





Driving and dementia

This webinar will start shortly.





An Australian Government Initiative



Driving and dementia

Zoom webinar – Monday 23 September – 6.30pm to 7.30pm



Acknowledgement of traditional owners

We acknowledge the Tasmanian Aboriginal people as the traditional owners and ongoing custodians of the land on which we are meeting today. We pay our respects to Elders past and present.

We would also like to acknowledge Aboriginal people who are joining us today.

Learning outcomes

After this session, I will be able to:

- Recall frameworks helpful in assessing and caring for people living with cognitive impairment and dementia
- Explain the impact that dementia can have on a person's driving ability
- Apply national driving guidelines when assessing a person's ability to drive.

Some housekeeping

- Tonight's webinar is being recorded
- Please use the Zoom Q&A feature to ask questions
- At the end of the webinar your browser will automatically open an evaluation survey. We appreciate you taking the time to complete this to help us improve our events programme
- Please don't forget to register for your next webinar at: <u>https://www.primaryhealthtas.com.au/for-health-professionals/events/</u>

Presenter(s)

- Dr. Karen Savery GP, Dementia Training Australia
- Dr. Stephanie Daly GP, Dementia Training Australia

Driving and Dementia

Presented by: Dr Stephanie Daly Dr Karen Savery

Dementia Training Australia is supported by funding from the Australian Government under the Dementia Training Program.

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DTA would like to show our respect and acknowledge the traditional custodians of these lands. We extend this respect to elders' past, present and emerging, and to all Aboriginal and Torres Strait Islander peoples. We also pay respect to Aboriginal and Torres Strait Islander peoples living with dementia and their carers.



Housekeeping

As a courtesy to presenters and fellow colleagues, please be in your seats before each session begins



Please switch mobile phones off

or <u>silent</u>



Session presentations will be available on

your Attendee Hub on Monday



Learning Outcomes

By the end of this session, participants will be able to:

- 1. Recall frameworks helpful in assessing and caring for people living with cognitive impairment and dementia
- 2. Explain the impact that dementia can have on a person's driving ability
- 3. Apply national driving guidelines when assessing a person's ability to drive



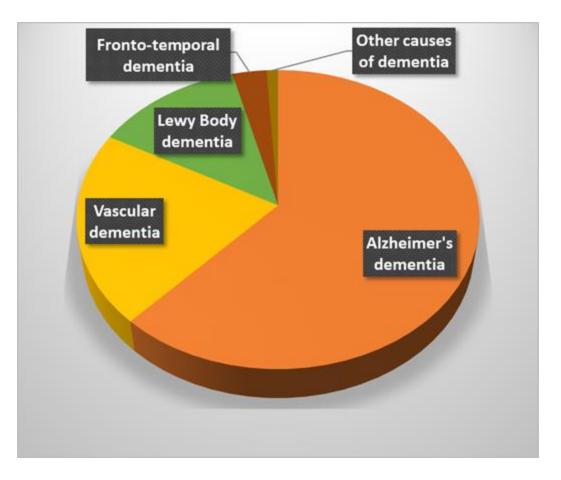
Defining Dementia

Dementia is a progressive, global, life-limiting condition that involves generalised brain degeneration which affects people in different ways and has many different forms.





Dementia is a term used to describe a group of conditions characterized by gradual impairment of brain function



Others include:

Alcohol Parkinson's CJD Huntington's Supranuclear palsy HIV



Inclusion Criteria

A new diagnosis of dementia requires all the Inclusion Criteria to be present

1. Gradual onset of decline in cognition (It comes on slowly)

2. Progression of decline in cognition (It is getting worse)

3. Interference with daily living (It affects functioning)

4. Absence of any Exclusion Criteria (It can't be explained by other causes)



Adapted from DSM V - Major neurocognitive disorder

Exclusion Criteria

A new diagnosis of dementia cannot be made until any identified Exclusion Criteria have been treated as well as possible, and the person is reassessed for the Inclusion Criteria

1. Delirium

2. Alcohol and other drugs

3. Mental health disorders

4. Other organic disorders



Domains of Dementia

- 1. Cognitive decline
- 2. Functional decline
- 3. Psychiatric symptoms
- 4. Behaviour changes
- 5. Physical decline



V-REALMS of Cognition

- Visuospatial
- Recall/Memory
- Executive function
- Attention
- Language dysphasia, agnosia
- Motor function dyspraxia
- Social





Domains of Dementia

- 1. Cognitive decline
- 2. Functional decline
- 3. Psychiatric symptoms

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- 4. Behaviour changes
- 5. Physical decline

Function





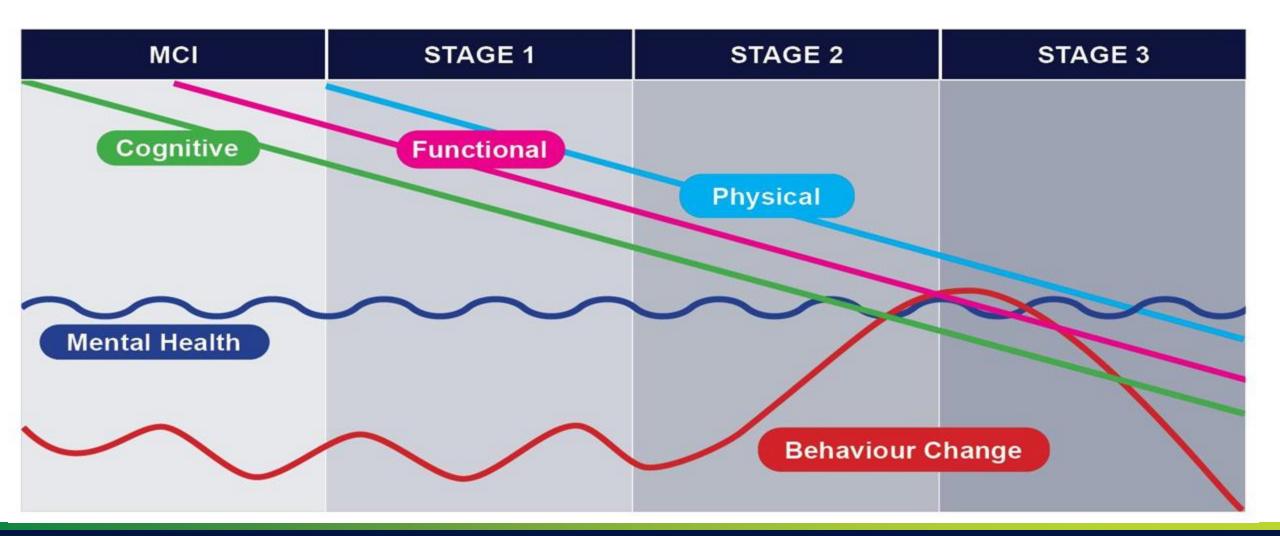
Domains of Dementia

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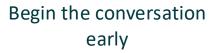
Trajectory of Alzheimer's Dementia





Driving and Dementia – Take Home Messages





Take history from person being assessed as well as collateral history if possible

Using more than 1 cognitive assessment tool can be helpful BUT cognitive assessment tools alone cannot determine fitness to drive

Reassess driving capacity in people with dementia more frequently (3-6 monthly)

When in doubt, get help!



Clinical Challenge 1: Driving and Dementia





Anna

Anna is a 77 year old retired secretary. You have just diagnosed her with Stage 1 Alzheimer's dementia with support from a local geriatrician. Her MMSE was 22/30 and clock drawing had incorrect positioning of numbers and hands.

Her bloods and CT scan were all normal

Her Geriatric Depression Scale was normal

She is otherwise in good physical and mental health.

Her only current medications are Perindopril for controlled hypertension and occasional paracetamol.







Anna

Anna lives alone but receives great support from her daughter Sophie who lives nearby.

Anna tells you that the last time she went to drive to her daughter's house it was raining and she got a bit confused over which instrument was the wiper and which was the indicator and this actually frightened her a bit so now she is only driving locally, to the doctor and to do her shopping.

She has had no crashes, but she has got some scrapes on her car from getting in and out of her carport.

She says although she doesn't drive much, she would be lost without her car.





What Do You Do Now In Terms of Anna's Driving Licence?

- A. Contact licencing authority to cancel Anna's licence
- B. Advise Anna that she needs to hand in her licence
- C. Advise Anna that she needs to go on a conditional licence
- D. Send her for driving test with licencing authority
- E. Send her for OT driving assessment
- F. Send her to geriatrician to make assessment of her driving assessment



Austroads – Private Licence Standards

A person is **not** fit to hold an unconditional licence:

• if the person has a diagnosis of dementia*.

A **conditional** licence may be considered by the driver licensing authority subject to **at least annual** review, taking into account:

- the nature of the driving task; and
- information provided by the treating doctor regarding the level of impairment of any of the following: visuospatial perception, insight, judgement, attention, comprehension, reaction time or memory and the likely impact on driving ability; and
- the results of a practical driver assessment if required

The opinion of an appropriate specialist may also be considered.





Austroads – Commercial Licence Standards

A person is **not** fit to hold an unconditional licence:

• if the person has a diagnosis of dementia.

A **conditional** licence may be considered by the driver licensing authority subject to **at least annual** review, taking into account:

- the nature of the driving task; and
- information provided by an appropriate specialist regarding the level of impairment of any of the following: visuospatial perception, insight, judgement, attention, comprehension, reaction time or memory and the likely impact on driving ability; and
- the results of a practical driver assessment





Austroads 2022 - https://austroads.com.au/publications/assessing-fitness-to-drive/ap-g56/neurological-conditions/dementia

Impact of Dementia on Driving Recall the REALMS of Cognition!

- •Recall/Memory
- •Executive function
- •Attention
- •Language dysphasia, agnosia
- •Motor function dyspraxia
- •Social
- •Visual **S**patial





Impact of Dementia on Driving

- Errors with navigation
- Limited concentration or 'gaps' in attention
- Errors in judgement
- Confusion when making choices
- Poor decision making or problem solving
- Slowed reaction time
- Poor hand-eye coordination





Anna returns with "Conditional Licence" form for you to complete. What can you do to further assess Anna's driving capacity?



Anna returns with "Conditional Licence" form for you to complete. What can you do to further assess Anna's driving capacity?

- History of crashes or near crashes, getting lost
- Family concerns about Anna's driving ability
- Review activities of daily living/functional capacity in other areas of life
- Inability to perform 1 basic or 2 instrumental activities of daily living

The SHAFT and DEATH mner	emonics for the instrumental a	and basic activities of daily living
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INSTRUMENTAL ACTIVITIES OF DAILY LIVING	BASIC ACTIVITIES OF DAILY LIVING
Shopping and social functioning	Dressing
Housework and hobbies	Eating
Accounting (banking, bills, taxes, handling cash)	Ambulation
Food preparation	Toileting
Telephone, tools, and transportation	Hygiene
Medication management	

Adapted from Molnar et al.10



Anna returns with "Conditional Licence" form for you to complete. What can you do to further assess Anna's driving capacity?

- Physical exam vision, hearing, neck movements, co-ordination
- Cognitive assessment tools which assess:
- Processing speed
- Task switching
- Visuospacial function
- Executive function



Anna returns with "Conditional Licence" form for you to complete. Which of the following Cognitive Assessment Tools are <u>least</u> helpful in assessing Anna's driving capacity?

A. MMSE

- B. Clock drawing
- C. Trail Making B
- D. Intersecting pentagons
- E. Maze test

POLL – MULTIPLE CHOICE – CORRECT ANSWER IS (A) DELETE THIS TEXT BOX ONCE TODD HAS FINALISED HOW TO RUN POLL



Cognitive Assessment Tools And Driving

Helpful assessment tools

• Trails B (from the MOCA)

Visuospatial, attention and executive function

Maze test

Visuospatial, attention and executive function

• Clock drawing test

Visuospatial and executive function

Intersecting pentagons in MMSE or intersecting cubes
Visuospatial function

MMSE alone is not a good predictor of driving ability

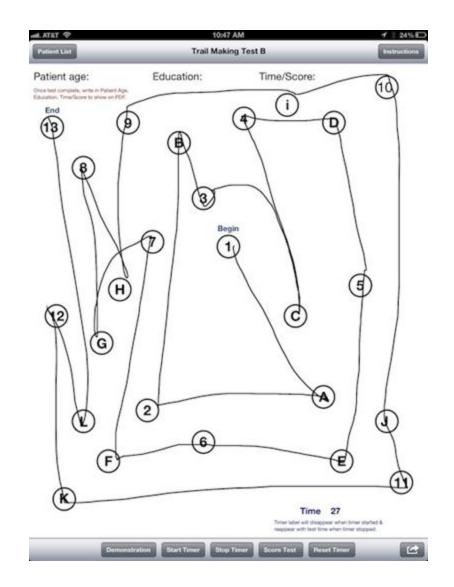
Trail Making B

Assesses multiple domains required for driving

- processing speed
- visuospatial functioning
- executive function

Scoring

Probably safe:	< 2 minutes and < 2 errors
Uncertain:	2-3 minutes or 2 errors
Probably unsafe:	> 3 minutes or >= 3 errors



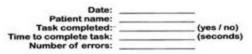


Snellgrove Maze Test

Assesses

- Attention
- Visuo-constructional ability
- Executive functions of planning and foresight



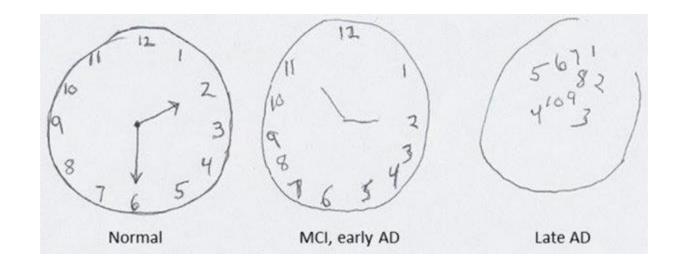


© 2006 Dr. Carol Snellgrove



Clock Drawing Test

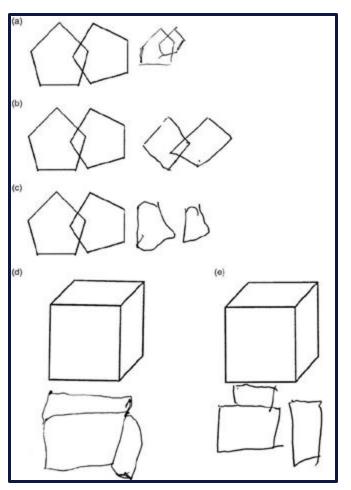
- Assesses multiple domains
- Visual memory
- Visuo-spatial abilities
- Orientation, conceptualization of time
- Executive function





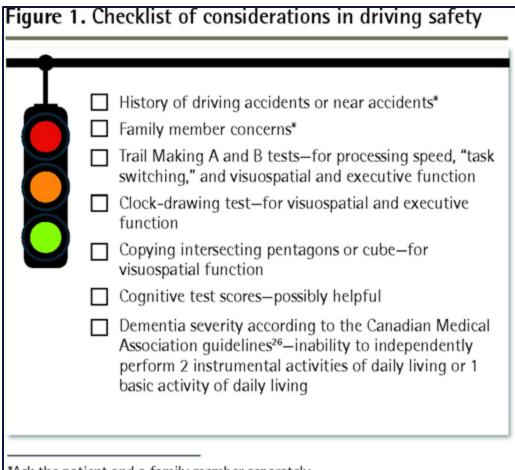
Intersecting Pentagons or Cube copying

- Assesses
- Attention
- Visuospacial function





Summary of GP Assessment of Driving Capacity



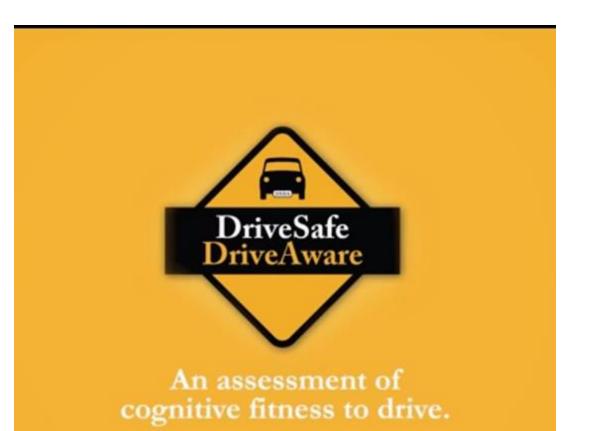
*Ask the patient and a family member separately.



OT Driving Assessment

- Gold standard for assessment of driving capacity
- Off-road assessment initially
- Only proceeds to on-road test if safe Rehabilitation opportunity
- Vehicle modifications
- Learn safer driving skills (if still has capacity to learn)

Barriers are cost and access





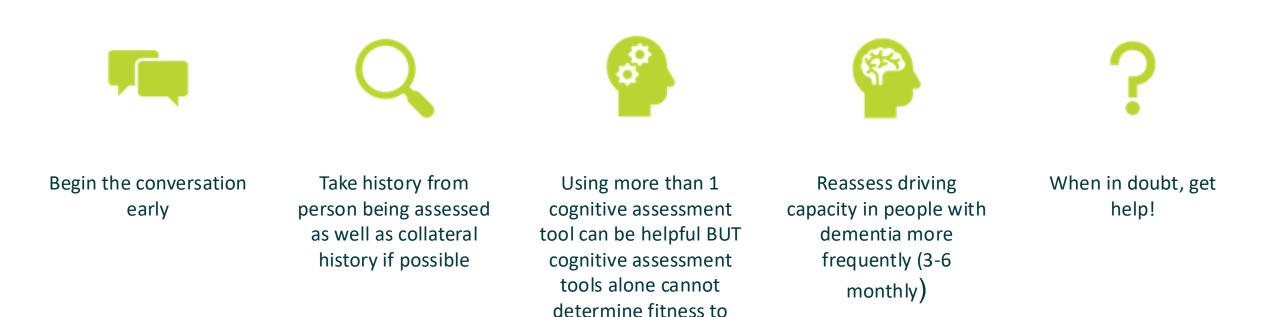
Planning For Driving Retirement

- Begin the conversation early
- Include family and care-partners
- Consider alternatives to driving
- Public transport
- Community transport
- Taxi subsidy schemes





Driving And Dementia – Take Home Messages



drive



Check This Out!

GP Dementia Resource Hub Easy Access to Dementia Courses, Resources and Links



Visit https://dta.com.au/general-practitioners/

Dementia in Practice Podcast Selection of Episodes

- Driving and dementia Who's in the driver's seat?
- Sleep Matters
- Dementia at the end of life A person-centred approach
- A carer's story: When dementia comes home







Thank you!



Dementia training for Australia's workforce

To find out more visit dta.com.au

Dementia Training Australia is supported by funding from the Australian Government under the Dementia Training Program.

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Tasmanian HealthPathways is a web-based information portal developed by Primary Health Tasmania. It is designed to help primary care clinicians plan local patient care through primary, community and secondary healthcare systems.



For access to the Tasmanian HealthPathways, please email:

healthpathways@primaryhealthtas.com.au

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😑 💥 Tasmania Q Search HealthPathway NFW - 18 June ADHD discussion with Prof. David Coghill PRIMARY HEALTH TASM 1 Older Adults Health / Cognitive Impairment and Dementia / Driver Assessment for Older Adults ADHD Medications for Adults HealthPathways + . < Share 6 Driver Assessment for Older Adults RACGP RED BOOK Undated - 11 June Gout Latest News Tasmania FINDHELPTAS This pathway is about driver assessment of older and disabled patients with physical and/or cognitive impairment. See also ABOUT THIS PAGE Updated - 31 May cupational Therapy Driver Assessment Home Hereditary Haemochromatosis and Raised Ferritin # Real Time Prescription Monitoring (RTPM) system COVID-19 Sources MBS ONLINE About HealthPathways Background Updated - 31 May Several pathways refer to prescribing high-risk monitored Page information ADHD in Children and Young People **M** NPS MEDICINEWISE Aboriginal and Torres Strait Islander medicines. From 1 May 2024, the RTPM system TasScript About driver assessment for older adults > replaces DORA. It is mandatory for prescribers to take all Health Topic ID: 107175 reasonable steps to check TasScript before prescribing. Read Updated - 24 May Acute Services PBS COVID-19 Vaccination Allied Health and Nursing Assessment VIEW MORE UPDATES. Child Health TASMANIAN HEALTH D 1. Review information about driving assessment, and health and medical implications for approving a licence. Document the End-of-Life Care discussion with the patient nvestigation Consider medical conditions v that can affect a person's ability to drive Legal and Ethical Consider state-based requirements for review. In Tasmania, if a patient develops a medical condition, they are required to have a medical review. They do not require a medical review due to age e.g., aged > 75 years. Lifestyle and Preventive Car Consider presence of cognitive impairment and dementia Medical · If a patient has any degree of cognitive impairment, raise the issue of driving as early as possible Mental Health and Addiction ◦ If even mild dementia is suspected, perform a Trail B test ☑. More than 3 minutes to complete or more than 3 errors Older Adults Health suggests inability to drive safely Before Entering a Residential Aged See Austroads – Assessment Process 12 (flow chart) Care Home (RACH) 2 Assess fitness to drive ¥ Complex Long-term Disorders 3. Consider a formal occupational therapy driving assessment if the patient's ability is unclear or disputed Comprehensive Medical Assessment (CMA) for RACHs Carer Stress and Wellbeing Management Cognitive Impairment and Dementia Practice point Behavioural and Psychological Symptoms of Dementia (BPSD) Check if eligible for unconditional licence Medications for Dementia Patients with dementia are not allowed to hold an unconditional driver's licence. They may hold a conditional licence subject to certain criteria being met. Patients with any medical condition, including dementia, which may affect their driving have a legal 🧧 END FEEDBACK Driver Assessment for Older Adults responsibility to notify the Registrar of Motor Vehicles.



For access to the Tasmanian HealthPathways, please email:

healthpathways@primaryhealthtas.com.au

Some final words

- After this webinar end, your browser will open a link to an evaluation survey.
- Statements of attendance will be emailed to participants.
- For event queries, please contact events@primaryhealthtas.com.au

Thank you

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