

**WRITTEN QUESTION TO THE MINISTER FOR INFRASTRUCTURE
BY THE CONNÉTABLE OF ST. MARTIN
QUESTION SUBMITTED ON MONDAY 29th MARCH 2021
ANSWER TO BE TABLED ON WEDNESDAY 7th APRIL 2021**

Question

Further to his Ministerial Decision dated 11th January 2019 (Reference MD-T-2019-0002) in relation to an amendment to the Road Traffic (Jersey) Law 1956 and Motor Vehicles (Driving Licences) (Jersey) Order 2003, will the Minister advise whether -

- (a) reference made to adopting the same medical standards that are in place in the United Kingdom in relation to diabetes mellitus, refers to the document INF 294 - A guide to insulin treated diabetes and driving, issued by the DVLA (Driver and Vehicle Licensing Agency) as revised in September 2019;
- (b) INF 294 is to be considered advisory in nature and not enforceable under the Road Traffic (Jersey) Law 1956 as amended; and
- (c) insulin dependent drivers of Group 1 vehicles, can select either one of the following to test their ability to drive (i) a Flash Glucose Monitor, FGM) (ii) Continuous Glucose Monitor (CGM) or (c) a finger prick glucose check; and, if not, why not?

Answer

The detail contained within the Draft amendment to the Motor Vehicles (Driving Licences) (Jersey) Order 2003, mirrors the wording within The Motor Vehicles (Driving Licences) Regulations 1999 (as amended) in that, when referring to Diabetes Mellitus reference is made to a licence holders “awareness of Hypoglycaemia.”

The detail within the guidance material INF 294 produced by the DVLA gives the public information that is contained within the main guidance document “Assessing Fitness to Drive a Guide for Medical Professionals”.

The control of Diabetes Mellitus by means of treatments requiring Insulin is covered in the draft Order under the new Article 30 (5) which reads as follows:

“(4) The prescribed requirements are that –

(a) the applicant provides a signed declaration that he or she –

- (i) undertakes to monitor regularly his or her condition and, in particular, to monitor his or her blood glucose at least twice daily and at times relevant to driving,*
- (ii) understands the risk of hypoglycaemia,*
- (iii) undertakes to comply with any directions regarding treatment for diabetes as may be given by the registered medical practitioner overseeing the treatment or a person working under the supervision of that registered medical practitioner, and*
- (iv) undertakes to follow the advice of his or her registered medical practitioner, or a person working under the supervision of that registered medical practitioner, concerning fitness to drive; and*

(b) the parochial authority is satisfied that the driving of a vehicle by the applicant in accordance with the licence is not likely to be a source of danger to the public.”

It is intentional that the legislation does not specifically mention the methods of monitoring an individual's blood glucose level as the methods of treating and monitoring this particular condition are constantly evolving. The detail around this is covered in the guidance material and this being subject to regular review and amendment is better placed than the specific detail being placed in the legislation.

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