Mr Pat Conaghan MP
Chair, Joint Select Committee on Road Safety
Member for Cowper
c/- The Committee Secretariat, Department of the Senate
PO Box 6100 Parliament House
Canberra ACT 2600

Dear Mr Conaghan,

**Learnings from government responses to COVID-19 and road safety**

Representing thirteen organisations with a dedicated interest in road safety, we would like to make an urgent submission to the Joint Select Committee on Road Safety, given the parallels and learnings that have come from the Commonwealth and state and territory government responses to COVID-19.

We understand that this correspondence is beyond the Committee’s official closing date for submissions, however the circumstances and response to COVID-19 provide positive lessons and opportunities that have occurred since submissions closed, including:

- precise, consistent, and timely data collection and reporting
- cooperation by all levels of government driven by national leadership and coordination
- consistent and ongoing public focus driven by all political leaders and senior bureaucrats
- success at changing social behaviour and engaging media and other communications channels.

The COVID-19 pandemic has brought unprecedented threats to the health, wellbeing and economic stability of Australia and its people.

While the Parliament’s current focus is on addressing the urgency of the pandemic, there are great lessons to be learned from Australia’s COVID-19 response that can, and should, be applied to other public health crises. This includes their urgent application to the next National Road Safety Strategy, currently under development and to be agreed in the coming months.

Given your Committee is charged with making recommendations for the next National Road Safety Strategy, we strongly urge the Committee to make it a priority to investigate how learnings from government responses to COVID-19 could be applied to road safety strategies.

We understand that federalism brings a unique set of challenges for the Commonwealth, particularly with respect to responsibilities of government typically held by states and territories. However, in the face of two of the most substantial crises our nation has faced in recent times – the 2019/20 summer of bushfires and the COVID-19 pandemic – Commonwealth, state and territory governments have overcome barriers presented by federalism to respond on a truly national scale.
Through political will and decisive action, the Commonwealth has stepped into areas typically seen as the purview of states and territories. The benefits of Commonwealth leadership have been clear to the Australian public. Consistent with the recommendations of various recent inquiries and reviews, the Commonwealth now can replicate this action within a National Road Safety Strategy.

As the Joint Select Committee on Road Safety is already aware, road trauma is a public health crisis. Close to 1,200 Australians are killed and around 44,000 are hospitalised as a result of road trauma every year. The true human impact of these injuries is revealed in an estimated 2,700 people who suffer brain injuries, 5,900 who suffer limb fractures and 10,000 who suffer soft tissue injuries every year. Prior to the travel impacts of the bushfires and restrictions imposed by COVID-19, progress in reducing these numbers had stalled; and your Committee would be aware that data is still not collected for benchmarks set by governments almost ten years ago.

One of the great successes of Australia’s response to COVID-19 is that, within a matter of weeks, there has been an ability to collect and provide almost real-time standardised data at a granular level on a wide range of indicators. The Department of Health’s reporting of aggregated data from states and territories across a range of measures has been truly commendable. It has meant the public has access to real-time data on indicators such as infection rates, recovery and death data, hospitalisation, ICU admissions and testing undertaken.

Unfortunately, as seen in the chart below, it is in stark contrast to the collecting and reporting of road safety data, despite governments across Australia having committed to these indicators being key measures of the signed almost ten years ago.


<table>
<thead>
<tr>
<th>COVID-19: What we measure #</th>
<th>Road safety: What we cannot measure</th>
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<tbody>
<tr>
<td>Daily number of reported cases, including analysis of national rate of increase</td>
<td>Number of serious injuries resulting from road crashes *</td>
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<tr>
<td>Current status of confirmed cases – cases; deaths; cases recovered, broken down by jurisdiction</td>
<td>Number of people hospitalised as a result of road crashes</td>
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<tr>
<td>Current cases admitted to hospital, broken down by jurisdiction</td>
<td>Number of people recovered after being hospitalised as a result of road crashes</td>
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<tr>
<td>Current cases in intensive care units, broken down by jurisdiction</td>
<td>Data on the state of the road network, including safety ratings</td>
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<tr>
<td>Total tests conducted and percentage positive, broken down by jurisdiction</td>
<td>Publicly available geospatial data on traffic crash locations, including any clusters of crashes</td>
</tr>
<tr>
<td>Cases in aged care services – recovered; deaths – broken down by jurisdiction</td>
<td>Enforcement data on traffic offences, including speed; drink and drug driving; distraction</td>
</tr>
<tr>
<td>Cases by age group and sex</td>
<td>Enforcement data on testing undertaken, including speed detection; BAC and drug testing; mobile phone detection</td>
</tr>
<tr>
<td>Deaths by age group and sex</td>
<td>Licencing data, including numbers of licence holders; licence disqualifications; recidivist offenders</td>
</tr>
<tr>
<td>Cases by source of infection</td>
<td>Number of deaths from crashes where speed was a contributory factor *</td>
</tr>
<tr>
<td>Public health response measure – cases under investigation, broken down by jurisdiction</td>
<td>Mean free speeds at designated sites across the network *</td>
</tr>
<tr>
<td>Median age of cases and median age of deaths</td>
<td>Percentage of vehicles speeding by vehicle type and offence category *</td>
</tr>
<tr>
<td>Trauma management capacity, including staffing, infrastructure and equipment</td>
<td>Percentage of new vehicles sold with key safety features *</td>
</tr>
</tbody>
</table>

# Commonwealth Department of Health reporting updated daily based on the data received from states and territories.

* Agreed in 2011 by Commonwealth, state and territory governments as a key indicator in the National Road Safety Strategy 2011-2020.
Australia has placed timely data collection, aggregation and reporting at the forefront of its response to the COVID-19 pandemic. We believe there are some fundamental principles which have guided Australia’s COVID-19 data response which should be applied to road safety and embedded in the next National Road Safety Strategy:

- Governments are unambiguous that the data is essential to respond to the situation.
- Governments release data and modelling to the public for transparency.
- There is strong communication on the link between the data and decision-making.
- The Commonwealth continues to paint and explain an overall picture even if there are gaps from jurisdictions and does not cease reporting on something because not all data is present.
- Government decision-makers keep an open mind to evolving knowledge on the situation – they admit they don’t have all the answers yet and have an expectation that the data will continue to improve over time to assist with management of the situation.
- Transparent reporting means that jurisdictions can be benchmarked, creating an expectation that they will participate or become a stand-out that must be explained.

The purpose of this submission is not to elevate or relegate one health challenge over another. We understand that unaddressed, COVID-19 provides unparalleled health, economic and social challenges to Australia.

However, driven by federal leadership, the focus and unity-of-purpose of collective levels of government on setting key goals to “flatten the curve” – and to routinely report and monitor the success of that “flattening” – should also have a parallel application to addressing road safety.

While Commonwealth, state and territory governments have committed to both flattening the curve and reporting on progress for COVID-19, the same is not the case for road safety.

The chart below shows the Federal Government’s own projections for road fatalities and injuries to 2030 as presented to the Federal Government’s Road Safety Roundtable in September last year, instigated and attended by the Minister for Infrastructure and Transport along with the Assistant Minister for Road Safety.

Between now and 2030, the Federal Government’s own projections show a surge in hospitalised injuries from road crashes to over 50,000 Australians injured every year; along with a projected steady increase in the more than 1,000 Australians killed annually, not a decline or “flattening”.

![Long term trends and projections for road deaths and hospitalised injuries](BITRE, 2 September 2019)
We would like to encourage the Committee, as a matter of urgency, to investigate and make recommendations on the learnings and parallels from COVID-19 and how they may apply to the next National Road Safety Strategy currently being developed by the Office of Road Safety, particularly in the areas of:

- precise, consistent and timely data collection and reporting
- co-operation by all levels of government driven by national leadership and coordination
- consistent and ongoing public focus driven by all political leaders and senior bureaucrats
- success at changing social behaviour and engaging media and other communication channels
- our future trauma management capacity for the predicted increase in crash injuries.

Each of the above issues is within the Committee's terms of reference; and each provides critical learnings that could be applied to the next National Road Safety Strategy.

We believe the effectiveness of the next National Road Safety Strategy can be maximised with better understanding of how the Commonwealth and state and territory governments have urgently co-ordinated their COVID-19 responses; how they have elevated the issue as a priority health challenge; how they are collecting and regularly reporting on consistent data to help measure progress and immediately identify areas of concern; and how they have effectively communicated messages about the potential fatal consequences and the need for behavioural change.

Yours sincerely

Australian Automobile Association
Mr Michael Bradley, Managing Director

Australasian College for Emergency Medicine
Dr John Bonning, President

Australasian College of Road Safety
Mr Martin Small, President

Professor Michael Reade, President

Australasian Orthopaedic Association
Dr Andrew Ellis, President

Australian Trucking Association
Mr Ben Maguire, Chief Executive Officer

Australian Motorcycle Council
Mr David Wright, Vice Chairman

International Road Assessment Programme (IRAP)
Mr Rob McTernery, Chief Executive Officer

National Road Safety Partnership Program
Professor Barry Watson, Independent Chair

Royal Australasian College of Surgeons
Dr Tony Spornon, President

Roads Australia
Mr Michael Kilgariff, Chief Executive Officer

Towards Zero Foundation
Mr Lauchlan McIntosh, Chairman

Safer Australian Roads and Highways Inc
Mr Peter Frazer, President