

16 December 2025

Regent's Place
350 Euston Road
London NW1 3JN

Adam Hodson
Area Coroner for Birmingham and Solihull
Coroner's Court
Steelhouse Lane
Birmingham
B4 6BJ

gmc-uk.org

Dear Adam

I am writing in response to the prevention of future deaths report arising from the inquest into the death of Christopher Graham Ayerst Sampson, on behalf of the General Medical Council in my capacity as the Director for Education and Standards.

I am grateful to you for raising the matter with us, and I am very sorry to hear of the circumstances of Christopher's death.

Our role

We work with doctors, physician associates (PAs), anaesthesia associates (AAs), patients and other stakeholders to support good, safe patient care across the UK.

We set the standards that our registrants and their educators need to meet, and help them achieve them. If there are concerns these standards may not be met or that public confidence in doctors, PAs, or AAs may be at risk, we can investigate and take action if needed.

We are very conscious of the risks to public safety posed by individuals who have medical conditions that mean they are not fit to drive and yet continue to do so. As the professional regulator, we are committed to playing our part in supporting our registrants to reduce those risks.

Our guidance on assessing patients' fitness to drive and reporting concerns

As you are aware, we have specific guidance on this issue: [Confidentiality: patients' fitness to drive and reporting concerns to the DVLA or DVA](#).

The guidance sets out that when doctors, PAs or AAs encounter a patient who has a condition or is undergoing treatment that could impair their fitness to drive, they are expected to:

- explain this to the patient and tell them they have a legal duty to inform the DVLA or the DVA
- tell the patient that they may be obliged to disclose information about them if they continue to drive when they are not fit to do so
- make a note of any advice given about fitness to drive in the patient's medical record.

We know that doctors, PAs and AAs can sometimes be anxious about being criticised for breaching patient confidentiality, but we are clear in the guidance that registrants also have a duty to protect and promote the health of other patients and the public. Disclosures about patients who are not fit to drive can be justified in cases where the professional makes a judgement in the public interest, in line with our guidance.

Where a patient continues to drive and they are not fit to do so, and the patient's refusal to stop driving leaves others exposed to a risk of death or serious harm, doctors, PAs and AAs should contact the appropriate agency and disclose any relevant information to the medical adviser (after making every reasonable effort to persuade the patient to stop) - see paragraph 9.

Supporting awareness and implementation of the guidance

In the report, you note that the issue of drivers failing to self-report to the DVLA is a serious and persisting one, and you raise concerns that guidance to professionals on reporting to the DVLA may not be well known.

We undertake a range of activities to support understanding and awareness of our guidance.

This includes:

- **Making sure our expectations are made clear within the education and training of the people on our register.** Although the detailed content of curricula is the responsibility of schools, royal colleges and faculties, we set the expected outcomes based on *Good medical practice*, which includes duties to protect and promote the health of patients and the public. Specifically, the DVLA/DVA notification processes are highlighted in the 'national legislative requirements' section of the [Generic professional capabilities framework](#) (see [domain 3](#)). This framework is embedded in postgraduate training curricula, meaning that all specialty training programmes need to cover these requirements.
- **Raising awareness of the guidance through our direct communication and engagement channels with doctors, PAs and AAs.** Our [outreach teams across the UK](#) regularly give talks and run workshops on confidentiality and making decisions about disclosing information in the public interest to our registrants. These workshops will often highlight the importance of sharing information about a patient's medical condition(s) with the DVLA/DVA where necessary. We have also previously published [several blogs](#), including one from the DVLA's Senior Medical Advisor in 2015 which outlined the DVLA's processes and reinforced our advice on doctors' responsibilities.
- **Working in collaboration with other organisations who help us engage with registrants.** As part of our work to develop and consult on the confidentiality guidance as part of the last review in 2016, we hosted two roundtables with partner organisations to support doctors to respond appropriately when patients may not be fit to drive. We also worked closely with medical defence bodies to develop materials they produced for their members on this issue.
- **Developing accessible learning materials**, including a [case study](#) and a video to support awareness of the expectations in this area.

Looking ahead

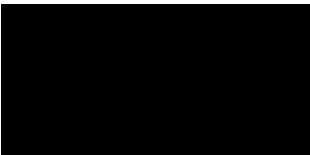
We recognise that there is always more that can be done to raise awareness of the risks and the responsibilities of professionals in this space. Some time has passed since we last reviewed the guidance and did more focused work to promote it amongst our registrants, so your letter presents us with an opportunity to look again at what we might do next.

We have begun planning for using our communication channels, such as the e-newsletters we send out regularly to all our registrants and to responsible officers, to run a new targeted awareness campaign for the guidance in the new year. As part of this, we have spoken to colleagues in the General Optical Council to explore the possibilities for joint working, including how we might collaborate on some shared messages to our registrants, and coordinate timing to maximise the impact of any communications activity. We will continue to progress this work over the coming weeks.

Finally, our outreach teams are currently looking at their materials to see whether and how these might be refreshed for 2026 and beyond. This includes looking at opportunities to include further references to the fitness to drive guidance and a reminder of responsibilities in this area across a wider range of sessions, including our free Welcome to UK practice sessions that we run with doctors who are new to practice in the UK.

Thank you again for writing to us - I hope that this response is helpful in addressing the concerns raised in your letter. Please do let me know if you require any further information.

Yours sincerely,



Medical Director & Director of Education & Standards
General Medical Council