Acknowledgements and use considerations

VicRoads has produced this document in consultation with Occupational Therapy Australia – Victoria (OTA-Vic).

This resource is relevant to post graduate qualified Occupational Therapy (OT) driver assessors either practicing within Victoria, or supporting drivers who have, or are seeking, licensure within the state of Victoria.

VicRoads engages in regular research, evidence and policy reviews as well as quality and service improvement processes. These reviews may result in changes to policy, procedures and requirements.

Note that all information in this resource is current at the time of publication. It is recommended that, as part of professional due diligence, OT driver assessors keep up to date with any changes which might impact on driver assessment service delivery.

This publication will be available in electronic form and will be updated as required. VicRoads will attempt to advise the public and health practitioners of all major changes in policy and processes.

Project team and consultation reference group

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Organisations that contributed to the review process include

- Transport Accident Commission
- Royal Automobile Club of Victoria
- Disabled Motorists Australia
Introduction

What are the objectives of this resource?

These guidelines were developed to provide Occupational Therapy driver assessors with information about relevant VicRoads processes and requirements, including (but not limited to) medical review, standards and practice, legal, licensing and appeals. These guidelines are essential reference material when interacting with clients involved in the driver assessment and medical review process within the Victorian licensing system.

This manual aims to:

• provide Occupational Therapy driver assessors with guidelines to follow when conducting a driver assessment,
• support standardisation of the driver assessment process by documenting expected practices, procedures, legislative framework and business rules within which occupational therapy driver assessors operate,
• provide details regarding the relevant business rules and legislative framework under which VicRoads operates,
• provide essential licensing information relevant to Occupational Therapy driver assessment and rehabilitation processes, and
• assist Occupational Therapy driver assessors to explain assessment and medical review processes to clients.

This publication is intended for use by Occupational Therapy driver assessors and other agencies/health professionals involved in decision making for medical fitness to hold a drivers licence.

The primary purpose of the resource is to contribute to road safety in Victoria by providing guidelines to support a consistent approach to fitness to drive related assessment, rehabilitation and licensing of drivers with medical or disability related issues.

VicRoads, in line with all other Australian jurisdictions, adopts a safe systems approach to road safety.

The key components for drivers with impairments/disabilities that impact on driver safety include:

• safer drivers (e.g. sensory-motor abilities, decision making, cognition, risk-taking behaviours)
• safer vehicle design (e.g. impacts of modifications on any safety systems)
• safer road design (e.g. design of roads and associated traffic control mechanisms)
• safer speeds (e.g. rural vs. urban, traffic speeds)

OTs routinely consider all these factors when planning assessments and interventions related to client safe driving requirements.

Additionally, these guidelines must be considered in line with the most recent and relevant AustRoads and VicRoads Medical Review resources and safe systems advice and the most recent versions of other key documents including:

5. AHPRA – Australian Health Practitioner Regulation Agency – Occupational Therapy Board of Australia mandatory standards for registration
6. Other relevant stakeholder position statements and clinical guidelines which might apply to clients. For example:
   • Australian Medical Association Position paper on Road Safety in Australia (2018)
   • Australian Faculty of Rehabilitation Medicine – Equity of access to driving assessment for people with disabilities (2014)
   • Australian and New Zealand Society for Geriatric Medicine – Driving and dementia (2009)
   • Clinical Guidelines for Stroke Management (2010) Section 8.2 – Driving
What is VicRoads role?

VicRoads is responsible for ensuring that all drivers and applicants for a licence meet the national fitness to drive medical standards for licensing and have appropriate driving skills. VicRoads has policies to support road users across their licencing lifespan, from pre-learner drivers through to senior drivers.

Under Victorian law, VicRoads may at any time ask a driver or permit holder to provide a medical report and to undertake medical tests or a practical driving test. Experienced drivers may be asked to undertake assessments due to concerns about driver behaviour and/or the possible impact of impairments or chronic/long term medical conditions on safe, consistent, independent driving abilities.

VicRoads is legally responsible for ensuring that all licence holders are competent drivers. VicRoads has the power to suspend or cancel the licence of drivers who commit an offence or become unsuitable to drive.

Victorian Government policy is to support drivers of any age who wish to continue driving, as long as they can do so safely. There are no age based assessments for licence renewal in Victoria. Once a driver is aged 75 or older, three year licence renewal periods apply. This is in place to encourage drivers to review their requirements for continuing to retain a driver licence, and ability to meet medical fitness to drive requirements.

If VicRoads is notified that a driver demonstrates unsafe behaviours and/or has medical condition(s) that may impact on fitness to drive requirements, VicRoads is legally obliged to investigate the matter.

What is the client’s role?

All Victorian drivers, regardless of age, are required by law to notify VicRoads if they have or develop, a permanent or long term injury or illness that may impair their ability to drive safely. Drivers should also notify their vehicle insurance provider. If drivers fail to notify VicRoads, continue to drive and have a crash, such drivers may be:

- charged with driving offences and failing to notify VicRoads of their condition,
- sued under common law or
- not adequately insured.

Throughout this document, the terms "client", "customer" or "patient" may be used, depending on the context, to best identify the person of interest.

What is the Occupational Therapy driver assessor’s role?

In this publication, the term OT will be used to refer to the role of Occupational Therapy driver assessor.

Occupational Therapists (OTs) are health professionals who assist people with physical, cognitive or behavioural impairments to participate in activities of everyday life. Occupational therapy driver assessors have completed additional training to assess the ability of people with physical or cognitive impairments (or who may reasonably be suspected of having such impairments) to manage the tasks required to safely and consistently drive a motor vehicle or motor cycle. OTs, like doctors or optometrists, are independent specialists working in the field of health care. They are registered with AHPRA and must comply with agreed standards of conduct. They do not work for, and are not paid by VicRoads.

The OT Australia position paper on driver assessment and rehabilitation recognises that driver assessment and training is an advanced scope of practice (OT Australia 2015). As such, some OTs complete specialist training and have additional post-graduate/entry level qualifications in driver assessment and rehabilitation. This allows OTs to help their clients obtain a driver licence, or for already licenced drivers, to assess and optimise their safe driving independence. Many OTs also evaluate the capacity of motor cycle riders to obtain or retain their riding skills and competence as riders. They may also contribute to the assessment process for heavy vehicle licence holders.

OTs consider the human factors and safe systems which apply to driving or riding a motor cycle. (For example, interactions between the driver/rider, vehicle/motor cycle, road environment and other factors). On a case-by-case basis, this helps determine whether the driver/rider meets on-road competency standards and/or if vehicle modifications, driver/rider rehabilitation, or licence conditions are required in order to optimise driving/riding safety and independence.

Since 1987, Victorian legislation has recognised the role that OTs provide in assessing and providing rehabilitation for drivers/riders with medical and/or disability needs. OTs play an important road safety role in assisting VicRoads to meet its responsibilities to ensure that licence holders are safe drivers/riders. Their unique role in assessing medically impaired drivers/riders and trialling and prescribing vehicle modifications for drivers/riders with a disability has also been acknowledged by other stakeholder position statements and guidelines as outlined above.
OTs submit their recommendations to VicRoads however the responsibility for final licensing decisions rests with VicRoads. Consideration must be given to a broader range of relevant driver/rider licensing issues including advice received from VicRoads medical advisors, other medical and health professionals, court decisions/rulings, demerit points and other factors impacting on licence status.

What is an Occupational Therapy driver assessment?

The Occupational Therapy driver assessment for private vehicles is conducted in two parts, comprising an off-road and on-road assessment.

The off-road assessment is aimed at understanding the client’s previous driving or riding history, possible medical and functional difficulties, and the impact these difficulties have on driving or riding. It involves an interview, vision screening tests, assessment of cognitive function, muscle strength, range of movement, sensation, balance and coordination. Driver/rider reaction times and road law knowledge may also be assessed. Possible requirements for specialised equipment or vehicle modifications are also considered at this time.

For a driver of a private motor vehicle, the on-road driving test is conducted in a dual controlled vehicle, where the driver is accompanied by a driving instructor, who is usually responsible for providing route directions and maintenance of vehicle safety. The vehicle is set up according to any special client requirements. The OT is seated in the rear of the vehicle and observes the client’s performance on a range of driving tasks and skills.

Once oriented to vehicle set-up, the test route includes an initial period of familiarisation followed by the formal licence test component. There is provision to include client-specific tasks which target particular client impairment issues or considerations (e.g. including a 3 point-turn and extra roundabouts or parking for drivers who require a steering aid).

The standard route and local area tests are designed to include a variety of tasks and traffic conditions so that adequate behavioural sampling is achieved: this is required to enhance test validity and reliability. If drivers pass a local area test, they will be eligible to be re-licensed with a conditional licence, which will restrict the driver to a specific kilometre radius from their residence.

The Occupational Therapy driver assessment is more comprehensive than a VicRoads Graduated Licensing System (GLS) drive test or Medical Review Drive Test (MRDT) and can include situations designed to highlight potential driver functional issues associated with presenting or potential impairments (e.g. difficulties with vehicle control, reaction times, problem solving or self-navigation while driving).

Refer to VicRoads Occupational Therapy Driving Test: Assessment Manual (2018) for guidance for the on-road component of the assessment. In addition to giving feedback regarding the overall outcome of the assessment, the OT will also discuss options for vehicle modifications, further physical or cognitive remediation, driver rehabilitation (e.g. driving lessons) and occupational therapy driver re-assessment if appropriate.

The Occupational Therapy driver assessment and associated rehabilitation activities make an important contribution to VicRoads licensing system and community safety by providing assistance to drivers with medical issues or disabilities to gain or retain independent vehicle mobility.

How does the Occupational Therapy driver assessment differ from VicRoads licence tests?

VicRoads probationary driver licence test

This test is primarily for inexperienced novice drivers but is also used to test some overseas licence holders prior to issue of a Victorian licence.

The majority of drivers in Victoria commence their driving related training experience by passing the learner permit knowledge test. This test is the hurdle requirement to obtain a car learner permit. The car learner permit allows individuals to drive a car on the road under the supervision of an experienced driver. There are certain restrictions and requirements associated with the learner phase of the licensing system (explained in detail on the VicRoads website vicroads.vic.gov.au).

When a person is eligible to apply for a probationary driver car licence, they must initially pass a Hazard Perception Test (HPT) before they can undertake the practical on-road drive test. The HPT is an on-screen test of a driver’s ability to recognise and react safely to traffic hazards such as other vehicles, motor cyclists, pedestrians and cyclists. The HPT results are valid for 12 months.

VicRoads and OTs recognise that whenever possible, it is beneficial for novice drivers to undertake the assessments which are relevant to their level of driving experience peer group. However, for learner drivers with significant physical, intellectual or cognitive impairment, or who require more than simple vehicle modifications/aids, an Occupational Therapy driver assessment may be more appropriate than the probationary practical on-road licence test. Refer to Section 3.3.
VicRoad’s Medical Review is responsible for re-assessing licensed drivers referred to VicRoads by family, friends, police, health professionals, medical practitioners or anonymous third parties when there is doubt around their continued suitability to hold a private vehicle driver licence.

In most cases, the first step of the Medical Review process involves writing to the driver and asking them to provide an up to date VicRoads fitness to drive medical assessment. This is important to clarify whether the driver has any medical conditions or disabilities that would make them unfit to drive or that would explain incidents of observed/reported poor driving. A VicRoad’s medical report form is provided for this purpose and is available on VicRoad’s website.

On receipt of the medical report form, within the context of the driver’s licensing and other history, the Medical Review team make a decision about the appropriate type of assessment for the driver.

Drivers are referred for the Medical Review Driving Test (MRDT) licence reassessment when they don’t have significant health or disability issues and there is no relevant past medical review history that might indicate an alternative assessment process is required. The driver will receive an MRDT fact sheet in the mail which describes the test process. The on-road practical driving test determines whether the driver is able to drive safely, legally and independently.

Typically, the MRDT test begins and ends at the driver’s home and covers a route that is determined jointly by the driver and the VicRoads Driver Testing Officer (DTO) before and during the test. There are no prior knowledge or screening tests. The driver has previously had written and phone contact with the DTO team during which the test procedure and process have been explained. The on-road test is conducted in a dual controlled vehicle fitted with automatic transmission. A driving instructor’s vehicle can also be used if the driver has had prior driving lessons with an instructor. Similarly, if the driver requests a manual vehicle, the test can be done in a driving instructor’s vehicle with manual transmission and dual controls. The driver must pay for any driving instructor and vehicle costs. The overall test lasts between 30 and 60 minutes. This includes vehicle orientation (5 minutes), familiarisation drive (5 – 10 minutes) and feedback (5 – 10 minutes). The duration of the licence test component for tests associated with a local area condition will depend on the anticipated geographical restrictions. However, if the DTO has any concerns about the driver’s behaviour, memory or presentation, the DTO may not conduct, or if commenced, may terminate the test at any time.

If, during the course of an MRDT, the DTO becomes aware of behaviours or symptoms which may indicate that a medical condition or disability is impacting on the driver’s ability to drive, the driver will be referred for an Occupational Therapy driver assessment.
SECTION 1
Legal and medical

This section details the legal and medical obligations pertaining to drivers, health professionals, Occupational Therapy driver assessors and VicRoads.

1.1 National medical standards

Australian medical fitness standards for both private vehicle and commercial driving have been available for medical practitioners since 1988 when the Federal Office of Road Safety published a document titled “National Medical Guidelines”. These have been revised regularly since then and are now called “Assessing Fitness to Drive for commercial and private vehicle drivers: Medical standards for licensing and clinical management guidelines”.

The Assessing Fitness to Drive resource for health professionals includes the current medical fitness standards to be met by drivers throughout Australia. These standards are compiled and published by Austroads in consultation with specialist medical colleges and practitioners, licensing authorities as well as disability advocacy groups. The most recent version is available on Austroads’ website: austroads.com.au/drivers-vehicles/assessing-fitness-to-drive

The Assessing Fitness to Drive resource is designed to assist health professionals and driver licensing authorities to deliver valid and consistent patient related fitness to drive evaluations within the context of the overall licensing process.

Legal recognition

The national medical standards are applied in Victoria as adopted guidelines for testing or assessing persons. As such, the standards provide a guide to decision making and are not a substitute for an assessment.

Authority:

- The Road Safety (Drivers) Regulations 2009 requires drivers to notify VicRoads if affected by a permanent or long-term injury or illness that may impair safe driving ability as soon as practicable after becoming aware of the injury and/or illness.
- The Road Safety Act 1986 gives VicRoads the authority to require a person to undergo tests, including medical tests, assessment of road law knowledge and driving tests for the purpose of determining whether the person is safe to drive motor vehicles.

Use of standards

The standards are intended to assist a health care practitioner in making an assessment of their patient’s ability to meet the standards of fitness to drive.

Standards vary with the type of licence sought. For example, a licence to drive commercial passenger or heavy vehicles imposes more stringent standards than those required for a private motor car.

In some cases an accepted medical condition is clear grounds for cancelling or suspending a licence, or for refusing an application. In other cases a driver might be able to safely drive a private car, with or without licence conditions, restrictions or modifications, but may not be able to safely drive large commercial vehicles.

The standards indicate that care is needed in assessing drivers with progressive illnesses. The standards require such people to undergo regular assessments to ensure that they can continue to drive safely.

Value of driving assessment

Medical practitioners may be requested to determine their patient’s clinical fitness to drive. However, based on the current tests available for this purpose, actual driving ability can only be determined by a comprehensive in-car evaluation of a driver’s skills in a real world environment. This is conducted by VicRoads or an OT.

1.2 Communications and ethics

Communication and professional responsibilities

The currently applicable Competency Standards for Occupational Therapy Driver Assessors (June 1998), outline the basic expected standards for professional communication and conduct with the client. This includes the expected standards of written and verbal information provided prior to the commencement of the driver assessment regarding process, costs and items required to be brought to the assessment. Maintaining this standard of practice will assist in ensuring adequate communication with the client regarding key issues. It will also ensure accountability on the part of the OT.
VicRoads web-based information and fact sheet titled ‘Guide to Occupational Therapy Driver Assessment’, also provides most of this information (apart from cost information that can vary from service to service). The fact sheet is sent to clients on the first occasion when the client is requested by VicRoads to undergo an Occupational Therapy driver assessment. Also included in the VicRoads correspondence is the current list of Occupational Therapy driver assessment services with guidance advice regarding potential funding sources. The fact sheet is available to download from VicRoads web page. It is recommended that OTs provide their clients with a copy of this fact sheet or a document providing similar information relevant to their service.

Ethics
Professional codes of ethics generally require health professionals to balance the rights, legal obligations and needs of their clients with the health and safety of the broader community.

In relation to driving, the health professional must balance the client’s expectation of confidentiality and need for mobility against the right of the community to be protected against drivers with a higher risk of contributing to road trauma which may involve both the driver and other road users.

The OT is expected to conduct driver assessment and rehabilitation with professional integrity consistent with the Australian Association of Occupational Therapists’ Code of Ethics (otausvic.com.au), regulated by AHPRA. This includes:

(a) providing the client who has been assessed with a copy of the report submitted to VicRoads (and, as appropriate, send copies to the referrer, funding body, employer, etc.) and;

(b) a payment receipt for services provided, if relevant.

Duty of care
Section 3 of the Assessing Fitness to Drive guidelines (2016) details the roles and responsibilities of the driver, health professionals and driver licensing authority. If OTs or any other health professionals have a concern about a client’s ability to drive safely, they should advise the client not to drive, pending review by a medical practitioner. They should also advise the client about their responsibility to notify VicRoads about their medical condition and/or disability. As part of required clinical practice, such advice and any assistance to help the client meet their obligations, should be documented clearly in a client’s history in all healthcare delivery settings.

As the role of an OT in general terms is to assist the client to resume normal living activities, this requirement is a duty of care issue. For OTs who have training, understanding and awareness of issues associated with driving as part of their specific role, this is an even greater responsibility.

The client has an obligation to comply with the recommendation not to drive. However, the practitioner needs to consider whether the client can reasonably be expected to remember the advice and instructions provided by the health practitioner. If there is any doubt (e.g. when drivers have advanced cognitive decline, low insight, substance misuse/addiction or low treatment compliance) the health practitioner needs to consider sharing the information with relevant others within the context of obligations for confidentiality and privacy and other duty of care requirements.

VicRoads does not require the OT to follow up with the client to ensure that they do not drive. In determining whether to advise a client not to drive pending review, the OT will need to consider fitness to drive pre-requisites and balance VicRoads instructions regarding when clients fail a test, the client’s performance and test outcomes, where they intend to drive and the risk to the client and the community of continued driving against the potential impact to the client of not driving.

Referral to an appropriate health care practitioner to provide additional information, assessment, counselling and advice may be considered, especially for drivers for whom return to driving is unlikely. Where compliance is considered an issue, OTs are reminded of the guidelines provided by Austroads’ Assessing Fitness to Drive (Legal and Ethical Considerations section) with respect to assessing and reporting fitness to drive, and that their duty to maintain confidentiality needs to be balanced against protecting public safety. If at any stage the OT is concerned about an imminent or immediate risk to driver or public safety, they should report the driver to Victoria Police.

Civil law
Health professionals may be liable under civil law in cases where a court forms the opinion that they have not taken reasonable steps to ensure that impaired drivers drive only in circumstances that do not place them, and other members of the community, at increased risk.

Medical defence funds and other professional indemnity insurers are aware of the potential liability of the health professionals they insure. These organisations may reasonably expect health professionals to comply with national fitness to drive medical standards and also to document compliance and advice provided in their client notes.

Health professionals should also maintain an awareness of changes in the law that may affect their legal responsibilities. Where there are concerns about a particular set of circumstances relating to ethical or legal issues, advice may be sought from the individual health professional’s medical defence organisation or legal adviser.
Driving simulators can contribute to OT driver assessment.

Health professionals should maintain an awareness of any changes in health care and technology and any relevant evidence based practice that may affect their assessment of drivers. For example, this may include advances in prosthetic technology, intelligent vehicle technologies, driving simulators or computer based screening and rehabilitation tools.

1.3 Consent and Indemnity

Consent
The OT should obtain written consent (OT Competency Standards 1988, Section 2.1) from the client prior to conducting the assessment. The consent needs to indicate that the assessment will occur with the client’s knowledge and that the client understands the process including the repercussions of submission of results to VicRoads.

The OT must follow the VicRoads Medical Review OT clearance process (see Part 2) prior to the assessment. If the client has been directed by Medical Review to undertake an Occupational Therapy driver assessment, they will have a letter from VicRoads advising them of this requirement with instructions to submit to Medical Review an OT Driver Evaluation Report within a certain time frame. If the client refuses to provide the requested reports (and sign the release consent to VicRoads), then VicRoads will typically suspend the client’s licence for failing to do so.

Once the Occupational Therapy driver assessment has been conducted, VicRoads needs to know that the client is aware the report will be sent to VicRoads. The current standard VicRoads OT Driver Evaluation Report form asks “Is the client aware of the recommendations contained in this report and that this report will be forwarded to VicRoads?” The OT should ensure that the answer is “Yes”.

Indemnity
Section 27(4) of the Road Safety Act 1986 provides indemnity to any person (including an OT) who carries out a test or assessment and provides VicRoads with an opinion on the basis of this test or assessment. Please note that, if the Medical Review OT clearance process has not been followed, this may have implications for professional indemnity insurance or application of Section 27(4) of the Road Safety Act 1986.

Section 27(5) of the Road Safety Act 1986 provides indemnity to any person who in good faith, reports to VicRoads any information that discloses or suggests that a person is unfit to drive or that it may be dangerous for that person to hold or be granted a driver licence, driver licence variation or a learner permit or learner permit variation.

1.4 Release of information

Release of information by OTs

Privacy laws prohibit the
• use by OTs of information obtained in connection with an assessment inappropriately and/or
• sharing of licensing information to anyone not connected with the assessment, without client consent.

In practice, the OT can comply with this requirement by storing any personal information in a secure manner and not using a driver’s personal information for any purpose other than for conducting the assessment and assessing a driver’s fitness to drive.

Release of information by VicRoads

Information that VicRoads collects in connection with the administration of a client’s licence/learner permit will be used for that purpose and may be used for other purposes permitted by the Road Safety Act 1986 and laws applicable in Victoria.

Personal and/or health information may be disclosed to contractors and agents of VicRoads, VicRoads medical advisors, Marine Safety Victoria or other body advising VicRoads on the medical fitness of drivers, OTs, law enforcement agencies, other road and traffic authorities, the Taxi Services Commission, Austroads, the Transport Accident Commission, courts and other persons authorised to obtain it. Personal and/or health information that is collected may be provided to the Victorian Taxi Services Commission to enable it to assess suitability to hold a taxi licence or any other accreditation document certificate administered by the Taxi Services Commission.
Clients may be required to give personal and/or health information to VicRoads by the Road Safety Act 1986 and regulations. Failure to provide this information may result in an application not being processed, a driver licence being suspended, cancelled or varied or driver licence records not being properly maintained.

For further information about the use of personal and/or health information and rights of access to it, see the VicRoads brochure ‘Protecting Your Privacy’ or contact VicRoads. Part 7B of the Road Safety Act 1986 covers the requirements about the use and disclosure of information collected and received by VicRoads in relation to its registration and licensing functions and activities, where it does or may identify an individual.

Disclosure is not permitted unless one of the exceptions or permissions applies. For example, if required to respond to a subpoena or if requested by a person properly authorised for the requested purpose under an information privacy agreement (e.g. a Police Officer) or to lessen or prevent a serious threat to public health, safety or welfare.

Right of access to own records
Part 7B of the Road Safety Act 1986, allows VicRoads to provide licence holders with their own personal licence information. Personal licence information may also be given to the licence holder’s agent provided the agent has obtained the licence holder’s written permission to obtain this information.

Regulation 111 of the Road Safety (Drivers) Regulations 2009 gives drivers the right of access to their own personal licence records held by VicRoads. A fee may be charged. Most records (e.g. driving history or traffic offence history) can be requested by phone, but will be mailed to the licence holder’s address by VicRoads or its’ agent.

Medical, police, Occupational Therapy driver assessment, and similar reports, are not defined as licence records.

If the report is about an individual and they would be able to obtain it through Freedom of Information or other methods, it would be regarded as the individual’s record/document. Reports may also be released, if appropriately requested by the Coroner, as part of document exchange in litigation, if applied for under an Information Privacy Agreement, if subpoenaed or otherwise authorised or compelled by law.

Freedom of information
All clients have the right to request information from VicRoads under Freedom of Information provisions. This incurs a fee. In normal circumstances, VicRoads obtains the consent of the author of the report before releasing the information or report.

Some information, such as matters given in confidence and notifications of concern by community or family members, are exempt under these provisions. This information is not provided to the applicant seeking information. To do so would inhibit the receipt of such information from others at a future time and breach the Privacy Act.

Confidentiality and privacy
The following information is taken from the 2016 Assessing Fitness to Drive resource.

“Health professionals have both an ethical and legal duty to maintain patient confidentiality. The ethical duty is generally expressed through codes issued by professional bodies. The legal duty is expressed through legislative and administrative means, and includes measures to protect personal information about a specific individual. The duty to protect confidentiality also applies to driver licensing authorities.

The patient-professional relationship is built on a foundation of trust. Patients disclose highly personal and sensitive information to health professionals because they trust that such information will remain confidential. If such trust is broken, many patients would be likely to either forego examination/treatment and/or modify the information they give to their health professional, thus placing their health at risk.

Although confidentiality is an essential component of the patient-professional relationship, there are, on rare occasions, ethically and/or legally justifiable reasons for breaching confidentiality. With respect to assessing and reporting fitness to drive, the duty to maintain confidentiality is qualified in certain circumstances in order to protect public safety.

The health professional should consider reporting directly to the driver licensing authority in situations where the patient is either:

- unable to appreciate the impact of their condition
- unable to take notice of the health professional’s recommendations due to cognitive impairment, or
- continues driving despite appropriate advice and is likely to endanger the public.”
(Austroads 2016, page 17).
It is preferable that any action taken in the interests of public safety should be taken with the consent of the patient wherever possible and should certainly be undertaken with the patient’s knowledge of the intended action.

The patient should be fully informed as to why the information needs to be disclosed to a third party, in this case the driver licensing authority, and be given the opportunity to consider this information. Failure to inform the patient will only exacerbate the patient’s (and other’s) feelings of mistrust in the patient-professional relationship.

It is recognised that there might be an occasion where the health professional feels that informing the patient of the disclosure may place the health professional at risk of violence. Under such circumstances the health professional must consider how to manage such a situation appropriately” (Austroads 2016, page 18).

The health professional can provide confidential information to VicRoads, and clearly mark it as confidential and not to be released under Freedom of Information.

1.5 Licensing legislation

Purposes of licensing and obligations of drivers

Section 17 of the Road Safety Act 1986 defines various purposes of licensing, which aims to ensure that:

- a people who drive motor vehicles on highways are competent drivers,
- b drivers are aware of safe driving practices and road law, and
- c people who are, or who become, unfit to drive are not permitted to drive on highways.

The requirement related to medical and driving assessments helps to ensure that VicRoads meets these responsibilities. Section 17A of the Act specifies the obligations of drivers, which include the requirement to drive in a safe manner having regard to all the relevant factors, including the prevailing traffic conditions and the physical and mental condition of the driver.

Power to ask for tests and reports

Section 27 of the Act gives VicRoads the power to ask new applicants or existing licence or permit holders to provide medical reports, eyesight reports, undergo driving assessments or any test as appropriate.

Costs for providing the requested reports are the responsibility of the licence holder.

Occupational therapists recognised as driver assessors

OTs with post entry level qualifications in driver assessment and rehabilitation are recognised as a class of professional who may conduct an evaluation of a driver’s physical and cognitive abilities or skills to drive (Regulation 68 of the Road Safety (Drivers) Regulations 2009). This regulation also specifies that doctors (registered medical practitioners) may conduct medical tests and that doctors, optometrists and ophthalmologists, OTs and other persons may conduct eyesight tests and that VicRoads officers may conduct knowledge and driving ability tests.

1.7 Reporting unfit drivers

As stated in the introduction, in Victoria there is no legal obligation or requirement for an OT (or a medical practitioner, etc.) to report to VicRoads a driver suspected to be unfit to drive.

However, as outlined previously, any health practitioner has an overarching “duty of care” to their patient and the broader community which may be relevant to consider when patients are non-compliant with treatment or recommendations regarding refraining from driving and/or not reporting their condition to the licensing authority. The health professional should consider reporting directly to VicRoads where the patient is either:

- unable to appreciate the impact of his or her condition,
- unable to take notice of the health professional’s recommendations due to cognitive impairment, or
- continues driving despite appropriate advice and is likely to endanger the public.

Section 2.2 of Assessing Fitness to Drive (2016) guidelines provides recommendations about reporting of medical conditions to the driver licensing authority and the management of a range of temporary conditions that may affect safe driving performance.

Self-reporting

In Victoria there is a legal obligation for drivers (licensed in Victoria, interstate or overseas) to notify VicRoads if they have, or develop, a long term or permanent injury or illness that may impact on their ability to drive safely. Some examples might include amputation of a limb, multiple sclerosis, cataracts, epilepsy, stroke or Alzheimer’s disease.

Regulation 67(2) of the Road Safety (Drivers) Regulations 2009 states:

“If the holder of a driver licence or permit or a person who is exempt from holding a driver licence or learner permit under regulation 17, is affected by a permanent or long-term injury or illness that may impair the person’s ability to drive safely, the person must, as soon as practicable after becoming aware of the injury or illness, notify (VicRoads).”
There is also a requirement, as part of their renewal or licence application, for learner permit, licence applicants, heavy vehicle drivers, and drivers aged 75 years or more, to advise VicRoads of any condition which may affect safe driving.

Failure to do so in these cases may render the person subject to legal charges for making a false statement and any licence or permit obtained can be rendered null and void, possibly invalidating insurance.

Insurance

Full Transport Accident Commission (TAC) (third party) insurance coverage is provided for individuals involved in road crashes where a vehicle is involved regardless of whether or not the driver’s fitness to drive is reported to VicRoads. This is provided assuming the vehicle is registered and the driver is licensed and not in breach of traffic law (some aspects of coverage may be reduced if this occurs).

In all cases TAC insurance will cover innocent third parties. TAC insurance only covers personal injury, not vehicle or property damage.

It is the client’s responsibility to comply with any applicable disclosure requirements under any relevant personal health or vehicle policy. This may include advising the private insurance company (first and second party) with respect to acquired health/disability conditions that may impact on safe driving and assessment results. Failure to disclose may compromise the driver’s insurance coverage in the event of a crash. The OT should always advise the client to check disclosure requirements with their specific vehicle and personal injury insurance companies as requirements can vary from company to company.

1.8 Variation, suspension or cancellation of licence

Section 24 of the Road Safety Act 1986 gives VicRoads the power to suspend, cancel, vary (add or remove conditions or restrictions or licence categories) or refuse to issue a licence or permit in accordance with the Regulations.

Regulations 78 and 80 of the Road Safety (Driver) Regulations 2009 gives VicRoads the power to suspend, cancel or vary the driver licence or learner permit of a client for:

- failing a test (e.g. a driving test conducted by an OT or VicRoads Medical Review Driving Test).
- failing to provide an Occupational Therapy Driver Evaluation (or medical, eyesight etc.) report if requested to do so by VicRoads.

VicRoads can also suspend, cancel or vary a driver licence or learner permit if the client is found to be medically unfit.

Clients are not permitted to drive while their licence or permit has been disqualified, suspended, cancelled or refused.

The client has a right of appeal if VicRoads cancels, suspends, varies or refuses to grant a driver licence or learner permit. If VicRoads withdraws or varies a client’s authority to drive, VicRoads will provide the client with a formal notice setting out the reasons for this decision, the appeal rights and what the client needs to do in order to regain driving privileges.

If VicRoads removes a client’s authority to drive for failing an Occupational Therapy driver assessment, the person must pass a subsequent occupational therapy driver assessment to regain the licence. Depending on the time lapsed between the initial report and the subsequent request to undertake a second Occupational Therapy driver assessment, there may also be a requirement to provide an up-to-date medical report.

In exceptional and case-by-case circumstances, the client may be permitted to undergo a Medical Review Driving Test with VicRoads provided the person meets certain criteria. Refer to VicRoads Medical Review staff for clarification about specific clients.

If VicRoads cancels or suspends a licence due to receipt of an unsatisfactory medical report, the licence may be reissued on receipt of a satisfactory medical report. (A practical driving assessment is not necessarily needed unless medical advice or fitness to drive requirements indicate that one is required).

If a client fails an Occupational Therapy driver assessment and driver rehabilitation is recommended, the licence may be varied by issuing a licence with an X condition. There are different types of X conditions. The most commonly applied option allows an individual to only drive in a dual control car with a driving instructor for the purpose of driving lessons or an Occupational Therapy driver assessment. Another type of X condition requires that the driver must be accompanied by a fully licensed driver at all times: this may be applicable for novice or young drivers with disabilities who have had limited driving experience and need to practice (e.g. with parents/carers) before they are ready for a re-assessment. Refer to Section 3.5.

Refund of licence fee

If the client does not wish to pursue the return of a licence that has been suspended by VicRoads, the client can ask for a refund of the remaining licence fee. This refund will need to be applied for in writing and will commence from the date of the written application.
A refund is normally given for a licence that has been voluntarily surrendered to, or cancelled by, VicRoads on receipt of the licence. Refunds are not available when the licence is cancelled due to traffic offences. There are no refunds for relinquished learner permits. Refunds are on a pro-rata basis, determined by the number of months until expiry. There must be more than one month licence currency remaining. An administrative fee is deducted. All refund requirements are specified by legislation.

1.9 Drink driving and drug offences

Please note that the information presented here is current at the publication date. As legislation and requirements change, it is advisable to always check VicRoads website for specific details.

Relicensing requirements

There are a range of drink driving and drug driving offences which may result in the cancellation or suspension of a licence/permit (either by a court or by an infringement served by police). Further information can be obtained from the VicRoads website: vicroads.vic.gov.au, by searching for drink driving or drug driving.

Drink driving and drug driving offences can have varying penalties and relicensing requirements, including an alcohol interlock condition (based on the age of the offender, licence status of the offender, BAC reading at time of offence and previous drink drive offence records). It is appropriate in all cases to contact VicRoads Medical Review to obtain information about requirements.

General information about relicensing requirements can be obtained from the printable PDF ‘Getting your licence back’ available from the VicRoads website.

Drink driving programs

Completion of an accredited drink driving or drug driving program may also be required.

All second time offenders or those who have committed a serious offence (reading above 0.15 BAC, driving under the influence, or refusing to give a blood or breath sample) must undergo one or two assessments of alcohol use problems, depending on when the offence was committed. Costs and length of time for assessments vary.

Multiple agencies across Victoria offer drink and/or drug driving programs and assessment services. For a directory of accredited driver education and assessment agencies and their locations call DirectLine 1800 888 236.

Obtaining a Licence Eligibility Order

Where certain offences have been committed, a Licence Eligibility Order will be required before the offender can approach VicRoads to obtain a licence or permit. To obtain a Licence Eligibility Order, the offender will need to contact the registrar of their nearest Magistrates’ Court to arrange for a court hearing. This will incur a fee.

Police will usually interview the offender before the matter is heard and in most cases the offender will be required to complete a drink driving program.

The Magistrate must be satisfied that the offender is suitable to be relicensed before issuing a Licence Eligibility Order.

Typically the following offences require a Licence Eligibility Order:

- some offences of 0.07 BAC or higher, and all offences at 0.10 BAC and higher
- any second or subsequent drink driving offence
- all serious offences including drink driving, culpable driving, and dangerous driving causing death or serious injury.

Generally, a drink and or drug driving offence committed within 10 years of the current drink and or drug driving offence is considered by the Court to be a repeat offence. Contact VicRoads for details whenever two offences exist.

Any full licence holder required to obtain a Licence Eligibility Order will have a Z (zero blood alcohol) condition placed on their licence. This restricts them to a zero BAC limit for at least three years.

Interstate offences

Interstate drink driving offences can be regarded as previous offences. Where an interstate offence has been recorded, contact VicRoads regarding relicensing requirements.

Alcohol interlock condition

Most drivers who commit a drink driving offence are required to fit an approved alcohol interlock to any vehicle they drive upon being re-licensed with an ‘I’ Condition.

An alcohol interlock is an electronic breath testing device, wired to the ignition system of the vehicle. A vehicle fitted with an alcohol interlock will not start unless the driver passes a breath test via the interlock. Drivers subject to an interlock requirement will have an ‘I’ condition on their driver licence or learner permit and are not permitted to drive any vehicle not fitted with an interlock.

Interlock requirements have implications for the procedure for conducting the on-road Occupational Therapy Driving Test for a driver with an alcohol interlock licence condition. Refer to section 3.2
SECTION 2
Pre-Assessment Clearance

OTs require a clearance from VicRoads Medical Review prior to proceeding with a driver assessment.

This is required to ensure that the client:

- has a valid driver licence,
- is legally permitted to drive in Victoria, and the OT is aware of any driver licence/learner permit conditions and
- provided with medical and eyesight reports (if required).

This section describes the process for obtaining VicRoads Medical Review clearance to proceed with the Occupational Therapy driver assessment. Procedures for obtaining medical, eyesight and OT clearances prior to the assessment are described. An attempt has been made for sections to follow a chronological order, although this may vary depending on client circumstances and models of driver assessment practice.

2.1 Medical clearance

Medical clearance, with reference to fitness to drive criteria, must be obtained before conducting an Occupational Therapy driver assessment. VicRoads requires a medical report from a medical practitioner, before giving clearance for the client to proceed with the Occupational Therapy driver assessment to obtain or retain a licence. Depending on the client’s medical conditions and licence status, VicRoads may require further information and request additional medical reports (e.g. neurology, psychiatric, geriatrician, eyesight), prior to providing clearance to proceed with an Occupational Therapy driver assessment. The reasons for seeking additional reports include to confirm that:

- The client meets the minimum standards of medical fitness required to hold a driver’s licence. These are described in the Assessing Fitness to Drive guidelines (2016).
- The client’s condition(s) is/are stable and the client is medically capable of, and at the correct stage of their recovery or rehabilitation, in order to complete an Occupational Therapy driver assessment.

Medical reports

Medical reports completed using VicRoads standard medical report form are preferred. VicRoads is developing an electronic process for completing and submitting medical report forms. Currently PDF copies of the medical, eyesight and psychiatric fitness to drive forms can be obtained from the VicRoads website.

An alternative form of medical report is acceptable provided it:

- is completed by a qualified practitioner,
- is on the practitioner’s letterhead,
- provides details of the conditions relevant to assessing fitness to drive and
- indicates that the client does/does not meet the national standards of medical fitness to drive.

This also applies to eyesight related reports (see section 2.2).

Medical and eyesight reports are considered to be valid for six months.

If the doctor advises Medical Review that the client meets the national fitness to drive standards, but still requires an Occupational Therapy driver assessment, VicRoads will write to the client requesting that they complete an Occupational Therapy driver assessment and provide the Occupational Therapy Driver Evaluation Report to VicRoads.

A condition may be placed on an individual’s licence as a result of information provided by the doctor. For example, an X condition can denote a number of different licence conditions (Refer to Section 5). The X condition can include restricting the client to drive only if accompanied by a driving instructor and/or OT in a dual control car. An X condition is placed on the licence if:

- the doctor advises that the client does not meet the national fitness to drive standards, but requires an Occupational Therapy driver assessment,
- the doctor indicates on the medical report form that the driver is not fit to drive in the period between reporting and fitness to drive assessment outcomes, and/or
- Medical Review has other information indicating that the driver should not be driving unaccompanied.
VicRoads may request additional reports of various types including specialist reports, tests or investigations and/or may refer reports to VicRoads medical advisers for specialist transportation medicine review and advice.

**National standards for medical fitness to drive**

VicRoads will comply with the national standards of medical fitness (Assessing Fitness to Drive Guidelines 2016) and will not allow a person who does not meet the guidelines to drive, regardless of the outcome of an assessment.

For example, a person with uncontrolled seizures or a significant visual field impairment may be able to demonstrate their ability to drive within an assessment context, however their condition alone may be associated with high road safety risk. The guidelines provide clarity regarding whether individuals with such conditions are permitted driving privileges. If the guidelines are not clear about particular conditions/criteria, contact VicRoads Medical Review staff to discuss.

### 2.2 Eyesight clearance

**National Vision Standards**

These are shown on the back of VicRoads fitness to drive Eyesight Report form and in the Assessing Fitness to Drive Guidelines (2016).

**Visual field defects**

In the case of a private vehicle driver, if the horizontal extension of a person’s visual fields are less than 110 degrees but greater or equal to 90 degrees as formally defined by visual field mapping, an optometrist/ophthalmologist may support granting of a conditional licence. There is no flexibility in this regard for commercial vehicle drivers.

VicRoads Medical Review may request an eyesight report prior to providing clearance to the OT to proceed with the assessment. Any clients with a condition where visual field loss may be present (e.g. stroke, diabetic retinopathy, acquired brain injury, glaucoma or macular degeneration) will be asked to provide an eyesight clearance including visual field mapping. Clients with any significant field defect or a progressive eye condition require a Binocular Esterman Test. VicRoads may refer any reports and test results to VicRoads Medical Advisers. For clarification of visual guidelines, it is advisable to refer to section 10.2.2 of Assessing Fitness to Drive (2016).

An Occupational Therapy driver assessment must not occur without first obtaining clearance from VicRoads Medical Review.

Clearance requires:

- an up to date eyesight clearance from an ophthalmologist or optometrist: the relevant practitioner will depend on the nature of the underlying disease/eye condition and any relevant co-morbidities.
- a supportive eyesight report, which must include visual field mapping

Eyesight reports are generally valid for 6 months.

VicRoads may refer cases of homonymous hemianopia and quadrantanopia (where the impaired quadrant is likely to impact on safe driving) to its medical advisors for an opinion about suitability to hold a licence and suitability for an on-road assessment, if the eyesight specialist has:

- reported fit to drive, but the visual field results appear to be incompatible with the national guidelines
- requested an Occupational Therapy driver assessment to provide a practical assessment of driver capacity.

**Visual Acuity**

Visual acuity should be measured for each eye separately. A minimum standard of 6/12 Snellen (binocular) must be achieved with or without corrective lenses. As per the 2016 Assessing Fitness to Drive Guidelines, more than two errors on any line is considered a fail and the driver should be referred to an eye health practitioner (optometrist or ophthalmologist depending on the nature of the underlying condition/impairment and any relevant co-morbidities).

**Corrective lenses**

The Occupational Therapy off-road assessment involves a visual acuity test, both with corrective lenses (if worn) and without corrective lenses. If the person cannot achieve visual acuity of 6/12 without corrective lenses, then corrective lenses must be imposed as a licence condition.

If the person can achieve visual acuity of 6/12 unaided, but there is a concern about deteriorating vision or there is a possibility that vision could continue to improve or deteriorate, it may be appropriate to recommend to VicRoads that a periodic vision check is required.

**Commercial and heavy vehicle licence applicants**

Commercial licence holders that are heavy vehicle and/or passenger vehicle drivers are required to meet stricter standards for vision. Refer to Assessing Fitness to Drive Guidelines (2016).

A conditional licence may be granted, taking into account the opinion of an ophthalmologist or optometrist, and the nature of the driving task.
This is subject to periodic review if the person’s vision is worse than 6/18 in the worse eye, and provided that the visual acuity in the better eye is 6/9 or better, after consideration of the nature of any underlying disorder. These drivers should be advised to submit a report from an ophthalmologist or optometrist to VicRoads Medical Review.

An acuity of 6/12 in both eyes is a legal requirement for commercial passenger vehicle drivers (taxi and bus).

2.3 Sending reports to VicRoads

It is preferred that all reports are submitted as PDF files and emailed to VicRoads: medicalreview@roads.vic.gov.au.

An Occupational Therapy Driver Evaluation report should always be sent to VicRoads Medical Review following the assessment within 5 working days.

Faxed and mailed reports are also accepted. Note that Australia Post advises allowing up to 6 working days for normal mail services (i.e. not sent priority paid).

If any report is emailed or faxed to Medical Review, the original need not be submitted. Reports may also be sent to other appropriate parties with the client’s consent. Consent should preferably be in writing and specify to whom the reports may be sent.

The OT should keep a record of this in the client’s file.

If several different types of reports are being submitted to VicRoads (e.g. OT report, neuropsychology report) via email, each one should be attached as a separate file and labelled accurately with client details, assessment type and assessment completion date for ease of reference. For example: “JohnBrownLicNo.12345678 OTAx xx/xx/2018.pdf”

All correspondence sent to VicRoads must include:

- OT’s full name (as per AHPRA registration)
- contact/practice address and phone number
- return fax number (if applicable) and/or email address

VicRoads address for reports is:
VicRoads
Medical Review
PO Box 2504, Kew VIC 3101
Fax 03 9854 2307
Email: medicalreview@roads.vic.gov.au

Urgent reports for clients who are deemed unfit to drive

For assessments involving drivers who have failed and are deemed dangerous or lacking insight, the OT must notify Medical Review as soon as practical within 24 hours via email of test outcomes. Medical review will consider the email as an interim report and review the recommendations, taking action as appropriate. The full VicRoads Occupational Therapy Driver Evaluation Report should then be submitted as soon as possible.

All urgent reports should be clearly marked urgent and the word “urgent” highlighted in the subject heading of the email or fax when sending to Medical Review. For example: “Urgent – OT Report for Mr. XYZ, licence# xxx”

If there are any concerns or clarification is required regarding previous medical/other assessments or driving tests, the OT should contact a Medical Review case manager on 03 8391 3224.

Non-compliant clients

If the OT has any concerns about a client who is non-compliant with treatment, licence conditions or recommendations regarding when/how/where to drive and/or they are driving when not fit to do so (e.g. whilst under the influence of legal/illegal substances), then VicRoads should be notified of these concerns and/or a failed test result submitted within 24 hours so that appropriate action can be taken. The person’s licence may be suspended pending interventions and/or a satisfactory medical assessment and/or on-road driving test result.

Multiple reports for one client

To assist VicRoads, only the report to be actioned should be emailed. Exceptions may apply if a client only completes part of an Occupational Therapy driver assessment and then fails to make contact for the on-road driving test component within a reasonable time frame.

Reports from different health practitioners should not be combined as one PDF document (e.g. OT and separate eyesight report). Each report should be emailed as a separate attachment, in the same email. This includes medical, eyesight and OT Driver Evaluation reports and any other fitness to drive related documents.

2.4 Temporary disabilities

Definition

There are a wide range of conditions that temporarily affect the ability to drive safely. It can be difficult to place a time line on such conditions (e.g. a temporary disability is one that has resolved within three months) as conditions affect people differentially depending on many factors including co-morbidities, rehabilitation and interventions, age and personality. The Assessing Fitness to drive guidelines provides further explanation for how to define temporary conditions (See section 2.2.3). Examples of temporary conditions include the following: when drivers experience

- a broken arm/leg, hip replacement, etc

(where a cast, if applicable, is removed and at least near to normal function is regained within three months) or
• temporary convalescence after surgery or injury with complete recovery expected, or
• the complete loss of sight in one eye.

In the case of losing the sight in one eye, the Assessing Fitness to Drive Guidelines (2016) defines that a person in such circumstances may drive after a three month period. The driver should notify this acquired disability to VicRoads as well as their insurance company, even though it will not necessarily affect their licence status.

Consideration should be given to any acuity limitations (e.g. they may previously have met binocular acuity requirements with two eyes, however after losing vision in one eye, the remaining eye may only meet minimum requirements if aided). Furthermore, for safety, the monocular driver’s ability to turn their head to capture a larger field of view with only one eye should be checked and consideration given to providing additional mirrors.

Heavy vehicle drivers who lose the sight in one eye may still comply with the conditional licence criteria if the visual acuity in the remaining eye is better than 6/9 and their visual fields meet the 140 degrees requirement. Under these circumstances they may be licensed after review by VicRoads Medical Review.

Driving with temporary disabilities and requirement to advise VicRoads

Temporary disabilities do not normally require notification to or involvement with, VicRoads Medical Review. Where there is doubt, some guidance is provided in the Assessing Fitness to Drive Guidelines (2016) and clarification can be sought from checking with VicRoads Medical Review staff.

Some temporary disabilities, recent exposure to a general anaesthetic, presence of pain and/or medical interventions (e.g. major surgery, commencing/ceasing/altering medication treatment) will require the person to stop driving until the functional status has stabilised (e.g. medication side-effects resolved).

In the simplest case this may require a person post major surgery to refrain from driving for six weeks, or with a broken left leg to only drive an automatic vehicle until the left leg function is regained. This may only be appropriate if it could reasonably be assumed that the left leg’s support device (e.g. plaster/rods/pins etc.) would not create a hazard during the driving task. This does not apply to issues affecting right leg function which would impact on safe pedal operation. In the case of an upper limb injury, clients with a temporary upper limb impairment wishing to drive with a steering aid require an OT driver assessment. (For more detail regarding steering aids and requirements, refer to Section 5.5)

Removal of temporary licence conditions

People with temporary disabilities who undertake a VicRoads test will be treated as if the disability is permanent.

For example, if a person attends with a broken left leg in a cast and completes a VicRoads GLS Drive Test in an automatic transmission vehicle and passes, then an automatic transmission condition will be imposed on the licence. In these circumstances, if a manual licence is desired, it may be in the applicants’ interest to wait until the disability or injury has been resolved before attending for a test.

If a steering aid has been recommended by an OT and the upper limb function has improved, then VicRoads would normally require an Occupational Therapy driver reassessment to remove the condition. In rare cases, a medical practitioner may provide sufficient rationale for licence conditions to be removed without an Occupational Therapy driver assessment. Any queries regarding removal of licence conditions can be directed to the Medical Case Managers at VicRoads Medical Review.

2.5 Occupational Therapy clearance to proceed with assessment

The OT must ensure that VicRoads medical review has received a satisfactory medical report and eye sight report (if relevant) for the client prior to seeking approval to conduct an Occupational Therapy driver assessment.

Occupational Therapy process

A clearance must be obtained from Medical Review prior to proceeding with the Occupational Therapy driver assessment, so that any issues with the licence status can be identified. This may include; licence suspension due to demerit points, licensing conditions such as requirement to drive with an interlock, court attendance or court imposed drug/drink course completion, obligations associated with international/interstate licence holders.
These requirements will take priority over medical issues and may delay driver assessment.

A specific OT clearance request form is not required when seeking clearance. The request for clearance should be sent via email, stating in the subject line or body of the email that it is a ‘clearance request’. Name of client, licence number (if known), address and date of birth, must be included to enable VicRoads to identify the person concerned and locate any existing records. A separate email must be sent for each clearance request – not multiple requests in the one email.

OT clearance requests may be sent by administrative support staff working with the OTs’ employing organisation, but must include the:

- organisation or OT’s name,
- telephone number,
- contact address, or
- return email or
- return fax number (if available)

VicRoads will confirm the client’s licence status, OT clearance status and other information by email. Faxed requests are acceptable, however email is preferred as correspondence is stored and more easily tracked.

Note that if the client has a letter from VicRoads advising that they require an Occupational Therapy driver assessment, the OT should still seek clearance from VicRoads prior to proceeding with the assessment, to ensure the

- client’s licensing status/issues have not changed since the letter was sent, and
- the letter the customer has is the most recent relevant VicRoads correspondence.

If the client presents with a current medical report, the OT may advise the client to also obtain an eyesight clearance, if indicated. The medical report and eyesight reports should be emailed to Medical Review seeking VicRoads clearance to proceed with the driver assessment, stating the reason for the assessment (eg. if the purpose of the assessment is to assess the impact of a medical condition on driving for work, this should be stated)

- If the Occupational Therapy driver assessment can proceed, the response from Medical Review will outline current licence conditions with descriptions and reason for the Occupational Therapy driver assessment such as:
  - Police report received – crash
  - Police report received – incident
  - Confidential notification
  - Medical advice
  - VicRoads determined (if the client has failed two or more medical review driving tests or previous Occupational Therapy driver assessments)

Only information based on the current review will be forwarded to the OT. This may include medical, eyesight or specialist reports. If further information (e.g. concerning safety) is required, the OT will be advised to contact the Medical Review case managers.

If the client has failed two or more Medical Review Driving Tests, the OT will be advised. Medical Review may request an updated medical report and/or an Occupational Therapy driver assessment to assist in determining whether there may be either an undisclosed or underlying, but as yet, not formally diagnosed medical condition.

Copies of the Medical Review Drive Test report are not available to the OT, however the medical case managers can be contacted to offer advice and relevant details of previous test outcomes via telephone. For example, if concerns arise as a result of the off-road assessment.

If the client failed recent Occupational Therapy driver assessments, the OT will be advised of the number of unsuccessful attempts. Copies of these assessments are not available.

There is no limit to the number of Occupational Therapy driver assessments that a client can undertake. Appropriateness of the assessment is considered on a case by case basis and will take into account factors such as whether the client has a deteriorating or improving condition, Assessing Fitness to Drive Guidelines, licence conditions and outcome of any driver rehabilitation.

VicRoads Medical Review process

Medical Review will respond to the OT clearance request whenever possible within 5 working days. The following information will be provided:

- If the Occupational Therapy driver assessment cannot proceed, Medical Review will outline why. For example, a client has a suspended licence/ court order/drink driving course requirement or a specialist report is required. Medical Review will write to the client outlining what they have to do to receive clearance to proceed with the Occupational Therapy driver assessment.
SECTION 3
Assessment

This section describes the processes involved in conducting the Occupational Therapy driver assessment, special assessment circumstances, assessment outcomes, reporting procedures and complaint/appeal processes.

3.1 Conducting the assessment

Driving instructor requirements
Driving instructors involved in the on-road OT driving test must hold a Driving Instructor Authority (DIA), from the Taxi Services Commission (phone 1800 638 802), which includes the requirement for a full driver's licence, Working with Children Card, police check and medical certificate to obtain the DIA. This is issued by the Taxi Services Commission (TSC) who are responsible for all matters involving driving instructors.

It is an offence to teach or instruct for financial gain or in the course of a trade or business without a DIA.

In addition to:
- DIA must be displayed in the vehicle
- DIA is only valid while a driver licence is valid
- DIA can be cancelled or suspended following due process by the TSC (for failing to comply with driving instructor legislation, improper behaviour etc)
- driving instructor is deemed to be in charge of the vehicle whilst the person being instructed is driving, and
- driving instructors are subject to zero blood alcohol whilst instructing.

For all enquiries contact the Taxi Services Commission: Tel. 03 8683 0768, or 1800 638 802 (toll free).

Role of driving instructors
Unless there are special reasons and extenuating circumstances (refer to section below on ‘Assessment in the client’s car’), all on-road OT driving tests will occur with a driving instructor in a driving instructor’s vehicle with dual controls to enable the instructor to maintain the safety of the vehicle. When selecting a driving instructor and assessment vehicle, the OT should consider the make and model of the vehicle and/or adaptive equipment that the driver could or normally would use and if possible, try to match these requirements in the test vehicle.

During an OT driving test the driving instructor:
- is required to maintain the safety of the vehicle,
- may give instructions to the client, and
- can interact with the driver and OT as appropriate.

During an OT driving test, instructors must behave in the same manner as required for a VicRoads conducted test.

They must act in a professional manner at all times and not prompt inappropriately or attempt to influence the client’s behaviour. The OT needs to ensure that the driving instructor does not prompt the client either non-verbally (hand/foot/head movement), or verbally or attempt to influence the OT.

Prompting by instructors is normally only an issue if the instructor has met the client previously (e.g. provided lessons). However, it may also be an issue if the client sees the instructor move (e.g. to slow the vehicle) and subsequently reacts in response to this action.

There are a limited number of driving instructors experienced in OT driving tests and teaching clients with disabilities, and only some of those have access to a range of adaptive equipment. These instructors are aware of the different requirements of an OT driving test as compared to a VicRoads entry level licence test (GLS Drive Test) however they may not be aware of the requirements of the VicRoads Medical Review Driving Test (MRDT) (see section 3.9).

Driver Under Instruction plate
Learner permit holders are required to display ‘L’ plates when undergoing assessment or training. Probationary or fully licensed drivers undergoing assessment or retraining may need to display ‘Driver Under Instruction’ or ‘Driver Under Assessment’ plates.
A Driver Under Instruction plate is used in legislation to refer to two separate requirements;

- **Mandatory requirement**
  
  Regulation 15 of the Road Safety (Drivers) Regulations 2009, requires a Driver Under Instruction plate to be clearly displayed on the vehicle for learner drivers. For the purpose of OT driving test, either a driver under instruction or assessment plate is acceptable.

  The plate referred to in legislation is: ‘a yellow plate measuring approximately 150 mm by 150 mm inscribed in black letters with the words “Driver Under Instruction”.

- **Non-mandatory requirement**
  
  Legislation allows people who need to develop new skills, for example learning to drive a vehicle with manual transmission, using hand controls or other adaptive equipment, or undertaking refresher lessons due to disease, trauma, a crash or a lack of current skills, to display a Driver Under Instruction plate. However there is no legal requirement for them to do so.

**Use of advanced vehicle technology**

The following driver assistance systems, if present in the test vehicle, may be in operation during the test:

- automatic transmission
- anti-lock braking
- electronic stability control
- electronic traction control
- autonomous emergency braking

If during the test the OT or driving instructor detects that the autonomous emergency braking system has stopped or slowed the vehicle, a Fail Error (Intervention) should be recorded UNLESS:

- the OT or driving instructor considers the system did not operate correctly and the braking was unnecessary to prevent a collision, or
- the OT or driving instructor considers that the need for emergency braking was entirely due to an error by another road user, with no contribution by the client.

Other driver assistance systems, if present, must be switched off (if it is possible to do so) during the test. This includes (but is not limited to):

- cruise control
- over-speed warning
- satellite navigation
- head-up display/reversing camera(s)
- blind spot assist
- lane keeping assist
- lane changing assist
- parking assist.

Consistent with the current (December 2016) requirements that apply to the (entry level) GLS Drive Test and the MRDT, for the Occupational Therapy driver assessment:

- Vehicles with these driver assistance technologies are still suitable for OT driving testing.
- Where any system cannot be switched off in the driving instructor vehicle, the applicant should be advised that they must perform all required:
  
  - visual and blind-spot checks
  - speed control
  - vehicle positioning
  - application of secondary control tasks (e.g. indicators, windscreen wipers) as though the driver assistance system was not present

If the lane keeping assist system engages during the formal test and no other driver has been affected, the OT may record this as a Performance Error (Lateral Position or Turning Movement). If the system engages and prevents the applicant endangering another vehicle/road user, the OT may use their own judgement to assess the manoeuvre as per the OT driving test criteria and, if appropriate, record this as a Fail Error (Intervention).

If the lane keeping assist system engages during the formal test and no other driver has been affected, the OT may record this as a Performance Error (Lateral Position or Turning Movement). If the system engages and prevents the applicant endangering another vehicle/road user, the OT may use their own judgement to assess the manoeuvre as per the OT driving test criteria and, if appropriate, record this as a Fail Error (Intervention).
The OT should check with the driving instructor prior to the test whether these systems are present in the test vehicle or if present, are switched off if it is possible to do so.

If the OT has recommended the use of advanced vehicle technology as a compensatory strategy, then it may be used during the test for the purpose of assessing whether the client is able to use it appropriately and safely. This should then be recommended as a condition on the client’s licence.

**Assessment in the client’s car**

All on-road OT driving tests should be conducted in a dual control vehicle in the presence of a driving instructor to ensure the safety of the vehicle occupants and other road users. OTs should also be aware of their insurance coverage and any obligations/exclusions associated with this.

The decision to conduct an OT driving test in the client’s car should only occur under exceptional circumstances and must be made in consultation with the client, driving instructor, vehicle modifier and VicRoads Medical Review if applicable.

In all cases, both the OT and driving instructor must feel safe and the assessment must be conducted in the usual way. For instance, it may be appropriate to consider assessing in the client’s car if there is a significant difference between the client’s and the instructor’s car. For example if the client

- has an older model car without power steering, where an assessment in the instructor’s car (which has power steering), may not accurately reflect the ability of the client to drive the vehicle normally used, or
- has special modifications or seating fitted. In some instances it may be appropriate to have a dual brake system installed in the client’s car for training and assessment purposes, or
- has demonstrated capacity to drive in an instructor’s vehicle and transfer of skills must be ascertained in a car with significantly different features.

For assessment in a client’s car to be considered, the driver must be licensed, without a condition to drive in a dual control car and the vehicle to be used for the test must be registered and roadworthy.

In all cases, consideration of insurance requirements and OH&S policy issues associated with OT and driving instructor employment conditions must be taken into account.

**Testing in adverse weather conditions**

OTs should consider whether it is appropriate to conduct the assessment if the weather conditions are adverse. High temperatures or very heavy rain may affect the client’s performance during the test and/or prior to the test while travelling to the test.

For example, when the temperature exceeds 38 degrees Celsius it is recommended that an on-road OT driving test should not be conducted unless the test vehicle has an air conditioner in working order.

This is consistent with VicRoads licence testing standards.

**Seatbelt exemptions**

All drivers and passengers must wear a seatbelt or appropriate restraint, as such devices offer valuable road safety benefit in the event of sudden braking or a crash. However there are provisions for vehicle occupants to have exemptions under extenuating circumstances. According to road rule 267 (3A) of the Road Safety Road Rules (2009) a person can be exempt from wearing a seatbelt if a registered medical practitioner has issued a certificate stating that because of a disability or medical condition, it is impractical, undesirable or inexpedient that the individual wear a seatbelt and the certificate:

- is signed by a registered medical practitioner, and
- contains an expiry date which has not expired, and
- the conditions stated in the certificate (if any) are complied with.

Note that not wearing a seatbelt is associated with significant risks, and non-compliance with seatbelt or restraint use is usually associated with fines and other consequences. Vehicle occupants who seek to obtain an exemption from their registered medical practitioner should be advised of the;

- risks associated with not wearing a seatbelt
- need to regularly update the certificate so that it meets the requirements outlined above (and in the Road Safety Road Rules, 2009)
- requirement to carry the medical practitioner certificate on their person whenever they travel in a vehicle in case they are asked to supply such a certificate by a law enforcement officer
3.2 Occupational Therapy Assessment and special circumstances

Interpreters
An interpreter may be required during both the off and on-road assessments for individuals who are unable to understand and/or communicate in English. A professional interpreter should be used and the OT should provide education to the interpreter about their role during the assessment and the purpose of the assessment. The interpreter should be aware that their role is to provide a direct translation of the OT or driver instructor directions or instructions and that no prompting is allowed. The interpreter will be seated behind the driver during the on-road driving test.

Hearing impaired clients
An Auslan interpreter may be required for assessing an individual with a hearing impairment or alternatively, an instructor fluent in Auslan may be sourced. Consider the additional time required to discuss with the instructor and interpreter how the assessment will be conducted. Extra stops may be needed to relay instructions. Contact VicDeaf for advice or refer to the website: vicdeaf.com.au

Overseas licence holders
New Zealand residents with a current driver licence are treated as interstate drivers.

Requirements for overseas licence holders
The rules regarding licensing and conversion to Victorian licence requirements for drivers who hold an overseas licence can be found on the VicRoads website.

In Victoria, there are different licensing requirements for overseas residents/visitors, depending on which country the overseas licence was issued in and whether they hold a temporary or permanent visa. Countries are classified according to whether the overseas licence is
- recognised in Victoria, or
- from a country where the driver’s experience is recognised in Victoria, or
- from a country where the licence is not recognised in Victoria.

A list of these can be found on the VicRoads website on the aforementioned link. Refer to section 8.5 for further details regarding overseas licence holders.

If a driver with an overseas licence is referred for an Occupational Therapy driver assessment, their licence must be verified as valid by VicRoads before a clearance to proceed can be obtained from Medical Review.

The driver must make a verification appointment with a VicRoads Customer Service Centre so that the licence can be verified. Once it has been verified, VicRoads will create a licence number and will then have a record of the driver and OT clearance can be sought to proceed with the assessment.

Medical review clearance
A current and satisfactory fitness to drive medical report is still required by Medical Review. The OT may need to contact Medical Review for advice, as case by case considerations may apply ahead of conducting any Occupational Therapy driver assessment (as per the usual process). The following details are to be provided to Medical Review:
- the overseas licence number and country of issue,
- the new VicRoad’s reference number provided to the client once their licence has been verified,
- the clients full name, address, date of birth and contact telephone number.

Consideration will be given on a case by case basis and the following factors will be considered:
- satisfactory verification to ensure the validity of the overseas licence
- recognised or non-recognised country/experience

What happens if the client passes without licence conditions?
If the client passes the Occupational Therapy driver assessment without the need to apply any conditions, the Occupational Therapy Driver Evaluation report should be forwarded to VicRoads in the usual way. Depending on visa conditions and whether the overseas licence or driver experience are recognised, the client may be able to continue to drive on an overseas licence.

What happens if the client fails, requires licence conditions and/or requires driver rehabilitation?
If the client fails the Occupational Therapy driver assessment, under Driver Regulation 18 (3) of the Road Safety Act, VicRoads must revoke their privilege from driving in Victoria using their overseas licence and advise them of steps required to resume driving. This applies to all overseas licence holders regardless of the country of origin where they obtained their licence.

OTs should advise clients with an overseas licence, that if they fail the assessment, require driver rehabilitation or a conditional licence, they will not be able to continue to drive in Victoria and VicRoads will advise them of steps to follow to obtain a Victorian licence/permit.
Alcohol interlock condition

To conduct an on-road OT driving test for a driver with an alcohol interlock licence condition, it must be established that the driver has a blood alcohol concentration (BAC) of zero immediately prior to the assessment.

Some driving instructors or OTs have a breath tester. Access to breath testers can sometimes be arranged prior to the assessment at the following locations:

- public breath testers are available in some hotels, clubs and restaurants
- police stations
- hospital accident and emergency departments

Alternatively, if the client has one fitted to their car and it is accessible prior to the on-road test, this is also acceptable.

There are no specified types of breath testers that must be used. The OT should record on the Occupational Therapy Driver Evaluation Report that the BAC was checked and recorded as zero prior to the test commencing. For further details regarding alcohol interlocks, refer to the VicRoads website.

3.3 Learner Drivers

Learner drivers must hold a valid learner permit in order to proceed with an on-road OT driving test in an open road context. Refer to section 7 for details regarding obtaining a Victorian learner permit. For learner drivers with no/limited previous driving experience the on-road driving test may be completed to determine:

- the need for vehicle modifications and ability to learn to use them
- the client’s ability to follow and retain instructions
- specific compensatory or training strategies required.

For learner drivers without a physical disability, with no previous driving experience, it may be appropriate to delay the on-road driving test until a series of driving lessons have been provided.

The OT can discuss with Medical Review if any relevant X conditions should be applied to the learner permit. For example, to restrict the learner driver to only driving in a dual control vehicle with a driving instructor or for the purpose of an OT driver assessment. This condition is appropriate in circumstances where the learner driver needs specialist driving lessons and/or access to a vehicle with modifications that could not otherwise be provided for by parents or other fully licensed drivers who could legally be supervising the learner driver under the usual learner permit conditions.

When a learner driver is ready to attempt a licence test, consideration should be given to which form of licence test is most appropriate. An OT driving test can provide a more thorough and appropriate assessment of driving skills for individuals with physical, intellectual or cognitive impairments compared to the standard VicRoads GLS Drive Test. Note that the VicRoads Medical Review Driving Test is usually considered appropriate only for experienced drivers with a full licence and no significant medical or disability issues.

Ahead of undertaking the on-road OT driving test, the OT should check that the driver’s medical fitness to drive report is still current (time limit is set at 6 months from the date of the report). If the driver has a complex medical/personal history (e.g. substance abuse, prior history of significant driving related offences), the OT should check with Medical Review that the learner permit is still current and that the driver is not subject to recently imposed bans, court orders etc.

OT driving test as a probationary licence test

A person with a physical, intellectual or cognitive disability who does not hold a licence in Victoria and who successfully completes an Occupational Therapy driver assessment, does not need to undergo an entry level drive test (the GLS test) with VicRoads in order to obtain a Victorian driver licence. Section 8 of this resource describes the probationary licence requirements. However, the OT must provide a clear impairment/disability related rationale as to why an OT driving test is required in the medical clearance request (if relevant) and also within the final VicRoads Occupational Therapy Driver Evaluation Report submitted to Medical Review.

In weighing up whether the client needs to undertake the standard entry level licence test or an OT driving test, the OT should consider that whenever possible, it is desirable for learner drivers (aged 18 – 21) or those with limited driving experience, to complete the same licence test that is age and experience appropriate which the client’s peers are undertaking. Of course, if significant impairment issues and/or vehicle modifications and/or other factors apply, it may not be practicable for the client to undertake the standard probationary licence test.

Prior to completing the OT driving test as a licence test, the driver must complete the Hazard Perception Test (HPT) with VicRoads and if under the age of 21, the driver must complete, and have validated at a VicRoads Customer Service Centre, 120 hours of supervised driving practice recorded in a log book or in accordance with whatever provisions apply at the time.
Recognition of the Occupational Therapy driver assessment outcome may apply to:

- a learner driver progressing to a probationary licence.
- a previous Australian licence holder whose licence has expired for five or more years (as they will need to undergo a road law test with VicRoads and may need to do a hazard perception test, it is advisable to check with Medical Review prior to assessment).
- an overseas licence holder who is required to undergo a drive and road law test to gain their licence. (They may also need to complete a hazard perception test prior to completing the OT driving test).

While an OT driving test can be substituted for a VicRoads driving test for applicants with a functional impairment, it cannot be used as an alternative licensing option for people without a functional impairment.

For successful Occupational Therapy driver assessments, OTs should email or fax Occupational Therapy Driver Evaluation reports directly to VicRoads Medical Review. Email is the preferred option as a receipt of confirmation will be emailed to the sender.

VicRoads will review the client’s file and make the final licence decision. If the licence is granted, VicRoads will advise the client to attend a VicRoads office with their current learner permit, to pay for and have their Probationary licence issued. The client cannot drive their current learner permit, to pay for and have their Probationary licence issued. The client cannot drive independently until this is completed. Medical Review will update the client’s driver licence computer record to enable a VicRoads office to issue a licence when the client attends (provided the HPT has been successfully completed and the log book assessment has been satisfactory).

Novice driver log book

Learner drivers aged under 21, and other individuals who are directed to complete this requirement, must complete 120 supervised driving hours and record these details in a log book or by whatever means endorsed by VicRoads. The criteria for the type of driving experience required and who can legally supervise a learner driver are outlined on the VicRoads website.

The log book must be checked at a VicRoads Customer Service Centre (CSC). A sticker is placed within the body of the log book, on the last completed page, which indicates how many of the entered hours have been assessed as valid and if there are any gaps (e.g. in the number of night time driving hours). The log book assessment will be recorded on the VicRoads driver licensing system. The OT can ask the client to show them the checked log book as evidence of requirement completion.

VicRoads Hazard Perception Test (HPT)

Most licence applicants who have never held a driver licence previously in Australia must undertake a Hazard Perception Test (HPT). VicRoads requires licence applicants to pass the HPT before an on-road test is conducted. Learner permit holders must meet certain age and learner permit holding period eligibility criteria before they can undertake the HPT. The test is not available at all VicRoads Customer Service Centres. (Check VicRoads website).

Some recognised overseas drivers (as defined on the VicRoads website; vicroads.vic.gov.au) are not required to pass the HPT.

The HPT is a computer-based test completed using a mouse (no keyboard is required). The applicant must book a 45-minute time slot to complete the test at a specific CSC.

The test is available in 14 languages and practice items are available prior to beginning the formal test component. If the applicant has language/reading issues, interpreters can be supplied but need to be arranged ahead of time with the specific CSC.

The test requires applicants to recognise potential hazards and make appropriate driving decisions when presented with on-screen videos of traffic scenarios. The test was developed and based on test theory and the relevant research evidence base including what is known about novice driver behaviour, skill development and crash characteristics.

The HPT aims to address cognitive and perceptual tasks (e.g. information processing, decision making, judgement) relevant to driving and therefore it may be used as a significant hurdle requirement for those drivers with cognitive impairment.

The applicant is supplied with a print out when they complete the HPT that confirms whether or not they passed and gives them feedback on the item topics/themes which they failed. For example: “Choosing safe gaps in the traffic when overtaking”, “Improving awareness of the potential risks of unsewn road users”, “Gaining awareness of the risks created by different driving conditions”. It may be useful for the OT to request that the applicant show the print out to them prior to conducting an on-road OT driving test particularly for guiding rehabilitation interventions including briefing the driving instructor regarding potential skill deficits.

The results of the HPT remain valid for 12 months. This means the driver has to either complete an OT driving test or a VicRoads GLS Drive Test within that 12-month period.

It is recommended that the HPT is conducted prior to the final OT driving test used for licensing purposes (not withstanding the advice provided above regarding the benefits of HPT feedback).
If the OT driving test is not being conducted as a licence test, but rather as an assessment to see whether the client is ready to attempt a VicRoads GLS Drive test, then the client doesn’t necessarily need to complete the HPT ahead of the OT driving test. If the client is not successful in passing either a VicRoads GLS Drive test or an OT driving test for licensing purposes within 12 months of completing the HPT, they will have to sit the HPT again.

It is advisable to check the VicRoads website for up to date details regarding the HPT and log book requirements. The VicRoads website also links to the “DriveSmart” TAC site which includes resources to assist learners to improve skills relating to the HPT (e.g. hazard identification and timely responses). (See also resources outlined in Section 9.3).

Support available to complete the HPT

VicRoads staff are available to assist applicants with learning difficulties and/or disabilities to complete the HPT test. This can include orientating the applicant to the test procedure and computer set-up and then leaving the applicant to complete the test alone. This level of support does not require any special arrangements to be made ahead of the booked HPT session.

The applicant will be provided with headphones as all writing on the test is read aloud for the applicant via a voice-over. If the applicant requires special computer/desk/mouse set up arrangements (e.g. client must remain in a wheelchair), it is advisable to liaise directly with the VicRoads Customer Service Centre (CSC) where the customer wishes to undertake the HPT to see what accommodations might be possible.

If the applicant requires more support throughout the entire test procedure, this can be arranged as an ‘assisted test’. In these circumstances, VicRoads may allow longer than the usual scheduled 45 minute time slot.

A VicRoads staff member will sit with the applicant and explain the test, take them through the practice questions, resolve queries the applicant has and be available to provide clarification for any complex questions throughout the test procedure. The clarification provided will be within the confines of the formal test process. The applicant must complete the actual clicking of the mouse and decision making required to respond to test items.

Arranging for an assisted HPT appointment

- The assisted appointments cannot be booked over the phone or on the internet.
- They must be requested and booked in person at the CSC where the customer wishes to undertake the test.
- There is no extra cost involved for the customer.
- The date and time of the appointment will depend on staff availability at the specific CSC.

3.4 Issues presenting during the OT driving test

This section reflects a comprehensive research and resource literature review and a consultation process involving VicRoads staff (e.g. vehicle policy, operations, practice and standards), experienced OTs and other Australian jurisdictions. A risk management approach has been applied.

Using left foot on brake and right foot on accelerator during a private vehicle test

Some drivers have been taught, or have taught themselves, to drive using the right foot on the accelerator and their left foot on the brake pedal in a vehicle with automatic transmission. VicRoads advice is that the driver should only use their right foot to operate both the brake and the accelerator. The vehicle cabin has been designed to optimise right foot placement for both accelerator and brake as evidenced by the pedal locations to the right of the midline within the driver leg compartment.

VicRoads believes using both feet on pedals at the same time when driving an automatic vehicle is an unsafe driving practice. There are road safety implications when a foot rests on the brake pedal, even lightly, as it has the potential to activate the brake light, indicating to a driver following, that the vehicle in front is slowing down. If this light signal is ambiguous, it could lead to a hazardous situation due to:

- the driver under assessment braking inappropriately, or
- the driver following the driver under assessment vehicle ignoring (what appears to be due to the brake light activation) the constant braking of the vehicle in front and then not having adequate warning and response time to brake when the driver actually does brake.

The potential also exists for the driver under assessment to confuse the pedals and accidentally brake or accelerate. In an emergency situation, simultaneous braking and accelerating could negate the effectiveness of braking in some vehicles.

Some clients may want to drive a vehicle with automatic transmission with two feet operating the pedals but would need to demonstrate consistent, reliable and timely vehicle control during an OT driving test. Such a request to Medical Review would need to be carefully documented by the OT and will be considered on a case by case basis, taking account of the following (as relevant):

- habitual driving behaviour and the period (years) over which this has applied
- previous/current driving-related work/other relevant experience or history
- co-morbidities (e.g. insight, cognition, memory, behavioural, physical, sensory, chronic/deteriorating medical conditions)
• lower limb considerations (e.g. sensory/proprioceptive, motor, blood supply, prosthesis use)
• the pedal configuration in the driver’s own vehicle
• driving frequency and distances of usual drives (note that: impact of asymmetrical posture on postural/musculo-skeletal function and fatigue increases with increased driving time)

The OT should also consider:
• regular licence review to manage risk, and
• licence condition to only drive a particular make/model of car if the pedal configuration/design is unusual or modified and suits the driver.

It is recommended that the OT advise the client in writing of:
• potential postural/muscular and trunk asymmetry and stability issues, and
• possible insurance issues including that the client is advised to check with their own insurer regarding disclosure requirements relevant to how drivers use vehicle controls (as they would be driving with two feet in a vehicle designed for right foot operation).

In addition the OT could provide clients with the USA National Highway Traffic Safety Administration (NHTSA) guidelines regarding avoiding pedal confusion issues (see Appendix A).

To be able to drive using the left foot on the brake pedal and the right foot on the accelerator, a client must demonstrate within an on-road OT driving test;
  a no concurrent brake/accelerator application,
  b safe vehicle control in all circumstances evaluated during the assessment,
  c safe completion of an emergency brake task, and
  d safe completion of a 3–point turn

If the client operates the accelerator and brake concurrently during the test a fail error for vehicle operational control would be recorded.

The above guidelines have been devised for private vehicle holder licence applicants. Heavy vehicle licence applicants may be driving for longer periods and operating a range of different, larger and more complex vehicle types including those transporting passengers. Therefore the considerations are much more complex and risks potentially higher.

Managing steering for clients with two functioning upper limbs
When an individual has two functioning upper limbs, they should be encouraged to hold the steering wheel with both hands so that they have a comfortable, two-handed grip on the wheel at all times except when changing gears, operating secondary controls etc.

Two hands on the wheel optimises steering wheel control for turning movements and in circumstances when vehicle control could be compromised (e.g. needing to negotiate unexpected road hazards), especially at high speeds. At least one hand should be controlling the steering wheel all of the time. This is an on-road test requirement.

A driver with two functioning upper limbs will be permitted to attempt and pass a VicRoads or OT driving test if they drive with only one hand/arm on the steering wheel provided they demonstrate consistent safe vehicle control throughout all components of the on-road test. Clients sometimes use ‘palming’ to steer when reverse parking. Whilst this is not encouraged, provided consistent, timely and safe vehicle control is demonstrated, and the grip on the steering wheel is resumed quickly and easily, this would not result in a fail or performance error.

Safe vehicle control, including steering control, is the primary concern, rather than where hands/limbs are placed. The positioning of the hands is not the issue, although certain positions – e.g. hands on the inside of the wheel, hands together at the top (e.g. “11” & “12” location) or bottom of the wheel (“5” & “6” location) – would give less control and the hands would require re-positioning for completing manoeuvres such as turns and negotiating roundabouts.

Reinforce the need for the driver to place preferably both hands/limbs on the steering wheel in a position where they can;
  a maintain constant control of the steering wheel to direct vehicle position, and to
  b respond appropriately when external factors may impact on vehicle direction (e.g. pothole, unexpected hazard on the roadway which needs to be avoided).

Managing steering with one functioning upper limb
Operating secondary controls can be difficult for an individual with only one functional limb/hand.
Removal from the steering wheel, of the sole limb while the vehicle is in motion, is not permitted during any VicRoads licence test. A driver with one functioning upper limb must maintain one limb on the steering wheel (or steering aid) the entire time the vehicle is in motion or is being positioned in a parking bay.
Steering aid with integrated secondary controls

Safe vehicle control including steering control is the primary concern. The client should demonstrate full range of movement of the steering wheel when only using one upper limb. Adaptive equipment such as an indicator extension or integration of frequently used secondary vehicle controls into a steering aid/device (e.g. indicators, horn) may be required.

Reinforce the need for a steering aid to be placed on the steering wheel in a position where the driver can;

- maintain constant control of the steering wheel to direct vehicle position, and to
- respond appropriately when external factors may impact on vehicle direction (e.g. uneven/ gravel roads, potholes, unexpected hazard on the roadway which needs to be avoided).

Client specific tasks (additional to those required to meet the minimum task type/number for the licence test component) should be considered for inclusion in the OT driving test, for clients using one upper limb to steer (with or without a steering aid). For example, a “U” turn, full 360 degree turn around a roundabout, reverse park manoeuvre, or reversing along a straight stretch of road. Consider the driver’s home/garage/work driving environment and if they have vocational or other driving related demands which will influence the types of driving tasks they will be performing regularly.

Performing head checks

Head checks or blind spot checks can be defined as turning the head to look over the shoulder for vehicles or other road users in the adjacent roadway, bicycle or vehicle lane when changing lanes or performing a left turn manoeuvre. Head checks are also important when entering/exiting parking bays and navigating a vehicle through shared roadways where pedestrians are common, for example, in busy shopping centre, health facility carparks or when driving through strip shopping centres.

Head checks may not be required if a driver uses internal/side mirrors routinely, and at appropriate times, to check the side/rear environment external to the vehicle (as is currently the case for van/truck drivers).

The penalty for non-performance of a head check when required during a test (assuming this leads to either a verbal or physical intervention by the driving instructor) is a Fail error. This applies to both OT driving tests and Medical Review Drive Tests (MRDT).

If a client does not routinely perform head checks, but uses the internal and side mirrors appropriately, it is recommended that the OT addresses the following;

- Reinforce the minimum current requirements but advise the client about the benefit of blind spot checking for other vehicles, and especially for motor-cycles, bicycles and pedestrians that can more readily be concealed in a blind spot.
- Ask the driver to demonstrate neck rotation capacity whilst sitting in the driver’s seat.
- Assess the need for additional external or internal mirrors (e.g. convex mirrors), or other driver aids (e.g. reversing cameras which can be installed as an “add on”).
- Demonstrate and provide the opportunity for the driver to practice, the use of compensatory techniques to optimise use of mirrors if restricted neck rotation impacts on comfortable use of mirrors. (For example, when checking external side mirrors, leaning forward to extend the viewing angle – as van and truck drivers do.)

Other considerations include;

- If the driver requires additional or larger internal/ external mirrors these may need to be stipulated as a licence condition.
- The nature of previous driving experience reported by the driver (e.g. caravan towing, heavy vehicle driving) as habits developed whilst driving this style of vehicle may be transferred to driving sedans.
- If mirror checking was conducted regularly and during critical times during the assessment (e.g. lane-merge during high speed driving/ congested conditions, or when driving adjacent to bicycle lanes.)

Stopping the OT driving test

If the OT or driving instructor judges that due to driver behaviour or performance the test cannot be completed safely and it is too dangerous to continue, a Fail error is recorded:

- at the end of the familiarisation period or
- at any time during the licence test.

For further details refer to the Occupational Therapy Driving Test: Assessment Manual (2018).
3.5 Occupational Therapy driver assessment outcomes

There are several possible outcomes of an Occupational Therapy driver assessment. These include:

1. **The client passes and the licence remains unchanged**

   If the client holds a current licence to drive, and it is in their possession, driving can commence immediately subject to any pre-existing conditions on their licence. The OT must send the Occupational Therapy Driver Evaluation Report to VicRoads as soon as practical after the assessment.

   If there are any conditions or restrictions to be applied, varied or removed please see below.

2. **The client passes with application, variation or removal of licence condition/s.**

   OTs can recommend a variety of licence conditions to support safe driving. Licence conditions may include: only to drive a vehicle with modifications and/or automatic transmission, permitted to drive only within a specified area or only at certain times (no night driving or during peak hour), or passenger restrictions (Refer to section 5.1). If a condition is to be removed, varied or added to a licence, the client must wait for confirmation from VicRoads before driving.

   If for example, they hold a licence and the OT recommendation is to vary the licence condition (e.g. to extend a kilometre area restriction from 10km to 15 km), the driver may continue to drive within the existing 10km radius restriction but must wait for confirmation from VicRoads before driving within the additional area.

   If the client was assessed as “fit to drive” but the OT advises the client to have “X” number of driving lessons to (for example) provide experience in certain conditions or improve confidence, then this should also be stated on the Occupational Therapy Driver Evaluation Report (Record as "advisory comments"). In such circumstances, an X condition is not usually relevant to be placed on the licence, as the driver has met the requirements for independent driving by passing the test. In such circumstances, VicRoads would consider the OTs “pass” recommendation and would not follow up with the driver to confirm whether they have completed the driving lessons.

   It is the responsibility of the client to check with their vehicle insurer about disclosure requirements regarding licence conditions, vehicle modifications or driving styles (e.g. using two feet for pedal control in an automatic transmission vehicle). Some drivers may not be aware of such obligations. It is recommended that the OT both advises clients to make such enquiries and also keeps a record of their communication in the client’s file.

3. **The client fails**

   If the client fails the licence test component of an Occupational Therapy driver assessment the OT must recommend to VicRoads that the client’s licence be suspended or cancelled or that conditions be placed on the licence to permit driver rehabilitation. Licence conditions can be recommended without the need to suspend a person’s licence.

   Medical Review must be notified as soon as practical within 24 hours via email when a client’s driving performance during a test is considered potentially dangerous and they demonstrate low insight or compliance. In such instances, it is important to communicate the circumstances surrounding the failed assessment. This is particularly important for clients who undertook the assessment without undertaking or completing driving lessons (e.g. without an X condition on their licence restricting their driving to a dual control vehicle with a driving instructor or for the purpose of a licence test). The email correspondence will be considered as an interim report and is sufficient to contribute to VicRoads decision making. Medical Review will consider the recommendations within the context of the drivers’ Medical Review history and take appropriate action. The Occupational Therapy Driver Evaluation Report should then be forwarded as soon as possible.

   Possible options following an unsuccessful OT driving test include:

   - **Licence suspension**
     A suspension means the client cannot legally drive whilst the licence is suspended, including for driver rehabilitation, i.e. the licence is “on-hold”. Placing a suspension on a licence makes it easier to reinstate the licence in the future. Suspension is suitable for those clients who have the potential to improve their functional status and related driver skills but not at the point in time when the Occupational Therapy driver assessment was conducted.

   - **Licence cancellation**
     Cancellation, on the other hand, means that the client is not legally permitted to drive and the licence is formally cancelled. If in the future, the client’s functional status and skill capacity changes, they would be required to enter the licence system again, with the requirement to pass certain road law and/or on-road tests prior to having the licence reinstated. The client is responsible for all costs related to any tests and the reissue of a driver licence.

A cancellation has more wide-reaching consequences than licence suspension. For this reason, OTs often refer clients who are highly unlikely to ever resume driving to support services. This may be very important as clients may need assistance to adjust to both the emotional response and practical ramifications of being unable to drive.
It is important for the OT to document on the Occupational Therapy Driver Evaluation Report that the client was referred to support services (stipulating which ones) and/or provided with relevant information. Possible support services may include referral back to their treating doctor, generalist OT, other health professional/aged care support worker at their local community health centre or council aged care staff. The OT may also refer the client to relevant RACV and VicRoads materials such as ‘Getting Around Without a Car /Transport Options for Seniors’ or to relevant disability support organisations such as Traveller’s Aid, the National Dementia Hotline 1800 100 500 or My Aged Care website; myagedcare.gov.au

**Local area licence test recommended**

If the client attempts a test for an open area licence and fails, the OT cannot automatically recommend the licence be retained with a local area condition. The licence can be retained with a local area condition only if the client subsequently passes a local area test conducted in the relevant geographic area. If a client attempts a test for an open area licence and fails, the OT may consider it appropriate to suggest the client attempt a test for a local area licence. This would usually be conducted during a separate on-road session, since it is unlikely there would be enough time to conduct two tests in the same session, especially if the open area licence test was conducted some distance away from the area where the local area licence test is to be conducted.

**Driver rehabilitation followed by a further OT driving re-test**

Driver rehabilitation may include driving lessons with a driving instructor to learn to use vehicle modifications, compensate for any disability, update or develop driver skills, including modifying or changing driver behaviour. An Occupational Therapy Driver Evaluation Report should be submitted to Medical Review reporting the test performance, impairment issues and skill deficits identified and recommending driver rehabilitation followed by a re-test. The evidence and clinical reasoning to justify these recommendations must be clearly documented within the report.

An X condition will be added to the licence (if not already added) stating that the client either;

- **a** must not drive except with a driving instructor in a dual control vehicle or for the purpose of undertaking an OT driving test (helpful if the driver needs only supervised driving lessons with an instructor and for safety reasons, only in a dual control vehicle), or
- **b** must only drive with a fully licensed supervising driver. An appropriate use of this condition would be for novice drivers, who require additional driving practice for a set period of time. It would only be requested if dual controls are not required for safety reasons and a supervising driver, such as a parent, is readily and willingly available. For safety and peace of mind, the supervising driver could consider having a brake pedal installed on the passenger side. This condition is not intended to be used by a client who has been assessed as unsafe to drive independently and wishes to continue to drive with a co-driver.

Note that the client must have a valid licence for an X condition to be applied. If the licence is suspended or cancelled, VicRoads will need to lift the suspension or reissue the licence to add the X condition.

**Driving lessons**

Driving instructors who give driving lessons to functionally impaired clients need to use appropriate training methods to accommodate the driver’s past experience, current skill level and communication/impairment needs. The driving instructor must focus on particular aspects of driver knowledge and skill (as directed by the OT) in order to improve the safety, reliability and timeliness of the client’s driving performance to meet licensing standards. Instructors should not focus on teaching clients “how to pass a licence test” (e.g. by providing experience only along a specific test route).

The goals of driving lessons are formulated by the OT taking into account both off and on-road assessment results. These are discussed with, and/or provided in a written format to, the driving instructor. A sample template is provided in the Toolkit provided in the Occupational Therapy Driving Test: Assessment Manual (2018).

Written communication should include client and any funding details, number and goals of lessons and any other relevant information e.g. specific types of vehicle modifications to be used, timing/length of lessons or suggested compensatory strategies to ameliorate impairments or communication issues. The design of the form should incorporate a section for the instructor to document feedback immediately after each lesson so that this information is captured in detail and available for reviewing rehabilitation progress.
The client can supply their own instructor for an on-road driving test and lessons if they so choose. The OT can explain any driving instructor related requirements as relevant to the client’s circumstances (e.g. driving instructor familiarity with test route and procedure, disability-related experience, appropriate skill set for training with particular vehicle modifications, geographical location for lessons/testing).

If the client wants to use their own driving instructor, this needs to be discussed well ahead of the scheduled time for the driving test (e.g. often several weeks ahead of the appointment). Furthermore, as the OT leads the assessment and any rehabilitation requirements, and is required to report to VicRoads, health and other organisations, the OT should be satisfied that the instructor:

- is a current holder of a DIA (Driver Instructor Authority) which is required to operate as a driving instructor in Victoria,
- can maintain safety (i.e. is capable, suitably qualified and experienced and is aware of potential safety requirements when working with clients with impairments/disabilities),
- can access required modifications or aids if not supplied by the client,
- is aware of both the OT’s lead/co-ordination role and the instructor’s collaborative role in the medical review and driver rehabilitation process,
- preferably has some prior experience with people/drivers with disabilities and can provide a suitable training style to support the driver’s skill development or rehabilitation goals,
- has a roadworthy test vehicle in a satisfactory condition which suits the client’s needs (e.g. vehicle make, model, ability to accommodate adaptations and switch off automatic functions when not required), and
- agrees to provide the OT with the required verbal/written feedback regarding driving lesson outcomes.

Re-test after lessons

An OT driving re-test is usually required after driving lessons, to determine whether the driver has resolved performance deficits, learnt compensatory skills, benefitted from remediation and/or learnt how to use vehicle modifications or adaptations to an extent that they can now meet licensing standards. The OT would make this decision on a case by case basis, depending on client needs, progression through rehabilitation/the re/licensing process and the goals of the driving lessons.

As mentioned previously, at times a client may pass the OT driving test (has demonstrated performance to meet the licensing standards) and driving lessons are advised (rather than recommended as compulsory) to address self-confidence or provide supervised practice or experience within a particular driving environment. Depending on driving instructor feedback, an OT driving re-test may not necessarily be required.

OTs routinely obtain feedback from the driving instructor prior to conducting an OT driving re-test. Any relevant feedback from the driving instructor should also be summarised briefly and documented on the VicRoads Occupational Therapy Driver Evaluation Report as it supports the OT’s clinical reasoning and recommendations. This is important for VicRoads Medical Review staff and others reading the report (e.g. third party funders, VicRoads standards and practice group in case the driver seeks to appeal decisions).

3.6 Documentation of OT driver assessment outcome and VicRoads submission requirements

VicRoads has provided OTs with a standard reporting form to be used to document the results and outcomes of OT driving tests. When OTs submit these forms to VicRoads, they become a permanent addition to the driver’s Medical Review licence record. These detailed reports are only visible to Medical Review staff, staff conducting independent internal reviews and others authorised to have access to the information e.g. VicRoads medical advisors.

The Medical Review file information is used for licensing purposes, but can also be referred to if the client appeals decisions (internally) or via the magistrates court. Therefore it is important that all records are accurate and reflect the client’s Medical Review process, including performance and outcomes from on-road competency tests and the subsequent licensing decisions made. All medical/health professional and other reports are kept in accordance with the national and state legal requirements applicable to health, personal and confidential data and records.
Form completion
The outcomes of the OT off and on-road driver assessment should be documented on the VicRoads Occupational Therapy Driver Evaluation Report and submitted as soon as possible after the assessment to VicRoads Medical Review. For more complex assessments and those with significant outcomes (e.g. all formal licence tests where the client has failed and those where the therapist recommends significant licence conditions), the additional ‘Occupational Therapy On-road Driver Evaluation Report’ (the optional third page of the VicRoads Occupational Therapy driver Evaluation Report) should also be completed. This will help provide more detail regarding on-road driver performance and OT-related decision making that underpins recommendations and advisory comments. Consistent with good health professional record keeping practice, all sections of the Occupational Therapy Driver Evaluation Report should have text inserted in the required fields/boxes provided. If a particular piece of information, test or evaluation has not been completed, or is not relevant to the client, or more detailed information is available within a recent health professional or specialist report (e.g. neuropsychology or psychiatric report), the OT should clearly document (as relevant) that the screening test or information is
- “Not relevant” or “not completed” and/or
- available elsewhere e.g. “Tests not completed, see Neuropsychology report attached dated xx/xx/20xx”

Reports should not be submitted with blank sections. If completed by hand, they should be easy to read. Incomplete or illegible reports will not be accepted by Medical Review staff. This will most likely result in delays in processing the report recommendations, VicRoads decision making and correspondence. The OT will be contacted to re-submit their report.

Sufficient detail must be provided in reports to explain the Occupational Therapy driver assessment clinical findings, reasoning and recommendations. A clear link between driver licensing/experience, off-road, on-road and test outcomes should be evident to justify advisory comments and the recommendations submitted for consideration. This assists VicRoads staff to understand the assessment and rehabilitation process more fully and to report on, and/or defend licensing decisions to clients and relevant others if required (e.g. family, appeals staff, magistrates court, coroners court if the driver is subsequently involved in fatality related crashes). Many OTs have been involved in all these circumstances in the last few years including needing to defend their assessments and recommendations at Magistrate Court hearings.

If conducting an OT driving re-test, or a motorcycle or truck assessment, these details should be added as an additional heading (typed or hand written) at the top of all relevant pages of the Occupational Therapy Driver Evaluation Report.

Documenting off-road assessment results
- **Vision assessment** – if an eyesight assessment was completed by an eye specialist, document the details including the date of the assessment (also attach it as a separate file to the submission email if VicRoads doesn’t already have it), rather than leaving the section blank.
- **Hearing impairment** – if likely to impact on driving and driver requirements for particular licence types (e.g. Heavy Vehicle licence) then screening results should be documented in the comments section of the OT Driver Evaluation Report.
- **Physical function** – if no physical issues have emerged as a result of the interview, referral/other health professional reports/information or screen test results, “no physical issues evident” should be written on the form in the comments/functional impact section rather than leaving the section blank.
- **Cognitive section** – if no cognitive issues have been observed or emerged during screening tests, or were identified through other reports, “not observed during assessment” or “no cognitive issues evident” should be written in this section. Also always record the test scores of any tests administered and/or refer to neuropsychology assessment results in this section. The date of when the neuropsychology assessment was conducted should be included. Any relevant neuropsychological or psychiatric or other health professional fitness to drive related reports should be attached as a separate report/file to the submission email, if VicRoads doesn’t already have these reports on the file.

Documenting on-road test results
All sections of the Occupational Therapy Driver Evaluation Report should have text in the relevant fields/boxes provided. If a section is not applicable, this should be stated. Errors committed during the on-road test are of two types; performance and fail errors. The types of errors should be recorded on page two of the Occupational Therapy Driver Evaluation Report and/or the optional page three Occupational Therapy Driver On-road Evaluation page. Any licence condition or re-test recommendations should be recorded on page one.

If required, detailed assessment results should be recorded on the third page of the Occupational Therapy Driver On-road Evaluation Report. The impact of any impairment/functional deficits noted during the off-road assessment or likely to be associated with the client’s health or disability condition, on safe, timely and consistent on-road driving behaviours need to be documented. It is important to record the clinical reasoning to justify recommendations. If additional space is required, a separate document can be attached to the form.

The client’s details and licence number, the assessment date and the OTs name and contact details must be included on any accompanying documents.
Advisory comments can be recorded in the appropriate sections of the report forms. Refer to section 5.3 for information that defines different terms used in reports, e.g. advisory comments and recommendations.

Driving Instructor feedback/Rehabilitation outcomes
OTs routinely obtain feedback from driving instructors about the client’s performance during driving lessons and from other health professionals regarding remediation/rehabilitation outcomes related to driving capacity. Consistent with good record keeping practice, the OT should keep their own records of feedback from instructor provided lessons, how many were conducted and relevant outcomes. A suggested template is provided in the Toolkit in the Occupational Therapy Driving Test: Assessment Manual (2018).

A summary of driver rehabilitation outcomes incorporating driving instructor feedback can be documented briefly within the VicRoads Occupational Therapy Driver Evaluation Report (e.g. 1 – 2 sentences). This will support the clinical decision making and recommendations to VicRoads and to any other parties reading the VicRoads report (e.g. doctors, client’s family, insurer, employer).

3.7 Reassessment of client who has previously passed an assessment
VicRoads considers carefully the need for periodic reviews. Community safety needs, Australian Fitness to Drive requirements and the financial cost, emotional and time burden on the client and family must be balanced against driving independence within an individual risk assessment framework.

Review fitness to drive when medical condition deteriorates
The Assessing Fitness to Drive guidelines stipulate when drivers with particular medical conditions require periodic medical review. Periodic review is usually required when drivers have medical or other conditions which fluctuate, are chronic, deteriorate over time or for other reasons (e.g. association with complex/multiple co-morbidities) require regular medical or other assessment. OTs or medical practitioners can request a recommended interval for the periodic reviews in the reports submitted to VicRoads. VicRoads will always compare such requests with any stipulated in the Assessing Fitness to Drive guidelines for the client’s conditions.

When VicRoads confirms that periodic reviews are required, a notification is sent to the client at the appropriate time (ahead of the period lapsing) indicating that a “12 month” (or “2 year” or “5 year” as relevant) review is required by “x date”.

The request will specify what type of assessment is required (e.g. medical, vision) and the available time frame for completion of the assessment.

An up-to-date medical report is required prior to any Occupational Therapy driver reassessment unless the driver’s situation has remained stable and VicRoads has a medical fitness to drive report which is not more than 6 months old. (If in doubt, always check with VicRoads Medical Review. VicRoads will review the medical report, then determine if Occupational Therapy driver reassessment is required. Medical Review will undertake a file review, including referring to information from previous health practitioner reports) in addition to checking the Assessing Fitness to Drive guidelines for the client’s conditions.

Minimum time before OT driver reassessment – clients with medical conditions needing periodical review
- Twelve months is the preferred minimum time between Occupational Therapy driver assessments.
- A review at six months may be appropriate if it seems necessary due to a condition known to deteriorate or change rapidly e.g. dementia, or early recovery phase post Traumatic Brain Injury or stroke.
- A request for an OT driving re-test at three months after the last test resulted in independent driving privileges, is only considered for extenuating circumstances. A person driving independently (so, not on an “X” condition) who may need to be reviewed within such a short period (e.g. drivers with a rapidly deteriorating condition) are probably unfit to drive and VicRoads should be notified accordingly. A three month review period may be considered appropriate for a driver who is undertaking driver rehabilitation who is currently only permitted to drive with an “X” condition. It is recommended in such matters to discuss the circumstances with VicRoads Medical Review.

Reviews of less than 12 months duration should preferably be determined in consultation with the driver’s medical adviser(s), family and significant others, particularly when the driver has advanced rapidly deteriorating medical conditions.

Review of licence conditions when medical condition improves
For clients with a condition(s) which is expected to improve over time, a review may be recommended at a time deemed appropriate considering the nature of their medical condition and expected rehabilitation progression. However VicRoads may not actively remind the driver of the option they have available to them to be reassessed.
For example, a condition to drive within a 5 km radius may be recommended for a client recovering from traumatic brain injury. When further improvement has occurred, a reassessment may be appropriate and the restriction may be subsequently extended or removed altogether. VicRoads involvement in this matter would be to place the restriction on the licence and to advise the client to contact the OT, in their own time, after the period recommended (e.g. three months, 6 months, as stipulated by the OT).

VicRoads will not send a reminder to the client about the advice. VicRoads will only write to the client ahead of any confirmed periodical medical or other assessments (e.g. medical, vision, psychiatric) consistent with the general guidelines stipulated in the national Assessing Fitness To Drive standards.

In such circumstances, the Occupational Therapy driver re-assessment is not mandatory. However if the client wants to pursue Occupational Therapy driver reassessment they will be required firstly to obtain an up to date satisfactory medical report, then approach the OT directly to make arrangements to undergo an assessment. As per the usual procedure, the OT must seek clearance from Medical Review prior to conducting the driver re-assessment.

Medical reports are considered valid for six months unless VicRoads has been advised that a shorter period is necessary. These cases are rare.

Even if the medical condition which instigated the initial assessment has not improved, there could be an expected improvement in driving confidence or ability to compensate for the impact of the condition as a result of increased experience or driver rehabilitation, which may allow extension of driving conditions.

If the client does not approach an OT or medical practitioner to seek a review, the condition will remain on the licence.

3.8 Clients who fail two or more OT driving tests and/or show no improvement

This section refers to clients who have multiple Occupational Therapy driver assessments over a period of time, with repeat fail outcomes and no improvement between assessments despite opportunities for driver rehabilitation.

Options for clients who show no improvement

Information about suitable alternatives to driving and maintaining community mobility should be provided, as other transport options may be preferable to the client continuing to attempt to resume driving. Referral to appropriate support organisations and services and/or back to the GP should be considered, as outlined in Section 3.5.

The OT should document in the Occupational Therapy Driver Evaluation Report that referrals to support agencies were completed and that other information was provided to the client (as relevant). This is important to record so that VicRoads can appreciate what measures were undertaken to support the driver manage mobility transitions, especially if the driver/family enquires and/or a review or appeals process occurs.

When the client has failed two or more OT assessments and shown no progress after driving lessons or other rehabilitation, an OT may complete any of the options outlined below:

1. Consider following the VicRoads process applied to the MRDT test

When a client fails the VicRoads Medical Review Driving Test (MRDT), VicRoads may advise them that before further testing can occur they must complete formal driving lessons with a driving instructor. A letter from the driving instructor submitted to VicRoads is needed to verify improvement. Depending on circumstances, VicRoads may also request an up to date medical report (if the previous one is more than 6 months old) and/or apply an “X” condition and/or suspend their licence in the meantime if they are deemed too dangerous to continue to drive even with a driving instructor. Applying an “X” condition allows clients to have as many lessons with driving instructors as they wish at their own expense, as a means to address skill deficits.
The OT could consider this requirement for relevant clients assuming that any ‘enabling’ requirements (e.g. adaptive equipment, compensatory techniques) have been addressed. The process of requiring validation of improvement from a driving instructor prior to Occupational Therapy driver reassessment also attempts to address broader issues:

- Repeated lessons will reinforce the extent of safety concerns for those clients who have little insight into their driving deficits.
- Road safety outcomes are enhanced as clients are more likely to pass a test based on their ability to demonstrate safe and competent driving rather than attempting multiple tests and passing a test due to luck.
- Other drivers who have good prospects or have not yet been tested may be disadvantaged by Occupational Therapy driver assessment and testing resources being utilised by drivers who show no improvement between tests. (For example, drivers with little prospect of ever passing, taking up space on waiting lists).
- There is a reduction in possible delays to identifying potentially high-risk drivers as a result of long waiting lists and demands of non-improving clients.

2 Wait a minimum period of time

It may be appropriate to wait, (for example three months) to allow for improvement in the person’s underlying health/medical condition or stabilisation on medication or whilst rehabilitation occurs, before conducting a further Occupational Therapy driver assessment. Medical Review may be able to place an “X” condition on the client’s licence, restricting the driver to only drive with a driving instructor for driving lessons and/or OT driving test. Depending on time lapsed, the client may need to obtain a new medical report (if 6 months has lapsed) and a new OT clearance from Medical Review may be required.

3 Advise the client they can seek a second/further independent Occupational Therapy driver assessment

VicRoads permits customers to seek a second or subsequent further opinion from the same or a different OT. Drivers should be advised of this option if they are dissatisfied with the test result.

4 Obtaining an independent assessment after a failed VicRoads Medical Review Driving Test

When drivers are referred to Medical Review they must supply a fitness to drive medical report. If they have no significant physical or cognitive issues, and are required to undertake an on-road test, they may be referred to complete a VicRoads Medical Review Driving Test. This also occurs if the doctor does not specify that an Occupational Therapy driver assessment is required. If a client fails two VicRoads MRDTs, the client may be requested by VicRoads to be independently assessed by an OT. This may occur in instances where driver behaviour or the pattern of errors committed during the completed tests may reflect an undiagnosed health condition. When such clients approach OTs for an assessment, it is recommended that the OT contact Medical Review for further information. (See section 2.5).

3.9 Should clients ever be referred to VicRoads for a Medical Review Driving Test (MRDT)?

VicRoads is responsible for determining the type of test that drivers must undergo if a concern about their driving competence is raised. Medical Review will consider all the client’s relevant details including periodic review history and recommendations made by medical practitioners in determining which type of on-road test is the most appropriate for a particular client. The Austroads Fitness to Drive guidelines are always referred to in every case by case decision.

VicRoads decides who conducts the assessment when:

- a driver is reported to VicRoads for unsafe driving, or
- a health practitioner recommends a driver assessment, or
- VicRoads determines that a reported medical condition warrants an on-road test, or
- a new permit or licence applicant reports a condition to VicRoads, and a practitioner has not made a recommendation one way or the other.

It is not appropriate for an OT to refer clients back to VicRoads for an MRDT.

As the MRDT is only conducted with one testing officer in a dual control vehicle, there may be significant occupational health and safety issues raised if the testee presents with cognitive or behavioural issues. There is no prior screening ahead of an MRDT on-road test, so the testing officer has little capacity to evaluate a driver’s behaviour before the licence test. MRDT tests cannot be conducted for drivers requiring vehicle aids or modifications.

If an OT has any concerns about a specific client, the best course of action is to discuss the matter with Medical Review staff.
General principles followed by VicRoads when determining type of road test for a client

<table>
<thead>
<tr>
<th>Determination</th>
<th>Issues considered</th>
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| Test by VicRoads (either GLS or MRDT)      | • New licence or permit applicants – GLS Drive Test may be suitable for applicants with a physical disability which does not impact on the operation of standard vehicle controls (e.g. a learner driver progressing to a licence who has previously accessed OT off-road screening and advice but doesn’t require an OT administered on-road test).  
  • When police (or others such as family or friends) report a driver to VicRoads due to concerns about their driving skills or ability to drive safely (and the driver has no medical condition which would explain poor driving).  
  • If medical advice suggests that VicRoads could conduct a test.  
  • VicRoads will not test any person with significant physical, cognitive or perceptual impairments where such impairments are reported. In practice, impairments related to ageing processes are not normally specified as “an impairment” in medical reports received by VicRoads. |
| Assessment by OT required if;              | • any cognitive or psychiatric impairment is present.  
  • specified by a medical practitioner with rationale.  
  • significant physical impairment is present.  
  • adaptive aids or vehicle modifications may be required. |

Clients holding a motorcycle or heavy vehicle licence

Clients who hold, or wish to hold, a motorcycle or heavy vehicle licence may require competency assessment to evaluate their ability to ride/drive these motorcycles or vehicles safely. Refer to OT motorcycle ability assessment guidelines (2016) in Section 6.3.

VicRoads does not conduct heavy vehicle or motorcycle testing. These clients need to be assessed by accredited motorcycle or heavy vehicle course providers. Refer to section 6 where these assessments and the OT role are discussed in detail.

3.10 Complaints, disputes and review processes

Management of complaints regarding OTs

Complaints and health practitioner harassment can arise when clients:

• lack insight into health issues and/or functional limitations impacting on driving abilities  
• do not want to be assessed  
• are unsuccessful in their assessment(s)  
• disagree with the assessment outcome  
• see the removal of their authority to drive as a loss of their rights

An OT will normally deal with and resolve complaints on a case by case basis directly. Where the client is in dispute with the OT, it is important for the assessor to provide detailed feedback to the client. This feedback and referral information may need to be reinforced/ supervised by others (e.g. GP, case worker, family/carers) hence ensuring the information is provided in writing with a copy provided to relevant others (for whom consent has been granted).

All recipients of any health service have the right to provide feedback to service providers regardless of the nature of the service offered. In relation to the provision of Occupational Therapy driver assessment services, clients are always encouraged to review the content of the VicRoads information relating to Occupational Therapy driver assessments outlined on the VicRoads website and the VicRoads ‘Guide to Occupational Therapy assessment’ fact sheet and as appropriate discuss their concerns initially with the OT providing the service.

OTs value the opportunity to discuss this feedback, to ensure that they provide quality services. Sometimes consumers of services raise issues related to the OT service length, waiting period, nature, cost or how the outcomes of assessments translate to licensing decisions made by VicRoads. VicRoads, in consultation with the OT, may need to determine what formal processes can be put in place to assist the client and the OT to resolve the dispute.
VicRoads initial response to client questions and concerns

If clients raise questions with Medical Review about how the Occupational Therapy driver assessment was conducted, the recommendations that were made concerning variations to their licence, such as licence conditions or suspension, they will initially be referred to the “Guide to Occupational Therapy assessment” fact sheet and information available on the VicRoads website.

If they still have concerns and voice these with Medical Review, they will be encouraged to discuss the assessment process and recommendations with the OT who conducted the assessment. It is important for clients to know that VicRoads is the responsible authority who makes final licensing decisions taking into consideration all the information they have available about a driver, including the results of medical, eyesight and on-road competency tests. Clients should also be referred to the Assessing Fitness to Drive guidelines which apply across Australia.

Right to a second opinion

All clients who undertake an Occupational Therapy driver assessment have the option of obtaining a second assessment with a different OT. VicRoads does not place limits on the number of OT driver assessments a client completes. However, the client’s medical conditions and circumstances will be taken into account when the client discusses this option with Medical Review. For example, a geriatrician report may be requested for clients with a diagnosis of dementia after two unsuccessful assessments with different OTs.

Customer rights of appeal

VicRoads advises all persons affected by VicRoads decisions of their legal rights of appeal. (See Section 3.11)

If the matter cannot be resolved in discussion with the OT or Medical Review, clients may register their complaint with:

1. VicRoads Medical Review and request an independent internal review of their Medical Review history
2. OT AUSTRALIA Victoria
3. AHPRA – Australian Health Practitioners Regulation Agency
4. The Office of the Health Services Commissioner.

VicRoads is not responsible for the regulation or professional conduct of OTs, medical practitioners or other health professionals. If any customer alleges that conduct by any health practitioner was inappropriate or unprofessional, VicRoads has an obligation to inform the client about the role of AHPRA Victoria who will endeavour to investigate and resolve the matter.

Internal review by VicRoads

The client should be advised that the responsibility for licensing is VicRoads role. If their complaint relates to licensing decisions, then they should be referred to VicRoads.

Where VicRoads cancels, suspends, refuses or varies a licence or permit, the client who is aggrieved by this decision has the following options:

1. Pass an assessment demonstrating their ability to drive safely and hold a licence.
2. Request that VicRoads review the matter. This internal review will consider the driver’s Medical Review file and all relevant reports to ensure there are no administrative inconsistencies and that correct procedures have been followed. This review must be requested within 28 days of service of notice to the customer and would usually occur before lodging an appeal with a Court. Regulations 82 to 84 of the Road Safety (Drivers) Regulations 2009 describe the internal review process.
3. Appeal to a Magistrates’ Court – within 28 days of being given notice of the decision or the internal review decision.

VicRoads advises all clients affected by any of the above decisions of their appeal rights.
Section 26 of the Road Safety Act 1986 gives the client the right to appeal to a Magistrates’ Court against VicRoads’ decision to suspend, cancel, vary or refuse to grant a driver licence or learner permit.

Regulations 84A -90 of the Road Safety (Drivers) Regulations 2009 set out the requirements for clients to appeal.

Within 28 days of being notified of VicRoads decision, clients must give written notice of the appeal to a Registrar of the Magistrates Court, ask the registrar to endorse a copy of the notice with the date on which the appeal is to be heard and serve on VicRoads the endorsed copy of the notice, not less than 14 days before the Court date.

There is no automatic ‘stay’ to allow a client to drive pending the resolution of the appeal.

Clients need to be aware that there may be costs associated with an unsuccessful appeal.

**Appeal not applicable**

The client has no right of appeal if VicRoads requests the client to provide a medical or other report, or undergo a driver assessment, as driving privileges have not been withdrawn at this time.

It is up to the client to decide if they wish to provide the requested report or undergo an assessment. If the client refuses to undergo an assessment or provide a report as requested, VicRoads may then decide to cancel or suspend the licence or permit, which then provides the client with the right of internal review or appeal.

**Ombudsman**

The client has a right to approach the Ombudsman and ask for the matter to be reviewed. The Ombudsman may ask VicRoads to justify the decision for a particular action.

**Court attendance**

If VicRoads cancels, suspends or refuses to issue or renew a driver licence or learner permit, or changes a person’s existing licence class or conditions on the basis of a recommendation made by an OT, the person affected is legally entitled to appeal this decision.

The appeal is normally to a Magistrates’ Court. Alternately, an Equal Opportunity and Human Rights hearing may be convened. The OT may be required by law to attend the hearing to give evidence in connection with the client’s assessment.

Wherever possible, VicRoads endeavours to resolve a matter before it proceeds to a hearing. However, where an appeal proceeds to a court hearing, the relevant OT may be requested to assist with an investigation, or attend. In addition, they may be called as a witness at a Coroner’s Inquest if the condition of a driver is a matter of interest.

**Payment of costs**

Where OTs are required to attend court at VicRoads request and give evidence about an assessment used by VicRoads, VicRoads will pay the reasonable costs incurred. This is regardless of whether the:

- matter is mutually resolved prior to the hearing (before a Magistrate), or
- the OT is not called to give evidence, but has set aside time, or
- the OT is required to give evidence.

VicRoads is not responsible for costs if the OT is requested to give evidence on behalf of another party but there is a right to claim reasonable witness expenses.

**What to bring**

If the court hearing is an appeal against VicRoads’ decision, VicRoads will provide to the court all the documents (assessment, medical reports, and any other information available) on which the decision was based.

The OT should refresh him or herself with the matter and attend with all relevant documents relating to the client and their assessments. This will enable them to accurately respond to any questions arising (nature/dates of assessments, on-road assessment checklists used to record performance, diary entries, correspondence).

In advance of the court hearing, VicRoads legal representatives will usually consult with the OT. They will advise the court location and attendance time and what to expect.

**At court**

Before the court hearing, VicRoads legal representatives will speak to the OT about court requirements, processes, likely questions, etc. This provides the OT with an opportunity to be briefed, as far as possible, about the likely issues in question.

If required to speak in court, the OT may need to give evidence about the assessment including whether the assessment was conducted in accordance with established procedures and not conducted differently (for the specific client for whom the court matter pertains) compared to any other driver assessment. It will be very important for the OT to refer to guideline documents (such as this one) and those pertaining to VicRoads Occupational Therapy Driving Test: Assessment Manual (2018) as well as the Austroads national Fitness to Drive guidelines.
SECTION 4
Functional impairments and driving

This section describes various functional limitations and their impact on driving safety, including general issues relating to assessment, vehicle handling and operation of car controls, vehicle design considerations and vehicle modifications.

4.1 General considerations

This section explains some of the key factors considered by OTs when they make suggestions or recommendations regarding a driver’s assessment, training, functional rehabilitation, vehicle, licence or review needs. For more information refer to Assessing Fitness to Drive (Austroads 2016) or contact VicRoads Medical Review on 03 8391 3224.

Drivers with functional limitations

Drivers who are referred for Occupational Therapy driver assessments can present with combinations of physical, sensory, psychiatric, cognitive and perceptual impairments. They might be taking various medications which may have temporary or long term side effects. Some drivers may also lack a realistic understanding of their functional limitations and how these might impact upon safe, consistent driving behaviours. This means there can be many complex factors that need to be taken into account when determining a driver’s needs for OT interventions.

The maintenance of an individual’s driving privileges must always be considered in relation to the safety of all road users, the standards and requirements set by the national medical guidelines, and the responsibilities of VicRoads under the Road Safety Act.

Individual driver needs vs licensing test requirements to ensure basic competency levels

Apart from health issues, OTs consider the broader individual needs of clients during assessment. These factors include: driving related experiences, types of vehicles driven, nature of usual driving environments, lifestyle and vocational needs and other mobility options.

Whenever relevant, these considerations are included in decision-making processes. Victoria’s state licensing system depends on the individual driver being able to demonstrate their capacity to meet minimum driving competencies in order to hold a licence. Notwithstanding this requirement, certain licence restrictions and conditions can be used to support drivers to maintain various degrees of driving independence.

Drivers with sensory loss (vision or hearing)

Drivers who present for an Occupational Therapy driver assessment may have concurrent sensory impairments (e.g. visual or hearing loss). The assessor needs to ensure that the effect of such impairments is minimised by the use of corrective lenses or hearing aids or the assistance of an Auslan interpreter prior to the OT driving test. This may involve referral for specialist assessment and advice.

Drivers with limitations that influence their ability to enter a vehicle or use vehicle controls

OTs evaluate the needs of drivers who present with physical, sensory or coordination difficulties, which might impact upon their ability to get into or out of a vehicle, sit comfortably, move in a coordinated, consistent way, or adjust/use the primary vehicle controls such as the steering wheel, accelerator, clutch and hand brake.

OTs consider alternatives to optimise human functional abilities including personal remediation, use of compensatory techniques or skills retraining before recommending vehicle modifications.

Modifications of various types can be used with VicRoads permission in many vehicles to allow drivers with certain disabilities to drive consistently and safely in order to retain their driving privileges.
Some examples include ‘spinner’ or steering aids applied to the steering wheel, left foot accelerator pedals (pedal repositioned on the left side of the driver foot compartment), hand controls (as an alternative to foot controls if a driver can’t use or doesn’t have lower limbs) and special/additional mirrors. Some driving aids or modifications can only be fitted in a vehicle with automatic transmission.

OTs offer specialist advice regarding vehicle choice, the prescription of various vehicle adaptations, driver positioning and training in the use of alternative devices.

Driving instructors with extensive experience of people with disabilities, usually work with OTs to ensure that drivers are comfortable and proficient in the use of vehicle aids and adaptations.

Drivers who require non-standard vehicle controls must demonstrate in an on-road driving test that they can safely and consistently drive a vehicle fitted with such devices before VicRoads will permit them to obtain or retain a driver licence. If the driver is successful, the licence will have a condition placed on it and it is then a legal requirement for the driver to only drive a vehicle with the relevant modifications.

Further information is contained in Section 5 ‘Licence conditions and vehicle modifications’.
### 4.2 Cognitive and perceptual impairments

A person with cognitive and/or perceptual impairment may present in an office or clinical setting as not having any functional limitations. This is because the person's impairments may not manifest until they are engaged in attempting a particular activity. As driving is one of the most complex daily living skills requiring high levels of information processing and cognitive-perceptual abilities, functional limitations resulting from impairment may only become apparent whilst actually performing driving tasks.

A standard medical examination or licence test may not necessarily reveal the nature or severity of any cognitive problems. For this reason, individuals with cognitive impairment should undertake an off-road and on-road test of driving ability with a qualified OT driver assessor. Additional reports from a neurologist, geriatrician or neuropsychologist can help inform and define the origins and type of cognitive impairment and potentially highlight interventions to reduce or ameliorate the impairments.

A wide range of cognitive and perceptual impairments may compromise safe driving. The following are only a few examples of common impairments.

<table>
<thead>
<tr>
<th>Capacity</th>
<th>Examples of behaviour and the impact on safe driving</th>
</tr>
</thead>
<tbody>
<tr>
<td>Attention</td>
<td>May be easily distracted by self or others, fail to notice road signs or signals or have difficulty dividing attention or multitasking, such as monitoring speed and responding safely to traffic conditions.</td>
</tr>
<tr>
<td>Concentration</td>
<td>Concentration difficulties may be associated with low or fluctuating levels of arousal impacting on ability to stay focussed on the task at hand. Performance may deteriorate after a period of time or fluctuate.</td>
</tr>
<tr>
<td>Praxis</td>
<td>Difficulty in sequencing task components and planning movement or performing motor tasks on command (e.g. co-ordinating steering with accelerator control).</td>
</tr>
<tr>
<td>Thought processing</td>
<td>Slowness to take in and respond to changes in the driving environment in a timely manner.</td>
</tr>
<tr>
<td>Behaviour</td>
<td>May be erratic, impulsive, distractable or inappropriate (including being abusive to other road users, low frustration tolerance).</td>
</tr>
<tr>
<td>Memory and learning</td>
<td>Unable to recall procedures, retain instructions, modify driving behaviours or remember familiar routes or commonly applied road rules (e.g. stopping at stop signs, giving way).</td>
</tr>
<tr>
<td>Insight</td>
<td>Inability to understand impact of driving behaviours on safety of self and others.</td>
</tr>
<tr>
<td>Planning/problem-solving</td>
<td>Difficulty anticipating and/or responding to hazards including thinking of suitable alternatives and determining a course of action. Difficulty planning a route in familiar contexts (e.g. shopping centre carpark) or familiar geographical surrounds.</td>
</tr>
<tr>
<td>Decision making</td>
<td>Unable to choose between action response options and to respond in an appropriate, timely and coordinated manner.</td>
</tr>
<tr>
<td>Perception</td>
<td>Inaccurate judgement of distances (e.g. choosing safe gaps in the traffic flow, difficulty with parking, side/forward distance from other vehicles) or vehicle position within lane/available roadway.</td>
</tr>
<tr>
<td>Fatigue</td>
<td>Movements, coordination, observations, decision making and response time, may be less timely (often slower), or become inaccurate after a period of time.</td>
</tr>
</tbody>
</table>
In some cases, OTs may need to consult with families before consideration is given to resuming or commencing driving or refer clients to other health professionals such as optometrists, ophthalmologist, neurologist, psychiatrist, other medical specialist, neuropsychologist or psychologist, for evaluation prior to undertaking on-road testing. This should be co-ordinated with Medical Review to avoid duplication of referral requests.

Assessment considerations

Some cognitive and perceptual impairments may fluctuate depending on the diagnosis/es and medications taken. This means that impacts on functional status can vary from day to day or during the day. For example, an individual may be required to undergo competency testing as a result of referral to Medical Review from Victoria Police due to erratic driving. This same driver may perform very well during a driving test undertaken several weeks from the original incident. In practice this means that sometimes a person may be able to drive quite safely one day and be unsafe on another day.

Another common impairment is cognitive fatigue. This is a common issue impacting on rehabilitation after neurological impairment. Drivers experiencing cognitive fatigue can be difficult to assess accurately, particularly after a single on-road test. More than one on-road test may be required, conducted at different times of the day or in some situations driving lessons may also be useful to assess performance at different times of the day. Reinforcement of strategies to recognise, manage or minimise fatigue may be a goal of driving lessons – refer to section 4.7 on minimising fatigue.

The OT driving test allows the OT to use their knowledge of health and medical conditions and expert assessment skills, to understand the possible implications of the presenting medical/disability condition(s) on driving and to determine whether the client demonstrating physical, cognitive, behavioural, intellectual or other deficits is likely to benefit from driver rehabilitation.

Driver Rehabilitation

If recommended, driver rehabilitation usually involves driving lessons, where the OT works with a specialist driving instructor to devise a customised program of driver instruction with specific rehabilitation goals. A compensatory approach to driver rehabilitation is often used, in which the driving lessons may focus on physical goals such as postural or skill based adaptations, modified driving controls or aids, practice using modifications or aids for access, egress and vehicle ignition requirements and vehicle selection (e.g. automatic as opposed to manual transmission).

For clients with cognitive impairment the goals of driving lessons may focus on increasing client awareness of the impact of cognitive impairment on driving and providing education and practice to modify driving behaviour to compensate.

Sometimes drivers with cognitive impairments seek to restore their commercial or heavy vehicle licences. In all such cases, these drivers must first pass a private vehicle driver assessment. When a cognitive or behavioural impairment is confirmed during the car assessment, driver rehabilitation may be required. If the driver can only retain private vehicle privileges with licence conditions or restrictions (e.g. local area only, no freeway driving), it may be advisable to wait until further recovery or rehabilitation efforts result in a higher level of independent driving before conducting a commercial or heavy vehicle licence test. In such circumstances the appropriateness of pursuing a commercial or heavy vehicle assessment may be determined by the involvement of other health practitioners (e.g. neurologist, psychiatrist or neuropsychologist). VicRoads may then consider whether a practical driver assessment is warranted in the appropriate vehicle, with an OT present.

The Transport Accident Commission (TAC) produce a useful resource to support novice drivers to develop hazard perception skills. This tool (called DriveSmart) is available for free on-line and could be useful to support clients who are recovering from/adapting to cognitive impairment and have to re-develop a broad range of cognitive-perceptual skills relevant to driving tasks. This interactive program takes the user through a range of driving scenarios and quizzes, where they need to make safe driving judgements. It also aims to improve hazard perception, scanning and concentration skills.

Refer to the TAC website for more details: drivesmart.vic.gov.au

4.3 Limited mobility and short stature

General considerations

Determining fitness to drive, due to physical or mobility limitations requires the consideration of both medical and functional factors. In these cases a medical evaluation is important to determine the nature and extent of any underlying health disorders and to ensure there are no other co-morbidities or medication concerns that may impact on functional skills required for driving.

The decision about driving safety can then be made, in a suitably modified vehicle if required, by an OT. Of particular concern are functional issues related to vehicle access/egress, initiating the ignition, stowing mobility aids, and mobility/skills required for particular vehicle related tasks e.g. negotiating home garage/carpark, obtaining petrol, parking at frequented venues.
**Short stature**

People of short stature may require vehicle adaptations as the majority of vehicles are designed to accommodate the 95th% anthropometry measurements for a particular population. Even though a person of short stature might be overall shorter than other people, their limbs might not necessarily be outside of the “norm” which can be accommodated for by driver cabin configurations. For example, seat height, seat depth, distance from console, steering wheel adjustments.

Depending on the cause of their short stature, they may have restricted spinal movement, limitations in range of motion, mobility requirements (e.g. requiring a wheelchair for mobility) and upper and lower limb impairments. Hence an individualised anthropometric assessment must be conducted whilst the driver is in the driving seat of the vehicle they intend to drive in order to match their needs to the driver cabin.

Examples of vehicle cabin modifications and other considerations include:

- seat height and depth adjustments to ensure adequate access to controls and viewing angles to the front, side and rear of the vehicle including use of both internal and external mirrors
- customised seating (full seat, or “add on” seat)
- adjustment of the occupant restraint system to ensure the driver can sit comfortably with seat belt adjusted correctly and head rest at the correct height (may require additional/alternative restraint, like a “H” harness)
- assessment of steering wheel, knee and other airbag requirements to ensure driver is positioned optimally to ensure safe deployment if required
- pedal extensions, or alternatively if more practical, hand controls
- steering adaptations for example mini-steering wheel, steering aids, adapted indicators
- access to secondary controls (indicators, horn, lights, windscreen wipers): may need to be incorporated into steering aid or hand controls
- hand-brake access: extension lever or electronic handbrake
- installation of a second brake in the front passenger side to enable training
- transfer aids
- mobility aid dismantling/storage (e.g. wheelchair hoist)

Contact with Disabled Motorists Australia may be useful to investigate if it is possible to make contact with a person who already has such vehicle modifications/adaptations in place. Seeing in-vivo a modified vehicle and talking to a driver who is experienced in using these modifications helps to explore the issues associated with modification use and is particularly helpful to parents/carers and the driver if they are a learner driver who is seeking licensure.

**Commercial Vehicles; Bus, Truck, Taxi – other considerations**

Although a client may demonstrate the ability to drive a car, bus or truck, there are a number of non-driving tasks that are expected by the industry sector employing such individuals and by VicRoads when testing such commercial drivers that need to be considered. For example, the ability to independently climb into/out of a truck cabin, couple and uncouple an articulated vehicle, change a tyre, adjust a load that has shifted, assist passengers or transfer luggage into or out of a taxi or bus, undertake emergency response tasks if required etc.

**Restrictions to neck or trunk mobility**

**Private vehicles** – If the person is unable to turn their upper trunk or head then the mirror system in the vehicle will need to be altered so that blind spots can be reduced or eliminated. Additional, convex or extended mirrors may be required. Drivers may need to learn compensatory techniques to enhance the visual angle available when using external mirrors. Reversing cameras may offer a suitable technology based aid to support visual surveillance around the vehicle. Late model vehicles may have sensors which activate lane warning and crash avoidance systems which may support driver safety and awareness of lane position and objects/vehicles around the car. Driving lessons may be required to reinforce correct use of such devices and adaptive techniques and to ensure safe driving standards are achieved.

**Bus and truck** – If cervical/upper spine rotation is less than 45 degrees to the left or right, bus or truck driving is quite challenging unless the design of the vehicle and availability of safety systems helps compensate for the drivers’ limitations (e.g. reversing/side view additional mirrors and/or cameras, crash avoidance, lane warning). Client assessment in vehicle types matching (or as close as possible) to those likely to be driven is recommended to fully evaluate practicability of personal and driver aid compensatory strategies and cabin adjustment.
4.4 Loss of or impaired upper limb function

Loss of finger/s

Private vehicles – Loss of a finger (or fingers) or a thumb from one limb may not affect the possibility of a person being licensed. Loss of thumbs from both hands or certain hand impairments impacting grip, sensation (superficial, proprioception) may impact on reliable, sustained adequate steering wheel control and use of secondary controls. A practical assessment of driving or riding skills is necessary. Vehicle modification/aids may be required (e.g. u-pin or tri-pin steering aid).

Bus and truck – Normally not considered fit to drive if thumbs are missing from both hands due to manual requirements to manage steering wheel control. However, consideration may be provided subject to a practical assessment of driving skills preferably in a vehicle closely matching those likely to be driven.

Loss of or impaired function in one upper limb

Individuals with only one functional limb/hand may be permitted to drive independently in a vehicle with automatic transmission. Safe vehicle control including steering control is the primary concern.

Removal of the sole limb from the steering wheel while the vehicle is in motion to operate secondary controls is not permitted. The driver must demonstrate maintenance of one limb on the steering wheel (or steering aid at all times).

A steering aid is required to support the use of a single upper limb to manage steering wheel control and operation of commonly required secondary controls (e.g. indicators, refer to Section 5.5 ‘Steering aids’). Power steering is required in most cases. Electronic adaptations (e.g. integrated into the steering aid device), allowing operation of key secondary controls (e.g. indicators, horn, lights) may be required.

For individuals with one functioning but limited upper limb, options for push button/keyless vehicle entry, engine ignition, location and operation of parking brake and secondary controls should be considered when modifying existing or selecting a new vehicle.

Reinforce the need for the steering aid to be placed on the steering wheel in a position where the driver can:

- maintain constant control of the steering wheel to direct vehicle position,
- turn the steering wheel through the full range of movement,
- respond appropriately when sudden external factors may impact on vehicle direction (e.g. pothole, unexpected hazard on the roadway which needs to be avoided).

Steering aid with integrated secondary controls

- enable safe, reliable vehicle manoeuvring as required for executing “U” turns, parking, driving through different types/sizes of roundabouts and other types of traffic calming scenarios (e.g. chicanes).

Manual Car

The use of both hands/upper limbs is normally required to control a manual vehicle. The driver needs to demonstrate the ability to reach and operate all instrumentation and controls, in combination with the ability to grip/control the steering wheel and turn it through the full range of movement. It is not acceptable or safe for a person with the use of one hand only to let go of the steering wheel in order to change gears. For this reason these drivers would normally need to drive vehicles fitted with automatic transmission.

A manual vehicle may be considered provided the left hand or arm can be used to change gears and is not the sole functional upper limb. Modifications to the gear change mechanism may be necessary depending on the functional status of the limb.

Operation of parking brake

The ability to operate the parking brake as an emergency brake is not essential provided a dual circuit braking system is fitted (as in all cars manufactured since 1972). However the safe, reliable operation of a braking system to secure the vehicle whilst stationary needs to be demonstrated. A range of options for location and operation of the park brake are available in modern cars (e.g. foot operated or push button park brake, automatic park brake) and clients with use of only one arm should be advised to take this into consideration if purchasing a new or replacement vehicle.
Prosthesis

An upper limb prosthesis may be worn whilst driving and used to operate vehicle controls, provided the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving. The ability to drive safely whilst using any prosthesis needs to be demonstrated in an on-road assessment. In order to drive a motor vehicle, a driver using a prosthesis should be competent and comfortable in its use and be able to operate the vehicle controls and instrumentation without taking their eyes off the road. Sensation (especially superficial and proprioception/kinaesthetic) in the stump and remaining limb are important to assess. Wearing a prosthesis may allow the driver to manage driving a manual vehicle. If the driver can only drive whilst wearing a prosthesis, the requirement to wear the prosthesis whilst driving will be added to the driver’s licence as a condition.

Implications for riding a motorcycle

A person who has lost the use of a hand or arm may require adaptive equipment on the motorcycle or fitting of a prosthesis in order to compensate for the loss of ability to reach and operate vehicle controls and instrumentation. It is possible with appropriate motorcycle modifications or prosthetics for people with loss of function in one hand or arm to ride a motorcycle. In addition to careful assessment of sensation (as mentioned above), the rider’s balance, ability to steer safely under a range of conditions and push/move/park the motorcycle should be considered. Motorcycles require special consideration and assessment of riding skills. (See section on motorcycle assessment 6.3).

Bus, taxi and truck commercial licence

Such licences may be considered, depending on the degree of impairment in the affected limb and status of the remaining limb. The vehicle must be able to be appropriately modified and/or a functional prosthesis needs to be worn. Other vehicle handling tasks need to be considered as part of the broader driver evaluation (e.g. placing passenger luggage into the boot, un/coupling of trailers, securing loads etc.)

Passenger vehicle drivers (who are required to hold a ‘Driver Accreditation’) are required by law to be able to assist passengers and their luggage into or out of their vehicles. If the driver’s disability prevents this then the person will not be given permission to drive passenger vehicles.

As commercial licence holders may seek to drive their vehicles for extended periods of time (e.g. bus drivers over an 8 hour shift, truck drivers for even longer), careful consideration to the broader issues impacting on driver evaluation need to be considered (e.g. stump considerations, endurance, fatigue, over-use issues).

Loss of use or impaired function in both upper limbs

Where neither arm can be used then all controls need to be operable by a combination of feet, head/body, or prosthetic devices.

For some clients with complex physical impairments, steering may be achieved by foot/lower limbs, with head or lower limbs operating secondary controls whilst the upper body is balanced and view of the surrounding roadway is not compromised. Access/ egress, restraint/seatbelt and ignition requirements must also be considered. This would require customised adaptive equipment, technology and vehicle modification complying with engineering requirements of the regulatory authority. Vehicle modifications are likely to be extensive and tailored to suit the individual needs of the driver.

In the interests of community and client safety, such clients should be assessed by an OT with specialised knowledge working closely with a vehicle modifier. The primary concern is the client’s ability to demonstrate consistent reliable control of the vehicle at all times in all circumstances.

If muscle spasms are present, they will need to be controlled by medication, restraints or positioning so that the person does not inadvertently activate or move controls or instrumentation whilst the vehicle is in use.

Motorcycles
Not appropriate.

Bus and truck
Not appropriate.

4.5 Loss of or impaired lower limb function

Loss of toes

Loss of toes may not affect the possibility of an individual being licensed depending on functional status of remaining part of foot/lower limb (e.g. motor, spasm, sensory – especially superficial sensation, proprioception, kinesthesia, pain). Depending on the type of toe amputation, special shoes may be worn to compensate. Motorbike riders may need to consider bike selection or practical assessment may be indicated.
Loss of or impaired function in left foot or leg

Car
The driver needs to show that they can safely operate all required foot controls. The leg operating the accelerator and foot brake requires some mobility of the hip and knee. A person who has no use of their left foot or leg needs to drive a vehicle fitted with automatic transmission. If the parking brake is foot operated and is located on the left of the driver foot compartment, the ability to operate the parking brake should be assessed.

VicRoads may add an automatic transmission condition to the licence, however driving a manual vehicle can be considered if:

• a left foot prosthesis is worn and its' use is assessed as appropriate, and/or
• the clutch is modified to allow safe operation if the left foot/leg has some residual function and
• the client can demonstrate consistent, reliable control including safe execution of at least one emergency brake task.

Prosthesis
Where appropriate, a lower limb prosthesis may be worn and used to operate controls, provided the following are addressed:

• the ability to drive safely whilst using the prosthesis has been demonstrated,
• the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving, and
• the driver using any prosthesis should be able to operate the vehicle controls and instrumentation without taking their eyes off the road (i.e. they do not require visual confirmation of limb/prosthesis function/placement).

The requirement to wear the prosthesis while driving would then become a condition on the licence.

Motorcycles
Motorcyclists require special consideration and assessment of riding skills. It is possible with appropriate vehicle/motorcycle modifications or prosthetics for people with loss of function in one foot or leg to ride a motorcycle, depending on the degree of loss, remaining abilities and balance.

Normally the left foot controls the gear changes, so the appropriate modification relates to moving the gear shifter to allow right foot operation, or alternatively, riding an ‘automatic’ motorcycle. The rider needs to demonstrate consistent reliable control of the motorcycle and all of its primary and secondary controls in all circumstances using ADR (Australian Design Rules) compliant and/or VASS (Vehicle Assessment Signatory Scheme) approved modifications.

Bus and truck
These licences can be considered, but the vehicle must be able to be appropriately modified or a functional prosthesis needs to be worn.

Passenger vehicle drivers (who are required to hold a Driver Accreditation) are required by law to be able to assist passengers and their luggage into or out of their vehicles. If the disability prevents this then the person will not be given permission to drive these vehicles.

Loss of or impaired function in right leg or foot

Car
Drivers can drive a vehicle with automatic transmission when they have only one functional foot/leg, however they need to show that they can reach and safely operate all foot controls consistently without taking their eyes off the road and without losing their balance. The leg operating the accelerator and foot brake requires some mobility of the hip and knee.

It is recommended that a person who has no use of their right leg and does not wear a prosthesis or the prosthesis manufacturer has specified that the prosthesis is inappropriate for driving, should drive a vehicle with automatic transmission and an accelerator fitted to the left of the brake pedal for left foot operation. As an alternative, a hand operated accelerator is acceptable.

Left foot accelerator pedal
The reasons left foot accelerator use is recommended rather than using the left foot to operate the unmodified accelerator pedal include:

• the vehicle cabin/foot well is designed to optimise right foot placement for both accelerator and brake (hence these controls are usually to the right of the midline when the driver is seated optimally in the driver position),
the brake pedal is usually positioned higher than the accelerator and there is a possibility of the left foot “catching” on the underside of the brake pedal when moving from accelerator to brake, especially when quick movements are required (e.g. in an emergency brake situation).

as the left foot has to be lifted from one to the other pedal, this action may preclude more energy efficient heel-toe pedal operation technique.

the use of the left foot on the accelerator pedal requires an angled rather than direct line of motion for the left leg which is not desirable.

repetitive crossing of the midline by the left foot, may predispose the driver to negative postural/muscular impacts (depending on length/nature of driving tasks).

If the client requests an assessment without a left foot accelerator, the following must be addressed:

1. During an OT driving test in an un-modified vehicle (preferably similar to the make/model of vehicle they will be driving), the driver must demonstrate safe, timely, consistent driving using the left leg. Also refer to section 5.6 regarding use of left leg to operate right accelerator pedal.

2. OT driver assessment /recommendations must consider:

- previous history of habitual driving using left leg (if relevant)
- any history/record of pedal confusion incidents
- previous/current driving related work/other history (e.g. operating vehicles with multiple pedals).
- co-morbidities (especially cognitive, memory, behavioural, pain, physical, sensory, chronic, deteriorating co-morbidities)
- check driver’s own vehicle design (pedal configuration)
- distances usually driven
- driving frequency (impact on postural/musculoskeletal issues increases with increased driving)
- including relevant client specific tasks during the on-road assessment, e.g. emergency brake, 3 point turn manoeuvres
- regular licence review to manage risk, if multiple issues need to be monitored.

It is recommended that OTs should advise the client:

- that VicRoads does not advise clients to drive an automatic vehicle using their left foot, however VicRoads will consider an exemption if extenuating circumstances exist,
- of possible postural/muscular/instability/fatigue issues, and
- to check with their own insurer regarding disclosure requirements relevant to how drivers use vehicle controls.

OTs may provide clients with a copy of the NHTSA (National Highway Traffic Safety Administration) guidelines regarding avoiding pedal confusion issues (Refer to Appendix A).

Prosthesis
Where appropriate, a prosthesis may be worn and used to operate controls, provided the ability to drive safely whilst using the prosthesis has been demonstrated and the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving. In order to drive a motor vehicle, a driver using any prosthesis should be able to operate the vehicle controls and instrumentation without taking their eyes off the road. The requirement to wear the prosthesis while driving would then become a condition on the licence.

Motorcycles
Motorcycles require special consideration and assessment of riding skills. It is possible with appropriate vehicle/motorcycle modifications or prosthetics for people with loss of function in one leg to ride certain types of motorcycle depending on the degree of loss, remaining abilities and balance. The rider needs to demonstrate consistent, reliable control of the motorcycle and all of its primary and secondary controls in all circumstances using ADR (Australian Design Rules) compliant and/or VASS (Vehicle Assessment Signatory Scheme) approved modifications.

Bus and truck
Bus and truck driving can be considered, but the vehicle must be able to be appropriately modified or a functional prosthesis needs to be worn. Passenger vehicle drivers (who are required to hold a ‘Driver Accreditation’) are required by law to be able to assist passengers and their luggage into or out of their vehicles. If the disability prevents this then the person will not be given permission to drive these vehicles. As commercial licence holders may seek to drive their vehicles for extended periods of time (e.g. bus drivers over an 8 hour shift, truck drivers for even longer), careful consideration to the broader issues impacting on driver evaluation need to be considered (e.g. stump considerations, endurance, fatigue).
Loss of use or impaired function of both lower limbs

Car
Where neither leg can be used, the driver may be licenced if they can use both upper limbs and are safe when operating hand controls. Hand controls are usually fitted in a vehicle with automatic transmission, and comprise a hand operated brake and accelerator system operated with one hand/upper limb. A steering aid is required to optimise steering and enable full range of steering wheel control with the other upper limb. If electronic controls (either as part of the steering aid or the hand control lever) are not used, extension of the indicator lever, may be required to enable operation of the indicators without removal of the hand from the steering aid.

The most common type of hand controls require one hand to operate the brake or accelerator lever whilst the other hand/limb operates the steering aid to provide maximum control of the vehicle in all situations. However, other types of hand controls using different mechanisms to maintain acceleration and braking exist. For example, “outer ring or inner rings” (integrated into the steering wheel design) lever acceleration/braking systems, and thumb operated accelerator (which requires the use of a hand cuff). Thumb operated accelerator systems do not require the use of a steering aid as the driver can still maintain a 2-handed steering wheel grip. (Refer to Section 5.5 ‘Steering aids’)

Vehicle choice is important as frequently used instrumentation needs to be easily accessible and operable without removing a hand from either the steering wheel or hand operated brake or accelerator controls. If this is not the case, modifications will be required.

If muscle spasms are present in the lower (non-functioning) limbs, they will need to be controlled by medication, restraints, pedal guards or positioning so that the person does not inadvertently activate or move controls or instrumentation while the vehicle is in use.

Prosthesis
Where appropriate, a prosthesis may be worn and used to operate hand controls, provided the ability to drive safely whilst using the prosthesis has been demonstrated and the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving. In order to drive a motor vehicle, a driver using any prosthesis should be able to operate the vehicle controls and instrumentation without taking their eyes off the road. The requirement to wear the prosthesis while driving would then become a condition on the licence.

Motorcycles
Motorcycles require special consideration and assessment of riding skills.

It may be possible with appropriate motorcycle modifications for people with loss of function in both legs to ride certain types of motorcycle. There are also a range of three-wheeled motorcycle options available. If a wheelchair is required for mobility, the ability to carry the wheelchair should be considered.

Bus and truck drivers
Not appropriate.
4.6 Loss of or impaired use of one side of body

Left upper and left lower limb

Car
A person who has lost the use of both their left arm and left leg will require adaptive driving equipment or fitting of a prosthesis in order to compensate for the loss of ability to reach and operate vehicle controls and instrumentation.

The driver needs to show the ability to be able to reach and operate all instrumentation and controls and the ability to control the steering wheel and turn it through the full range of movement. Seating and balance requirements are also important considerations.

A steering aid is normally necessary to provide maximum control of the vehicle if the driver is only able to operate the steering wheel with one hand (refer to Section 5.5 ‘Steering aids’). In most cases power steering will be required.

All instrumentation needs to be easily accessible and operable without removing the controlling hand from the steering wheel. For example, modification of all controls, including automatic gear shift and parking brake, to allow operation of instruments without removing the hand from the wheel whilst the vehicle is in motion may be required.

Manual
The use of both arms is required to control a manual vehicle. It is not acceptable or safe for a person to let go of the steering wheel in order to change gears.

A person who has no use of their left leg cannot operate a clutch in a manual vehicle unless the vehicle has been adapted with an alternative clutch system operated by other means and the clients can demonstrate consistent reliable control. Otherwise these drivers must drive vehicles fitted with automatic transmission.

Prosthesis
Where appropriate, a prosthesis may be worn and used to operate controls, provided the ability to drive safely whilst using the prosthesis has been demonstrated and the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving. In order to drive a motor vehicle, a driver using any prosthesis should be able to operate the vehicle controls and instrumentation without taking their eyes off the road. The requirement to wear the prosthesis while driving would then become a condition on the licence.

Motorcycles
Motorcycles require special consideration and thorough assessment of riding skills.

It may be possible with appropriate vehicle modifications or prosthetics for people with loss of function in one arm and one leg to ride certain types of motorcycles. This will be included as a condition on the licence. Alternatively, three wheeled motorcycle options could be considered if postural stability and other motorcycle requirements (e.g. ability to lift/manoeuvre/park a motorcycle with 2 wheels) is a constraint.

The rider needs to demonstrate consistent reliable control of the motorcycle and all of its primary and secondary controls in all circumstances using ADR (Australian Design Rules) compliant and/or VASS (Vehicle Assessment Signatory Scheme) approved modifications.

Bus and truck
Not appropriate.

Right upper and right lower limb

Car
A person who has lost the use of both their right arm and right leg will require adaptive driving equipment or fitting of a prosthesis in order to compensate for the loss of ability to reach and operate vehicle ancillary controls.

The use of both arms is required to control a vehicle with manual transmission. The driver needs to show the ability to reach and operate all ancillary controls and the ability to control the steering wheel and turn it through the full range of movement. A steering aid is normally necessary to provide maximum control of the vehicle because the driver is only able to operate the steering wheel with one hand (refer to Section 5.5 ‘Steering aids’). In most cases power steering will be required.

It is not acceptable or safe for a person to let go of the steering wheel in order to change gears. A person who has no use of their right leg and does not wear a prosthesis or the prosthesis is inappropriate must drive an automatic vehicle with an accelerator fitted to the left of the brake pedal for left foot operation, unless able to meet the requirements for exemption, outlined previously in section 4.5.

All secondary controls need to be easily accessible and operable without removing the hand from the steering wheel. For example, modification of all controls to allow operation of frequently accessed instruments without removing the hand from the wheel may be required.
Prosthesis
Where appropriate, a prosthesis may be worn and used to operate controls, provided the ability to drive safely whilst using the prosthesis has been demonstrated and the prosthesis manufacturer has not specified that the prosthesis is unsuitable for driving. In order to drive a motor vehicle, a driver using any prosthesis should be able to operate the vehicle controls and instrumentation without taking their eyes off the road. The requirement to wear the prosthesis while driving would then become a condition on the licence.

Motorcycles
Motorcycles require special consideration and thorough assessment of riding skills.

It may be possible with appropriate vehicle modifications or prosthetics for people with loss of function in one arm and one leg to ride certain types of motorcycles. This will be included as a condition on the licence. Alternatively, three wheeled options could be considered if stability is a problem.

The rider needs to demonstrate consistent reliable control of the motorcycle and all of its primary and secondary controls in all circumstances using ADR (Australian Design Rules) compliant and/or VASS (Vehicle Assessment Signatory Scheme) approved modifications.

Bus and truck
Not appropriate.

4.7 Minimising fatigue

Contributing factors
Consideration needs to be given to the cognitive and physical demands of driving.

Fatigue may be related to factors including:
- time away from driving and associated anxiety
- medication
- brain injury
- reduced hearing abilities
- incorrect posture
- periods of muscular inactivity
- neurological conditions e.g. multiple sclerosis (MS)
- musculoskeletal conditions e.g. arthritis
- pain

Assessment or learning to use vehicle modifications may also influence stress levels that may further increase fatigue.

The nature of the driving environment will also influence how quickly some people fatigue. Driving in peak hour traffic or through many complex intersections or unfamiliar areas may accelerate the onset of fatigue.

Suggestions for minimising fatigue
- Seating should be comfortable to ensure good posture, stability of upper and lower limbs and visual access through the front windscreen and around the vehicle.
- All controls should be within easy reach.
- Vehicle cabin temperature should be maintained at a comfortable level.
- The timing, nature and length of assessment or training sessions should be tailored and graded to consider fatigue levels.
- Taking breaks as appropriate during driving.
- Restricting driving to a local area to limit driving time.
- Choosing to drive when fatigue is likely to be less (e.g. for some conditions morning rather than late afternoon or night).
- Avoid complex/busy/challenging driving conditions or manoeuvres (e.g. peak hour, poor weather).
- Pre-plan journeys to unfamiliar areas to
  - (a) be aware of possible routes and time required to drive to destination,
  - (b) plan for stops at regular intervals
  - (c) share the driving if possible
  - (d) plan for stop overs during long drives.
- Optimise pre-journey status, ensure a good night’s sleep, adequate hydration/nourishment

Vehicle selection and the ergonomic features of the driving controls should also be considered in order to minimise fatigue related to musculoskeletal conditions.
SECTION 5
Licence conditions and vehicle modifications

This section describes different types of licence conditions and vehicle modifications and explains the legal obligations associated with their use, including driver/rider licensing and vehicle/motorcycle registration requirements.

5.1 Conditions and restrictions

Conditions may be imposed on a licence and/or learner permit due to impairment, disability or medical reasons, offence(s), administration or legal requirements. These are shown on the licence and/or learner permit card as a code.

Learner permit conditions

Conditions (and corresponding licence card codes) that may be imposed on a learner permit

I = Ignition Alcohol interlock device
S = Glasses or corrective lenses must be worn
V = Driver aids or vehicle modifications
X = Any condition or restriction advised by VicRoads in writing
X can denote generic conditions (XGEN). These can include multiple different conditions under X or a single condition. XDR1 is only to drive with a driving instructor or OT, XCDL is only to drive in a dual control vehicle

Licence conditions

Conditions (and corresponding licence card codes) that may be imposed on a licence

There is a standard set of licence conditions including:

A = Automatic transmission
B = Synchromesh transmission (heavy vehicles only)
E = Motorcycle novice rider restrictions apply during the restricted period of obtaining a motorcycle licence (no pillion passenger, zero BAC, headlights on at all times, Learner Approved Motorcycle (LAMs) – see VicRoads website)
I = Ignition Alcohol interlock device
N = Automatic transmission (motorcycle)
P = Passenger restriction
S = Glasses or corrective lenses must be worn

V = Driver aids or vehicle modifications as directed in writing by VicRoads
X = Any condition or restriction advised by VicRoads in writing (e.g. specific additional mirror in vehicle cabin or to be driving only when under the instruction of a driving instructor or for the purpose of a VicRoads/OT test)
Z = Zero blood alcohol limit and must carry licence at all times

Conditions and restrictions

Legally, the “licence” is the official record maintained on VicRoads database. OTs can recommend to VicRoads the imposition or removal of licence conditions however the client must wait for written confirmation from VicRoads before driving with the new condition (or without the condition in the case of a removal). For example, a client with an existing geographical area restriction to drive within a 10km radius from home, who then passes an assessment to have the restriction extended to 15 km from home, must continue to comply with the 10km restriction until confirmation from VicRoads is received.

If a condition is shown by a code on the licence or learner permit, and it is a “generic” condition (e.g. “V” above), VicRoads will write to the customer with a full explanation of the condition.

5.2 Acceptable conditions

While VicRoads may legally impose any condition or restriction on a licence, VicRoads will only impose conditions or restrictions that are enforceable and able to be complied with. The Assessing Fitness to Drive guidelines (2016) provide guidance on appropriate conditions. If VicRoads receives a report from an OT with an inappropriate condition, VicRoads will contact the OT concerned, to clarify the matter.
The OT must provide clear relevant explanations within the Occupational Therapy Driver Evaluation Report when recommending the addition and/or removal of one or more condition(s). The recommended condition(s) must be practical and relevant to the client and be justified, based on findings from the off-road assessment (e.g. in relation to musculo-skeletal or vision requirements) or observations made during the on-road driving test (e.g. requirement to only drive a vehicle with automatic transmission).

The client must understand the condition and be reasonably expected to be able to comply. In some cases where compliance or cognitive issues are present, it is advisable for the OT to discuss conditions with relevant family members, health practitioners or significant others. In addition, the OT should consider providing written documentation explaining the licence conditions and/or any advisory comments to the client and/or others (consistent with the “informed consent” process prior to the commencement of the Occupational Therapy driver assessment).

Enforceability of conditions
Conditions must be able to be enforced. Police must easily be able to determine that a condition is either being complied with or not. For example, police can easily inspect a vehicle and confirm that passenger restrictions are being adhered to or that the vehicle has automatic transmission and vehicle modifications such as hand controls are fitted to the vehicle. However, it is not possible to verify that the person has taken their prescribed medication, was driving with the radio off or has not driven for more than a specified amount of time. It should be noted however, that as driver compliance technology improves, some currently unenforceable driver conditions may be available in the future.

Able to be complied with by the driver
Conditions must be able to be complied with by the driver and should take unexpected situations into account. For example, it is not appropriate to restrict a person to:

- a fixed route only along a specific road (e.g. road works or detours may create a problem when the person cannot legally detour off the route. Note that accessing a petrol station is important);
- routes with complex defined boundaries (e.g. based on Street Directory maps),
- drive when it is not raining (the driver may leave home in dry weather but the weather may change prior to completing the return journey home),
- drive at a certain speed or below the speed limit, or
- drive only with a specified accompanying driver or spouse (as the driver being assessed must demonstrate the skills to be able to drive a vehicle independently and safely without any assistance from an accompanying passenger).

Examples of appropriate licence conditions:

a) Vehicle conditions:
- power steering or power brakes
- automatic transmission
- built up pedals
- specialised seating or harness
- modified vehicle controls; type of modification must be specified (e.g. hand controls, left foot accelerator)
- additions or alterations to vehicle controls or aids: steering aid, certain types, or placement of mirrors
- air conditioner must be fitted.

b) Driver conditions:
- prosthesis to be worn whilst driving (specify which limb and right or left)
- corrective lenses or eye patch to be worn whilst driving (as prescribed by eye specialist)
- zero BAC (may be recommended by OTs, particularly for clients with cognitive changes after brain injury)
- to only drive a specified vehicle (registration number is required)
- passenger restrictions
- no night driving or driving during peak times, specify days of the week (if applicable) and restriction times (e.g. No driving Monday – Friday 7.00am – 9.30am and 2.30pm – 6.00pm)
- driving area restrictions (note access to a petrol station is important). For example, a km radius, can be any reasonable distance from a given geographical location and can exclude specific driving environments or infrastructure features such as:
  - the Central Business District (CBD) – is acceptable but a defined geographical area is preferred so the condition can be enforced, such as within 3km of Flinders St Station.
  - not crossing major roads, for people in outer metropolitan or rural/regional areas
  - not to drive on freeways or roads with speed limits over 80 km/h,
- the nearest direct route between home address and closest town for country areas (consider also alternative parallel routes in cases where roads are regularly used for livestock crossings, or are may be closed due to other reasons)
- easily defined areas can be considered, such as ‘no further north than xxx highway’.
5.3 Advisory comments

At the conclusion of the off and on-road assessments, the OT may like to make suggestions to a client about driver behaviours which may not necessarily require a formal licence condition.

These suggestions might relate to driving under specific circumstances or adopting certain vehicle adjustments or following up with other health professionals particularly if they assist in the safe operation of the vehicle, and/or to managing driving transitions in cases where drivers need to plan ahead for short term driving cessation. Collectively, such suggestions, when included on the Occupational Therapy Driver Evaluation Report, are referred to as “advisory comments”.

Advisory comments are made considering the client’s level of insight, understanding of their current and future mobility needs and other cognitive factors such as memory.

It is important for VicRoads to be able to differentiate between “recommendations for conditions” and “advisory comments”. Advisory comments should therefore be clearly marked as “advisory comments” on the Occupational Therapy Driver Evaluation Report, as they may be dealt with administratively but are inappropriate to consider as “licence conditions” so will not appear on the VicRoads issued licence.

It is appropriate to record advisory comments on the Occupational Therapy Driver Evaluation Report if it is helpful for the driver and/or doctor to have a record of the comments and if third parties (such as insurance companies, or an employer) need to see them documented. It is also helpful for VicRoads, in cases where the client appeals against VicRoads licensing decisions, to understand more fully whether the client has been referred to other services and offered advice or resources (e.g. generalist OT for mobility aid review or mobility/employment counselling, provided with the RACV alternative mobility booklet, referred to Dementia Australia for support groups).

VicRoads may also include reference to “advisory comments” in correspondence with the client and to reinforce that advisory comments are not regarded as licence conditions. Other health professions including medical practitioners or eye specialists can also make advisory comments which VicRoads will include in a letter to the client.

Examples of advisory comments include:

a those to be followed up by VicRoads

• review by medical practitioner in a specified period of time
• review by eye care practitioner in a specified period of time

b those directed to clients

• not to drive when temperature is above ‘xx’ degrees
• not to drive for more than ‘xx’ hours in any 24-hour period
• to avoid driving in the rain when possible
• not to drive with the radio on
• to apply advice re seating or posture
• take medication as prescribed

5.4 Vehicle modifications – licensing

A range of vehicle modifications are available to assist drivers with physical impairments and/or limitations. Vehicle modifications vary significantly in cost and in terms of technical, administrative and vehicle registration related complexity. Commonly vehicle modifications are described as “simple or low tech” to “high-tech” vehicle modifications. Low tech vehicle modifications include “add on” devices such as attachable, mechanical steering aids and hand controls. ‘High-tech’ vehicle modifications can include modifications to the driver control systems and also to the vehicle itself (e.g. lowered floors, raised roof, wheelchair entry, drive from wheelchair capacity, wheelchair lockdown systems, ramps or hoists, keyless entry).

Specialised skills are required to prescribe ‘high-tech’ vehicle modifications that offer an alternative method of operating a primary control (e.g. lever acceleration/brake system, joystick steering) and/or integrate several vehicle controls into one device (such as a single touch panel for all secondary controls, a customised spinner aid or hand controls that integrate secondary control functions including indicators, horn, lights).

OTs should evaluate whether they have the required training, knowledge and level of expertise to prescribe and supervise the delivery and training required for some of the more sophisticated custom designed (and therefore not “off the shelf”) “high-tech” vehicle modifications. The option to work with, or refer to, an OT with relevant expertise should be considered, to ensure that the client receives appropriate advice in the most time and cost efficient manner.
Driving a modified vehicle

Drivers who require vehicle modifications should complete an Occupational Therapy driver assessment. Individuals who hold a current licence and wish to learn to drive a modified vehicle or a vehicle with different modifications to their existing conditions or restriction(s) need to obtain a medical clearance and complete an Occupational Therapy driver assessment and any training required to learn to drive the modified vehicle (e.g. conducted with a driving instructor utilising both off-road and on-road driving experiences). After passing an OT driving test, an appropriate licence condition would be applied to their licence.

Individuals who wish to upgrade their adaptive equipment; for example, to a different type of hand control or steering device, are not required to notify Medical Review if they will effectively continue to be driving under their current licence conditions and these remain unchanged. If, however, their medical/disability status has changed, and/or they want to add or remove different types of adaptive equipment, (e.g. they were previously licenced to drive with a left foot accelerator, but now wish to learn to drive with hand-controls) this will require input from Medical Review and an OT, particularly with regard to the ergonomic match of the equipment to their impairment and for training and testing requirements. The OT would obtain Medical Review clearance and forward a report to Medical Review in the usual way.

Furthermore, all drivers who use, or change their use of vehicle modifications, should be advised to make contact with their vehicle insurance company to ensure they meet disclosure obligations regarding personal disability and vehicle modifications. The OT should record that this advice has been given to the client in the client’s file.

People who hold a current learner permit may learn to drive any type of vehicle, modified or unmodified. An "L plate" must be displayed. An additional Driver Under Instruction/Assessment plate is not required for drivers with current learner permits who display the "L plate".

For previously licenced drivers or learner permit holders seeking full licensure, VicRoads will only provide approval to drive a modified vehicle after a person has demonstrated their ability to drive safely using these modifications during an OT driving test. A licence with specified condition(s) will then be issued.

Under exceptional circumstances, some drivers requiring simple vehicle modifications may be tested by VicRoads (e.g. via the GLS Drive test for probationary licence holders or the MRDT for experienced drivers without significant physical or cognitive issues). However it should be noted that tests are conducted primarily for licensing purposes to ensure that a driver is able to safely control the vehicle and perform other driving functions adequately in order to meet test pass criteria. These VicRoads testing processes do not evaluate suitability or appropriateness of equipment or modifications or rehabilitation/remediation requirements.

Australian Standards

Standards exist for motor vehicle controls (Adaptive Systems for People with Disabilities). This Standard is AS 3954 1991 (reconfirmed in 2014, but as at 2018 are currently under review). Part One details general requirements. Part Two details specified product requirements for hand controls.

Some vehicle modification information contained in the standard is worthy of summarising here. The standard states that:

- Controls must be capable of operation without interference by other vehicle components.
- When released, all controls operating the brake and accelerator must return to the neutral position.
- Vehicle modifications should not interfere with driver safety systems such as restraints/seat belts, steering wheel, knee or side pillar airbags.
- Each person’s abilities and disabilities can vary dramatically, so modifications need to be tailored to meet individual needs.
- Correct selection of the vehicle is important to allow maximum comfort and to allow the driver to operate the vehicle independently and with the least amount of adaptive equipment.
Modern vehicles offer higher levels of safety (via features such as electronic stability control, auto emergency braking and intelligent speed assist) and where practical, drivers are encouraged to drive late model vehicles. If an older vehicle is to be considered for modifications, then its’ suitability should be assessed by the OT, in conjunction with the vehicle modifier and a VASS (Vehicle Assessment Signatory Scheme) authorised engineer (see section 5.8). Some design considerations include:

- **vehicle style** – two door cars provide wider door openings for the driver and front passenger, but may be lower and have deeper seats thereby potentially compromising access and especially egress (e.g. vehicle occupants may not be able to complete a horizontal vehicle to wheelchair transfer)

- **automatic transmission** – reduces complexity of driving as no gear changes are required

- **vehicle primary controls** – need to be easily visible and operable, without the need for visual checking of limb placement, taking into account the client’s functional limitations

- **assistive technology** – consider benefits/disadvantages of technology such as lane departure warning, reversing cameras, etc

- **airbags** – people with short stature will need to be positioned at the appropriate height to gain adequate visibility external to the vehicle and maximum protection from airbag deployment, so a raised seat and extension foot pedals may be required.

### 5.5 Steering aids

**Requirements**

There are many different types of steering aids. There are simple round steering aids or spinner knobs (some are designed for either right or left hand use), U-pins and tri-pins which can be fitted to the steering wheel. Also available are more complex electronic multi-function spinner devices and joy-stick systems which require integration with existing vehicle systems, specialised installation and a VASS Approval Certificate. All steering aids are designed to be used by drivers with a disability.

There is no process for clients with temporary upper limb injuries to use a steering aid on a temporary basis without an Occupational Therapy driver assessment. VicRoads does not recommend that steering aids be fitted to any vehicle without the driver going through the Medical Review process and completing an Occupational Therapy driver assessment. This is due to possible unsafe driving, crash risk and insurance ramifications if the steering aid is used without training and/or installed incorrectly.

Steering aids should not interfere with access and use of secondary controls that may be located on the steering wheel. Furthermore, steering device installation needs to consider steering wheel air bag systems.

A steering aid is considered to be an external protrusion with potential for head and chest impact and serious injuries in the event of a crash. Therefore, their application requires careful consideration of all client related and safety impacts.

For these reasons, it is recommended that individuals consult a VASS signatory if prescription is complex, (see section 5.8) for advice, prior to purchasing or installing a steering aid. In addition, Australian standards for steering wheels must be considered. If a steering aid is made a condition on a licence or learner permit, due to a concern that the driver will not have adequate control unless it is used, then it becomes a legal requirement that the person must only drive a vehicle fitted with a suitable steering aid.

Reduced effort steering is an option for clients with significantly reduced strength and some current vehicles require very low effort to turn the wheel. If a client can turn a steering wheel from anti-clockwise lock to clockwise lock, (with the engine running and the vehicle stationary) without undue effort, then additional reduced effort steering would not usually be required.

**Notifying VicRoads**

If a disability is present which requires VicRoads to be notified, (e.g. a permanent disability that may impact on safe driving), VicRoads needs to be advised that a steering aid is required to manage vehicle control required for safe driving. VicRoads will place a vehicle modification licence condition on the driver’s licence and record the specific nature of the vehicle modification(s) used on the driver’s licence record.

**Using steering aids**

Drivers need to demonstrate the consistent ability to reliably operate all essential controls and turn the steering wheel through the full range of movement, in a variety of on-road manoeuvres.
Different examples of steering devices
+/- integrated secondary controls

The use of one arm may be sufficient to drive an automatic vehicle, but the driver must be able to operate all the controls and demonstrate safe car control at all times, without removing the single arm/hand from the steering wheel.

A steering aid is beneficial in providing maximum control of the vehicle in all situations where the driver is only able to operate the steering wheel with one hand. In most cases power steering is required in addition to a steering aid.

Steering aids need to be fitted in a position on the steering wheel which allows ease of access to and operation of all essential instruments without removing the controlling hand from the wheel.

A person must have at least one hand controlling the steering wheel at all times. If a person removes their controlling hand from the steering wheel during any of the VicRoads tests, it is regarded as an immediate failure due to lack of, or unsafe, car control. For instance, a one armed person attempting to drive a manual vehicle, who removes their controlling hand in order to change gears, would fail the test. Similarly, a one armed person driving a vehicle with automatic transmission should not remove their controlling hand to operate the windscreen wipers or indicators. Therefore it is very important to consider location of these secondary controls in the driver’s own vehicle and to evaluate if adaptations are required.

5.6 Left foot accelerator pedal

A person who has lost or has no functional use of their right foot or leg needs to use a left foot accelerator unless they can demonstrate appropriate control by use of a prosthesis in the case of an amputee or has complied with the requirements described in Section 4.5 above to use their left foot.

Use of left foot on right accelerator pedal during a VicRoads test

VicRoads, as part of normal entry level testing standards for all drivers, requires a person to be able to demonstrate that they can maintain safe control of a vehicle. VicRoads will not test an applicant with a foot/leg impairment who seeks to gain their licence by using their left foot (instead of their right foot) to operate an accelerator in the traditional location to the right of the brake pedal as this represents an unsafe driving practice. The applicant will be directed to Medical Review and will need to submit a medical report form as part of the usual process.
Why drivers should not use left foot on right accelerator pedal

This topic is also covered in section 4.5.

a. Postural considerations

The practice of using the left foot to operate accelerator and brake pedals designed for operation by the right foot is likely to result in an asymmetric seating position which may result in driver fatigue and, in the longer term, possible spinal problems. Cars are ergonomically designed for use of right foot on pedals. (Refer to section 4.5)

Asymmetric posture, combined with the fact that the only available foot must be used to control a pedal, increases the likelihood of the driver being unable to maintain balance and an upright position behind the wheel during forceful activation of either brake or accelerator.

b. Inadvertent use of pedals

VicRoads does not recommend that a driver use the left leg to operate the right foot accelerator. If the left foot is used for the standard brake and accelerator configuration, unlike when the right foot is used, an angled rather than a direct line of motion is adopted. This angle may predispose the driver to accidental misuse of either pedal. (Refer to Appendix A – NHTSA (National Highway Traffic Safety Administration) guidelines regarding avoiding pedal confusion). Because of this angle there is a potential for the foot to slip from the (higher) brake pedal to the (lower) accelerator pedal. If it does, it is more likely to engage the accelerator pedal potentially resulting in inadvertent vehicle movement.

c. Obstruction of brake operation

The usual requirement to brake in a motor vehicle entails withdrawal of the foot from depressing the accelerator pedal and lifting and locating the foot onto the brake pedal before applying downward pressure to engage the brake. When the driver uses their left foot on the accelerator pedal, withdrawal and lifting of the foot from the (lower) accelerator pedal may take longer (compared to when the action is completed with the right foot) as the vertical displacement is greater in order to avoid the foot being impeded or caught by the (higher) brake pedal. Thus emergency operation of the brake pedal may be more difficult and/or take longer.

d. Transfer of training effects

During the course of driving over some years, an able-bodied driver becomes accustomed to automatically moving the right leg from the outermost position (on the accelerator) to a position closer to the midline for brake control. If a person was to lose the right foot, it is a more natural transition to move the left leg from the outermost position (for accelerating) to a central position closer to the midline (for braking). VicRoads discourages drivers who lose the use of their right leg/foot from trying to retrain their left foot to cross the midline to operate a standard accelerator or brake arrangement. In such circumstances an Occupational Therapy driver assessment is warranted and the driver encouraged to learn to drive using a left foot accelerator.

Fitting two accelerator pedals

This is possible to enable two separate drivers to use the accelerator pedal which best matches their needs and is not uncommon in a family situation where one partner wants to drive the vehicle with automatic transmission in the usual way whilst the other partner is licensed to drive only with a left foot accelerator. In such circumstances, both the right and left accelerator pedals must be independently capable of being rendered inoperable. This will enable drivers to operate the vehicle using either left or right accelerator pedals, allowing different drivers to use the same vehicle.

Portable left foot accelerator pedals

Portable left foot accelerator pedals are intended for temporary use, such as when driving a hire car. They can be used for operating a vehicle with automatic transmission, providing the following are addressed:

- the product complies with Australian Standards
- the product is fitted correctly to the vehicle in accordance with the manufacturer’s instructions, and
- manufacturer’s advice re storage, maintenance and other considerations are adhered to.

It is also important to note that the relevant Australian standard makes reference to adequate installation of the device to the vehicle (as mentioned above).

There are a number of different types of portable left foot accelerator pedals available.

From an OT perspective, it is important to consider client evaluation/advice re:

- capacity to install/remove the portable left foot accelerator pedal device if planning to do so independently according to the manufacturer’s instructions,
- ensuring that the pedal does not apply force to the original accelerator pedal when in the released state,
- ensuring that the portable left foot accelerator pedal correctly returns to the normal position when released,
- whether the portable left foot accelerator must be bolted to the floor and therefore would need to be installed by a qualified installer (e.g. motor mechanic).
- training and assessment recommendations to ensure consistent and safe operation of the device.
- owner/operator requirements/responsibility to ensure the device is structurally and mechanically sound and in good working order: particularly relevant if the portable left foot accelerator owned by the driver is used infrequently, and
- informing the client that portable left foot accelerator pedals are intended for temporary use and it is desirable for a qualified installer (e.g. motor mechanic) to install a permanent left foot accelerator pedal (rather than a “portable” variety) in the client’s vehicle for regular and longer term use.
There are other factors which need to be considered prior to purchase and when giving advice regarding use of portable left foot accelerator pedals.

If the driver wants to enable another user to frequently drive the vehicle unmodified, the inconvenience and time requirements associated with needing to switch over regularly (and the inherent increased risk of errors when re/assembling) needs to be understood. Also, it is important to consider the road environment and the potential this poses to potentially cause pedal misplacement, especially for devices where the pedal just sits on the floor of the driver foot compartment.

For example, it would be desirable to ensure secure attachment of a temporary left foot accelerator (e.g. by bolting to floor) if the driver was driving frequently over uneven, unmade gravel roads.

(See also “Hire vehicles and use of driver aids” in next section).

5.7 Hand controls

It is expected that hand controls fitted to a vehicle will comply with Australian Standards. However, this is not a legislative requirement in Victoria. The Standards are meant to be used as guidelines to be followed when giving advice and for consistency. VicRoads encourages people to comply with these Standards.

There are a range of different hand controls with differing operational mechanisms and options for integrated secondary controls such as indicators, wipers, horn and lights. Alternatives to the traditional lever action hand control style include wired and wireless satellite accelerators operated via a cuff, over and under ring accelerators which are part of the steering wheel, and joy stick steering and/or acceleration controls. A pedal guard may also be required if the driver experiences spasms which could unintentionally interfere with the foot pedals. OTs should ensure that they match the client’s needs to the correct equipment and their funding circumstances and that the client receives appropriate training to learn to drive with the equipment.
Portable hand controls
Portable hand controls are intended for temporary use, such as when hiring a car. They can be used for operating a vehicle with automatic transmission, providing the following are addressed:

- the product complies with Australian Standards,
- the product is fitted correctly to the vehicle in accordance with the manufacturer’s instructions, and
- manufacturer’s advice re storage, maintenance and other considerations are adhered to.

It is also important to note that the relevant Australian standard makes reference to adequate installation of the device to the vehicle (as mentioned above).

There are a number of different types of portable hand controls available.

From an OT perspective, it is important to consider client evaluation/advice re:

- capacity to install/remove the portable hand control device if planning to do so independently according to the manufacturer’s instructions,
- how the device is attached/clamped to the brake and accelerator pedals (it must be securely fixed to the pedals as per the manufacturers instructions),
- it is to be used with a steering aid to ensure adequate steering control,
- what method is used to support the device when the hand is removed, to ensure the device remains in reach at all times during driving,
- upper limb capacity is adequate to operate the portable hand control safely,
- training and assessment recommendations to ensure consistent and safe operation of the device,
- owner/operator requirements/responsibility to ensure the device is structurally and mechanically sound and in good working order: particularly relevant if the portable hand controls are owned by the driver and used infrequently, and
- informing the client that portable hand controls are intended for temporary use and it is desirable for a qualified installer (e.g. motor mechanic) to install hand-controls of a non-portable variety (rather than “portable” variety) in the client’s vehicle for regular and longer term use.

There are other factors which need to be thought through when considering use of portable hand controls. If the driver wants to enable another user to frequently drive the vehicle unmodified, the inconvenience and time requirements associated with needing to switch over regularly (and the inherent increased risk of errors when re/assembling) needs to be understood.

(See also “Hire vehicles and use of driver aids” in next section).

5.8 Vehicle modifications – registration

Applicable legislation
Modifications to vehicles have the potential to adversely affect a vehicle’s compliance with the Standards for Registration, its’ structural integrity, the operation of its’ safety systems or its’ handling characteristics.

Refer to Vehicle Standards Information sheet 8 (Guide to modifications for Motor Vehicles) current version October 2011, available on the VicRoads website.

Generally vehicle standards legislation does not specifically cater for occupants with a disability. However Regulation 257 (Road Safety (Vehicles) Regulations 2009), requires that a registered vehicle may only be modified:

- with VicRoads approval, or
- in accordance with VicRoads guidelines

Vehicle Assessment Signatory Scheme
The Vehicle Assessment Signatory Scheme (VASS) is a scheme for the certification of modified, imported, and individually constructed vehicles in Victoria. VASS signatories are able to issue an Approval Certificate for registration purposes in Victoria.

To obtain an Approval Certificate the services of a VASS Signatory authorised to certify the class of modification or vehicle for which you need the certificate, must be engaged.

A VASS Signatory who provides an Approval Certificate must:

- personally inspect the vehicle
- ensure all work, including any modifications, are correctly carried out
- certify that the vehicle complies with the applicable standards.

The VicRoads Copy of the Approval Certificate must be presented, together with the vehicle, at a VicRoads Customer Service Centre for registration to have its’ description changed. The VASS certificate is valid for 30 days. If the vehicle is to be registered, the usual supporting documentation will also need to be supplied. Refer to VicRoad’s website for further details.

VicRoads approving modifications
VicRoads cannot approve a modification which results in a vehicle not complying with the standards for registration, unless the vehicle is registered subject to conditions.

Vehicle owners are required to notify VicRoads of any alteration to a registered vehicle that changes the vehicle description or that affects compliance with the standards for registration.

Vehicle owners are responsible for their vehicle’s compliance with standards.
Vehicle modifications may be divided into the following categories – one or more of which may apply to a modified vehicle:

- **Approved modifications**
- Modifications which require alteration of the recorded vehicle description
- Modifications which cause the vehicle to no longer comply with the standards for registration
- Modifications for which a VASS Approval Certificate is required

**Approved modifications**

From a registration point of view, generally there is no need to notify VicRoads when approved modifications are made.

Some examples of approved modifications include:

- additional lighting that complies with the standards for registration
- roof rack
- supplementary mirrors which do not interfere with or significantly reduce the area of mirrors required by the standards for registration
- any minor modification, which does not adversely affect the structural integrity of the vehicle, its’ handling characteristics, the operation of its safety systems or its compliance with the relevant standards for registration.

Where there is any doubt about the status of a modification, it is best to consult a VASS engineer prior to making any modifications.

**Obtaining a VASS Approval Certificate**

Any modification that may impact on Australian Design Rules (ADR) or standards for registration compliance of the vehicle may require a VASS Approval Certificate from an engineer. This will be determined by the engineer and may include situations where:

- seats or seat belts are fitted or changed where it was not a manufacturer’s option
- wheelchair restraints are installed (which must comply with the requirements of AS/NZS 10542.1:2015)
- seating is removed thus changing the vehicle category
- the modification affects the structural integrity of the vehicle
- the modification affects the handling characteristics
- the modification may affect the original occupant or vehicle safety systems
- the modification affects the relevant standards for registration where such is not assessable visually

A VASS Approval Certificate can be obtained from a participant in the VicRoads Vehicle Assessment Signatory Scheme.

**Hire vehicles and use of driver aids**

It is not unusual for drivers with vehicle modification-related licence conditions to need to drive a vehicle in a different state or overseas. Hence they may ask OTs about vehicle hire companies that supply vehicles with modifications (e.g. hand controls, left foot accelerator pedals), whether they can hire cars and install their own vehicle aids and the implications of this (e.g. if higher rental insurance applies if they use modifications in a hire vehicle).

If the conditions on a driver’s licence stipulate that they can only drive with certain modifications or aids, then they have a legal obligation to only drive a modified vehicle or with specific adaptive equipment. If they wish to hire a car, the hire car should comply with their licence condition(s). It is the driver’s responsibility to disclose their condition to the hire company and ensure that they can obtain the vehicle aids/adaptations required to comply with their licence requirements and safely drive the hire car. Portable hand controls and portable left foot accelerator pedals can be used in hire cars, provided the hire car company approves of this.

Disabled Motorists Australia (DMA) offer advice to their members and the public about these and other matters. It is worthwhile checking their website and contacting them well ahead of when the driver may need to organise a hire car. There may be limited numbers of vehicles or aids available through a particular hire company (especially over peak holiday periods). See the resource list at the end of this document for DMA contact details.
SECTION 6
Heavy vehicles and motorcycles

This section includes information on different types of heavy vehicles and motorcycles, including licence categories and licensing issues, training requirements for these vehicles and the OT Motorcycle Ability Assessment Guidelines (October 2016).

6.1 Licence classes and training

The following table lists the Victorian licence categories and the kinds of vehicles that can be driven by the holder of each licence category. For further details refer to Section 4 of Assessing Fitness to Drive medical Guidelines.

<table>
<thead>
<tr>
<th>Licence category</th>
<th>Vehicle type that can be driven</th>
</tr>
</thead>
<tbody>
<tr>
<td>R MOTOR CYCLE</td>
<td>Motor bike or motor trike.</td>
</tr>
<tr>
<td>C CAR</td>
<td>Vehicle not more than 4.5 tonnes GVM (Gross Vehicular Mass) and seating up to 12 adults including the driver. May include small truck and mini-bus.</td>
</tr>
<tr>
<td>LR LIGHT RIGID</td>
<td>Any rigid vehicle greater than 4.5 tonnes GVM or a vehicle seating more than 12 adults that is not more than 8 tonnes, plus a trailer of no more than 9 tonnes GVM.</td>
</tr>
<tr>
<td>MR MEDIUM RIGID</td>
<td>Any 2-axle rigid vehicle greater than 8 tonnes GVM.</td>
</tr>
<tr>
<td>HR HEAVY RIGID</td>
<td>Any rigid vehicle with 3 or more axles greater than 8 tonnes GVM.</td>
</tr>
<tr>
<td>HC HEAVY COMBINATION</td>
<td>Prime mover + single semi-trailer or a rigid vehicle plus trailer greater than 9 tonnes GVM and any un-laden converter dolly trailer.</td>
</tr>
<tr>
<td>MC MULTI COMBINATION</td>
<td>Heavy Combination vehicle with more than one trailer.</td>
</tr>
</tbody>
</table>

6.2 Heavy vehicles

Obtaining a heavy vehicle licence

To obtain a heavy vehicle licence, applicants must successfully complete a knowledge assessment and a practical assessment, including an on-road driving and an off-road skills assessment conducted by a VicRoads accredited Heavy Vehicle Provider.

Heavy vehicle knowledge test

The heavy vehicle knowledge test must be completed in order to obtain a heavy vehicle licence. It is valid for 12 months. The knowledge test is a written test based on the material in The Victorian Bus and Truck Drivers’ handbook. The heavy vehicle knowledge test must be passed when applying for a heavy vehicle licence for the first time. Multi Combination (MC) applicants must pass a knowledge test based on information presented during the training course. The knowledge test must be passed before the applicant is permitted to commence practical assessments.

Practical tests

There are two types of practical test: a Competency Test (CT) and a Final Competency Assessment (FCA). The CT is permitted where a licence applicant believes that they have the knowledge and skills to successfully demonstrate the competencies required to pass the assessment, without any formal training. The FCA can only be completed after formal training has been undertaken.

The practical assessment is made up of on-road and off-road competencies. Off-road related tasks are related to pre-operational checks (e.g. checking tyres, load securing, couplings, chassis inspections and other vehicle checks). On-road tasks include hill stops/starts, reversing and parking.

For details of the on-road and off-road competencies refer to the VicRoads website.
All testing is performed by Heavy Vehicle Accredited Providers who will issue a Certificate of Competence when the applicant has:

- satisfied eligibility requirements
- met the evidence of identity criteria
- passed all tests to get a heavy vehicle licence.

**Determining the need for an OT heavy vehicle assessment**

An OT’s primary role is in assessing a driver with a medical condition, impairment or disability in relation to private vehicle driving abilities.

Any client who has significant physical, cognitive or intellectual impairment or disability seeking to retain, or apply for a bus or truck licence, must first pass the Occupational Therapy driver assessment to obtain/retain their private vehicle car licence and have a satisfactory medical report stating that they meet the relevant national standards.

If a test for the heavy vehicle licence class is necessary:

- it must be conducted by a course provider
- it must be in the course provider’s vehicle
- the client must pass the course provider’s standard test

**Conducting an OT heavy vehicle assessment**

OTs may conduct a heavy vehicle assessment in conjunction with a Heavy Vehicle course provider if appropriate in certain circumstances.

For example:

- when there is a level of cognitive disability and/or possibly reduced insight where the OT is evaluating the impact of cognitive demands rather than simply the operation of the vehicle.
- to assist in providing advice about the impact of physical disabilities and/or appropriate or possible vehicle modifications.

The client must have previously demonstrated competence to maintain a standard vehicle licence and meet fitness to drive requirements as applicable for a commercial drivers’ licence. The assessment is conducted with an accredited heavy vehicle course provider who provides the trainer and vehicle. The OT liaises with the course provider regarding specific driver tasks, driving environment etc., requirements and may be present during part or all of the on-road test.

It is the responsibility of the course provider to forward the relevant paperwork to the OT who submits the report to VicRoads in addition to any other relevant documentation such as the standard Occupational Therapy Driver Evaluation Report, specifying at the top of the document, that the assessment was for a heavy vehicle licence.

If the driver assessment is part of a more comprehensive work-related assessment, the OT may need to liaise with the course provider to investigate whether other work-related tasks which perhaps may not be part of the standard truck evaluations (i.e. CT and FTA) can be examined (e.g. simulated loading and unloading, pulling into loading docks, extended on-road assessment).

### 6.3 OT motorcycle guidelines

**Purpose:** Motorcycle riding is associated with different road safety risks compared to vehicle driving. Safe riding in a range of conditions relies on the rider possessing an overall higher level of physical ability than what can be accommodated for in a vehicle. Riding on a two or three wheeled device without additional protection around the rider (as is afforded by a motor vehicle) exposes the rider (and passenger) to a high number of factors (e.g. weather, road surface) that can impact on safe riding.

These OT motorcycle ability assessment guidelines (October 2016) should be applied to returning or potentially new (learner) riders with impairments/disabilities seeking to establish their capacity to ride a motorcycle.

Any rider seeking to gain/retain a licence with fitness to drive medical or disability considerations needs to be referred to VicRoads Medical Review. The OT will need to ensure the rider meets relevant national fitness to drive guidelines and the appropriate clearances are obtained from medical practitioners and VicRoads Medical Review, as per standard practices applying to all other current/prospective licence holders as highlighted below.

**Context:** These guidelines must be considered in line with the most recent and relevant VicRoads Medical Review resources and systems advice, Austroads resources and motorcycle graduated licence (M-GLS) materials namely:

- Motorcycle Permit Assessment – Rider Training Handbook
- Motorcycle Licence Assessment
- Motorcycle Assessment Module
- Check Ride Training Manual
- Any other VicRoads guidelines for OTs
Note that the motorcycle specific resources listed above have been shared with the motorcycle training and assessment providers. Information for the public, including an explanation of the motorcycle graduated licensing system, transition arrangements and the Victorian rider handbook (which outlines road law, motorcycle road craft and motorcycle safe driving practices), is available from the VicRoads website: vicroads.vic.gov.au/licences/licence-and-permit-types/motorcycle-licence-and-learner-permit

Determining the need for a motorcycle assessment

If a client holds, or wishes to apply, for a motorcycle licence or permit, the client’s suitability to ride this vehicle type should normally be determined after the successful assessment of the ability to drive a car, if they hold this licence. The OT would make the decision that a motorcycle assessment is necessary for a client, based on the need to identify the impact of any physical, cognitive, psycho-social, intellectual or other impairment or disability on skill requirements for safe motorcycle riding.

As of 2 April 2016 the compulsory VicRoads motorcycle assessments for novice riders include:

- **Motorcycle Permit Assessment** – 2 day assessment group activity with classroom, range (off-road) and on-road activities
- **Motorcycle knowledge test (paper based)** – 32 questions based on the Motorcycle Rider handbook
- **Check Ride** – 3.5 hour group ride activity on range and 90 minute ride on-road, includes feedback
- **Motorcycle Licence Assessment** – 1.25 hour individual activity with a range activity and on road assessment

All these components are delivered by organisations who are accredited to act as motorcycle providers on behalf of VicRoads.

If an OT identifies that a motorcycle assessment is necessary, then the following considerations apply:

1. It must be conducted by an accredited VicRoads motorcycle course provider.
2. The OT may choose to attend and observe the assessment.
3. First time riders must complete modules A14 to A18 of the Motorcycle Permit Assessment to determine whether an applicant can handle a motorcycle before enrolling/undertaking the full 2 day learner permit motorcycle assessment. (Rider capacity may need to be established prior to proceeding with other testing which involves further costs.)

Motorcycle learner permit riders should abide by the following restrictions:

- must display ‘L’ plates on the rear of motorcycle
- must carry learner permit at all times when riding
- zero blood alcohol limit applies
- cannot carry pillion passengers
- must only ride a motorcycle allowed under the Learner Approved Motorcycle Scheme (LAMS). For further information refer to the VicRoads website.

4. Returning riders (a rider who has held a motorcycle licence in the last five years) must as a minimum for OT driver assessment testing, complete modules A44 to A46 of the Motorcycle Permit Assessment. Additional parts of the motorcycle assessment can also be used to assess a client’s fitness to ride.

5. The OT can collaborate with the motorcycle training and testing providers to establish if other components of the M-GLS may be useful for ability testing purposes depending on client issues/needs.

Refer to Figure 1 which outlines the possible OT driver assessment (OTDA) options (for new and returning/existing riders) mapped onto the standard M-GLS components.
Note:

1. The motorcycle knowledge test could be conducted at the motorcycle provider’s premises prior to any practical assessment components. However note that the applicant must pass this before they can proceed to the practical component.


3. The Check Ride must be completed one month ahead of the Motorcycle Licence Assessment.

4. The motorcycle learner permit lasts for 15 months and cannot be extended or renewed: learners must wait a minimum of 3 months before they can attempt the Motorcycle Licence Assessment.

Conducting a motorcycle assessment

OTs may be involved in a motorcycle assessment if appropriate in the given circumstances. For example:

- when there is a significant level of physical impairment/disability including the need to provide advice regarding appropriate/possible motorcycle modifications. This area of assessment may require a high level of skill and knowledge. If an OT does not have the specialist knowledge, he/she should consider referring the client to someone with the relevant knowledge.

Depending on the client’s presenting issues, age, driver and riding experience two options are available:

- A standard assessment which can be organised directly by the client with the course provider.
- A partial assessment with an OT which can be organised directly with a motorcycle training provider.

The standard compulsory M-GLS components should be reviewed first to determine whether parts can be used beyond those set out as the minimum assessments. (Refer Table 6.3 below).

For example, the Check Ride includes a 90 minute ride on road. This could be used to determine a client’s stamina/endurance and cognitive ability. The motorcycle assessment manuals provide extensive detail on each activity including introduction, explanation, assessment criteria, method and supporting rationale. If an OT needs assistance with which components might be best used from the assessment activities or to discuss feasible/legal motorcycle modifications, he/she can discuss this with a motorcycle provider. Any additional assessment needs outside of the motorcycle assessment material (e.g. licensing, motorcycle modifications) should also be discussed with VicRoads Medical Review.
Accredited motorcycle course providers

For a current list of accredited motorcycle training and testing providers: Check VicRoads website or ring 13 11 71.

An OT should discuss directly with a motorcycle training provider the client’s needs to determine what assistance is available and the costs of any individually tailored assessment.

Electronic copies of the motorcycle assessment material can be obtained from VicRoads. Refer to tables 6.1-6.3 for the broad course outlines for the Motorcycle Permit Assessment, Check Ride and Motorcycle Licence Assessment. The VicRoads website also includes general information on the M-GLS assessment criteria.

Trike Assessments

Motorcycle Trikes may be a practical mobility option for customers with reduced physical abilities. Usually such clients are precluded from riding a motorcycle due to lower limb/balance issues but may be able to manage to ride a larger, more stable motorcycle with three wheels. VicRoads operates a Learner Approved Motorcycle Scheme (LAMS) which specifies the engine capacity and power to weight ratios for motorcycles and trikes. Depending on the rider’s prior experience/licensing status, they may not be allowed to ride trikes which are not LAMS approved. As many trikes have larger engines, consideration must be given to whether the trikes available within the LAMS scheme will suit the clients’ needs. VicRoads has a mechanism for including trikes that would not normally meet the LAMS requirements into the LAMS scheme. Where no suitable LAMS trikes are available, and the need for a trike has been demonstrated, application can be made to Registration and Licensing to have a specific trike (identified by its VIN) deemed to be a LAMS trike.

Trike assessments for riders with impairments/disabilities are a specialised field. Medical Review is only involved in the trike assessment process for clients who due to impairment/disability are functionally incapable of riding a motorcycle. It is recommended that OTs contact Medical Review in the first instance if they have a client who may be suitable for trike riding. Consideration should be given to referring the potential rider to an OT with specialist experience in this field.

Motorcycle modifications

OTs working with clients seeking to ride motorcycles routinely consider the rider-motorcycle control interfaces carefully. Different motorcycle designs offer different control configurations (e.g. compare a motorcycle scooter with a traditional motorcycle design). Whilst it is possible to modify motorcycles, the systems design considerations outlined below should be carefully considered in any planning. In addition, advances in safety system technology are increasingly transforming motorcycle safety features. These features may also need to be considered when evaluating the impacts of any modifications. For example, motorcycles may have anti-lock braking systems (ABS). Changes to how the foot/hand brake controls operate need to consider possible impacts on the ABS system.

Due to the individual nature of rider requirements, environment of use and the motorcycle design, modification options need to be considered on a case by case basis.

Safe Systems considerations for riders with impairments/disabilities

VicRoads adopts a safe systems approach to road safety. This incorporates consideration of the key components that impact on safety – for motorcycle riders this includes:

- safer riders (e.g. sensory-motor abilities, balance, decision making, cognition, risk-taking behaviours)
- safer motorcycle design (e.g. size, design, pillion passenger requirements, LAMs restrictions, impacts of modifications on any safety systems)
- safer road design (e.g. design of roads and associated traffic control mechanisms rider likely to be interacting with)
- safer speeds (e.g. rural vs. urban, traffic/road surface/speed interactions)

OTs routinely consider all these factors when planning interventions related to client safe riding requirements including training, assessment, rehabilitation and vehicle/cycle modifications.

Reporting formats

OTs should continue to use the standard VicRoads Occupational Therapy Driver Evaluation Report, clearly indicating on the top of the form that the report form applies to a motorcycle licence. This should be submitted to VicRoads together with the motorcycle assessment report provided by the accredited motorcycle tester.
### Table 6.1: Motorcycle Permit Assessment

#### Day 1

<table>
<thead>
<tr>
<th>Description</th>
<th>Time</th>
<th>Minutes</th>
<th>Start</th>
<th>Alternative</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1-A14 Basics non-powered</td>
<td>1h, 45m</td>
<td>105</td>
<td>8.00am</td>
<td>9.00am</td>
</tr>
<tr>
<td>Morning break</td>
<td>15m</td>
<td>15</td>
<td>9.45am</td>
<td>10.45am</td>
</tr>
<tr>
<td>A15-A19 Basics powered</td>
<td>1h, 50m</td>
<td>110</td>
<td>10.00am</td>
<td>9.30am</td>
</tr>
<tr>
<td>Lunch break</td>
<td>30m</td>
<td>30</td>
<td>11.50am</td>
<td>12.50pm</td>
</tr>
<tr>
<td>A20-A25 Riding curves</td>
<td>55m</td>
<td>55</td>
<td>12.20pm</td>
<td>12.00pm</td>
</tr>
<tr>
<td>Afternoon break</td>
<td>15m</td>
<td>15</td>
<td>1.15pm</td>
<td>2.15pm</td>
</tr>
<tr>
<td>A26-A29 Introduction to slow riding Skills consolidation PPE discussion</td>
<td>1h, 25m</td>
<td>85</td>
<td>1.30pm</td>
<td>2.30pm</td>
</tr>
<tr>
<td>A30 Motorcycle Learner Permit Knowledge Test</td>
<td>35m</td>
<td>35</td>
<td>2.55pm</td>
<td>3.55pm</td>
</tr>
<tr>
<td>Totals</td>
<td>7h, 30m</td>
<td>450</td>
<td>3.30pm</td>
<td>4.30pm</td>
</tr>
</tbody>
</table>

#### Day 2

<table>
<thead>
<tr>
<th>Description</th>
<th>Time</th>
<th>Minutes</th>
<th>Start</th>
<th>Alternative</th>
</tr>
</thead>
<tbody>
<tr>
<td>A32 – A41 Manoeuvring, Steering, Braking, CAS</td>
<td>2h, 5m</td>
<td>125</td>
<td>8.00am</td>
<td>9.00am</td>
</tr>
<tr>
<td>Morning break</td>
<td>15m</td>
<td>15</td>
<td>10.05am</td>
<td>11.05am</td>
</tr>
<tr>
<td>A42 – A43 Tactics and strategy, Skills consolidation</td>
<td>1h</td>
<td>60</td>
<td>10.20am</td>
<td>11.20am</td>
</tr>
<tr>
<td>A44 – A46 Motorcycle Permit Assessment – Range</td>
<td>1h</td>
<td>60</td>
<td>11.20am</td>
<td>12.20pm Lunch</td>
</tr>
<tr>
<td>Lunch break</td>
<td>30m</td>
<td>30</td>
<td>12.20pm</td>
<td>12.50pm</td>
</tr>
<tr>
<td>A47 – A49 Motorcycle Permit Assessment – Road</td>
<td>2h, 20m</td>
<td>140</td>
<td>12.50pm</td>
<td>1.50pm</td>
</tr>
<tr>
<td>A50 VicRoads paperwork Course close</td>
<td>20m</td>
<td>20</td>
<td>3.10pm</td>
<td>4.10pm</td>
</tr>
<tr>
<td>Totals</td>
<td>7h, 30m</td>
<td>450</td>
<td>3.30pm</td>
<td>4.30pm</td>
</tr>
</tbody>
</table>

**Notes:**
- Day 1 maximum five participants. Day 2 maximum six participants.
- Participants who do not complete Day 1 can re-join Day 2 of a course (as a sixth participant) after further experience and/or one-on-one tuition.
### Table 6.2: Check Ride

#### 3.5-Hour Day Format

<table>
<thead>
<tr>
<th>Description</th>
<th>Time</th>
<th>AM</th>
<th>PM</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1-4 Intro, admin, OHS/WHS, course outline</td>
<td>20m</td>
<td>8.00am</td>
<td>12.20pm</td>
</tr>
<tr>
<td>A5-8 Review Motorcycle Permit Assessment, skills check (range)</td>
<td>60m</td>
<td>8.20am</td>
<td>12.40pm</td>
</tr>
<tr>
<td>Break</td>
<td>10m</td>
<td>9.20am</td>
<td>1.40pm</td>
</tr>
<tr>
<td>A9-10 Pre-road briefing, Check Ride</td>
<td>100m</td>
<td>9.30am</td>
<td>1.50pm</td>
</tr>
<tr>
<td>A11-12 Course debrief and close</td>
<td>20m</td>
<td>11.10am</td>
<td>3.30pm</td>
</tr>
<tr>
<td>Totals</td>
<td>3h, 30m</td>
<td>11.30am</td>
<td>3.50pm</td>
</tr>
</tbody>
</table>

### Table 6.3: Motorcycle Licence Assessment

#### Format for 1 hour 15 minutes duration

<table>
<thead>
<tr>
<th>Description</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1 – A4 Intro, admin, OHS/WHS, course outline</td>
<td>10m</td>
</tr>
<tr>
<td>A5 – A7 Skills check (range)</td>
<td>8m</td>
</tr>
<tr>
<td>A8 Briefing MLA</td>
<td>5m</td>
</tr>
<tr>
<td>Break</td>
<td>2m</td>
</tr>
<tr>
<td>A7 Conduct MLA</td>
<td>40m</td>
</tr>
<tr>
<td>A8 – A9 Debrief MLA, course close</td>
<td>10m</td>
</tr>
<tr>
<td>Totals</td>
<td>1h, 15m</td>
</tr>
</tbody>
</table>

**Notes:**
- One participant per assignment.
6.4 Tractors, ride on mowers and construction machinery

Licence requirements
Any person who wishes to drive a tractor on a road or road related area must hold either:

- a car licence, or
- a car learner permit.

Car learner drivers may only drive a tractor on a highway:

- if the tractor is being used solely in connection with agriculture, horticulture, dairying, pastoral or other like pursuits or commercial fishing, and
- the learner driver has had 10 hours of tractor driving experience.

The learner driver does not need to have a supervising driver when driving a tractor provided all necessary conditions are met when driving the tractor. (Check the VicRoads website).

Where tractors can be driven
If used on a road or road related area, normal traffic and vehicle regulations and requirements apply. Road or road related area includes roads, any area open to the public for passage of vehicles, reserves, public car parks, foot paths and nature strips.

Size of tractors
A tractor can be driven on a car licence or car learner permit if it has a specified gross vehicle mass (GVM) of less than 4.5 tonnes. It may include implements or trailers connected to the front or rear provided that any condition imposed on the car permit or licence does not preclude the towing of a trailer. If the vehicle has a specified GVM of 4.5 tonne or more it can only be driven on a heavy vehicle licence.

Plant and construction machinery
Vehicles such as backhoes, graders, road rollers etc., if used on-road, require at minimum a car licence. Applicants should contact Worksafe Victoria for operator requirements. Machinery or plant does not include tractors.

Ride-on mowers
Most are not defined as a vehicle if used as intended and driven no further than 2 km in either direction along road verges – so there are no licensing requirements. Ride-on mowers may require a car driver licence if used on a road (includes road verges) and the speed of the mower exceeds 7 km/h.

More information on all of the above issues is provided on the VicRoads website.
SECTION 7
Car Learner permits

This section includes information on learner permits including issuing requirements, obtaining permits from VicRoads, transferring them from New Zealand or overseas and restrictions associated with their use.

7.1 How to get a learner permit from VicRoads

A learner permit or driver licence is required in order to drive for the purpose of an assessment and where necessary, for remedial lessons. If there is no authority to drive, a learner permit must be obtained from VicRoads following normal procedures.

Learner permit applicants with a medical condition, or impairment/disability or taking medication that may affect driving capacity must provide a medical report to Medical Review six weeks ahead of undertaking a learner permit test. This will allow Medical Review sufficient time to:

(a) assess the requirements,
(b) determine if the learner permit should be issued with conditions,
(c) add relevant details to the applicants licence record, and
(d) write to the applicant to acknowledge receipt of the medical report and advise of any licensing implications.

It may be appropriate for VicRoads to apply an “X” condition only permitting the learner to drive with a driving instructor in a dual control vehicle or with an OT for the purpose of an OT driving test. This condition is relevant to learner drivers with significant physical impairments who may require vehicle modifications or learner drivers with cognitive impairment in order to be safe on the road whilst gaining their supervised driving experience. The condition may be removed once they are considered safe to drive with a supervising driver.

Refer to VicRoads website for further information.

Applicant requirements

Applicants must meet the minimum age requirement of 16 years. The Road to Solo Driving handbook assists the learner driver to prepare for the learner permit knowledge and driver licence tests. They must also have a VicRoads administered eyesight test prior to undertaking the computer-based learner permit knowledge test.

Applicants should bring:

- proof of age and identity,
- any glasses that are required to meet the visual requirements for licensing and any correspondence received from VicRoads medical review (in cases where the learner has previously submitted a medical report to Medical Review).

Applicants can be tested at VicRoads Customer Service Centre, or alternatively, at a number of VicRoads agencies. Bookings can be made on-line or phone 13 11 71 (payment by card only) or by visiting a VicRoads customer service centre (payment may be by cash or card). Not all centres offer driving tests or accept cash payments: best to check VicRoads website first.

Learner Permit Knowledge Test

This test is required for:

- car learner permit applicants,
- overseas licence or permit applicants, and
- previous Victorian licence holders who have been unlicensed in Australia for five or more years.

The test is:

- computer based and available in English and a number of other languages, and
- is based on the Road to Solo Driving handbook.

A full practice test is available via VicRoads website. This online test includes 32 questions randomly generated from a pool of over 300 questions used in the learner permit test. The test questions are all based on the Road to Solo Driving handbook and allow applicants to familiarise themselves with the structure and layout of the test.

Issue of learner permit

When the applicant successfully passes a learner permit knowledge test at VicRoads, a photograph will be taken and a licence datacard will be issued. This is valid for two months and can be used until the learner permit card is received.

At completion of the test procedures, applicants are commonly issued with:
• receipt of results from the computerised knowledge test,
• receipt for payment of learner permit (an applicant cannot learn to drive until the learner permit is paid for), and
• a licence data-card.

For novice drivers, a condition to wear corrective lenses may be applied. However specific conditions relating to a medical impairment are usually added after an Occupational Therapy Driver Evaluation Report has been received (not withstanding the application of the “X” condition referred to above if appropriate).

7.2 Renewal and extensions

Car learner permits are valid for 10 years and can be renewed for periods of 10 years.

If expired:
• between 0 – 5 years: must be reissued at a VicRoads office and a new issue or expiry date will be imposed
• more than 5 years: must undergo a knowledge test.

Any client who attends an Occupational Therapy driver assessment with an expired permit should be asked to attend VicRoads to obtain a current and valid permit.

Any client undertaking an on-road OT driving test, must be the holder of a current and valid driver licence or learner permit. If in doubt about a licence holder’s status (e.g. large gaps between assessments) contact Medical Review.

7.3 Restrictions and minimum holding periods

Car learner permit restrictions

Drivers should abide by the following:
• must display ‘L’ plates on the front and rear of the vehicle
• must carry learner permit at all times
• zero blood alcohol limit applies
• cannot tow a trailer or caravan
• must be accompanied by a person who holds a full (non-probationary) licence
• not permitted to use a mobile phone – hands free or hand held for the full duration of the learner permit and probationary licence period.

Minimum time to continuously hold a permit before going for a licence

• Over 25 years of age*: must hold car learner permit for three months
• Over 21 years of age and under 25*: must hold car learner permit for six months
• Under 21 years of age*: must hold car permit for a minimum of 12 months and a minimum of 120 hours supervised on-road experience must be acquired. Please check VicRoads website for more details regarding the type of supervised on-road experience required.

* The above ages refer to the age of the learner permit applicant when he or she applies for a driver licence.

These specified minimum permit holding periods:
• must be continuous and not be broken by a suspension or a break in continuity such as allowing the permit to expire before regaining a new permit, and,
• refer to the period immediately before applying for the licence.

For those drivers who have previously held a licence and wish to have some lessons before undergoing a drive or ride test, a learner permit is required.

7.4 Converting from interstate, New Zealand or overseas permits

An interstate or New Zealand permit holder can normally convert a permit to a Victorian equivalent without the need for a test. Generally interstate licence conditions are transferrable to Victoria, however the codes for licence conditions may differ. If the applicant has a conditional licence due to a medical condition, VicRoads Medical Review may contact the interstate authority and transfer the relevant conditions to the Victorian licence. If required, a current medical report may also be requested.

In all cases the applicant must provide:
• proof of age, and
• proof of identity, and
• evidence of holding an interstate or New Zealand permit (if the learner permit has been lost or it is not current, VicRoads needs to obtain the learner permit details from the relevant licensing authority before a Victorian learner permit can be issued).

In all cases the applicant must:
• be at least 16 years old
• hold a current car learner permit or one expired by no more than five years (no tests are necessary), or
• undergo a test if the permit expired more than five years ago.
**Interstate applicants**

In all cases:
- an appointment fee may be applicable provided their interstate permit is current
- applicants will have to surrender their interstate learner permit
- applicants will be required to have their photograph taken for the Victorian permit

**New Zealand applicants**

In all cases:
- applicants will need to pay a learner permit and appointment fee
- applicants will be required to have their photograph taken for the Victorian permit

**Overseas applicants**

A learner permit from overseas cannot be used to drive in Victoria. The holder of an overseas learner permit must take a learner permit knowledge test to obtain a Victorian learner permit test.
SECTION 8
Probationary car licence

This section includes information related to entry level car and heavy vehicle tests and permits, including converting licences/permits from interstate or overseas.

8.1 Probationary private vehicle licence test

Applicant requirements
The applicant with or without a disability must hold the learner permit for a minimum continuous period immediately before applying for a licence. If a learner permit is suspended, cancelled or allowed to expire, the amount of time that the learner permit was held prior to the interruption is not recognised when applying for a licence.

<table>
<thead>
<tr>
<th>If the applicant is aged</th>
<th>The permit must be held continuously for</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 21</td>
<td>12 months</td>
</tr>
<tr>
<td>21 to under 25</td>
<td>Six months</td>
</tr>
<tr>
<td>25 or older</td>
<td>Three months</td>
</tr>
</tbody>
</table>

120 hours of supervised driving
A learner driver under 21 applying for a P1 probationary licence must complete at least 120 hours of on-road supervised driving, including 20 hours of night driving. These hours must be recorded in a Learner Log Book which is inspected at a VicRoads customer service centre prior to the on-road drive test and added to the VicRoads Driver Licensing system. An OT driving test should not be conducted until this has been completed.

Before obtaining a probationary car licence, with a VicRoads test or with an OT driving test (refer to section 3.3), the applicant must also pass the computer based hazard perception test (HPT), before undertaking the on-road driving test.

Hazard Perception Test (HPT)
The test uses a number of short videos, taken from a driver’s perspective. The applicant is required to respond to questions drawing on these videos and to react as if they were the driver (e.g. slow down, overtake, start to turn, move off, or no action). The applicant is permitted 45 minutes to complete the test. The decisions made during the HPT demonstrate whether the applicant can make safe driving decisions when dealing with common crash risk driving situations.

If the applicant fails the HPT, they are not permitted to undergo the practical driving test. A new appointment for another HPT will need to be made and the driving test appointment may need to be rescheduled.

Refer to VicRoads website for further details of the HPT.

Practical Drive test
The on-road driving component is divided into 2 parts
• a pre-drive check (stage 1) and
• on-road driving (stage 2).

Stage 1 must be passed in order to progress to stage 2.

P1 and P2 periods
A probationary licence is issued for four years. The probationary period may be extended as a result of various traffic offences.

A probationary licence is comprised of a P1 period and a P2 period.

A P1 probationary period applies for the first 12 months and issued to drivers who:
• Are less than 21 years of age at the time they are issued a licence and have not previously held a driver licence, or
• Hold a driver licence issued on probation interstate or overseas and have held this licence for less than one year from their eighteenth birthday.

A P2 probationary period applies for three years and is issued to drivers who:
• Are over 21 years of age at the time they are issued with a licence and
  • Have not previously held a driver licence or
  • Hold a driver licence issued on probation interstate or overseas and have held this licence for less than three years from their eighteenth birthday, or
• Are under 21 years of age and have held an interstate licence for more than 12 months from their eighteenth birthday.
8.2 Probationary licence restrictions

Holders of probationary car licences:

- must display ‘P’ plates on the front and rear of the vehicle
- must carry the licence at all times
- must not drink and drive (a zero blood alcohol limit applies)
- can only drive a vehicle with automatic transmission if tested in an automatic vehicle
- cannot drive a probationary prohibited vehicle. (Refer to list on VicRoads website)
- P1 licence holders must comply with peer passenger restrictions
- must abide by passenger restrictions if applied as a result of certain offences being committed in the first year of the probationary period
- are not permitted any mobile phone use including hands free or any messaging of any kind
- P1 licence holders must abide towing restrictions

Probationary drivers must not drive a vehicle which is classed as a high powered vehicle, unless an exemption is obtained from VicRoads, or the vehicle is being driven in the course of a person’s employment. If an exemption is obtained it must be carried in the vehicle at all times.

The ‘Automatic transmission’ condition only applies during the probationary period. If the driver wants to drive a manual vehicle over this period, the condition can be removed after successfully passing another driving test in a manual vehicle.

For further details on probationary licenses including exemptions for some restrictions, refer to website.

8.3 Languages available (for tests or handbooks)

Always check the VicRoads website for up to date information about resource availability. The motorcycle and heavy vehicle knowledge tests and handbooks are only available in English.

The computer based learner permit knowledge test and Hazard Perception Test (HPT) are available in the following 14 languages:

- Albanian
- Arabic
- Cambodian
- Chinese (Mandarin)
- English
- Macedonian
- Persian
- Russian
- Serbian
- Sinhalese
- Somali
- Spanish
- Turkish
- Vietnamese

The Road to Solo Driving handbook is available hardcopy to purchase, or available to download for free online in the following languages:

- Arabic
- Chinese (Mandarin)
- English
- Turkish (online version available)
- Vietnamese

8.4 Requirements for obtaining a duplicate or replacement licence

If a licence and/or learner permit card has been lost, stolen or damaged, an individual must apply for a replacement card as soon as possible. Refer to VicRoads website for details.

8.5 Holders of an interstate, New Zealand or overseas licence

Note: New Zealand residents with a current driver licence are treated as interstate drivers.

Interstate or New Zealand Drivers

A client may drive on the overseas or interstate licence or permit for three months from the date of arrival in Victoria. The interstate or New Zealand licence and/or learner permit must be current or not expired by more than five years.
After this three month period, a Victorian licence or permit must be obtained if the person wishes to continue to drive or learn to drive. If residency in Victoria is interrupted by moving interstate for a period of time then the three month period begins afresh from the date of return to Victoria.

An interstate or New Zealand licence or learner permit holder is not permitted to drive/learn to drive in Victoria on their interstate or New Zealand driver licence or learner permit if cancelled, suspended or disqualified in Victoria (e.g. due to a court ruling, or traffic offence or a VicRoads ban).

Refer to VicRoads website.

**Overseas Drivers**

Check the VicRoads website for current information

**Overseas drivers with a temporary visa:**
- are not required to get a Victorian driver licence and/or learner permit
- can drive using their current overseas driver licence for the length of their stay
- must have a driver licence written in English or accompanied by an English translation or international driving permit.

**Overseas drivers with a permanent visa**

Drivers with a permanent visa (issued under the Migration Act 1958) may drive on their overseas driver licence if it’s written in English or accompanied by an English translation or international driving permit for:
- 6 months from the date they first entered Australia (if the permanent visa was issued before they entered Australia), or
- 6 months from the date when the permanent visa was issued (if the permanent visa was issued while in Australia).

If they want to continue driving in Victoria after this time they must get a Victorian driver licence. If the overseas driver licence has expired, they will still be able to take the drive test as they are exempt from holding a learner permit for the test.

Once issued with a Victorian driver licence or learner permit, it is against the law to use the overseas or interstate driver licence to drive in Victoria.

The VicRoads Website explains the three levels of overseas licences which have different testing requirements based on recommendations from Austroads:

1. If the overseas licence was issued by a country where the licence is recognised in Victoria, the driver does not need to complete any tests.

2. If the overseas licence was issued by a country where the driver’s experience is recognised, there is no requirement to complete tests if the applicant is over 25 when they apply for a Victorian licence. If they are under 25, they must complete tests.

3. If the overseas licence was issued by a country where the licence is not recognised, the applicant must complete tests (learner permit knowledge test, hazard perception test, drive test) to obtain a Victorian licence.

Overseas driver licence holders who wish to drive a vehicle in Victoria should check the VicRoads website to determine whether their driver licence is recognised in Victoria.

See Section 3.2 with regard to Occupational Therapy driver assessment of drivers with an overseas licence.

If the applicant fails the drive test, they are no longer able to drive in Victoria using their overseas licence.

An overseas driver is not permitted to drive/learn to drive in Victoria on an overseas driver licence if cancelled, suspended or disqualified in Victoria (e.g. due to a court ruling, traffic offence or a VicRoads ban).

**International driver permit**

An international driver permit is different to an international driver licence:

An international driver permit:
- represents a translation of the driver licence,
- is issued by motoring organisations in the country the driver licence is issued in (Victoria it is issued by the Royal Automobile Club of Victoria – RACV – to Victorian licence holders),
- is valid for either one or three years, and
- is not valid unless accompanied by a current driver licence.

**8.6 Licence Renewal**

Drivers under 75 years of age can renew a driver licence for 3 or 10 years

VicRoads, at its discretion, will grant drivers 75 years of age or older, a driver licence for a maximum of three years. At the end of each three year period, the licence can be renewed for a further three years.

If expired:
- between 0 – six months: keep existing expiry date and can be renewed anywhere
- between six months – 5 years: must be reissued at a VicRoads office and a new issue or expiry date will be imposed
- more than five years: must undergo a knowledge and drive test.

Holders of an expired driver licence or permit should refer to the VicRoads website for further details.
SECTION 9
Contacts and Resources

This section includes a list of useful contacts that may offer assistance to drivers with special needs regarding licensing issues or driving with a disability.

9.1 VicRoads offices and Customer Service Centres
Phone number for all offices is 13 11 71
Refer to VicRoads web sites for locations of Customer Service Centres. Note that not all Customer Service Centres offer the same services (e.g. driver licence testing), so best to check on the website.

9.2 OT Driver Assessor List
Occupational therapists who have completed the driver assessor course in Victoria will be recognised by VicRoads as having relevant qualifications that comply with the class of health professional described in relevant legislation who can submit assessments of a functionally impaired driver to VicRoads together with recommendations about a particular driver. Occupational therapists with interstate qualifications may also have their reports recognised by VicRoads.

VicRoads maintain two lists of OTs:
1 A list of OTs who are active practitioners and in a position to accept external referrals, is available on the VicRoads website. Changes to the list are made every month. This list can be updated by sending a request by email to medicalreview@roads.vic.gov.au, including practice name and individual name, contact phone number, email address, assessment type (e.g car, motorbike or heavy vehicle) and service areas in Melbourne/Victoria.
2 A communication list of email addresses of active or non-active OTs who wish to be kept informed about OT Driver Assessor and VicRoad’s issues. This list is only used within VicRoads and is not shared externally. OTs on the website list are automatically included. Inclusion on this list is not based on membership of any professional organisation. OTs who are active in the field as practitioners, educators, researchers or academics may also request to be added to the list.

It is the responsibility of the OT to notify VicRoads about any changes to their practice location, contact details or practice areas.

9.3 Handbooks and study/information resources
Handbooks and study resources can be useful adjuncts to on-road driving experience when clients are preparing for testing procedures.

To assist people undertaking the road law knowledge test, practice test questions are available on the VicRoads website: vicroads.vic.gov.au/licences/your-ls/get-your-ls/lpt

Assistance for preparation for the hazard perception test is available on the VicRoads website: vicroads.vic.gov.au/licences/your-ps/get-your-ps/hazard-perception-test

All handbooks/fact sheets are available online or can be bought from VicRoads Customer Service Centres, VicRoads online bookshop, or by calling VicRoads on (03) 8391 3255, Royal Automobile Club of Victoria (RACV) offices and many newsagents.

Handbooks include:

Road to Solo Driving (for novice drivers) – vicroads.vic.gov.au/licences/your-ls/your-learner-handbooks


Additional Resources

1. DriveSmart
This is a free on-line computer based program developed by the TAC, that helps novice drivers and others (e.g. those resuming driving after an injury/illness/absence) to improve skills relating to hazard perception, decision making, safe response and attentional control as well as road law and craft knowledge and skills that are important for safe driving. It is available on drivesmart.vic.gov.au

2. Ride Smart
In conjunction with experienced motorcycle riders, the TAC has designed the free Ride Smart program to train motorcycle riders on a range of crucial riding skills like hazard perception and decision making. See tac.vic.gov.au/road-safety/safe-driving/motorcycle-safety/ride-smart

3. The Victorian Older Drivers’ Handbook
This handbook is available free of charge and can be ordered through the VicRoads online bookshop. A delivery charge may be applicable. Note that it is being updated and expected to be replaced by a series of ‘Fact sheets’ which will be available on the VicRoads website.

4. VicRoads medical review brochures/fact sheets
These fact sheets provide specific information about driving with a range of medical conditions such as diabetes, epilepsy, sleep apnoea, dementia and vision. Information is available on the VicRoads website. Hard copies can be ordered through the VicRoads online bookshop (see website for details).

9.4 Other resources

1. Speech or hearing impairments
For those with a speech or hearing impairment, an Auslan interpreter can be used for tests. Contact with VicRoads can be made using the National Relay Service. relayservice.gov.au

   • TTY users – call 13 36 77 then ask for 13 11 71
   • Speak and Listen users – call 1300 555 727 then ask for 13 11 71

The VicDeaf website provides information about driving and learning to drive with a hearing impairment: vicdeaf.com.au

2. Interpreter and translation services
Licence applicants can use an interpreter or translator to assist in the licence or learner permit tests or to have a driver licence or learner permit that is not in English translated by any NAATI (National accreditation authority for translators and interpreters) accredited translator or an appropriate consulate in Australia.

Recommended licence and translator services include:
- Victorian Interpreting & Translating Services (VITS) – call (03) 9280 0783 then ask for 13 11 71
- All Graduates – call (03) 9605 3050 then ask for 13 11 71
- OnCall Language Services

Refer to VicRoads website: vicroads.vic.gov.au/languages/using-an-interpreter-or-translator

3. Yooralla Independent Living Centre (ILC)
Refer to ILC data base for information about vehicle modifications and suppliers ilcaustralia.org.au/search_category_paths/1060

Independent Living Centre Yooralla Shop C1, 67 Ashley Street Braybrook Victoria 3019
Ph: 03 9362 6111/ 1300 885 886
Fax: 03 9687 1607
TTY: 03 9687 0301
Email: ilc@yooralla.com.au
Web: ilcaustralia.org.au
Monday to Friday 9.00am – 4.30pm

Independent Living Centre Blackburn
MS Nerve Centre
54 Railway Road
Blackburn 3030
By appointment only. Please telephone ILC Braybrook to schedule a visit.

4. Disabled Motorists Australia
For advice about driving with a disability, services available to drivers with a disability, disability friendly accommodation, vehicle modifications and advocacy.

2A Station Street
Coburg 3058
Ph/Fax: 03 9386 0413
5. Dementia Australia
National dementia hotline 1800 100 500
The Dementia Australia website provides information about dementia and driving including licensing requirements, starting conversations about driving and alternatives to driving. Several resources are available which were developed with the RACV (Royal Automobile Association of Victoria) in 2015.
Refer to: vic.fightdementia.org.au/vic/about-dementia-and-memory-loss/dementia-and-driving

6. Stroke Foundation
The website provides a fact sheet: Driving after stroke

7. Australian Drug Foundation
Useful website with information on a range of prescribed and other drugs and their potential impact on driving.
Web: adf.org.au

8) Medicines and Driving
The TAC website provides guidance about medications and driving:

Glossary of Terms

1. OT
Occupational therapist or occupational therapy.
An OT driver assessor (OTDA) has additional qualifications to allow them to contribute to fitness to drive assessments. Occupational therapists without this post-graduate qualifications are not permitted to undertake on-road driver assessments within the state of Victoria.

2. BAC (Blood Alcohol Concentration)
Blood alcohol concentration is a measure of how much alcohol is in a person’s blood.
Alcohol is a major factor in road deaths in Victoria. About one quarter of drivers killed in road crashes have a blood alcohol concentration of .05 or higher.
At a BAC of .05, the risk of being involved in a road crash is about double compared with a BAC of zero.
More information: VicRoads website vicroads.vic.gov.au

3. Alcohol interlock
An alcohol interlock is fitted to a car’s ignition and measures the driver’s breath for alcohol.
When alcohol is detected, in any quantity, the interlock prevents the car from starting.
The timeframe and reasons for requirement to drive with an alcohol interlock fitted to the vehicle vary according to whether it is a first time offence, whether the infringement related to both alcohol and/or drugs and whether the driver held a probationary licence or learner permit.
Appendix A

OTs may provide clients with a copy of the NHTSA (National Highway Traffic Safety Administration) guidelines regarding avoiding pedal confusion issues which include:

1. **Get Familiar** – Adjust your seat, mirrors, steering wheel and pedals (if they are adjustable) properly before starting the vehicle. If you are driving a vehicle you don’t normally drive, make sure to familiarize yourself with the location and feel of the accelerator and brake pedals.

2. **Aim for the Middle** – Make it a habit to aim for the centre of the brake pedal every time the brake is used. This reinforces muscle memory and reduces the chances of pedal error.

3. **Avoid Distractions** – Stay focused on the driving task until the vehicle is safely stopped, shifted into park and the engine is turned off.

4. **Be Cautious** – Proceed slowly and carefully when pulling in and backing out of parking spaces.

5. **Wear the Right Shoes** – Your footwear affects your ability to operate a vehicle. Footwear such as flip-flops, heavy boots or high/platform heels can contribute to pedal error crashes. Wear flat soled and light-weight shoes whenever you’re in the driver’s seat.

Source: Downloaded July 2017 from nhtsa.gov/road-safety/older-drivers

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References


2. OT AUSTRALIA Victoria (1998). Competency Standards for OTs, Melbourne: OT AUSTRALIA Victoria


