

## MEDICAL REPORT – NOTES

### APPLICATION FOR HACKNEY CARRIAGE OR PRIVATE HIRE DRIVER'S LICENCE



#### **(Please hand these notes and examination form to your Doctor)**

All Private hire and hackney carriage drivers are required to produce a medical form on their first application. Once you have become a licensed driver, you must have a medical every 5 years until you are 65. A driver over 65 must have a medical every year.

If you go to your own doctor they must complete the full medical report and send this to us within **five days**.

You can also go to a doctor who you are not registered with. If you choose to do this there are 2 forms that need to be completed. You will firstly need to complete a **medical screening questionnaire** and get a doctor from **your** surgery to certify if the statements on the form are true or false. You can then go to any doctor to have the full medical examination. The doctor performing the full examination will complete this form. The full medical report must be sent to us within **five days of completion**.

**It is the responsibility of the licence holder, to ensure the medical report is received by the licensing authority. We suggest you hand deliver the document to Eastleigh House.**

If you have had a medical confirming group 2 standard from another authority dated within 28 days of the examination taking place the Licensing Team may be able to accept this. Any medicals older than 28 days will not be accepted. Please contact the Licensing Team who will be able to assist you further.

#### **A What you have to do**

1. Before arranging for this medical report to be completed please read the notes at section C, paragraphs 1,2,3,4 and 5 (Group 2 Medical Standards). If you have any of these conditions you may not be granted a licence.
2. If, after reading the notes, you have any doubts about your ability to meet the medical standards of Group 2 as set out on DVLA web site (see note B2 below for web site), consult your Doctor and/or Optician **before** you arrange for this medical report to be completed. In the event of your application being refused, the fee you pay your Doctor is not refundable, Eastleigh Borough Council has no responsibility for the fee payable to your Doctor.
3. The notes below ("Medical Standards for Hackney Carriage and Private Hire Drivers") may help you.
4. In future, if you develop symptoms of a condition that could affect safe driving (see the notes at section C below), you must inform the Council's Licensing Team immediately.

#### **B What the Doctor performing the full medical examination has to do**

1. Please arrange for your patient to be seen and for a full examination to be undertaken.
2. Please complete **pages 1 to 8 inclusive and all of section 9** on page 8 of this report, having regard to the most recent BMA "Notes for Guidance" for Doctors conducting these examinations. The most recent edition of the Driver & Vehicle Licensing Agency's publication "At a Glance Guide to the Current Medical Standards of Fitness to Drive" (available on the DVLA's website at: [http://www.dvla.gov.uk/at\\_a\\_glance/content.htm](http://www.dvla.gov.uk/at_a_glance/content.htm)).
3. Applicants who may be symptom free at the time of the examination should be advised that, if, in future, they develop symptoms of a medical condition which could affect safe driving, and a hackney carriage or private hire driver's licence is held, Eastleigh Borough Council's licensing team must be informed immediately.

## C Medical Standards for Hackney Carriage or Private Hire Drivers

Standards for hackney carriage or private hire drivers, as vocational drivers, are higher than those for ordinary car drivers. In line with recommended good practice, the Council will expect licensed drivers to meet the Group 2 vocational driver standards. Specific medical conditions which will be a bar to obtaining or holding a hackney carriage or private hire driver's licence are as follows: -

### 1. Epilepsy or liability to epileptic attacks

A diagnosis of epilepsy or spontaneous epileptic attack(s) requires 10 years free of further epileptic attack without taking anti-epilepsy medication during that 10-year period. For conditions that cause an increased liability to epileptic attacks, the risk of attacks must fall to that of the general population. The Council will refuse or revoke the licence if these conditions cannot be met.

### 2. Diabetes

Drivers with insulin treated diabetes may apply for a group 2 licence so long as they satisfy the following criteria:

- No episode of hypoglycaemia requiring the assistance of another person has occurred in the preceding 12 months.
- Has full awareness of hypoglycaemia
- Regularly monitors blood glucose levels at least twice daily and at times relevant to driving (no more than 2 hours before the start of the first journey and every 2 hours while driving). More frequent testing may be required if for any reason there is a greater risk of hypoglycaemia for example after physical activity or altered meal routine, using a glucose meter with a memory function to measure and record blood glucose levels. At the annual examination by an independent Consultant Diabetologist, 3 months of blood glucose readings must be available.
- Must demonstrate an understanding of the risks of hypoglycaemia.

There are no debarring complications of diabetes such as visual field defect.

**A licence will be issued for three years. However, the above must be confirmed by the applicant and GP/Diabetic Consultant annually in line with the initial grant date of the licence.**

### 3. Eyesight

All applicants must be able to read in good light with glasses or contact lenses if necessary, a number plate and containing letters and figures 79mm high and 50 mm wide (i.e. post 1.9.2001 font) at a distance of 20 metres, or at a distance of 20.5 metres where the characters are 79 mm high and 57 mm wide (i.e. pre 1.9.2001 font) In addition: -

Visual Acuity

(i) Applicants must have: -

- ◆ \* a visual acuity of at least 6/7.5 (0.8 decimal) in the better eye; and
- ◆ \* a visual acuity of at least 6/60 (Snellen decimal 0.1) in the other eye; and
- ◆ \* If these are achieved by correction the **uncorrected** visual acuity in each eye must be no less than 3/60.

(ii) **Normal binocular field of vision**

The second E.C. Directive requires a normal binocular field of vision for Group 2 Drivers

(iii) **Monocular vision**

Drivers who have monocular vision will not meet the Group 2 standard.

(iv) **Uncontrolled symptoms of double vision**

Uncontrolled symptoms of double vision preclude licensing. As monocular vision is a bar, the treatment for double vision with a patch will not meet the Group 2 standard.

**It is also necessary for all drivers of Group 2 vehicles to be able to meet the prescribed and relevant Group 1 visual acuity requirement.**

Please note that a failure to meet the epilepsy, diabetes or eyesight requirements will normally result in the refusal of an application.

#### 4. Other Medical Conditions

In addition to those medical conditions mentioned above, an applicant or licence holder is likely to be refused if they are unable to meet the national recommended guidelines in cases of:-

- ◆ \* Within six weeks of myocardial infarction, an episode of unstable angina, CABG or coronary angioplasty.
- ◆ \* Angina, heart failure, or cardiac arrhythmia which remains uncontrolled.
- ◆ Implanted cardiac defibrillator.
- ◆ \* Hypertension where the blood pressure is persistently 180 systolic or more or 100 diastolic or more.
- ◆ \* A stroke or TIA within the last 12 months.
- ◆ Unexplained loss of consciousness with liability to recurrence.
- ◆ \* Meniere's and other sudden and disabling vertigo, within the last 12 months, with a liability to recurrence.
- ◆ Insuperable difficulty in communicating by telephone in an emergency.
- ◆ \* Major brain surgery and/or recent severe head injury with serious continuing after effects.
- ◆ \* Parkinson's disease, multiple sclerosis or other chronic neurological disorders likely to affect safe driving.
- ◆ \* Psychotic illness within the past three years.
- ◆ Serious psychiatric illness.
- ◆ If major psychotropic or neuroleptic medication is being taken.
- ◆ \* Alcohol and/or drug misuse within the last 12 months or alcohol and/or drug dependency or use in the past three years.
- ◆ \* Dementia.
- ◆ Any malignant condition, within the last 2 years, with a significant liability to metastasise to the brain.
- ◆ \* Any other serious medical condition likely to affect the safe driving of a hackney carriage or private hire vehicle.

#### 5. Tiredness: Sleep Disorders

Up to one fifth of accidents on motorways and other monotonous roads may be caused by drivers falling asleep at the wheel.

Many accidents are attributed to "driver inattention" but once vehicles faults, traffic offences, poor road or weather conditions, alcohol and specific medical causes are excluded, closer inspection suggests driver sleepiness may be the cause. Evidence for this includes the apparent failure to respond to traffic and road conditions generally and, in particular, the absence of signs of emergency braking.

Driver sleepiness may be caused by modern life styles preventing adequate rest. It may be made worse by shift working combined with the monotonous nature of certain types of driving. Alertness fluctuates naturally throughout the day. Driving between 02:00 and 07:00 increases the risk of a sleep related accident. Most people also tend to be less alert during the mid-afternoon or after a heavy meal. All drivers need to address these problems responsibly.

However, some medical conditions may cause excessive sleepiness. These will greatly increase any normal tendency to sleepiness.

The commonest medical cause is **Obstructive Sleep Apnoea Syndrome (OSA)**. This condition occurs most commonly, but not exclusively, in overweight individuals, particularly those with a large collar size. Partners often complain about the snoring and notice that sufferers seem to have irregular breathing during sleep. Sufferers of OSA rarely wake from sleep feeling fully refreshed and tend to fall asleep easily when relaxing.

OSA is one of the few medical conditions that has been shown to increase significantly the risk of traffic accidents. However, once diagnosed, there is very effective treatment available, normally through specialist centres.

The greatest danger is prior to diagnosis, when the significance of the symptoms is not appreciated. A road traffic accident may be the first clear indication of the condition. All drivers, especially professional drivers, and doctors need to be much more aware of the risks of sleepiness from this treatable cause.