



Blue Badge Scheme Amendment Regulations Consultation
Mobility and Inclusion Unit
Department for Transport
Zone 4/22
Great Minster House
76 Marsham Street
London SW1P 4DR

23 April 2007

Response from **steps** Charity Worldwide

The following document contains our response to the Blue Badge Scheme Amendment Regulations Consultation based on specific questions from Annex A, Blue Badge Consultation Questions and Return Form. These relate to our particular interest in children who are immobilised in large body casts (hip spicas).

If you are responding on behalf of an organisation/interest group how many members do you have and how did you obtain the views of your members:

We have widely publicised the consultation through our magazine and newsletter (mailing 2000), website (average monthly visits -13,000) and online discussion forum – (membership -1,200). We have also monitored the responses to an e- petition set up by 2 of our members.(http://www.ipetitions.com/petition/blue_badge/index.html).

We have had over 700 posts on the forum throughout 100 threads which have been expressing views on the Blue Badge amendments as they relate to children. We have also had numerous email responses. The petition is currently running at 1953 signatures.

Draft regulations (Annex B)

Issue of badges to children under two years, who require bulky medical equipment - regulation 5(4)

Do you think any other items should be included in the list of “bulky medical equipment” shown at regulation 5(4) of the draft at Annex A, and why? Or should the list be restricted to what is already in the Regulations? (It should be noted that the list in regulation 5(4) is not intended to be exhaustive).

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Website: www.steps-charity.org.uk **email:** info@steps-charity.org.uk

E.g. should the list include the hip plaster casts required by children with hip dysplasia? What are the mobility difficulties for these children and in what way do these differ significantly from any other two year old child being transported in a pram or pushchair?

Hip spicas should be classified as “bulky medical equipment” as they are:

- A rigid non removable restraining device which is an integral part of the treatment for hip conditions.
- A hip spica is a Plaster of Paris or Fibreglass cast which encases the body from below the nipple line, over the stomach and hips, down both legs to at least the knees and sometimes encasing both feet as well.
- There are three basic shapes of plaster (see illustrations appendix A):
 - Frog
 - “A” shape
 - “Hurdling” shapeAll these shapes may have a wooden pole between the legs.
- They are bulky and heavy and impede mobility – not only for walking but for getting in and out of seating as they do not allow the child to bend around the waist or hips.
- They change the normal body profile of the child into extreme positions.
- Transportation by car can be particularly difficult, not only is it difficult to fit the child in conventional car safety equipment, to actually place the child in the car requires an open area around the car because the doors have to be fully open for accessibility. This means that many conventional car parking spaces for a child travelling by car in a hip spica are not suitable making it impossible for a child to travel by car. (see illustrations appendix A)
- Transportation in normal buggies is very difficult as the position of the legs means that they are protruding outside the profile of the buggy which means they are more likely to be knocked and cannot be protected in wet weather. (see illustrations appendix A)
- For a few weeks after a hip spica has been removed the bones can be at risk of fracture. Twisting movements or gentle knocks can result in a fracture, so extra care must be taken when transporting children at this stage.
- The numbers who would benefit by the amendments are small (estimates low hundreds) and therefore would not have a significant impact on pressure of Blue Badge parking.

Period of issue of badges - regulation 7

Do you agree that we should remove the current anomaly whereby badges can only be issued for a three -year period to people receiving the Higher Rate Mobility Component of the Disability Living Allowance (HRMCDLA) even if their benefit will last for less than three years?

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Do you agree that the minimum period for such badges should be 12 months and why?

This restriction will mean that Blue Badge eligibility will only impact on a small group of children, but this group will have the greatest needs. The majority of children who wear hip spicas do so for less than 12 months. We estimate that the average treatment time is between three and six months. However there is a small group of children who because of the severity of the condition or who have not responded well to initial treatment will have a series of operations and periods of immobilisation in a hip spica over a twelve month period. For this small group of children (estimates in the low hundreds per annum) access to the Blue Badge parking scheme would help to alleviate the basic difficulties of transporting and seating a child in a cast and would help to mitigate the feelings of frustration felt by the child & families and enable more normal activities of daily living.

References:

They cannot sit properly or move around: seating and mobility during treatment for developmental dysplasia of the hip in children, Cox SL, Kernohan WG, *Pediatr Rehabil.* 1998 Jul-Sep;2(3):129-34

The provision and availability of equipment for children in hip spicas and splints: a national survey, Hinde S, **steps** publication, 2000.

Sue Banton
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steps Charity Worldwide

Background on steps

steps aims to provide quality support and information and a voice for families and individuals affected by lower limb conditions. We aim to help people to walk and/or gain independent mobility. We are committed to furthering research, innovation, services and best practice through a partnership approach.

We do this by:

- Providing information through publications, helpline and website
- Support through an Internet community and Contact Register
- Education through training programmes and conferences
- Research – supporting and commissioning
- Working in partnership to Influence change

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Annex A.

Annex A. Illustrations.

Range of hip spica shapes:



Transport difficulties:



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