



**National Council of  
Women of New Zealand**

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Wahine O Aotearoa

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24 February 2006

S06.04

Lloyd Berry  
LTSA  
P O Box 2840  
WELLINGTON

Dear Lloyd Berry

**Re Amendment Rule (No 2) 2006, 91001/3 – Older Driver Licensing**

The National Council of Women of New Zealand (NCWNZ) is an umbrella organisation representing 38 nationally organised societies. It has 32 branches throughout the country attended by representatives of those societies and some 150 other societies. NCWNZ also represents a number of individual women. The Council's function is to serve women, the family and the community at local, national and international levels through research, study, discussion and action.

NCWNZ has a long history of concerns about standards of driving and the legislation and regulations that cover these, recognising that the development of responsible driving habits is the basis of road safety. Our organisation made submissions to the discussion documents 1994 and 1996 which preceded the implementation of the 1999 Rule amendment. In 1994 the majority of the membership supported trialling the option of a combined medical test and on-road test from age 76 onward. Our concluding comment was "The responsibility of medical practitioners and optometrists as well as families to recognise road safety as a community health problem is important. The ability to retain a driving licence does not depend on age."

In the 1996 submission NCWNZ recommended that it should not be necessary for drivers to undergo a practical driving test unless a medical report showed a marked deterioration in any faculty likely to impair driving ability. Our organisation also supported the discretion of the medical practitioner to recommend restrictions such as times or locations where the driver is allowed to drive. This would give the older driver a measure of independence while taking into account the importance of the safety of all road users.

To respond to this 2006 discussion document NCWNZ again canvassed the opinion of the membership by means of a survey form to all branches and nationally organised Societies listing the main proposals in the documents. We received both individual and group responses representing in total the direct input of in excess of 150 people from all over New Zealand and reflecting both rural and urban perspectives and from a wide range of income groups. This response indicates a strong interest in the topic. Many respondents are in the age group directly affected by the proposed legislation or have family members affected. Many responses were supported by examples drawn from personal experience.





The collation of the responses has been undertaken by two members of the NCWNZ Public Issues Standing Committee.

## **COMMENTS ON OVERVIEW**

### **Removal of mandatory age-based older driver test**

80 % of our respondents supported the removal of the mandatory age-based older driver test. The most frequent reasons given for this decision were in order of priority : the extreme stress involved, especially when the driver is required to undergo the test outside their own neighbourhood or in unfamiliar traffic conditions; indignation about the perceived age-related assumption of incompetence; prohibitive costs if a retest is required; testers who lack personal and communication skills to deal with this age group thereby negatively affecting the test situation (e.g one 90 year-old respondent described her examining officer as hostile); most older drivers self-regulate their driving based on their own feelings of confidence; evidence from statistics that a high percentage of older drivers pass the on-road test therefore demonstrating that perceptions of age-related driving incompetence is an unsupported generalisation.

Those who supported the status quo for age-based testing cited the value of drivers refreshing their road code, and safe driving habits knowledge and being aware of road rules changes; the reassurance that passing the test gives to both the older driver and their families; concerns about the workability of a medical certificate only system.

### **Medical Certificate for Driver Licence still to be required**

Although again 80% of respondents supported this, the requirements for the medical certificate aroused a great deal of concern. Comments reflected the following issues: the GP sector should not have to carry the major responsibility for this situation as road safety is a much wider community and legislative responsibility; in some areas of New Zealand GP services are so overloaded that this is an unnecessary additional “non-medical” burden even if it is adequately funded; there is potential for conflicts in the doctor-patient trust relationship; doctors who find the decision too compromising or difficult to make may refer patients on for specialist assessments which are very expensive and may be unnecessary; doctors may opt out of the system for a range of reasons so the older driver will have to go to another medical practitioner who may not know them anyway; the assumption that older people visit the doctor frequently enough for the doctor to be able to assess their driving competence and general cognitive function is not reliable; it is more common for people to see a range of doctors in a medical practice rather than to be well-known by one GP; the difficulty for a doctor in assessing a patient as they present on one particular day and certifying them as competent to drive for the next 2 years; many drivers in this age-group only drive to a limited number of familiar destinations or for specific social reasons so it is imperative that there is common sense in the GP criteria; the system must be adequately funded and monitored.

### **Existing medical referral process and options for specialist assessment to be retained**

General support for this but concern about how costs could escalate especially if it involved return visits to the GP to obtain certification after the other specialists had been consulted. Recommendation that the specialist assessment should be subsidised under the same terms as a Community Services card; recognition that accessing some of these specialist services is very difficult and costly for rural and provincial residents.

### **Medical practitioners to be better informed of options for recommending appropriate licence conditions and restrictions**

It was seen as crucial that medical practitioners should be fully consulted and their views integrated into the legislation with adequate prior testing of the criteria before the scheme is



implemented. NCWNZ is pleased to see that there is a commitment to this field testing in the proposed Rule.

### **Use of revised Medical Certificate for Driver Licence form**

This was seen as most important because if the process results in excessive extra administration for the medical practitioner the costs to the patient will be even further increased or the number of medical practitioners prepared to participate in the scheme will progressively decrease thereby causing further hardship to the older driver.

All respondents supported the mandatory requirement for the medical practitioner to advise Land Transport NZ when a patient is judged not fit medically to drive so that this can be taken into account if the patient makes a further application to another GP.

### **On-road testing to be retained for use in certain circumstances**

Full support for this proposal, especially the continuance of the one-time free testing and one free retest. One respondent reported that her relicensing required 8 attempts at the test at age 82 combined with 3 driving lessons and 3 visits to the doctor for tranquillizers. She passed on her 9<sup>th</sup> attempt. This was quoted as an example that cost may not be a deterrent to some people who are sufficiently determined to remain driving.

### **Education and information package for general practitioners**

These proposals address some of our concerns outlined above about the potential conflict of interest for a GP who wishes to see the patient retain independence and mobility. It is most important for all GPs to be thoroughly informed about the older driver licensing process and options available.

### **Provision of education and information for older people, their families and communities**

Many respondents referred very positively to the "Safe with Age driving course" and it is good to see that the Rule proposes expanding the provision of these. NCWNZ recommends that completion of the course should be an integral part of the older driver licensing process. The proposed 50% subsidy for a private driving lesson for course graduates is commended.

The special circumstances of older rural drivers were highlighted and also those in provincial towns where public transport is inadequate. It is important for any education programme to be broadly based and not to foster the assumptions that driving competence is largely medically based. The economic and fitness benefits of not owning a car and the alternative possibilities must also be promoted.

### **Assessment tools to help determine fitness to drive to be investigated**

While NCWNZ encourages on-going development of these assessment tools of cognitive functioning and fitness to drive, common-sense factors must also be considered. One respondent recounted very adverse experience undergoing a computerised OT assessment at a South Island hospital facility, where 5 hours later when the process was uncompleted, she was told she would have to start again on the next occasion. This highlights the inappropriateness of the tool for some elderly people who are unfamiliar with computer-based technology even though it may be more convenient for the administrator

### **Issue for comment – Retired drivers who wish to relicense**

We were concerned about the implications of the Rule for those wishing to relicense and agree with SCG that 5 years is too long. Even a 12 month interval from driving should require a referral for an on-road test unless there are exceptional circumstances. It was unclear what the situation would be for those whose loss of licence was as a result of a driving offence.



**Issue for comment – On-road safety test referral for older drivers**

NCW NZ feels that the proposals here adequately cover all situations.

**GENERAL COMMENTS ON THE DRAFT RULE**

NCW NZ is pleased to see the extent of consultation with the Stakeholders Consultative Group and the incorporation of their preferred options into the proposed Rule.

The wide response from our membership indicates this is a very important issue. Any changes will have wide social and economic ramifications for a significant sector of the population. NCW NZ advocates a careful analysis of the true costs involved so that the distribution is as equitable as possible. The impact on medical practitioners, and specifically the patient/GP relationship, is of special concern and we strongly recommend very extensive pre-testing of proposed assessment tools and systems.

Yours sincerely

A handwritten signature in black ink that reads 'C Low'.

Christine Low  
**National President**

Mary Gavin  
**Convener, Public Issues Standing Committee**