

Driving guidance (DVLA) – psychosis, schizophrenia and other chronic relapsing/remitting disorders

Why this matters:

Psychosis can affect your thinking, emotions, and awareness of reality. If you're experiencing symptoms like hallucinations, delusions, or confusion, it is not safe to drive.

The DVLA (Driver and Vehicle Licensing Agency) has rules to help keep you and others safe on the road.

Should I stop driving?

Yes.

If you're currently unwell with symptoms of psychosis, you must stop driving immediately. This includes any episode that causes confusion, altered thinking, or hospital treatment. Driving while unwell is dangerous and can lead to accidents or legal consequences.

Do I need to tell the DVLA?

Yes.

You must notify the DVLA if you've been diagnosed with a psychotic illness or are being treated for one. This includes schizophrenia, schizoaffective disorder, or acute psychotic episodes. Not informing the DVLA is a legal offence and may lead to fines, loss of insurance cover, or prosecution.

When can I drive again? Group 1

You can drive again when:

- you've had at least three months of stability
 - Continuing symptoms: even with limited insight, continuing symptoms do not necessarily preclude licensing.
 - However, a lack of insight which impacts upon the ability to drive safely would be a bar to licensing.
 Symptoms should be unlikely to cause significant concentration problems, memory impairment or distraction while driving.
- your doctor confirms you're well enough to drive safely
- the DVLA has given permission (if they were informed)

This applies to Group 1 licences (cars and motorcycles). For Group 2 licences (lorries and buses), the rules are stricter.

Group 2

Licensing may be considered if all the following conditions are met:

- You have remained well and stable for at least 12 months.
 A longer period may be required if there is a history of relapses.
- You adhere to any agreed treatment plan.
- You are free from any medication effects that would impair driving.
- Subject to a favourable report from a specialist in psychiatry.

Additional considerations:

- The minimum effective dosage of any antipsychotic medication should be used, in line with good practice.
- Drug tolerability should be optimal and not associated with any deficits that might impair driving, such as reduced alertness, concentration, or motor performance.
- If the patient has an established illness with a history of relapse, the risk of future relapse must be considered low.

A lack of insight that impacts the ability to drive safely would be a bar to licensing.

If you are unsure about your diagnosis or what it means for your driving, ask your doctor or healthcare team for advice before driving.

How do I tell the DVLA?

Fill in form M1 (Mental Health Conditions), which you can find at: www.gov.uk/psychosis-and-driving or call the DVLA Medical Enquiries line: 0300 790 6806.

Do not drive until the DVLA has responded if you've been asked to stop.

Your responsibility

You must not drive if your condition or medication affects your ability to do so safely. Some antipsychotic medicines can cause drowsiness or slowed thinking, especially at the start of treatment. Always speak to your doctor before returning to driving.

