

## 2.4 Mobility activities

### Activity 11 – Planning and following journeys

This activity considers a claimant's ability to plan and follow the route of a journey. It is useful separately to consider:

- ability to plan the route of a journey in advance
- ability to leave the home and embark on a journey and
- ability to follow the intended route once they leave the home.

This activity is designed for limitations on mobility deriving from mental health, cognitive and sensory impairments, whereas activity 12 is designed for limitations from physical problems. Cognitive impairment includes orientation (understanding of where, when and who the person is), attention, concentration and memory. Any issues with the ability to stand and then move are not applicable under activity 11.

11d or 11f only apply where a claimant could not reliably make their way along a route without an accompanying person, assistance dog or orientation aid. The presence of another person for reassurance, or out of preference, is not sufficient.

While a claimant who needs to be accompanied by another person to avoid overwhelming psychological distress (OPD) cannot satisfy 11d or 11f on that ground, it is possible that the same underlying condition (e.g. bipolar disorder, psychotic illnesses) may cause cognitive impairment too (either intermittently, when making journeys, or more generally). If that is the case, then a claimant may satisfy 11d or 11f on grounds that, without being accompanied by another person, they could not reliably make their way along the route because of the cognitive impairment.

11f may apply, where a claimant regularly experiences uncontrolled or unpredictable seizures which result in prolonged confusion and disorientation so that they need to be accompanied (on the majority of days) in order to make their way safely along even a familiar route.

A	Can plan and follow the route of a journey unaided.	0
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<p>Within the assessment criteria, the ability to perform an activity unaided means without either the use of aids or appliances; or help from another person.</p> <p>Can the claimant go out to make any single journey, without prompting most days? If so, mobility 1A is likely to apply.</p> <p>The majority of people with a seizure or blackout disorder will not require another person to accompany them, in order to make their way along a route out of doors safely. Those with well controlled seizure disorders or blackouts should be able to reliably go out alone, in which case 11a will apply.</p>		
<p>B</p>	<p>Needs prompting to be able to undertake any journey to avoid overwhelming psychological distress to the claimant.</p>	
<p>This descriptor applies to claimants where undertaking any journey causes overwhelming psychological distress (OPD) and where they need prompting ('prompting' means reminding, encouraging or explaining by another person) on the majority of days to be able to go out and/or complete a journey.</p> <p>'Any journey' means that in order to satisfy the descriptor on a day the person must require prompting with <i>every single</i> journey on that day. If the person can manage to leave the home to make a journey once without prompting then on that day the descriptor is not satisfied. For example, a claimant who can make visits to the local shop or collect their children from school without prompting on most days will not satisfy this descriptor, even if they are unable to undertake other journeys without prompting during the same day. However, being able to complete a journey at night time only is not considered to be completing a journey to an acceptable standard. Therefore, in these instances, descriptor E may be more appropriate.</p> <p>OPD means distress related to a mental health condition or intellectual or cognitive impairment resulting in a severe anxiety state in which the symptoms are so severe that the person cannot undertake a journey without being overwhelmed. The threshold is a high one - a claimant who, without prompting, would be left feeling anxious, worried or emotional does not meet it. OPD may occur in conditions such as generalised anxiety disorder, panic disorder, dementia or agoraphobia. In cases of agoraphobia, going out provokes anxiety but may still be possible with prompting. If agoraphobia is so severe that the claimant is unable to go out even with support on the majority of days, descriptor E may be more appropriate.</p> <p>Illustrative examples:</p> <p>A claimant goes out to his local shop four days each week but needs to have his wife with him to cope with this journey. He will sometimes try to go to his weekly</p>		<p>4</p>

	<p>physiotherapy appointment alone if his wife is working, but this causes him severe anxiety (resulting in shaking uncontrollably, shortness of breath, faintness, nausea) and he has only managed this once in the last month; he cancelled the other appointments rather than make the trip alone. He can go out on most days but requires prompting / support to be able to do so and to avoid overwhelming psychological distress. He is only able to go out alone on occasion and very infrequently. He would therefore satisfy mobility 1B.</p>	
C	<p>For reasons other than psychological distress, cannot plan the route of a journey.</p>	
	<p>Applies to claimants with cognitive or developmental impairments who cannot formulate a plan for their journey in advance using simple materials, such as bus route maps, phone apps or timetables. The route that is being planned is unfamiliar – one does not need to plan a familiar route.</p>	8
D	<p>For reasons other than psychological distress, cannot follow the route of an unfamiliar journey without another person, assistance dog or orientation aid.</p>	
	<p>“Follow the route” means make one’s way along a route to a destination. This involves more than just navigation of the route. Safety should be considered in respect of risks that relate to following the route (tendency to wander into the road, or inability safely to cross a road, if unaccompanied), for example, a claimant with a severe visual or profound hearing impairment may be at substantial risk from traffic when crossing a road.</p> <p>Although psychological distress cannot contribute to the satisfaction of this descriptor if the claimant also has symptoms of cognitive or sensory impairment they may satisfy this descriptor.</p> <p>A person should only be considered able to follow an unfamiliar journey if they would be capable of using public transport – the assessment of which should focus on ability rather than choice.</p> <p>The route has already been planned. Any significant diversions from that route are therefore irrelevant – it is no longer the planned route. However, making one’s way around road works, or a change of train platform (i.e. minor diversions) are part of being able to follow the route of a journey. For example, a profoundly deaf person may need a person to accompany them to relay information, such as changes to a journey, due to disruptions.</p> <p>The descriptor refers to “an unfamiliar journey” rather than “any unfamiliar journey”. Accordingly, claimants can satisfy the descriptor by showing that they</p>	10

	<p>typically need to be accompanied by another person or an assistance dog or to use an orientation aid on the majority of days when undertaking unfamiliar journeys (it's not necessary to show that they need such support for every possible unfamiliar journey on most days).</p> <p>Orientation aids are <i>specialist</i> aids. Ordinary satellite navigation systems such as those found in mobile phones do not count as specialist. Maps or lists of directions do not count as specialist. A long cane (as used by person with sight impairment) is an example of a specialist orientation aid (NB – a symbol cane, which is used to signal to others the person has some sight impairment, is not an orientation aid as it does not actually help the person orient themselves).</p>	
E	Cannot undertake any journey because it would cause overwhelming psychological distress to the claimant.	
	<p>This descriptor applies to claimants where undertaking any journey causes overwhelming psychological distress (OPD) despite being aided.</p> <p>'Any journey' means that in order to satisfy the descriptor on any particular day the person must not be able to manage to undertake a single journey. If the person can manage to leave the home to undertake a journey once then on that day the descriptor is not satisfied, even if they are unable to undertake other journeys during the same day. Being able to complete a journey at night time only however, is not considered to be completing a journey to an acceptable standard. Therefore, in these instances, this descriptor may be appropriate.</p> <p>OPD means distress related to a mental health condition or intellectual or cognitive impairment resulting in a severe anxiety state in which the symptoms are so severe that the person cannot undertake a journey without being overwhelmed. The threshold is a high one - a claimant who is anxious, worried or emotional does not meet it.</p> <p>This descriptor is likely to apply to claimants with severe mental health conditions (severe agoraphobia or panic disorder) or cognitive impairments (a person with dementia who may become very agitated and distressed when leaving home, to the extent that journeys outside the home can no longer be made either at all, or on the majority of days, even with the support of another person).</p> <p>A claimant who satisfies 1e cannot also satisfy 1f. If they cannot undertake a single journey on the majority of days, then 1e will be the applicable descriptor, even if there are occasions when they could follow a familiar route, if accompanied.</p>	10
F	For reasons other than psychological distress, cannot follow the route	12

	<p>of a familiar journey without another person, an assistance dog or an orientation aid.</p>	
<p>“Follow the route” means make one’s way along a route to a destination. This involves more than just navigation of the route. Safety should be considered in respect of risks that relate to following the route (e.g. tendency to wander into the road, or inability safely to cross a road, if unaccompanied), for example, a claimant with a severe visual or profound hearing impairment may be at substantial risk from traffic when crossing a road.</p> <p>The route has already been planned. Any significant diversions from that route are therefore irrelevant – it is no longer the planned route. However, making one’s way around road works, or a change of train platform (i.e. minor diversions) are part of being able to follow the route of a journey.</p> <p>The descriptor refers to “a familiar journey” rather than “any familiar journey”. Accordingly, claimants can satisfy the descriptor by showing that they typically need to be accompanied by another person or an assistance dog or to use an orientation aid on the majority of days when undertaking familiar journeys (it’s not necessary to show that they need such support for every possible familiar journey on most days).</p> <p>Although psychological distress cannot contribute to the satisfaction of this descriptor if the claimant also has symptoms of cognitive or sensory impairment they may satisfy this descriptor.</p> <p>A claimant who is actively suicidal or who is at substantial risk of exhibiting violent behaviour and who needs to be accompanied by another person to prevent them harming themselves or others when undertaking a journey would meet this descriptor. In cases such as this, the HP should look for evidence of suicidal thoughts and/or behaviour. In cases of violent behaviour there must be evidence that they are unable to control their behaviour and that being accompanied by another person, who can intervene if necessary, reduces a substantial risk of the person committing a violent act.</p> <p>Orientation aids are <i>specialist</i> aids. Ordinary satellite navigation systems such as those found in mobile phones do not count as specialist. Maps or lists of directions do not count as specialist. A long cane (as used by person with sight impairment) is an example of a specialist orientation aid (NB – a symbol cane, which is used to signal to others the person has some sight impairment, is not an orientation aid as it does not actually help the person orient themselves).</p>		