



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

Meeting held on Tuesday 15th October 2024

Present:

Panel Members:

Dr Claire Howard Chair	Stroke Specialist Research Orthoptist
Professor Roger Anderson	Academic Optometrist
Mrs Catherine Butcher	Specialist Orthoptist
Mr Ian Rodrigues	Consultant Ophthalmologist
Dr Lucille Southee	Lay Member
Ms Miriam Karp	Lay Member

OBSERVERS:

Professor Ian Pearce	Royal College of Ophthalmologists
Clare Forshaw	Principal Strategy Implementation Manager RSSB
Dr Sue Stannard	Chief Medical Advisor, Maritime and Coastguard Agency

EX-OFFICIO:

Dr Nick Jenkins	Senior DVLA Doctor
Dr Amanda Edgeworth	DVLA Doctor
Dr Sarah Brown	DVLA Doctor
Dr Catherine Perry	DVLA Doctor
Gary Baker	DVSA
Amanda Lane	DVSA
Rachael Toft	Head of Driver Licencing Policy
Leigh Andrew Bromfield	Driver Licensing Policy Lead
Emma Lewis	Driver Licensing Policy
Michael Jones	Driver Licensing Policy
Claire Hughes	Driver Licensing Policy
Karen Hughes	Driver Licensing Policy
Danielle Theophilus	DVLA Service Management
Richard Davies	DVLA Service Management
Andrew Turner	Drivers Medical Contracts Team
Mandy Hodgson	DVLA Commercial Category Lead
Shareen Gelstharp	DVLA Commercial Specialist
Adam Cattroll	DVLA Commercial Specialist
Katy Adams	DVLA Panel Coordinator
Emma Nelson-Jones	DVLA Doctors Casework Management and Support
Siân Taylor	DVLA Panel Coordinator & PA to the Senior DVLA Doctor

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SECTION A: INTRODUCTION

1. **Apologies for Absence**

Apologies were received from:

Dr Lauren Hepworth

Tom Mogford

Post-doctoral Research Orthoptist

Senior Lead, Drivers Medical Business Support and Change

2. **CHAIR'S REMARKS**

The Panel Chair welcomed attendees and advised this was the first occasion that they had chaired a meeting of the Vision Panel. The Chair advised panel members to ensure their declaration of interests were all up to date.

3. **ACTIONS FROM THE PREVIOUS MEETING/MATTERS ARISING**

i. **Visual Field Assessments (Diagonal/Width interpretation)**

In the Autumn 2023 panel meeting panel had discussed the interpretation of the width of the visual field. Panel advised that on 124-point Henson testing when the peripheral four spots were not seen, but there was no other significant defect crossing the horizontal line, DVLA can assume that the customer had the 80 degrees horizontal extension required during Group 2 testing.

The Senior Doctor clarified that this advice relates only to Henson 124-point charts where the peripheral spots lie at 81 degrees from fixation; in Humphrey 124-point charts the peripheral spots lie at 80 degrees and therefore, should both spots be unseen on one side, the customer will not have demonstrated an 80-degree extension.

ii. **Exceptional Case Process**

The Senior DVLA Doctor advised that DVLA will action the proposed amendment of DVLA documentation as discussed in Autumn 2023 as part of a wider piece of work.

iii. **Alternatives to Goldmann testing**

Panel had previously discussed the problems experienced by DVLA in accessing Goldmann perimetry. Panel had advised that the Octopus 900 would be a suitable alternative on those occasions when DVLA would normally commission a Goldmann chart.

When panel queried why a kinetic test (Goldmann) was requested as an alternative when static testing (Esterman) was unsuccessful the Senior Doctor advised that the practice was

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based on previous panel advice. The possibility of a customer being referred to a secondary care centre for Esterman testing should the current provider be unable to obtain reliable (with acceptable false positive rates) charts was raised.

The Panel Chair considers that steps can be taken to reduce the numbers of unreliable Esterman tests (those with high false positive rates). To this end:

- The Panel Chair is drafting instructions to be provided to customers prior to testing
- DVLA will review the information that they require the provider to furnish to customers prior to testing
- DVLA will review its advice provided to customers
- In addition, the panel chair is drafting instructions to the vision testing supplier, to provide more robust information prior to the visual field test.

DVLA and the Panel Chair will continue to work towards identifying potential providers of Octopus 900 tests.

iv. Diplopia

The Panel Chair intends to establish a working group to review diplopia guidance.

SECTION B: TOPICS FOR DISCUSSION

4. DVSA – Eyesight Check during the driving test

DVSA provided a presentation on plans for DVSA eyesight test proposals/legislative amendments.

When applying for a provisional driving licence the application form has a question which asks whether an individual can read a vehicle number plate from a distance of at least 20 metres (with glasses or contact lenses, if necessary).

An eyesight check is conducted at the start of the driving test, prior to the candidate and Driving Examiner entering the vehicle in which is test is to be taken.

The Law (Schedule 8 of the Motor Vehicles (Driving Licences) Regulations 1999) states that a candidate must be able to read, in good daylight conditions, a registration plate on a vehicle at a distance of at least 20 metres, with the help of glasses or contact lenses if needed.

Due to the high demands for driving tests the Driver and Vehicle Standards Agency (DVSA) ran a consultation between 25 January and 8 March 2022 seeking views on changing some of

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the policies that affect learning to drive and driving tests, including the eyesight check. The consultation outcome was published on 30 March 2023

- 20,960 responses to the consultation were received
- 41.9% agreed with removing the need for the eyesight check to be done only in good daylight. 31.8% disagreed with the proposal. (20,913 respondents answered this question)
- 58.3% agreed with DVSA having the flexibility to do the eyesight check by other means. 18.1% disagreed with the proposal. (20,908 respondents answered this question).

The department is considering options around the number plate test, including the requirement for the test to be held in good daylight as is currently specified in law.

The aim of any potential changes is to provide more flexibility about when the driving test is conducted and in different levels of light.

DVSA advised they are still in the early stages of this work and would like the support of panel for the new proposals.

Panel advised they are willing to work with DVSA on this eyesight proposals/legislative change.

5. Glaucoma

Following review, the Senior Doctor has requested that DVLA should not issue full licences in Glaucoma cases, under the age of 70, where there was an initial clear visual field on binocular test. Operating Instructions have been amended to rectify this situation.

Panel supported the process for customers under 70, whereby a visual field test meeting Group standards (and thus a clear visual field) should attract a 5-year licence. A visual field test is required in cases of glaucoma every 3 years after the age of 70.

Customers who were issued a full-term licence prior 2019 will be contacted by DVLA to advise that a current visual field test will be required for ongoing licensing.

6. Visual Neglect

The DVLA Senior Doctor advised that the Neurology Panel had recently discussed the medical standard for visual neglect resides in the chapter on neurological disorders and the Neurology Panel had proposed amendments to both the nomenclature and to the standard.

The Panel Chair considered that a joint meeting with members of the Neurology Panel would likely be the best approach to consider the guidance further. Due to the many different

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terminologies for visual inattention that there would be merit in a group discussion between members of the two panels.

DVLA advised that they will provide feedback on the discussion to the Neurology panel in their forthcoming meeting with a view to arranging a joint panel subgroup meeting.

7. Research

Panel members were pointed towards two guidance papers that are of interest and for future reference.

The Chair updated the panel on a research proposal submitted by Dr Lauren Hepworth and Dr Claire Howard for a policy support fund at University of Liverpool. Research proposed has the main aim to explore current knowledge and practices regarding the DVLA/DVA vision driving standard guidelines amongst health care professionals. This will take part in the form of a survey as well as collecting anonymised data from driving assessment centres to look at referral trends.

The Chair and Dr Hepworth will keep the panel updated on funding outcomes and progress as relevant.

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.

9. AOB

Sectoral Retinitis Pigmentosa

The Senior DVLA Doctor reminded Panel that Panel had previously advised that retinitis.

pigmentosa is a progressive condition and this excludes individuals whose Group 1 licences have been revoked based on a debarring binocular visual field defect from applying to regain their driving entitlement as exceptional vision cases. One of the requirements for consideration as an exceptional vision case is that “there must be no other condition or pathology regarded as progressive and likely to be affecting the visual fields”.

Customer challenge to this position is not uncommon in certain cases of Sectoral Retinitis Pigmentosa should the individual’s visual field defect appears not to have shown progression. The Panel Chair reminded DVLA that the requirements stipulate that the underlying medical

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condition must be stable, and that stability of a resultant visual field defect does not necessarily imply stability of the underlying medical condition.

To facilitate the return to driving of customers in this position DVLA considered that it might be helpful were Panel able to identify a subgroup of individuals with Sectoral Retinitis Pigmentosa whose underlying condition would never progress and / or any research / studies that might assist such customers.

Panel advised that retinitis pigmentosa is a progressive condition and that panel members are unaware of any new medical evidence that might enable individuals who are in this situation to be relicensed.

Panel requested they be kept updated by DVLA about individuals with retinitis pigmentosa requesting consideration for relicensing as exceptional cases.

Panel Recruitment

Driver Licensing Policy advised panel that a campaign which ran for 10 weeks finished at the end of September. It was a large campaign looking for expert members in medical retina Macular degeneration, Ophthalmologists and Optometrists. The campaign was also looking to appoint several new lay members across numerous panels.

Interviews will be conducted in November.

Policy asked panel members if there were any target areas to advertise in and would panel wish to propose any further expertise/requirements for future recruitment.

Panel advised that a requirement to increase the panels skills matrix and review gaps for next recruitment drive.

10. Date and time of next meeting

Tuesday 11th March 2025

Original draft minutes prepared by:

Siân Taylor
Note Taker
Date: 16/10/24

Final minutes signed off by:

Dr Claire Howard
Panel Chair
Date: 16/12/24

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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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