Guide to Maintaining Driver Health

Keeping Drivers Fit for the Road

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Foreword

The road transport workforce across the HGV, coach and van sectors is changing. It is increasingly intergenerational, bringing together experienced drivers with decades of knowledge and new entrants building long-term careers in the industry. Supporting driver welfare today means recognising these different needs, life stages and pressures, and ensuring people can stay fit, safe and supported throughout their working lives.

Professional drivers sit at the heart of our industry. Their health, wellbeing and safety are not simply personal matters - they are fundamental to road safety, business resilience and the long-term sustainability of the sector.

This is why driver welfare sits firmly within the RHA's wider priorities: building skills for the future, improving facilities and working conditions, reducing unnecessary costs and regulation, and ensuring the industry is ready for long-term challenges, from workforce shortages to net zero. A healthy driver workforce underpins all of these ambitions.

Too often, driver welfare is viewed narrowly through the lens of compliance. This guide encourages a more practical and proactive approach - treating health as a safety issue, supporting early conversations, and helping operators go beyond minimum requirements in a way that works for their business.

By sharing best practice, practical tools and clear signposting, this guide aims to support drivers at every stage of their career - strengthening businesses, improving safety, and helping make road transport a more sustainable and attractive profession for the future.

Richard Smith

Managing Director

1. Introduction

Who is the guide for

The Guide to Maintaining Driver Health, much like the Guide to Maintaining Roadworthiness, should be seen as best practice for the industry. Just as operators have maintenance schedules for their vehicles, our employees need as much focus to ensure they are fit for the road.

The guide recommends going beyond the basics and questions whether current health checks are truly enough. Managers can start by reviewing their health check policies to make sure they cover all the essentials. Team discussions about driver health can also help identify issues, find solutions, and create a workplace that values health and wellbeing.

With ideas and practical advice for transport managers and planners on how to improve vocational drivers' physical and mental health, and how to identify people's neurodiversity and adapt communication styles that benefit the wider workforce. The following pages help to give an idea of best practice with links to specialist resources.

Why is health and wellbeing important?

Drivers are the most valuable asset for any road transport operator. Without them, hauliers and coach companies could not run their businesses.The road transport sector has faced major skills shortages in recent years, with many vocational drivers leaving the industry. Keeping drivers healthy is essential for every business. With an ageing workforce and the job's sedentary nature, driver health and wellbeing need more attention than just meeting basic D4 medical regulations.

The vocational driver population is 98% male[1]. The recently published NHS Men's Health Strategy[2] highlights that preventable illnesses like heart disease and prostate cancer are being caught far too late, with research showing that men are less likely to seek help. Men also have a higher propensity to smoke, drink and use drugs.

Shockingly, suicide is the biggest killer for men under 50[3]. According to CALM (Campaign Against Living Miserably), 125 people die from suicide every week in the UK, with 75% of these suicides being men.

Of course, concern for your workforce is the key driver in making changes to your driver wellbeing offer, but there are strong business reasons too. Sick days cost UK businesses an estimated £85bn a year, according to the government's Keep Britain Working paper.

Preventing poor health before sickness takes hold by taking a proactive approach to all your employees' health and wellbeing will help you retain a happy and healthier workforce.

Having a healthy and happy workforce is a business investment.

[1] ONS Annual population survey – employment by occupation by sex 2025
[2] https://www.gov.uk/government/publications/mens-health-strategy-for-england
[3] ONS leading causes of death

2. General health and fitness requirements

What do the regulations say, and are they fit for purpose?

Unfortunately, drivers' health is becoming a growing concern. Spending hours sitting still, often eating unhealthy food, being stuck in traffic, feeling stressed, not having good access to toilets, and, for those who sleep in their vehicles, being away from home and other people all week are not good for physical or mental health.

Improving work for drivers is about more than just following the law. It also impacts a company's bottom line. Poor driver health can mean more insurance claims, unexpected absences, and higher costs to replace staff.

Road transport is highly regulated and focused on safety, especially for vehicle maintenance and driving hours. However, driver health is sometimes overlooked.

Vocational drivers are required by law to have a medical from the age of 45, every 5 years thereafter until 65, when medicals are required annually. This is known as the D4 medical (based on the DVLA D4 form).

If a driver passed their test at 18, they could go 27 years without legally needing to complete a medical.

Being young does not always mean being healthy. HGV drivers are 1.5 to 1.7 times more likely to be overweight[4], which brings its own health risks. So why wait until age 45 to start regular health checks for your drivers?

We can compare health checks in similar occupations to see how the D4 medical for vocational drivers differs from those in other countries. The charts below show that UK vocational drivers are not checked as often as drivers elsewhere.

Table shows comparison with other occupations.

Assessments	Pilots	Train drivers	Coach/HGV drivers
Timeframe	Annual until 40, then 6 monthly	Every 3 years until 55, then yearly	None until 45, then every 5 years until 65, then yearly
Medical history	✓	✓	Self-report
Height/weight	✓	✓	Self-report
Physical exam	✓	✓	✗
Visual acuity	✓	✓	✓
Colour vision	✓	✓	✗
Hearing	✓	✓	✗
ECG	✓	✓	✗
Blood pressure	✓	✓	✓
Glucose (blood/urine)	✓	✓	✗
Lipids (blood)	✓	If needed	✗
Haemoglobin	✓	✗	✗
Lung function	✓	✗	✗
Alcohol and drugs	✓	✓	Check for signs of use

[4] Loughborough University - Crizzle et al (2024)

Assessments	UK	South Africa	Canada	USA	Australia	EU	Singapore	India
Medical history	Self-report	✓	✓	✓	✓	Self-report	✓	✓
Height/ weight	Self-report	✓	✓	✓	✓	✓	✓	✓
Physical exam	✗	✓	✓	✓	✓	✓	✓	✓
Visual acuity	✓	✓	✓	✓	✓	✓	✓	✓
Colour vision	✗	✓	✓	✓	✓	✓	✓	✓
Hearing	✗	✓	✓	✓	✓	✓	✓	✓
ECG	✗	✓	✓	✗	✓	✓	✗	✓
Blood pressure	✓	✓	✓	✓	✓	✓	✓	✓
Glucose (blood/urine)	✗	✓	✓	✗	✓	✓	✓	✓
Lipids (blood)	✗	✓	✓	✗	✓	✗	✗	✓
Haemoglobin	✗	✓	✓	✗	✓	✓	✓	✓
Lung function	✗	✓	✓	✓	✓	✓	✓	✓

As the tables show, the D4 medical misses important checks, such as glucose and a physical exam.

It is worrying that some operators say drivers have medicals that last less than 15 minutes. It is very important to report any doctor who does not do the full checklist. Managers should report these cases to Independent Sector Complaints Adjudication Service (ISCAS).

It is essential that the D4 medical is carried out by a trusted partner such as your own GP or RHA medical partner D4 Drivers https://d4drivers.uk/road-haulage-association/

Since this job has known health risks, it is best to do more than just the required health checks. The industry should consider pushing for better and more detailed medical checks for all drivers, regardless of age.

Taking care of your body is just as important as looking after your vehicle. You would not drive without making sure your vehicle is safe, and the same goes for your drivers physical and mental fitness. For HGV and coach drivers, treating their health as part of a daily checklist helps keep them alert and protects your load and everyone on the road.

- Long hours, shift work, vibration, and sedentary sitting all increase risks of musculoskeletal problems, obesity, high blood pressure, diabetes and sleep disorders, all of which are associated with higher accident risk for professional drivers.
- Poor vision or untreated conditions such as sleep apnoea, heart disease, depression, or substance misuse can slow reactions, impair judgement, and increase sudden incapacitation risk at the wheel.
- Mental health is part of being fit: stress, worry, tiredness, and feeling down can affect your focus, choices, and patience while driving.

For professional drivers, health is not just a personal matter. It is a safety issue, just like knowing drivers' hours or securing a load.

Regular company-wide health checks – don't wait for "45"

Only relying on the required D4 medicals at ages 45, 50, 55, 60, and 65 is the minimum standard, not best practice.

Because of the demands of professional driving, arranging medicals around work schedules can be hard. However, there are now more options and new initiatives to make health checks easier for those who work odd hours or spend time away from home.

NHS Health Check (England)

- Free NHS Health Checks are offered to adults aged 40–74 who don't already have certain long-term conditions.
- They usually run every 5 years and look at: Blood pressure, BMI and waist circumference, cholesterol and blood sugar, lifestyle risks (smoking, diet, activity)

Unfortunately, there is no equivalent over-40s health check or men's health strategy in Northern Ireland, Scotland or Wales. However, there has been campaigning for a similar scheme. It is advised to contact your GP to ask whether they can complete one. Otherwise, as an employer, you can arrange for a private company to visit your site and conduct a health check day for all employees.

Medicals – Best practice

1. Encouraging and enabling all eligible staff to attend NHS Health Checks.
2. Hold regular health checks at depots – make time for drivers to book assessments.
3. Offering baseline and periodic company medicals for all drivers, not only at the DVLA milestones. For example, a medical is a pre-employment check and then every 2-3 years until the age of 45 and then every year.
4. In addition, it's important to factor in occupational health: Vision and hearing screening, musculoskeletal assessments, sleep apnoea risk screening (especially for drivers who are very tired, snore heavily or have high BMI).
5. Ensuring health policies are supportive and do not assign blame, so drivers feel safe to report health issues early instead of hiding problems and risking their licence or a serious accident.

Men's Health Strategy – why it matters for vocational drivers

In November 2025, the government published the first Men's Health Strategy for England, a 10-year plan to tackle the physical and mental health challenges faced by men and boys, and the inequalities in life expectancy and health outcomes.

Key themes that link directly to vocational drivers include:

- Earlier detection of major killers – cardiovascular disease, diabetes and cancer, through better screening, workplace engagement and easier access to checks (including digital tools and at-home tests in areas like prostate cancer).
- Mental health and suicide prevention, particularly in male-dominated, high-pressure occupations, with partnerships through sport and community projects.
- Meeting men where they are, including workplaces, sports clubs and online, to overcome the fact that many men delay seeking help.

For operators aiming for best practice, this is a chance to:

- Position HGV and coach employers as proactive partners in men's health, hosting health checks, toolbox talks and signposting.
- Build driver welfare programmes that cover physical health (BP, weight, sleep) and mental health (stress, loneliness, substance use) together.
- Align internal policies with national priorities, for example, making it easy for male drivers to attend prostate, bowel, heart and mental-health checks without losing pay or feeling penalised.

Junction 24 Truck Stop Health Hub

Somerset NHS Foundation operates a monthly free-of-charge health hub at the Truck Stop, providing blood pressure, cholesterol, blood sugar testing, weight monitoring and lifestyle advice.

As part of the men's health strategy, the goal is to have more services like this at locations across the network that are easy for HGV drivers to access.

A "driver walkaround" for your own health: self-assessing fitness to drive

Your driver would not move an HGV or coach without a walkaround check, and they should not start a shift without a quick check of their own fitness. A simple pre-drive self-check could include:

Driver Self-Fitness Walkaround Check (Start-of-Day)

A quick, systematic daily check to ensure you are safe, alert and fit to drive.

1. General Condition – "Am I fit to operate?"

Have I had enough sleep? Minimum 6 hours and no signs of severe tiredness (yawning, heavy eyes, micro-sleeps).	**Am I free from illness today?** No fever, chest pain, dizziness, breathlessness, severe pain or stomach illness.	**Am I well-hydrated and have** I eaten? Avoid starting the shift dehydrated or on an empty stomach.

2. Mental Readiness – "Am I calm, focused and alert?"

Is my mind clear enough to drive? No overwhelming stress, agitation, confusion, or emotional distress.	**Can I maintain attention?** No unusual difficulty concentrating, remembering instructions, or staying focused.	Am I **feeling safe and in control?**

3. Alcohol, Drugs & Medication – "Am I legally and medically safe?"

No alcohol in my system? No drinking in the last 12–24 hours; no hangover symptoms.	**No illegal drugs?** Zero tolerance — do not drive.	**Have I checked my medication?** Avoid medicines that cause drowsiness unless cleared by a clinician.

If on new medication, confirm it is safe to drive.

4. Long-Term Conditions – "Is my condition stable today?"

Diabetes: No hypos, dizziness, sweating, confusion; have snacks and testing kit (if required).	**Heart conditions:** No chest pain, palpitations or breathlessness.	**Sleep apnoea:** CPAP (Continuous Positive Airway Pressure) used last night if prescribed; no extreme tiredness.

Any new symptoms that could impair driving?

5. Cognitive & Sensory Check – "Can I see, hear and react properly?"

Vision: Glasses/contacts worn if needed; no sudden eyesight changes.	**Hearing:** Can clearly hear instructions, alarms and road noise.	**Reaction time:** No delayed responses, mental fog or slowed movements.

6. Final Decision – "Should I drive?"

Am I confident I am safe, alert, and medically fit to operate this vehicle today?
If NO to any section: STOP. Report immediately to your Transport Manager and seek medical advice where relevant.

If anything in the self-check raises a concern, the best and safest option is for the driver to feel comfortable reporting it to their manager. If a driver is not fit to drive, the operator should be ready to handle the situation.

Traffic commissioner guidance treats driver fitness to drive just as seriously as vehicle condition and tachograph compliance. Where evidence shows a driver is unfit, vocational entitlement can be suspended or revoked.

3. Medical Conditions and Driving

There are common medical conditions that can affect the ability to drive such as heart disease, diabetes, sleep apnoea. However, with early detection and treatment, does not have to mean a loss of licence and livelihood.

Driving roles are sedentary, time-pressured, with limited access to toilets, healthy food, or rest facilities, all of which can worsen underlying health issues if not identified and managed early.

Many common medical conditions can affect alertness, reaction time, vision, judgment, or physical capability.

Heart Disease / Cardiovascular Conditions

High blood pressure (also known as hypertension) is very common in the UK, with up to 1 in 3 adults affected. Hypertension leads to heart attacks and strokes, and usually there are no symptoms whatsoever until a serious or possibly fatal event - that is why checking your blood pressure at least annually is essential.

As the heart ages, it is more prone to go into episodic or ultimately permanent unusual rhythms (known as arrhythmias); a very common example is atrial fibrillation, which affects almost 1.5M people in the UK[6]. Again, there may be no signs or symptoms; however, it is a leading cause of heart attacks and strokes.

It is still possible to drive on medication for blood pressure and/or heart problems but it is essential that the operator knows about these. A previous heart attack is not necessarily a bar to vocational driving provided it has been fully investigated and properly treated.

Vocational drivers are at double the risk of heart attacks compared with other drivers because of the toll that driving takes on the body.[7]

Diabetes

As identified in the RHA Diabetes Safe Driving guide for employers in partnership with the Diabetes Safety Organisation, an HGV driver is twice as likely to develop diabetes and it is estimated that 2 in 5 HGV drivers have diabetes.

Complication	How common?	What's the impact?
Severe hypo Blood sugar very low	2-6 severe hypos each month for every 1,000 employees	Sudden incapacitation requiring another person to assist
Non-severe hypo Blood sugar too low	40 non-severe hypos each month for every 1,000 employees	Impaired functioning e.g. awareness, coordination, fatigue, shaking
Diabetic peripheral neuropathy Nerve damage in feet: unable to assess pressure on pedal, pedal confusion	50% of all people with diabetes	3x more loss of control events in driving simulations: pedal error
Visual impairment Including retinopathy, cataracts, glaucoma	25% of people with diabetes develop retinopathy. 30% develop cataracts and 7% develop glaucoma	Sudden and gradual vision impairment including blindness
Hyperglycaemia Blood sugar too high: impaired functioning e.g. awareness, coordination, concentration	~1.2 million people with undiagnosed diabetes, unknown prevalence among people with diabetes but likely very common	Impaired functioning e.g. awareness, coordination, fatigue, shaking
Comorbidities Concurring conditions such as heart failure, stroke and sleep apnoea	930 strokes per week, 660 heart attacks per week due to diabetes	Sudden incapacitation, impaired functioning

What is the impact on driving

Risk of hypoglycaemia (low blood sugar) causing confusion, poor judgment, blurred vision, or loss of consciousness.

DVLA requires insulin-treated diabetes to have an annual medical review and drivers must monitor blood glucose.

[6] https://www.nice.org.uk/guidance/ng136/chapter/Recommendations#diagnosing-hypertension 1.2.2.
[6] British Heart Foundation
[7] https://pubmed.ncbi.nlm.nih.gov/37458206/

Mental Health Conditions

- Depression, anxiety, PTSD.
- Impact on driving: impaired concentration, slowed reactions, reduced motivation to self-care or comply with medical treatment.
- Note: Medication side effects (e.g., drowsiness) may also affect roadworthiness.

Musculoskeletal Conditions

- Chronic back pain, joint problems, frozen shoulder.
- Impact on driving: difficulty with steering, clutch control, coupling/uncoupling, or completing daily walkaround checks.

Vision Conditions

- Cataracts, glaucoma, uncontrolled diabetes-related vision changes.
- Impact on driving: reduced ability to read signs, judge distances, or see peripheral hazards.

The Signs to Look Out For & Questions to Ask

Managers can't be expected to be able to diagnose health conditions but they can spot early signs that a driver may be struggling and needs occupational medical support.

Observable Signs

- Driver appears excessively tired, yawning frequently, or struggling to stay alert.
- Noticeable weight gain or loss.
- Breathlessness during routine tasks (e.g., walking across the depot).
- Confusion, irritability, or poor decision-making.
- Tremors, unsteadiness, or changes in coordination.
- Skin infections, slow wound healing (common in unmanaged diabetes).

Questions Managers Can Ask Supportively

Use open, non-judgmental language:

"How have you been feeling in yourself lately? Any concerns affecting your work or concentration?"

"Are you managing your medical condition and medication okay on the road?"

"Have you noticed anything making driving harder—tiredness, blurry vision, breathlessness?"

"Are you able to take regular breaks, eat properly, and monitor your blood sugar (if relevant)?"

"Is there anything we can adjust to support you—routes, shifts, cab ergonomics, or medical appointments?"

Managing Chronic Illness While Maintaining Roadworthiness

A chronic health condition does not exclude someone from being a safe and competent professional driver provided it is well-managed and compliant with DVLA requirements.

What you can do as the employer

- Encourage drivers to attend medical reviews and keep medication up to date.
- Offer health check programmes (NHS Health Check for over-40s, private screening, or in-house wellbeing initiatives).
- Provide fridge access for medication that needs cooling (e.g., insulin).
- Ensure drivers can take regular breaks to eat, hydrate, stretch and monitor blood sugar.
- Review shift patterns for those with fatigue-sensitive conditions (OSA, heart disease).
- Keep a confidential record of fitness-to-drive assessments and occupational health advice.
- Seek help early if struggling with sleep, mood, or concentration.

4. Fatigue and Sleep Disorders – Why They Matter for Road Safety

Fatigue is one of the most dangerous yet underestimated risks in road transport. Driving while tired slows reaction times, impairs judgement, reduces awareness, and significantly increases the risk of collisions. Research shows that being awake for 17–18 hours can impair driving ability to a level comparable with drink driving[8]. Fatigue-related incidents are more likely to result in serious injury or fatality because drivers may not brake or take evasive action in time.

Recognising the Signs of Fatigue

Fatigue often develops gradually, and drivers may not always realise how impaired they have become. Common warning signs include:

- Frequent yawning or heavy eyelids
- Difficulty focusing or drifting between lanes
- Missing road signs or exits
- Head nodding or momentary "microsleeps"
- Slower reactions and poor decision-making
- Irritability or reduced concentration

Obstructive Sleep Apnoea (OSA)

OSA is common in sedentary occupations and in those who work irregular hours.

The impact on driving can be excessive daytime sleepiness, microsleeps and impaired reaction times. OSA is a major contributor to fatigue-related incidents.

Changes to DVLA requirements mean that only those with excessive sleepiness having, or likely to have, an adverse effect on driving, need to notify the DVLA. Having OSA does not mean that you will lose your licence but it is important to make sure that drivers are not deterred from seeking advice and treatment.

For full guidance and further information go to https://www.brit-thoracic.org.uk/document-library/governance-and-policy-documents/position-statements/position-statement-on-driving-and-obstructive-sleep-apnoea/

Sleep Disorders and Their Impact

Sleep disorders can severely affect alertness and long-term health. One of the most common and dangerous is obstructive sleep apnoea, a condition where breathing repeatedly stops and starts during sleep. This leads to poor-quality rest and excessive daytime sleepiness, even after a full night in bed. Drivers with untreated sleep apnoea are at significantly higher risk of accidents due to sudden sleep episodes and reduced concentration. Other conditions such as insomnia, restless leg syndrome, and shift work sleep disorder can also disrupt sleep patterns and performance. Early diagnosis, medical treatment, and employer support are critical to keeping drivers safe and healthy.

Best Practices for Managing Fatigue

Fatigue can be managed effectively with the right habits and workplace support. Key best practices include:

- Taking proper rest breaks in line with drivers' hours rules and avoiding the temptation to "push on"
- Prioritising good sleep hygiene, including regular sleep times, a dark and quiet sleeping environment, and limiting caffeine or screen use before bed
- Staying well hydrated and eating balanced meals, avoiding heavy, high-sugar foods before driving
- Using short naps (20–30 minutes) as a temporary measure when safe to do so
- Reporting fatigue honestly so workloads and shifts can be adjusted safely

[8] (2020) Drowsy Driving vs. Driving Under the Influence. National Sleep Foundation. https://www.sleepfoundation.org/drowsy-driving/drowsy-driving-vs-drunk-driving

5. Mental Health and Emotional Wellbeing

Mental health is a critical but often overlooked part of driver safety. Long hours, isolation, pressure to meet delivery schedules, traffic congestion, and time away from home can all take a significant toll on the emotional wellbeing of HGV and coach drivers. Poor mental health directly affects concentration, judgement, reaction times, and decision making, increasing the risk of collisions.

The Impact of Stress, Anxiety and Depression on Driving

Stress can cause irritability, poor focus, fatigue, and impulsive decision-making. In driving, this may lead to aggressive driving, speeding to recover lost time, or reduced hazard awareness.

Anxiety can make drivers overly cautious, hesitant at junctions, or prone to panic under pressure, especially in busy urban or motorway environments.

Depression often causes low motivation, poor sleep, slowed reaction times, reduced concentration, and withdrawal from communication — all serious risks in safety-critical driving roles.

Recognising Mental Health Concerns – what to look out for

- Persistent fatigue, low mood, or emotional withdrawal
- Increased irritability, anger, or frustration
- Reduced concentration or forgetfulness
- Higher levels of sickness absence
- Loss of confidence behind the wheel

Personal strategies for drivers include:

- Maintaining regular sleep routines as far as shift patterns allow
- Taking proper rest breaks away from the cab where possible
- Staying hydrated and eating balanced meals
- Using relaxation techniques (deep breathing, mindfulness, calm music)
- Keeping in regular contact with family and support networks
- Accessing confidential support services when needed

Key Message

Good mental health is essential for safe, compliant, and professional driving. Stress, anxiety, and depression can seriously impair driving performance, but early recognition and supportive working practices can significantly reduce risks. By treating mental wellbeing as a core element of driver welfare — alongside fatigue, fitness, and roadworthiness — both drivers and operators can help create safer roads and more resilient fleets.

RHA member support

The RHA's Member Assistance Programme (MAP) is a confidential service to help people deal with personal or work-related challenges. It's a 24/7/365 service run by PAM Wellbeing, staffed by qualified counsellors to offer support to those who need it.

The services are also available to their immediate family members, and managers can call to ask for advice on how best to assist employees going through difficult times.

More information on the programme can be found here.

www.rha.uk.net/About/Wellbeing

6. Neurodiversity

Neurodiversity describes the natural differences in how people's brains behave and process information. It means everyone thinks, learns, and acts in their own way and have different strengths and things they find challenging

Experts are still learning about neurodivergence, and it is common for people to have more than one kind. It is estimated that about 15-20% of people in the UK have an undiagnosed neurodiversity[9].

The main types of neurodivergence are:

- **ADHD (attention deficit hyperactivity disorder) –** they may find it difficult to concentrate on tasks, struggle with time management and organisation, have times of hyperfocus, have lots of energy and think creatively.
- **Autism –** may take things literally, react differently to sounds and smells, feel anxious in social situations, prefer routines, seem rude without meaning to, and have strong attention to detail, problem-solving skills, and memory.
- **Dyslexia –** they might read or write slowly, find it difficult to listen and concentrate, forget things easily, be good at problem solving and have strong verbal communication skills.
- **Dyspraxia –** they may have poor balance, have problems pronouncing certain words, take longer to do some tasks, have strong verbal communication skills and think creatively.
- **Dyscalculia –** they will have difficulty learning and understanding numbers and can struggle with basic maths, estimating quantities, measurements, time, and money.

How can you support neurodivergence in driving

Being neurodivergent does not determine driving ability. Many neurodivergent drivers show strengths in attention to detail, routines, problem-solving, and reliability.

However, some parts of driving, communication, or depot work may be challenging. Managers should be aware of these and provide support.

ADHD - Supportive Approaches

- Provide clear, step-by-step briefings and avoid long explanations
- Use visual tools such as checklists, colour-coded route cards or digital reminders
- Agree on predictable routines
- Encourage use of apps/timers for breaks

Autism - Supportive Approaches

- Keep communication clear, direct and precise
- Provide advance notice of changes whenever possible
- Offer written instructions to complement verbal briefings
- Use quiet areas for handovers; avoid rushed or overloaded briefings.

Dyslexia - Supportive Approaches

- Use simple, well-spaced writing (e.g., bullet points rather than paragraphs)
- Provide verbal explanations, voice notes or short videos where possible
- Incorporate pictograms or icons on checklists and defect-reporting steps
- Allow time for reading; avoid pressuring drivers during paperwork

Dyspraxia - Supportive Approaches

- Provide clear, repeatable checklists for routine tasks
- Allow extra time for admin or physical tasks
- Keep vehicle assignment consistent when possible
- Demonstrate tasks visually rather than giving rapid verbal instructions

[9] (January 30, 2026). Prevalence of neurodivergence among the adult population in the United Kingdom. Office for National Statistics. https://www.ons.gov.uk/aboutus/transparencyandgovernance/freedomofinformationfoi/prevalenceofneurodivergenceamongtheadultpopulationintheunitedkingdom

Dyscalculia - Supportive Approaches

- Use visual aids: height stickers in cabs, pictorial route warnings, coloured charts
- Provide tools such as height-safe sat navs, break alarms or digital mileage trackers
- Avoid giving important information only as numbers; add plain-language explanations
- Support with structured time planning rather than asking drivers to estimate

Communication Guidelines for Transport Managers

For all types of neurodiversity, some communication practices help create safer and more supportive workplaces:

Be clear, concise and precise	Avoid vague terms like "ASAP" or "be quick." Say exactly what you expect
Use dual-format communication	Pair verbal explanations with written or visual instructions. This helps all drivers, not just neurodivergent ones. Using dual formats boosts understanding and improves safety and efficiency for everyone.
Give time to process information	Do not rush briefings. Give time for questions and make sure everyone understands.
Use the "check-back" method	Instead of "Do you understand?", ask: "Just to confirm, what's your next step after the first drop?"
Minimise distractions during briefings	Use quiet areas when you can, and avoid giving important safety instructions in noisy depots.
Normalise reasonable adjustments	Do not treat adjustments as exceptions. Make them a normal part of your driver support practices.

In conclusion, recognising and supporting neurodiversity not only benefits individual drivers but also strengthens the entire transport operation.

7. Alcohol, Drugs, and Medication

To drive safely and professionally, you need to stay alert, react quickly, and judge distance, speed, and risk accurately. Alcohol, drugs, and some medications—whether legal or illegal—can affect these abilities and increase the chances of crashes, near misses, injuries, or being stopped by police.

This section outlines the key risks, what drivers should look out for, and how employers can create a safe culture around disclosure and support.

The Effects of Alcohol and Drugs on Driving Performance

Even small amounts of alcohol and drugs can seriously affect your driving, long before you feel "over the limit".

Alcohol impairs:

- Reaction time and decision-making
- Coordination and steering control
- Risk perception "feeling more confident than you should"
- Vision, particularly night vision
- Fatigue levels the following day

Morning-after drinking is a major risk in road transport. Drivers may still be over the limit even after sleeping, especially after heavy drinking, late-night drinking, or minimal food intake. Vocational licence holders face higher penalties, including loss of vocational entitlement.

Illegal Drugs e.g., cannabis, cocaine, MDMA

Illegal drugs can cause:

- Distorted vision and concentration
- Hallucinations or altered perception
- Increased aggression or impulsivity
- Severe "come-down" fatigue

Drug-driving offences are strict, and police routinely test for substances that impair safe driving. Employers must have a clear zero-tolerance policy for illegal drug use.

Misused Prescribed or OTC Substances

Taking your medication the wrong way or using someone else's prescription can be just as dangerous and counts as drug misuse in jobs where safety is important.

Prescription and Over-the-Counter Medications That Impair Driving

Some medicines you buy or get from a doctor can make it unsafe to drive a HGV or coach. Drivers should always check the label and talk to a pharmacist, doctor, or workplace health staff.

Common medications that may impair driving

- **Antihistamines (for allergies or colds) –** may cause drowsiness
- **Strong painkillers (like codeine, tramadol, or medicines with morphine) –** slow down your reactions and make you less alert
- **Muscle relaxants –** cause drowsiness and slower reflexes
- **Sleep aids/sedatives –** lingering next-day sedation
- **Antidepressants or anxiety medicines –** some types can make it hard to focus when you first start taking them
- **Cold and flu remedies –** often have alcohol or ingredients that make you sleepy
- **If a medicine makes you drowsy, dizzy, slow to react, or confused –** do NOT drive.
- **Always inform your employer/transport manager if a new medication may affect fitness to drive.**

- **Never drive after taking someone else's prescription medication.**
- **Keep medications in original packaging in case of roadside checks.**

Drink and Drug Policy – Best Practice for Transport Operators

A clear, fair, and well-shared policy is essential in jobs where safety matters. The goal is not to punish but to keep everyone safe, stop problems, and help staff.

Key principles of a robust policy

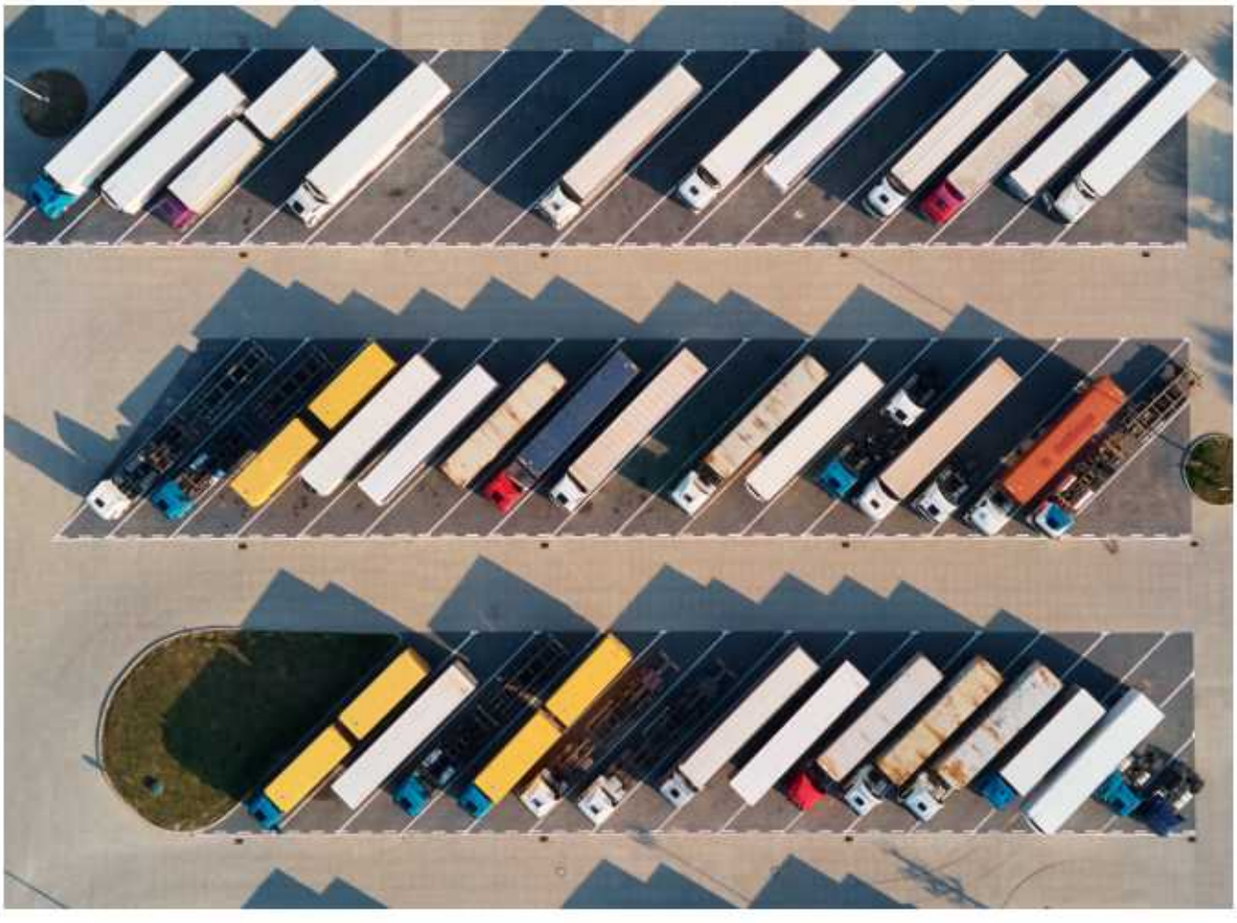
- Zero tolerance for illegal drugs and driving over the alcohol limit.
- Clear expectations and responsibilities for drivers, managers, and safety teams.
- Random tests, tests after an incident, and tests when there is a reason, all following industry rules.
- Clear procedures for when a driver declares medication-related impairment.
- Helpful steps for coming back to work after medical or addiction treatment.

Creating a Safe Place for Conversations

Drivers need confidence that raising a concern won't automatically lead to punishment.

Best practice includes:

- Open-door approach for health discussions—drivers should feel safe declaring medication changes, sleep issues, or alcohol concerns.
- Training for transport managers on how to have helpful, understanding talks.
- Confidentiality protocols to protect privacy.
- Access to workplace health or help programs for anyone having problems with alcohol or drug addiction.
- Clear guidance on how and when to report concerns about colleagues, without stigma.



8. Diet, Hydration, and Lifestyle Choices

Keeping drivers healthy, alert, and safe on the road

Drivers often work long hours and irregular shifts, which makes it tough to eat well or stay hydrated. Limited access to healthy food and drinks is a common problem. Still, what drivers eat and drink has a big impact on their alertness, reaction time, mood, and long-term health.

Proper Nutrition and Driver Alertness

Why good food matters for safe driving

A driver's diet strongly affects their energy, focus, and tiredness. Research from Loughborough University shows that many drivers struggle to find healthy meals and often end up eating fast foods high in fat, salt, and sugar. This is linked to:

- Reduced alertness during long driving periods
- Higher BMI and cardiometabolic health risks
- Greater likelihood of mid-shift tiredness

Drivers don't need to make big changes to improve their nutrition. Small, steady steps can make a real difference in alertness and wellbeing. This matches the focus of Driver CPC (DCPC) training on driver health, which highlights:

- Choosing slow-release carbohydrates (whole grains, oats, brown rice) to maintain steady energy
- Including lean proteins to reduce hunger and maintain focus
- Avoid heavy, greasy meals before long drives, as they can make you feel tired afterward

Practical tips for drivers:

- If possible, prepare meals or snacks ahead of time so you don't have to rely on fast food at service stations.
- Choose fruit, nuts, yoghurts, or whole-grain wraps as on-the-go options.
- Try to eat at regular times during your breaks to keep your energy steady.

Advice for operators:

- Make sure healthier food choices are available at depots and rest areas.
- Include health topics regularly in DCPC training and toolbox talks.

Loughborough University SHIFT Programme and Driver CPC module

The SHIFT programme (Structured Health Intervention For Transport) was created by Loughborough University and the Leicester Diabetes Centre to address the lack of quality health programmes for vocational drivers. SHIFT offers practical, research-based support to help drivers improve their health despite job challenges[10]. Developed with industry partners, it was piloted from 2014 to 2016 and then assessed in a clinical trial from 2017 to 2021. The trial found that SHIFT drivers were more active and sat less than others, with the greatest benefits for drivers with obesity.

SHIFT centres on a planned, six-hour education session, based on the DESMOND and Let's Prevent programmes recommended by NICE[11]. It uses behavioural science and interactive teaching to help drivers take control of their health. Trial feedback showed the programme made a real difference, helping participants establish lasting habits.

Due to these positive results, the programme has been developed into a Driver CPC training course. The original education piece was adapted into a 7-hour SHIFT DCPC course and a shorter 1-hour "Short-SHIFT" session for regular CPC training. Both were approved by the DVSA in September 2023.

Staying Hydrated to Maintain Concentration

Hydration = reaction time, cognitive sharpness, and safety

Even mild dehydration can lower alertness, memory, reaction time, and decision-making. These are all important for HGV and coach drivers. Some drivers drink less to avoid toilet stops, but this raises the risk of fatigue and can make headaches, joint pain, and cramps worse.

[10] (2023). Assessment of UK Heavy Goods Vehicle Drivers' Lifestyle Behaviors: A Cross-Sectional Study. PubMed. https://doi.org/10.1136/oemed-2022-108426
[11] Yates, T., Clemes, S., Malhotra, S. & Bell, S. (2022). The effectiveness of the Structured Health Intervention For Truckers (SHIFT): a cluster randomised controlled trial (RCT). BMC Medicine. https://doi.org/10.1186/s12916-022-02285-0

Key hydration messages:

- Aim for 1.5–2 litres of water per day, adjusting for hot weather.
- Keep a water bottle in the cab and sip regularly.
- Don't use energy drinks as your main drink. They can cause sudden highs and lows in alertness.
- Try not to have too much caffeine, especially later in your shift.

Facilities matter

One big challenge for drivers is not having enough toilets, especially in lay-bys, RDCs, and some depots. When there aren't enough toilets, drivers often drink less, which can hurt their focus and health.

For employers and planners:

- Ensure drivers know which routes and sites have reliable toilets and rest stops.
- Push for improved roadside welfare standards, in line with DfT and industry calls.
- Provide clean, accessible facilities on-site to reduce hydration concerns.

The Impact of Shift Work on Driver Health

Shift work is a normal part of road transport, but it disrupts circadian rhythms and affects sleep, appetite, digestion, and hormone balance.

Night-Club.org, a group for shift worker health, found that irregular schedules can cause:

- Disrupted hunger cues and reliance on high-sugar "quick energy" foods
- Increased risk of weight gain, heart disease, and type 2 diabetes
- Poor sleep quality, which magnifies cravings and reduces self-control
- Higher fatigue levels during night shifts and early mornings

Healthy lifestyle strategies for shift-pattern drivers

- Avoid large meals at night: choose lighter, easily digestible foods (soups, salads, whole grains).
- Keep consistent eating patterns even on days off to stabiUse your breaks to stretch, walk, and help your digestion. This can boost both your alertness and mood. alertness and mood.
- Plan meals ahead of shifts to avoid grabbing whatever is available late at night.

For operators and transport managers

- Align shift schedules, where possible, to promote consistent routines.
- Share Night-Club.org guidance within welfare briefings or DCPC refreshers.
- Encourage short breaks and help create a culture where taking time to eat properly is seen as important, not inconvenient.

Exercise on the road

- It's difficult to keep to an exercise regime when you're on the road. Especially for those who sleep in their cabs throughout the week, most often in areas with few safe walking or running routes.
- Truck stops that provide exercise areas are few and far between, but they should be a standard requirement.
- Loughborough University, as part of the SHIFT programme, has designed in-cab exercises using resistance bands and hand grippers. However, as drivers sit for long periods, it's important to move around during breaks, even if it's just laps around the vehicle.
- Outside of work, it becomes even more important to do exercise. Try to incorporate exercise into downtime and break up long periods of sitting.

Key Takeaway

Good nutrition, hydration, and healthy habits are not just "nice-to-haves." They are essential for safe, alert, high-quality driving. Employers who support healthy choices see fewer fatigue-related incidents, better staff retention, and improved wellbeing for everyone.

9. Conclusion and Key Takeaways

Conclusion

Keeping drivers healthy should be taken as seriously and openly as keeping vehicles safe to drive. This guide shows that the current basic medical rules for professional drivers, especially the long wait between regular D4 medical checks, do not match the real challenges of modern living and vocational driving: long hours sitting, working different shifts, being alone, not always having good access to food and toilets, and more preventable health problems in a mostly male workforce.

For operators, looking after driver health is the right thing to do and also good for business. Better health support lowers risks on the road like tiredness, sudden illness, or poor judgement, helps follow rules by making fitness-to-drive decisions early and safely, and helps keep drivers in a field that already needs more workers.

As explained throughout, develop a practical plan: include daily self-checks, make it easier for drivers to get health help at work, make early talks about fitness-to-drive normal, and use clear communication that helps people with different ways of thinking as a key part of safe and effective work.

Ultimately, a healthier driver workforce means safer roads, more resilient fleets, and a more attractive industry for current and future employees.

Key takeaways

- Health is a safety system, not an optional wellbeing add-on: it directly affects alertness, reactions, judgement and the risk of sudden incapacitation.
- Just meeting the basic D4 medical rules is not enough, drivers can legally go many years without a medical exam; operators should do health checks sooner and more often.
- Stopping problems before they start is better than dealing with emergencies: regular health checks and early help let drivers keep working safely, instead of losing their licences or jobs later.
- Treat "fitness-to-drive" like a walkaround check: a simple daily self-fitness check creates a consistent safety habit and supports confident reporting.
- Fatigue is a high-consequence risk: sleep disorders (especially OSA) and poor sleep hygiene must be identified early and supported without stigma.
- Mental health is roadworthiness: stress, anxiety and depression can impair driving performance: supportive cultures and manager capability are essential.
- Helping people who think and learn in different ways makes everyone safer: clearer instructions, using more than one way to share information, checking understanding, and having regular routines all help cut down mistakes and problems.
- Alcohol, drugs and medication policies must be clear and compassionate: zero tolerance for illegal drugs, but a safe route for disclosure and support.
- What drivers eat and drink affects how well they work right now, not just their future health: easy access to healthy food and toilets is key for focus and safety.
- Use programs that are proven to work: projects like SHIFT show real improvements and can be included in Driver CPC and daily work routines.

10. Resources for further information

https://assets.publishing.service.gov.uk/media/691c8a7b5a253e2c40d706ee/mens-health-a-strategic-vision-for-england.pdf
NHS England Men's health strategy

https://www.bhf.org.uk/how-you-can-help/health-at-work
British Heart Foundation

https://diabetessafety.org/
Diabetes Safety Organisation

https://www.thecalmzone.net/
Campaign against Living Miserably

https://app.pamwellness.co.uk/
Member Assistance Programme

https://www.workingminds.org.uk/
Working Minds

https://britishsnoring.co.uk/advice-for-driving-with-obstructive-sleep-apnoea-osa/
Sleep disorders

https://www.brit-thoracic.org.uk/document-library/governance-and-policy-documents/position-statements/position-statement-on-driving-and-obstructive-sleep-apnoea/
Full advice on driving and sleep apnoea

https://www.bdadyslexia.org.uk/advice/employers
Neurodiversity resource

https://dtecinternational.com/RHA/
Alcohol and drug advice

Managing shift work: Health and safety guidance
HSE – Advice on shift work

https://www.night-club.org/
Shift worker resource

https://www.ncsem-em.org.uk/research/optimising-health-wellbeing/impact/the-shift-study/
SHIFT programme of education for drivers

https://www.psydrivegroup.com
Offer human factor training to improve road safety

Written by Sally Gilson, Policy lead – Skills, RHA

While this guide offers practical information on driver health and wellbeing, it is not medical advice. The RHA is not a medical authority. Drivers and operators should seek appropriate advice from qualified healthcare professionals for diagnosis, treatment, or workplace adjustments related to health concerns.

About the RHA

The RHA is the leading trade association representing over 8,500 road haulage and coach companies across the UK, 85% of whom are small and medium-sized enterprises (SMEs). Our members are operators of vehicles who, between them, operate around 250,000 HGVs (half of the UK fleet) out of 10,000 operating centres and range from a single-truck company to those with thousands of vehicles. The UK road haulage sector is responsible for 81% of all freight movements and is directly involved in the transportation of 98% of agricultural products.

To find out more, please click here: www.rha.uk.net

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