way. The serious deterioration does not need to be permanent but it should require medical intervention f or 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.

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

Walking aids should also be taken into account, so if for instance a person can walk relatively normally with the use of an artificial leg, they would 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).

For this category you should provide as much recent evidence of your disability as possible e.g. letters from GPs or Specialists detailing your condition. We would also need to see copies of any repeat prescriptions which relate to your disability.

Category E – 'those without arms, or who have lost the ability to use them'

For this category the DfT advises "This category includes people with a limb reduction deficiency of both arms; bilateral upper limb amputation; muscular dystrophy; spinal cord injury; motor neuron disease; or a condition of comparable severity.

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."

Please see Section 3 for the types of evidence which we accept for this category.

Category F - 'those with a learning disability'

Learning disability is defined in legislation as "a state of arrested or incomplete development of the mind which includes significant impairment of intelligence and social functioning". Please note that learning disabilities should not be confused with learning difficulties, which can include things like dyspraxia, dyslexia, Asperger's, ADHD or ASD, unless they are <u>also accompanied</u> by a significant impairment of intelligence and social functioning.



For this category, the DfT advises "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."

Other factors to take into account are whether or not the individual needs significant assistance to provide for their own survival (eating and drinking and keeping themselves clean and warm and clothed) or with their social/community adaptation (e.g. problem solving, social reasoning). The degree of assistance required may vary in terms of intensity (e.g. physical or verbal prompting) and frequency (e.g. daily or less than daily) but the required assistance should always be outside of the range of that expected within the individual's particular culture or community.

Please see Section 3 for the types of evidence which we accept for this category.

Category G - Fitness to drive

The London Borough of Hounslow does not issue discretionary passes based on mental health conditions. To qualify this way the condition/disorder must be so acute that the person would not be entitled to either obtain or keep a driving license, and it must not be caused by the persistent misuse of drugs or alcohol. The DVLA has produced guidance for fitness to drive standards in the UK.

Because many of the qualifying disabilities would only prevent you from obtaining or keeping a license for a short while, those who receive passes under this category may find that they have their entitlement reviewed every 12/24 months.

Please see Section 3 for the type of evidence which we accept for this category.

The assessment process.

Most applications will be decided based on the application form and any supporting evidence. In some instances, further information will be required, in which case you will be written to.

If you are applying with evidence which would make you automatically eligible e.g. a CVI confirming that you are partially sighted or blind, or a letter confirming receipt of the Higher Rate Mobility Component of Disability Living Allowance, your application will be processed without the need for further assessment.

If your application needs to be assessed, you may be required to attend a clinic at Council offices. These clinics are held on a regular basis, and are overseen by qualified Occupational Therapists. The London Borough of Hounslow does not charge for this service. If you refuse to attend or cancel an appointment without good reason, your application may be cancelled.

If your application is approved you should receive your pass through the post within seven working days. You will be provided with a booklet advising you where you can use your pass, however for further information on this please visit the London Council's website:

www.londoncouncils.gov.uk/services/freedom-pass/using-pass

If you are unsuccessful we will write out to you with the decision, and if you believe we have either incorrectly applied the criteria, or not taken into account something we should have, you will have the right to appeal against that decision within 28 days from the date of the rejection letter.

If your appeal is refused you will have to wait at least six months before reapplying, unless your situation changes for the worse and you can evidence this.