

REVIEW OF TAXI LICENSING POLICY – DRIVER MEDICALS

1. INTRODUCTION

- 1.1 The purpose of this report is to consider a proposal to change the current taxi licensing policy governing medicals for licensed drivers.

2. BACKGROUND

- 2.1 On 10 June 2011 this Committee directed that a review of the current taxi licensing policy should be undertaken.
- 2.2 One of the responses to this consultation was from a taxi operator proposing that drivers should be allowed to have their medical assessments undertaken by any doctor at a medical practice of their choice.
- 2.3 The current policy states:

“Medical Examination form – which must be signed by your own General Practitioner or another GP from the same practice to confirm that you have attained group 2 standards and are fit to be the driver of a taxi vehicle. Alternatively the applicant may provide an HGV or PCV licence as proof of medical fitness. The requirement to produce a medical certificate shall be repeated:

At the age of 46 years & every 6 years thereafter
At the age of 65 and annually thereafter”

3. PROPOSAL

- 3.1 A private hire operator based in Lyndhurst has made the following representation:

“My last three medicals have been completed at my local surgery, each time by a doctor who I have never met before. As you are aware I feel that in a free market a driver should be able to seek a doctor where the medical cost is not so high. The BMA refuse to issue a set price for the job because any GP is qualified to undertake the medical standard. As regards the question of Employers: Then if the company wish to insist on the applicant’s medical being undertaken by his/her own surgery they can do so.

- # 3.2 The British Medical Association fees guidance schedule is attached as Appendix 1.

4. NEW FOREST TAXI ASSOCIATION

- 4.1 This subject has been discussed on several occasions by the taxi trade at their association meetings attended by the Council’s Licensing Officer. They have informed the Council that the majority view from those attending these

meetings is that the current policy, as stated in paragraph 2.3 should remain in place.

5. POLICIES OF OTHER COUNCILS IN HAMPSHIRE

5.1 The following table summarising the policies of 11 of the 14 councils in Hampshire:

Authority	Policy Conditions -
Basingstoke	Own GP or surgery with declaration that driver records have been used
East Hants	Any but all medicals are reviewed by LA independent medical officer
Eastleigh	Any but an additional medical screening form signed by own GP
Fareham	Own GP or surgery
Gosport	Own GP or surgery with declaration that driver records have been used
Havant	Own GP or surgery with declaration that driver records have been used
I.O.W	Own GP or surgery and council's occupational health facility assessment
Portsmouth	Own GP or surgery
Southampton	Own GP or surgery
Test Valley	Own GP or surgery
Winchester	Any GP - providing they state that the patient's records have been used

6. POLICY GUIDANCE

6.1 The Department for Transport (DfT) Best Practice Guidance for taxi licensing only covers this subject matter as follows:

“Medical fitness

It is clearly good practice for medical checks to be made on each driver before the initial grant of a licence and thereafter for each renewal. There is a general recognition that it is appropriate for taxi drivers to have more stringent medical standards than those applicable to normal car drivers because:

- They carry members of the general public who have expectations of a safe journey;
- They are on the road for longer hours than most car drivers; and
- They may have to assist disabled passengers and handle luggage.

It is common for licensing authorities to apply the ‘Group 2’ medical standards – applied by DVLA to the licensing of lorry (HGV) and bus (PSV) – to taxi drivers. This seems best practice.

It does not seem necessary to set a maximum age limit for drivers provided that regular medical checks are made.”

7. FINANCIAL IMPLICATIONS

7.1 There are no financial implications for the Council, the costs of the medical requirement are met by the applicant or licence holder.

8. ENVIRONMENTAL IMPLICATIONS

8.1 There are no environmental implications arising from this report.

9. CRIME & DISORDER

9.1 There are no crime and disorder issues arising from this report.

10. EQUALITY & DIVERSITY

10.1 There are no equality and diversity implications directly arising from this report.

11. CONCLUSION

11.1 The aim of local authority licensing of the taxi trade is to protect the public. Licensing requirements which are unduly stringent will tend unreasonably to restrict the supply of taxi services by putting up the costs or restricting entry to the trade. Local licensing authorities will, therefore, want to be sure that each of their various licensing requirements is in proportion to the risk it aims to address.

12. RECOMMENDATION

12.1 The Committee is asked to agree one of the following options: -

- (a) That the current requirements (medical examination forms be signed by the driver's own GP/surgery) be maintained;
- (b) That any GP or surgery carry out the medical examination; or
- (c) That any GP or surgery carries out the medical examination so long as they certify that they have reviewed the driver's medical records.

Further information:

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Background Papers:

NFDC Taxi Licensing Policy
DfT Best Practice Guidance

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Public Affairs Division

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Officer's Name:	SW
Signature:	

5 May 2011

Dear Mr

Thank you for your telephone call this morning.

As you may know, the BMA is a professional association and a trade union for doctors. We are not a statutory body and we have no regulatory powers.

The British Medical Association does suggest various charges that doctors can make for certificates and medical reports, although these are only *suggested* fees. Doctors can charge what they feel is appropriate and reasonable for providing a particular non-NHS service, although we generally advise doctors to discuss their proposed fees in advance of carrying out the work.

These suggested fees only apply to work which can be carried out by a patients' own GP (opposed to any other doctor) since following the Competition Act 1998, the BMA has agreed to discontinue publishing suggested fees for services which can be provided by any doctor.

Completion of forms for vocational divers licences can be carried out by any doctor, rather than an individuals own GP, and as such no fee can be suggested. Therefore the fees guidance schedule would be as below (under our Fees Guidance Schedule 11 B):

B Work that can be undertaken by any doctor, where no suggested fees are made

Note: The main BMA guidance fees for part-time medical services, to which this is a supplement, provides advice to members on some of the factors they might find it helpful to consider when setting their own professional rates in the absence of BMA suggested fees.

Reports and examinations

- assessment of mining injury - counter certificate required by branches when a miners' union is considering contesting the decision of an industrial injuries tribunal
- court exemption; from attending as a witness, on medical grounds
- drivers or pilots; full medical examination and completion of forms for vocational drivers licence (large goods vehicles and passenger carrying vehicles, taxi etc)
- fitness to drive for insurance purposes (elderly driver, racing driver etc)
- aviation licence (pilots) Note: A National Private Pilot's Licence requires the applicant's own GP to countersign a self-declaration of fitness by reference to the individual's past medical history that is held in the medical records. For the majority of other pilot licences, the only doctor that can undertake the regulatory medical examinations are those approved as Aeromedical Examiners by the UK Civil Aviation Authority.

Chief Executive/Secretary: Tony Bourne

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INVESTOR IN PEOPLE

- fitness for sport
- report for patients for self-referral overseas
- seat belt exemption

I have also enclosed a this guidance and it can be accessed on our website through the following link:
<http://www.bma.org.uk/employmentandcontracts/fees/noagreement.jsp?page=3>

I hope this information is helpful to you.

Kind regards,

Naomi Butler
BMA Public Information Unit

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11 - Where no agreement applies

15 October 2009

B Work that can be undertaken by any doctor, where no suggested fees are made

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- fitness for sport
- report for patients for self-referral overseas
- seat belt exemption

Certificates

- private prescription for private patient, or drugs required for travel abroad (private or NHS patient)
- abortion (confirmatory) certificate; second certificate under the Abortion Act 1967 in cases where the patient is not on the GP's NHS list

Vaccination and immunisation for travel abroad

- a fee per course of injections (excluding cost of vaccines) if no remuneration is payable by the PCT or health board

Note: This is subject to the following conditions under the new 2003 GMS contract:

- travel vaccines that are not provided anywhere under the NHS for public health reasons can be privately provided by practices
- a limited number of travel vaccines are provided on the NHS for public health reasons, and the general practitioners committee has produced a document entitled Focus on Vaccinations and Immunisations.
- some practices will have opted out of providing additional service for vaccinations and immunisations, therefore they cannot provide any vaccine available on the NHS to their patients. They could privately provide vaccines not available on the NHS.

Further information on this area may be sought from the general practitioners committee.

Family planning

- for patients not on a GP's list, a fee for prescribing and fitting a contraceptive appliance, and a fee for prescribing and fitting an intra-uterine device

Minor surgery

- where the patient is not on NHS list, a fee for the procedure, excluding the cost of drugs and dressings

Diagnostic tests

- for venesection or urine testing not undertaken as part of treatment and not involving disputed paternity, including notifying the result to the patient (but excluding laboratory costs)
- for a saliva test not involving HIV testing (ie nicotine)
- for a cervical smear taken at the request of a patient not on the GP's NHS list, including notifying the result to the patient (excluding processing costs)
- for a simple X-ray eg chest (inclusive of charges payable to hospital if performed in an NHS X-ray department)
- for a recording of ECG
- per report (opinion) on previous recording of ECG

HIV testing, at the request of an insurance company

- medical examination, counselling and taking blood
- counselling and taking blood only
- counselling and saliva test only
- certificate of negative result for travel abroad
- for pathology (including proportion payable to the hospital if NHS facilities used)

Attendance at airports

Attendance at patient's request at a police station

Professional attendance at private events (including sporting events)

Note: In January 2001 the BMA's board of science launched a pamphlet entitled Doctors' assistance to sports clubs and sporting events. Copies can be requested by calling 0300 123 123 3.

Lectures

- eg for a college of further education

Removal of a pacemaker prior to disposal of a body

Medico-legal work

- for reports and qualifying work, and attendance in court, by doctors engaged as expert or professional witnesses by solicitors acting in cases not covered by the rates issued by the Crown Prosecution Service and the Lord Chancellor's Department (the Procurator Fiscal and the Crown Office in Scotland) (see Fees guidance schedules 10 (England and Wales), 10a (Scotland) and 10b (Northern Ireland))

Non-medical services

- statements of fact
- signing photocard driving licences
- witnessing passport applications

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