Submission No 23

## **REVIEW OF ROAD SAFETY ISSUES FOR FUTURE INQUIRY**

Organisation: Pearson

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The Australian Institute of Family Studies¹ states that "ageing is generally considered to be the most dramatic" of all the projected changes in our population. Older drivers' relative fragility leaves them more vulnerable to serious injury or death in a crash than younger people and their numbers are expected to grow substantially as our population ages. By 2020 the National Road Safety Strategy² aims to achieve "A best practice framework for the assessment of older drivers' fitness to drive" with progress assessed by the number of older driver deaths.

Australian and international research<sup>3</sup> shows little evidence that currently utilised medical evaluation of older drivers is effective in reducing their crash risk. It imposes a burden on the older community without commensurate road safety benefit. If current age-based testing was effective, one would anticipate a comparatively higher number of crashes involving older drivers in states not imposing such testing. However, this is not the case.

The responsibility for assessing medical fitness to drive currently lies predominantly with General Practitioners, sometimes with input from other health professionals involved in the patient's care. However, a study conducted by Sims et al in 2011<sup>4</sup> found that

- GPs in Australia and Canada have expressed concerns about their ability to assess patients' fitness to drive, largely due to a lack of evidence-based information and appropriate assessment tools.
- GPs felt they probably missed many cases where patients were not fit to drive and were often reluctant to raise the topic.
- among the more challenging situations to deal with was in early dementia where lack of patient insight
  was a complicating factor.
- GPs felt that while they might be able to state what a patient's medical problems were, they may not be able to accurately determine patients' on-road skills.
- guidelines needed to be clearer, particularly regarding how to assess and manage patients diagnosed with dementia, and when patients should be sent for an occupational therapy driving assessment.

A survey of general practitioners' attitudes to older drivers on the New South Wales Central Coast<sup>5</sup> concluded that "not all GPs are aware of the regulations for medical driver assessments, (they) are not routinely screening older drivers, (and) are not adequately trained in medical driver assessments; allowing medically unfit drivers to continue to drive".

With the economic and emotional implications of increasing numbers of older drivers sustaining injuries, dying or injuring others on the roads, it is time to investigate better ways of identifying older drivers who are no longer safe to drive. The Victorian Parliament conducted an Inquiry into Improving Safety for Older Road Users<sup>6</sup> in 2002, with one finding being "The two main functional areas on which to concentrate research and road safety countermeasures are visual and cognitive abilities." Research conducted since 2002 has resulted in the development of a quick, accurate and cost-effective cognitive screening tool (DriveSafe DriveAware) that could be implemented both in NSW and nationally, to provide greater clarity to doctors, licensing authorities and other stakeholders, about who is medically safe to continue driving and who should consider alternative transport options.

<sup>&</sup>lt;sup>1</sup> https://aifs.gov.au/facts-and-figures/ageing-australia

<sup>&</sup>lt;sup>2</sup> http://roadsafety.gov.au/nrss/files/NRSS 2011 2020.pdf

<sup>&</sup>lt;sup>3</sup> https://www.parliament.vic.gov.au/archive/rsc/older/final discussion paper.pdf

<sup>4</sup> https://www.hindawi.com/journals/ijfm/2012/417512/

<sup>&</sup>lt;sup>5</sup> https://onlinelibrary.wiley.com/doi/full/10.1111/j.1741-6612.2002.tb00425.x

<sup>&</sup>lt;sup>6</sup> https://www.parliament.vic.gov.au/archive/rsc/older/RSC OlderRoadUsers 2003.pdf