

**MINUTES OF THE MEETING OF
THE SECRETARY OF STATE FOR TRANSPORT'S HONORARY
MEDICAL ADVISORY PANEL ON DRIVING AND PSYCHIATRIC DISORDERS**

Present:

Professor D Cunningham Owens Chair

Professor S Banerjee

Lay Members:

Dr T Beanland

Ex-officio:

Dr P Fearon National Programme Office for Traffic Medicine, Dublin

Dr S Bell Chief Medical Officer, Maritime and Coastguard Agency

Dr A White Panel Secretary, DVLA

Dr M Dani Medical Adviser, DVLA

Dr S Williams Medical Adviser, DVLA

Dr S Powar Medical Adviser, DVLA

Mrs Sian Taylor Communication and Engagement Representative DVLA

1. Apologies for absence

Apologies were received from Dr P Connelly, Mr B Alexander, Dr T Jagathesan, Dr C Graham.

Sincere apologies were made to the Panel by Dr White on behalf of DVLA regarding the lack of representation from the business and managerial departments of the Agency.

2. Minutes of the last meeting held 21 March 2016

The minutes were accepted as a true record of the meeting and duly signed by the chairman.

3. Matters arising from the minutes

Corrections were requested to the first paragraph of section 4 – this should read “where there has been a psychotic *including* manic illness” and the fourth paragraph – this should read “the 1 year observation period would give a broad feel for *this* condition and engagement with treatment.”

A further clarification was requested in the third paragraph of section 6 – this was that the progression rate of people with MCI to dementia was approximately 10% p.a.

The matter of a potential joint meeting between representatives of the Neurology and Psychiatry was discussed. This is still regarded as a desirable objective to determine clarity of roles and to avoid a duplication of previous work and potential pitfalls.

A formal update on the various reviews around Panel roles and proposed changes was requested at the next meeting; it was not possible to provide any information to Panel at this meeting.

4. Assessing Fitness to Drive

A discussion took place about the new document Assessing Fitness to Drive (AFTD) which replaced the previous AAG in March 2016. Recommendations were made to modify the advice regarding driving where there was Mild Cognitive impairment (MCI) possibly affecting the ability to drive. This should be altered from must to may across both Group 1 and Group 2 entitlements.

The advice in chapter 8 – Miscellaneous Conditions around Cognitive Decline should be modified to remove references to decline and focus on the impairment that results from strokes or head injuries. The advice should also mirror the ‘may drive’ and ‘must notify’ advice in other related areas.

5. Cognitive Impairment and dementia guidelines

A brief update on the progress of the Newcastle Group was presented to the Panel. This is still undergoing evaluation and processing of the information. Publication is unlikely before the New Year.

6. Future Direction of Panel.

A brief discussion over the future direction of the Panel took place. There was an informal discussion around a potential re-merger with the Alcohol and Drugs Panel; it was pointed out that there was a cross over in clientele and the psychiatrists would bring a different viewpoint to this field. Concerns were expressed that there would be a swamping of any Psychiatry agenda with those of Alcohol and Drugs. A statement of support for the Panel’s role from the Head of Driver’s Medical was presented.

The Panel was informed that a decrease in the number of cases brought for discussion was as a result of increasing expertise and familiarity with the management of complex cases within DVLA. Concerns were expressed around succession planning and whether this may result in increased referrals in the future.

Important: These advisory notes represent the balanced judgement 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.

7. Recruitment Update

A brief update was given to Panel on recruitment unfortunately substantive information was unable to be given to the members.

8. Case Discussions.

The Panel discussed a case in particular and the issue of 'road rage' in general. Regarding the latter, the previous deliberations of panel were re-emphasised, that is that unless there is a formal underlying psychiatric diagnosis episodes of 'road rage' or anger management issues should remain the responsibility of the Police and criminal justice system and should not be medicalised.

The case presented for discussion involved an applicant for a provisional car licence with a substantial forensic history. There had been a revision of the underlying diagnosis from a schizophreniform illness to that of personality disorder.

Once again the issue of the maintenance of engagement with treatment was emphasised. The possibility of asking a driver to re-sit a driving test was discussed, in this case this was not applicable due to the statutory requirement to pass a test was mandatory anyway, the application being only for a Provisional licence for a novice driver.

The recommendation was that an up to date report be obtained from the responsible consultant and that this be reviewed by one of the Panel members.

Clarification was given around the implications of the MAPPA procedure.

9. Research Update

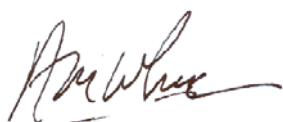
There was no research update.

10. Any other business

There was no further business to discuss.

11. Date for next meeting

Provisionally 27 March 2017.

A handwritten signature in black ink, appearing to read 'A M White', with a horizontal line underneath.

Dr A M White MB BCH

Panel Secretary

18 October 2016