**DVLA: Amending the Road Traffic Act 1988 to allow Registered Healthcare Professionals to complete DVLA medical questionnaires**

**RPS response (submitted online)**

The proposal is to amend the existing legislation to enable other healthcare professionals, as well as registered medical practitioners (that is any doctor registered with the General Medical Council, with a licence to practise), to complete relevant medical questionnaires to assist the DVLA in determining fitness to drive for holders or applicants of a driving licence.

**To what extent do you agree or disagree with the principal intention of the proposal?**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**To what extent do you agree or disagree:**

**That the proposal meets the preconditions for use of a Legislative Reform Order as set out in Section 7 – The Legislative Reform Order Process**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**That if the proposal is implemented, the impact of that would provide greater flexibility and opportunity to General Practice surgeries and hospital teams completing medical questionnaires. This would allow the GP surgery or hospital team to determine who would be the most appropriate healthcare professional to provide the DVLA with medical information and allow quicker licensing decisions for some customers.**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**How else might this proposal impact on GP business practices / hospital team practices and efficiencies?** (max 500 words)

It is important that others who will be able to take on the task should legislation change are only asked to do this in appropriate situations, such as when they already have a professional relationship with the patient and this does not just become a delegated task.

***We hope that the proposal will help reduce bureaucracy in the NHS by increasing the scope of those within surgeries and hospitals who can provide the information. That will allow doctors to concentrate on patients rather than time spent on administration.***

***The Department of Health and Social Care (DHSC) define it as:***

***The government's focus is on limiting excess bureaucracy, defined as: excessively complex rules (whether legal, organisational or cultural) or assurance and reporting administrative processes, which either have no benefit, or have no net benefit as they are unduly resource intensive, inefficient and time consuming.***

**To what extent do you agree or disagree that the proposal will help reduce bureaucracy in the NHS Service and GP surgeries?**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**To what extent do you agree or disagree with the following statements:**

**The proposal will improve efficiency for GP surgeries and hospital teams?**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**The proposal will improve efficiency for DVLA?**

* Strongly agree
* Agree
* Neither agree nor disagree
* Disagree
* Strongly disagree
* Don't know

**If you are aware of any benefits or costs to businesses that have not been identified, please provide details below: 500 words**

Whilst the costings on page 26 of the consultation document demonstrates potential savings, we believe that any healthcare professional undertaking this task should be reimbursed the same amount. If this does not happen there will always be an incentive, and financial pressure, to delegate this task to the lowest paid healthcare professional, who may not be the most appropriate person to complete the questionnaire.

In order for this to be undertaken effectively, there must be read and write access to a single patient record to enable the clinician completing the questionnaire to have access to all the relevant information.

**If you are aware of any benefits or costs to society that have not been identified, please provide details below: 500**

**If you are aware of, or you believe that there will be, any unintended consequences as a result of this proposal, please provide details below: 500**

The completion of the DVLA questionnaire should not be seen as a purely administrative task and should only be delegated to those who have clinical knowledge of the patient. The focus throughout this consultation appears to be on freeing up GPs’ time and reducing their administrative burden, whilst placing that burden onto another healthcare professional. The focus should rather be on allowing the most appropriate person to complete this task, on behalf of a particular patient, rather than the burden falling to GPs on every occasion; on some occasions this will continue to be the GP

The change in legislation should be enabling and communications around any legal changes should make this clear as we are concerned that pharmacists in all care settings could be put under undue pressure to complete a DVLA questionnaire if the legislation changes, even if they do not have in depth knowledge of the patient.

Consideration needs to be given to how other healthcare professionals are supported to complete DVLA questionnaires including access to relevant patient information, process for booking an appointment to provide the time and space to complete the questionnaire, record keeping and how the information about the questionnaire is shared to avoid duplication as well as any impact on indemnity and insurance for those healthcare professionals completing the forms.

The ability of other professionals to complete the questionnaire should not mean that medical professionals just delegate the task and the workload is just shifted to others.

**If you have any further comments or suggestions to make about this consultation, please tell us below: 600**

The issue of indemnity insurance needs to be considered. The act of completing a medical questionnaire is currently considered outside of the GP contract and therefore is technically 'private' work, for which GP partners are remunerated. Many pharmacists, or other healthcare professionals, would not be covered by the indemnity schemes that are in place nationally for private work. If a claim were to arise, it is possible that many pharmacists and other healthcare professionals would not actually be indemnified. Additionally, if these changes went ahead and amendments / clarifications to the national indemnity schemes were not forthcoming, it would need to be made clear to pharmacists and other healthcare professionals that they need to be insured for private work in some capacity before taking this work on.

If the work is considered private and is then delegated to another healthcare professional within an organisation such as general practice, there are issues around who receives the payment. Currently the DVLA pay the organisation, such as the surgery. We believe that the payment should go to the healthcare professional completing the questionnaire completing it.

RPS agrees that pharmacists should be able to complete DVLA questionnaires for those patients where they have a full understanding of the patient’s history and medical requirements, taking into account some of the issues we have listed above.

Pharmacists are a regulated profession, regulated by the General Pharmaceutical Council, and should be considered as part of these proposals.