

Driving for Work: Fitness to Drive



Introduction

Driving is the most dangerous work activity that most people do, and it contributes to far more work-related accidental deaths and serious injuries than all other work activities.

Very few organisations can operate without using the road. Millions of vehicles – lorries, vans, taxis, buses, emergency service vehicles, company cars, motorcycles, bicycles – are used for work purposes, and many people work on foot on the road (maintenance workers, refuse collectors, postal workers, vehicle breakdown employees, the police and so on).

Unfortunately, all these workers face risks on the road because they are doing their jobs. They can also create risks for everyone else on the road. The Health and Safety Executive (HSE) estimate that a third of all road traffic accidents involve someone who is at work at the time. This may account for over 20 fatalities and 250 serious injuries every week¹.

HSE'S Driving at Work Guidelines state that:

“health and safety law applies to on-the-road work activities and the risks should be effectively managed within a health and safety system.”

This means that you need to put in place policies, people and procedures to enable you to understand:

- How your organisation uses the road (the staff who do so, the vehicles they use and the journeys they make)
- The risks this creates to your staff and other people
- The potential consequences of those risks, and
- The measures needed to manage and reduce these risks and consequences.

¹ Health and Safety Executive, Work related road safety
<https://www.hse.gov.uk/roadsafety/roadsafety.htm> (Accessed 17 June 2022)

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This will make your organisation more efficient and successful by helping you to:

- Keep your employees and volunteers safe while at work
- Protect other road users
- Save money by reducing crashes and incidents
- Reduce business interruptions
- Avoid adverse publicity associated with crashes
- Promote smoother driving which improves fuel efficiency and reduces environmental impact.



Fitness to drive

“Illness or disability, mental or physical” is reported as a contributory factor in around 8% of reported fatal road accidents, 3% of reported serious road accidents and 2% of all reported road accidents². However, this is probably an under-estimate due to the difficulties in assessing whether those involved in a crash had a medical condition, and if so, whether it contributed to the crash or its consequences.

Employers have a duty to ensure that staff are fit for work, including driving, and where necessary to arrange for periodic health surveillance.

Drivers are also responsible for ensuring that they do not drive when they are not fit to do so, and that they report any condition that affects their ability to drive safely to their employer, and if necessary to the DVLA. For more information, visit: <https://www.gov.uk/health-conditions-and-driving>.

Health and driving

A person’s fitness to drive can be affected by a medical condition, by temporary illness and by the environment in which they work, drive and live.

Health impairments – including stress, sleep disturbance, migraine, flu, severe colds, hayfever – can lead to unsafe driving. Sometimes, the treatment for these conditions can also impair driving.

Driving, if not properly managed, may lead to a deterioration in health or aggravate a pre-existing condition (for example, lower back pain). Relevant health issues should always be considered in driving risk assessments. However, few workers enjoy perfect health so a sense of proportion needs to be maintained and unfair discrimination avoided.



² Department for Transport (2021) ‘Table RAS50001:Contributory factors in reported accidents by severity, Great Britain, 2020’ <https://www.gov.uk/government/statistical-data-sets/reported-road-accidents-vehicles-and-casualties-tables-for-great-britain#contributory-factors-for-reported-road-accidents-ras50> (Accessed 20 June 2022)



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Sleep disorders

From time to time, we all experience some form of disruption to our sleep pattern, and for most of us, this is short term, with obvious and specific causes, such as hot weather, a stressful period at work or at home or a restless young baby. People who drive for work are particularly susceptible to fatigue, especially if they have long driving hours, drive at night or work irregular shift patterns.

However, in the UK, sleep disorders remain among the most under-diagnosed and under-treated group of medical conditions. Excessive sleepiness is a term used when sleepiness becomes so overwhelming that it seriously affects an individual's daily life. Those suffering with excessive sleepiness suffer from drowsiness, reduced levels of concentration and an overwhelming desire to sleep when they need to be awake.

Many drivers mistakenly believe that actions such as winding down the window or turning up the radio will prevent them from falling asleep at the wheel, but there is no proof that these methods are effective and for all of us, there comes a point when sleep is inevitable, regardless of the environment. For those suffering with excessive sleepiness, this point can be reached relatively quickly, as the nature of their condition means that the need for sleep occurs repeatedly throughout the day. Be aware that conditions such as sleep apnoea are relatively common and do not have to lead to job loss.

Driving while fatigued impairs driving ability by:

- reducing a driver's awareness and increasing the time taken to react to a hazard;
- limiting a driver's visual scanning (i.e. the ability to search systematically for hazards); and
- compromising a driver's ability to safely control a vehicle.

If you are experiencing sleepiness during waking hours, it is recommended that you visit your GP. The GP may refer you to a sleep clinic. If this is the case, explain to your GP that you drive for work, so that the GP can recommend that your appointment is fast tracked. Where excessive sleepiness is present, sufficient to impair the ability to drive, and obstructive sleep apnoea is suspected you must not drive until a diagnosis is confirmed, and the excessive sleepiness symptoms are controlled. It is a fully treatable condition and if referred to a specialist quickly a driver should be able to get back behind the wheel within a few weeks. NHS can often (but not always) provide equipment on the same day as diagnosis if they are aware that a livelihood depends on driving. Once a medical consultant is satisfied that treatment is successfully being received (normally 1-2 weeks), and therefore the symptoms are fully controlled, driving can resume safely.

If the sleep clinic diagnoses Obstructive Sleep Apnoea but says that any sleepiness during waking hours is not sufficient to impair driving you can continue to drive and do not need to notify the DVLA, although it is still important to highlight this condition to your employer. If sleepiness becomes more excessive such as to impair the ability to drive, you should visit your GP again. If the Sleep Clinic diagnoses moderate or severe obstructive sleep apnoea with excessive sleepiness sufficient to impair driving, you must continue not to drive until your sleep clinic is satisfied that your treatment has your sleepiness under control. Group 2 licence holders (lorries and buses) diagnosed with obstructive sleep apnoea must stop driving until the sleepiness no longer impairs their ability to drive, and must have ongoing treatment. You will then need to notify the DVLA. If you are unsure of whether the condition is reportable to the DVLA, it is advisable to ask the sleep clinic to clarify.



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Medical rules

The Driver & Vehicle Licensing Agency (DVLA) sets minimum medical standards and rules for drivers, including conditions that must be reported to the DVLA. Extra rules apply to drivers of large vehicles over 3,500kgs, minibuses and buses.

The DVLA's 'Assessing Fitness to Drive', available freely at <http://www.dft.gov.uk/dvla/medical/aag.aspx>, contains advice for medical professionals to follow when assessing a patient's fitness to drive.

Some medical conditions mean that a driver must surrender their licence and not drive, until passed fit to drive again by the DVLA.

Information and advice, including a list of health conditions that may require drivers and motorcyclists in the UK to report to the DVLA and the procedure to follow, is available at <https://www.gov.uk/browse/driving/disability-health-condition>.

Employers, line managers and individual drivers and riders should be aware of, and follow, these rules. It is a criminal offence for a driver not to report to the DVLA any condition that affects their ability to drive safely. It may also invalidate insurance cover. Employers who knowingly conceal this information may also be guilty of an offence.

Long-term illness

Long-term illnesses, or the medical treatment for them, may also impair a driver's ability to drive safely. Illnesses that lead to a deterioration in physical or mental capacity over time, or with symptoms that may increase to a point where safe driving is compromised, need to be kept under review.

Temporary ill-health

Severe bouts of common ill health conditions, such as colds, flu, migraine, stomach upsets, infections, hay fever, etc. can affect a driver's ability to drive safely.

A heavy cold is a good example as the symptoms (headache, blocked sinuses, sneezing and tiredness) can impair a driver's mood, concentration, reactions and judgement.

It is not just the illness but also the treatment that can undermine fitness to drive. Concentration, perception and reaction times can be affected by some prescription and over-the-counter medicines. Some remedies for coughs, colds, flu and hay fever, may cause drowsiness.

It is difficult to predict whether a medicine will affect a person's ability to drive, and if so, how and for how long. Always read the information contained with the medication and if necessary seek medical advice.

Further advice is available at:

<https://www.rospa.com/rospaweb/docs/advice-services/road-safety/employers/work-drink-drugs.pdf>.

A common sense approach is needed as it is possible to drive safely while feeling slightly 'under the weather', but equally a point may be reached when it is unwise to continue. The individual needs to be empowered to assess whether or not they are fit to drive.



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Eyesight

Drivers **MUST** be able to read a:

- new style number plate from a distance of 20 metres, or
- older style number plate from a distance of 20.5 metres.

Drivers who need glasses or contact lenses to drive must wear them at all times when driving. (See Rule 92 of The Highway Code).

Any condition that affects both eyes and vision (excluding long and short sightedness and colour blindness) should be reported to the DVLA. Having a notifiable eyesight condition does not necessarily mean an individual will lose their licence – an assessment is made in each individual case.

Eyesight can deteriorate gradually over time, and so many drivers may not realise it has fallen below the minimum standard.

For more detail about the Driving Eyesight Rules see <https://www.gov.uk/driving-eyesight-rules>.

Drivers with disabilities

Employers have legal duties to ensure that employees with disabilities are not subject to unfair discrimination and that reasonable adjustments are made if necessary to enable them to work safely. A full and proper risk assessment must be carried out to identify additional risks faced by those with disabilities and to enable their needs to be met. Some common issues affecting driving include reduced physical capacity (such as ability to operate controls, turn the head), deafness and severe musculoskeletal disorders.

Information about car technology and adaptations is available from [Motability](https://www.motability.co.uk/) (<https://www.motability.co.uk/>) and [Driving Mobility](https://www.drivingmobility.org.uk/) (<https://www.drivingmobility.org.uk/>).



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Pregnant drivers at work

Pregnancy is not a form of ill health and should never be regarded as such. However, the Management of Health and Safety at Work Regulations require employers to conduct a risk assessment of the work to be carried out by a member of staff who is pregnant. Some women can experience health problems during pregnancy.

A sympathetic approach is needed, and at some point, changes to work patterns are unavoidable. Employers should provide an environment that allows pregnant women to communicate their needs without fear of prejudice.

It is important that women who are pregnant wear their seatbelt correctly. Pregnancy does not automatically exempt women from the requirement to wear a seatbelt. A doctor will only issue a 'Certificate of Exemption' if there is a medical reason for not using a seatbelt.

The diagonal strap should be between the breasts, over the breastbone, resting on the shoulder, not the neck. The lap belt should be placed on the thighs, fitting beneath the abdomen and over the pelvis, not the bump. The belt should be worn as tightly as possible. Pregnant women should never wear lap-only belts.

As the pregnancy progresses, the driver's position in relation to the airbag should be considered. The driver should sit as far back as possible from the airbag, while ensuring she can still easily reach and operate all the controls.



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Stress & other mental health issues

Driving can be very stressful, especially if work schedules put unreasonable time pressures on drivers. High stress levels among the workforce can lead to a fall in productivity: millions of working days are lost due to stress, depression and anxiety. Some main causes are:

- the demands of the job
- poor work organisation and uncertain roles
- poor work-life balance
- domestic/personal issues
- congestion and the behaviour of other drivers

Stress can impair sleep quality (which in turn can heighten feelings of stress) and driver behaviour. Some treatments for stress and depression and other forms of mental ill-health can also affect a person's fitness to drive. Employers should include driving for work within the scope of their stress risk assessments. Visit www.hse.gov.uk/stress/index.htm.



What employers can do

Expect safe driving

Make sure that all your staff, including directors, senior managers and line managers, understand that they are expected to drive safely, responsibly and legally. If they have concerns about the organisation's driving policy or procedures, they should raise them with their line manager or staff representative.

Consult staff

Consult staff and/or their safety representatives about the organisation's policies on safe driving, including how it relates to health and fitness to drive. Review the policy periodically in joint health and safety committee meetings.

Raise awareness

As part of recruitment, training and staff appraisal, remind drivers and line managers about the:

- law about drinking and driving and drugs/medicines and driving
- laws and rules about safe driving (The Highway Code)
- medical rules for drivers
- potential risks of driving when unfit
- organisation's policy on fitness to drive
- help that is available to drivers with health issues
- legal, financial and bad PR consequences of poor driving
- organisation's policy on work related road safety, including its policy on health issues;
- need to co-operate, to report problems and to participate in investigations.

Be positive

It is essential that staff feel confident that they can report health issues and their ability to drive safely, without this affecting their job security or career prospects. Staff need reassurance that health problems will be treated sympathetically and that appropriate occupational health advice will be available, otherwise, they will simply avoid reporting problems.

Include driving in your occupational health policy

Fitness to drive policies should be included in the organisation's overall Occupational Health Policy. The person responsible for the organisation's occupational health should be consulted when developing fitness to drive policies. In particular, line managers should know when they need to consult their HR and occupational health colleagues.

Include fitness in driving risk assessments

Ensure that risk assessments consider and document the risks related to health issues, and the measures taken to address them.



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Conduct pre-employment health assessments

For roles that involve driving, a health assessment (for example, a pre-employment health questionnaire) should seek to identify whether there are issues that might affect fitness to drive. The assessment must be devised with the help of a qualified occupational health professional, and be handled according to established rules of medical confidentiality and data protection. Where results indicate there may be a problem, the employee can be referred to an occupational health professional for further assessment.

Consider vocational drivers

There are specific medical rules for vocational drivers (bus, coach, minibuss and lorry drivers) that must be followed.

Review sickness and attendance management policies

Return to work interviews should assess whether the person is fit to drive again, and whether additional support is needed. For example, schedules could be adjusted to reduce driving hours or allow more time for rest breaks. It may be that someone is fit to return to office duties before they are fit to drive for work, in which case their duties could be temporarily adjusted.

Line managers should not permit or require an individual to drive if they are undergoing changes to their medication that might affect their driving ability, or if they are feeling the side effects of their medication. It is useful to review absence patterns among drivers periodically to see if there are any significant trends that may be associated with driving.

Rehabilitation

Employers will need to consider the capacity and needs of drivers when they return to work following injury or illness. Guidance is available at www.hse.gov.uk/sicknessabsence/index.htm.

Establish how to get access to help

It is important that line managers and staff know where to obtain assistance for any health concerns. The first port of call should be the organisation's HR Department. Companies that do not have an Occupational Health Department should ensure they have established a system for obtaining this service through an occupational health specialist. Specialist advice can also be obtained from NHS Health at Work, www.nhshealthatwork.co.uk/, who operate a free advice line.

Employers can use this scheme to ensure their staff receive professional occupational health advice. Health referrals must relate to the requirements of the job. Disabled workers should not be referred simply because they are disabled, but because their health is being affected by their job. The assessor should also have a clear framework on which to base their judgements.

Consider periodic health surveillance

Periodic health surveillance can help to ensure that work related health issues that might affect an employee's ability to drive are spotted early and suitable measures to address them are identified. It can also be used to assess the status of a previously identified ill-health condition. It is expensive and ideally should be targeted at tackling specific problems. Employers should ensure that reports from health surveillance are kept strictly confidential. If an issue that affects a person's fitness to drive is identified, the employer must consider what to do. This may involve adjusting work tasks, requiring someone to refrain from driving and/or reporting the health problem to the DVLA (if required).



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Cope with long-term illness

Long-term illnesses should not preclude staff from driving while they are medically cleared to do so. However, employers and staff should be aware of the unique situations that this can sometimes present. Coping strategies should be devised, including what to do if a crisis situation develops. Employees who are suffering from a serious illness (particularly one which leads to gradual deterioration in physical or mental faculties) should be encouraged to seek proper medical help and any recommendations that affect their ability to drive should be passed on to the employer.

Encourage eyesight tests

Organisations should ensure that staff who drive for work are aware that they must meet the minimum legal eyesight standards. If they are required to wear glasses or contact lenses, they must do so whenever they drive.

Advise staff to keep a spare set of spectacles in the vehicle. Advise staff to have their eyes tested at least every two years, or more often if advised by an ophthalmologist.

Many employers subsidise or provide eye tests for staff who work with Display Screen Equipment.

Manage stress

Stress management is an essential part of health and safety policy. Staff should feel empowered to express any concerns they might have relating to stress, whether due to their work or domestic life, that could undermine their fitness to drive.

Ensure that working regimes and tasks do not exert undue pressure on staff that is likely to cause or magnify stress. Stress may also be caused by events in an individual's private life, but even so, it is likely to affect their ability at work.

Driving schedules in particular should be planned so that they do not require staff to drive too far, for too long or too fast, and without adequate rest breaks. Further advice is available in '[Driving for Work: Safer Journey Planner](#)'

Stress can also be caused by requiring an individual to undertake duties for which they do not feel competent. This may include driving generally, driving particular vehicles or particular types of journey. Driver assessment and training can help to identify and address such concerns. Further advice is available in '[Driving for Work: Driver Assessment and Training](#)'.

HSE Standards on Stress Management can be found at www.hse.gov.uk/stress/standards/index.htm.



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Consider fatigue and those with sleep disorders

Fatigue and sleep disorders are a major concern for those driving for work. As an organisation, you should optimise work schedules to maximise opportunities for drivers to sleep and consider the impact on an employee's sleep when planning shifts and work schedules.

Encourage the use of relaxation techniques and respite activities such as napping, relaxing and socialising during short rest breaks. These can lessen job stress and subsequently reduce fatigue. It is best practice to allow drivers to take breaks when needed (outside legal requirements) to reduce fatigue and improve alertness.

The way the organisation allocates work to drivers can also be done in a way that allows the driver to plan their journey safely to avoid fatigue. It is best practice to give drivers details of all their deliveries at the beginning of a shift, whenever possible, so the drivers can plan their breaks to eat and rest, rather than adding deliveries throughout the shift in an ad hoc basis. Manage working practices to reduce any negative impact on work-life balance. For example, avoid enforced overtime, but if this is essential do not plan heavy schedules either side of the overtime shifts. You should also discourage drivers from taking on too much overtime, as this can induce tiredness. Nights away from home should be avoided where possible and flexible working requests should be supported.

You should also raise awareness about sleep disorders such as sleep apnoea. Make it clear to drivers that these conditions are relatively common and does not have to result in job loss, as the belief that the driver may lose their job can prevent them from reporting such medical conditions. Suspected sufferers should be taken off driving duty immediately and referred for medical assessment. Annual health checks can also help to identify potential sleep apnoea sufferers.

Consider vehicle ergonomics

A poor driving position, such as a badly adjusted seat, can lead to postural problems and neck, arm, leg and back pain, which can exacerbate an existing condition or cause a long-term health problem.

A correctly adjusted head restraint can prevent whiplash injuries. Staff should be given advice or training on how to ensure that their driving position is correct and head restraints properly used. For more details see <https://www.rosipa.com/rospaweb/docs/advice-services/road-safety/vehicles/head-restraints.pdf>.

Provide manual handling training to drivers who load goods, or help passengers, into and out of vehicles, and check the vehicles are suitable for carrying the loads and passengers. Excessive noise and vibration, both of which can adversely affect the health and driving attitude of the driver, also need to be avoided.

Assess the design of vehicles and equipment at the procurement stage and ensure that features critical to health are checked and maintained regularly to ensure that they remain fit-for-purpose.



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Consider pregnant drivers

Give special consideration to pregnant drivers and conduct a risk assessment of their duties. It is likely that changes to work patterns may become necessary at some point. Employers should provide an environment that allows women to communicate their needs freely. Employers should also provide advice or training to ensure that the driving position is adjusted if necessary, and that the seatbelt is worn correctly.

Consider Drivers with Physical Disabilities

Conduct a full risk assessment to identify any additional risks faced by staff with disabilities and to cater for their needs. The employee should be involved to allow them to communicate their needs clearly.

Ensure that any technology or adaptations to assist the employee to drive are fitted and maintained effectively. There are numerous driving aids ranging from hand controls for pedals, steering wheel knobs, adapted mirrors and specialist safety belts. More information about car technology and adaptations is available from EURONCAP (<https://www.euroncap.com/en>), Stop the Crash (<http://www.stopthecrash.org/>), Motability (<https://www.motability.co.uk/>) and Driving Mobility (<https://www.drivingmobility.org.uk/>).

Set clear rules

In particular, ensure that all staff, including senior managers and line managers, understand that they must not drive for work if they are not fit to do so. Doing so should be a serious disciplinary matter.

Lead by example

Senior managers, from the head of the organisation down, should lead by personal example and follow this guidance, both in the way they drive themselves and in encouraging colleagues to drive safely.

Assess your drivers

Assess drivers' attitudes and their driving competence on recruitment, during induction and regularly afterwards, including fitness to drive, with their drivers during periodic staff appraisals and team meetings.

Assess all drivers regularly, but prioritise those with the greatest mileages, young drivers, drivers using a new type of vehicle, such as a van, and drivers with a crash history or history of motoring offences. Use the results to identify training needs and other risk management measures, and discuss driving during individual staff appraisals, and in group meetings.

Train your drivers and managers

All managers should be trained to manage work related road safety as part of their health and safety responsibilities. They should understand how driving can affect health and how health can affect safe driving. This should include training in the 'soft skills' needed when dealing with health issues and the need to respect medical confidentiality.

Managers should lead by example and follow the organisation's policy.

Train managers to recognise signs of health changes, including sudden mood or behaviour changes, unusual irritability or aggression, worsening relationships with colleagues and others, impaired job performance or an increase in poor timekeeping and short-term sickness absence. These signs do not necessarily mean a health problem, but may be an indication that help is needed.



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Provide driver education and practical training for your drivers, based on the needs identified through driver assessment and targeting those at greatest risk first. See “[Driving for Work: Driver Assessment and Training](#)”, available free at <https://www.rospa.com/Road-Safety/Resources/Free.aspx#employers/>.

Be constructive

Treat staff sympathetically and in confidence. Offer access to medical or therapeutic help for staff where possible.

Give staff who report that they are unfit to drive because they are affected by medicines other duties and ask them to consult their doctor or pharmacist for alternatives. If necessary, they should be signed off sick and the organisation's sickness policy followed. Be alert to the risk of employees feeling under pressure not to take their medication (or the full dose) so they can continue to drive. The consequences could be just as serious.

Check driver licences

Conduct regular driver licence checks, at least once a year, but more often for high mileage drivers or those with a poor driving record. An easy way of tracking endorsements is to check driving licences (at appointment and regularly afterwards); the most cost-effective way of doing this is usually via the [DVLA's online checking facility](#) (each driver must sign a mandate allowing you to do this).

Consider a permit to drive

Many organisations operate a 'permit to drive' system in which only staff who have been authorised to do so are allowed to drive on company business; sometimes it is a condition of the company's insurance.

Liaise with the police

Make it clear that the organisation will co-operate with police enquiries or fixed penalty notices resulting from an incident or alleged speeding offence and will supply to the police the name and address of the employee to whom the vehicle was allocated at the time.

Liaise with other organisations

It is very useful to liaise with police forces, road safety bodies and other organisations such as trade associations to share knowledge and experience.

Monitor and review

Managers should discuss fitness to drive with their drivers during periodic staff appraisals and team meetings. The circumstances of any speeding offences should form part of an individual employee's performance appraisal, leading, where appropriate, to new personal performance targets. Any feedback from drivers about health issues should be noted and addressed as necessary.

Be aware that some staff, especially younger employees or those new to the company, may not feel able to raise concerns for fear of jeopardising their relationship with the company or their manager. For more advice about “[Young Drivers at Work](#)”, see <https://www.rospa.com/Road-Safety/Advice/Drivers/Young-drivers>.

Require reporting

Require all staff and managers who drive for work to report collisions (including damage-only ones), significant near misses and motoring offences. Also encourage them to pro-actively raise any concerns they have.



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Record and investigate crashes and incidents

Require staff who are involved in a work related crash or damage-only incident to report this to their line manager so that it can be investigated to determine whether driver fitness was a contributory factor, and what (if any) action is necessary to prevent repeat occurrences. It is essential to ensure that the organisation's insurers are kept informed as failure to do so may invalidate the insurance policy.

If possible, also record and analyse near misses, as they can provide valuable information.

Encourage staff to report all work-related road incidents, near misses and road traffic offences (whether at work or not). Line managers should understand their responsibilities to ensure that reporting procedures are followed and encourage a 'just culture' so staff are reassured that reporting will not lead to unfair action.

Investigate incidents

Investigate crashes (including damage only ones), offences and near misses to establish both the immediate and root causes of what happened, and to identify the measures that will reduce the risk of repeat occurrences. Share the lessons learned throughout the organisation.

The managers responsible for investigations should be properly trained to conduct investigations, and analyse and interpret the findings. Telematics are a useful way of providing objective and accurate data about what a vehicle was doing immediately before and during a crash or incident.

It is crucial that lessons are learned from the results of monitoring and investigations, and fed back into the organisation's MORR policy and procedures. Key points should also be communicated to managers and staff. Review claims data with the organisation's insurers and vehicle providers.



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Further Information and Support

[RoSPA Driving for Work Resources](#)

[RoSPA Fleet Safety](#)

[RoSPA Advanced Drivers and Riders](#)

[Scottish Occupational Road Safety Alliance \(ScORSA\)](#)

[Driving for Better Business \(DfBB\)](#)

[eDriving](#)

[Think Road Safety](#)

[The Highway Code](#)

[Department for Transport](#)

[Driver and Vehicle Licensing Agency \(DVLA\)](#)

[Medical Conditions, Disabilities and Driving](#)

[Driver and Vehicle Standards Agency](#)

[Health and Safety Executive](#)

[Road Safety GB](#)

[Road Safety Scotland](#)

[Road Safety Wales](#)

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accidents don't have to happen

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