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Mr Patrick O'Brien
Secretary
Legislative Council Economy and Infrastructure Committee

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Dear Mr O'Brien,

Inquiry into the Increase in Victoria's Road Toll

I write in response to the Parliament of Victoria's Legislative Council Economy and Infrastructure Committee's *Inquiry into the Increase in Victoria's Road Toll*.

As the leading advocate for surgical standards, professionalism in surgery and surgical education in Australia and New Zealand, the Royal Australasian College of Surgeons (RACS) is committed to taking informed and principled positions on issues of public health at both state and federal levels. RACS represents more than 7000 surgeons and 1300 Surgical Trainees and International Medical Graduates (IMGs) across Australia and New Zealand.

RACS has long recognised that road trauma is a serious public health problem of epidemic proportions. In the 1960s surgeons identified that they could be influential in this area with policy makers and legislators. RACS has been a major contributor and advocat of mandatory seat-belt wearing (1970s), drink driving countermeasures and the compulsory wearing of helmets by cyclists (1980s to 1990s). RACS demonstrated significant leadership through advocating for mandatory seatbelts usage resulting in legislative change. Victoria was the first State in the world, to introduce compulsory fitting and wearing of seatbelts (22 December 1970) followed by the rest of the country and world. Although there was no strong evidence base at the time that this legislation would reduce

the number of road deaths, common sense prevailed and, as a result, road deaths in Victoria reduced steadily and significantly from 1970.

The Victorian State Committee and Victorian Trauma Committee of RACS are pleased to see an inquiry into the rising road toll and would like to offer the following comments on the terms of reference:

(1) current Victorian Towards Zero Road Safety Strategy 2016-2020 and progress towards its aim of a 20 per cent reduction in fatalities with 200 or less lives lost annually by 2020;

The *Toward's Zero* Strategy is clearly not on target with 253 lives already lost on Victorian roads, and several more fatalities and serious injuries likely during the 2019 holiday period. The Strategy itself requires a full review to determine which aspects have had a positive impact and a new strategy developed using evidence-based approaches.

The future Victorian Road Safety Strategy should also include a focus on reducing serious injury on the road. There has been no reduction in serious injury cases over the past decadeⁱⁱ and the lack of reporting on these cases underplays the overall impact of road trauma in Victoria and means that the "ripple effects" go unrecognised. Reporting on serious injury should include the number of people affected and the costs of that injury (including the ongoing, long-term impacts).

Victoria has historically been a world leader in road trauma reduction and future Strategies must adopt strong and ambitious tactics. Clear targets for trauma reduction within well-defined timeframes are essential, as is the adoption of ambitious and proactive policies (such as those seen in the 1970's).

(2) adequacy and scope of the current driver drug and alcohol testing regime;

Drug and alcohol testing should be as aggressive as possible with zero tolerance for those caught driving under the influence. Current approaches to drug and alcohol testing are good but funding needs to be provided to expand the reach and frequency of testing on the roads.

RACS supports blood alcohol testing for all road casualty patients 16 years or older attending hospital for treatmentⁱⁱⁱ. National (whole of nation) harmonisation of BAC limits for different driver/vehicle categories (heavy vehicle/motor cyclists, L and P plate drivers 0.00 per cent, light vehicle drivers 0.05 per cent) would be a major step forward in protecting road users and reducing serious injury numbers and costs.

Support should also be given for a program to test all people involved in a road crash (deceased and surviving) and screening of recent use of alcohol and drugs for all survivors. Strong data about the prevalence of alcohol and drug use whilst driving will enable better responses to be developed and provide a clear understanding of the scale to which alcohol and drugs contribute to road trauma. Data collection should also be extended to all road users involved in accidents (including pedestrians and cyclists).

(3) adequacy of current speed enforcement measures and speed management policies;

Victoria's approach to speed enforcement and management differs substantially across the state. Different planning laws and competing state and local government priorities can frustrate attempts to implement safety measures.

RACS supports appropriate speed limits^{iv} when there are people about, particularly school zones. Pedestrians are the most vulnerable of all road users. These include:

- 40 km per hour limits on suburban roads and high pedestrian areas (in metropolitan, regional and rural areas),
- 15 km per hour limits on all shard paths,
- 10 km per hour limits in all shopping centre and public car parks (anomalies in current legislation allows for the speed limit of the adjacent road to apply in the car-par meaning that car park speed limits may be 50 kmh or above).

RACS also supports increasing point to point camera infrastructure and standardising use for passenger and heavy vehicles across all jurisdictions. This infrastructure should encompass major whole of road corridor, not just black spots. Current jurisdictional variances^{vvi} mean that, where cameras exist, not all vehicle types are being monitored, this could be facelifted with the press of a button. If the technology is available to target speed and significantly reduce the road toll, it should be utilised. Public safety, reduction in road deaths, and serious injury through all available technologies requires long term goal setting which should not be disrupted by the election cycle. vii .

Better data and reporting on the location of serious crashes (those resulting in a death or serious injury) linked to the road and other conditions (speed zone, road quality, location, drug and alcohol use, weather etc.) would allow for detailed examination of association and improve response measures.

(4) adequacy of current response to smart phone use, including the use of technology to reduce the impact of smart phone use on driver distraction;

Distraction is a serious and growing challenge to road safety. It is increasingly emerging as a factor in fatal road crashes over the past decade. A strong signal is needed to raise the awareness of the danger of distraction on the roads. The real effect and implications of distraction (any activity that could divert a person's attention away from the primary task of driving or walking safely) in road trauma and serious injury could be more comprehensively understood through collection of relevant data.

Currently no Australian trauma centre registries collect data on distractions associated with road-related admissions. Intelligent transport systems (ITS) technology which can record mobile phone use while driving may assist future data collection. Improved data collection methods at crash sites (to record mobile phone use at the time of the crash) may also help. It is clear that a collaborative approach to data collection is needed to accurately quantify the involvement of distractions in road related traffic crashes.

Distraction is a serious and growing challenge to road safety, and it is increasingly emerging as a factor in fatal road crashes over the past decade. A strong regulatory system that is adaptive and agile enough to keep pace with the rapidly changing technological landscape is needed.

Mobile phone use by drivers is underestimated and current penalties are not sufficient to deter drivers from using them. Considerable work needs to be done to change public attitudes towards mobile phone use while driving. Behaviour change, similar to that seen in the seatbelts and drink driving campaigns, is required to affect real change on the roads. Victoria should adopt mobile phone detection cameras, such as those recently implemented in New South Wales, as a priority. The intellectual property for the cameras in NSW, and the preferred tender for wide-scale roll-out, is Victorian based company <u>Acusenus</u>, led by Managing Director Stephen Jannick. RACS recommends that the Committee engage with this company regarding the technology and it's use across Victoria. The implementation of this technology paired with increases in the penalties attached to mobile phone use, would provide strong deterrents to drivers against continued use.

Consideration also needs to be given to other technologies, such as smart watches, and how these are being managed. Many of these devices can now operate independently of a phone so send and

receive messages, make phone calls or check other Apps and are just as distracting and dangerous as mobile phone use.

In addition to strengthening penalties the Government should consider an appropriate rewards system for drivers who do not receive demerit points or fines for a given period. The cost of registration and licence renewal is increasing and is often a source of frustration for many people. Appropriate discounts on these costs could also act as a significant incentive to do the right thing.

(5) measures to improve the affordability of newer vehicles incorporating driver assist technologies;

As most road trauma is the result of impact or vehicles leaving the road rolling and/or collision, it is self-evident that aiming to prevent this has the potential to save up to 60 per cent of deaths which, at the moment, are a direct result of momentary failure of human cognitive and motor skills^{viii}. Removing tariffs on all imported vehicles with enhanced safety features could potentially initiate a market shift resulting in an immediate win for public safety without having to wait for policy change.

Fiscal factors should also be considered to encourage people to purchase safer cars. A comparison of ANCAP safety ratings for a 2018 Great Wall Ute compared to a 2018 Ford Ranger, show the former achieves only two stars whilst the Ranger has received the maximum five stars. However, with a more than \$10,000 price difference between them the safer option can become unaffordable. Subsidies on the purchase price of five-star safety rating cars and/or reductions in registration costs could act as a strong incentive for people to choose cars with safety technologies.

(6) adequacy of current road feature specifications standards and the road asset maintenance regime;

Road maintenance and improvement programs must take a holistic approach. Any strategy to improve road conditions must include road quality, visibility, driver distraction, safety barriers, emergency stopping areas, rest areas and any other aspects that may impact on safe driving.

(7) adequacy of driver training programs and related funding structures such as the L2P program;

Driver training programs should be mandatory for all new drivers and other at-risk groups including the elderly, those recovering from significant illness or injury, following drink or drug driving offences and when returning from licence suspension.

(8) adequacy and accuracy of road collision data collection

Strong data collection is vital to improving road safety. In order to fully recognise the impact of road trauma and serious injury, data needs to move quickly through a mutually agreed upon and recognised authority / system. Serious injury data from all relevant agencies (including health) needs to be appropriately aggregated in a timely manner and handed to the appropriate authority. Integration of data from various agencies is currently not being accessed or provided to existing collection points and thus is inhibiting the understanding of the full scope of the impact of serious injury.

Geospatial (latitudinal and longitudinal) information on crash statistics should be captured and disseminated quickly to relevant agencies to allow adequate response strategies to be implemented and inform future planning.

Data collection also needs to include new technologies, such as vehicle on board diagnostic systems. With increasing technology many cars record operational aspects of the vehicle and can provide insight into system failures, speed, brake usage and other aspects prior to a serious crash.

There needs to be timely multiple-agency serious injury data capture, collation, release and sharing within integrated agencies. This will fill the information gaps inherent in the current system. There is currently a significant time lag between incidents occurring and relevant data becoming available for analysis. This prohibits monitoring the outcomes of road safety efforts, determining the effectiveness of implemented programs and developing appropriate policies

Data linkage between key agencies is essential. Support needs to be provided to encourage all states and territories to collaborate and report the incidence of serious injury. This should include data from:

- Ambulance services
- Hospitals and emergency departments
- Police
- Insurance companies

Data linkage is essential to gauge the impact of road trauma and serious injury on the Australian economy and society. States and territories should be required to provide evidence of the outcomes from initiatives that led to reduced deaths and serious injuries. Because of this lack of integrated reporting of road trauma and serious injury there is still no clear means to determine the contemporary costings of the health journey.

Additional Information

In addition to the above responses, RACS would also like to urge the Victorian Government to continue to play a key role in advocating and achieving improved road safety measures at a national level. Each year across Australia more than 1,200 people are killed and 44,000 are hospitalised. This can only be described as a national epidemic which demands strong and proactive leadership and close collaboration between all levels of Government and within our communities.

While RACS welcomes this inquiry, many of the solutions to reducing Australia's devastating road toll and creating safer roads have already been identified, and there is a growing sense of frustration at the delays taken to implement proven life-saving initiatives. This was highlighted in the Inquiry into the National Road Safety Strategy 2011-2020, as well as the recently released report in to <u>Reviving Road Safety Report</u> developed by the Australian Automobile Association (AAA).

The *Reviving Road Safety* report outlines a number of solutions that can be implemented to deliver better outcomes and significantly improve road safety. RACS endorses these solutions in full and requests that they been taken in to account as part of this Inquiry.

State Trauma Committee

Since the development of the Victorian State Trauma System in 2000, the State Trauma Committee (STC) has played a pivotal role in the monitoring and maintenance of the State Trauma System. As part of this work, the STC has provided advice on system performance and policy development, and guidance regarding research and trauma guideline development. The STC allows the key stake holders responsible for the prevention and management of injury in Victoria to work in a collaborative fashion. This includes representation from the Department of Health and Human Services, the transport Accident Commission, the Victorian State Trauma Registry and medical care providers, from prehospital services through to rehabilitation.

In October 2018, the STC convened for a strategic planning meeting. An increase in the proportion of major road trauma occurring in vulnerable populations (motorcyclists, pedal cyclists and pedestrians) was identified as one of a number of emerging issues and was recognised as an area requiring prioritisation in regard to prevention and management. Unfortunately, the STC has not been reconvened since the November 2018 state election. The reinstatement of the STC would allow this important group to continue the work it has been doing for nearly twenty years, including addressing the issue of the increasing road toll through facilitating collaboration between the key agencies. A Draft Report from this meeting was produced by the Department but is not yet published.

RACS appreciates the opportunity to comment on this Inquiry. We hope the above information is meaningful and useful and we look forward with strong interest to seeing how the consultation progresses with this significant issue. If you would like to discuss anything in this submission further please contact us via the RACS Victorian State Office.

Yours sincerely

Ms Susan Shedda, FRACS

Chair, Victorian State Committee

Royal Australasian College of Surgeons

Mr Christian Kenfield

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Chair, Victorian Trauma Committee

Royal Australasian College of Surgeons

ⁱ Department of Transport, Office of rad safety, Road traffic Accident Data and Rates: Australia, States and Territories 1925 to 1981 (page 2) https://infrastructure.gov.au/roads/safety/publications/1984/pdf/Stats_Aust_1.pdf

[&]quot; https://www.mja.com.au/system/files/issues/207_06/10.5694mja17.00015.pdf

iii RACS position paper, Trauma Prevention 2017 https://www.surgeons.org/media/348313/2017-04-12 pos fes-fel-047 trauma prevention.pdf

^{iv} RACS position paper, Road Trauma Prevention 2015 https://www.surgeons.org/media/297093/2015-09-09 pos fes-fel-046 road trauma prevention.pdf

Y New South Wales point to point speed cameras http://www.rms.nsw.gov.au/business-industry/heavy-vehicles/safety-compliance/speeding-camera-enforcement/point-to-point-cameras.html

vi Victoria fixed camera systems https://www.camerassavelives.vic.gov.au/camera-locations/camera-systems#PenLink

vii Wellington Times "Point-to-point cameras won't be used to monitor cars in NSW', 7 February 2018 https://www.wellingtontimes.com.au/story/5214021/point-to-point-cameras-wont-be-used-to-monitor-cars-in-nsw/

viii 2015 Victorian Road Trauma Analysis of Fatalities and Serious Injuries Updated 5 May 2016 https://www.vicroads.vic.gov.au/safety-and-road-rules/safety-statistics/crash-statistics
Annual trauma reports – 2015 Victorian Road trauma - Analysis of Fatalities and Serious Injuries Updated 5 May 2016 pdf page 4