



**MINUTES OF THE SECRETARY OF STATE FOR TRANSPORT'S
HONORARY MEDICAL ADVISORY PANEL ON ALCOHOL, DRUGS AND
SUBSTANCE MISUSE AND DRIVING
Meeting held on Wednesday 19th March 2025**

Present:

Panel Members:

Dr David Fox (Chair)	Consultant Occupational Physician
Dr Stephen Morley	Consultant in Chemical Pathology
Dr Edward Day	Consultant in Addiction Psychiatry
Dr Robert Searle	Consultant in Anaesthesia and Pain Medicine
Miss Sarah Oldham	Lay Member

OBSERVERS:

Professor Denis Cusack	Medical Bureau of Road Safety, Forensic Medicine, Ireland
Dr Ewan Hutchinson	Civil Aviation Authority
Clare Forshaw	Principal Strategy Implementation Manager RSSB

EX-OFFICIO:

Dr Nick Jenkins	Senior DVLA Doctor
Dr Amanda Edgeworth	Deputy Senior DVLA Doctor
Leigh Andrew Bromfield	Driver Licensing Policy Lead
Carly Murray	Driver Licensing Policy
Julie Bartlett	Driver Licensing Policy
Emma Lewis	Driver Licensing Policy
Dewi Richards	Driver Licensing Policy
Danielle Theophilus	Service Management
Suzanne Richards	Service Management
Tom Mogford	Senior Lead, Drivers Medical Business Support and Change
Mandy Hodgson	Commercial Category Lead
Shareen Gelstharp	Commercial Specialist
Adam Cattroll	Commercial Specialist
Andrew Turner	Drivers Medical Contracts Team
David Snelling	Policy Team Leader, Road Policing Team, DFT
Emma Nelson-Jones	Doctors Casework Management and Support Lead
Jonathan Reed	Doctors Casework Management and Support
Siân Taylor	DVLA Panel Coordinator/PA to Senior DVLA Doctor

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SECTION A: INTRODUCTION

1. Apologies for Absence

Apologies were received from,

Dr Bhagat Sharma

Mr James Nutt

Dr Richard Aspinall

Dr Sue Stannard

Consultant Addiction Psychiatrist

Laboratory Operations Manager

Consultant Hepatologist

Chief Medical Advisor, Maritime and Coastguard Agency

2. CHAIR'S REMARKS

The Chair welcomed panel members and thanked them for their continued help and support they provide to the panel. The Chair emphasised the significance of the Assessing Fitness to Drive (AFTD) guidelines, highlighting their impact on occupational health and driving safety.

3. Actions of the previous meeting

i. Alcohol-use disorder update

Dr Edgeworth presented the results of internal audits on processing of alcohol use disorders cases. These audits were conducted to review the introduction of the new alcohol standards and confirmed the expected significant reduction in Carbohydrate-deficient transferrin (CDT) requests.

The results demonstrated a high level of compliance and accuracy in handling alcohol use disorder cases. Data provided also confirmed licensing decisions were being made more efficiently, with the time customers were waiting for a licensing decision having reduced since the introduction of the new standards. Dr Edgeworth reported a significant drop in complaints and appeals related to alcohol use disorders, indicating that the changes made have been effective in addressing previous issues.

Panel thanked Dr Edgeworth for the presentation and discussed the findings, panel advised that these changes should be kept under review.

ii. High Risk Offenders (HRO) Process

Dr Edgeworth provided panel with an overview of the HRO process used by DVLA. From 2012 to 2019 HRO applicants with a CDT of 2.3% to 2.9% were individually assessed by DVLA doctors. This approach was challenging operationally for DVLA and led to inconsistency in licensing decisions. Following an internal audit and changes to the

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information sent to applicants, since 2019, the majority of HRO applicants with a CDT of 2.3% or above have had their licence application refused. This is effectively when DVLA adopted a pass/fail approach to CDT testing in HRO applications.

After the introduction of the new alcohol standards the HRO process has been reviewed by DVLA. This led to scrutiny of the use of CDT testing in the process. The use of a pass/fail approach to CDT testing in HRO applicants has not been documented as being discussed by panel in the minutes. Panel have recently discussed the use of CDT in alcohol use disorders and confirmed a CDT of 2.3% is not consistent with controlled drinking.

As part of the review of the HRO process Dr Edgeworth mentioned legal advice was sought, and it was determined that a diagnosis of a relevant medical condition could not be made solely based on a raised CDT level. The legal advice did confirm DVLA can continue to require CDT testing in HRO applicants and refuse those applications if the CDT is raised.

Dr Edgeworth sought the panel's input on whether the CDT level of 2.3% is appropriate for determining controlled drinking in high-risk offenders, leading to a discussion on the matter.

Panel discussed and advised a CDT of 2.3% is used both nationally and internationally to identify individuals with uncontrolled drinking and is the correct level for DVLA to use in the HRO process. Panel endorsed DVLA's approach to HRO applicants agreeing confirmation of controlled drinking with CDT testing was fair and proportionate.

SECTION B: TOPICS FOR DISCUSSION

4. Department of Transport Update

The Department for Transport advised.

This Government takes road safety seriously, and we are committed to reducing the numbers of those killed and injured on our roads. DfT is developing our road safety strategy and will set out more details in due course.

DfT is currently considering policy options in this area. That is why the Government is listening closely to the concerns of those affected by tragic cases of death or serious injury on our roads. This helps shape Government thinking and policy going forward.

Recent media interviews conducted by the Secretary of State for Transport have emphasised both her personal and her Departmental commitment to tackling drink and drug driving offenders.

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5. Medicinal Cannabis/Recreational Cannabis

Dr Searle provided a brief update on medical cannabis use including prescribing practises, formulations in common use, routes of administration and likely future developments. Dr Searle advised that a number of products are available, both licensed and unlicensed, and made reference to the differing quantities of constituent active products.

Panel thanked Dr Searle for the presentation and insights provided.

6. Hepatic encephalopathy

The Senior DVLA Doctor presented the work undertaken by Dr R Aspinall (Panel Member) and the subgroup of clinical experts in proposing medical standards for fitness to drive in relation to the various presentations of hepatic encephalopathy and the post-liver transplant situation.

The proposed standards acknowledge the time required for cognitive recovery and, also the clinical difficulties experienced in assessing the possible impacts of impaired cognition of driving. The proposed standard also references related relevant conditions, such as excessive daytime sleepiness and require the individual's compliance with clinical advice in order to minimise the risk of future recurrence.

The Panel Chair thanked Dr Aspinall and the subgroup for the work undertaken. Panel discussed and were happy for the changes to be put into practice.

7. Update from other panels

Panel's attention was directed to the minutes of the Autumn 2024 meetings and the agendas of the Spring 2025 meetings of all advisory panels.

8. Drug misuse or dependence

The Senior DVLA Doctor presented the background to the ongoing panel discussions in relation to persistent drug misuse and/or dependence, referencing the relevant panel minutes since 2002. In particular, the Senior Doctor highlighted the discussions surrounding the definition of persistent drug misuse and presented DVLA's current internal practice when undertaking drug-related medical enquiries.

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Panel were asked to consider:

- Whether the currently used definition of persistent drug misuse is appropriate
- Whether the current medical standard for persistent drug misuse and/or dependence is appropriate
- Whether panel consider DVLA's current processes when undertaking drug-related medical enquiries are appropriate.

Panel advised that a subgroup should be convened to review the current situation and provide advice to DVLA on these matters.

SECTION C: ONGOING AGENDA ITEMS

9. Appeals Data

DVLA provided an update on appeals figures from January 2024 to December 2024.

Drivers Medical received a total of 303 summon on complaint appeals, of which 174 were alcohol or drug related.

- Alcohol Cases 138
- Drugs Cases 36
- Cases upheld 0

Panel thanked DVLA for the update.

10. Tests, Horizon Scanning, Research and Literature

DVLA reminded all panel members as part of the Terms and Conditions and of their obligation to update panel about any information/tests/research that could impact on standards or existing processes.

Panel discussed future research on the effects of cannabis on driving, including a study on the impact of stress on THC levels.

11. AOB

Driver licensing policy provided an update on the recruitment the recruitment process for new lay members, mentioning that one recommendation has been made to the Minister and they are looking for a second lay member.

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Policy asked the panel for suggestions on specific areas of expertise to target in the next round of recruitment, to ensure the panel has a diverse and comprehensive range of skills and knowledge.

12. Time and Date of next meeting

Wednesday 22nd October 2025

Original draft minutes prepared by:

**Sian Taylor
Note Taker
Date: 20/03/25**

Final minutes signed off by:

**Dr David Fox
Panel Chair
Date: 03/04/25**

**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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