

# Driving and dementia

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Having dementia does not mean an end to daily activities. This includes driving, which a person may still be able to do safely for some time after diagnosis. However there are certain things that must be done legally. In particular, the person must contact the relevant licensing agency (DVLA/DVA) about their diagnosis and follow professional advice.

As the person's dementia progresses, a time will come when they can no longer drive safely and must stop altogether. For many people this change can be very difficult to accept. This factsheet explains the legal situation, and gives some tips on stopping driving and supporting the person with dementia.

This factsheet is about driving cars and motorcycles, which carry 'group 1' driving licences. It does not cover 'group 2' licences, which are for large lorries and buses. The rules for group 2 driving licences are a lot stricter: a person diagnosed with dementia will not be allowed to hold one.

## How dementia affects driving

A diagnosis of dementia is not in itself a reason to stop driving. One in every three people with dementia still drives. What matters, from both a legal and a practical point of view, is whether the person is still able to drive safely.

For experienced motorists, driving may seem to be a largely automatic activity. In fact, driving is a complicated task that involves a combination of complex split-second thought processes as well as sensory (vision, hearing) and manual skills. For many people, it is a highly practised skill they've been doing for many years.

In order to drive safely, a person must use a range of mental abilities including:

- attention and concentration – to focus on, and switch between, multiple different driving tasks while ‘reading’ the road
- visuospatial skills – to keep to an appropriate speed and distance, and the right road position
- problem-solving skills – to respond to incidents, diversions or obstacles in the road
- judgement and decision-making – for example to interpret and anticipate what other road users are doing
- reaction and processing skills – perhaps to act quickly to avoid an accident.

A safe driver also needs to be patient and calm. Memory loss, which is often a major early symptom of dementias such as Alzheimer’s disease, does not generally feature strongly here. Different kinds of memory are needed for safe driving – for example remembering a route, how to change gear and what road signs mean. But in a person with dementia, problems with the abilities above tend to affect driving sooner than problems with memory loss.

Dementia can affect all of these skills – this is why it is listed as a medical condition that the licensing agencies need to know about. As dementia progresses it has greater effects on all these abilities. As a result, everyone with dementia will eventually lose the ability to drive safely. The time at which this happens will be different for each person, but most drivers with Alzheimer’s disease stop within about three years of the first symptoms. This is often in the moderate or middle stage of dementia but, with some types of dementia, common early symptoms mean it might be sooner. Examples of this are visual hallucinations in dementia with Lewy bodies and impulsive behaviour in frontotemporal dementia. A person with these symptoms will not be able to drive safely.

## **Other medical conditions**

Many people with dementia have other medical conditions that could also affect their driving. Among the most common in older people are problems with vision and hearing. Head-turning ability – often due to arthritis – may also be reduced. This can make manoeuvres like pulling out into moving traffic particularly difficult. Some older people also have weaker muscles, which can make physical tasks like steering or braking difficult.

A person taking certain types of medication, such as night sedation or some drugs for depression, may also find that their driving ability is affected. For all of these conditions, the doctor will advise on whether the person is safe or needs to notify the authorities.

## **Legal requirements**

UK law on driving and dementia is clear. A licence holder who is diagnosed with dementia must contact the relevant licensing agency promptly, or risk a fine of up to £1,000. In England, Wales and Scotland this is the Driver and Vehicle Licensing Agency (DVLA). In Northern Ireland it is the Driver & Vehicle Agency (DVA).

The doctor who has diagnosed the person's dementia should talk to them and anyone attending the appointment with them about driving. The doctor should make it clear that the person needs to tell DVLA/DVA.

A driver with a diagnosis of dementia should also immediately tell their car insurance provider. If they do not, their policy may become invalid. It is a criminal offence to drive without at least third-party cover.

Some licence holders will want to continue driving if they can. How to contact DVLA/DVA and what happens after is explained in the section 'Continuing to drive'.

In some cases the doctor will tell the licence holder that they should stop driving immediately. The person may need to stop driving permanently, perhaps because their dementia is more advanced,

they lack insight, have poor visuospatial awareness or are having hallucinations. Or the doctor's advice to stop may only be as a precaution until further assessments are carried out. In either case, medical advice like this should always be followed even if it takes up to several weeks for DVLA/DVA to make a final decision.

Many people diagnosed with dementia will decide for themselves that they wish to stop driving. Sending your licence back to DVLA/DVA under these circumstances is called 'voluntary surrender'. It is covered in the section 'Giving up driving'.

### **Driving and mild cognitive impairment**

Mild cognitive impairment (MCI) is a condition in which the person has subtle problems with memory, perception, reasoning, judgement or attention. They do not have dementia, although some people with MCI will develop dementia over time. For more see factsheet 470, *What is mild cognitive impairment (MCI)?*

MCI can sometimes affect a person's ability to drive. But this is much less common than in dementia. Guidance from DVLA/DVA is that a licence holder diagnosed with MCI does not automatically need to tell the licensing agency, unlike a person diagnosed with dementia.

The exception, which is likely to be only a small minority of people, is if MCI is affecting their driving. The person's doctor or family members will probably be good judges of this and should notify the DVLA/DVA if they – or the licence holder themselves – are concerned. As with dementia, if notified, the DVLA/DVA will then take up medical reports and make a decision as to someone's fitness to drive.

### **If the person does not tell DVLA/DVA**

Occasionally a person diagnosed with dementia does not tell the authorities about their diagnosis and continues to drive. They might not accept their diagnosis or they may not realise how much their dementia is affecting their driving.

Not informing DVLA/DVA puts the person at risk of a fine and prosecution, as well as the danger of driving without insurance and possibly having an accident. In these circumstances, the doctor should try to persuade the person to stop driving and to notify DVLA/DVA (or get their permission to let the family do this).

If this does not work, doctors should disclose relevant medical information to the licensing agency if they believe the person's continued driving poses a serious risk to others. This is according to guidance that is issued to doctors. The doctor does not need the person's permission to do this, but they should tell them afterwards in writing that they have done it. This is often a very difficult issue for both parties.

## **Continuing to drive**

The first step for someone who is diagnosed with dementia and wants to continue to drive is to tell DVLA/DVA about their diagnosis straightaway. This should be sent including the person's full name, address, date of birth and, if known, the driver number on the driving licence. The details should be sent to the Drivers' Medical Group (part of DVLA) or DVA (see 'Useful organisations' for both).

DVLA/DVA will send the person a questionnaire with a permission request to obtain medical reports from the person's GP and/or consultant. This questionnaire can also be downloaded directly from the GOV.UK website (see 'Useful organisations'). Once the licence holder has returned it, DVLA/DVA will contact their consultant (or, if no consultant details are provided, their GP).

Based on the doctor's report, medical advisers at DVLA/DVA will make a decision as to whether the person can continue to drive. There are three possibilities at this stage.

- DVLA/DVA may decide to renew the person's licence, usually for one year for someone with dementia.
- Alternatively, they may decide to cancel or 'revoke' it immediately (see 'DVLA/DVA decides that the person must stop driving').

- In a minority of cases, DVLA/DVA may feel that they need more information, such as more medical details, or they may require the person to take an on-road driving assessment before making a decision (see 'Driving assessment').

In all cases, DVLA/DVA will write to the licence holder to tell them.

### **Driving assessment**

DVLA/DVA will ask someone to take a driving assessment if they are unsure whether the person is safe to continue to drive. This will be at one of 17 accredited driving assessment centres around the UK, or at one of their satellite centres (see Forum of Mobility Centres under 'Other useful organisations').

DVLA/DVA will refer the licence holder to a centre close to them. Some people pay privately for an assessment at a centre, for example because they have been issued with a licence but need some advice or tuition. Private fees paid then vary but most are about £70–90. In cases where DVLA/DVA have asked for the assessment then the agency will always pay.

The licence holder should go to the centre with someone else in case they need to be driven home. They will need to take their driving licence and any glasses they wear to drive.

The driving assessment is not like a driving test. It is an overall assessment of the impact that dementia is having on a person's driving and whether they are able to drive safely and in comfort. The assessment is done in a supportive way and makes some allowances for the bad habits that many drivers develop. Staff will work with the person to help them continue to drive if this can be done safely.

The driving assessment is carried out by a specialist occupational therapist and an advanced driving instructor. Overall, it can take about two hours and includes the following steps.

1. An interview that covers the licence holder's medical and driving history, and any current driving problems. The person will then do a short pen-and-paper test of mental abilities.
2. Reaction time and limb strength (steering, braking) will be tested on a special static 'rig'. This is the set-up of a car with a steering wheel and foot pedals that is linked to a computer. Eyesight is also checked. By this stage a few people will be found not to be safe to drive.
3. The main part of the assessment – and the best measure of driving ability – is an on-road session in a dual-braking car. This is a vehicle that has a brake on both the passenger and driver's sides. Some centres have a private roadway that the person drives around first. This helps them get used to the car and allows staff to check that they are safe to go on the public road. The main assessment is a drive on local public roads following a pre-set route. The person drives with the advanced driving instructor who acts as a front passenger and the occupational therapist as an in-car observer.
4. Back at the centre at the end of the assessment, staff will tell the driver what they have found. Where appropriate, they will suggest strategies and adaptations to help the person to continue driving with greater safety and confidence. If the person is assessed as not being safe to drive, staff will give information and advice about other alternatives. (In this case, someone else will need to drive the person home). Where DVLA/DVA have asked for the assessment, the centre will send a report direct to them, although the licence holder can ask the agency for a copy.

When DVLA/DVA decides that the person can continue driving  
If DVLA/DVA decides that the person can continue to drive, they will issue a new driving licence. This will be valid for a limited period. For a person with dementia, the licence duration is almost always one year. However, for very early dementia it may occasionally be longer – up to a maximum of three years.

It is a good idea for relatives, or others close to the person with dementia, to monitor – tactfully – the person's driving skills. Their condition should also be regularly reviewed by their doctor.

## Reducing the risks

All drivers can take steps to make their driving safer. For someone with dementia the following tips may help to minimise their risk of having an accident when driving.

- Drive regularly to help maintain skills and confidence.
- Drive short distances on familiar routes at quiet times of the day as these may generally present fewer problems than long, unfamiliar trips or journeys in heavy traffic.
- Drive in daylight with good road and weather conditions.
- Drive without distractions like the radio for better concentration.
- Get a passenger to navigate.

Even if someone is issued with a licence, it is helpful if they can begin to think ahead to the time when they will need to stop. Talking to others about this and beginning to introduce practical changes will make the adjustment to stopping driving more straightforward when the time comes. See 'Tips: supporting someone who is no longer driving' for more on this.

When DVLA/DVA decides that the person must stop driving  
If DVLA/DVA decides that the person cannot continue driving, the person must return their driving licence to DVLA/DVA and stop driving. For drivers who wish to appeal, a formal petition must be lodged with the Magistrates' Court within six months in England and Wales, and at a Sheriff's Court within 21 days in Scotland. In Northern Ireland, an appeal must be lodged with the appropriate Clerk of Petty Sessions within three months of the refusal (revocation) letter being issued.

During this time, someone who has appealed against removal of their licence is not allowed to drive, even if they think their appeal is justified.



People react to being told to stop driving in different ways. For some it is a relief but many people feel it as a loss. A few are very angry with the decision – perhaps because they underestimate the impact of dementia on their driving skills. See ‘Tips: supporting someone who is no longer driving’ on helping someone with this change.

### **If the person refuses to stop driving**

Some people who have been assessed by DVLA/DVA as being unsafe still refuse to stop driving. This may be despite their doctor’s advice and people’s attempts to encourage them to stop, and suggesting other alternatives. It can be a very difficult and upsetting situation for both the person and their family.

It is important to recognise that the person is probably not being deliberately difficult. Instead, the dementia itself may mean that the person does not realise how their symptoms affect their driving. In some cases the person may be in denial about their diagnosis, or keep forgetting that their licence has been cancelled.

In such cases the person’s doctor or family should write in confidence to DVLA/DVA. The agency will follow things up with the local police. Many carers choose to hide the car keys or – if these are options – sell the car or park it where it is not a constant visible reminder. If you are supporting a person with dementia who is refusing to stop driving and need help, call Alzheimer’s Society’s National Dementia Helpline on 0300 222 1122 or talk to others on the online discussion forum, Talking Point at [alzheimers.org.uk/talkingpoint](http://alzheimers.org.uk/talkingpoint)

### **Giving up driving**

Many people with dementia choose to stop driving voluntarily because they begin to find it stressful or they lose confidence in their abilities. A person should consider stopping driving if they:

- feel less confident or more irritable on the road
- get lost even on routes they are familiar with

- begin to misjudge speed or distance
- find themselves straying across lanes or hitting kerbs
- get confused if there are roadworks
- have minor scrapes, accidents or near-misses
- find that passengers express concerns about their driving.

It can be easier to accept not driving where the person has made the decision themselves, rather than been told they have to by DVLA/DVA. Stopping will also be easier if it has been discussed before and the change planned for. But a person who feels they should stop driving will still need support and understanding from their carer, friends and family members. They may feel unhappy about stopping driving if they are used to being independent, or if they have always driven their partner or family around. Not being able to drive may well make it harder to visit friends or family or go on day trips. It also makes it more difficult to carry out everyday tasks such as shopping, going to places of worship or visiting the doctor.

If the licence holder decides to give up driving, they need to write to DVLA/DVA to tell them. They can download a 'Declaration of voluntary surrender' form from [www.gov.uk](http://www.gov.uk) or get one by calling DVLA/DVA (see 'Other useful organisations'). The completed form should be posted back with the person's driving licence to the agency.

### **Tips: supporting someone who is no longer driving**

Giving up driving is not always an easy decision to make. Someone with dementia may be very reluctant to stop driving even if DVLA/DVA has concluded that they are not safe to drive. Carers, family members or friends should be on hand to give encouragement if needed. The following suggestions may be useful.

- Try to acknowledge how difficult the decision may be for the person. Driving may have been their main means of transportation for much of their life. Having to stop may lead to feeling a loss of independence or feeling unhappy and it could lower self-esteem. Giving up driving

will also seem especially hard if physical problems make it difficult to use public transport. Cuts in public transport might also make it difficult to get about without a car.

- Encourage the person to take charge of their new transport arrangements, so that they regain a sense of control. They could gather details and timetables of local transport services, for example. Make sure the person is getting all the concessions they are due. Many mobility centres offer an 'aftercare' service of practical local advice for people who have stopped driving.

Point out some alternatives to driving. Examples – other than public transport – include:

- booking a taxi to go to the supermarket once a month. The person could set up an account with a taxi firm they trust and like, and order taxis in advance
- finding out which local voluntary organisations offer community transport services to help the person keep doing things
- asking whether the hospital can help with transport for appointments
- paying bills by direct debit so that they don't need to visit the bank or post office so often
- getting a shoppers' bus to the supermarket and back
- ordering shopping online (if possible) and having it delivered to the house, or being helped to do so.

Highlighting some of the benefits to not driving may also be useful. Things to point out could include:

- no longer having to look for parking spaces or remember routes
- no longer paying for petrol, servicing, road tax and car insurance – freeing up a significant amount more money each month

- no more stress of driving in busy traffic
- the chance to meet people and chat when travelling on public transport
- getting more exercise if they decide to walk instead.

With plenty of support and understanding, a person with dementia can successfully adjust to not driving, and still live a fulfilling life.

## **Other useful organisations**

### **Driver and Vehicle Licensing Agency (DVLA)**

Drivers' medical enquiries  
 DVLA  
 Swansea SA99 1TU

T 0300 790 6806 (8.00am–5.30pm weekdays,  
 8.00am–1.00pm Saturdays)  
 W [www.gov.uk/contact-the-dvla](http://www.gov.uk/contact-the-dvla)

The government agency responsible for maintaining the database of drivers in Great Britain, and a database of vehicles in the UK.

### **Driver & Vehicle Agency (DVA)**

Driver Licensing Enquiries  
 County Hall, Castlerock Road  
 Waterside  
 Coleraine BT51 3TB

T 0300 200 7861 (9.00am–5.00pm weekdays)  
 E [dva@doeni.gov.uk](mailto:dva@doeni.gov.uk)  
 W [http://www.nidirect.gov.uk/index/  
 information-and-services/motoring.htm](http://www.nidirect.gov.uk/index/information-and-services/motoring.htm)

The DVA is responsible for licensing and testing vehicles and drivers in Northern Ireland.

## **Forum of mobility centres**

The directory of mobility centres in the UK.

W [www.mobility-centres.org.uk/find\\_a\\_centre](http://www.mobility-centres.org.uk/find_a_centre)

### **Belfast**

Disability Action  
Portside Business Park  
189 Airport Road  
Belfast BT3 9ED

T 02890 297880

E [mobilitycentre@disabilityaction.org](mailto:mobilitycentre@disabilityaction.org)

W [www.disabilityaction.org](http://www.disabilityaction.org)

Birmingham (incorporating satellite centres at Cannock, Staffordshire and Northampton, and Worcester and Leamington Spa)

### **Regional Driving Assessment Centre**

Unit 11, Network Park  
Duddeston Mill Road  
Birmingham B8 1AU

T 0845 337 1540

E [info@rdac.co.uk](mailto:info@rdac.co.uk)

W [www.rdac.org.uk](http://www.rdac.org.uk)

### **Bodelwyddan (incorporating a satellite centre at Newtown, Powys)**

North Wales Mobility and Driving Assessment Service  
Disability Resources Centre  
Glan Clwyd Hospital  
Bodelwyddan  
Denbighshire LL18 5UJ

T 01745 584858  
E [mobilityinfo@btconnect.com](mailto:mobilityinfo@btconnect.com)  
W [www.wmdas.co.uk](http://www.wmdas.co.uk)

### **Bristol (incorporating a satellite centre at Sparkford, Somerset)**

Mobility Service at Living (dlc)  
The Vassall Centre  
Gill Avenue  
Fishponds  
Bristol BS16 2QQ

T 0117 965 9353  
E [mobserv@drivingandmobility.org](mailto:mobserv@drivingandmobility.org)  
W [www.drivingandmobility.org](http://www.drivingandmobility.org)

### **Cardiff (incorporating a satellite centre at Pembroke Dock)**

South Wales Mobility and Driving Assessment Service  
Rookwood Hospital  
Fairwater Road  
Llandaff  
Cardiff CF5 2YN

T 02920 555130  
E [helen@wddac.co.uk](mailto:helen@wddac.co.uk)  
W [www.wmdas.co.uk](http://www.wmdas.co.uk)

### **Carshalton**

QEF Mobility Services  
1 Metcalfe Avenue  
Carshalton  
Surrey SM5 4AW (if using sat nav use SM5 4NR)

T 020 8770 1151  
E [mobility@qef.org.uk](mailto:mobility@qef.org.uk)  
W [www.qef.org.uk](http://www.qef.org.uk)

## **Derby**

DrivAbility (Derby Regional Mobility Centre)  
Kingsway Hospital  
Kingsway  
Derby DE22 3LZ

T 01332 371929  
E [driving@derbyhospitals.nhs.uk](mailto:driving@derbyhospitals.nhs.uk)  
W [www.derbydrivability.com](http://www.derbydrivability.com)

## **Hull**

c/o Regional Driving Assessment Centre, Birmingham

## **Leeds (incorporating a satellite centre at York)**

William Merritt Disabled Living Centre & Mobility Service  
St Mary's Hospital  
Green Hill Road  
Armley  
Leeds LS12 3QE

T 0113 350 8989  
E [info@wmdlc.org](mailto:info@wmdlc.org)  
W [www.wmdlc.org](http://www.wmdlc.org)

## **Maidstone (incorporating satellite centres at Herne Bay, Kent and Hailsham, East Sussex)**

South East DriveAbility  
The First Floor  
Aylesford Logistics Centre  
Bellingham Way  
Aylesford  
Kent ME20 6XS

T 0300 0134 886

E [kcht.sedriveability@nhs.net](mailto:kcht.sedriveability@nhs.net)

W [www.kentcht.nhs.uk/our-services/south-east-driveability-west-kent/](http://www.kentcht.nhs.uk/our-services/south-east-driveability-west-kent/)

**Newcastle upon Tyne (incorporating a satellite centre at Penrith, Cumbria)**

North East Drive Mobility

Walkergate Park Centre for Neuro-rehabilitation and Neuro-psychiatry

Benfield Road

Newcastle upon Tyne NE6 4QD

T 0191 287 5090

E [northeast.drivemobility@ntw.nhs.uk](mailto:northeast.drivemobility@ntw.nhs.uk)

W [www.ntw.nhs.uk](http://www.ntw.nhs.uk)

**Oxford**

c/o Regional Driving Assessment Centre, Birmingham

**Southampton (incorporating satellite centres at Salisbury, Wilts and Basingstoke)**

Wessex DriveAbility

Leornain House

Kent Road

Portswood

Southampton SO17 2LJ

T 023 8055 4100

E [enquiries@wessexdriveability.org.uk](mailto:enquiries@wessexdriveability.org.uk)

W [www.wessexdriveability.org.uk](http://www.wessexdriveability.org.uk)



## **St Helens**

The North West Driving Assessment Service (formerly Wrightington  
Mobility Centre)

Fleet House

Pye Close

Haydock

St Helens

Lancs WA11 9SJ

T 01942 483713

E [mobilitycentre@bridgewater.nhs.uk](mailto:mobilitycentre@bridgewater.nhs.uk)

## **Thetford (incorporating satellite centres at Colchester, Essex & Spalding, Lincs)**

East Anglian DriveAbility

2 Napier Place

Thetford

Norfolk IP24 3RL

T 01842 753029

E [info@eastangliandriveability.org.uk](mailto:info@eastangliandriveability.org.uk)

W [www.eastangliandriveability.org.uk](http://www.eastangliandriveability.org.uk)

## **Truro (incorporating satellite centres at Exeter, Plymouth and Holsworthy, Devon)**

Cornwall Mobility

North Buildings

Royal Cornwall Hospital

Truro

Cornwall TR1 3LJ

T 01872 254920

E [info@cornwallmobility.co.uk](mailto:info@cornwallmobility.co.uk)

W [www.cornwallmobility.co.uk](http://www.cornwallmobility.co.uk)

**Welwyn Garden City (incorporating a satellite centre at Luton and Dunstable)**

Hertfordshire Action on Disability Mobility Centre  
The Woodside Centre  
The Commons  
Welwyn Garden City  
Hertfordshire AL7 4DD

T 01707 324581  
E [driving@hadnet.org.uk](mailto:driving@hadnet.org.uk)  
W [www.hadnet.org.uk](http://www.hadnet.org.uk)

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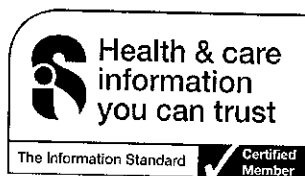
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This factsheet has also been reviewed  
by people affected by dementia.  
A list of sources is available on  
request.



Alzheimer's Society National  
Dementia Helpline

England, Wales and Northern Ireland:  
**0300 222 11 22**

9am–8pm Monday–Wednesday  
9am–5pm Thursday–Friday  
10am–4pm Saturday–Sunday

**alzheimers.org.uk**

Alzheimer's Society is the UK's  
leading support and research charity  
for people with dementia, their  
families and carers.

**Alzheimer's  
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Leading the  
fight against  
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