THE IMPAIRED OLDER DRIVER – WHEN AND HOW TO INTERVENE

When is it no longer safe for an older person who has physical or memory problems to drive? It often depends on the type of illness or disability, the severity of symptoms and the willingness of the person to modify driving habits to compensate. Family members should be concerned when they observe the older driver doing any of the following:

* Getting lost in familiar areas
* Ignoring traffic signs and signals
* Misjudging distances (making wide turns, running over curbs, straddling lanes, etc.)
* Using poor judgment (not yielding right-of-way, etc.)
* Reacting dangerously slow to driving emergencies
* Becoming easily angered or agitated

If family members observe any of these signs, they should have the person's driving skills professionally evaluated, or take steps themselves to stop the person from driving. Ignoring the problem will not make it go away. The impaired driver is a menace to himself and to everyone else on the road. Should an impaired driver cause a serious accident, family members who were aware of the risks but chose not to intervene, will likely experience tremendous guilt, and could potentially face legal action themselves.

Still, it is very difficult for most families to challenge an older relative who is driving unsafely, and they may rationalize in many ways to avoid taking on such a responsibility. Do any of the following thoughts sound familiar?

"The police will probably stop Dad and take away his license."

Surprisingly, this very rarely happens. Even if a driver is ticketed for careless driving or for an accident, the license is usually not confiscated unless a "breath-a-lizer" test shows him/her to be intoxicated. Nor do the police automatically notify the Department of Motor Vehicles about a possibly unsafe driver.

"Mom has to renew her license in 6 months. She’ll probably flunk the test and her license will be suspended."

Wrong again. Unless someone has notified the Department of Motor Vehicles in advance of concerns about Mom's driving, Mom will only be required to pass a vision test to renew her license. Even when a written test is given, one may fail and then repeat the test multiple times. Some examiners will even read questions to persons who seem confused by written questions. Even with these "warning flags" examiners will often not test a person's actual driving skills in the car. Unless the person carries a restricted license, he/she will not be routinely tested again for five years (in Nebraska).

"Grandpa can just increase his auto liability insurance to cover any accidents."

This takes for granted that any accident(s) will be minor and cause no bodily injury. Sadly, that is not always the case. Insurance companies are increasingly reluctant to write big policies for older drivers, and may be quick to cancel an older driver's policy, particularly if there is a history of accidents. Injured parties may file civil suits against the older driver for an amount in excess of his insurance coverage, thereby tying up his assets (and the family inheritance) for many years. It is conceivable that a suit could be filed against family members who knowingly allow an impaired person to drive.
"Mom lives in a small town (or in the country). She only drives to and from the store. There's not much traffic and other drivers watch out for her."

Statistically, most auto accidents occur within a mile of a person's home. Suppose Mom drives through a crosswalk striking pedestrians? Suppose she makes a wrong turn or encounters a detour, then gets lost and drives out into the country? The media frequently reports stories of confused older drivers who disappear and turn up hundreds of miles from home. Occasionally, lost older drivers are the subject of intensive search efforts, only to be found dead in an isolated area months later.

"It would just kill Dad if he couldn't drive."

Most of us begin to self-limit our driving as we age. We avoid driving at night or in bad weather. We drive less often and stay closer to familiar surroundings. While it can be very upsetting for an older person to give up driving completely, they will adjust - just as they have adjusted to previous challenges in their life. But a serious accident would kill Dad (and perhaps other innocent people) more surely than would giving up the car.

Counseling may be helpful to overcome the grief one feels at giving up driving. The loss of driving privileges can be compensated for to some degree by transportation from family, friends and neighbors, church and community volunteers, taxi cabs and other transportation programs. More and more, service providers are willing to come to a person's home to conduct business, and most essentials such as groceries and prescription medicines can be delivered.

WHEN AND HOW SHOULD A FAMILY INTERVENE?

First, determine if there is truly a problem with the older person's driving skills. You or another family member should ride with the older driver at least once every few months to monitor how well or poorly he/she drives. It's too easy to assume the person drives safely just because they haven't had an accident. After completing each ride-along, you should ask yourself whether you would feel comfortable riding with the older person again. Then, ask yourself a truly tough question, "Would I permit my child - or my grandchild - to ride with this person?" If the answer is no, the time to intervene has arrived.

WHAT STRATEGIES AND RESOURCES CAN THE FAMILY USE TO HELP THEM ADDRESS THE PROBLEM OF AN IMPAIRED OLDER DRIVER?

A starting point should be for the older person to undergo a complete physical exam to determine if there are physical problems which impact driving safety. (Be sure to discuss family concerns about driving with the doctor in advance so that he/she will know why the exam is being requested). Vision and hearing deficits, arthritis in the neck or spine that makes turning the head difficult, and medications that affect alertness are just a few of many problems that may be improved or eliminated with medical intervention. The doctor can also be prepared to address the issue of driving directly with the person at the end of the examination. A firm verbal directive from a medical or eye physician, accompanied by a written prescription to stop driving will often be accepted.
When a "second opinion" is desired to test driving abilities, the following programs in Nebraska provide a comprehensive evaluation of one's driving skills:

* The Immanuel Medical Center Driver Assessment Program  
  6901 N. 72 St., Omaha  
  Phone (402) 572-2275

* Creighton University Medical Center Driver Assessment Program  
  601 N. 30 St., Omaha  
  Phone (402) 449-4248

* The Madonna Care Center Driver Training Program  
  2200 S. 52 St., Lincoln  
  Phone (402) 483-9534

* Regional West Medical Center, Department of Occupational Therapy  
  4021 Avenue “B”, Scottsbluff  
  Phone (308) 630-1355

These programs test vision, reflexes, judgment and knowledge, and observe actual driving skills. They provide refresher training, access to adaptive equipment for the car, and will counsel the person to restrict or stop driving if necessary.

What if the older person insists upon driving against medical advice, or refuses to undergo a formal driving evaluation? This response is common in persons whose perceptions and judgment are clouded by memory loss or an emotional disorder. In this situation, the family must pursue the issue in a more direct way.

In Nebraska, a letter may be sent by any concerned citizen (family member, physician, etc.) to the State Department of Motor Vehicles. This letter must be signed, and should include specific concerns about the person's driving skills. The name of the person submitting this letter is kept confidential, if so requested. This letter should be sent to:

Nebraska Department of Motor Vehicles  
Attn: Examining Division  
P.O. Box 94789  
Lincoln, Nebraska  68509

Upon receipt of this letter, the DMV will notify the driver by certified letter to report to a state driver testing station to take vision, written and driving examinations. This letter also includes forms that must be completed by a physician with the results of a physical evaluation. If the person fails any of these examinations, or he/she fails to submit to testing within 25 days of receipt of the certified letter, his/her license will be revoked.

In Iowa, a physician must write to the Iowa Department of Transportation documenting medical reasons why the person may be an impaired driver. The person is then notified in writing by IDOT that he/she has 30 days to obtain a physician’s clearance to drive, and then pass both written and driving tests, or their driver’s license will be suspended. This letter should be sent to:

Iowa Department of Transportation  
Office of Drivers Services  
P.O. Box 9204  
Des Moines, IA  50306-9204

If the impaired driver has previously executed a Durable Power of Attorney document, giving a family member the power to manage his/her finances and property in the event of incapacity, that family member should pursue activating the power of attorney. A written statement by the impaired driver's physician that documents diminished physical, mental or cognitive capacity is
required to activate the Durable Power of Attorney. Once it is activated, the family member can legally dispose of the vehicle.

If the car must remain available for use by another member of the household, steps should be taken to secure all sets of car keys. If necessary, the car can be temporarily disabled or parked somewhere out of sight when not in use.

Whatever strategy the family ultimately chooses, they should first discuss their concerns directly with the older driver. The approach should be firm, yet with reassurance of the family’s continued love and support. It should also include a workable plan to meet the person's transportation needs.

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