

# Certifying patients as fit to drive – the GP's role



**GPs are advised to be familiar with their obligations under the latest fitness to drive guidelines and to consult them if they are in any doubt as to a patient's fitness, writes [Niamh Gallagher](#)**

**THE CURRENT ROAD SAFETY AUTHORITY (RSA) Sláinte agus Tiomáint Medical Fitness to Drive Guidelines for Group 1 and Group 2 drivers were updated in 2021.<sup>1</sup>** The aim of the guidelines is to assist doctors in assessing patients' fitness to drive, having regard to conditions that may impact on their ability to drive safely.

Drivers have a responsibility to report to the National Driver Licence Service (NDLS) when they become aware of a health condition that may affect their ability to drive. The relevant medical conditions are listed on the NDLS application form for a new or renewed driving licence. Sometimes, patients understandably do not wish to accept they have a notifiable condition affecting their ability to drive. Unfitness to drive can have a huge impact on a patient's quality of life, affecting their independence, social outlets and livelihoods. GPs often find themselves in the difficult position where a patient refuses to notify the condition to the NDLS.

A GP is then faced with deciding whether or not a report should be made to the NDLS which, if patient consent is not forthcoming, would involve breaching patient confidentiality. This is usually a last resort but sometimes necessary in certain limited situations in order to ensure public safety.

#### **Who must be assessed?**

When applying for or renewing driving licences, drivers are required to sign a declaration as to their health, including whether they have any relevant medical condition as listed in the form. Where a driver has a relevant condition, a driver must be assessed by a medical professional in order

to certify their fitness to drive.

The guidelines provide information on the medical standard required in respect of neurological disorders, cardiovascular disorders, diabetes, psychiatric disorders, alcohol misuse and dependence, visual disorders, renal disorders, respiratory and sleep disorders. The guidelines provide minimum standards of treatment or level of control for particular illness.

#### **Group 1 and group 2 drivers**

Group 1 licensed drivers include those driving motorcycles, cars and tractors

Group 2 licensed drivers include those driving trucks and buses. Drivers within this category are likely to drive for work and if their driving is impaired may pose even more of a risk to the public if, for example, they are engaged in transporting others in their vehicle or by the size and weight of their vehicle.

#### **What are a GP's obligations?**

The guidelines summarise the roles and responsibilities of GPs as:

- To assess a driver's medical fitness to drive based on the current Sláinte agus Tiomáint medical standards
- To advise the driver regarding the impact of their medical condition or disability on their ability to drive and recommended restrictions and ongoing monitoring as required
- To advise the driver of their responsibility to report their condition to the NDLS if their long-term or permanent injury or illness may affect their ability to drive

- To treat, monitor and manage the driver's condition with ongoing consideration of their fitness to drive
- To report to the NDLS regarding a driver's fitness to drive in the exceptional circumstances where there is a risk to the public and the driver cannot or will not cease driving.

If the GP has any doubt about a patient's suitability to drive, referral to a specialist and/or an on-road assessment with a qualified assessor may be of assistance.

It is hugely important that GPs communicate to the patient that they have a responsibility to report to the NDLS any condition that affects their ability to drive.

If, having regard to the clinical assessment and the guidelines, your opinion is that the patient is unfit to drive, you should clearly inform them of your opinion. The guidelines provide timeframes for specific conditions and this should be explained to the patient.

#### What if a patient disagrees with a GP's assessment?

Where a patient disagrees that they should stop driving, they can seek a second opinion but must stop driving until the second opinion has been obtained and permission is granted to drive again. In the event a driver continues to drive against medical advice while awaiting a second opinion, the guidelines state that it will affect a driver's insurance and the NDLS and Gardaí will take action to remove the licence.

#### What about reporting directly to the NDLS?

The guidelines specify that a health professional should consider reporting directly to the NDLS in situations where the driver is:

- Unable or unwilling to appreciate the impact of their condition which is impacting on their fitness to drive
- Unable or unwilling to take notice of the health professional's recommendations
- Continues driving despite appropriate advice and is likely to endanger the public.

Ideally, any report to the NDLS should be made with the patient's consent. It is important that GPs follow the NDLS guidelines closely when considering making a notification without patient consent. In some emergency situations, it may also be necessary to contact the Gardaí. A GP must also bear in mind their obligations of confidentiality and may wish to discuss the matter with their indemnifier.

Managing conversations with patients can be challenging, particularly where patients disagree with the GP's clinical opinion. A GP should assess the seriousness and urgency of the risk based on a patient's presentation and background information.

This can be particularly difficult where a patient is a new patient or attends solely for the purposes of completing the medical form. It is advisable to take a very detailed history and carry out a thorough examination on such patients. Where there are concerns as to the information provided, seek the patient's consent to access their previous GP records.

#### Case study


Your patient presents with a medical report form in connection with a renewal application for a group 2 licence. You note from her chart that she has a new diagnosis of moderate sleep apnoea from a sleep clinic. Your patient does not accept that the diagnosis will affect her driving. She will not accept referral to a sleep specialist with a view to receiving

treatment. The patient holds a group 2 licence and drives a local school bus for a living. It is your clinical opinion that if the patient engaged with the relevant treatment, she would be in a position to be certified fit to drive.

In this instance we would recommend the following steps:

- Advise the patient of the guidelines and explain that both medical professionals and drivers have responsibilities which are outlined in the guidelines
- Advise the patient that her diagnosed condition has an effect on her ability to drive and that according to chapter 9 of the guidelines, she should not drive until such a time as satisfactory control of her symptoms has been attained with ongoing compliance with treatment, confirmed by specialist medical opinion
- Inform her that you cannot certify her as fit to drive until her condition is controlled and that she has a responsibility to report her diagnosis to the NDLS. Encourage her to seek the necessary treatment, offer support for managing the condition and make it clear that she may then be certified as fit to drive
- Outline that you have a duty to act in her best interests but you also have obligations pursuant to the guidelines and you feel that her continuing to drive constitutes a risk to public safety
- Explain that patient confidentiality is a key element of the doctor-patient relationship but certain situations can give rise to a breach, including if there is a risk to public safety. Explain that your concern is heightened in light of her occupation
- Two scenarios can occur:
  - The patient confirms she will follow your advice and you can inform her that you will check in with her in one to two days to ensure that she has notified the NDLS. If the patient confirms that she has notified the NDLS, have a further discussion in relation to the treatment required and what steps to take to control the condition
  - The patient refuses to follow your advice. While acknowledging that it is a very difficult situation, you should clearly explain that you have an obligation to make a report to the NDLS and you will have no option but to do so unless she agrees to cease driving and to inform the NDLS herself. It is advisable to offer the patient a short timeframe (one to two days) to consider this, asking for confirmation that she will not drive in the meantime
  - If your patient is still not engaging or declines to follow your advice, you may wish to contact your indemnifier for specific advice prior to making a report to the NDLS.

#### Conclusion

All GPs are advised to be familiar with their obligations pursuant to the guidelines and to consult them if they are in any doubt as to a patient's condition and the standard required. As with all consultations, it is imperative to document all discussions with patients clearly and in detail. It is also crucial that decision-making processes are documented carefully – this is particularly important in the event that a report to the NDLS is made. 

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Reference  
1. www.ndls.ie