

# Assessing fitness to drive

## Information kit

**2022 EDITION**

This kit contains:

- Key messages relating to the release of AFTD and the changes
- Social media posts
- Frequently asked questions
- A summary of the key changes resulting from the review



*Austroads*

# About this information kit

This information kit has been developed by Austroads to facilitate stakeholder communication at and around the time of the release of the new edition of [Assessing Fitness to Drive \(2022\)](#).

The principal purpose of the kit is to support consistent messaging to health professionals involved in assessing fitness to drive, as this is the group that must apply the new standards from the launch date 22 June 2022. The kit provides information about:

- The process and outcomes of the latest review of the standards
- When the new standards come into effect
- The significant changes that will affect driver licensing
- How Austroads and the Driver Licensing Authorities will support transition to the new requirements.

The kit also facilitates communications to consumers who may be affected by the changes in the standards. Given the nature of the changes to the standards, such communication will generally occur via driver licensing authorities or health professionals, although specific consumer organisations may be involved in proactively communicating some of the changes.

**The kit contains information that may be used by stakeholders in their own communications and incorporated in website content as appropriate.**

In addition to providing this general information, Austroads will be working with individual stakeholders to tailor communications as required and to explore other communication opportunities.

While much of the information is directed at [health professionals](#), the Frequently Asked Questions (FAQs) also help to address questions that might be raised by consumers, thus guiding consumer communications and supporting conversations about driving.

Beyond the initial launch of the new edition, Austroads will be facilitating longer term communication and implementation activities with health professionals and consumer organisations. This will provide opportunities to deliver broader messaging around fitness to drive and mobility, including for particular groups such as older drivers, and drivers living with disabilities and chronic and progressive conditions.

## For more information about the Austroads communication campaign:

Please contact Austroads Project Manager:

An Rendell

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## To make contact with your local Driver Licensing Authority

Follow [this link](#) for contact details or go to the [Austroads website](#).

### Quick links to content in this kit

- [Key messages for health professional stakeholder communication](#)
- [Launch communications](#)
- [Frequently asked questions](#)
- [Summary of changes to Assessing Fitness to Drive](#)
- [Contacts for Driver Licensing Authorities](#)

## To keep up with the latest information on *Assessing Fitness to Drive*

Austroads is pleased to announce a regular newsletter aimed at keeping health professionals, consumers and road safety stakeholders up-to-date on issues and developments relevant to fitness to drive. Content will include:

- Research
- Education and events
- Case studies
- Health professional and consumer resources
- FAQs including those flowing from implementation of the new edition of Assessing Fitness to Drive

Follow [this link](#) to subscribe.

## Introducing the new Austroads *Assessing Fitness to Drive* website – LIVE from 22 June 2022

The [Austroads website](#) is undergoing a major redevelopment to enable improved access and utility for the fitness to drive standards. It includes:

- Quick links to the main medical chapters
- A new, easy to read format for all chapters
- Links to topics of interest including fitness to drive for older drivers, conditional licences etc
- Pages devoted to target audiences including health professionals, private vehicle drivers and commercial vehicle drivers
- Summary pages describing the changes to the new edition

The new edition of [Assessing Fitness to Drive](#) is now live on the website from 22 June 2022.

The website includes announcements and news items relevant to the launch and users can sign up to receive email updates.

Stakeholders are requested to link their members to the landing page <https://austroads.com.au/drivers-and-vehicles/assessing-fitness-to-drive>.

# Key messages for health professional stakeholders

Following are the main general messages for health professional stakeholders. These messages do not address specific changes to licensing criteria for medical conditions. These changes are outlined in detail in the section [summary of changes](#) and will be highlighted in communication to specific stakeholders as relevant.

## Primary messages for health professional stakeholders

- A new 2022 edition of the driver medical standards 'Assessing Fitness to Drive' will come into effect on 22 June 2022.
- From that date, all medical assessments conducted for the purpose of determining fitness to drive must be conducted according to the new edition.
- The Austroads website has undergone significant redevelopment to facilitate access to the online version of the standards, including highlighting recent changes and relevant resources to support conversations about driving. Interested parties can subscribe to updates via the website. The website will be live from 22 June 2022.

## Secondary messages for health professional stakeholders

- The revised standards emphasise the important role of health professionals in advising drivers about the impact of their medical conditions/disabilities on driving in both the short and long term. This underpins the drivers' ability to fulfill their responsibility to report to the Driver Licensing Authority any condition that is likely to affect safe driving.
- Multidisciplinary management of drivers is also emphasised, including the importance of information sharing between treating health professionals.
- There are a small number of changes to the licensing criteria, which will impact licensing decisions. It is therefore not anticipated that the changes will impact on health professionals' workload in undertaking assessments. Revisions make no changes to health professional reporting or legal obligations.
- Some changes reflect changes in medical evidence regarding the impacts and management of medical conditions in relation to driving; others provide clarity around existing medical criteria to support consistency in application.
  - the changes are [summarised in this kit](#)
  - they are highlighted in the relevant sections of the new online version of the standards
  - they will be communicated to relevant health professional stakeholders
  - they will be managed by the Driver Licensing Authorities in terms of the impacts on individual drivers.

- In addition to the criteria changes and clarification, there is also improved general guidance to support assessment and management of health conditions, disabilities and treatments in relation to driving. This includes:
  - Improved information about the general principles of assessing fitness to drive, including the assessment and management of people with disabilities ([Part A - Section 2](#))
  - Improved information about assessing and managing older drivers and people with multiple medical conditions (Part A – Section [2.2.7](#), [2.2.8](#))
  - Guidance regarding the management of drivers receiving treatment with medicinal cannabis (Part A - Section [2.2.9](#))
  - Improved guidance in assessing and managing certain medical conditions ([Part B](#)) including diabetes ([Section 3](#)), musculoskeletal disorders ([Section 5](#)), autism spectrum disorder (ASD) ([Section 6.3](#)), psychiatric conditions ([Section 7](#)) and sleep disorders ([Section 8](#)).

## Launch communication

Below is the [media release issued by Austroads on Wednesday 22 June](#). Stakeholders are invited to use this as a basis for their launch communications, adding further content that is relevant to their particular audiences, including relevant changes to the standards as described in this kit.

### Assessing Fitness to Drive 2022 launched

After many months of preparation, the revised Assessing Fitness to Drive standards are now available on the [Austroads website](#).

Users of the new standards, which came into effect on 22 June, will notice a much-improved format for our online delivery of this essential reference. Intuitive navigation and improved search functionality will streamline the assessment process for busy health professionals. The site also supports knowledge sharing around key fitness to drive issues, including older drivers, chronic medical conditions, driving for people with disabilities and the requirements for heavy vehicle and commercial vehicle drivers.

The redeveloped [website](#) takes the guess work out of transitioning to new requirements resulting from the 2021 review by the National Transport Commission. There are alerts in each section drawing users' attention to the key changes, plus an easy-to-use [Summary of Changes](#) that can be downloaded separately.

“Leading up to this point, there has been a great deal of collaboration across Jurisdictions, health organisations and industry” says Michael Nieuwesteeg, Austroads Road Safety and Design Program Manager. “This paves the way for an ambitious program of implementation activities that will see us begin to collectively address the need for information and education regarding fitness to drive”.

Austroads is looking forward to supporting stakeholders in their implementation and application of the standards.

## Assessing Fitness to Drive logo and images

Stakeholders are invited to use the logos and imagery created by Austroads for the launch of the 2022 edition.

Choose from a variety of logo formats and images relevant to your target audience, including health professionals and drivers.

[Download AFTD2022 logos and images](#)

Please contact Austroads Project Manager, [An Rendell](#) for further information.



## Social media announcements

Austroads and NTC will be undertaking social media campaigns leading up to and at the time of the launch. Announcements will focus on the effective date of the standards and the updated Austroads website.

Stakeholders are encouraged to share or post other relevant messaging. Suitable images are also available as noted above.

- Fitness to drive should be considered for anyone with a medical condition or disability that might affect their ability to drive safely. A new edition of the national driver medical standards '*Assessing Fitness to Drive*' (2022) will come into effect on 22 June 2022. From that date all medical assessments conducted for the purpose of determining fitness to drive must be conducted according to the new edition. A summary of changes is now available to help you prepare for the transition.
- Austroads is working hard to ensure the national driver medical standards '*Assessing Fitness to Drive*' are easy to access and can better support decision-making about fitness to drive. From 22 June a new online platform will host the standards, highlighting recent changes and relevant resources to support conversations about driving. Subscribe to receive updates via the [Austroads website](#).



# Frequently Asked Questions

The following Frequently Asked Questions (FAQs) have been devised to support stakeholders in communicating to their members and constituents. These are intended to support stakeholders in developing tailored but consistent communication.

## About the review

- Why revised medical standards?
- When do the revised standards come into effect?
- What are the key changes to the standards resulting from this review?
- Who has been involved in reviewing the standards?
- How will the revisions affect health professionals' practice?
- How will the revisions affect Driver Licensing Authorities?
- How will the revisions affect drivers?
- Who should drivers speak to about how the changes might affect them?
- Will hard copies of the publication be distributed to health professionals?
- How will Austroads communicate any future changes or issues relevant to health professionals and drivers?
- Where can I access a detailed report of the review?

## About the standards and fitness to drive assessments

- What is the purpose of the standards?
- Where do I access the standards?
- What type of health conditions might affect ability to drive safely?
- What are the legal and ethical responsibilities of health professionals, drivers and Driver Licensing Authorities?
- Where can drivers and health professionals get more information about health and driving?
- Which standards (private or commercial) should be applied?
- What is a conditional licence?
- What is a practical driver assessment?
- What happens if drivers don't follow their health professionals' advice?
- Where do I find out more information about the standards?

## Where to find more information and education

- [Where can I find information for older drivers?](#)
- [Where can I find information about health requirements for commercial vehicle drivers?](#)
- [Where can I find information about dementia and driving?](#)
- [Where can I find information about vision and driving?](#)
- [Where can I find information about diabetes and driving?](#)
- [Where can I find more information about stroke and driving?](#)

## FAQs: About the review

### Q. Why revised driver medical standards?

**A.** The driver medical standards *Assessing Fitness to Drive* have been revised to reflect current medical and research knowledge and the current transport environment. Reviews are conducted regularly to ensure currency and to respond to feedback from health professionals, drivers and other stakeholders. Feedback can be provided through the [Austroads website](#) at any time.

### Q. When do the standards come into effect?

**A.** The new 2022 standards are effective from the **22 June 2022**. From that date, all drivers must be assessed using the new standards. Driver Licensing Authorities will manage the transition to the new standards, including communication with drivers on conditional licences who may be affected by the changes. Note that some Driver Licensing Authorities may delay the application of some revisions and/or vary their application. For example, some Driver Licensing Authorities will consider the application of the revised criteria at the time of the driver's next periodical review assessment unless the driver re-presents in the interim (e.g., deterioration of condition, pro-actively seeking consideration under new criteria).

### Q. What are the key changes to the standards resulting from this review?

**A.** The current review of *Assessing Fitness to Drive* has resulted in some changes to the licensing criteria to account for developments in medical understanding and practice.

The main changes are described briefly in [this information kit](#) and are described in more detail in the review report on the Austroads website ([Assessing Fitness to Drive Review 2020-21 – Final Report](#)).

The updates to the standards also include clearer guidance for health professionals to support consistent assessment and decision making.

### Q. Who has been involved in reviewing the standards?

**A.** The standards have been produced through an extensive consultation process involving medical, research and health experts and consumer groups, as well as all State and Territory Driver Licensing Authorities, and the transport industry. Any member of the public could also contribute to the review process.

The review has also drawn on the latest Monash University Accident and Research Centre (MUARC) report [Influence of chronic illness on crash involvement of motor vehicle drivers: 3<sup>rd</sup> edition](#), which considers the evidence for crash risk for various medical conditions. The process has been overseen by the National Transport Commission and Austroads. A report describing the process and outcomes of the review is available on the Austroads website ([Assessing Fitness to Drive Review 2020-21 – Final Report](#)).

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**Q. How will the revisions to Assessing Fitness to Drive affect health professionals' practice?**

**A.** Given the small number of significant changes to the licensing criteria, it is not expected that the revisions will have a major impact on practice for most health professionals. Some changes improve clarity and support the driver assessment process as described on [pages 15-20](#) of this document. It is not anticipated that the standards will impact on health professionals' workload in undertaking assessments.

**Q. How will Assessing Fitness to Drive 2022 affect Driver Licensing Authorities?**

**A.** Driver Licensing Authorities will apply the new standards to all newly referred drivers from 22 June 2022. A small number of significant changes will also need to be considered by Driver Licensing Authorities in terms of the impact on drivers already managed within the medical review system, including those on existing conditional licences. Improved guidance material contained in the standards will facilitate licensing management by Driver Licensing Authorities and support greater consistency in licensing decisions.

**Q. How will the revised standards affect drivers?**

**A.** The new standards do not mean a change in responsibility for drivers. They must continue to ensure that they do not drive if they have a condition that is likely to affect their ability to drive safely, and they must report such conditions to the Driver Licensing Authority.

The standards reflect developments in medical science and improvements in diagnosis and treatment of various health conditions. They therefore provide scope for drivers with well-managed health conditions to continue to drive safely.

There are a small number of significant changes that will affect drivers. These are summarised in [this information kit](#) and on the [Austroads website](#).

**Q. Who should drivers speak to about how the changes might affect them?**

**A.** The changes to the standards are outlined in [this information kit](#) and on the [Austroads website](#). Drivers may also speak to their GP, optometrist, medical specialists or occupational therapist as well as their local Driver Licensing Authority about how the new standards will affect them.

Follow [this link](#) for contact details of Driver Licensing Authorities.

**Q. Will health professionals receive hard copies of the publication?**

**A.** The standards will be available in html format on the Austroads website, with improved layout and a search function to enable easy access to specific criteria and management guidelines. The publication can also be downloaded for free in pdf form from the website. Hard copies may be ordered for \$35 including postage and handling.

**Q. How will Austroads communicate any future changes or issues relevant to health professionals and drivers?**

**A.** Health professionals and drivers can subscribe to receive emailed updates about *Assessing Fitness to Drive*. Go to the [Austroads website](#). Austroads is engaging with all relevant health professional peak groups and consumer advocacy groups to provide updates and resources which can be shared with members and consumers.

**Q. Where can I access a detailed report of the review?**

**A.** A report of the review ([Assessing Fitness to Drive Review 2020-21 – Final Report](#)) may be downloaded from the Austroads website.

# FAQs: About the Standards and fitness to drive assessments

## Q. What is the purpose of the standards?

**A.** The purpose of *Assessing Fitness to Drive* is to improve road safety in Australia by assisting health professionals to:

- Assess the fitness to drive of their patients in a consistent and appropriate manner, based on current medical evidence
- Provide advice to drivers about the impact of health conditions and disability on driving and to promote awareness of driver legal reporting obligations and responsible behaviour
- Conduct medical examinations for the licensing of drivers as required by State and Territory Driver Licensing Authorities
- Understand options for, and make recommendations regarding conditional licences
- Recognise the extent and limits of their professional and legal obligations with respect to reporting fitness to drive.

The publication also aims to provide guidance to Driver Licensing Authorities in making licensing decisions.

## Q. Where do I access the standards?

**A.** The best place to access the standards is via the [Austroads website](#). The website has been redeveloped so that you can navigate to find the information you need quickly and efficiently. The changes to the standards are highlighted in each chapter and there is a dedicated search function for the standards. The website will be live from 22 June 2022.

## Q. What type of health conditions and disabilities might affect ability to drive safely?

**A.** Driving a motor vehicle is a complex task requiring perception, good judgment, responsiveness and reasonable physical capability. A range of medical conditions, disabilities and treatments, may therefore impair driving ability. Common examples include:

- Blackouts
- Cardiovascular conditions
- Diabetes
- Dementia and cognitive impairment
- Seizures and epilepsy
- Other neurological conditions
- Musculoskeletal conditions
- Psychiatric conditions
- Sleep disorders
- Alcohol and other substance misuse

- Vision and eye disorders
- Treatments that have either a short- or long-term impact on any of the functional pre-requisites listed above.

Just because people have a disease or condition that might affect their driving, doesn't mean that they won't be able to drive at all. It might mean that they should refrain from driving when affected or must see their doctor more often to check that their illness is well managed. It might mean that there are some restrictions placed on their driving which enable them to drive in conditions that suit their capacities.

Follow [this link](#) for quick access to the medical standards for these conditions.

## **Q. What are the legal and ethical roles and responsibilities of drivers, health professionals and licensing authorities?**

**A.** *Assessing Fitness to Drive 2022* clearly outlines the responsibilities of drivers, examining health professionals and licensing authorities.

The new edition emphasises the important role of health professionals in advising their patients about the impact of their health conditions, treatments, or disabilities on safe driving.

In turn this enables drivers to fulfill their responsibility to report to the driver licensing authority any permanent or long-term condition that is likely to affect their ability to drive safely. It is the licensing authority not the health professional that makes the final decision about whether a person will be able to hold a licence.

In states where online reporting systems have been initiated (currently Victoria and New South Wales), health professionals may submit reports directly to the licensing authority, which facilitates secure immediate report submission, reduces overall time for processing and enhances the monitoring and management of health conditions and conditional licensing.

Elsewhere, reports from health professionals to the licensing authority are usually made/submitted via the patient, in line with their reporting responsibilities.

Health professionals also have an obligation to public safety so if they believe that a patient is not heeding advice to cease driving, they may report directly to the Driver Licensing Authority. Confidential reporting systems may operate in these jurisdictions (check individual websites). Note that in South Australia and the Northern Territory, legislation currently requires the health professional to report directly to the licensing authority if they judge the patient to be unfit to drive.

## **Q. Where can drivers and health professionals get more information about health and driving?**

**A.** The Driver Licensing Authorities and various health organisations produce information about driving and health conditions and disabilities, as well as about issues such as driving assessments and the transition to not driving for older people or those with progressive conditions. These resources are usually available at no cost.

Many of these resources are referred to on the *Assessing Fitness to Drive* website but can also be accessed directly from the Driver Licensing Authority websites.

Follow [this link](#) to find the driver licensing authority webpages.

## Q. Which standards (private or commercial) should be applied?

**A.** *Assessing Fitness to Drive* contains two sets of medical standards – private vehicle driver standards and commercial vehicle driver standards. The standards for commercial vehicle drivers are set at a higher level due to the increased risks generally associated with this type of driving.

The choice of which standards to apply when examining a patient for fitness to drive is guided by both the type of vehicle and the purpose for which the driver is being authorised to drive (e.g. transportation of passengers or dangerous goods or driving large vehicles).

A person who does not meet the commercial vehicle medical criteria may still be eligible to retain a private vehicle driver licence. In such cases, both sets of standards may need to be consulted.

## Q. What is a conditional licence?

**A.** In most cases, having a medical condition will not stop people from driving, as the licensing authority is able to issue a conditional licence. This means that the person may continue to drive as long as certain conditions or restrictions are met. Licensing conditions may include driving during daylight hours only, the use of vehicle modifications, driving only within a certain radius of the person's home, the wearing of glasses or corrective lenses when driving or attending the doctor for a periodic review of a chronic condition (such as diabetes) at regular intervals and providing a report to the Driver Licensing Authority. A doctor may make recommendations to the Driver Licensing Authority about a conditional licence, but the authority will make the final decision.

If people are issued with a conditional licence, it is their responsibility to comply with any driving restrictions or other conditions and to be reviewed by their doctor as required if their condition deteriorates or changes.

## Q. What is a practical driver assessment?

**A.** The impact of a medical condition or multiple conditions on driving is not always clear, thus a practical driver assessment may be useful.

Driver licensing authorities offer different tests depending on their legislation and policy. For example, some jurisdictions require all drivers over a certain age to undergo an on-road competency test. On-road assessments conducted for medical review fitness to drive purposes are to be distinguished from the tests of competency to drive that are routinely conducted by driver licensing authorities for licensing purposes which are skill based (e.g., for novice drivers, or as part of an age-based requirement).

Practical driver assessments for the purpose of establishing fitness to drive are suitable for people with medical conditions or disabilities associated with impairments that fall under the *Assessing Fitness to Drive* standards. These assessments are usually conducted by occupational therapy driving assessors.

The assessments may be initiated by the health professional, others such as the police, a family member, the driver themselves, or the driver licensing authority. There may be a number of options available. For advice contact your Driver Licensing Authority or see the contact details for Specialist driver assessors in [Appendix 10](#) of *Assessing Fitness to Drive*.



**Q. What happens if a driver doesn't follow their doctor's advice?**

**A.** If a person continues to drive despite their doctor's advice and they do not report their condition or any significant change to their condition to the Driver Licensing Authority, they are not fulfilling their legal responsibility. If they are involved in a crash under these circumstances and it is found that their health condition was a contributing factor, they may be prosecuted, and their insurance may not be valid.

If a person's doctor is aware that they are continuing to drive and feels that their driving is a serious risk to them and other road users, the doctor has an ethical responsibility to notify the Driver Licensing Authority directly. Legislation in South Australia and Northern Territory compels direct reporting in this situation.

**Q. Where can I find out more information about the standards?**

**A.** Further information is available from the [Austroads website](#).

## FAQs: Where to find more information

### Q. Where can I find information for older drivers?

**A.** The new edition of *Assessing Fitness to Drive* has more information to help guide the management of older drivers so that they can continue to drive for as long as it is safe to do so, while also considering and planning for a time when they may no longer be fit to drive. The Driver Licensing Authorities also have resources to support understanding of the potential impact of age-related decline, multiple morbidities, and the options for maintaining mobility and independence.

#### **Australian Capital Territory**

<https://www.accesscanberra.act.gov.au/s/article/act-driver-licence-information-tab-medical-conditions>

#### **New South Wales**

Roads and Maritime Services – Older drivers

<http://www.rms.nsw.gov.au/roads/licence/older-drivers/index.html>

NRMA older drivers <https://www.mynrma.com.au/community/what-we-do/education-centre/older-drivers>

#### **Northern Territory**

NT Department of Transport, Information for Senior Drivers:

<https://nt.gov.au/driving/driverlicence/existing-nt-licence/medical-fitness-to-drive/should-i-be-driving-things-to-look-for>

#### **Queensland**

Medical certificates for older drivers <http://www.qld.gov.au/seniors/transport/safe-driving/>

#### **South Australia**

South Australian Seniors Transport <https://www.myllicence.sa.gov.au/safe-driving-tips/older-drivers>  
[https://mylicence.sa.gov.au/safe-driving-tips/moving\\_right\\_along\\_-\\_are\\_you\\_worried\\_about\\_someones\\_driving](https://mylicence.sa.gov.au/safe-driving-tips/moving_right_along_-_are_you_worried_about_someones_driving)

#### **Tasmania**

Tasmanian Older Drivers website **Error! Hyperlink reference not**

**valid.** [https://www.transport.tas.gov.au/licensing/health\\_and\\_driving/driving\\_as\\_you\\_age](https://www.transport.tas.gov.au/licensing/health_and_driving/driving_as_you_age)

#### **Victoria**

TAC – older drivers <http://www.tac.vic.gov.au/road-safety/safe-driving/older-drivers>

VicRoads – How aging can affect driving <https://www.vicroads.vic.gov.au/licences/health-and-driving/how-ageing-can-affect-your-driving>

#### **Western Australia**

Senior driver licence renewals <http://www.transport.wa.gov.au/licensing/renew-my-drivers-licence-seniors-85-plus.asp>

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**Q. Where can I find information relevant to commercial vehicle drivers?**

**A.** *Assessing Fitness to Drive* contains information relevant to the assessment and management of drivers who hold a commercial vehicle licence. This includes explanation about the increased risk posed by commercial vehicle drivers and how this is managed in the application of licensing criteria and assessment by medical specialists. The new Austroads website also provides links to further information for both drivers and operators.

**Q. Where can I find information about dementia and driving?**

**A.** Alzheimer's Australia has a range of resources to help people with dementia and their families, as well as resources to guide health professionals. <https://www.dementia.org.au/resources/dementia-and-driving>

Some driver licensing authorities also produce resources that align with their jurisdictional requirements and available supports. Follow [this link](#) for the Driver Licensing Authority websites.

**Q. Where can I find information about diabetes and driving?**

**A.** The National Diabetes Services Scheme (NDSS) is an initiative of the Australian Government administered by Diabetes Australia. The NDSS provides information and support services to people with diabetes, including information about driving. Refer to <https://www.ndss.com.au/>

The 'Above 5 to Drive' resources are also available through Diabetes Australia <https://www.diabetesaustralia.com.au/living-with-diabetes/diabetes-and-daily-life/driving/>

**Q. Where can I find information about vision and driving?**

**A.** Good vision is important for safe driving, so it's important for drivers to have their eyes tested at least every two years (yearly for people over 65), or more frequently if recommended by a doctor or eye health professional.

Sources of information about vision and driving include:

Good Vision for Life - <https://goodvisionforlife.com.au/better-vision/safe-driving-3/>

The Vision Initiative - <https://www.visioninitiative.org.au/driving-and-eye-health>

Some driver licensing authorities may also have information about vision and driving.

**Q. Where can I find more information about stroke and driving?**

**A.** The Stroke Foundation provides information about driving for those who have had a stroke or transient ischaemic attack (TIA). <https://strokefoundation.org.au/What-we-do/For%20survivors%20and%20carers/stroke-resources-and-fact-sheets/Driving-fact-sheet>

# Summary of changes

## Improved general guidance – Part A

The current review of *Assessing Fitness to Drive* has resulted in improved guidance regarding the principles of assessing fitness to drive contained in [Part A](#) of the publication. This is essential reading for all those involved in conducting fitness to drive assessments. The revisions to Part A have drawn on the latest Monash University Accident and Research Centre (MUARC) report [Influence of chronic illness on crash involvement of motor vehicle drivers: 3<sup>rd</sup> edition](#).

### Roles and responsibilities

While the legal obligations of drivers, health professionals and licensing authorities remain unchanged, the new edition of *Assessing Fitness to Drive* emphasises the important role of health professionals in advising drivers about the impact of their medical conditions/disabilities on driving in the short and long term. This acknowledges drivers' reliance on health professional advice to inform them of driver legal reporting obligations and to support these processes. It also underpins the importance of early and repeated conversations about driving for people diagnosed with progressive conditions.

Also highlighted is the multidisciplinary management of fitness to drive and the importance of sharing of information between care providers, including specialists, general practitioners, optometrists and occupational therapists, to ensure appropriate care coordination for road safety.

### Older drivers

Part A of the standard also includes improved guidance regarding the management of older drivers. Based around an active management approach, it describes how consideration of fitness to drive can and should be integrated into the general health and lifestyle management for older people so that the inevitable transition to non-driving can be normalised and addressed to maintain independence and community connections.

### Multiple medical conditions

Related to the management of older drivers, but potentially an issue at any age, multiple medical conditions can prove challenging to assess and manage with respect to driving. The new edition contains updated evidence on this issue.

### Drivers with disabilities

Disabilities are not the same as medical conditions, and the management with respect to driving requires consideration of the person's functional capacity and the stability of the disability. New material in Part A provides specific guidance in this regard. More detailed information regarding prosthetics is also included in the Musculoskeletal chapter.

### Medicinal marijuana (cannabis)

With medicinal marijuana (cannabis) now being prescribed for various conditions, consideration about safety for driving is an issue to be considered by prescribing health professionals. The new edition includes extensive information to guide decisions about driving.

## Part B – Medical standards

Below is a [summary of the main changes](#) made to the medical condition chapters. The full report of the review describes these in detail, including the stakeholder submissions and evidence supporting the changes. The report also details stakeholder submissions that did not result in changes to the standards.

Within this section, the chapters where changes have been made to the licensing criteria are presented in the first instance. These changes may have an impact on whether a particular driver is judged fit to hold a licence. There are very few significant changes of this nature.

Chapters where the content of the chapter has been updated or the wording of the criteria have been amended for the purpose of clarity are then presented. These changes are important but are unlikely to impact individual licence status.

### Chapters with criteria changes

#### Cardiovascular conditions

The review of the cardiovascular conditions chapter was supported through consultation with the Cardiac Society of Australia and New Zealand.

- **Implantable cardioverter defibrillator (ICD) (updated criteria for commercial licence holders)**

ICDs are devices that are used to detect and stop cardiac arrhythmias. The device continuously monitors the heart and delivers electric shocks when needed to restore normal heart rhythm. Criteria contained in 2016 *Assessing Fitness to Drive* have precluded drivers with ICDs from holding a commercial vehicle licence, in part due to the underlying condition but also due to the risk of incapacitation due to inappropriate discharge of the device. The restriction has applied to ICDs implanted for secondary or primary prevention, while allowing consideration of exceptional cases.

Recent studies considered as part of the current review suggest lower rates of shock frequency and syncope in patients where an ICD is used for primary prevention. New criteria for conditional licensing are therefore set in the 2022 edition for this group of patients with commercial licences. The criteria specify a non-driving period post implantation (6-months) and an annual review period.

Driver Licensing Authorities will support the management of this change for existing customers.

- **Ventricular assist devices (VADs) (updated criteria for private vehicle licence holders)**

A small number of people receive therapy with these devices for heart failure. During the previous review, licensing standards were included for private drivers with left VAD. Drivers with a combined LVAD/RVAD (BiVAD) or an artificial heart, and commercial drivers requiring any type of these devices, were not fit to drive due to concerns about device failure and loss of vehicle control.

Based on new evidence, private drivers with BiVADs may now be considered for a conditional licence, subject to the same criteria as previously required for LVAD. Ventricular assist devices of any type remain unacceptable for commercial vehicle driving.

Driver Licensing Authorities will support the management of this change for existing customers.

- **Congenital disorders (updated criteria and clarification)**

The criteria for drivers with congenital disorders have been updated to reflect the current standards of medical care for these cardiac conditions.

The criteria for both private and commercial vehicle drivers now address considerations for surgical management, including non-driving periods for post-surgery recovery. Commercial driver criteria have been expanded to provide greater clarity of the required clinical outcomes.

The criteria for private vehicle drivers are clarified for uncomplicated congenital disorders. Those with no or limited symptoms can drive without licence restriction – this is a clarification rather than a change in criteria.

## **Musculoskeletal conditions (updated criteria)**

The review of the musculoskeletal chapter involved consultation with Occupational Therapy Australia and its national driving committee. The review identified the need to consider the impact of chronic pain and treatments on safe driving ability. Medication effects and condition stability are now included among the factors that should be considered when recommending a conditional licence. General guidance is also provided regarding the impact of pain on concentration and attention to the driving task.

New information is also included to guide recommendations for prosthetic devices.

## **Neurological conditions**

The review of the neurological conditions chapter involved consultation with representatives from the Australian and New Zealand Association of Neurologists, the Epilepsy Society Australia, the Movement Disorder Society of Australia and New Zealand, the Royal Australian and New Zealand College of Psychiatrists, the Cognitive Dementia and Memory Service, and Occupational Therapy Australia.

### ***Neurological conditions - Dementia and cognitive impairment (updated criteria)***

Reflecting the progressive nature and unpredictable trajectory of dementia, the driving standards require that a person with dementia may not hold an unconditional private or commercial licence but depending on their capacity may hold a conditional licence, subject to periodic review.

During the current review, it was identified that dementia is being diagnosed at an earlier stage using modern diagnostic techniques, and that this should be reflected in the standard. The definition of dementia relating to ineligibility for an unconditional licence has therefore been qualified to exclude pre-clinical and prodromal dementia unless there are clinically significant symptoms. Regular monitoring and consideration of fitness to drive remains a key feature of managing this progressive condition, and early conversations about managing the transition to non-driving are essential.

### ***Neurological conditions - Seizures and epilepsy (new/updated criteria)***

The management of seizures and epilepsy in relation to driving is a complex matter. The introduction of a 'default standard' in 2012 has provided a framework to facilitate the process and has been generally well accepted. Since then, ongoing improvements have included clearer guidance and flow charts to illustrate the decision-making process. Changes resulting from the current review reflect ongoing improvement to add clarity around particular areas of management and are summarised below.

- **Criteria for unreliable or doubtful clinical information (new criteria)**

Health professionals are largely reliant on patient self-reporting to determine seizure history. To address circumstances where the clinical information is unreliable or doubtful, new criteria have been included for private and commercial drivers. This enables the examining health professional to formally assess the person as unfit to drive if there is concern about the veracity of the information provided.

- **Resumption of unconditional licence after first seizure or acute symptomatic seizures (updated criteria)**

The new edition includes criteria relating to resumption of an unconditional licence for first seizure and acute symptomatic seizures for private and commercial vehicle drivers. The criteria provide clarity of the circumstances under which the driver licensing authority may consider return to driving on an unconditional licence, which supports consistency of practice. The criteria for resuming driving on an unconditional licence for the default standard remain unchanged.

- **Recommended reduction in dosage of anti-epileptic medication in a person who satisfies the standard to hold a conditional licence (updated criteria)**

This aspect of the standard seeks to address circumstances where a reduction in anti-epileptic medication dosage is proposed for a person already on a conditional licence. Previously this applied in circumstances where the dose reduction was due to side effects. Revised criteria for both private and commercial drivers now include circumstances where the dose is being reduced following a period of temporary dosage increase, such as during pregnancy.

- **Requirements for EEG (updated criteria)**

For the relevant commercial vehicle driver standards, an EEG demonstrating no epileptiform activity is required for a conditional licence to be considered by the driver licensing authority. The EEG is required on initial granting of the conditional licence and not for the ongoing periodic review, which is now clarified in the wording of the standard.

- **Description of 'safe' seizures (updated criteria)**

For clarity, explanatory text has been added to describe a type of seizure that can be managed under the 'safe' seizure standard for private vehicle drivers.

*"Isolated infrequent myoclonic jerks (without impaired awareness) may be considered safe in the context of no seizures of any other type for more than 12 months."*

- **Assessment of provoking factors (updated criteria)**

In the criteria relating to *seizure in a person whose epilepsy was previously well controlled* for private vehicle drivers, the new edition clarifies that sleep deprivation should not be considered a provoking factor as it cannot be reliably avoided.

- **Clarifications on medication withdrawal or change (updated criteria)**

In the criteria relating to planned withdrawal of one or more antiepileptic medications in a person who satisfies the standard to hold a conditional licence for private vehicle drivers, the new edition clarifies that the 3-month nondriving period applies if a driver is being switched from one anti-epileptic drug to another.

- **Reduction of the default standard (updated criteria)**

There are numerous circumstances in which a reduction in the default standard may be applicable. Revisions to this edition now clarify that in such circumstances the longest non-driving seizure-free period should apply.

### ***Other neurological and neurodevelopmental conditions***

- **Stroke (updated criteria)**

The assessment requirements for private drivers post stroke have been refined to reduce unnecessary assessments and reporting.

Private drivers who are discharged from specialist care within 4 weeks of a stroke and have been assessed as fit to drive when discharged may continue to drive on their current licence and without need for reassessment, unless otherwise indicated. New text is also included to ensure a robust process in this regard: *Documentation of the assessment should be provided at discharge which includes details of the driver's licence indicates that they have not suffered any permanent neurological deficits that will impact driving, and that they are fit to drive at the end of the non-driving period.*

There are also clearer licensing criteria for situations when a person may require a conditional licence after a stroke. The criteria also indicate that periodic assessment is not required after initial medical review if the driver's condition is stable and there are no other relevant co-morbidities that require fitness to drive monitoring.

- **Subarachnoid haemorrhage (updated criteria)**

The review identified that cases involving low-risk non-aneurysmal subarachnoid haemorrhage restricted to the cerebral convexity present a low risk to driving safety and should be excluded from the licensing criteria unless impairments are present.

- **Autism spectrum disorder (ASD) (no criteria changes - clarification)**

The review identified that information and guidance was required to enable assessment of persons with ASD. Specialist advice noted that the variability of ASD characteristics and the degree of severity were too diverse for a specific standard. General guidance is however provided in the text of the chapter.

## Substance misuse (updated criteria)

The review of the substance misuse chapter involved consultation with Prof. Edward Ogden.

As for psychiatric conditions and reflecting the usual management of people with stable conditions, periodic reviews may now be performed by a person's general practitioner under specified circumstances (in place of specialist reviews). The specialist must perform the initial assessment, and all health professionals involved in the driver's management must agree to the arrangement.

The criteria have been modified to emphasise the conditional licensing requirements and include the use of alcohol interlocks where appropriate and where applicable in jurisdictions for private vehicle drivers. Additional changes to the text provide greater clarity regarding assessment requirements, including objective measures of abstinence.

## Vision and eye disorders

The review of the vision and eye disorders chapter involved consultation with representatives from the Royal Australian and New Zealand College of Ophthalmologists, Optometry Australia and Orthoptics Australia. Advice on practical driver assessment was also provided by Occupational Therapy Australia and its national driving committee.

- **Visual fields (updated criteria)**

The standard for private vehicle drivers has been clarified by including the additional criterion to define when a driver no longer meets the requirements for an unconditional licence:

*if there is any significant field loss (scotoma) with more than four contiguous spots within 20 degrees radius from fixation.*

The text has also been revised to provide clarity around the assessment of visual fields.

- **Monocular vision (updated criteria)**

Minimum visual standards for monocular commercial vehicle drivers are now included to provide clarity. In 2012, a stricter approach to managing commercial vehicle drivers with monocular vision was introduced, requiring individual assessment. Licensing authorities and industry stakeholders reported some difficulties with the introduction of this change as it was not clear what criteria should be considered in this assessment. The text now includes a detailed checklist of factors to be considered in licensing monocular drivers (and visual field defects in general).

For commercial vehicle drivers, the review period for drivers with a conditional licence has changed from one year to two years.



- **Visual acuity (no criteria changes - clarification)**

The visual acuity standard remains the same, however the established therapy of orthokeratology is now included as an option for meeting the acuity requirements for a conditional licence (private and commercial). This treatment is managed similarly to corrective lenses. Guidance is provided. Individual driver licensing authorities may have requirements in terms of demonstrating appropriate use of the therapy and review periods for conditional licensing.

- **Diplopia (no criteria changes - clarification)**

Specialist advice confirmed that a person is not fit to hold a commercial licence, either unconditional or conditional, if they have double vision when looking up to 20 degrees from fixation. If they have double vision when looking beyond 20 degrees of fixation they may be considered for a conditional licence. Diplopia within the central 20 degrees refers to 20 degrees from central fixation and not 20 degrees across fixation. Minor text changes have been made to clarify this point. The change of wording is for clarification and does not impact the intention of the standard.

- **Telescopic lenses (bioptics) (no criteria changes)**

There continues to be considerable interest in these devices. While the requirements remain unchanged, more detailed information is included to provide a rationale for the position including the supporting evidence.

## Need More Information?

See the Austroads website [www.austroads.com.au](http://www.austroads.com.au) or contact the Driver Licensing Authority in your state or territory. See contact details below.

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