

CIVIC GOVERNMENT (SCOTLAND) ACT 1982**TAXI DRIVER/PRIVATE HIRE CAR DRIVER MEDICALS AND DELEGATION FOR
SUSPENSION OF LICENCE**

1. INTRODUCTION

- 1.1 This report relates to the requirement for medicals for taxi/private hire car drivers in terms of the Civic Government (Scotland) Act 1982.

2. RECOMMENDATIONS

- 2.1 This report invites the Committee to agree to consult private hire/taxi drivers and operators by writing to them seeking their views on the proposed amended procedure for taxi/private hire car driver medicals.
- 2.2 That the Committee agree to recommend to the Council that a delegation be given to the Executive Director with responsibility for Legal and Regulatory Support in consultation with the Chair and Vice Chair of the Committee to immediately suspend a licence in terms of paragraph 12(1) of Schedule 1 of the Civic Government (Scotland) Act 1982 if they determine that the circumstances of the case justify immediate suspension, on the grounds of undue public nuisance or a threat to public order or public safety.

3. BACKGROUND

- 3.1 In terms of section 13(4) of the Civic Government (Scotland Act) 1982 a licensing authority may, at any time, for the purposes of satisfying themselves that he is physically fit to drive a taxi or, as the case may be, private hire car, require an applicant for or holder of a taxi driver's licence or private hire car driver's licence to submit to medical examination, at their expense, by a medical practitioner nominated by them.
- 3.2 Originally when the Act came into force Group 1 driving licence standards were applied and those drivers who required medicals obtained written confirmation of their fitness to drive from their GP and submitted this with their application.
- 3.3. In April 2016 the DVLA issued guidance to Licensing Authorities which recommended that taxi drivers and private hire car drivers should be medically assessed to a Group 2 driving licence standard as required for lorry and bus drivers. In November 2016 the Scottish Government wrote to the Conveners of all Licensing Authorities in Scotland specifically directing them to the updated guidance issued by DVLA. The Scottish Government Best Practice Guidance was amended to recommend Group 2 Standards should apply and this was adopted by the Council.
- 3.4 Currently applicants aged 65 years and over who are making an application for a taxi/private hire driver's licence will be required to submit a medical certificate in form D4. This certificate is obtained by the applicant from their GP and any charge levied met by the applicant. Group 2 standards of the medical aspects of fitness to drive booklet applied by DVLA in relation to bus and lorry drivers are applied to taxi drivers in Argyll and Bute.

Applicants requiring insulin treatment for diabetes need to provide evidence supporting C1 medical standards. Should an applicant reach their 65th birthday during the period of the licence, a medical certificate will also require to be produced at that time at a cost to the licence holder.

Initially, GP's were prepared to confirm whether or not the Applicant met the required standards. However, over time they have advised that they are not prepared to confirm this, stating that this is a decision for the DVLA. However the DVLA do not determine the outcome of this process, rather Council's administering the process require to ensure that the medical is determined in accordance with the requirements to a Group 2 driving licence standard.

3.5 This has resulted in the D4 forms used for Group 2 licences being completed by the GP without any recommendation as to fitness to drive.

4. CONSIDERATION

4.1 Consideration has been given to a more robust process and it has been ascertained that a private company are prepared to assess drivers and advise on their fitness to drive.

4.2 This would require applicants to attend an appointment at a central location rather than attend their GP as at present. The locations would be in Glasgow, Oban, Helensburgh, Campbeltown and Dunoon.

4.3 Currently applicants pay GP's £125 for the completed D4 Form. The fee for a medical in terms of the new process would be in region of £50. This would be met by the Council.

4.4 Currently approximately 10 to 15 medicals are required in any year.

4.5 Consultation as part of the Equality and Socia-economic Impact assessment will require to be carried out with taxi/private hire drivers and operators on the proposed new arrangements and a further report placed before members once this consultation has been completed. It is recommended that this consultation take place by writing to them asking their views on the proposal. The period for response will be 1 month. A copy of the Equality and Socia-economic Impact assessment is attached to this report as Appendix 1. It will be updated following the consultation.

4.6 As a consequence of considering the position regarding medicals it is currently noted that within the Council's Scheme of Delegation there is no delegation to the Executive Director with responsibility for Legal and Regulatory Support to consider the immediate suspension of a licence. This is competent in terms of paragraph 12(1) of Schedule 1 of the Act if a licensing authority determine that the circumstances of the case justify immediate suspension. This can be on grounds of undue public nuisance or a threat to public order or public safety; it is recommended that members recommend to the Council that this delegation be made as this would allow a licence to be suspended immediately if for example a driver did not meet the Group 2 standard.

5. CONCLUSION

5.1 A further report will be placed before members following the consultation. Should the Committee agree that the new procedure should be adopted then it will be implemented from 1st July 2022.

5.2 That the Committee agree to recommend to the Council that a delegation be given to the Executive Director with responsibility for Legal and Regulatory Support in consultation with the Chair and Vice Chair of the Committee to immediately suspend a licence in terms

of paragraph 12(1) of Schedule 1 of the Act if they determine that the circumstances of the case justify immediate suspension, on the grounds of undue public nuisance or a threat to public order or public safety

6. IMPLICATIONS

- 6.1 **Policy:** If the recommendations of this report are approved, a number of policies will be developed in relation to medicals for taxi/private hire drivers
- 6.2 **Financial:** None
- 6.3 **Legal:** The recommendations made in this report have taken due consideration of the Council's statutory role, duties and powers under the Civic Government (Scotland) Act 1982.
- 6.4 **HR:** None
- 6.5 **Fairer Scotland Duty:**
- 6.5.1 Equalities - protected characteristics: An Equisa has been completed and will be updated following the results of the consultation with drivers and operators of taxi and private hire cars
 - 6.5.2 Socio-economic Duty:
 - 6.5.3 Islands: impact on drivers in rural /island areas as would require to attend central location rather than their local GP.
- 6.6 **Climate Change:** None
- 6.7 **Risk:** None
- 6.8 **Customer Service:**

DOUGLAS HENDRY

Executive Director with Responsibility for Legal and Regulatory Support

Policy Lead: Councillor David Kinniburgh – Planning and Regulatory Services

DATE 23-02-2022

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Appendix 1 – Argyll and Bute Council: Equality and Socio-Economic Impact Assessment

APPENDIX 1

Argyll and Bute Council: Equality and Socio-Economic Impact Assessment

Section 1: About the proposal

Title of Proposal
Taxi /private hire car driver medicals

Intended outcome of proposal
To have more robust policy for medicals

Description of proposal
To have medicals for taxi/private hire drivers carried out by a private company rather than by their GP's

Business Outcome(s) / Corporate Outcome(s) to which the proposal contributes

Lead officer details:	
Name of lead officer	Sheila MacFadyen
Job title	Senior Solicitor
Department	Customer Services
Appropriate officer details:	
Name of appropriate officer	DAVID LOGAN
Job title	Head of Legal and Regulatory Support
Department	Customer Services
Sign off of EqSEIA	
Date of sign off	01/03/2022

Who will deliver the proposal?
Legal services licensing team

Section 2: Evidence used in the course of carrying out EqSEIA

Consultation / engagement
Consultation will take place with current licence holders before proceeding with the proposal

Data

Other information

Gaps in evidence

Section 3: Impact of proposal

Impact on service users:

	Negative	No impact	Positive	Don't know
Protected characteristics:				
Age				
Disability				
Ethnicity		x		
Sex		x		
Gender reassignment		x		
Marriage and Civil Partnership		x		
Pregnancy and Maternity		x		
Religion		x		
Sexual Orientation		x		
Fairer Scotland Duty:				
Mainland rural population		x		
Island populations		x		
Low income		x		
Low wealth		x		
Material deprivation		x		
Area deprivation		x		
Socio-economic background		x		
Communities of place		x		
Communities of interest		x		

If you have identified any impacts on service users, explain what these will be.

If any 'don't know's have been identified, at what point will impacts on these groups become identifiable?

Impact on service deliverers (including employees, volunteers etc):

	Negative	No impact	Positive	Don't know
Protected characteristics:				
Age		X		
Disability		X		
Ethnicity		X		
Sex		X		
Gender reassignment		X		
Marriage and Civil Partnership		X		
Pregnancy and Maternity		X		

	Negative	No impact	Positive	Don't know
Religion		X		
Sexual Orientation		X		
Fairer Scotland Duty:				
Mainland rural population	X			
Island populations	X			
Low income		X		
Low wealth		X		
Material deprivation		X		
Area deprivation		X		
Socio-economic background		X		
Communities of place		X		
Communities of interest		X		

If you have identified any impacts on service deliverers, explain what these will be.
 Taxi drivers/private hire car drivers will have to attend appointment at mainland central locations which will be more expensive for them rather than attending their own GP. However, they will not have to pay for the medical which will be cost saving.

If any 'don't know's have been identified, at what point will impacts on these groups become identifiable?

How has 'due regard' been given to any negative impacts that have been identified?
 The specialist provider is not able to provide the service in remote locations and in any event, it considered that if a specialist provider were able to do so, to carry out medicals in every location would be prohibitively expensive.

Section 4: Interdependencies

Is this proposal likely to have any knock-on effects for any other activities carried out by or on behalf of the council?	NO
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Details of knock-on effects identified

Section 5: Monitoring and review

How will you monitor and evaluate the equality impacts of your proposal?
 Will monitor on annual basis whether medicals being done and whether any reduction in taxi /private hire drivers as result of new policy