

<b>Report to:</b>	Licensing and Regulatory Committee	<b>Date of Meeting:</b>	Monday 17 June 2019
<b>Subject:</b>	Driver Medicals		
<b>Report of:</b>	Head of Highways and Public Protection	<b>Wards Affected:</b>	
<b>Portfolio:</b>	Regulatory, Compliance and Corporate Services		
<b>Is this a Key Decision:</b>	N	<b>Included in Forward Plan:</b>	No
<b>Exempt / Confidential Report:</b>	N		

**Summary:**

To consider proposed changes to conduct of driver medicals.

**Recommendation(s):**

(1) To continue with the requirement for all driver medicals to be conducted by the drivers own GP or any other GP providing the doctor has access to the driver's medical records.

or

(2) To amend the requirement for all driver medicals to be conducted by the drivers own GP, any other GP or any GMC (General Medical Council) registered doctor who is licensed to practice in the UK providing the doctor has access to the driver's medical records.

**Reasons for the Recommendation(s):**

Since the Council introduced a full Group 2 medical as a requirement on 11 September 2017, drivers have continued to struggle to obtain an enhanced medical from certain GP practices. This report considers changing the requirement of a medical so that it can be obtained from any doctor who is registered and licensed by the GMC provided there is access to the driver's medical records.

**Alternative Options Considered and Rejected:** (including any Risk Implications)

None

**What will it cost and how will it be financed?**

**(A) Revenue Costs**

None

**(B) Capital Costs - none**

**Implications of the Proposals:**

<b>Resource Implications (Financial, IT, Staffing and Assets):</b>  The cost of the service is wholly recovered from the ring-fenced Taxi Licensing Trade Account (Revenue Budget BD12).
<b>Legal Implications:</b>
<b>Equality Implications:</b>  There are no equality implications.

**Contribution to the Council's Core Purpose:**

Protect the most vulnerable:
Facilitate confident and resilient communities:
Commission, broker and provide core services: Improvement to current conditions and removing burdens on business.
Place – leadership and influencer:
Drivers of change and reform:
Facilitate sustainable economic prosperity:
Greater income for social investment:
Cleaner Greener

**What consultations have taken place on the proposals and when?**

**(A) Internal Consultations**

The Head of Corporate Resources (FD.....) and Chief Legal and Democratic Officer (LD.....) have been consulted and any comments have been incorporated into the report.

**(B) External Consultations**

The proposals have been discussed with representatives of the taxi licensing trade who support the amendment.

**Implementation Date for the Decision**

Immediately following the Committee meeting

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**Appendices:**

There are no appendices to this report

**Background Papers:**

There are no background papers available for inspection.

## **1. Introduction/Background**

- 1.1 Members will recall the report on 11 September 2017 that introduced full Group 2 medicals for all licensed drivers and the subsequent report on 19 March 2018 that allowed drivers to obtain medicals from any registered GP. Current conditions therefore state that drivers may only obtain a medical from a doctor who is also registered as a general practitioner. DVLA guidelines state that Group 2 medical assessments can be carried out by any doctor who is GMC registered and licensed to practice in the United Kingdom (or registered within the EU).
- 1.2 Some GPs are reporting that they are unable to conduct Group 2 medicals or there are lengthy delays in obtaining appointments for GPs to carry out the medicals. The option to extend the medical assessment to any registered and licensed doctor should make it easier for drivers to obtain the Group 2 medical.

## **2. Current Condition**

- 2.1 The current condition concerning medicals states the following:

“Passing a full vocational (DVLA Group II) medical examination obtained via the applicant’s General Practitioner or a GP at another practice provided they have access to the applicant’s medical records at the time of the examination. Medicals are currently required on first licensing, on reaching 45 years of age, then 55 years of age and, on reaching 65 years of age, and every 3 years thereafter”.

- 2.2 If members adopt recommendation 2 then this condition would be amended by including “or any doctor GMC registered and licensed to practice in the United Kingdom”.
- 2.3 Drivers who wish to have a medical conducted by anyone other than their own GP would continue to obtain a copy of their medical records in order to assist any other doctor who may carry out the assessment.

## **3 Doctors**

- 3.1 Not all doctors are registered as GPs. Doctors who practise medicine in the UK need to hold a GMC licence to practise along with the suitable type of registration for the work that they do. It is the licence to practise which allows them to carry out certain activities such as prescribing medicines and treating patients and refer to themselves as doctors. Doctors need full registration with a licence to practise in order to work in an unsupervised medical practice in the NHS or UK private practice.
- 3.2 A doctor’s status on the medical register will show if they hold a licence or not. If a doctor does hold a licence to practise, they must take part in a process which shows the GMC that they are up to date and fit to practise medicine in the UK. DVLA

currently states that any doctor registered and licensed by the GMC may conduct Group 2 medicals.

#### **4 General Practitioners**

- 4.1 All GPs need to be registered and licensed with the GMC (as a doctor) but will also be on an additional 'GP register'. They will have carried out all the same training as a doctor but will have undertaken additional training in order to be eligible for the GP register.
- 4.2 GPs have overall responsibility for the management of patient care outside of hospitals, including the diagnosis and treatment of health problems and the referral of patients for specialist treatment where necessary. Rather than having a specific specialist area, GPs can diagnose many illnesses or ailments, and determine whether a patient needs to see a doctor with more specialist training. They are also increasingly responsible for the management and monitoring of complex chronic illnesses.
- 4.3 The current condition for a medical to be provided by a registered GP has been questioned by some trade members as disproportionate and above DVLA requirements.

#### **5 Conclusion**

- 5.1 There are many doctors who specialise in conducting driver medicals but who are not on the GP register. These doctors may be more familiar with the DVLA publication "Assessing fitness to drive – a guide for medical professionals" which is an extensive guide to medical conditions that affect driving. Sefton does not currently allow medicals from these doctors even if the doctor specialises in providing DVLA Group 2 medicals for other professions such as HGV & PSV drivers. Allowing drivers to access the services of these doctors may make obtaining the Group 2 assessment quicker, cheaper and easier for drivers.
- 5.2 The council currently checks the details of any doctor completing a medical against the GMC register and would continue to do so. If recommendation 2 is adopted, any medical from a doctor who is not currently registered and licensed with the GMC would be rejected.

#### **6 Recommendations**

- 6.1 Members can decide to continue with the existing condition (recommendation 1) or amend the existing condition concerning medicals to include any current registered and licensed GMC doctor (recommendation 2).

