# OHS instructions



## OHSI 4.4 Driver Fitness

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# 1. Purpose and Scope

To ensure that drivers of company vehicles and cranes are medically fit to drive and that statutory requirements are complied with. Applies to all driving activities that form part of the employers undertaking, regardless of the drivers' employment status.

## 2. Definitions

#### Vehicle

All Driver and Vehicle Licensing Agency (DVLA) categories of vehicle i.e. categories A to Q. Any rider operated lift truck.

#### Crane

Any crane having a safe working load of one tonne or more.

#### Driver

Any person operating or controlling a vehicle or crane as defined above, whether on or off company premises. Does not include drivers of company cars that have been provided for personal travel.

#### Occupational health nurse

Registered general nurse with a post-registration specialist qualification in occupational health nursing recognised by the statutory nursing bodies of the UK or:

Registered general nurse who has received specific training from and is under the supervision of an occupational health nurse or occupational physician.

#### Occupational health physician

Registered medical practitioner with diploma or higher qualification in occupational health (AFOM, MFOM, FFOM or specialist accreditation)

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# 3. Principles

Decisions regarding medical fitness to drive will be in accordance with the latest DVLA "At a Glance" guide.

The legal basis of fitness to drive lies in the 3rd EC Directive on driving licences (2006/126/EEC), which came into effect in the UK on 19 January 2013, the Road Traffic Act 1988, the Motor Vehicles (Driving Licences) Regulations 1999 (as amended). The "relevant disabilities" and "prospective disabilities" are set out in the Regulations – up to date guidance will be found in the latest "At a Glance" guide.

Driving of vehicles on company premises is covered by the Health and Safety at Work etc. Act 1974 and risk assessments should have been carried out under the Management of Health and Safety at Work Regulations 1999.

As a general principle the standard of medical fitness for drivers will be the same as for DVLA group 2 license holders – even where the group 1 standard would be legally acceptable (for example, light delivery vans). In certain cases the lower group 1 standard may be acceptable (appendix 1).

Individuals will be reminded of their duty to report to occupational health and DVLA any disability or illness which may result in them being a source of danger while driving.

With regard to driving on a public highway the decision on fitness to drive is that of the DVLA. If asked for an opinion on whether the employee is fit to drive or hold a driver's licence the correct response would be to say whether or not the medical standards can be satisfied.

# 4. Responsibilities

### 4.1. First line manager

Carry out risk assessments of driving activities and reduce risks so far as is reasonably practicable.

Ensure that drivers are referred to occupational health for medical assessment.

Ensure that drivers only operate vehicles and cranes if they have been declared medically fit to do so.

### 4.2. Driver

Attend for medical examination as instructed.

Advise occupational health and DVLA of any illness or disability, which may result in them being a source of danger while driving

Comply with any restrictions on driving during the course of their duties.

### 4.3. Occupational Health Nurse

Carry out assessments in accordance with appendix 1.

Advise driver and first line manager of outcome of assessment, any restrictions and the date of the next assessment.

Discuss with the occupational physician any cases where the fitness standard cannot be met or if there is doubt.

### 4.4. Occupational Health Physician

Provide advice to first line managers carrying out risk assessments.

Train and instruct occupational health nurse when necessary.

Advise occupational health nurse regarding any doubtful cases.

Carry out an additional examination and complete DVLA form D4 where drivers are applying to DVLA for a new or renewal Group 2 (vocational) drivers' licence.

## 5. Audit Criteria

Are all drivers referred for medical assessment?

Do medical assessments take place at the correct intervals?

Have drivers and first line managers been advised of the outcome of medical assessments?

Have medically unfit drivers been removed from or restricted in their driving duties?

### 6.References

- At a glance guide to the current medical standards of fitness to drive.
   Driver and Vehicle Licensing Agency.
   <a href="http://www.dft.gov.uk/dvla/medical/ataglance.aspx">http://www.dft.gov.uk/dvla/medical/ataglance.aspx</a>
- 2. Acts of Parliament and Statutory Instruments referred to in the text.
- 3. OHS forms:

DriveQ.doc

MedExRec.doc

Outcome.doc

# 7. Revision History

Author	Issue	Date	Reason for revision	Review by
David Shackleton	1	April 1999	First Issue	April 2001
David Shackleton	2	September 2001	Revised references	September 2003
David Shackleton	3	November 2011	DVLA changes	November 2013
David Shackleton	4	March 2014	DVLA changes	March 2017

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### Appendix 1. Medical Assessment of Drivers

#### 1. Criteria for inclusion

All drivers.

### 2. Frequency of assessment

Prior to commencement of driving and every two years. Whenever there is doubt about continuing fitness.

#### 3. Fitness Standard

Assessment	Standard
Questionnaire	No positive response <sup>1</sup>
Vision – acuity	Correctable to 6/7.5 best eye, 6/60 other. Maximum correction +8.0 dioptres. (Sphere added to cylinder in a plus prescription)
Vision – fields	Satisfactory binocular field of vision on confrontation or using a screener <sup>2</sup>
Vision – diplopia	No diplopia
Vision – contrast and glare	No reason to believe there is impairment of contrast sensitivity or intolerance to glare.
Hearing	Able to hear normal conversation, use a telephone and respond to commands in the workplace
Cardiovascular	Pulse regular 50 – 90 at rest Resting BP not consistently 180 mm Hg systolic or more and/or 100 mm Hg diastolic or more.
Mobility and co-ordination	No obvious impairment of neck movement, co-ordination or mobility that would prevent safe access to or control of vehicle/crane <sup>3</sup>
Urinalysis	No glycosuria or proteinuria

#### Notes:

- Any positive response should be discussed with the driver and may be disregarded if clearly unrelated to driving. Particular note should be taken of any declared medication and the likely side effects checked.
- 2 Must meet DVLA minimum visual field requirements with both eyes open (binocular). Testing of stereoscopic vision is not necessary in drivers who have satisfactory acuity, fields and no diplopia. Screening tests of stereoscopic vision can be unreliable. For drivers of lift trucks and cranes an appropriate practical test, included in driver training, is preferable.
- 3 Examining nurses and doctors should be aware of any additional fitness requirements in specific cases for example safe access to the driving position, working at heights, communicating effectively with colleagues and the ability to make observations in all directions.

#### 4. Drivers will be found fit if:

The above standard and, where relevant, any DVLA requirement can be met OR:

At the discretion of the occupational physician, having taken into account the risk assessment and any DVLA requirement and guidance.

#### Criteria for referral

Individuals who fail to meet the standard in 3 above or, where relevant, any DVLA requirement will be referred to the occupational physician.

The individual will be temporarily removed from driving duties if they are considered to be a source of danger while driving.

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