

Injury Prevention Section Older Driver Safety Physician Survey Results

As part of a new public health initiative to assess the potential for environmental, educational, and policy changes that support safe mobility for older drivers, the Injury Prevention Section (IPS), Division of Public Health and the Governor's Office of Highway Safety (GOHS), are interested in evaluating the role physicians play in addressing older driver safety in Georgia. Current research suggests a physician's influence can potentially impact an older patient's decision to modify or retire from driving. In fact, recent IPS focus groups with older adults distinguished physicians as viable intermediaries to identify competencies, conduct tests, and revoke licenses. Likewise, qualitative surveys conducted by the IPS with older adults and caretakers of older adults, also recognized this group as potential sources of information on safe driving for elderly patients. The Physician Survey is one component of a multifaceted assessment, which will guide the efforts of the IPS and its partners to develop recommendations that promote the mobility of older drivers and enhance transportation alternatives for those who no longer drive.

The IPS worked with the Medical Association of Georgia (MAG) to conduct a statewide exploratory survey of physicians across all specialties. Emphasis was placed on specialties with a greater likelihood of acting as primary care physicians, such as Gerontology and Internal Medicine. The objective of the survey was to produce a "snap shot" of physician knowledge levels and behaviors concerning older driver safety issues in Georgia. The survey focused on crash trends, risk and protective factors, current state reporting laws, and resources available to assist physicians address older driver safety with elderly patients and family members. The IPS distributed 924 surveys, of which, 11.5% were completed and returned. The following section illustrates the results obtained from the survey. Please note that as an exploratory survey, this tool was designed to provide a descriptive picture of current physician knowledge and behavior. Further study is required before conclusions can be drawn regarding magnitude and strength of potential relationships identified through the survey.

Results[†]

The results of the survey are broken into three sections:

- Section I- Demographic Results
- Section II- Prominent Themes
- Section III- Summary

The graphs found in Section II are accompanied by the original corresponding survey question (Q.).

Section I

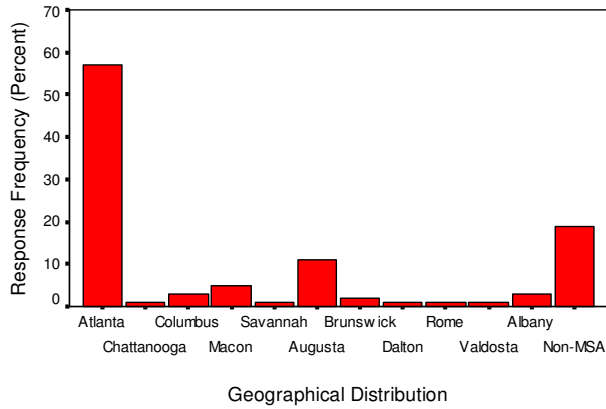
Demographic Results

- Respondent ages ranged from 30 years old (youngest respondent) to 77 years old (oldest respondent)
- 89 % of respondents were male and 11 % were female
- 87% of respondents were from metropolitan statistical areas (MSA)* and 13% were from non-metropolitan statistical areas (Graph 1)

[†] Missing question responses are not reflected in survey percentages

Graph 1

Geographical Distribution of Survey Responses
2004 Georgia Census Data

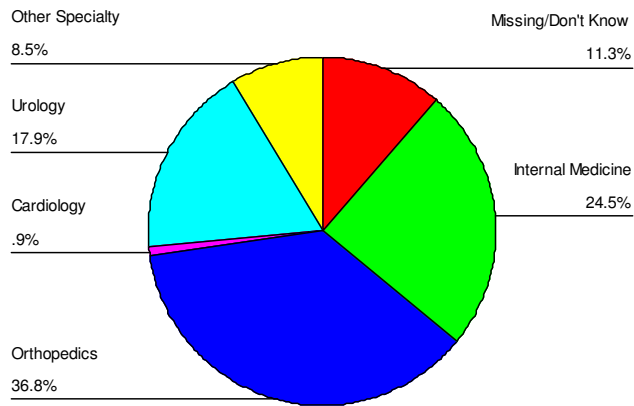


*MSA= Metropolitan Statistical Area by 2004 Census Data for Georgia
Non-MSA= Non-Metropolitan Statistical Area by 2004 Census Data for Georgia
Source: U.S. Census Bureau*

- Experience (in years) of doctors ranged from 1 year to 45 years
- Orthopedics, Internal Medicine, and Urology were the three specialties that respond more frequently (Graph 2)
- 95% of all respondents saw a minimum of 41 older clients in a six-month period

Graph 2

Percent of Survey Responses by Physician Speciality



* A metropolitan statistical area is a core area containing a substantial population nucleus, together with adjacent communities having a high degree of economic and social integration with that core. US Census Bureau

Section II

Prominent Themes

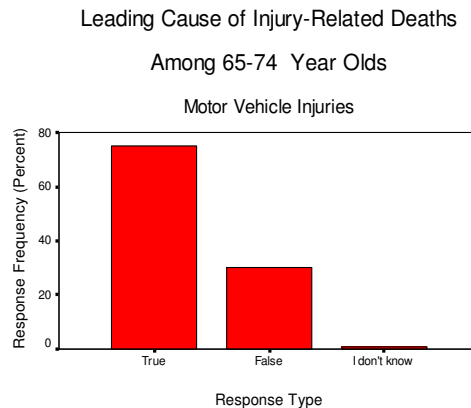
Three prominent themes, described in the following sections, emerged from the survey data:

Theme 1-There was misinformation among physicians concerning older driver crash trends and current laws governing reporting of patients diagnosed with conditions hazardous to operating a motor vehicle safely.

- 28% of physicians who responded did not identify motor vehicle injuries as the leading cause of injury-related deaths among 65-75 yrs old (Graph 3)

Graph 3

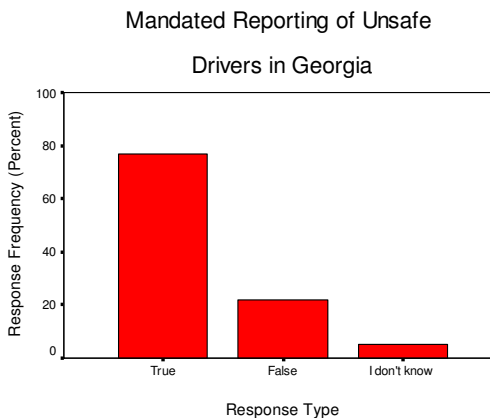
Q. Motor-vehicle injuries are the leading cause of injury-related deaths among 65-74 year olds.



- Almost two third (74%) of the physicians who responded believed that physicians were mandated to report impaired/unsafe drivers to the Department of Driver Services (DDS), formerly the Department of Motor Vehicle Safety (DMVS) (Graph 4). However, according to the Georgia Code, physicians are encouraged to report an impaired/unsafe driver but are not mandated to do so

Graph 4

Q. In Georgia, physicians are mandated to report patients with a condition hazardous to driving?



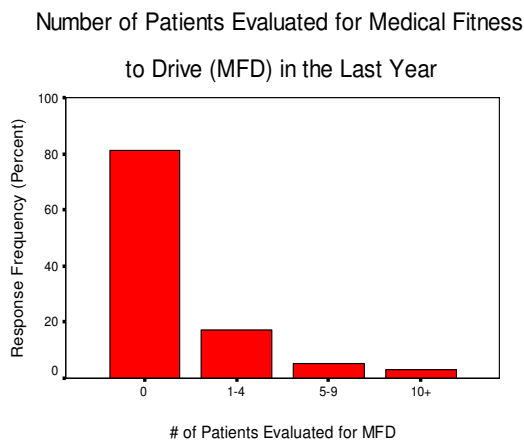
- Of those physicians operating under the belief that they were mandated to report, 11% reported an impaired/unsafe driver to the DDS in the past year. Furthermore, 27% of this group completed at least one formal assessment of an older patient for medical fitness to drive (MFD) during the same time-period

* *MFD= Assessment of driving-related skills such as vision, cognition, and motor function.*

- 13% of physicians who had advised at least one patient to cease driving in the last five years and believed that they were mandated to report an unsafe driver, reported at least one such driver to DDS in the last year
- Among all physicians surveyed, 76% had not completed at least one formal MFD assessment among their elderly patient population in the last year (Graph 5)

Graph 5

Q. In the last year, how many of your older patients have had their medical fitness to drive (MFD) formally assessed by you?



- Looking specifically at internal medicine specialists who believed they were mandated to report, 45% had conducted at least one MFD assessment, while 19% had reported at least one driver to DDS in the last year

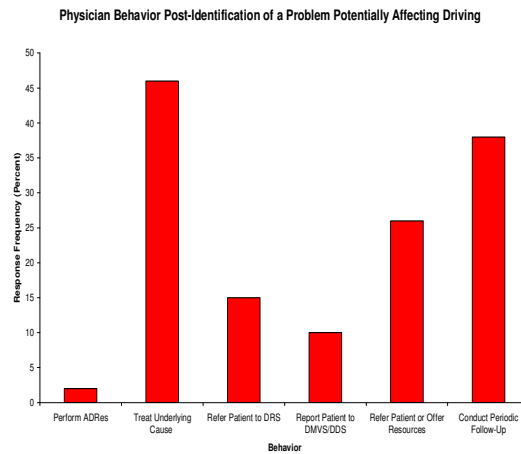
Theme 2- Physicians were unaware of or unclear about current resources available to assist them in addressing issues relevant to older driver safety/driving cessation with patients and family members.

- 56% of physicians who responded were unsure about the role of a Driver Rehabilitation Specialist (DRS) in Georgia
- 91% of physicians surveyed were unfamiliar with the American Medical Association’s *Physician’s Guide to Assessing and Counseling Older Drivers*
- 70% of all physician did not provide any information about caregiver resources to family members of older patients counseled to cease driving

- The majority of physicians who responded that they took additional steps after a patient’s initial assessment indicated a potential problem with driving, stated that they attempted to treat the underlying cause (46%) (Graph 6)

Graph 6

Q. If a patient’s initial assessment indicates a potential problem with driving, how do you normally proceed?



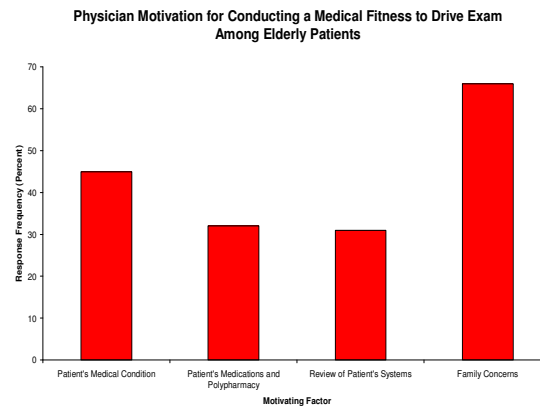
- More than 40% of survey respondents appeared not to use medical databases/journals, the AARP, or local Area on Agencies on Aging in their current strategies to gain information about older driver safety
- When asked about types of resources that would assist physicians in identifying and addressing high-risk older drivers, a number of respondents stated that they would like to see more on-line or office resources for physicians, a concise guide that references a physician’s role in addressing older driver safety, and education programs

Theme 3- Physicians were unsure about the extent of their role and responsibility in keeping older patients safe on roadways.

- 66% of responding physicians identified concerns of family members as an impetus for evaluating an elderly patient’s medical fitness to drive (Graph 7)

Graph 7

Q. If a patient's initial assessment indicates a potential problem with driving, how do you normally proceed?



- 38% of survey respondents indicated that they conduct periodic follow-up assessments with patients who had previously been identified with a condition hazardous to driving
- 22% of all physicians surveyed stated that they regularly encouraged older patients to perform a self- assessment of their driving abilities
- 62% of all physicians surveyed had advised at least one older patient to stop operating a motor-vehicle in the last five years
- 64.9% of physicians who had advised at least one patient to cease driving in the last five years believed that they were mandated to report an unsafe driver
- 87% of physicians who had advised at least one patient to cease driving in the last five years and believed that they were mandated to report, had not reported any patients to DDS in the last year

Section III

Summary

The IPS conducted an exploratory statewide survey of physicians to assess the role they play in addressing older driver safety in Georgia. Results reveal opportunities for physicians to become key intermediaries in assisting older adults make informed decisions about their driving behaviors, and ultimately make the roadways safer for all citizens. Improving knowledge about risk and protective factors, current reporting laws, and increasing awareness and access to resources available to assist physicians appropriately address the issue of driver safety, appear key to strengthening their role as key intermediaries. The results of this survey will guide development of effective, evidence-based, multifaceted strategies that support safe mobility for older road users.

**The IPS would like to thank the Medical Association of Georgia for their valuable input during the development of the survey and their assistance with survey distribution.*