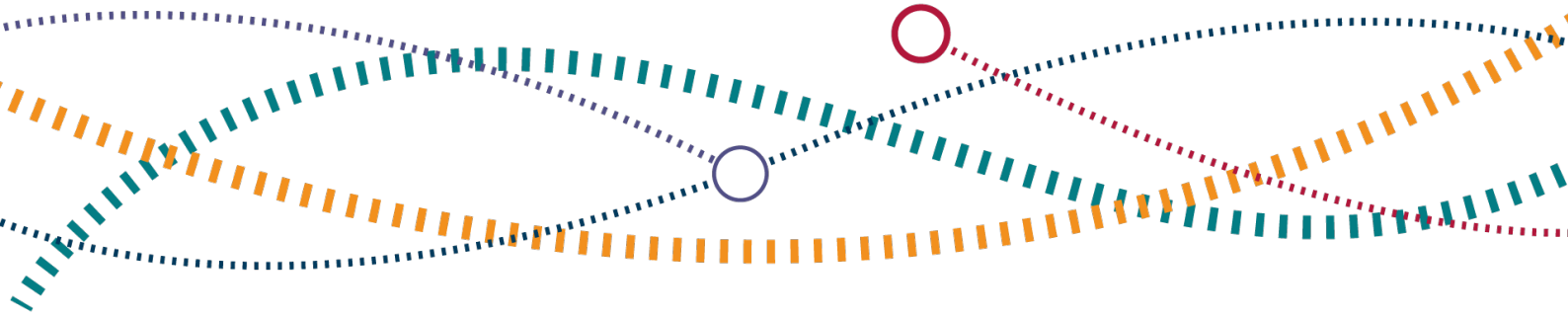
OFFICE OF RAIL AND ROAD

A guide to the occupational psychological fitness and medical requirements

09 April 2026



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Background

The Train Driving Licences and Certificates Regulations 2010 (as amended) (TDLCR) give duties to different organisations and people. We have produced a series of separate guides to explain the duties and responsibilities arising from the TDLCR and how you can take appropriate action. Together these guides form a complete set of guidance. However, please note that the guidance does not cover all aspects of the legislation and that it is the responsibility of the duty holders to ensure compliance with legislation.

There are separate guides:

for employers of train drivers

for train driver training and examination requirements and the recognition process

for suspending or withdrawing a train driving licence

for train drivers appealing against decisions made by their employer about the train driving certificate issued to them

We have produced this guidance document to assist you in meeting the requirements of the Train Driving Licences and Certificates Regulations 2010 (TDLCR). However, we do not seek to cover every aspect of the legislation. It remains your responsibility to ensure that you are compliant with the relevant legislation. Following our exit from the EU please be aware that TDLCR and associated legislation has been amended by the following regulations:

- the Train Driving Licences and Certificates (Amendment) (EU Exit) Regulations 2019, (S.I. 2019/677) as amended by the Railways (Miscellaneous Amendments, Revocations and Transitional Provisions) (EU Exit) Regulations 2020. (S.I. 2019/345) and the Railways (Miscellaneous Amendments, Revocations and Transitional Provisions) (EU Exit) Regulations 2020 (S.I. 2020/786).

The guidance does not introduce new duties or requirements for train operators but it sets out what we consider to be good practice. Please note this guidance is not intended for use in Northern Ireland.

We periodically update these guides, and you can download the latest version of any of these guides from our website here

Introduction

This guide is aimed at people and organisations who carry out medical and occupational psychological fitness examinations under the Train Driving Licences and Certificates Regulations 2010 (TDLCR) and railway undertakings and infrastructure managers (collectively referred to as 'train operators' in this guide) who have employees driving trains on the mainline railway. It explains:

- The train driver medical examination;
- The occupational psychological fitness examination;
- The timescales for medical or occupational psychological fitness examination;
- The information that should be recorded and relayed to ORR when medical or occupational psychological fitness examinations are carried out;
- The process for doctors and psychologists to obtain and maintain recognition to carry out examinations of train drivers under the TDLCR.; and
- The appeal process if an application for recognition is refused, or for removal from the register.

The fitness requirements in TDLCR

1. TDLCR requires that any person employed to drive a train on the GB mainline railway must have a valid licence issued by ORR.

2. To be issued with a licence, the train driver must pass both the medical examination and the occupational psychological fitness examination. These examinations are to be undertaken and passed before appointment of the driver.

3. Schedule 1 of TDLCR contains the general requirements for the medical examination and the minimum content for both examinations before appointment and for periodic examinations.

4. More details on the train driving licence can be found in our separate guide for train operators here.

Other key documents relevant to these requirements are published by RSSB and are:

- RIS 3751 TOM – Rail Industry Standard for Train Driver Selection
- RIS 3789 TOM - Train Drivers – Medical Fitness Assessments

(Both these documents are available on the RSSB website www.rssb.co.uk)

Although it is not mandatory to follow the content of the Railway Industry Standards (RIS) above, they represent agreed GB rail industry good practice. As such, anyone not applying the content of these standards in full or in part would need to demonstrate they had undertaken an equivalent assessment.

1. Occupational psychological fitness examination

Summary

This chapter is about the occupational psychological fitness examination and explains:

- How often a train driver must pass the occupational psychological fitness examination;
- The elements of the occupational psychological fitness examination.
- Who carries out these examinations.

How often should a train driver have a psychological fitness examination?

TDLCR Reg 8(2)(e)

1.1 TDLCR requires that train drivers pass an occupational psychological fitness examination to obtain a licence issued by ORR. This should be carried out before the train driver is appointed. Drivers who were qualified to drive trains on the mainline railway before 29 October 2013 may not have had an occupational psychological fitness examination unless specifically required by their employer since the introduction of the TDLCR, due to special arrangements in the transition legislation, which are no longer applicable.

1.2 We do not expect a train driver to repeat the occupational psychological fitness examination when applying to renew their licence. More details on licence renewals can be found in our guidance for train operators here.

In what circumstances would a driver need an additional occupational psychological fitness examination?

1.3 TDLCR Regulation 17 provides operators with a legal obligation to monitor the health and wellbeing of their train drivers. A train driver's occupational psychological fitness will not usually be re-assessed once a train driving licence has been issued. However, a train driver may need to have an additional

occupational psychological fitness examination (or parts of such an examination) where the employer considers it necessary to check the driver still meets the conditions for holding a licence. The employer may consider the following circumstances, for example:

- ongoing monitoring and management has raised questions about the driver's fitness to drive;
- the driver tells their employer that they have concerns about their own health which calls into question their fitness to drive trains;
- a GP or other doctor recommends that a recognised psychologist carries out a further examination;
- the driver has been involved in an occupational incident or there has been a period of absence following an incident;
- an ORR recognised doctor considers that the driver should undergo occupational psychological fitness examination; or
- any other evidence raises concerns about occupational psychological fitness.

What is tested under the occupational psychological fitness examination?

TDLCR Schedule 1 Reg 2(2)

1.4 The occupational psychological fitness examination is used to determine whether a candidate driver has any occupational psychological fitness deficiencies, particularly in operational aptitudes or any relevant personality factors which are likely to interfere with their ability to drive trains safely.

1.5 This examination is usually the first stage of the selection process to become a train driver and is followed by the pre-appointment medical examination, as described in Chapter 2 of this guide. The tests used to determine occupational psychological fitness must be based on psychological-scientific principles. The current GB rail industry standard is set out in RSSB's RIS-3751-TOM *Psychometric Assessment in Train Driver Selection*. For new candidates starting the standardised psychometric assessment process from 7 December 2024, the

standard applies a three-attempt rule: after three failed attempts, a candidate cannot make any further attempts. Candidates who undertook any part of the process before 7 December 2024 remain subject to the previous two-attempt rule.

Who can carry out the occupational psychological fitness examinations?

1.6 Occupational psychological fitness examinations must be conducted by an ORR-recognised psychologist who is listed on our register. The psychologist may be qualified to carry out written tests only or be qualified to carry out all the tests. More information on recognition and our registers can be found in Chapter 4.

2. Medical examinations

Summary

This chapter is about the medical examination of licenced train drivers and explains:

- How often a train driver must take a medical examination.
- The different elements of the medical examination.
- Who carries out these examinations; and
- The information that should be recorded on the medical examination form.

How often must a train driver take a medical examination?

TDLCR Schedule 1, Reg 3, 17

2.1 Train drivers must pass the initial medical examination as one of the conditions to apply for a licence (normally before appointment).

2.2 Licenced drivers must then have a periodic medical examination at least every 3 years up to the age of 55. All train drivers once they have reached 55 years of age must have an annual medical examination. The first of these annual medical examinations must take place before the driver's 56th birthday.

2.3 The employer may decide to undertake more frequent examinations as a result of their monitoring of each driver. A recognised doctor must increase the frequency of medical examinations if, in the doctor's opinion, the health of the train driver so requires.

Pre-appointment medical examination

TDLCR Schedule 1, Reg 2

2.4 Under TDLCR Schedule 1, the pre-appointment medical examination must include as a minimum the following elements:

- A "general medical examination" (see below);
- Vision (including distance acuity, corrective lens strength and colour perception);
- Hearing;
- Any blood or urine tests where they may be necessary to judge physical aptitude (such as testing for diabetes);
- An electrocardiogram test (ECG) at rest;
- Tests for psychotropic substances (such as illicit drugs or psychotropic medication) and the abuse of alcohol calling into question the fitness for the job;
- A cognitive test (attention, concentration, memory, perception, and reasoning);
- Communication; and
- Psychomotor skills (reaction time, hand coordination).

2.5 Cognitive, communication and psychomotor tests are usually completed as part of the occupational psychological fitness examination. Therefore, any recognised doctor carrying out a pre-appointment medical examination in line with Schedule 1 should confirm that the candidate driver has already undertaken and passed the necessary occupational psychological fitness examination that covers cognitive, communication and psychomotor skills. The criteria are set out in RIS-3751-TOM '*Train Driver Selection'* published by RSSB (see Chapter 1).

Periodic medical examinations after appointment

TDLCR Schedule 1, Reg 3(2)

2.6 Once a train driver has been appointed to a licenced driver role, the periodic medical examinations must include, as a minimum, the following elements:

- A general medical examination.
- Tests for vision (including distance acuity, corrective lens strength and colour perception).
- Tests for hearing.
- Blood and/or urine tests to detect diabetes and other conditions as indicated by the clinical examination.
- Tests for drugs where clinically indicated.
- An ECG test at rest (for drivers over 40 years of age).

What is meant by 'general medical examination'?

2.7 A general medical examination is a clinical examination that includes, as a minimum, examination of the heart, chest, musculoskeletal system, and nervous system. Doctors may include other elements as part of the examination if they consider it is necessary to do so to assess whether the train driver will pass the medical examination requirements. The purpose of the examination is to assess the driver's medical fitness to carry out train driver duties.

2.8 Also, train drivers must also not be suffering from any medical conditions, or be taking any medication, drugs or substances which are likely to cause either:

- a sudden loss of consciousness.
- a reduction in attention or concentration.
- a sudden incapacity.
- a loss of balance or coordination; and,
- a significant limitation of mobility.

Doctors or medical assessors should consider these restrictions when carrying out the general medical examination.

2.9 Recognised doctors are required to have knowledge of railway operations so that they understand the physical requirements of a driver's role, including the functions they may have to carry out during an emergency situation, and are able to assess a driver's fitness accordingly. This knowledge must be sufficient to meet

recognised industry competency guidance for railway occupational health practitioners, including the ARIOPS competency framework, and must include an understanding of the railway operating environment, safety-critical duties, and relevant regulatory bodies. Some elements of the medical examination may be delegated to a medical assessor under the supervision of a recognised doctor (see paragraphs 2.14 -2.15).

What happens if a train driver needs a medical examination before their periodic examination is due?

TDLCR Schedule 1, Reg 3(1)(d)

2.10 A train driver must have an additional medical examination either:

- after an occupational accident or absence following an accident involving other people. Occupational accidents may occur when the driver is on driving duties or any other duties but in either case may have an impact on the driver's ability to meet the medical fitness requirements of TDLCR Schedule 1. In these circumstances we would expect that as result of the train operator's monitoring of the train driver's fitness, the driver would undergo a further medical examination; or
- if the employer considers it is necessary after either:
  - carrying out ongoing monitoring and management which has raised questions about the driver's fitness to drive;
  - the driver tells their employer that they have concerns about their own health which may call into question their fitness to drive trains;
  - following a period of extended sick leave;
  - a change in a driver's medication may trigger the need for a medical referral;
  - a GP or other doctor recommends that a recognised doctor carries out a further examination.
- an ORR-recognised doctor, acting in accordance with recognised professional standards and industry competence guidance, including from

The Association of Railway Industry Occupational Health Practitioners (ARIOPS), requires the train driver to have more frequent examinations;

- a driver has been removed from driving duties for safety reasons.

2.11 If a train driver passes an additional medical examination before their periodic examination is due but that additional examination does not include all the required elements of the periodic medical examination (see paragraph 2.5), then the date of the next periodic medical examination remains three years (or one year if the driver is 55 or older) from the date of the last full periodic medical examination. A complete periodic medical examination must be passed at the required frequency to ensure that all the conditions for holding a licence are still being met.

Pregnancy and train drivers

2.12 Train operators must consider whether any pregnant train drivers remain fit to carry out driving duties (for example where a pregnant train driver suffers from morning sickness to an extent which could affect their fitness to drive trains). If a train operator considers that the driver is not fit for driving duties, then temporarily removing the driver from driving duties must be considered.

2.13 When considering whether a pregnant driver is fit for driving duties, employers must apply relevant legal provisions under the Equality Act 2010 protecting them.

Who can carry out medical examinations?

TDLCR Reg 8(2)(d) & (3)

2.14 Medical examinations must be conducted or supervised by doctors who are on our register of recognised doctors. More information on recognition and our register can be found in Chapter 4.

2.15 Recognised doctors may use other specialist clinicians, known as medical assessors, in order to get the necessary information to make a clinical decision about the driver. A medical assessor (this may be a nurse or a doctor) who is not on our register may carry out medical examinations, but they must be under the supervision of a recognised doctor. A medical assessor does not have to be located in the same place as the recognised doctor, but we expect the medical assessor to have suitable access to the recognised doctor for advice,

interpretation, and medical opinion during examination of the train driver. Medical assessors must carry out all work to the satisfaction of the registered doctor who remains responsible for the examination.

2.16 The recognised doctor must sign and give the register number issued by us on the medical examination form for every train driver medical examination that is carried out by them or under their supervision.

What equipment and facilities should be used for medical examinations?

2.17 Any equipment that is used for a medical examination must be suitable for measuring the required parameters accurately and also be regularly maintained and calibrated where necessary. Facilities used to conduct medical examinations should also be appropriate for the examination being carried out. For example, hearing tests should be conducted in booths/rooms where there is no interference from external noise. The facilities should also ensure the driver's privacy and dignity throughout the examination. For example, it is not appropriate for confidential medical conversations to be overheard by others waiting outside an examination room.

2.18 We recommend that a recognised doctor follows the General Medical Council's guidance in its Good Medical Practice guide available on their website. Other guidance is also available published by the website of the Faculty of Occupational Medicine. We also recommend that hearing tests are conducted according to the British Society of Audiology guidelines and the relevant British Standards.

What information should be recorded in a medical examination?

2.19 The purpose of the medical examination is to assess whether the driver meets the medical standard set out in TDLCR Schedule 1 and we expect the medical examination to provide a record of this. We strongly recommend that information from medical examinations is recorded in a consistent way across train operators.

2.20 Regulation 17 of the TDLCR requires train operators to monitor the licenced train drivers they employ. They must immediately take any necessary action if they become aware of a failure to comply with the periodic or other required examination requirements, a driver failing an examination or test required by the regulations, or that the health of the train driver has deteriorated to a point where

the driver's fitness to drive trains is called into question. Further details are available in 'TDLCR 2010: Guidance for Train Operators' available on our website.

2.21 The recognised doctor should ensure that the outcome of a medical examination is clearly and promptly communicated to the train operator so that the train operator can take any necessary action. Medical findings, judgement and outcomes must be recorded and reached in accordance with the General Medical Council standards, occupational health good practice, and relevant railway industry competency guidance, including ARIOPS guidance for responsible doctors.

2.22 The doctor and any other clinician who may have contributed to the medical examination should record the actual test results as well as 'pass' or 'fail' against each element ready for the final review by the recognised doctor. If there are differences in clinical opinion following an examination these should be discussed and a final decision on the driver's fitness should be reached by the ORR-recognised doctor before the outcome of the examination is communicated to the train operator. The results of medical examinations form part of the employee health record and should include the clinical findings, any recommendations and decisions made on those findings by the recognised doctor, and the information given to the employee. These elements are further described in the Good Medical Practice document published by the General Medical Council, which is available on their website.

2.23 If a recognised doctor considers that a driver should seek their GP's advice on medical matters which are beyond the scope of the TDLCR medical examination, the reasoning for this should be clearly explained to the driver. In cases where there is doubt as to the driver's medical fitness to drive trains, the recognised doctor should make clear recommendations, for example whether further examinations and/or tests are required.

3. Auditing medical and occupational psychological fitness examination records

Summary

This chapter is about auditing the records on medical and occupational psychological fitness examinations.

What information should be retained for audit of records?

3.1 We expect that records relating to medical examinations will be maintained to facilitate clinical governance and quality assurance. This will support the application of consistent standards across the industry. These records should also be maintained over the validity of the licence to provide a continuous record and to avoid undue re-examination of drivers.

3.2 Guidelines on clinical records management can be found at:

- General Medical Council 'Good Medical Practice'
- British Psychological Society: 'Practice Guidelines'

3.3 RSSB also provides information on this in RIS-3751-TOM available on their website.

3.4 ORR supports the development of audit arrangements in respect of the medical examination and will encourage the industry to establish effective arrangements.

4. The recognition process for doctors and psychologists

Summary

This chapter is about the recognition process for doctors and psychologists. It explains:

- The criteria for recognition by ORR.
- The process for recognition.
- How ORR keeps its registers of recognised persons up to date.
- How recognised doctors and psychologists maintain competence.

What is the 'register of recognised persons'?

TDLCR Reg 23(1)

4.1 Under TDLCR, we are required to have and to keep up to date a register of persons we have recognised as competent to carry out the medical and occupational psychological fitness examinations. This is available on our website.

What are the criteria for recognition of doctors and what is the application process?

TDLCR Reg 23(3)

4.2 All applications for recognition must demonstrate to ORR's satisfaction that they meet the criteria of independence, competence and impartiality. The applicant must demonstrate they have met these criteria by providing satisfactory evidence of each of:

- Current registration as a medical practitioner with the General Medical Council.

- An appropriate qualification in occupational medicine.
- Experience of occupational health clinical practice.
- An understanding of all the duties of a train driver and experience of the work undertaken in a railway environment.
- Confirmation that the doctor will work to Schedule 1 of the TDLCR.
- Evidence that the doctor meets the competency guidelines issued by ARIOPS, including the competencies expected of a railway responsible doctor, or can demonstrate equivalent knowledge and experience verified through professional practice in the railway industry. The ARIOPS competency guidelines are:
    - Competency recommendations for Responsible Doctors status.
    - Accredited specialist in occupational medicine, on the specialist register of the GMC, or specialist registrar in an approved training post whose supervisor is also a railway responsible doctor.
    - Non-specialists who are not in training, but who hold the Associateship of the Faculty of Occupational Medicine (AFOM) or comparable qualification, may be considered responsible doctors on the basis of equivalent knowledge and experience in the railway industry that can be verified by a responsible doctor having specialist status.
    - Appropriate knowledge of the following:
        - Regulatory structure of the railway industry
        - Department for Transport (DfT)
        - Office of Rail and Road (ORR)
        - Rail Accident Investigation Branch (RAIB)
        - Rail Safety & Standards Board (RSSB)
        - Network Rail, Train operators, Freight companies, Track renewals and ancillary companies
        - Where relevant, knowledge of comparable EU organisations

4.3 We have published an application form for recognition and entry on to the register of doctors and this also sets out the information or evidence you should supply with your application. Doctors should use this form when making an application for recognition. This should be returned to TDL.Applications@orr.gov.uk with the subject line marked “Application to join the register of recognised doctors”.

What are the criteria for recognition of psychologists?

4.4 All applications for recognition must demonstrate to ORR's satisfaction that they meet the criteria of independence, competence, and impartiality. The applicant must demonstrate they have met these criteria by providing satisfactory evidence of each of:

- Holding a current British Psychological Society (BPS) Certificate in Occupational Testing (Level A).
- Current registration with the BPS.
- Understanding of the specific nature of work of a train driver on the railway and the railway environment (demonstrated either through employment at a recognised training and/or examination centre and understanding of train competency framework, or demonstrated through suitability for carrying out testing for train driver recruitment, as well as knowledge of train driver competency framework); and
- Confirmation that the psychologist will carry out the examinations in accordance with TDLCR, and the specific tests as recommended by RSSB's RIS-3751-TOM (or of demonstrable equivalence).

4.5 We have published an application form for recognition and entry on to the register of psychologists and this also sets out the information or evidence that should be supplied with the application. Psychologists should use this form when making an application for recognition. Completed applications should be returned to TDL.Applications@orr.gov.uk with the subject line marked "Application to join the register of recognised psychologists".

What happens once an application for recognition has been received by ORR?

4.6 Once we have received an application, we will review the information and carry out any checks to verify the information or evidence that has been submitted. We may ask the applicant to provide additional information to support the application. A separate Quality Management System guides our internal processes.

4.7 When we have reviewed all the information, we will write to the applicant with our decision. This will usually take approximately 3 weeks.

Receiving a letter confirming entry onto the register

4.8 Once a doctor or psychologist has received our letter confirming recognition, the doctor or psychologist may carry out medical or occupational psychological fitness examinations for train drivers. The letter of recognition will assign a reference number which must be included on the medical examination form and in all correspondence with ORR.

How long is recognition valid for?

4.9 There is no expiry date once a doctor or psychologist is entered on to our register.

4.10 However, we expect that doctors and psychologists should continue to be able to meet the conditions on which the recognition was originally granted. If there are changes in circumstances which may affect the ongoing ability of the doctor or psychologist to continue to meet the criteria for recognition, then the doctor/ psychologist **must** notify us promptly by emailing TDL.Applications@orr.gov.uk. Such circumstances may include retirement, a change in professional registration status or stopping working in the railway environment. We will consider this information and decide if the doctor or psychologist should remain on the register and confirm our decision in writing

Keeping information on the register up to date

4.11 The doctor or psychologist should inform ORR as soon as possible after any changes to the information that appears on our register (including changes to names or contact emails and address details of the practice) so that we can update the register accordingly.

Can ORR remove me from its registers?

4.12 We may decide to remove a doctor or psychologist from the register if we believe that they no longer meet the criteria for recognition, If this is the case, we will write to the doctor or psychologist concerned informing them of our decision and providing our reasons. The doctor or psychologist has the option to appeal under the process set out in Annex A.

What happens if I have not been granted recognition?

4.13 If we decide not to grant an application for recognition, our letter will set out the reasons. Depending on the reasons, the doctor or psychologist may decide to get

the necessary additional experience or training and make a subsequent application.

4.14 If the applicant believes that we should have granted recognition, then the applicant may appeal against the decision. The appeal process is set out in Annex A.

Annex A: Appeal process for refusal to recognise or against removal from the register of doctors or psychologists

1. This Annex outlines the process that we will follow when considering appeals against our decision to refuse entry onto the registers of recognised persons under regulation 23 of the TDLCR, or against a decision to remove someone from our register of recognised persons.

2. We will normally process these appeals within two months of receipt of all required paperwork.

3. Regulation 23 requires us to have, keep up to date, and publish, registers for doctors and psychologists recognised as competent to carry out functions in relation to the required medical and occupational psychological fitness examinations.

4. The appeal will be heard by persons not involved in the original assessment and decision to not recognise the person for the purpose outlined in regulation 23, or in relation to a decision to remove them from the register.

Receiving the appeal

5. You should address your appeal to ORR's Director of Railway Safety, and you will be sent an acknowledgement that your appeal has been received.

6. A case officer will be appointed to deal with your appeal and all contact with us on your appeal will be dealt with by this case officer.

7. A case team will be formed to review your appeal - this will consist of:

- The Director of Railway Safety (or their delegate) as the Chair;
- an ORR legal adviser.
- specialist advisors, if needed (e.g. independent doctor or psychologist etc.).
- your case officer.

Deciding to proceed

9. The case team will decide whether it will proceed with your appeal, and we aim to do this within 10 working days of receiving the appeal. Completing this within 10 days will depend on the quality and completeness of the appeal information submitted by you, and the 10-day period will not start until we have sufficient information to proceed.

10. Circumstances in which we may decide that we cannot proceed with hearing the appeal include:

    - The appeal concerns matters outside the remit of regulation 23 of TDLCR; or
    - The appellant has not provided us with sufficient information.

    Following the case team's first meeting, the case officer will write formally to the appellant with the outcome within 10 working days of the appeal being received.

The letter will set out either:

- That we will hear the appeal, how long the appeal will take and when a decision will be made;
- That we are minded to hear the appeal, but that we need further information from you at this point (this will have the effect of 'restarting the clock' on the time required to process the appeal); or
- That we have decided that the appeal is outside the remit of regulation 23

11. If we decide to hear the appeal, and to ensure that we can process the appeal within two months of receiving it, we will ask you to make any further representations to us within 20 working days from the issue of our letter to proceed with the appeal.

Hearing the appeal and making the decision

12. Once all your representations have been received, the case team should aim to reach a decision within a further 10 working days. This decision will be arrived at over the course of two formal, minuted case team meetings:

13. The first meeting takes place within 5 working days of all final information submissions being received. This meeting should discuss the representations and reach a position where a draft can be prepared by the case officer.

14. The second meeting takes place as soon as possible after the first (and at most within 5 working days) to agree and recommend a draft decision.

15. The minutes of the meeting will be made available to you, unless there is any reason where it is deemed inappropriate, and you would be advised of this.

16. Once the decision has been agreed, it is signed off by the Director or their delegated chair.

Informing you of the decision

17. The case officer will send a copy of this decision to you, along with a letter explaining what course of action is necessary (if any) following our decision.

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