



MINUTES OF THE SECRETARY OF STATE FOR TRANSPORT'S HONORARY MEDICAL ADVISORY PANEL ON DRIVING AND DIABETES MELLITUS

Meeting held on Tuesday 23rd March 2021 10:00am

Present:

Panel Members:

Dr Mark Evans (Chair)
Professor Michael Feher
Dr Daniel Flannagan
Dr David J C Flower
Professor Pratik Choudhary
Dr Peter Rogers (Lay member)
Mr William Wright (Lay member)

OBSERVERS:

Dr Ewan Hutchinson	Civil Aviation Authority
Dr Clive Beattie	Occupational Health Service, Northern Ireland
Dr Graham Roberts	National Programme Office for Traffic Medicine, Ireland
Mr Ahmer Azim	Department for Transport

EX-OFFICIO:

Dr Nick Jenkins	Senior Doctor
Dr Sophie Carter-Ingram	DVLA Doctor
Dr Emma Williams	DVLA Doctor
Mr Jason Donovan	Head of Driver Licensing Policy
Miss Keya Nicholas	Driver Licensing Policy Lead
Mrs Helen Harris	Driver Licensing Policy
Mrs Julie Bartlett	Driver Licensing Policy
Mrs Suzanne Richards	Drivers Service Management
Mr Iain McTaggart	Drivers Service Management
Mr David Evans	Senior Operational Lead, Drivers Medical
Ms Natalie S Morgan	Product Owner, Service Management
Mrs Sharon Abbott	Operational Delivery & Support, Drivers Medical
Mr David George	Operational Delivery & Support, Drivers Medical
Mrs Sian Taylor	DVLA Panel Co-Ordinator & Panel Note Taker
Miss Kirsty-Leigh Van Staden	DVLA Panel Coordinator Support
Miss Katy Richards	DVLA Panel Coordinator Support
Mrs Jemma Avo	DVLA Panel Coordinator Support

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SECTION A: INTRODUCTION

1. Apologies for Absence

Dr Sally Bell
Dr Colin Graham

2. CHAIR'S REMARKS

The panel Chair welcomed everyone and reminded attendees of the meeting etiquette. The panel chair prompted attendees to update their declarations of interest.

3. ACTIONS FROM PREVIOUS MEETING

a) **Hypoglycaemia due to other causes**

The standard for severe hypoglycaemia due to causes other than insulin treatment, has been updated in the Assessing Fitness to Drive (AFTD) guidance, with the wording changed to reflect the advice provided by panel. Dr Jenkins advised of the wording of the standard however, confirmed that it requires further amendments. DVLA will be giving further consideration to the wording.

b) **Provoked seizures:**

DVLA advised that the standard for provoked seizures is currently being made operational. This action is now complete.

c) **Electronic vs. physiological hypoglycaemic awareness:**

This is topic was discussed as agenda item number 7.

SECTION B: TOPICS FOR DISCUSSION

4. Gliptins

DVLA asked that panel clarify the medical standards to be applied to Gliptin medication.

Currently the advice describes two groups of medication for diabetes treated by medication other than insulin:

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- Those medications carrying a risk of causing hypoglycaemia (including sulphonylureas and glinides)
- All other medication

Panel advised that gliptins should be considered within the group of medication that does not carry a risk of causing hypoglycaemia.

5. Group 2 diabetes application process

DVLA provided an update from the pilot study which involved the consideration of Group 2 applications by remote consultation. Panel thanked DVLA for the presentation and requested that if the pilot was to be considered as business as usual, that the referral of appointments be spread more evenly across the network of independent assessors who were able to conduct remote examinations.

DVLA provided panel with an update on the Group 2 application process, confirming that there is a legislative requirement for a Group 2 driver to “attend a medical examination by a hospital consultant specialising in diabetes”, before they can be licensed. This is prescribed in Regulation 73 6(C) of the Motor Vehicles (Driving Licences) Regulations 1999.

It was noted however, that not all individuals with insulin-treated diabetes will be under the direct care of a hospital consultant specialising in diabetes, and therefore to comply with legislation, the Secretary of State for Transport’s Honorary Medical Advisory Panel for Diabetes Mellitus and Driving previously advocated a three-stage process of assessment for Group 2 drivers with insulin-treated diabetes.

The Association of British Clinical Diabetologists (ABCD), who strongly recommended that drivers should be examined by an independent consultant diabetologist, supported this process.

The three-stage medical assessment consists of:

- Stage 1 - a self-declared medical questionnaire from the driver
- Stage 2 - a report from the drivers own doctor or consultant
- Stage 3 - a referral to an independent consultant diabetologist for an examination

Panel were asked to consider if all three stages were still necessary and whether they still considered it appropriate for applicants to provide three months of blood glucose readings in order to evidence their diabetes control. Panel discussed the previous advice provided and were supportive of the process being reduced to 2 stages. Panel emphasised that one of these stages must include an examination and report from a hospital-based consultant specialising in diabetes.

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Panel also agreed that an 8-week period of blood glucose readings, provided by the driver at the time of the examination, was considered to evidence sufficient diabetic control.

6. Customer Relationship Management System

DVLA delivered a presentation with regard to the proposed technological changes to DVLA's administration of the medical licensing process for applicants who have diabetes.

Panel thanked the Customer Relationship Management (CRM) team for the presentation. Panel were supportive of the proposal. The CRM team confirmed that a paper-based process would continue for those applicants who were unable to either access or use the technology required by the CRM process.

7. Hypoglycaemic Awareness

a) Physiological vs electronic hypoglycaemic unawareness with or without automated insulin delivery.

The current standard requires the applicant or licence holder to have physiological awareness of hypoglycaemia. Panel discussed whether the standard should be amended so as to allow for the awareness of impending hypoglycaemia to be provided by electronic means.

Panel were supportive of this proposal being explored further. Panel noted that the proposal would be confined to the use of electronic devices dedicated to the management of diabetes.

Data will be collated for presentation at the next panel meeting

b) Defining unawareness with flash/CGM.

With increasing numbers of people using devices such as Libre to measure (interstitial) glucose, panel discussed what advice should be provided to assessors who find apparently unrecognised episodes of biochemical hypoglycaemia within sets of glucose readings. Panel agreed to discuss this issue further in a future meeting.

Panel were informed of a number of queries DVLA have responded to with regards to the use of continuous glucose monitoring systems (CGMS) for Group 2 drivers. Currently the law requires that bus and lorry drivers must finger prick test twice daily to check their blood glucose levels. The law was changed in 2018 to allow drivers of cars and motorcycles to use CGMS to monitor their glucose levels. DVLA asked panel if they considered there was enough evidence to support a legislative change for lorry and bus drivers, as some already use these systems in conjunction with blood glucose monitoring purely to ensure they meet the conditions required for driver licensing purposes. Panel agreed that the evidence that these systems are a safe way to test glucose levels is already there.

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They provide a more accurate account throughout the day, not just at times relevant to driving, and are able to alert an individual instantly if their glucose levels increase or reduce. Panel were supportive of a legislative change to allow for Group 2 drivers to use CGMS.

SECTION C: ONGOING AGENDA ITEMS

8. 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.

Panel discussed autonomous vehicles. Legislation changes to glucose monitoring,

9. AOB

The impending panel recruitment process was discussed.

10. Date and time of next meeting

Tuesday 12th October 2021

Original draft minutes prepared by:

**Sian Taylor
Note Taker
Date: 25th March 2021**

Final minutes signed off by:

**Dr M Evans
Panel Chair
Date: 21st April 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.

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