

Response to DVLA consultation on Amending the Road Traffic Act 1988 to allow Registered Healthcare Professionals to complete DVLA medical questionnaires

06 December 2021

Consultation description

- 1 This consultation seeks views on changing the Road Traffic Act 1988, as amended, to enable healthcare professionals other than registered medical practitioners (doctors with full General Medical Council (GMC) registration) to complete DVLA medical questionnaires.
- 2 This change will apply in England, Scotland and Wales only. Driver licensing is a devolved matter in Northern Ireland.
- 3 Link to consultation document:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1031700/dvla-lro-consultation-and-de-minimis-assessment.pdf
- 4 This consultation closes on 6 December 2021.

About us

- 5 Our vision is safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing. As the professional regulator of almost 745,000 nurses and midwives in the UK and nursing associates in England, we have an important role to play in making this vision a reality.
- 6 Our core role is to **regulate**. First, we promote high education and professional standards for nurses and midwives across the UK, and nursing associates in England. Second, we maintain the register of professionals eligible to practise. Third, we investigate concerns about nurses, midwives and nursing associates – something that affects less than one percent of professionals each year. We believe in giving professionals the chance to address concerns, but we'll always take action when needed.
- 7 To regulate well, we **support** our professions and the public. We create resources and guidance that are useful throughout people's careers, helping them to deliver our standards in practice and address new challenges. We also support people

involved in our investigations, and we're increasing our visibility so people feel engaged and empowered to shape our work.

- 8 Regulating and supporting our professions allows us to **influence** health and social care. We share intelligence from our regulatory activities and work with our partners to support workforce planning and sector-wide decision making. We use our voice to speak up for a healthy and inclusive working environment for our professions.

Our response to consultation questions

Question 1 - Are you responding as an individual or as an organisation?

- 9 Organisation.

Question 2 - Personal and organisational details**

- 10 Name: Rachel Craine, Policy Manager
- 11 Organisation name: Nursing and Midwifery Council (NMC)
- 12 Email address: Rachel.Craine@nmc-uk.org

Question 3 - To what extent do you agree or disagree with the principal intention of the proposal?

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.

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

- 13 Agree.
- 14 We support the proposal to to extend legislative powers to enable a wider range of health care professionals to provide information from medical records to support medical licensing decisions.
- 15 The professionals on our register have a wide range of professional knowledge and skills and we see no regulatory reason why they should not be able to complete DVLA medical questionnaires on the basis of existing medical information held, as is envisaged.

- 16 The way we maintain standards for nursing and midwifery is:
- 16.1 Setting and maintaining high education and professional standards (www.nmc.org.uk/standards/) for safe, compassionate and effective practice.
 - 16.2 Maintaining the register (www.nmc.org.uk/registration/search-the-register/) of professionals who meet the standards and are eligible to practice in the UK.
 - 16.3 Requiring professionals to practice in line with the Code (www.nmc.org.uk/globalassets/sitedocuments/nmc-publications/nmc-code.pdf) and stay up to date in their professional practice through our revalidation process. The Code includes provisions around probity, confidentiality, informed consent, and record keeping which are likely to be important considerations for professional practice and when completing questionnaires for the DVLA.
 - 16.4 Taking regulatory action to protect, promote and maintain the health, safety and wellbeing of the public where registered nurses, midwives and nursing associates fail to practice in line with the Code and standards. We can investigate concerns through our Fitness to Practise (FTP) process in the event that someone were to fall short of those standards in completing a medical questionnaire for the DVLA.
- 17 We note the wording around “specialist”. Everyone on our register undertakes additional education and training after their initial professional registration to develop further knowledge and skills. We use specialist to mean the specialist practice qualifications that are annotations to our register. We record qualifications in Specialist Community Public Health Nurses (SCPHNs) and Specialist Practitioner Qualifications (SPQ). They indicate that a registered nurse or midwife has successfully undertaken an NMC approved programme that meets our standards in a particular area of practice. Specialist practice qualifications can be undertaken by first level registered nurses or midwives.
- 18 Many registered nurses and midwives who undertake specialist practice do so without holding an NMC recordable qualification. We do not think our specialist qualifications are required in order to meet the proposals. In our view, the changes should be available to all registered nurses and midwives on our register who are suitably qualified and experienced.
- 19 We understand that it is not an expectation that every individual registered healthcare professional will be expected to complete DVLA medical questionnaires. Employers will have a role in identifying who among their employees would be suitably qualified, willing and experienced to complete a DVLA medical questionnaire. Registered healthcare professionals taking on this role will need to complete the necessary training before carrying it out in order to meet the professional standards in our Code.

- 20 We expect employers to support registered healthcare professionals with the preparation and training they need to carry out this role, and we would recommend guidance from the DVLA to employers to support this. We would be happy to work with you to develop this if you take this work forward, if that would be helpful.

Question 4 - To what extent do you agree or disagree:

- 4a That the proposal meets the preconditions for use of a Legislative Reform Order as set out in Section 7 – The Legislative Reform Order Process.
- 21 Neither agree nor disagree.
- 4b 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.
- 22 Agree.
- 23 We welcome the ambition to enable a wider range of health care professionals to provide the DVLA with medical information.
- 24 However, in relation to paragraph 1.16 of the consultation, we think that other registered healthcare professionals could also decide who the most appropriate healthcare professional is to provide the DVLA with medical information. This is additional to the individual GP practices, hospital teams and doctors identified in the consultation.

Question 5 - How else might this proposal impact on GP business practices/hospital team practices and efficiency? 500

- 25 Registered healthcare professional taking on this role will need training, which would we expect employers to support.

Question 6 - To what extent do you agree or disagree that the proposal will help reduce bureaucracy in the NHS Service and GP surgeries?

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.”

- 26 Neither agree not disagree.

- 27 It would be helpful to consider what impact the proposals would have on the nursing and midwifery workforce. 'Too much pressure' is one of the most frequently cited reasons why people leave our register. Those pressures have, of course, been exacerbated by the unprecedented circumstances of the covid pandemic.
- 28 We recognise that the one of the intentions behind the proposals is to reduce the workload pressure on doctors. However, a consequence of this is that some of the burden will be passed onto other registered health care professionals.
- 29 We would encourage engagement with the Royal College of Nursing (RCN), the Royal College of Midwives, Unison and Unite, who represent many healthcare professionals, to understand their perspective of the proposals, both from the point of view of workforce pressure and for their professional input more generally, and for implementation.

Question 7 - To what extent do you agree or disagree with the following statements:

7a The proposal will improve efficiency for GP surgeries and hospital teams

30 Agree.

7b The proposal will improve efficiency for the DVLA

31 Agree.

Question 8 - If you are aware of any benefits or costs to businesses that have not been identified, please provide details below: 500

32 None.

Question 9- If you are aware of any benefits or costs to society that have not been identified, please provide details below: 500

33 None.

34 However, we agree that improving turnaround times for DVLA licensing decisions will be beneficial for some license holders and applicants.

Question 10 - 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

35 None.

Question 11 - If you have any further comments or suggestions to make about this consultation, please tell us below: 600

36 None.