

APPENDIX 1. Daily living activities: descriptors and scores

Each activity heading has a set of 'descriptors'. These describe related tasks of varying levels of difficulty and different types of help you need to complete each task. You score points when you're not able to complete a task safely, to an acceptable standard, repeatedly and in a reasonable time period.

For each activity heading, if more than one descriptor applies to you, only the score from the one that gives you the highest number of points is included.

To be entitled to the standard rate of the daily living component, you need to score at least eight points. To be entitled to the enhanced rate, you need to score at least 12 points. These points can be scored from just one activity or from any of the

daily living activities added together.

For the meaning of the terms and phrases used, see Appendix 4 on page 36.

Activity 1. Preparing food

- A. Can prepare and cook a simple meal unaided. **Score 0**
- B. Needs to use an aid or appliance to be able to either prepare or cook a simple meal. **Score 2**
- C. Cannot cook a simple meal using a conventional cooker but is able to do so using a microwave. **Score 2**
- D. Needs prompting to be able to either prepare or cook a simple meal. **Score 2**
- E. Needs supervision or assistance to either prepare or cook a simple meal. **Score 4**
- F. Cannot prepare and cook food. **Score 8**

Activity 2. Taking nutrition

A. Can take nutrition unaided.

Score 0

B. Needs (i) to use an aid or appliance to be able to take nutrition, **or**

(ii) supervision to be able

to take nutrition, **or**

(iii) assistance to be able to cut up food.

Score 2

C. Needs a therapeutic source to be able to take nutrition.

Score 2

D. Needs prompting to be able to take nutrition.

Score 4

E. Needs assistance to be able to manage a therapeutic source to take nutrition.

Score 6

F. Cannot convey food and drink to their mouth and needs another person to do so.

Score 10

Activity 3. Managing therapy or monitoring a health condition

A. Either

(i) does not receive medication or therapy or need to monitor a health condition, **or**

(ii) can manage medication or therapy or monitor a health condition unaided.

Score 0

B. Needs any one or more of the following:

(i) to use an aid or appliance to be able to manage medication

(ii) supervision, prompting or assistance to be able to manage medication

(iii) supervision, prompting or assistance to be able to monitor a health condition.

Score 1

C. Needs supervision, prompting or assistance to be able to manage therapy that takes no more than 3.5 hours a week. **Score 2**

D. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 3.5 but no more than 7 hours a week. **Score 4**

E. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 7 but no more than 14 hours a week. **Score 6**

F. Needs supervision, prompting or assistance to be able to manage therapy that takes more than 14 hours a week. **Score 8**

Activity 4. Washing and bathing

A. Can wash and bathe unaided. **Score 0**

B. Needs to use an aid or appliance to be able to wash or bathe. **Score 2**

C. Needs supervision or prompting to be able to wash or bathe. **Score 2**

D. Needs assistance to be able to wash either their hair or body below the waist. **Score 2**

E. Needs assistance to be able to get in or out of a bath or shower. **Score 3**

F. Needs assistance to be able to wash their body between the shoulders and waist. **Score 4**

G. Cannot wash and bathe at all and needs another person to wash their entire body. **Score 8**

Activity 5. Managing toilet needs or incontinence

A. Can manage toilet needs or incontinence unaided. **Score 0**

B. Needs to use an aid or appliance to be able to manage toilet needs or incontinence. **Score 2**

C. Needs supervision or prompting to be able to manage toilet needs. **Score 2**

D. Needs assistance to be able to manage toilet needs. **Score 4**

E. Needs assistance to be able to manage incontinence of either bladder or bowel. **Score 6**

F. Needs assistance to be able to manage incontinence of both bladder and bowel. **Score 8**

Activity 6. Dressing and undressing

A. Can dress and undress unaided. **Score 0**

B. Needs to use an aid or appliance to be able to dress or undress. **Score 2**

C. Needs either
(i) prompting to be able to dress, undress or determine appropriate circumstances for remaining clothed, **or**
(ii) prompting or assistance to be able to select appropriate clothing. **Score 2**

D. Needs assistance to be able to dress or undress their lower body. **Score 2**

E. Needs assistance to be able to dress or undress their upper body. **Score 4**

F. Cannot dress or undress at all. **Score 8**

Activity 7. Communicating verbally

A. Can express and understand verbal information unaided. **Score 0**

B. Needs to use an aid or appliance to be able to speak or hear. **Score 2**

C. Needs communication support to be able to express or understand complex verbal information. **Score 4**

D. Needs communication support to be able to express or understand basic verbal information. **Score 8**

E. Cannot express or understand verbal information at all even with communication support.

Score 12

Activity 8. Reading and understanding signs, symbols and words

A. Can read and understand basic and complex written information either unaided or using spectacles or contact lenses. **Score 0**

B. Needs to use an aid or appliance, other than spectacles or contact lenses, to be able to read or understand either basic or complex written information. **Score 2**

C. Needs prompting to be able to read or understand complex written information. **Score 2**

D. Needs prompting to be able to read or understand basic written information. **Score 4**

E. Cannot read or understand signs, symbols or words at all. **Score 8**

Activity 9. Engaging with other people face-to-face

A. Can engage with other people unaided. **Score 0**

B. Needs prompting to be able to engage with other people. **Score 2**

C. Needs social support to be able to engage with other people. **Score 4**

D. Cannot engage with other people due to such engagement causing either
(i) overwhelming psychological distress to the claimant, **or**
(ii) the claimant to exhibit behaviour which would result in a substantial risk of harm to the claimant or another person. **Score 8**

Activity 10. Making budgeting decisions

- A. Can manage complex budgeting decisions unaided. **Score 0**
- B. Needs prompting or assistance to be able to make complex budgeting decisions. **Score 2**
- C. Needs prompting or assistance to be able to make simple budgeting decisions. **Score 4**
- D. Cannot make any budgeting decisions at all. **Score 6**

APPENDIX 2. Mobility activities: descriptors and scores

Each activity heading has a set of 'descriptors'. These describe related tasks of varying degrees of difficulty. You score points when you're not able to complete a task described safely, to an acceptable

standard, repeatedly and in a reasonable time period.

For each activity heading, if more than one descriptor applies to you, only the score from the one that gives you the highest number of points is included.

- To be entitled to the standard rate of the mobility component, you need to score at least eight points.
- To be entitled to the enhanced rate, you need to score at least 12 points.

These points can be scored from just one activity heading or from both of the activity headings added together. For the meaning of the terms and phrases used, see Appendix 4 on page 36.

Activity 11. Planning and following journeys

- A. Can plan and follow the route of a journey unaided. **Score 0**

- B.** Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant. **Score 4**
- C.** Cannot plan the route of a journey. **Score 8**
- D.** Cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid. **Score 10**
- E.** Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant. **Score 10**
- F.** Cannot follow the route of a familiar journey without another person, an assistance dog or an orientation aid. **Score 12**
- B.** Can stand and then move more than 50 metres but no more than 200 metres, either aided or unaided. **Score 4**
- C.** Can stand and then move unaided more than 20 metres but no more than 50 metres. **Score 8**
- D.** Can stand and then move using an aid or appliance more than 20 metres but no more than 50 metres. **Score 10**
- E.** Can stand and then move more than 1 metre but no more than 20 metres, either aided or unaided. **Score 12**
- F.** Cannot, either aided or unaided,
(i) stand, **or**
(ii) move more than 1 metre. **Score 12**

Activity 12. Moving around

- A.** Can stand and then move more than 200 metres, either aided or unaided. **Score 0**

APPENDIX 3. ‘How your disability affects you’ form: explanations and examples

The ‘How your disability affects you’ form gives you the chance to describe how your condition affects your daily life. Most of the form is made up of questions relating to the points-based PIP assessment (see Appendices 1 and 2). We now look at the questions on the form in more detail, providing examples that could be written in the extra information boxes.

These examples are intended as a guide only. Parkinson’s affects everyone differently, so before writing your answers, consider carefully how your condition affects you from day to day.

Daily living activities

Preparing food (Activity 1 in Appendix 1)

Some people with Parkinson’s may have problems with their grip, such as holding a hot pan. You may need a perching stool or have other issues with balance around the kitchen. You may also need to use chopped or prepared food, or need to have someone there to help or supervise in case of accidents, or to prompt if you have memory problems.

Example response:

“Because of my tremor I don’t feel confident handling pans full of food or hot water. I cannot grip utensils properly, and don’t have the muscle control to be able to cut or chop food. I also have balance problems, so standing in the kitchen for any period of time is difficult. This is why I need supervision or assistance to be able to prepare and cook a simple meal.”

Eating and drinking (Activity 2 in Appendix 1: Taking nutrition)

Some people with Parkinson's will need help to eat food or drink because of swallowing problems, which can cause choking. You may also need prompting because of memory problems. In some cases, people are able to eat their food and drink liquids unsupervised, but might need some help with preparation, such as chopping up food.

Example response:

"I have problems eating because I have swallowing problems. This causes a fear of choking, so I don't eat unless I have help, which has led to weight loss. I use various aids to help me eat and often need help to cut up food, as I find it difficult to grip cutlery."

Managing treatments (Activity 3 in Appendix 1: Managing therapy or monitoring a health condition)

Some people with Parkinson's need to take lots of medication, for which you may need a pill box or a pill timer. A special diet can be seen as therapy. Some people may be on apomorphine injections or infusions. Some may need physiotherapy, which can count towards the total number hours of therapy needed each week.

Example response:

"I need apomorphine injections, which I take between doses of my usual medication. I can't do this myself so my partner is trained in how to use it. I have a ready-to-use injection pen that works within 10 minutes and is often used as a 'rescue' measure, usually when I have a sudden 'off' period. Because of this, I need constant, 24-hour supervision

to manage my Parkinson's."

Washing and bathing (Activity 4 in Appendix 1)

Many people with Parkinson's are likely to need assistance getting in and out of a bath or shower. You may also need some form of adaptation, for example a shower seat, walk-in shower, or grab handles by the bath. Some people may have difficulties washing their body.

Example response:

"I have very limited mobility and spend most of the day in a wheelchair. I need two carers to visit me twice a day – one in the morning and one in the evening. I need the evening carer to help me get in and out of the bath."

Managing toilet needs (Activity 5 in Appendix 1: Managing toilet needs or incontinence)

Some people with Parkinson's will develop incontinence problems, or

have difficulties reaching the toilet in time, due to mobility and dexterity issues. Many people with Parkinson's may need to use continence pads, or need someone to prompt, supervise or assist them in going to the toilet.

Example response:

"I have a lot of difficulty with bladder and bowel problems. I have to visit the toilet several times during the night. This can be incredibly difficult, because sometimes I can't move quickly enough to get to the toilet on time. I have an 'accident' at least once a week, and need help cleaning myself afterwards. I need to keep a hand-held urinal next to my bed. I also experience terrible constipation. I have a raised toilet seat because it is difficult to get down on to it and to get up again."

Dressing and undressing (Activity 6 in Appendix 1)

Some people with Parkinson's have problems with dexterity

and fine finger movements, such as tying laces or doing up buttons. Some people use adapted clothing. Some will have balance problems or pain with dressing and undressing, including issues such as putting on shoes.

Example response:

“I need a lot of help getting dressed. My body is always very rigid in the mornings and until my medication kicks in, moving is very difficult. Dexterity is a huge problem and I have great difficulty with fine finger movements – tying laces or doing up buttons is sometimes almost impossible. Due to rigidity and stiffness, bending down can be difficult, so I need help putting on shoes and socks. It takes about three times as long to get dressed as it did before I had Parkinson’s.”

**Communicating
(Activity 7 in Appendix 1:
Communicating verbally)**

Some people with

Parkinson’s have problems with hearing and use a hearing aid. Others need a communication aid for their voice.

Example response:

“I find verbal communication very difficult. My voice is very quiet and sometimes my speech is slurred. I also find it hard to begin speaking and experience slowness of thought, so following fast-changing topics, interrupting conversations or even giving answers to simple questions can be very challenging. I often end up giving minimal responses, which leaves me feeling isolated.”

**Reading
(Activity 8 in Appendix 1:
Reading and understanding
signs, symbols and words)**

Some people with Parkinson’s have problems with memory and understanding, including slowness of thought, recalling memories or making decisions.

Example response:

“Because of memory problems I have severe problems with attention and concentration. I also get very fatigued, so I need a lot of help and support to be able to read or understand newspaper or magazine articles or instructions for how to use household appliances.”

Mixing with other people (Activity 9 in Appendix 1: Engaging with other people face-to-face)

Some people with Parkinson’s may get extremely anxious or distressed meeting people and may need constant support to engage. This may be due to cognitive issues such as dementia.

Example response:

“Anxiety is a symptom of Parkinson’s and I experience this quite often, especially when in crowds of people, causing overwhelming distress. I often ‘freeze’. This

makes anxiety a lot worse, so social situations are difficult for me, sometimes causing overwhelming distress. I have difficulty making facial expressions because of rigid facial muscles. This makes it difficult to express my emotions, and I am often misunderstood. This can cause distress, so I need support from my husband.”

Mobility activities

Going out (Activity 11 in Appendix 2: Planning and following journeys)

Some people with Parkinson’s will get extremely anxious or distressed when going out and need someone to accompany them – especially on an unfamiliar journey. You may also avoid going out because of the fear of freezing (where you suddenly cannot move) or falling. Some people may have visual problems due to Parkinson’s and feel unsafe

getting out and about without help.

Example response:

“I can’t follow the route of an unfamiliar journey without my carer. I easily get confused, and being in unfamiliar situations or places can cause stress, which makes my symptoms worse. I also freeze and fall often, so I am afraid to go out by myself.”

**Moving around
(Activity 12 in Appendix 2)**

Most people with Parkinson’s experience problems with movement. They may not be able to physically move, or may feel so fatigued by doing so that they need to stabilise themselves by leaning on furniture. Some people may feel so nauseous, exhausted and ‘switched off’ that they have to lie down often.

If you receive eight points or more on this activity, you may automatically qualify for a Blue Badge.

When completing this part of the form, don’t make guesses. If you’re not sure how far you can walk before feeling severe discomfort, go outside on an average day and test yourself (if your condition varies, don’t choose a good day to do the test). Find a safe location on level ground. Walk until you feel that you’re unable to continue (if it’s safe for you to do so). Remember you’ll need to return to your starting point. Record what happens and when, in terms of distance and time (you may find it helpful to have someone with you to record both of these). Include factors such as pain, dizziness, co-ordination difficulties, stumbles and tiredness. Note how long it takes you to recover before you feel able to walk again. Write down your findings on the form in the ‘extra information’ box.

Example response:

“On most days, I can stand and walk using a Zimmer

frame and manage between 10 and 20 metres. I get fatigued very easily, and so need a recovery time after walking this distance (usually around 10 minutes). My condition fluctuates from day to day, and sometimes I can't manage to walk at all. I fall often if I don't use my Zimmer frame, and my balance is badly affected."

APPENDIX 4. Definitions

Acceptable standard – you may be able to complete the activity, but not to a good enough standard. For example, where someone can physically wash themselves but doesn't realise they haven't done it well and are still not clean afterwards.

Aid or appliance – this means any device which improves, provides or replaces your impaired physical or mental function (for example walking sticks or frames). You'll be assessed

while wearing or using any aid or appliance that you would normally wear or use, or which you could reasonably be expected to wear or use if you don't currently do so. It should not be considered reasonable for you to wear or use an aid or appliance if it's too expensive, difficult to obtain or is culturally inappropriate for you.

Aided – this means with:
(a) the use of an aid or appliance, **or**
(b) supervision, prompting or assistance.

Assistance – physical intervention by another person. This doesn't include someone just speaking to you.

Assistance dog – a dog trained to guide or assist a person with a sensory impairment.

Basic verbal information – information in your own language conveyed verbally in a simple sentence.

Basic written information – signs, symbols and dates of written or printed standard-sized text in your own language.

Bathe – getting into or out of an unadapted bath or shower.

Communication support – support from a person trained or experienced in communicating with people with specific communication needs, including interpreting verbal information into a non-verbal form and vice versa (for example using sign language).

Complex budgeting decisions – decisions involving:

- (a) calculating household and personal budgets
- (b) managing and paying bills, **and**
- (c) planning future purchases.

Complex verbal information – information in your own language conveyed verbally in either more than one sentence or one complicated sentence.

Complex written information – more than one sentence of written or printed standard-size text in your own language.

Cook – heating food at or above waist height.

Dress and undress – includes putting on and taking off socks and shoes.

Engage socially
(a) interact with others in a contextually and socially appropriate manner
(b) understand body language, **and**
(c) establish relationships.

Manage incontinence – this means managing involuntary evacuation of your bowel or bladder, including using a collecting device (such as a bottle or bucket) or catheter, and being able to clean yourself afterwards.

Manage medication – this means taking medication (in the right way and at the right time), where a failure to do so is likely to result in a

deterioration in your health.

Manage therapy – this means undertaking therapy, where a failure to do so is likely to result in a deterioration in your health.

Medication – medication to be taken at home which is prescribed or recommended by a registered doctor, nurse, or pharmacist.

Monitor health

(a) detecting significant changes in your health condition that are likely to lead to your health getting worse, **and**

(b) taking action advised by a registered doctor, nurse, or health professional who is regulated by the Health and Care Professions Council, without which your health is likely to get worse.

Orientation aid – a specialist aid designed to help disabled people follow a route safely.

Prepare – in the context of food, this means making food ready for cooking or eating.

Prompting – reminding, encouraging or explaining by another person.

Psychological distress – distress related to an enduring mental health condition or problems with thinking and memory.

Read – this includes reading signs, symbols and words but does not include reading Braille.

Repeatedly – this means being able to repeat the task as often as is reasonably required. The combined effects of symptoms such as pain and tiredness are relevant because the effort of completing a task could make it harder for you to repeat it or to complete other tasks.

For example, if you're able to prepare breakfast without help, but the exhaustion from doing this means that you couldn't prepare another meal that day, you should be treated as being unable to prepare a meal unaided. This is because it's reasonable to

expect someone to be able to prepare more than one meal a day.

Reasonable time period

– this means no more than twice as long as a person without your physical or mental condition would normally take to complete that task.

Safely – this means in a way that is unlikely to cause harm to you or anyone else, either during or after you have performed the task. In assessing whether you can carry out a task safely, the Department for Work and Pensions must consider whether there is a real possibility of harm occurring that cannot be ignored, having regard to the nature and gravity of the harm in question. If the severity of harm is very high, then an activity may be considered unsafe, even if the frequency of the adverse event is low.

Simple budgeting decisions

– decisions involving:
(a) calculating the cost of goods, **and**
(b) calculating the change required after a purchase.

Simple meal – a cooked one-course meal for one, using fresh ingredients.

Social support – support from a person trained or experienced in assisting people to engage in social situations.

Stand – stand upright with at least one biological foot on the ground.

Supervision – the continuous presence of another person for the purpose of ensuring your safety.

Take nutrition – this means:
(a) cut food into pieces, convey food and drink to your mouth and chew and swallow, **or**
(b) take nutrition by using a therapeutic source.

Therapeutic source – parenteral or enteral tube feeding, using a rate-limiting

device such as a delivery system or feed pump.

Therapy – this means therapy to be undertaken at home which is prescribed or recommended by:

- (a) a registered doctor, nurse or pharmacist, **or**
- (b) a health professional regulated by the Health and Care Professions Council. It does not include taking or administering medication or anything related to the monitoring of your health condition.

Toilet needs

- (a) getting on and off an unadapted toilet
- (b) evacuating your bladder and bowel, **and**
- (c) cleaning yourself afterwards.

Unaided – this means without:

- (a) the use of an aid or appliance, **or**
- (b) supervision, prompting or assistance.

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