

GOC response to DfT/DVLA consultation on mandatory eyesight testing

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The General Optical Council (GOC) protects the public by upholding high standards in eye care services in the UK. We currently register and regulate around 35,000 optometrists, dispensing opticians, student optometrists and dispensing opticians, and optical businesses, known as registrants. We have four core functions:

- Setting standards for the performance and conduct of our registrants.
- Approving qualifications leading to registration.
- Maintaining a register of individuals who are fit to practise or train as optometrists or dispensing opticians, and bodies corporate who are fit to carry on business as optometrists or dispensing opticians.
- Investigating and acting where registrants' fitness to practise, train or carry on business may be impaired.

We have responded to questions that are relevant to our remit.

Question 1: Who do you think should be responsible for notifying the DVLA when a licence holder is diagnosed with a medical condition that may affect their ability to meet the vision standards for driving?

At present, 'medical conditions' effecting vision standards are identified through a thorough eye examination or sight test as defined by the [Opticians Act 1989](#) and [The Sight Testing \(Examination and Prescription\) \(No. 2\) Regulations 1989](#). These sight tests are delivered by optometrists or registered medical practitioners.

Currently, the primary responsibility for notifying the DVLA sits with the licence holder. We provide [guidance](#) about the circumstances in which our registrants should inform the DVLA/DVA, specifically where:

- a patient may not be safe to drive; and
- they will not or cannot inform the DVLA/DVA themselves; and
- there are concerns for road safety in relation to the patient and/or the wider public.

We commissioned [research](#) into vision and driving in 2017. Public participants felt that the current system does not get the balance right between respecting patient confidentiality and public protection and felt that safety should always

be prioritised. Nine in ten of our registrants thought that public protection would be improved if they were required to notify the DVLA in all circumstances where a patient does not meet the required visual standards. However, many (4 in 10) had concerns, including the possibility of:

- people choosing not to have tests if they thought the results might be reported;
- the patient-practitioner relationship being impacted; and
- the need to breach patient confidentiality.

Our 2026 public perceptions research (annual research which seeks to understand the public's views and practical experiences of using eye care services) sought views on who the public think should be responsible for notifying the DVLA/DVA if a patient's sight test falls below the standard required to drive safely. Over half (52%) think responsibility should lie with the patient, while just under two in five (39%) say it should lie with the optometrist.¹

If the reporting requirement were to sit with the tester, mandatory reporting requirements for healthcare professionals are typically provided for by legislation, for example female genital mutilation and child sexual abuse (in the current Crime and Policing Bill), so consideration should be given to any necessary statutory changes.

Whether the obligation sits with the licence holder or the tester, it would be beneficial to support notification of test results with secure and efficient reporting systems to protect patients by preserving confidentiality and reduce any additional administrative burden.

Question 4: In your view, how often should older drivers be required to have a mandatory eyesight test?

Organisations responsible for providing clinical guidance will be better placed to take a view on this issue. However, if mandatory eyesight testing is introduced, there would be value in aligning the frequency of any new regime with existing recommended frequencies. Particularly if a different driving eyesight assessment is introduced, there is a risk of creating confusion among the public about which test they may have had or need to have. So, building alignment into the system would help to limit any confusion and mitigate some risk, as well as making resourcing and the development and management of systems (e.g. reporting) easier to manage.

¹ This research is not yet published.

Questions 5 - 8

Our response to question 4 (above) also applies to these questions.

Question 9: What, in your view, should the mandatory eyesight test cover?

Typical sight tests by optometrists include: history and symptoms, presenting vision, refraction (objective and subjective), eye muscle and alignment tests (pupillary function, ocular motility, cover test), ocular health assessments (external and internal examinations, intraocular pressures, visual fields, retinal photos/scans), and closing explanation and discussion with the patient. However, further specifications are required by the NHS. Contracts differ across the four nations, and there is likely to be some variation in what is covered in a sight test.

If a new bespoke driving eyesight assessment with a narrower range of tests were introduced, this could lead to confusion among the public. For example, people may choose not to attend a regular sight test, believing a driving eyesight assessment to be adequate. This could lead to conditions going undiagnosed and would have unintended public health implications.

If a separate driving eyesight assessment is introduced, consideration should be given to referral pathways for those who fail the driving eyesight assessment so they can have a full sight test, to support public health and avoid conditions going undiagnosed. A full sight test could also result in the prescription of glasses or contact lenses that could help someone meet the driving vision requirements.

If visual fields tests are considered a necessary part of the driving eyesight assessment, then consideration might be given to whether these could be incorporated into the existing sight test. Having a single testing system would avoid the risks of operating two systems that are unaligned.

Question 10: Who, in your view, should be responsible for conducting the mandatory eyesight test?

Sight testing for the purpose of issuing a prescription is restricted by the Opticians Act 1989, to GOC registered optometrists and GMC registered medical practitioners. Often, a prescription to correct defective vision would be sufficient to enable someone to meet the vision standards for driving. Therefore, a disadvantage of introducing a different sight test for driving

purposes conducted by another type of person is that if the customer failed the test, they would need to take a separate test to obtain a prescription. Such a step risks introducing confusion and unnecessary friction and cost into the system.

Without further information on what the alternative test would consist of, it is difficult for us to take a view on the regulatory implications of who conducts the tests.

Question 11: Who, in your view, should be responsible for notifying the DVLA of the outcome of the mandatory eyesight test?

If passing a test is a condition of driving licence renewal, then it makes sense for this information to be provided by the licence holder/applicant. However, this would need to be certified in some way by the tester, so a system to provide for this would be required and the cost implications would need to be considered.

A declaration of fitness to drive may require amendment to the standard prescription forms that are issued to patients following their sight test appointments.

Question 12: Outside of any potential mandatory eyesight testing requirements, who do you think should be responsible for notifying the DVLA when a licence holder may no longer meet the vision standards for driving?

Considering reporting requirements outside of any mandatory testing, takes us back to some of the issues noted in response to Q1, above. The circumstances in which registrants should make disclosures to DVLA/DVA without patient consent has long been debated. There are a number of issues of concern, not least patient confidentiality.

If mandatory testing at regular intervals is introduced, and reporting is also mandatory, then issues around patient consent and related concerns about breaching patient confidentiality may be somewhat mitigated.

41% of participants in our public perception research say they would be put off going for a sight test if the optometrist was automatically required to notify the DVLA if they failed to meet the required standards. Of these, 15% say they would be 'definitely' put off (up from 13% in 2017). However, those aged 65 and over were more likely to say that this would not put them off, and 53% overall said it would not put them off. Mandatory testing may also mitigate the

public safety and public health concerns around people choosing not to have sight tests.

However, first principles would suggest that if particular standards (including of eyesight) are a condition of licence application or renewal, then the obligation should sit with the applicant to provide evidence that they meet those standards.

Question 13: Do you have any further comments?

There is a significant risk that introducing a new driving eyesight assessment that is not aligned with the existing sight testing regime could lead older drivers to take standalone refraction and visual field tests every three years in place of the full sight test, which would lead to health conditions going undiagnosed or to them not acquiring the eyewear they need. This could impact quality of life, such as reducing the ability of older people to live independently and increase costs to the NHS, e.g. through falls or injuries related to sight loss.

Assessing the implications of some options considered in this consultation is dependent on which other options are preferred – for example which test is preferred will have implications for who should conduct the test. We will continue to engage with colleagues at the Department for Transport and DVLA as they develop these proposals.