



SECTION A: INTRODUCTION

1. Apologies for Absence

Apologies were received from:

Mr Jonathan Clarke	Consultant Ophthalmologist
Professor Roger Anderson	Academic Optometrist
Mr Jonathan Durnian	Consultant Ophthalmologist
Mr Ian Pearce	Royal College of Ophthalmologists
Dr Sally Bell	Maritime and Coastguard Agency
Mrs Suzanne Richards	Drivers Service Management
Mrs Miriam Karp	Lay Member

2. CHAIR'S REMARKS

The Panel Chair welcomed attendees and advised of the meeting etiquette. The Chair advised panel members to ensure their Declaration of Interests were all up to date. Panel Chair discussed recruitment and tenures with DVLA.

3. ACTIONS FROM THE PREVIOUS MEETING/MATTERS ARISING

i. Paroxysmal Diplopia

Once internal DVLA Doctors' guidance has been reviewed and completed, Panel will look at revising the standards for diplopia. This action is currently ongoing.

ii. Bioptics

It was agreed at the previous meeting that an external speaker would be invited to provide a presentation on this topic.

iii. Matters Arising - Digital Eyesight Assessment

DVSA presented a proposed digital eyesight assessment solution at the previous meeting. Panel understands that this work continues.

SECTION B: TOPICS FOR DISCUSSION

4. COVID 19 Recovery DVLA

DVLA provided panel with an update on the current backlog situation at the Agency because of the pandemic. DVLA confirmed that they have implemented a number of changes to support their recovery including:

Important: These advisory notes represent the balanced judgment of the Secretary of State's Honorary Medical Advisory Panel as a whole. If they are quoted, they should be reproduced as such and not as the views of individual Panel members.



- 13 Month driving licence entitlement extension
- D4 Waiver Scheme
- Online consultations specific to Group 2 drivers with diabetes
- New accommodation
- Web-chat System to enable staff working from home to answer simple queries, reducing further calls to the contact centre
- Changes to GOV.UK to direct drivers to the online Fitness to Drive channel

DVLA explained that the focus is to reduce the current backlogs and the burden on NHS doctors. To do this DVLA has piloted a simplified renewal process for car and motorcycle drivers with epilepsy, Multiple Sclerosis and have more recently some mental health conditions. In addition to this, DVLA have also been working on:

- An electronic facility for secure email addresses to allow doctors to email medical questionnaires
- Extending the “Notify” function for drivers on receipt of a medical notification/renewal to let them know their application/notification has been received
- New modernised casework system
- Recruitment of 116 additional caseworkers to process medical cases

Panel thanked DVLA for the update, Panel discussed communication with the Medical Advisor, DVLA will provide update to panel.

5. Suitability of driving assessment vehicle

DVLA asked panel about the suitability of driving assessment vehicle for drivers who hold both car and motorcycle entitlement and whether it would be reasonable to make drivers undertake the assessment in a car if the driver has only ever held a motorcycle licence.

Panel advised DVLA to continue with the current process and should a choice of vehicles be available then the assessment should be undertaken in a car rather than on a motorcycle. Panel would like to revisit the topic in one year and asked DVLA to collate data on exceptional cases requests received for motorcycle licensing.

6. Can segmental/sectoral retinitis pigmentosa be considered as non-progressive

The Panel have previously advised that retinitis pigmentosa is a progressive condition that excludes a driver from being considered under the exceptional criteria for those who are unable to meet the visual field standards.

DVLA asked panel if segmental/sectoral retinitis pigmentosa is an eye condition that is always non-progressive. Panel discussed the possibilities of stipulating a period of time over which evidence of non-progression would need to be provided. DVLA agreed to explore the

Important: These advisory notes represent the balanced judgment of the Secretary of State's Honorary Medical Advisory Panel as a whole. If they are quoted, they should be reproduced as such and not as the views of individual Panel members.



operational aspects that such work was entail and determine its feasibility. The matter will then be brought to a future meeting for further discussion.

7. Goldmann/Visual field charts

The DVLA carried out an internal audit in 2021 to establish confidence levels in the interpretation of Goldmann visual field charts. This audit identified the requirement to make available both indications for requesting Goldmann perimetry and also specific guidance for interpreting the resultant charts.

Dr Cathy Armstrong provided panel with a presentation.

Panel advised that Goldmann perimetry was initially introduced into DVLA casework with the intention of replicating the automated test. Panel advised that its principal indication was for use in those individuals who cannot undertake the automated test. Panel also advised that visual field charts produced using Goldmann perimetry should be interpreted in the same way as automated charts.

8. Retinitis pigmentosa and appropriate field charts

A further discussion regarding the use of Goldmann perimetry followed discussion of a case whereby Goldmann perimetry had identified a debarring superior visual field defect which had not been apparent on initial Esterman charts.

Panel reiterated their previous advice that licensing decisions should be based upon the chart most favourable to the customer, and that should an Esterman chart meet the appropriate licensing standard then there was no requirement to further investigate with Goldmann perimetry.

SECTION C: ONGOING AGENDA ITEMS

9. Tests, horizon scanning, research and literature

DVLA reminded all panel members as part of the terms and conditions of the requirement to update panel about any information/tests/research that could impact on standards or existing processes.

10. AOB

Panel discussed the legislative change that would be allowed to amend the visual standards for fitness to drive with regard to both visual field and visual acuity. It was noted that the evidence base to support any such change would be a pre-requisite prior to any further work being undertaken.

Important: These advisory notes represent the balanced judgment of the Secretary of State's Honorary Medical Advisory Panel as a whole. If they are quoted, they should be reproduced as such and not as the views of individual Panel members.



11. Date and time of next meeting

Thursday 31st March.

Original draft minutes prepared by:

Siân Taylor

Note Taker

Date: 21st October 2021

Final minutes signed off by:

Mr William Newman

Panel Chair

Date: 9th December 2021

THE DVLA WILL CONSIDER THE ADVICE PROVIDED BY THE PANEL AND NO CHANGES TO STANDARDS WILL TAKE EFFECT UNTIL THE IMPACT ON INDIVIDUALS AND ROAD SAFETY IS FULLY ASSESSED.

Important: These advisory notes represent the balanced judgment of the Secretary of State's Honorary Medical Advisory Panel as a whole. If they are quoted, they should be reproduced as such and not as the views of individual Panel members.