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Dear Mrs Brown

### **Regulation 28 Report to Prevent Future Deaths**

Thank you for your Regulation 28 Report 'To Prevent Future Deaths'. I am responding as the Medical Director and Director of Education and Standards for the GMC.

I am grateful to you for raising the matter with us, and I am sorry to hear of the circumstances of Mr Warwick-Jones' death.

The GMC is the regulator for the medical profession in the UK. As part of our role, we publish guidance for doctors setting out the principles of good practice and the professional standards expected of them in the course of their work. All doctors must be aware of and follow the guidance and we have powers to take action if those standards are not met.

Our guidance [\*Confidentiality: patients' fitness to drive and reporting concerns to the DVLA or DVA\*](#) sets out our expectations of doctors where patients have conditions that could impact on their ability to drive safely. We outline that the driver is legally responsible for telling the DVLA or DVA about any such condition or treatment. Doctors should therefore alert patients to conditions and treatments that might affect their ability to drive and remind them of their duty to tell the appropriate agency. Doctors may, however, need to make a decision about whether to disclose relevant information without consent to the DVLA or DVA in the public interest if a patient is unfit to drive but continues to do so.

If a doctor becomes aware that a patient is continuing to drive when they may not be fit to do so, they should make every reasonable effort to persuade them to stop. If they do not manage to persuade the patient to stop driving, or discover that the patient is continuing to drive against their advice, they should consider whether the patient's refusal to stop driving leaves others exposed to a risk of death or serious

harm. If they believe that it does, they should contact the DVLA or DVA promptly and disclose and relevant medical information, in confidence, to the medical advisor.

We do not specify particular conditions that might affect a patient's fitness to drive or give guidelines for driving with particular conditions as we do not set clinical standards or provide clinical guidance. This is the role of a wide range of other bodies. However, we outline to doctors that when assessing a patient's condition and providing treatment, they should refer to the DVLA's guidance [\*Assessing fitness to drive- a guide for medical professionals\*](#), which includes more detailed information about specific disorders and conditions that can impair a patient's fitness to drive.

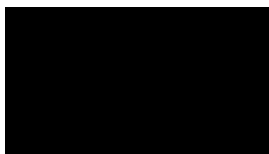
The Driver and Vehicle Licensing Agency (DVLA) in England, Scotland and Wales and the Driver and Vehicle Agency (DVA) in Northern Ireland are legally responsible for deciding if a person is medically unfit to drive, and we say that if a doctor is unsure whether the patient's condition would affect their ability to drive safely, they should seek advice from an experienced colleague or the DVLA or DVA's medical adviser.

For the reasons outlined above, we are unable to specify particular conditions in our guidance or include a general duty for increased testing, as each patient would need to be considered by their doctor on a case by case basis before being assessed by the DVLA.

We do however recognise the importance of highlighting the increased risks resulting from confusion where patients have, or have previously had UTIs, with the profession. To that end, we have contacted the Royal College of General Practitioners (RCGP) to alert them to these issues, so they can consider how best to raise awareness of this particular case and its implications with their members.

I hope the information above is helpful.

Yours faithfully



Medical Director and Director of Education and Standards, GMC