



# **Seniors and Alternate Transportation Report**

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## Introduction

The number of seniors who continue to drive is on the rise in Canada. According to Statistics Canada (2000), 67% of licensed drivers are over 55. Between 2003 and 2007, the Insurance Corporation of British Columbia (ICBC) notes that drivers over the age of 65 increased by 50,000.

ICBC reports that seniors are no more likely to have an accident than younger drivers, but when they are injured in an accident, they are more likely to die. These crash incident statistics are not adjusted for the number of miles driven (section 4, figure 4.03, 2005 BC Traffic Collision Statistics, found at [http://www.icbc.com/Library/research\\_papers/Traffic](http://www.icbc.com/Library/research_papers/Traffic)).

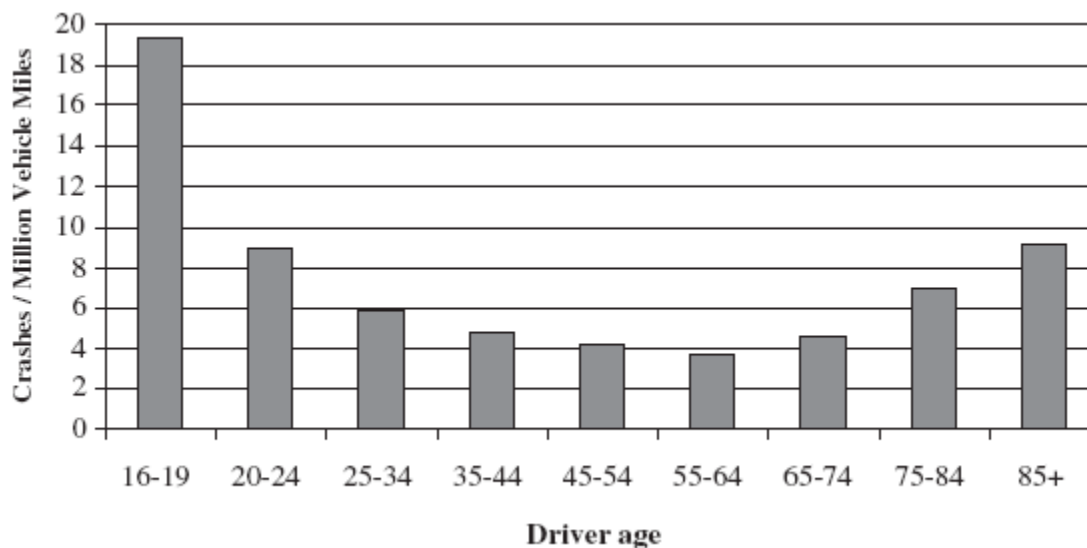
In the United States, the vulnerability of older drivers both to injury and collision is a focus of the Transportation Research Board's National Cooperative Highway Research Program. Their mandate is to help states improve their statewide highway safety programs.

[http://www.safety.transportation.org/htmlguides/old\\_drvr/types\\_of\\_probs.htm](http://www.safety.transportation.org/htmlguides/old_drvr/types_of_probs.htm)

When statistics are adjusted to account for the **number of miles driven**, rather than simply look at the number of accidents, adults aged 65-74 are at an increased crash risk which accelerates with increased age. Drivers 85 and older have the same high crash rate per mile driven as 20-24 year olds.

### EXHIBIT I

Crashes per Million Miles Traveled by Age of Driver  
(Source: Cerrelli, 1998)

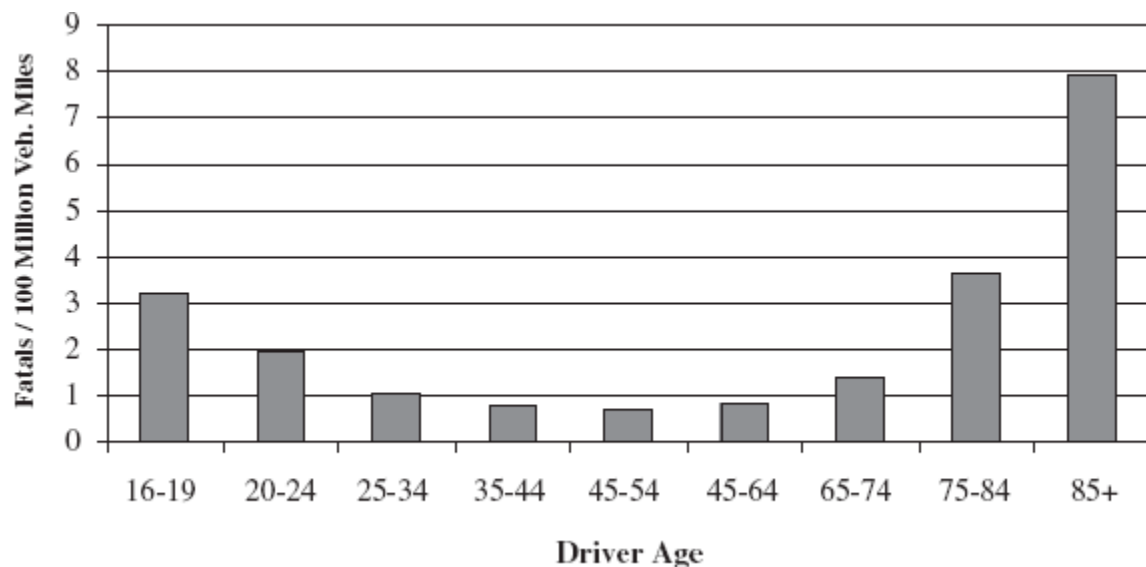


If instead of measuring safety in terms of crashes per licensed driver and crashes per mile traveled, it is measured in terms of **fatalities** per licensed driver and fatalities per mile traveled, there is clearly cause for concern. Both begin to increase by age 55, and the increase is especially dramatic for persons age 85 and older. Taken together, the data suggest that the safety problem confronting older adults is as much an issue of crash survivability as it is crash avoidance.

## EXHIBIT II

Fatalities per 100 Million Vehicle Miles Traveled by Age of Driver

(Source: Cerrelli, 1998)



The BCAA Traffic Safety Foundation cites the effects of aging on senior drivers. Some important changes are the following:

- Senior drivers require more light to see because their retina is less sensitive to light. Night-time vision is poorer.
- Focusing slows down.
- It takes eight times longer to recover from glare.
- Peripheral vision narrows and depth perception declines.
- Colors such as “red” are more difficult to see.
- Hearing is less acute.
- Cognitive abilities such as processing information take longer. Reaction time slows. Seniors exhibit more attention deficits.
- Mobility is slower because of decreased range of motion, weaker muscles and lack of flexibility.
- Chronic medical conditions and use of medications increase, both of which can result in temporary or long-term functional losses.

David Dunne, Director of the Provincial Programs for BCAA Traffic Safety, states cognitive impairment puts seniors at a greater risk for accidents (July 8, 2008). Seniors over the age of 85 years are at the greatest risk not only because of cognitive impairment but they also have other medical issues.

Driving is a liberating force for seniors, allowing them to remain independent. Giving up the car is equated to social disability and dependency on others to meet the demands of everyday living. The purpose of this report is to suggest transportation alternatives for seniors living on the North Shore. It will cite demographic information of seniors living in North and West Vancouver, review literature on alternate transportation for seniors, discuss provincial government regulations, and talk about transportation options.

### **Demographics**

The North Shore of Vancouver consists of the municipalities of the City of North Vancouver, District of North Vancouver, West Vancouver, Bowen Island and Lions Bay. Some of these areas are quite a distance from shopping and health services. Seniors who reside in the more remote areas may depend on support from friends and families for access to services.

The February 2008 report, "Seniors in Communities Mapping Project: Analysis and Recommendations", states there are 3,765 seniors who are 85 years and older on the North Shore; twelve hundred men and 2,565 women.

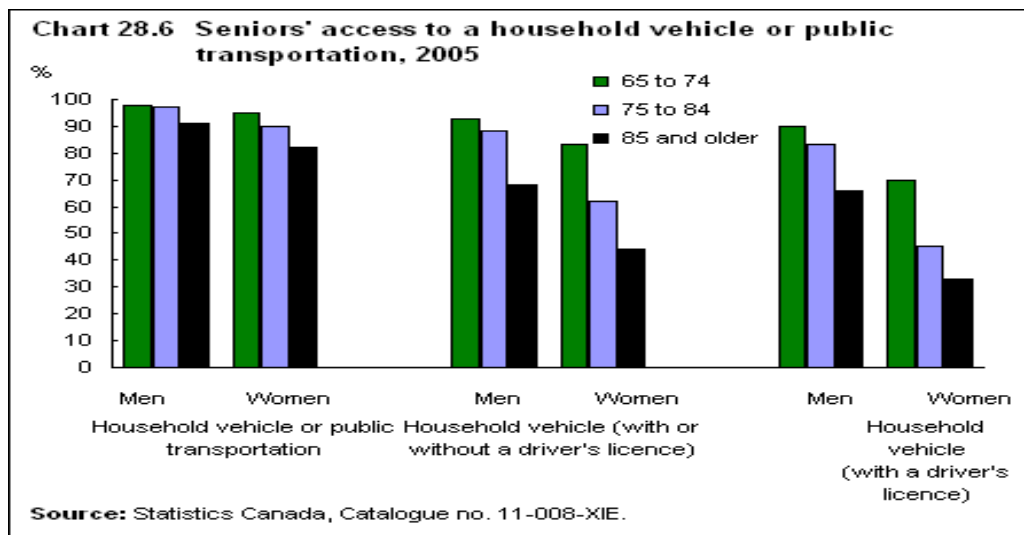
Seniors aged 85 and over make up 8% of the total population of the North Shore. In general, the majority of seniors over 85 are living in West Vancouver and the western part of the District and City of North Vancouver, from Dundarave east to the City of North Vancouver. Areas with the highest density of seniors aged 85 and older are Ambleside, Central Lonsdale, and Lynn Valley West. Maps of the North Shore show the concentrations of 85 plus seniors and are the subject of comment in the report of the "Seniors in Communities Mapping Project" (Appendix A, p. 50-51).

## Review of Literature

Review of the literature indicated only two “alternate” transportation programs are available in the US and in Canada. Most of the literature addressed safe driving, teaching and assessing seniors for driving risk management.

Statistics Canada projects seniors over the age of 65 years will make up approximately 25% of the total Canadian population by 2031. As people age, there is a decline in sensory, cognitive and physical function that make them more vulnerable to collisions.

Many seniors in Canada have access to either private or public transportation for shopping, appointments, and leisure activities. In 2005, 98% of men and 95% of women ages 65 to 74 had access to a vehicle or public transportation. Eighty – six percent (86%) of those 85 and older continued to have such access (Statistics Canada, 2005).



Seniors who live in rural areas or areas that are a distance from shopping and health services are more likely to have limited transportation options and may become isolated. Seniors who have a valid driver's license and own a vehicle are more likely to leave their home at least once a day and these are also the seniors who are more likely to do volunteer work.

Statistics Canada (2005) completed an analysis to determine if a senior's level of access to transportation is associated with going out and engaging in certain activities. Seniors were separated into four groups as follows:

- 1) Owned a vehicle and a valid driver's license (71% of seniors);
- 2) Did not have a valid driver's license but did have access to a household vehicle as a passenger (9%);
- 3) Did not have access to a vehicle but did have access to public transit (14%);

4) Had access to neither a household vehicle nor public transit (6% of seniors).

The results demonstrated that approximately 49% of seniors who do not have access to private or public transportation are more likely to stay home. Focus group discussions indicated seniors limited their travel when they did not have easy access to transportation and did not ask relatives for assistance for fear of being a nuisance.

A study by Yassuda and Wilson (1997), showed seniors perceive driving as a necessity and believe (correctly) that there is a lack of suitable transportation alternatives. Driving is seen as an independent activity and a quality of life issue. The study also concluded that senior drivers acknowledge age-related driving issues and attempt to compensate by reducing risky driving habits such as avoiding night and rush hour driving, etc. There is little societal support to assist seniors with the physical, social, and psychological implications of driving cessation.

Some authors propose resolution of the driving cessation issue can be accomplished “by working through feelings of loss, creation of a new support system and adoption of new skills” (Eisenhandler, 1990; Gillins, 1990 as cited in Yassuda and Wilson, 1997). Educational interventions such as a group intervention that uses content-directed group discussion, problem awareness raising and role play activities may enhance the senior’s self perception.

The Canadian Council of Motor Transport Administrators established a task force to review licensing policies, standards and procedure for older drivers. The Strategy (2007) “provides a framework to support jurisdictions in developing plans and programs to support safe mobility for seniors”.

Seniors do not necessarily want to drive but they do wish to be independent. Loss of driving privileges result in isolation and the possibility of poor health which has social and economic costs to society. To lessen the hardship on seniors who are unable to drive, alternative transportation must be offered. The Canadian Council of Motor Transport task force states, “any form of alternative transportation must pass the “5-A” test: be available, accessible, affordable, acceptable, and adaptable for it to be used” (p. 8).

Suggested alternative transportation is as follows:

1) The highest degree of personal autonomy is retained through walking, bicycling or use of electric scooters or wheelchairs. However, while this is well suited to some urban areas, it is usually not an option for rural areas and may become a concern for transportation and licensing authorities. In addition, electric scooters are not necessarily safe for everyone, especially those with diminished driving skill or ability.

- 2) Being a passenger in a car driven by relatives, friends or caregivers offers some autonomy although seniors will be dependent on others' schedules and may feel as if they are dependent on these people.
- 3) Public transportation such as buses and taxis are inexpensive and available in urban areas. However many seniors do not feel comfortable with this type of transportation because of the practice of tipping (with which many seniors feel uncomfortable), and issues of safety and accessibility.
- 4) Specialized transportation such as the Seniors Go Bus, HandyDART, taxis, shuttles and volunteer transportation can offer unique services to seniors that may meet some of their needs. Unfortunately, as the senior population grows and gas increases in cost, the sustainability of some of these alternatives is at risk.

ITN American offers the most innovative approach to alternative transportation. It is the first and only national, non-profit transportation network for America's senior population. This program is economically sustainable and is community-based. It provides personalized rides to seniors who are no longer able to drive. Volunteers from the community and a small paid staff use their own cars or donated cars to transport seniors. This program is offered in Charleston, S.C.; Portland, Maine; Orlando, Florida; and Los Angeles.

A non-profit seasonal program is offered in Canada to combat drinking and driving. Known as Operation Red Nose, this is a provincial and national organization. It is dedicated to providing impaired drivers with a safe ride home during the holiday season. It is a free service that accepts client donations which remain with the host organization running the program. The driving is done by members of the non-profit organization or other community volunteers. The organization is responsible for the administration of the program and its volunteer component. The host organization not only helps to reduce the number of impaired drivers but receives 100% of the donations received by clients. It would be possible to adapt this program to seniors if there was some provincial support. It is worthy to note that the provincial government has a program that is called, "Great Goals for a Golden Decade." They have established a National framework on aging principles which includes dignity, independence, participation, fairness and security (see Appendix A).

David Dunne, Director of Provincial Programs, BCAA Traffic Safety Foundation, (TSF), indicates that they endorse offering alternate transportation to seniors. TSF is exploring the possible establishment of ITN Canada for seniors, in cooperation with the Alberta Motor Association and representatives from a seniors' coalition based in Edmonton. Mr. Dunne feels ITN Canada would be at least 6 months to one year away based on the development of a comprehensive business plan (July 8, 2008). Also, Dunne states the health ministry has stated objectives recognizing the importance of the ability of seniors to 'age in place' and the creation of 'senior-friendly' communities as well as looking closely at the



costs of aging, which may impact the forms of transportation made available to seniors as they age.

BCAA Traffic Safety Foundation has received support from the Ministry of Community Services and the Vancouver Foundation for the Mature Driver program. This program is web-based with fact sheets for seniors on aging, driving assessment and knowledge. ***Living Well, Driving Well*** workshops are offered also for senior drivers, in a variety of communities throughout BC.

The Cooperative Auto Network is a car sharing program which provides rental cars to drivers for short periods of time. David Dunne advised that the Cooperative Auto Network is also considering creating a 'senior-friendly' transportation service.

The Jack Bell Foundation is a large scale, organized ride-share program operating over 100 cars to facilitate private ride-sharing, primarily to work. Participants register and enter times and addresses for their trip. When matching occurs, individuals contact other commuters directly to organize carpooling.

In 1999, a landmark legal ruling, *BC Superintendent of Motor Vehicles v. BC Council of Human Rights*, [1999] 3 SCR 868, identified the right of Canadian drivers to have their license eligibility determined individually, based on a functional assessment rather than exclusively on a diagnosis. This can necessitate a referral to a centre offering specialized functional assessments. Although the number of centres that offer these specialized assessments is increasing, they tend to be located in urban areas. Thus it may be difficult to arrange specialized functional assessments for individuals living in rural areas. A guide for physicians on the determination of medical fitness to drive is published by the Canadian Medical Association. In the updated seventh edition (2006), notable changes from the sixth edition reflected the emergence of evidence-based medical standards, with emphasis on the functional assessment of patients for fitness to drive. <http://www.cmaj.ca/cgi/content/full/175/6/575>

A representative of the Office of the Superintendent of Motor Vehicles (OSMV), Stephanie Melvin, (July 10, 2008) could not provide statistical or verbal information to profile senior drivers who lose their license. In making individual driver fitness decisions, public safety is the primary consideration, balanced by the individual's need for their driving privileges for mobility and livelihood. The Superintendent of Motor Vehicles Driver Public Safety Guide to Operations document is found at:

[http://www.pssg.gov.bc.ca/osmv/publications/guides/Guide\\_2005.pdf](http://www.pssg.gov.bc.ca/osmv/publications/guides/Guide_2005.pdf)

An extract from the guide outlining the Driver Fitness Program Process is found in Appendix B.

The policy is to conduct Driver Fitness assessments at regular intervals, beginning at age 80. A driver's medical examination form must be completed and a standard road test or other functional test is implemented at the discretion of the OSMV. High risk drivers are often identified by driver demerit points, criminal code convictions, or physician referral. A medical consultant from BCMA may advise on complex cases.

OSMV sends a letter to the senior to assess fitness to drive or to deal with changes to their driver's license status as a result of the review. If denied a license, a senior may request a review of the decision. The \$50.00 charge may be waived depending on the senior's income. When OSMV acts on a case, they refer it to two specialists who have expertise in the senior's medical condition. The superintendent makes the final decision based on their recommendations and the decision is communicated in writing to the senior.

The Insurance Corporation of BC (ICBC) could not provide any information on the cost of older seniors to the current car insurance system. They stated (July 8, 2008) this information was regulated under the Freedom of Information and Protection of Privacy act. They did say there were no insurance rate changes for volunteers who use their own vehicles to provide transportation to others, if they were not providing the service for a fee.

### **Issues**

In order to establish an alternative, viable transportation network for seniors, several issues need to be highlighted:

1) The alternative transportation must be licensed by the Provincial Passenger Transportation Board (PTB) in situations where the transportation is for compensation. Compensation includes both direct and indirect payment. The Passenger Transportation Act Regulation sets out specific exemptions to the Act at: [http://www.qp.gov.bc.ca/statreg/reg/P/266\\_2004.htm](http://www.qp.gov.bc.ca/statreg/reg/P/266_2004.htm)

One such exemption is for a "volunteer driver", which is defined as a person who:

- a) Drives a commercial passenger vehicle for a charitable organization, and
- b) Receives no compensation for the services described in paragraph (a) other than reimbursement for the operating costs attributable to the provision of that service.

If no fee is paid for the service, then the municipal legislation also does not apply.

2) If money is collected for the service (such as a subsidized taxi or limousine), then the service falls under the PTB. The cost of running transportation

companies is expensive. A dispatch system and driver schedules must be established, and taxis abide by municipal bylaw requirements in addition to the provincial regulations under the PTB.

3) The Province has taken a number of positive initiatives outlined in the Transportation section of their B.C. Seniors Guide, available online at [http://www.cserv.gov.bc.ca/seniors/PDFs/seniors\\_guide.pdf](http://www.cserv.gov.bc.ca/seniors/PDFs/seniors_guide.pdf)

These initiatives include the seniors' transit fare discount, the bus pass program, taxi savers (50% off taxi fares without pre-planning, including wheel chair accessibility), HandyDART custom transit (very busy and requires significant pre-planning), a community travel training program in Victoria, discounts on ferries, automobile insurance discounts, driver's licenses, and travel for elder natives who wish to attend cultural events (up to \$1000).

4) Premium charter transportation services, for individuals who are mobility impaired and find buses and taxis unsuitable, are available with limousine companies such as Limojet (based at Vancouver Airport) or premium plus services such as SN Transport Ltd. The latter offers transportation for those who need special assistance providing services to Fraser Health and Vancouver Coastal Health in certain cases. SN Transport Ltd. has specific criteria for their clients:

'The conditions of our operating License, and incorporated as part of these conditions, is that the account holders undertake that the passengers they instruct us to transport using this service are persons who have a disability, either permanent or temporary, confirmed by a medical practitioner, that is sufficiently severe that the person is physically unable without assistance to use conventional transit service, or is a person accompanying a person referred to above.'

SN Transport rates are significantly higher than a limousine or regular taxi service however they offer door to door rather than curb to curb service. Only some seniors would be able to afford their services. Taxi cab drivers are not allowed to charge more for door to door service because it is outside the regulated tariff set by the PTB.

4) Volunteer organizations like ITN America or Operation Red Nose provide alternative transportation. Quite often the volunteers themselves are seniors. Seniors volunteer in order to maintain an active life and be involved with their community. While the proportion of seniors who volunteer is equal to other age groups, the average number of hours seniors devote is greater (Hall, Lasby, Gumulka and Tyron, 2006). As a rule, to volunteer, one must be able to access the location easily. The Statistics Canada analysis (2005) concluded "volunteer work is a function of the level of access to transportation". Thirty two percent of seniors who have a car and a driver's license are volunteers compared to only seventeen percent of seniors who have no transportation.

5) In order to run a volunteer program such as ITN America or Operation Red Nose, non-profit organizations will have to bear the administration costs and

scheduling. At least ten cars are needed to start a pilot project. A taxi cab company requires over 20 cars to “break even.” Issues to consider are gas expenses, a dispatch system (although cell phones could be used at a cost of \$50.00 a month), administration of dispatch and scheduling, back up volunteers, and vehicles and maintenance of those vehicles. A taxi driver usually has 12 to 15 pick ups per shift. Driving is exhausting let alone the physical task of helping seniors in and out of cars and emotionally supporting their socialization.

### **Funding Opportunities**

Possible available funding opportunities are listed as follows:

- 1) CanDrive: a research program that is dedicated to improving the health, safety and quality of life of Canada’s senior drivers. It is funded and supported through a variety of organizations and its purpose is to conduct research, influence policy and change practice. [www.candrive.ca](http://www.candrive.ca)
- 2) Canadian Institute of Health Research (CIHR): offers operating grant competitions. [www.researchnet-recherchenet.ca](http://www.researchnet-recherchenet.ca)
- 3) Toyota Environmental Activities Grant Program: this program supports environmental revitalization and conservation activities. A new grant process will be established shortly as applications for the program closed recently. For information: <http://www.toyota.co.jp/en/environment/ecogrant/index.html>
- 4) Jack Bell Foundation: this foundation organizes a ride-sharing program. It is a non-profit organization that receives donations and funds ride-sharing. <http://online.ride-share.com/en/my/>
- 5) Kiwanis Club of North Vancouver Kiwanis is renowned for its work with seniors and care homes. They are a non profit agency that receives applications and grants funding for projects. <http://www.kcnv.org/history.html>
- 6) Michael Smith Foundation for Health Research: The aim of this agency is “to build capacity, facilitate and enhance BC’s ability to address health issues, and align health research in the province with national and international research and funding priorities. [www.msfnr.org](http://www.msfnr.org)
- 7) BC Network for Aging Research: This agency also focus on community-based organizations and health regions to provide access to shared resources, to support an infrastructure to increase capacity and leverage funding for aging research in BC. [www.bcnar.ca](http://www.bcnar.ca)
- 8) Legacies 2010: “The Measuring Up program helps BC communities assess and improve how accessible and inclusive they are for people with disabilities and the whole community”. [www.2010legaciesnow.com](http://www.2010legaciesnow.com)

## **Summary**

In light of the large and growing number of seniors on the North Shore, alternative transportation is important considering the many risks associated with seniors driving longer than their physical and mental capacity allows.

Driving cessation results in social isolation. Society is impacted with the costs of the physical and emotional issues that arise with lack of mobility, depression and feelings of uselessness. A volunteer-supported alternative transportation program would alleviate some of these issues but require a considerable infrastructure. It is also important to remember that a large number of volunteers are seniors themselves. To complement a volunteer program, the current provincial programs such as taxi savers could be expanded or extended municipally which has the advantage of using established transportation professionals. In addition, more mini-shuttles, such as the Seniors' Go Bus, could be organized in areas of considerable senior population as outlined in the demographics portion of this report.

## References

- BCAA Traffic Safety Foundation. (n.d.). Mature Drivers. In *BCAA Traffic Safety Foundation*. Retrieved July 7, 2008, from [http://www.tsfbcaa.com/mature\\_drivers](http://www.tsfbcaa.com/mature_drivers)
- BC Crime Prevention Association. (n.d.). Operation Red Nose, BC. In *BC crime prevention association*. Retrieved July 9, 2008, from <http://www.bccpa.org/RedNose/index.htm>
- BC Government. (n.d.). Transportation options to help seniors stay active. In *BC Seniors Guide*. Retrieved July 12, 2008, from [http://www.cserv.gov.bc.ca/seniors/PDFs/seniors\\_guide.pdf](http://www.cserv.gov.bc.ca/seniors/PDFs/seniors_guide.pdf)
- Butcher, D. J. (2006, September 12). Fitness to Drive. *CMAJ*, 175(6), 575-561. Retrieved July 14, 2008. doi:10.1503/cmaj.060989
- Campbell, C. (2006, February 13). Driving Miss Daisy. *Maclean's*, 119(7). Retrieved June 23, 2008. doi:00249262
- Canadian Council of Motor Transport Administrators. (2007, December). *Aging driver strategy*. Retrieved June 25, 2008, from <http://www.ccmta.ca/english/committees/rsrp/agingdriver/agingdriver-strategy.cfm>
- A guide to operations, PSSG04007 C.F.R. § 2040-1 (2005), <http://www.pssg.gov.bc.ca/osmv/publications/guides/Guide2005.pdf>.
- Ho, J., Marshall, A., Strategic Consulting Partnership, & United Community Services Coop. (2008, February 29). *Senior in communities: Mapping project analysis and recommendations* (Monograph).
- ICBC. (2003-2007). Count of active drivers over 65 in BC. Unpublished raw data.
- ICBC. (2008). *British Columbia Traffic Collision Statistics* [Data file]. Retrieved July 12, 2008, from [http://www.icbc.com/Library/research\\_papers/Traffic/](http://www.icbc.com/Library/research_papers/Traffic/)

Liberty Mutual, & ITNAmerica. (2008, May 15). As America's aging adult population continues to grow, transportation becomes key issue for senior drivers and their families. In *Liberty Mutual and ITNAmerica*. Retrieved July 10, 2008, from <http://www.itnamerica.org>

Ministry of Health Services. (n.d.). Government's great goals for a golden decade. In *Active Aging for British Columbia*. Retrieved July 11, 2008, from [http://http://www.healthservices.gov.bc.ca/library/publications/year/2007/MoHActive\\_Aging.pdf](http://http://www.healthservices.gov.bc.ca/library/publications/year/2007/MoHActive_Aging.pdf)

National Highway Traffic Safety Administration. (2001). *Roadmap to driving wellness*. Retrieved July 2, 2008, from National Center for Injury Prevention and Control Web site: <http://nhtsa.dot.gov>

Nicoletta, J., & Ministry of Industry. (2002). *Driving characteristics of the young and aging population* [Data file].

Olson, R. K. (2005, February). Senior driver issues: Upcoming challenges and solutions. *CPCU e-journal*, 58(2), 1-18. Retrieved July 2, 2008, from Academic Search Premier database.

Statistics Canada. (n.d.). *Most seniors able to get around* (Version Catalogue no. 91-520-XIE) [Data file]. Retrieved July 8, 2008, from [http://www.41.statcan.gc.ca/2007/70000/ceb70000\\_003-eng.htm](http://www.41.statcan.gc.ca/2007/70000/ceb70000_003-eng.htm)

Transportation Research Board. (2000). *Older drivers: Type of problem being addressed*. Retrieved July 12, 2008, from [http://safety.transportation.org/htmlguides/guides/old\\_drvr/types\\_of\\_probs.htm](http://safety.transportation.org/htmlguides/guides/old_drvr/types_of_probs.htm)

Yassuda, M. S., & Wilson, J. J. (1997, September). Driving cessation: The perspective of senior drivers. *Educational Gerontology*, 23(6). Retrieved June 25, 2008, from Academic Search Complete Web site: <http://0-web.ebscohost.com.innopac>

## Important Contacts

BCAA Traffic Safety Foundation: David Dunne, Director of Provincial Programs  
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Office of the Superintendent of Motor Vehicles: Stephanie Melvin, Director of Hearings and Fair Practices  
Phone: 250-953-3818  
Email: Stephanie.Melvin@gov.bc.ca

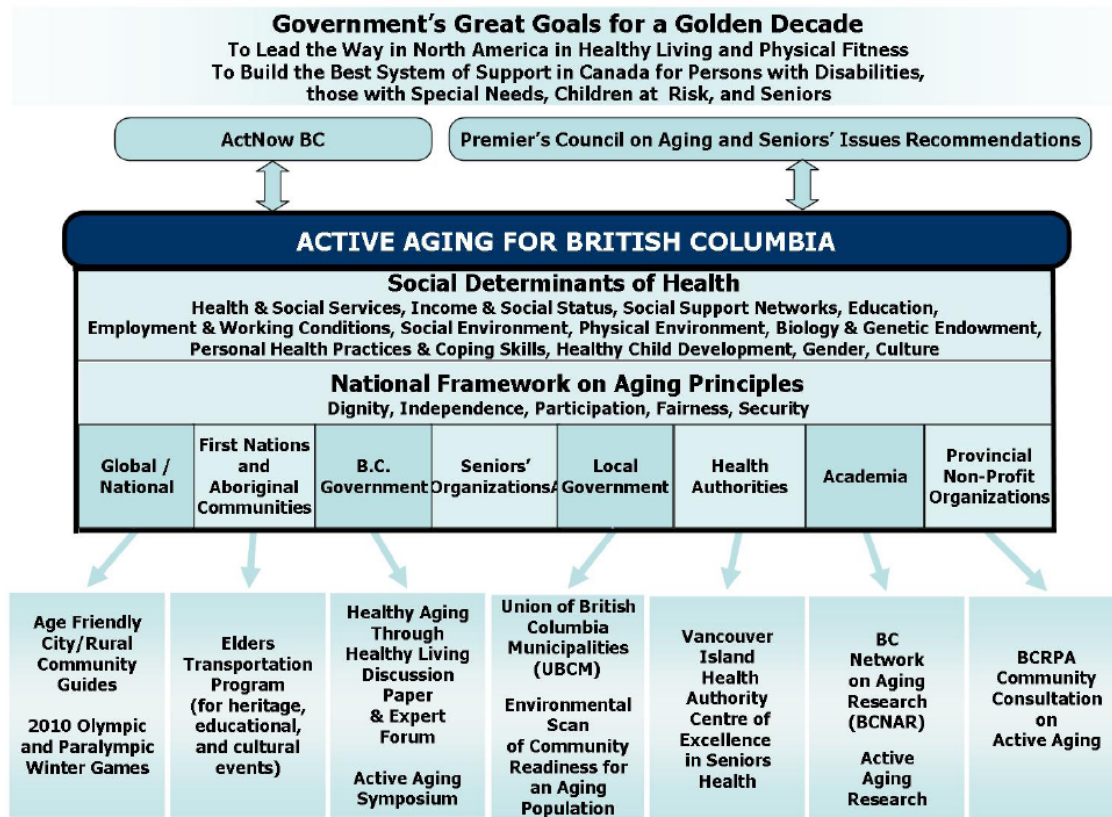
Operation Red Nose: Dixie McLean, Provincial Administrator for the Operation Red Nose program.  
Phone: 604-291-9959 ext. 223  
Email: d.mclean@bccpa.org

Passenger Transportation Board: Jan Broocke, Director and Secretary  
Phone: 250-953-3777  
Email: Jan.Broocke@gov.bc.ca

SN Transport: Malcolm White, Manager  
Phone: 1-800-SNT-0044  
Email: info@SNTransport.ca  
Website: <http://www.SNTransport.ca>



## Appendix A: Great Goals for a Golden Decade



## Appendix B

### From The Office of the Superintendent of Motor Vehicles, A Guide to Operations: The Driver Fitness Program Process

[http://www.pssg.gov.bc.ca/osmv/publications/guides/Guide\\_2005.pdf](http://www.pssg.gov.bc.ca/osmv/publications/guides/Guide_2005.pdf)

#### Driver Fitness Program Process

The Driver Fitness Program identifies and assesses drivers to determine that they are physically, cognitively and medically fit to drive when:

- They apply for a British Columbia driver's licence
- At regular intervals if they hold a commercial class driver's licence
- When a reliable report of a potentially dangerous condition is received from a medical professional, police officer, concerned family member or other individual
- At regular intervals beginning at age 80 for class 5-8 drivers as this is an age where medical conditions affecting driving are more common

The most common tool used to obtain information about a person's fitness to drive is the Driver's Medical Examination (DME) form. Other exams may be required to determine fitness to drive, including a vision report, a specialist exam such as a psychiatric report or an alcohol assessment. A standard road test or a specialized functional driving evaluation or other functional test may be required.

A person who must complete a fitness to drive exam is notified of the requirement by regular mail.

OSMV staff are delegated by the Superintendent to conduct driver fitness reviews and make decisions on individual files. Program staff include office support staff who perform mail and file support functions, intake agents who respond to public and client phone enquiries and make first order driver fitness decisions, and adjudicators and case managers who make driver fitness decisions on the more complex cases. A medical consultant advises on the most complex cases and liaises with the British Columbia Medical Association (BCMA).

All incoming information is prioritized upon receipt and a case-by-case determination regarding that person's driving privileges is made. That determination could involve requesting a person to provide further medical information, such as the results of a specialist exam, or requiring a person to take a standard road test re-examination or a specialized functional driving evaluation to assess their functional ability to drive safely. It could involve reducing a person's driving privileges or, in some cases, the individual's driver's licence may be cancelled.

OSMV will write to the client if further information is required to determine fitness to drive or if there is any change to their driver's licence status as a result of the review. This letter will include options available to the client, such as to ask for a review of the decision or further exams that will be considered regarding their fitness to drive.

When a person is denied a driver's licence, or if their driver's licence is restricted, cancelled or downgraded for fitness reasons, they can request a review of the decision. The review process is provided to drivers in writing with the fitness decision. There is a \$50.00 fee that can be waived if the person requesting the review is receiving a total monthly income less than or equal to that provided by BC Benefits. A fee waiver

application can be obtained at any ICBC licensing office and must accompany the review request.

When the Superintendent receives a review request, all the information considered in making the decision is referred to no less than two specialists with expertise relative to the person's medical condition. The Superintendent will ask these individuals to advise as to whether they believe the correct initial decision was made or whether they recommend a different decision or course of action. The Superintendent makes the final decision based on the recommendations of the specialists and the decision is communicated in writing to the review applicant.

If a person's driver's licence is cancelled, denied or restricted because of the results of a road test or functional driving assessment, a senior staff member of the Office of the Superintendent of Motor Vehicles may conduct the review. The decision is communicated in writing to the review applicant.