

**DRIVER REHABILITATION PROGRAM REPORT (RCS 10-0099)**

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) directive describes data to be reported on Driver Rehabilitation Program activities at Department of Veterans Affairs (VA) medical facilities.
- 2. SUMMARY OF MAJOR CHANGES:** This directive contains updated procedures for capturing mandated annual workload data. The new procedure is an automated mechanism rather than the previous pen and paper system.
- 3. RELATED ISSUES:** VHA Directive 1173 and VHA Handbooks 1173.16 and 1170.03.
- 4. RESPONSIBLE OFFICE:** The National Director, Physical Medicine and Rehabilitation Program Office (10P4RP), is responsible for the contents of this directive. Questions may be referred to 202-461-7444.
- 5. RESCISSIONS:** VHA Directive 2009-015 dated March 17, 2009, is rescinded.
- 6. RECERTIFICATION:** This VHA Directive is scheduled for recertification on or before the last working day of July 2020.

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**DRIVER REHABILITATION PROGRAM REPORT (RCS 10-0099)**

**1. PURPOSE:** This Veterans Health Administration (VHA) directive describes data to be reported on Driver Rehabilitation Program activities at Department of Veterans Affairs (VA) medical facilities. **AUTHORITY:** 38 U.S.C. 3903(e).

**2. BACKGROUND:** VA's Driver Rehabilitation Program has a long history of providing skilled services to Veterans who need specialized evaluation, training and equipment to be successful and safe drivers. Monitoring of data relevant to this program ensures continued support and modifications when necessary. The data collected will be used at all levels in the planning and administration of the VA Driver Rehabilitation Program.

**3. POLICY:** It is VHA policy that all VA medical facilities with Driver Rehabilitation Programs approved by the Office of Rehabilitation and Prosthetics Services for the Disabled Veteran must complete the electronic VA Form 10-4790, Driver Training Program Report. The report must be accomplished on an annual basis and cover the period from October 1 to September 30. Report Control Symbol (RCS) 10-0099 is assigned to the report. **NOTE:** *The VA medical facilities with VA Driver Rehabilitation Programs as of 2014 are listed in Appendix A. VA Form 10-4790 is on the Intranet at <http://vaww.vhaco.va.gov/forms/driverrehab/default.asp>. This is an internal Web site not available to the public.*

**4. RESPONSIBILITIES:** The Director of each VA medical facility with a Drivers Rehabilitation Program will ensure that:

a. An electronic report on VA Form 10-4790 is submitted no later than October 31 following the end of the reporting period. **NOTE:** *The form contains a submit button which saves the data. Data can be edited as needed until the form is locked sometime after the end of the reporting period when all the reports have been obtained.*

b. Final numbers representing hours of service are rounded to the nearest whole number.

**NOTE:** *Instructions for completion of VA Form 10-4790, Driver Training Program Report, are incorporated in Appendix B. An example of the blank web page is included as Appendix C. Do not use earlier editions of this form. <http://vaww.vhaco.va.gov/forms/driverrehab/default.asp>. This is an internal Web site not available to the public.*

**5. REFERENCES:** None.

**LOCATION OF VA DRIVER REHABILITATION PROGRAMS**

- |                                       |                         |
|---------------------------------------|-------------------------|
| 1. Albany, NY                         | 25. Little Rock, AR     |
| 2. Albuquerque, NM                    | 26. Long Beach, CA      |
| 3. Ann Arbor, MI                      | 27. Memphis, TN         |
| 4. Atlanta, GA (Decatur, GA)          | 28. Miami, FL           |
| 5. Augusta, GA                        | 29. Milwaukee, WI       |
| 6. Baltimore, MD                      | 30. Minneapolis, MN     |
| 7. Biloxi, MS                         | 31. Oklahoma City, OK   |
| 8. Boston (Brockton/West Roxbury), MA | 32. Palo Alto, CA       |
| 9. Bronx, NY                          | 33. Philadelphia, PA    |
| 10. Butler, PA                        | 34. Phoenix, AZ         |
| 11. Castle Point, NY                  | 35. Portland, OR        |
| 12. Cleveland, OH                     | 36. Richmond, VA        |
| 13. Columbia, SC                      | 37. St. Louis, MO       |
| 14. Dallas, TX                        | 38. Salisbury, NC       |
| 15. Denver, CO                        | 39. Salt Lake City, UT  |
| 16. Des Moines, IA                    | 40. San Antonio, TX     |
| 17. East Orange, NJ                   | 41. San Juan, PR        |
| 18. Leavenworth/Topeka, KS            | 42. Seattle, WA         |
| 19. Hampton, VA                       | 43. Sepulveda/GLA, CA   |
| 20. Hines, IL                         | 44. Syracuse, NY        |
| 21. Honolulu, HI                      | 45. Tampa, FL           |
| 22. Houston, TX                       | 46. Tucson, AZ          |
| 23. Indianapolis, IN                  | 47. Washington, DC      |
| 24. Lexington, KY                     | 48. West Palm Beach, FL |

**INSTRUCTIONS FOR COMPLETION OF REPORT - RCS-10-0099**

a. **Preparing Offices.** Electronic VA Form 10-4790, Driver Training Program Report, must be prepared and submitted by all Department of Veterans Affairs (VA) medical facilities designated as Driver Rehabilitation Centers.

b. **Instructions for Preparation of Report.**

(1) **Access to Electronic Form.** The form can be found at the following intranet address: <http://vaww.vhaco.va.gov/forms/driverrehab/default.asp>; it can be accessed through the Program Specialist Portal on that page. **NOTE:** *This is an internal VA Web site and is not available to the public.* Individuals must be granted access to the site. Access can be granted by Bill Wenninger MS PT Rehabilitation Planning Specialist, Rehabilitation Program Office, Office of Prosthetics and Rehabilitation Services, [Bill.Wenninger@va.gov](mailto:Bill.Wenninger@va.gov) or 414-384-2000 extension 41104. **NOTE:** *An example of the blank web page is attached to this document.*

(2) **Notes on Data Entry.**

(a) Line 1 will automatically be completed based on the previous year's data entry.

(b) Line 2a (Pale yellow background). Data cannot be directly entered in this line. It will be automatically calculated based on what is entered into line 2c and 2d. Data will only be automatically entered after the "submit" button is clicked at the bottom of the form.

(c) Total Column (Pale yellow background). Data cannot be directly entered into this column. It will be automatically calculated across the lines based on the numbers entered. Data will only be automatically entered after the "submit" button is clicked at the bottom of the form.

(d) Sum of data entered under disability groups in Line 2b and 2c must equal the sum of data entered in Line 2 d and 2e. There is a data correction feature built into the data capture mechanism which will alert the individual entering the data of a possible error. This will only be apparent to the individual entering the data after the "submit" button is clicked at the bottom of the form.

(e) The "submit" button saves the data. Even though the data has been submitted, it can continue to be edited. The data will be locked (at which time it can no longer be edited); however, this will not happen until later in the fiscal year when all VA medical facilities have completed the report.

c. **Diagnosis and Disability.** It is important that all recorded information on a patient be directed to the diagnosis or disability which best explains why the patient is receiving driver rehabilitation. In other words, a patient may be diagnosed as "Diabetes Mellitus," but a resulting amputation of a lower extremity is the reason for needing the driver rehabilitation instruction. Therefore, this patient would be

included in the category "Amputation." The physician's or driver rehabilitation specialist's judgment will determine whether the schizophrenic patient with an amputated leg shall be placed in "Psychiatric" category or "Amputation" category. Patients with multiple disabilities, e.g., stroke, plus left lower extremity amputation, needs to be listed as "Other," and a brief explanation noted in "Comments." A consistent decision must be made locally as to the one category used for reporting purposes. The diagnosis or disability categories include the following:

(1) Spinal Cord Injury, which includes paraplegic and tetraplegic disabilities.

(2) Hemiplegia, which includes right or left cerebral vascular accident (CVA) and other neurological impairments resulting in hemiplegia except traumatic brain injury which is reported separately.

(3) Traumatic Brain Injury (TBI) often causes complex disabilities that may include one or more of the following: physical (upper and/or lower extremity movement disorder, including hemiplegia), sensory (visual and hearing impairment), cognitive (memory, attention, and executive function), and emotional/behavioral (impulsivity, irritability). All these areas of function have to be addressed when determining the Veteran's driving training needs.

(4) Other Neurological, which includes multiple sclerosis, muscular dystrophy, Parkinson's disease, etc.

(5) Amputation, including transhumeral, transradial, transfemoral, transtibial, etc.

(6) Orthopedic, which includes most orthopedic-related conditions, total joint replacement, major fracture, fused joints, etc.

(7) Psychiatric, which includes Veterans with mental health conditions such as post-traumatic stress disorder, etc.

(8) Other, which covers any condition that does not fit the preceding disability or diagnostic patterns.

d. **Patients Carried Over From Last Report (Line 1).** This item should include, by diagnosis, only the number of patients who were listed on your previous annual report in the category of: "Training Still in Progress." This will automatically be entered into the electronic form based on last year's entry.

e. **Patient Status (Line 2).** New consultations are those patients entering the program within the particular reporting period. Be sure to mark all appropriate blocks, when applicable; e.g., "outpatient," "service-connected," on each new consultation. The line items (including inpatient and outpatient status and service-connection) refer only to the "new consultations." Such information on patients carried over from the previous reporting period should not be included. See earlier note on data entry for lines 2a through 2e.

f. **Number of Driver Rehab Visits (Line 3)**. The term "visits" refers to the physical presence of a patient in the driver rehabilitation program in one day. The patient may receive more than one phase of training (e.g., classroom education, simulator training, etc.) one or more times in a day, or the patient attends a morning session and then returns in the afternoon or evening, only one visit will be counted that particular day.

g. **Total Driver Rehab Hours (Line 4)**. The total driver rehabilitation process is divided into phases. It is important, for administrative purposes, to be able to differentiate among the various phases. Record, rounding off to the nearest whole number of hours, the amount of driver rehabilitation specialist's time provided in the following categories:

(1) **Assessment for Driver Rehab (Line 4a)**. This category includes patient interviews, charting history, visual testing, muscle testing, reaction times, neuro-sensory testing, etc.

(2) **Patient, Family and Staff Education (Line 4b)**. This includes classroom education, rules of the road, activities of daily living, simulator experience, in-service training, and information given to patient, staff and/or family concerning driver rehabilitation and vehicle maintenance, etc.

(3) **Behind-the-Wheel Training (Line 4c)**. Include on the road (or training course) experience in either automobile or van.

(4) **DMV Licensing (Line 4d)**. Includes the time necessary for the patient to take the written and road examination, vision and hearing tests, etc. (or if the driver rehabilitation specialist has to visit the local Department of Motor Vehicles for any reason).

(5) **Evaluation of Patient or Equipment (Line 4e)**. Includes the time taken to evaluate the patient using certain equipment or the evaluation of their personal driving equipment or vehicles, as well as pre- and post-adaptive vehicle clinics.

(6) **Administrative Hours (Line 4f)**. The hours spent that are not directly involved in patient care or family/staff education concerning driver rehabilitation or vehicle modification. These hours should not ordinarily be more than 20 to 25 percent of the hours administering the Driver Rehabilitation Program.

h. **Number Not Completing Program (Line 5)**. For whatever reason, the patient did not complete the Driver Rehabilitation Program.

i. **Number Receiving State License and/or Certificate of Training (Line 6)**. All patients successfully completing the Driver Rehabilitation Program should receive, or be eligible to receive, a VA Certificate of Training. "Successful completion" does not necessarily mean the patient had to receive a state driver's license after completing the course. Oftentimes, the patient already has a valid license to drive in a particular state prior to taking the course. If the patient decides

to be examined by the State Department of Motor Vehicles and receives a license, this information is to be recorded in this same block.

j. **Number of Patients Discharged (Line 7).** Include all the patients that were discharged from the program whether or not they received driver training or just equipment evaluations or personal driving assessments.

k. **Training Still in Progress (Line 8).** Patients who are still in the training process at the end of the reporting period will, of course, be carried over to the next reporting period. **NOTE:** *This data will then be automatically entered into the line 1 "Number of patients carried over from last report" in the next fiscal year report.*

l. **Average Hours per Week Instructor Involved in Driver Rehabilitation Activities (Line 9).** Indicate to the nearest whole hour the average amount of time the driver rehabilitation specialist(s) devoted to the Driver Rehabilitation Program during the week. This time allotment includes actual patient instruction, program planning and promotion, vehicle and equipment maintenance duties, and administrative duties appropriate to the program.

m. **Total (farthest column to the right).** As mentioned earlier, the data will be summed across the lines automatically when the "submit" button is clicked.

n. **Comments.** If more than one driver trainer contributed workload to this report, please include the name of the individual here. Additionally, an explanation of the diagnoses in the other category should be included here. Other information such as constructive criticism, program needs, ideas for improvement, or other pertinent information which would help improve the program or reporting system can be included in this block.

### DATA ENTRY PAGE FOR DRIVERS TRAINNG PROGRAM REPORT

Cells of the color on the left are computed fields. They will be updated once "Submit" is clicked. Cells in red may contain an error. Please review them.

| Instructions  | Specialist  | From          | Control Symbol | Status   | Fiscal Year |
|---|---|---------------|----------------|----------|-------------|
| Complete this form and click the "Submit" button and the end. You must complete this form no later than October 31st following the end of the reporting period. <b>** All numbers are required. You must enter at least a zero.</b> | Bill Wenninger<br><a href="mailto:Bill.Wenninger@va.gov">Bill.Wenninger@va.gov</a><br>vha12\Vhamiwennib | Bill location | 10-0099        | Unlocked | 2013        |

|   | Spinal Cord Injury | Hemiplegia | Traumatic Brain Injury (TBI) | Other Neurological | Amputation | Orthopedic | Psychiatric | Other (Describe) | Total |
|---|--------------------|------------|------------------------------|--------------------|------------|------------|-------------|------------------|-------|
| 1. Number of patients carried over from last report                               | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| <b>2. Patient status</b>  |                    |            |                              |                    |            |            |             |                  |       |
| a. Number of new consultations  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| b. Number of inpatients   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| c. Number of outpatients  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| d. Number of service connected  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| e. Number of nonservice connected   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 3. Number of driver rehabilitation visits   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| <b>4. Total driver rehabilitation hours</b>                                       |                    |            |                              |                    |            |            |             |                  |       |
| a. Assessment for driver rehabilitation   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| b. Patient / Family / Staff education   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| c. Behind the wheel training  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| d. DMV licensing  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| e. Equipment / Patient evaluation   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| f. Administrative hours   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 5. Number not completing program  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 6. Number receiving state license / certificate of training                       | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 7. Number of patients discharged  | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 8. Training still in progress   | 0                  | 0          | 0                            | 0                  | 0          | 0          | 0           | 0                | 0     |
| 9. Average hours per week instructor involved in driver rehabilitation activities | 0                  |            |                              |                    |            |            |             |                  |       |
| Comments:   |                    |            |                              |                    |            |            |             |                  |       |

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