

SCREENING ABILITY TO DRIVE IN OCCUPATIONAL THERAPY

Simon Rabothata and Hester van Biljon

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GAUTENG PROVINCE

HEALTH
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Driving: Situational Analysis

- People drive for various reasons e.g. income generation.
- Recent studies have shown that the ability to drive can impact on the probability for securing a job *(Driving Ambitions Research Study 2015)*
- Driving is a complex task that requires having adequate operational, cognitive and higher executive functions that work together. *(Clin Med Res. 2003 Jul; 1(3): 177–188)*

- Health professionals do not have the proper training to make a legal determination about whether a patient *is fit to drive or not*.
- Driving remains a privilege granted by the state, not a right issued by a physician.
- The standard to determine fitness-to-drive: on-the-road test administered by a qualified driving performance examiner.

Health care professionals are frequently asked to make *assessments* and *recommendations* to their patients with regard to whether they should drive or not based on an existing or incipient medical condition. *(Clin Med Res. 2003 Jul; 1(3): 177–188)*

Occupational therapists with their knowledge of pathology, activity analysis and function have valuable skills to offer and are increasingly being asked to contribute in the field of ‘driving with disability’.



Background

- 2014/15 OT stats – 762 clients received some form of vocational rehabilitation services from GHD facilities.
- About 15% of these clients' ability to drive safely was affected and therapists were asking 'what' and 'how' do we get involved?
- The Gauteng Vocational Rehabilitation Task Team decided to address the issue.

The Development

- Action Research was used to develop the Driving Screening Tool.
- Objectives:
 - ❖ *To provide OT's with a tool that can be used to screen the patient's ability to drive safely and to determine the need for further driving assessments or not.*
 - ❖ *Improve knowledge and awareness of OT's about the need to inform their clients (and families) about the SA Road Traffic Act.*

Our position on screening and assessment.

Occupational therapists with no additional skills and training in driving with a disability can **screen** ability to drive. Such a screening will enable the therapists to:

- Identify individuals who cannot drive.
- Identify individuals who could drive.

Occupational therapists can acquire additional skills and training in the field of driving with disability and can then become involved in the **assessment** and accommodation of driving with disability.

Contents

1. Background and General Information.

2. Legal and Ethical Considerations to guide Occupational Therapists with Screening of Patients' Ability to Drive.

3. Step-by-step guide: How to screen a patient's ability to drive.

4. Conclusion.

5. Resources, Skills Training, Reporting Template, Suggested Readings and References.

You will need: a green card, graduate level occupational therapy physical and psycho-social knowledge, - assessment skills and clinical reasoning, a number plate / Snellen Chart, a Jamar Hand Dynamometer, a button, MoCA, a standard chair and an area in which to walk at least 20 meters.

The seven step screening will take a skilled therapist less than 30 minutes to do and another 10 to 20 minutes to report on the findings.

Step-by-step guide to screen ability to drive:

Step 1: Preparing for the screening

Step 2: Initial interview

Step 3: Physical Screening

Step 4: Psycho-social screening

Step 5: Making a decision

Step 6: Closure interview

Step 7: Reporting

Guided decision making ...

Decision one: ‘This patient cannot drive.’ Such a decision can be made if:

1. The patient has any of the disqualifying factors indicated in the National Road Traffic Act and no remediation of this is foreseen.
2. Your screening indicates an inability to drive safely and no functional improvement or accommodation of this is foreseen.

You write this decision and how you came to it in the ‘Green Card’. Assist the patient and his/her family to address this loss of function responsibly and work out suitable alternative to personally driving a motor vehicle.

Guided decision making ...

Decision two: ‘This patient could drive.’ Such a decision can be reached if

1. You find no reason why the patient cannot drive and feel he/she needs a driving assessment to confirm the findings of your screening.
2. The patient experienced difficulties in the screening tasks or one or more of the disqualification factors apply but you are of the opinion that this could be resolved or improved if:
 - The patient’s medical condition can improve and you expect future functional improvement.
 - The patient’s functional ability could be compensated for and improved with adaptations or assistive devices.

You write a report and refer to an appropriate occupational therapists for an assessment.

Once you have come to a conclusion make sure you have documented the facts that support your decision in a logical, coherent way showing a clear ‘trail’ of supporting facts to your decision.

In conclusion:

- With a consolidated screening guidelines we now need driving ***assessment*** guidelines.
- Within public healthcare there needs to be referral sources where assessing ability to drive can be done. We need to schedule in-service training , plan and budget for this.
- We share the screening protocol freely and hope to strengthen and develop partnerships with public, private and academic stakeholders.
- We look forward to working together to develop and secure occupational therapy's role within the field of driving with a disability.

The Vocational Rehabilitation Task Team, Gauteng:

Simon Rabothata (Chair), Lynn Soulsby,
Naazneen Ebrahim, Claudette Parkinson,
Buhle Mkhize, Jacqui Meier, Lebohang
Saohatse, Marlene Robus, Siphosethu
Nxumalo, Neelofar Khan, Alta Voster, Zakkiya
Akhals, July Masango, Hester van Biljon.

**Should you want a copy of the Driver Screening Protocol
contact Naazneen at :**

naazneen.ebrahim@gmail.com