Functional Driving Evaluation (FDE) – Q&A for Health Care Professionals & Funders

1. **How do I know if my client is appropriate for an FDE referral?**

   Driving is a complex task that requires the integration of core skills and the ability to adjust to a constantly changing driving environment. Drivers with medical conditions that impact their physical, visual, cognitive, perceptual or emotional function can be evaluated to determine medical fitness to drive, functional driving skills, need for adaptive driving equipment, driver rehabilitation potential, as well as recommendations for the future including cessation of driving. Many drivers can successfully compensate for functional limitations or deficits through adaptive driving equipment, training or strategies while others simply require reassurance and education that they have functional driving skills. Some stakeholders require definitive answers about fitness to drive to validate the need for transportation alternatives or vehicle modifications. Ultimately, the FDE is a highly effective way to comprehensively assess functional driving skills in one day, and it can occur at any point on the rehabilitation continuum but should be considered early to enable return to function and return to work as soon as the driver is able. This is a specialized area of practice and driving limitations should be addressed comprehensively and in a timely manner for the safety of clients and other road users.

2. **What can my client expect when they come for this evaluation?**

   At Community Therapists (CTI), we assess people who have medical conditions with physical, cognitive, visual, and/or psychosocial limitations that may impact driving. This includes diagnoses such as traumatic brain injury/concussion, anxiety/PTSD, vision-loss, paraplegia, stroke, and amputations, as well as persistent pain and fatigue-related conditions.

   The evaluation is divided into a Clinic-Based Evaluation that is typically completed over a 2-hour session in the morning, followed by an On-Road Evaluation in the afternoon, or on a separate day. The In-Clinic portion includes a review of medical information, an interview, testing of core physical skills required for driving, a vision screen, and a battery of cognitive tests. The Occupational Therapist (OT) scores and interprets this information to determine if the client has sufficient core skills to proceed to the On-Road Evaluation. The On-Road Evaluation is the gold standard for determining fitness to drive. It is conducted over 1.5 hours, with a break in the middle to provide feedback. We provide a dual-controlled car, with the client in the driver's seat, a trained driving instructor in the passenger seat, and the OT in the back seat. When required the vehicle is equipped with adaptive driving equipment.

   Upon completion of the evaluation, the OT will review the results of the Functional Driving Evaluation with the client and write a comprehensive report. The report includes the clinical results of the In-Clinic and On-Road Evaluations and provides an overall opinion regarding Functional Driving Skills related to the client's medical condition. The client and their team, should expect to receive the report within 2 weeks.

   For client's that do not meet the requirements for the On-Road Evaluation or are determined to not have functional driving skills, they will be advised not to drive and education on alternate modes of transportation and information on next steps is provided.

3. **Who gets a copy of the Functional Driving Evaluation report?**

   As per the consent form that is signed by the client prior to the evaluation, the report is sent to the fee payer, any medical/rehabilitation professionals as indicated by the client, and the client themselves. The report is submitted to the Driver Medical Fitness Program – RoadSafetyBC when referred and/or when change to licensing status is required.

4. **Will my client lose their license?**

   There are three general outcomes from the Functional Driving Evaluation:

   A. If the client demonstrated functional driving skills and has a valid license, they are advised they may drive. If they do not have a valid driver's license they are advised not to drive until they receive further instruction from RoadSafetyBC.

   B. If the client was not able to demonstrate functional driving skills, they are advised not to drive and the role of RoadSafetyBC as the provincial authority regarding licensing for medically unfit drivers is reviewed. These clients will typically receive a letter from RoadSafetyBC regarding cancellation of their license within 4-6 weeks. The client is recommended to discuss results with GP/NP.

   C. The third outcome is that the client does not demonstrate functional driving skills, but is a candidate for a Driver Rehabilitation Program. A Driver Rehabilitation Program will be recommended and licensing status to be reviewed following completion of the Driver Rehabilitation Program. See Question 10 for more details.

5. **What if my client just needs a spinner knob? Do they still need to go through the FDE process?**

   A spinner knob is classified as adaptive driving equipment and requires a restriction added to the client's license. For clients who require equipment to drive for medical reasons, the client needs to be assessed to determine the most appropriate equipment to meet their driving needs. There is a variety of adaptive driving equipment available, even for spinner knobs, and our OTs are trained to determine what type of equipment, position best meets your client's needs, and if secondary controls access requires equipment. All clients are required to complete the full evaluation, as we need to screen for core skills required to drive. There can be additional issues identified during the evaluation that may need to be addressed for safe driving. Our goal is to maximize success for clients in relation to maintaining or returning to driving.

   Using adaptive driving equipment changes how people drive. Clients need time to develop skills and habituate use of required equipment so they can respond appropriately in complex driving scenarios while using the equipment. This includes smooth steering, ability to make quick sharp turns in hazard avoidance maneuvers, and maintaining lane position at high speeds on highways as well as using secondary vehicle controls (e.g. indicator, horn, lights with or without adaptation) while steering. Part of our evaluation determines how much time your client needs to learn to use the adaptive driving equipment consistently and effectively.

   OTs will provide information on how to obtain required vehicle modifications from NMEDA-certified vendors. Upon successful completion of the FDE and/or Driver Rehab Program, RoadSafetyBC will advise the driver they are eligible to obtain from ICBC their driver's license with the appropriate restriction added.

6. **My client has an anxiety condition and is self-restricting driving. How can you help?**

   A referral for an FDE is recommended for drivers who have not returned to driving or are restricting their driving due to their symptoms. Addressing return to driving early on in recovery prevents many drivers from avoiding or limiting their driving unnecessarily and promotes functional independence and reduction of need for taxi/ride sharing and/or assistance from family/friends for transportation services. The FDE will determine the impact the anxiety/PTSD diagnosis has on the ability to drive and whether the driver would benefit from a Driver Rehabilitation program at this time.

   Clients with mild driving anxiety may find that they are reassured following the On-Road Evaluation completed within the FDE, that they do in fact have functional driving skills and were able to demonstrate those skills within the safety of a dual controlled vehicle with a driving instructor. Other drivers will require additional training and will benefit from the reassurance and education provided by the driving instructor in the dual controlled vehicle driving in a variety of road conditions and in any specific scenarios that are triggers (e.g. driving past the accident site or similar conditions such as driving on highways). The OT attends some of the lessons to provide and reinforce strategies related to anxiety and functional driving skills as well as to develop, progress and modify the exposure-based rehabilitation program as appropriate. A structured homework program may be provided to supplement the On-Road Rehabilitation program.

For those drivers who have not returned to driving the FDE may determine that additional treatment is required prior to commencing a Driver Rehab program. In order to benefit from a Driver Rehabilitation Program your client must have sufficient functional ability to start the car and drive with the support of a driving instructor in a dual control car. Clients who are unable to sit in the driver's seat and turn on the car should be referred for general OT services and/or counselling/psychological services or further medical prior to the FDE.

7. **My client has reduced tolerance due to symptoms of anxiety, pain or fatigue and I don't think they have the tolerance for a full 1.5-hour On-Road Evaluation. How do you accommodate this?**

   If the client is not able to complete the 1.5 hour On-Road portion, we will modify as needed. The client is supported by a certified driving instructor in a dual-controlled car. For anxiety symptoms, the OT incorporates strategies to support the client's emotional response during the FDE with graded exposure and supportive principles. If the client is a candidate for Driver Rehabilitation, we will develop a plan to gradually assist your client back to driving to a variety of driving scenarios (e.g. around home and community, to/from worksite), and to address specific triggers if relevant (e.g. highways, accident site or related scenarios). OT's collaborate with the client's counselor or psychologist and medical/rehab team as applicable.

   Similar principles apply for clients with reduced tolerance due to pain, fatigue or other symptoms. The On-Road Evaluation will be modified based on client's abilities.

   Drivers who are self-restricting or avoiding driving all together due to pain, anxiety or concussion symptoms can benefit from knowing they have functional driving skills and are able to drive functionally for short periods of time. They can then build on time and locations as symptoms improve.

8. **My client is a new driver and doesn't have much experience. How will that impact the evaluation? Should my client take driving lessons to prepare for the evaluation?**

   We see many young drivers who need compensatory strategies and/or adaptive driving equipment to learn to drive and we help them through that process, while recognizing that they often require additional time to learn basic driving skills. For clients who have never driven, the evaluation results will indicate whether or not they have the potential to learn to drive at a beginner level.

   Our job is to separate out what on-road errors are due to medical conditions and what errors are due to lack of driver knowledge. Taking lessons prior to the evaluation is not advised for safety reasons as the objective of the evaluation is to determine if medical condition is impacting ability to drive safely. Drivers with a restricted driver's license for the purposes of the On-Road Evaluation are not permitted to drive outside of the FDE or Driver Rehabilitation program. Following the FDE, Driver Rehabilitation (if needed) can be catered specifically to address the areas of functional limitations/deficit while learning to drive.

9. **My client may or will require adaptive driving equipment - when should I refer?**

   All drivers who require adaptive driving equipment to drive must be referred for an FDE as they will require a restriction(s) added to their driver's license outlining the requirement. Restrictions may include:

   - R 25 Fitted prosthesis/leg brace required
   - R 26 Specified vehicle modifications required
   - R 28 Restricted to automatic transmission

   Drivers who may benefit from adaptive driving equipment in the short term but may not require for the long term are ideal candidates for referral when medically stable and ready to address return to driving. For example, a driver who will need right below knee prosthesis and following further rehabilitation may be able to drive with prosthesis in the long term may benefit from a left foot accelerator earlier in their recovery or a driver with hand injury could use a spinner knob now while expecting further improvements in hand function over next 6-12 months. In these scenarios, restrictions can be added and then removed when no longer required pending repeat FDE or in some cases a medical review.

10. **What is a Driver Rehabilitation Program?**

    The Driver Rehabilitation Program is individualized based on the client's limitations and targeted driving skills as identified in the FDE. This program is customized to meet the client's needs and therefore there is no set number of lessons or costs that can be provided prior to having the client complete the FDE.

    Driver Rehab includes driving lessons in a dual controlled vehicle, with adaptive driving equipment when required, facilitated by a trained driving instructor, under the supervision of the OT. In additional to general driving skills, specific education on compensatory strategies and/or training on adaptive driving equipment is provided in a range of driving scenarios. Building driving tolerance is also targeted with those drivers limited by pain, concussion or anxiety symptoms. These recommendations and strategies will be detailed in the FDE report.

    The OT develops and monitors the Driver Rehab program, communicates with the driving school, medical/rehab team, funder and RoadSafetyBC as required and attends lessons to initiate program, reassess and provide treatment within on-road sessions, and provide final evaluation. OT will provide written report to funder, other team members and RoadSafetyBC as required.

11. **What does the referral process look like?**

    To make a referral, please contact our Service Coordinator at 604-681-9293 or email driving@communitytherapists.com. Once funding has been established and client information obtained, consent and authorizations forms will be sent to the client, along with a Driver Readiness Questionnaire for the client's family physician/nurse practitioner to complete and request for a copy of the Driver's License and RoadSafetyBC letter if indicated. When these documents are sent back to us, the evaluation will be scheduled. Generally, we do not carry a waitlist and referrals are processed as they are received. There is often an urgency to have the evaluation completed quickly. You can help this process by following up with the client to ensure they complete and send back the consent forms and a copy of the Driver's License in a timely manner.

    While completion of the Driver Readiness Questionnaire is preferred, the FDE can proceed if the client does not have access to a primary care physician or nurse practitioner. Depending on medical and rehabilitation information provided at time of referral the FDE may be scheduled to complete the In-Clinic Evaluation first with the On-Road Evaluation pending In-Clinic findings.

12. **When is the best time to refer my client?**

    This varies based on the client's limitations and abilities as well as stability of the medical condition. Driving is an instrumental activity of daily living and return to driving as soon as safe and able promotes early return to function and return to work.

For more information, contact our Driver Rehabilitation Service Coordinator at (604) 681-9293 or driving@communitytherapists.com

RoadSafetyBC - Driver Fitness Medical Program is responsible for licensing decisions due to medical conditions. If you have a physician's report or medical information to submit to RoadSafetyBC, please fax it to: **250-952-6888.** If patients have driver fitness questions, RoadSafetyBC has a toll-free hotline: **1-855-387-7747**.

Further information is available at:
https://www2.gov.bc.ca/gov/content/transportation/driving-and-cycling/roadsafetybc/medical-fitness

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