

REPORT OF PROCEEDINGS BEFORE

JOINT STANDING COMMITTEE ON ROAD SAFETY

INQUIRY INTO PEDESTRIAN SAFETY

At Sydney on Thursday 27 August 2009

The Committee met at 9.00 a.m.

PRESENT

Mr G. Corrigan (Chair)

Legislative Council

The Hon. R. L. Brown
The Hon. R. H. Colless
The Hon. I. W. West

Legislative Assembly

Mr D. R. Harris
Mr A. D. McDonald
Mr D. W. Maguire
Mr G. Souris

RAYMOND FRANKLIN SOAMES JOB, Director, Centre for Road Safety, Roads and Traffic Authority, 101 Miller Street, North Sydney, affirmed and examined:

CHAIR: This public hearing is being held in order to examine the factors underlying the causes of significant increases in pedestrian fatalities and serious injuries since the beginning of 2009. The hearing today will enable the Committee to provide practical advice to the Minister for Roads by way of conclusions and recommendations, in a report to be tabled before the end of the year.

Dr Job, in what capacity are you appearing before the Committee?

Dr JOB: As the Director of the Centre for Road Safety within the Roads and Traffic Authority.

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and that you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I should also point out that any deliberate misleading of the Committee may constitute contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Dr JOB: I would, thank you, Mr Chairman. This year we have seen a significant turnaround in the road toll for pedestrians. It is worth noting that that turnaround is part of the much broader turnaround in the road toll. Prior to 2009 New South Wales enjoyed six years of reductions in the road toll. In 2009 the road toll has turned around; for the first six months of 2009 it was up by 50 fatalities. There are extraordinary things about this turnaround. First, it is very broad; that is, we cannot single out a key single causal factor. Every type of road user has increased in fatalities. Pedestrian fatalities have increased, motorcycle fatalities have increased, pedal cycle fatalities have increased, passenger fatalities have increased, and driver fatalities have increased. Further, this is, oddly, a broad national trend. Every State of Australia is sitting on a significant increase in the road toll for 2009, compared with 2008. The Northern Territory is the only location not showing a significant increase. So it is a worrying and unusual trend that we are seeing, and one of the worst areas of it is actually for pedestrians.

The Hon. ROBERT BROWN: Dr Job, I take on board your opening statement. However, the comments made in the Roads and Traffic Authority submission seem to be saying that economic hardship has a reducing effect on pedestrian fatalities, with the period between 1989 and 1991 being a demonstrated period. Is that why you are saying this particular increase is unusual, or simply because it is going against the recent trend?

Dr JOB: For both reasons. It is against the recent trend in New South Wales and in several other States. So, while the reduction in New South Wales has been more consistent and larger than in other States, other States have still managed over those previous six years a broad reduction. So it is a trend against that previous downward march that we have been achieving. It is a very odd trend internationally in that it is not only Australia's experience but it is internationally well recognised that a downturn in the economy is generally associated with a downturn in road toll. If there is less economic activity, there is potentially less driving, people are more cautious of their driving, and they are less likely to go out for recreation et cetera in times of economic downturn. Yet, we are not seeing that trend at all in New South Wales or in Australia this year, despite the apparent economic downturn. So that is why it is so unusual.

We can only speculate as to why we may not be seeing that. I do have a speculation, which I am happy to share, noting that it is only that. It seems to me that the response of many people to this economic downturn in New South Wales has not been to capitulate to it but, rather, because it is not really severe, it is more: well, if I work harder, if I start earlier, if I get to my appointments faster, if I am more efficient with my day, I can maintain my income in the face of this slighter economic downturn. If that is the way people are treating it, then they are going to be driving with more focus on getting there, rather than safety, and potentially driving in a manner that is not safe, and driving for longer hours. Those things will contribute to the road toll.

The other thing I would note—and here I am not so much speculating; there is good evidence for this—when you see an economic downturn in Australia people change the alcohol they drink. People drink more beer, and less wine and spirits, because beer is a less expensive drink. Beer drinking, however, is something that is more likely to occur in a public place in a licensed premise, whereas people tend to drink wine at home for example. So, if you get an increase in beer drinking, it is also likely you will have an increase in drinking

outside the home, and that therefore is going to be associated with more drink-driving. The data we have to date suggests a quite significant increase in speeding-related fatalities and an increase in alcohol-related fatalities.

Dr ANDREW McDONALD: I have two brief questions, Dr Job. The first relates to statistical relevance. As you know, it is a large base of drivers and a small number of fatalities. Is this statistically significant, do you think?

Dr JOB: I think for the small number for pedestrians in New South Wales, as an increase, it may not be statistically significant. But, given we are seeing the same increase all round Australia, I would be very confident that overall this increase is statistically significant for 2009 for Australia as a whole.

Dr ANDREW McDONALD: The City of Sydney submission raised the issue of 40 kilometre an hour zones. What is your opinion of the use of 40 kilometre an hour zones in major metropolitan cities?

Dr JOB: I think the evidence unambiguously says that we would get a road safety gain from reducing the speed limit. If we reduced the speed limit from 50- to 40-kilometre an hour, we would see a road safety gain. Furthermore, the evidence suggests that one of the main groups to gain from that reduced speed limit in safety terms are pedestrians. The reason for that is that when you are talking about those speed limit changes from 50 down to 40 kilometre an hour, then survivability for a car occupant is reasonable at 50 kilometre an hour anyway, whereas survivability for a pedestrian halves from a 40 kilometre an hour impact to a 50 kilometre an hour impact. The material influence on the road toll for changes in speeding of those orders is substantial for pedestrians, for motorcyclists and for pedal cyclists, the unprotected road users. So we would clearly see a gain for them. It then becomes a matter of the community's view of the compromise between those road safety gains for the speed limit reduction versus the mobility loss.

Mr GEORGE SOURIS: Dr Job, is there a differential between passing motorists and motorists who are actually going to the school for one reason or another?

Dr JOB: In terms of school zones?

Mr GEORGE SOURIS: I am thinking of not only that; I am thinking of that period of time when we were so focussed on illegal parking inside crossings by parents in large four-wheel-drives who were letting off their children and creating obstructions and low visibility and so on. I am wondering whether the statistics, and your own views, are different for motorists just driving on the highway and going past a school and those who are actually going to the school.

Dr JOB: Our data records for crashes do not tell us the purpose of the journey; so we could not, by virtue of the data, directly answer the question. The only way we could do it is for specific instances where the driver at fault in the crash is the one who is about to park, or something like that. It is relatively rare that we actually get that kind of information, because they are unusual crashes. There are some very high profile ones where we can identify that, for example, the fatality in the schoolyard at Collaroy, where a driver dropping off the child hit another child. But the data do not give us sufficient information to provide an answer to that. The key speculation I would offer is that if you are dropping a child you are far more likely to be aware of the school and the school zone.

Mr GEORGE SOURIS: Our emphasis is on speed, as opposed to what happens below 40 kilometre an hour when people congest a site and are stopping illegally et cetera. But there is no need for a further answer.

The Hon. RICK COLLESS: Dr Job, you give statistics in your paper about the number of pedestrian injuries, pedestrian fatalities and so on. Have you split that into various categories, such as age?

Dr JOB: Yes, they are split further. There are a series of appendices that split the data in many different ways.

The Hon. RICK COLLESS: Is there any analysis by ethnic background? I will explain why I ask that question. I was recently in Asia, and one thing that surprised me about road safety in Beijing in particular, but it applied in all of China, was that motor vehicles have right of way over pedestrians at pedestrian crossings. Those people could come to Australia thinking that there is not a different set of rules here. Has any analysis been done by way of ethnic background, how long those people may have been in Australia and how well they in fact understand our Australian road rules?

Dr JOB: You raise an important issue. However, we do not get data at that level, so our licensing records and our police records from crashes do not give us the ethnicity of the driver.

The Hon. RICK COLLESS: It is the pedestrian I am talking about as well.

Dr JOB: There is one important exception, and that is that the national coronial database keeps a record, for example, of Aboriginal and Torres Strait Islander involvement in fatalities. So, by virtue of that record, we are able to access that particular arena of ethnicity. But our database does not contain ethnicity. We do have a number of requirements and education-type programs to try to address this, in that if you become a resident of New South Wales then there is an obligation on you, after a passage of time, to obtain a New South Wales drivers licence, and that would involve the knowledge test. So there is a process that helps us educate drivers on the particular road rules here.

The Hon. RICK COLLESS: Is any data collected about the blood alcohol level of pedestrians?

Dr JOB: Absolutely.

The Hon. RICK COLLESS: What does that tell us?

Dr JOB: We actually have detailed data on that. Every fatality has a blood sample taken, and alcohol content is assessed. Those data show that in the last several years 26 per cent of our fatally injured pedestrians have had a blood alcohol concentration above .05. So alcohol in pedestrians is a significant factor in pedestrian fatalities. I am often concerned that it is actually over-estimated. Bear in mind that that means that roughly 3 in 4 fatally injured pedestrians do not have an alcohol involvement. I would also suggest that we need caution with those data in that 0.05 is clearly a level that will impair driving but may not as clearly impair wilful behaviour. So I do think we need to be cautious. While we need to address the fact that we have a significant proportion of pedestrians who are really affected by alcohol, we should not dismiss the pedestrian problem as primarily being of that form.

The Hon. RICK COLLESS: The other question I have, Mr Chairman, if I may: Does the data include any figures on those pedestrians that were killed not on pedestrian crossings—jay walking for instance?

Dr JOB: We would be able to extract for you the pedestrians who are killed on a pedestrian crossing or not, but that does not mean they are jay walking.

The Hon. RICK COLLESS: No, jay walking may be the wrong term.

Dr JOB: They would be crossing illegally if they were in close proximity to the pedestrian crossing and should therefore have used the pedestrian crossing, but many of those not on a pedestrian crossing may be hundreds of metres from one and therefore would not be crossing illegally in that sense.

The Hon. RICK COLLESS: When it comes to the road rules, if somebody walks across the road not on a pedestrian crossing—and quite often you see people darting in between the traffic—it is the most dangerous thing you could ever wish to do as a pedestrian. You see it all the time in the city in particular. As far as the road rules are concerned, who is at fault if somebody darts out in front of a car?

Dr JOB: The car is not at fault if it would not be reasonably possible for the car driver to have stopped in time, and if a pedestrian runs out in front, then you do not have sufficient reaction time. The issue you are raising, Mr Colless, raises a number of important comments. First, very often when we hear the kind of issue you are raising, and you are quite right to raise it as a significant factor, we tend to think the solution is to educate pedestrians. I am very resistant to that. Pedestrians do not run out because they do not know there is a risk, but because they are confident that they can afford to take the risk. So education does not seem to work against that. What does work is engineering solutions. Sometimes the best way to fix a behaviour is to physically barrier that behaviour. I believe that one of our best solutions is the effective use of pedestrian fencing to stop access to the road at points where it is dangerous and at points where within a reasonable walking distance there is a point where it is safe to cross. So we need to channel people more effectively to the safe locations.

In engineering terms the other thing we need to address is that actually our system does favour the

driver, so that as a pedestrian you tend to wait longer. We do not set lights up so that if you are making a diagonal turn as a driver you have to wait through two phases of the lights, but we do for the pedestrians. If you want to make the diagonal cross at an intersection, you have to wait for one phasing of the lights to get your first walk, then you wait on the next corner for the next phasing of the lights to get your next walk. The other thing that that phasing creates is the conflict problem of parallel movements. So you can have drivers with the right to drive straight through, and on the side roads pedestrians with the right to walk beside that moving traffic. The difficulty you then have is that left turns by the driver or right turns by the driver facing a green light bring them into conflict with pedestrians. There are various solutions to that which we are examining as a consequence of the coronial inquiry into the tragic fatality of that child being carried by the child's mother, which was an instance of a left turn bringing them into conflict with pedestrians.

Again, I think there are engineering solutions that will help us there in terms of allowing more time where the pedestrians can walk and the traffic cannot move. One of the other good solutions to that is what is called the scrambled crossing. That is a crossing where instead of allowing parallel movements, all the traffic is stopped and all the pedestrian movements can occur at once. A good example is the one outside Town Hall in George Street. That kind of arrangement stops the conflict of those parallel movements.

The Hon. RICK COLLESS: One of the other problems that I have experienced as a driver, and I am sure every driver in Sydney has experienced this, is when I am waiting to turn left on a red arrow and the "Stop walk" red light starts to flash and the red arrow disappears but people continue to leave the kerb. At that point in time it is illegal to leave the kerb, is that correct?

Dr JOB: That is correct.

The Hon. RICK COLLESS: That is not policed at all. I have been in a situation where I have not been able to get across the lights because people continue to walk across against the red light.

Dr JOB: I think it is an issue you would have to take up with police. My understanding is that police do enforce it, but they have great difficulty enforcing it because there is not any obligation on the pedestrian to carry or produce evidence of their identity, and so you can be writing out a ticket to hundreds of John Smiths or Mickey Mouses or whatever. I think that creates a difficulty, as I understand from the police.

Mr DARYL MAGUIRE: I was interested in your opening remarks regarding the economic climate that Australia is in and your suggestion that drivers are actually perhaps concentrating more on getting from A to B, and there are more pressures on them to do their job and to do it well. That, therefore, is having an effect on the way that they drive. Perhaps it is having an effect on pedestrians as well. Can I put it to you that across Australia you are experiencing an increase in fatalities and accidents because the infrastructure is not keeping pace with the needs of modern Australia? In saying that, I believe you have actually touched on that by suggesting that there need to be more engineering solutions. I suggest to you that we have not kept pace with that infrastructure, and that is causing people to take risks. In saying that, I am concerned that already we are talking about reducing speed limits across the city, where the traffic is at times at congestion point and at a crawl anyway.

The Hon. RICK COLLESS: It is a maximum speed limit most times.

Mr DARYL MAGUIRE: The other issue is the suggestion that the pedestrians have the right of way and that the pedestrians will take a risk. May I suggest to you that they are taking risks because of technologies that they are using, such as walkmans and mobile phones? You only have to walk out onto Macquarie Street to view it every day. You see people taking risks because they are unaware; they are distracted; they are not concentrating on what they are doing; they are not abiding by the laws that road drivers have to abide by; and therefore they are putting road users at risk as well as themselves because of, dare I say, their own stupidity, and as a result accidents occur. I think it is a much bigger picture than just the initial suggestion, and I would be concerned that the Committee was starting to think about reducing speeds, which are already a problem, rather than looking at those other things that are actually causing the problems. That leads me to the question about data gathering. It appears to me that the information you are getting just is not complete enough for us to be able to really paint a picture of what is going on.

Dr JOB: So many questions, Mr Maguire. Let me start with the speed limit ones, and if I miss aspects, then please come back to me. Speed limits and reducing speed limits unambiguously gives us a road safety benefit. It may be the case that for some hours of the day the traffic would not achieve the speed limit anyway.

In that case, we are not losing anything, because we are not forcing the traffic to slow further. If the traffic is averaging 30 and we reduce the speed limit from 50 to 40, then in those hours where it is averaging 30 it is not going to go slower. So we do not add to the problem. In the hours of the day when the traffic can go faster, we will make road safety gains. I think that is the important thing, that we will still make road safety gains with reduced speed limits, even in areas that are at some hours of the day congested. That is the first point.

Second, if we look at the data for the centre of the city, then in fact—and this is a very surprising statistic I think—the majority of fatally injured pedestrians are hit by large vehicles, mostly buses. The reason speed limits will still give us gains is that even if the traffic is congested, in the bus lanes often the speed is still available and so slowing those vehicles will still give us a road safety benefit.

With regards infrastructure, first, I agree with the underlying assumption here very strongly that the key element that we can address in terms of improving the road toll is the road infrastructure and the road size. I think that is correct. So the engineering elements are one of the most important things we can be doing. I think that if we compare Australia with international jurisdictions which are the best performing jurisdictions, like Sweden and the Netherlands, we will find that their infrastructure is substantially different in terms of safety level.

For example, about half of Sweden's main rural roads are what they call the two plus one system. That is they have taken roads which are four lane roads and they have sacrificed a lane to make the roadway two lanes in one direction, one lane in the other, and that swaps over regularly so that there is an overtaking opportunity in each direction on a regular basis. They have also sacrificed that road area to wire road fencing. They have put a median wire road fence and wire road fencing either side of the road. So they have very effective, yet forgiving, crash barriers on those roads, and those roads go very close to zero fatalities. Over years and years on a very large number of their roads I understand there have been eight fatalities. That is an extraordinary achievement. I think in principle it is correct to assert that the engineering solution is one which will work for road safety and one where other countries are doing better than all of Australia.

I would, however, caution against the interpretation that it is simply that we have not kept up and that is the cause of this year's increase in the road toll. If we were not keeping up, I think we would have seen incremental increases over years and years, and that is clearly not the pattern. We have seen six years of decrease turned around quite suddenly with a significant increase. So I would not attribute that pattern of the road toll to not keeping up with the infrastructure. I think that pattern very clearly says that that is not actually what is going on here. We would have seen just gradual incrementing failures.

I also think that if you look at our successes in New South Wales, and New South Wales has been the most successful State in terms of keeping the road toll going down for six years in a row, then a lot of them are infrastructure successes. Our review of the Pacific Highway and our review of the Princes Highway produced substantial infrastructure changes that were hugely successful. The Pacific Highway went from 55 fatalities a year to 25 fatalities a year—that is from Hexham to the Queensland border—when we implemented those works. The Princes Highway went from 24 fatalities a year to four fatalities a year after we implemented those works. That is from Yallah to the Victorian border. We have just completed a similar review of the Newell Highway and we have a commitment of \$40 million worth of works over the next three years to improve the infrastructure on that. So I think we are rolling out those kinds of infrastructure programs along the highways and they are very successful. I believe I have missed something.

Mr DARYL MAGUIRE: Technology.

Dr JOB: The technology aspect. I totally agree with you. I think that one of the reasons we have a pedestrian problem is that pedestrians are distracted, they are on the mobile phone, and they are using walkmans. I think that that actually contributes two things. First, it is a significant cognitive distracter, and so their judgment in crossing the road is impaired. Second, it actually removes a very important cue. The auditory cue is not a trivial cue when you are crossing the road. I think we have all had the experience of looking but not seeing, but then you hear something coming around the corner and you pull back; you get back on the kerb. If you have your Walkman in, you miss those cues; so, I agree. There are also a number of studies of the actual on-road observation of pedestrian behaviour. One was conducted by Julie Hatfield and Susanne Murphy from the University of New South Wales in Sydney, which shows that people using these devices cross less safely. I think the evidence is quite good to support the assertion that this is contributing to the pedestrian problem.

Mr DARYL MAGUIRE: The last one was the quality of data gathering. Is there a need to improve that?

Dr JOB: I think we have very good data in New South Wales in terms of crashes. However, I would not say it is perfect and I would agree that if we could improve it, that would be great. For example, I would single out the problem of assessing speed. This is not a critique of police: police do a great job of cleaning up crash scenes and getting there quickly, et cetera. But there is considerable sophistication required to analyse speed for pedestrian crashes more than for other crashes. I think we could all imagine how readily that is the case.

If we went out to a crash, such as the one we had this week on a low speed road, and the impact has been so severe that the engine is separate from the vehicle, then Blind Freddie could tell you that they hit at way more than 50 kilometres an hour. You are going to know that that is a speed crash. But how many of us could look at the injuries received by a fatally injured pedestrian and assess the speed of impact? I think none of us. I think one of the real problems we have with pedestrian crashes is that it is extremely difficult for police to establish that speed has been involved.

Speed is very much underestimated as a factor in pedestrian crashes for a couple of reasons: first, for those reasons, it is very difficult to assess from the crash scene; second, in the case of a fatally injured pedestrian, the primary witnesses are going to be the vehicle occupants. They are obviously motivated not to reveal that they have been speeding. Yet we know that speed is a huge factor for pedestrians because when we get anything that reduces speeds, we see a major benefit to pedestrians.

When Victoria implemented its stronger speed management regime with more cameras and with reduced tolerance on speed enforcement, it made a gain of over 60 in terms of Victorian fatalities per year. The biggest single group in terms of percentage reduction was pedestrians. Pedestrians gained hugely from small reductions in speed. We know that speed is a major factor in pedestrian crashes, yet in our crash database, it does not appear to be so. Speed is missed as a factor very often in pedestrian fatalities.

The Hon. ROBERT BROWN: It seems itself-evident, but just by looking through all the statistics and findings in here, although it is probably silly to say so irrespective of whether a car may be travelling faster or slower, the higher speed areas have a higher percentage of fatalities to injuries.

Dr JOB: Absolutely. It is true for pedestrians as well.

The Hon. IAN WEST: That applies to pedestrians also?

Dr JOB: That is correct, as a percentage of crashes.

The Hon. ROBERT BROWN: Half of pedestrian injuries occur within 10 metres—

The Hon. IAN WEST: I am sorry to interrupt—crashes or fatalities?

The Hon. ROBERT BROWN: As the speed zone increases, the number of fatalities versus injuries increases. In other words, the faster—

The Hon. IAN WEST: In terms of people in cars, or pedestrians?

Dr JOB: In terms of pedestrians.

The Hon. IAN WEST: Are you sure?

Dr JOB: Yes.

The Hon. ROBERT BROWN: It says that here.

Dr JOB: Could I just clarify the point? The point is that in higher speed zones, if we look at the number of pedestrian hits and how many of those are killed, the proportion of those being killed is higher in higher speed zones.

The Hon. IAN WEST: But not injuries.

The Hon. ROBERT BROWN: No.

Dr JOB: No because these are only injury crashes we are talking about for pedestrians. Pedestrian crashes basically only come to us if the pedestrian is injured because you are not likely to have a vehicle that has to be towed away by hitting a pedestrian that has not injured the pedestrian. So in all of these pedestrian crashes, the pedestrian is either injured or killed. As you get to higher speeds, more of the pedestrians are killed and less are non-fatally injured.

CHAIR: Have you finished your question, Mr Brown?

The Hon. ROBERT BROWN: No.

CHAIR: Finish your question.

The Hon. ROBERT BROWN: My question is: The one statistics that we hear, which are probably self-evident, are that half of all pedestrian injuries occur within 10 metres of intersections.

The Hon. IAN WEST: We heard that in previous questions.

The Hon. ROBERT BROWN: We talk about the lack of infrastructure. At every intersection, certainly in metropolitan areas, there is some infrastructure, even if it is only a white line on the road.

Dr JOB: Yes.

The Hon. ROBERT BROWN: So engineering solutions are probably best targeted at intersections because that is where the highest percentage of all injuries is occurring. The other half occurs in miles and miles and miles of road between intersections where you cannot put chains and fencing. Would you agree that most of the infrastructure spending should be at intersections?

Dr JOB: Mr Brown, you are right about the statistics. The logical flow is tricky. The reason it is tricky is because where a pedestrian is injured away from an intersection, it may be quite legitimate for us to put up a pedestrian barrier and stop people crossing at that location and funnel them to intersections. The difficulty with treating the intersection is: what are the physical limitations can you place there? People are going to have to cross the road. It is at intersections that they tend to cross.

The Hon. ROBERT BROWN: That is right.

Dr JOB: You can do some very useful engineering solutions around intersections. For example, studies show that is more dangerous to cross, say, 5 metres from a pedestrian crossing point than on a crossing point, or more than 50 metres from the pedestrian crossing point. So if we put fencing that channelled people—

The Hon. ROBERT BROWN: Short barriers.

Dr JOB: —right to the pedestrian facility, rather than crossing 5 metres or 10 metres either side of it, we would get a gain there. In that sense I think you are right, but the inherent risk with intersections is that those are the locations where the large majority of pedestrians cross the road.

CHAIR: Do you have any follow-up questions, Mr West?

The Hon. IAN WEST: No. I am just coming to grips with the difference between fatalities and injuries and it is a completely different ball game.

CHAIR: You may try to frame your question.

The Hon. IAN WEST: It appears that 5 per cent of fatalities occur when people lie on the road. There are very detailed statistics that show this.

Dr JOB: People who lie, fall or sit.

The Hon. IAN WEST: Yes, or sit on a road. We have very detailed statistics to show that of the 86 per cent of injuries as opposed to deaths, something like 75 per cent are male, and they occur on a Thursday, Friday and Saturday night between the hours of 10 and six. From the preliminary reading of the statistics, infrastructure changes to the road do not appear to have an effect on injuries as opposed to fatalities within pedestrian statistics. Is that right?

Dr JOB: The data you cite are correct. I think it still would be the case, though, that putting a pedestrian barrier or fencing and channelling people to safer points at which to cross the road would improve injuries as well as fatalities. I think that the data you are highlighting there about Friday and Saturday nights come back to a very important point about our deliberations about what to do with pedestrian fatalities, and that is that they share in common lots of other things: they tend to be male, but if you look at the drivers who hit them, the drivers also tend to be male; they tend to be Friday and Saturday nights; they tend to be drinking times; and they tend to be partying times. As I said, only 26 per cent are identified as having 0.05 per cent blood alcohol content [BAC].

But some of those pedestrians who were quite sober and crossed appropriately will have been hit by drivers who were speeding or drivers who were above 0.05 per cent BAC. The commonality of factors is very large. The kinds of things we can do about pedestrians are, broadly, the kinds of things we can do about the road toll: if we reduce speeding, if we manage speeds better, if we reduce speed limits, if we reduce drink-driving, and if we engineer the road more effectively, all of those things will improve pedestrian safety.

Dr ANDREW McDONALD: The jaywalking factor that Mr Colless mentioned—my understanding is that it is only 20 metres within a pedestrian crossing where you are not allowed to cross. Is that right?

Dr JOB: That is my understanding of the law.

Dr ANDREW McDONALD: Has there been any study on increasing the distance to, say, 50 metres from a pedestrian crossing? Many people who have been identified in the city as jaywalking in fact are not because they are not within 20 metres on a pedestrian crossing.

Dr JOB: Dr McDonald, you are absolutely right. If you are 30 metres from a crossing, there is not an obligation on you to move to that crossing to cross the road? There is only an obligation on you to cross safely and cross directly rather than at an angle. You can still be guilty of an offence even though you are 100 metres from a crossing if you cross the road at an angle. You are meant to cross most directly and that is the other form of what we generally call jaywalking. In terms of whether or not that would have a benefit, we would be happy to consider it. My speculation would be that, given that people currently have a belief that it is safe to, and they choose to, cross the road against a red "Don't Walk" sign, et cetera, I suspect that the pressure arising from the law is very small in driving pedestrian behaviour.

Dr ANDREW McDONALD: The NRMA has looked at enforcement and has stated, "The enforcement of existing speed limits would provide immediate safety benefits, more so than any other single measure." Would you comment on that?

Dr JOB: I think that if you were looking for gains then that is clearly one of the areas where we would make significant gains. We know from our independent speed surveys that there are a very significant number of drivers who drive above the speed limit. We know from the catch rates of cameras, et cetera, that that is the case. If we got all of those drivers down to the speed limit, we would see a very large saving in the road toll in New South Wales. I would estimate that saving to be in the order of half of our fatalities, and that would include a large number of pedestrian fatalities.

The Hon. IAN MACDONALD: Down from 400 to 200 lives a year could be saved—is that what you are saying? That is approximately 200 extra lives a year?

Dr JOB: I think so. Our formal data say that around 40 per cent, and this year over 40 per cent, of our fatalities are speed related. My view is that that is an underestimate for the reasons I have already outlined. I believe we missed speed-related fatalities in a large number of pedestrian crashes. If we look at studies where speed is almost removed as a factor—for example, where people overseas have put in point-to-point speed enforcement—you see a reduction of approximately 50 per cent in fatalities. That says to me that you may have

thought only 30 per cent were speed, but when you take speed out and if 50 per cent of your fatalities disappear, 50 per cent were speed related. On that basis that is the level or magnitude of gain I would expect we would see.

Dr ANDREW McDONALD: So it is 50 per cent? About how much per death is the estimated cost of death to the State of New South Wales?

Dr JOB: In real economic terms, the Bureau of Transport Economics in Australia makes an estimate, and I think the current estimate is approximately \$1.5 million to \$1.7 million. We have conducted a willingness to pay study in New South Wales. That is a study that basically assesses what the community believes it is worthwhile to pay to avoid those risks. Therefore, from those studies, we can make an estimate of what the community sees as being worth it to save those fatalities. For the community of New South Wales, the answer is more than \$5 million.

The Hon. ROBERT BROWN: That is interesting.

The Hon. IAN WEST: Can we take that further and ask: that is fatalities, but what about injuries—for example, brain injuries?

Dr JOB: We can. Again, the Bureau of Transport Economics makes an estimate for injuries. The difficulty with making good sense of that estimate is that the cost of an injury for the community will vary hugely. An injury is recorded by New South Wales Police at the scene. If someone needs two stitches on the back of their hand, that is an injury; if someone becomes a quadriplegic but survives, that is also an injury. The range of cost for what is called an injury in a road crash is so large that it is difficult to make sense of the number. But the answer in terms of injuries is usually divided into minor and severe. Severe runs out in the hundreds of thousands of dollars, but we should acknowledge that some of them will cost millions and millions of dollars.

The Hon. IAN WEST: Exactly. That is hundreds of thousands of dollars a year for the injured.

Dr JOB: Yes. That is an estimate of total cost for an injury.

CHAIR: A consistent theme through most of the submissions of professional bodies seems to be a concern about data, and data collection, as opposed to what is collected by the Roads and Traffic Authority the police at the scene, the ambulance officers who give a detailed position with a GPS. Do you have a comment on that? Many submissions make the point that we could provide better data.

Dr JOB: The data we have are very useful. I think a number of fields of data that we have give us very good, very valuable information, but I do believe that it could be improved. Areas of improvement for us are tricky. We have a large study that has been going for a number of years looking at connecting our crash data base with hospital entry data to examine the real cost when someone is recorded as an injury at a crash scene, that is as much information as we get. That is actually a surprisingly difficult exercise. Our miss-rate, in terms of those connections is quite large. We are looking for ways to improve that and to improve a real understanding of the saving to the community and to hospitals and to emergency services of avoiding crashes and injuries. That is one area that we could improve.

As I have said, we miss a number of speed-related fatalities and injuries, especially for pedestrians. But it is very difficult to imagine how we would overcome that these crashes occur often with no witness other than those who are actually involved and we cannot have the police on the scene before it happens, so it is very difficult for police or anyone post-hoc to get a good analysis of the original speed of that vehicle, given that it may also have been braking before the point of impact, et cetera. In some areas of the data we have to acknowledge that it will always be imperfect.

CHAIR: When the Committee publishes the submissions with some criticisms of Roads and Traffic Authority data collection, I would be happy to get your response.

Dr JOB: We would be happy to. We are aware of a number of them, we are also working right now with police to try to improve it. We have met with a number of the people in the last few weeks who have made submissions. We have discussed with them how they believe we can make improvements. We are looking for improvements, and we are very keen to get that advice on where other people believe we could make them.

CHAIR: Professor Raphael Grzebieta at the ministerial roundtable called for the immediate introduction of random speed cameras to try to reduce the road toll. He put the same figures you have put, but Victoria had a rapid decrease in injuries and deaths when it brought in random speed cameras. Do you agree with his assertion?

Dr JOB: Yes, I do. I believe the evidence is very clear from Victoria and from a number of other places, that mobile speed cameras produce a significant improvement in the road toll.

Mr DAVID HARRIS: I am particularly interested in the statistics around elderly people. How are accidents and fatalities counted for mobile scooters? Do they count as pedestrians or as road toll?

Dr JOB: It depends on what you mean by a scooter. If it is a registered vehicle, a moped or something like that, they would come in under that.

Mr DAVID HARRIS: That is the four-wheel vehicle with a flag at the back and a basket at the front?

Mr DARYL MAGUIRE: Gofers.

Dr JOB: Oh, the gofers. This is not a simple issue. My understanding is that they will be counted as pedestrians because that is a pedestrian mobility device. If it is a device that would be registered as a motorcycle, it would be counted in the motorcycle statistics. Some of the step-throughs or mopeds, et cetera, that people use in a similar way should be registered; they would count as motorcycles. Currently the Roads and Traffic Authority is doing a body of work with other jurisdictions to try to get a better definition of what is required for registration versus what is a mobility device, or, especially, what is a power-assisted pedal cycle. That would make the difference between someone being recorded as a pedal cyclist versus a motorcyclist. But really the difference is a more important one than just a data difference.

It is a difference in terms of requirements. If something is a power-assisted pedal cycle you do not need a licence, you do not need a motorcycle helmet, you do not need to register it. If it is a motorcycle, you need a helmet, a motorcycle licence, training and you need to register and maintain that vehicle appropriately. Those subtle definitions make quite a difference to our management of those groups of road users.

Mr DAVID HARRIS: A lot of pedestrians using those devices are forced to drive on the road because there are no footpaths.

Dr JOB: It is legal for them to drive on the road when there is not a footpath available.

Mr DAVID HARRIS: That is right. However, in the late evening or early morning it is hard to see that creates an issue. Does there need to be some sort of extra rules about how they are used? They are becoming more common, particularly in my area, which has a high elderly population. Young males are risk takers, but I assert that older males are risk takers as well. For seniors are there any education programs to understand that they no longer have the same capacity in crossing a road. In my area there is a shopping centre across the road from a nursing home, and the crossings are at either end a fair distance from the entrance to the nursing home. They go straight through the middle, across two lanes of traffic and they think they can make it.

However, all the traffic has to come to a halt, because a quarter of the way across one side the elderly pedestrian has not timed it right and when he gets to the other side he has not timed it right either. Suddenly all the traffic comes to a halt because one person is trying to cross that road. I do not know of any education programs for that age group to make clear that issue. Clearly, they are overrepresented, particularly those aged 70 and over; but there seems to be no programs in that area to assist them to understand their limitations.

Dr JOB: You are quite right in identifying in the data that the older road users are substantially overrepresented as pedestrians, as are younger road users. In terms of actual behaviour you are also correct in identifying that there is a sense in which they are taking a risk. But the nature of it is very different. Younger road users are taking a risk in the real, normal, psychological sense that we would say that they are risk takers. They see that there is a risk, they believe they can get away with it and they go for it. Older pedestrians appear to be doing the same thing, but are actually doing it for a very different reason; that is, their capacity to judge speed and distance seems to be different.

Prior to my current role, when I was acting as a research consultant at the University of Sydney, we did an extensive study of the crossing behaviour and the gap acceptance of pedestrians. We looked at age as a factor. We found that by the time pedestrians reach the age of 70, they are back to accepting the gaps in the traffic that a 20 year old accepts. The gap to cross that someone accepts steadily gets longer as they get older until they reach about 70 and then suddenly it shortens again, which is a very odd outcome. A person accepts a shorter gap at age 70 than he did at age 50; it is very peculiar. I believe it is a cognitive issue, and a cognitive complexity issue. It is not a simple matter.

We are all pretty good at recognising that a car is 50 metres away, assessing what speed it is travelling, and working out when it will arrive and determining to be out of its path by that time. However, in reality, that is not a really simple thing. If one's vision is not as good, or one's cognitive capacity to detect the change in the speed of that vehicle, or the change in the size of it on one's retina—which is the only way one knows it is getting closer—is impaired, you will misjudge that. The evidence also supports that there is a cognitive problem, in that there are post-mortem studies of elderly people killed as pedestrians, and elderly people who have died from other causes, which show that elderly pedestrians who were killed clearly have within their brains more of the physical features to indicate early onset of senility and, therefore, cognitive problems. It is actually a more physiological problem in many instances than it appears to be.

The Hon. IAN WEST: It is not only a cognitive issue: it is a mobility issue. I can visualise a person crossing a road, who is of a certain age and has a certain mobility to cross a road in a specific time, irrespective of their cognitive skills they think they can walk out because no matter what they do they have to get across to the other side. They think, "How long it takes me, it takes me".

Dr JOB: I agree. In those studies when we asked people why they crossed the road the way they did, they gave that kind of answer. They would say, "Well, given the speed at which I walk, even if I start on the green light I am not going to get to the other side by the time the lights change, so I had to rely on the cars to stop for me". One other feature we found was that older pedestrians look less at the traffic, and the view seemed to be, "Well, if you see I am not looking at you, you know it is bloody well up to you to stop, because I cannot change. I cannot run suddenly as you get close to me, I cannot dodge. You really need to deal with it for me."

The Hon. IAN WEST: They think, "My cognitive skills are irrelevant".

Mr GEORGE SOURIS: They are lucky it is not an over-70s driver at the same time.

Dr JOB: Again, the engineering treatments are important. Again, we have found that older pedestrians are also more likely to feel that it is such a long walk just to walk that extra 10 or 15 metres to get to a crossing point that they were more likely to cross near the crossing point but not at it, because it saved them significant time, in their view. Again, the pedestrian channelling, with fencing and providing safe facilities is going to improve the elderly pedestrian problem.

Mr DAVID HARRIS: When a nursing home is approved that is near a major road, and the Roads and Traffic Authority had input into its development, is it at that point that they make the decisions on where to put barriers, et cetera? Or do they still just worry about where the cars will travel in and out of the facility?

Dr JOB: The pedestrian movements are taken into account fairly formally. There is a set of warrant, or a set of numbers, that dictate the kind pedestrian facility that is put in. It is a count process. If there is more than a certain number of pedestrians for which a refuge is appropriate if there is a larger number, a pedestrian crossing is appropriate. If you have more than a larger number, and it goes on the number of cars as well, we would put in a signalised mid-block crossing, or something like that, to force the vehicles to stop. There is a count taken of pedestrian usage to determine what facility we put in a location as well as a count of traffic.

CHAIR: I notice you have new urban design rules four roads. If a nursing home is established, it is quite easy to determine the likely pedestrian movements. However, you cannot force the developer to put up a fence or something that would prevent people crossing within 10 metres. You would try to direct them.

Dr JOB: I do not know the answer to that. I believe that would be an issue for the approver. For example, I believe local councils have rights to dictate various additions in order to approve a development.

Mr GEORGE SOURIS: Dr Job, in your very comprehensive submission you have a small section on pedestrian countdown timers. You had mentioned a number of countries. I have seen them in action in

downtown Auckland on the high pedestrian flow areas, at two or three places in Queen Street, Auckland. Personally, I thought they were very good. I am pleased to see that this is an item, which I have not seen in previous submissions by the Roads and Traffic Authority. I am pleased to see that it is an item. It talks of a potential trial. How far advanced is it?

Dr JOB: We are talking about a potential trial because we are rechecking the data on pedestrian countdown timers. I need a little time to explain that. There are three aspects of the pedestrian phase that one could countdown. While you are waiting you could count down how much time there was before you would get to walk, that is, the solid red "Do not walk" phase. You would know that, in 30 seconds, you would be able to walk. You could also count down the walk phase. For example, the walk phase starts, it goes green and you get a count that indicates you have 15 seconds remaining to cross the road, 14 seconds, and so on. That might help you, as you walk up to the intersection, to make a judgement about whether you still have time to cross the road safely. You could also count down the clearance phase.

Mr GEORGE SOURIS: The flashing phase?

Dr JOB: The flashing red phase. The evidence as we understand it—and this is what we are re-checking—is that only one of those three gives you a road safety benefit. You appear to get a road safety benefit from counting down the time before you get a walk opportunity. People seem more prepared to wait for the signal and to wait for the green.

The Hon. ROBERT BROWN: If they know.

Dr JOB: If they know they have to wait for only 20 seconds, or whatever it is. However, this is where our problem comes in. If that is the only one that gives us a safety benefit we do not want to trial the others. Research that we have done to date suggests that we might get a road safety harm, as people will walk up and say, "It is flashing, "Do not walk", so I will not walk. But if they walk up and see it flashing, "Do not walk", they will say, "I have five seconds; I can get across the road in five seconds." That is when you get a road safety disbenefit.

The Hon. RICK COLLESS: Where does that data come from?

Dr JOB: The data comes from overseas studies. You will see this in China, in Singapore and in New Zealand, et cetera. If it turns out that the data reveals it is the only one that gives us a road safety benefit, I believe we will not see a trial. The reason is what is called the Sydney Coordinated Area Traffic, or SCAT, system. This is a live, real-time system—quite an extraordinary piece of computing—that examines how many vehicles are approaching the intersection and how many are queued at the previous intersection. It constantly changes the green time on the intersection to clear that traffic. It compares it with the line of traffic waiting on the side, et cetera.

If you look carefully you will find all through Sydney cameras capturing the flows of the roads. If you look at the intersection you will see loops in the road that detect vehicles. Without that system Sydney would be in total gridlock. The difficulty with that system is that you cannot, therefore, know how long before a pedestrian will get a walk because it is constantly being changed with updated information in real time. We will know when the pedestrian signal comes on only six seconds before. If we tried to do this we would be saying, "We have 30 seconds. More traffic has arrived and we now have 40 seconds. Less traffic has now arrived and we have 20 seconds." It would be a joke as a countdown timer.

Mr GEORGE SOURIS: We would be talking about only five or six intersections?

Dr JOB: No, that covers virtually every signalised intersection in Sydney. That system, which is extraordinarily complex, covers a large number of intersections.

Mr GEORGE SOURIS: I did not know that Big Brother was so big.

Dr JOB: It covers a large number of intersections.

Mr GEORGE SOURIS: It is a different Big Brother from the one I was thinking about.

Dr JOB: This sophisticated version covers a large number of intersections, but at more remote intersections you still have those loops in the road and a vehicle coming to those loops changes the timing at the intersection. It is not something that is very feasible. We are checking the data. If we find that there is evidence for a road safety benefit for one of those other two, we will be keen to trial it. But at moment we have that impasse.

Mr GEORGE SOURIS: The one I saw in New Zealand was the countdown on the flashing red. Are all the other countries randomly using one or other of the three, or are they concentrating only on one?

Dr JOB: Many of them are using the one that appears to give the road safety benefit. They do not have an equivalent system to SCATs, so they can predict well in advance how long before you get the next walk phase. We sell SCATs to a number of countries and a number of cities. It is so successful that other countries and other large cities buy our system from us and set it up there.

Mr GEORGE SOURIS: Do they not monitor the intersections in the way that we do?

Dr JOB: Like us, they would be unable to put in countdown timers because they monitor the way we do.

CHAIR: The whole system is designed to move cars and not to move people across the roads?

Dr JOB: That is correct.

The Hon. ROBERT BROWN: As you said, under this system, every one of these signalled intersections has sight impaired buttons that make a beeping noise that normal people can hear. That would be a simple way to effect a huge change. Obviously those noises are triggered by the light changes. It does not matter when the lights change, that is when the noises change. What if a siren or a horn were sounded the minute the red light came on? In other words, we require low technology. Those buttons are for the sight impaired but a horn would be for the attention impaired.

Dr JOB: It is an interesting idea. If you made it that loud you would find in the city that you would hear it across several intersections, so you would have that problem. In addition, a horn has a particular use and its use is regulated.

The Hon. ROBERT BROWN: To frighten the life out of pedestrians.

Dr JOB: Its use is regulated and only car drivers use horns. If you have these noises you might find that you distract car drivers. They might wonder who was coming at them.

The Hon. RICK COLLESS: If you go to Beijing you find that drivers there sit on their horns all the time.

CHAIR: We might bring ourselves back to the topic at hand. I refer to the Centre for Road Safety and ask: How much is devoted to research on innovative new technologies that might save the lives of pedestrians?

The Hon. ROBERT BROWN: Like my idea?

Dr JOB: I could formally get you the dollars. I would be happy to do that and to take this question on notice. Every year we commit millions of dollars to research that we conduct ourselves, or we get various other research institutes to conduct the research. We fund the Injury Risk Management Research Centre at the University of New South Wales and the George Institute, which is associated with the University of Sydney, to do research. By tender we fund various other organisations that might do surveys, et cetera, for us.

In addition, we conduct significant trials ourselves. For example, at the moment we are running what would be Australia's largest trial of intelligent speed adaptation [ISA]. It is being conducted in the Wollongong and Illawarra area and it will involve around 100 vehicles being fitted with intelligent speed adaptation technology. Right now we are collecting the pre-data. We are collecting a lot of data on the speeds at which they drive now, and various aspects of petrol use, et cetera, in fleet vehicles before we put in the ISA devices. We will then collect post-data as a comparison.

We trial technologies like that. I think it will be an interesting trial. We are interested in that trial because we hope it will demonstrate—we expect that it will—improvements in road safety. We hope we will be to promote it on the basis that it will not only improve safety but also reduce your chance of being caught at a speed camera, improve your fuel usage, make your vehicle fleet more efficient, and result in fewer crashes. There are all sorts of benefits that we hope will help to promote that kind of technology.

CHAIR: Last year when Mr Souris, Mr Nordin and I went to Canada, Norway and Germany, we found that the New South Wales Roads and Traffic Authority Centre for Road Safety and the Victorian Traffic Accident Commission [TAC] are held in high regard right around the world for the work that they do. Across the world we are regarded as world leaders in road safety. I thank Dr Job for appearing today.

Dr JOB: Thank you.

(The witness withdrew)

(Short adjournment)

JOHN DOUGLAS HARTLEY, Assistant Commissioner, Commander Traffic Services Branch, New South Wales Police Force, 11 Liberty Drive, Huntingwood, sworn and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and is protected from legal or administrative action that might otherwise result in relation to the information you provide. I also point out that any deliberate misleading of the Committee may constitute a contempt of Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the Committee's evidence. I welcome you and thank you for appearing personally. It is not often that an assistant commissioner appears before the Committee and I appreciate your taking the time from your busy schedule. I know that I speak on behalf of all members in saying that. Would you like to make a brief opening statement before we proceed to questions?

Mr HARTLEY: Yes, I would like to bring a couple of issues to the Committee's attention. As members are obviously aware, pedestrian safety is a major issue in our road toll. From 1999-2004 pedestrian deaths represented 18 per cent of the total road toll. This year so far 15 per cent of our fatal crashes have involved pedestrians—there have been 44 pedestrian deaths. Last year, 51 pedestrians were killed, which was 13 per cent of the road toll for that year. There has been a significant reduction in the toll. I have a graph indicating how the figures are reducing over time.

Certainly, we have seen significant improvements in metropolitan areas compared to country areas over the past five to eight years as well. I have another graph showing the figures for metropolitan and country areas. It indicates that more than half of the fatal crashes involving pedestrians in 2003-04 occurred in metropolitan areas. In 2007-08 they were about on par. We have made some great improvements in the city with the various changes to roadways, fences around hotels and working with bus companies about care in turning corners, which is where many people are killed. We are looking at how to improve pedestrian safety.

I have just reviewed the last 40 pedestrian deaths on our roads. There is no pattern as to why the deaths have occurred. There is not one or three single factors telling us it is alcohol, elderly people, young people or people lying on the road at night-time. There is no one factor or series of factors that we can target as a community or a police force or as a club, pub, hotel or town.

The Hon. ROBERT BROWN: The graph indicates a commendable improvement in the metropolitan problem. Would you like to offer any opinion as to why the graph does not show a corresponding reduction in non-metropolitan fatalities?

Mr HARTLEY: It is very hard to explain. A lot of the country crashes are on dark roads with no lighting. We have had a lot of lighting improvements in the metro area, there is much more awareness and many more cars are travelling on motorways rather than on side streets. In the past when people were driving on Parramatta Road or the Great Western Highway there was a chance of colliding with someone walking home. Now people are driving on the M4 or the M7. That is a rough estimate of where some improvements have occurred in the metropolitan area.

The Hon. ROBERT BROWN: Having noted this, do you believe there is any way that infrastructure or engineering solutions could be applied in non-metropolitan areas that would perhaps help to achieve a downward trend in the graph for those areas?

Mr HARTLEY: I do not think there is. I think that many of these incidents involve people walking home on the side of roads where, being realistic, there is no chance of a footpath being provided. Last week a lady walking in Miranda reading a book was collected by a car. They are the sorts of things that happen and, to my mind, there is no infrastructure that would save that person.

Dr ANDREW McDONALD: The NRMA submission says that it supports the better enforcement of existing speed limits. Soames Job told the Committee that he estimates that 200 lives a year could be saved if everybody drove to the speed limit. What is the role of the police in changing the way our speed limits are enforced?

Mr HARTLEY: We obviously have a cap on our resources. We have 1,088 highway patrol positions and around 1,050 or 1,060 positions filled across the State at any one time. Those resources are deployed to

target high-speed areas. That may be out on the roads preventing car crashes more than pedestrian crashes. Highway patrols target school zones every morning and every afternoon for an hour of each shift, even though the fatality rate in school zones is very low—in fact, there have been two deaths in school zones in the past five years. However, we still target them as a reminder to drivers to slow down. Our role is, first, enforcement and, secondly, to present a high profile to have an impact before people do something wrong.

Dr ANDREW McDONALD: Other jurisdictions have used point-to-point speeding checks and random fixed cameras. Do you have a comment about them?

Mr HARTLEY: We certainly have fixed speed cameras in New South Wales. I believe that point-to-point is being discussed by the Minister for Roads at the moment. There is talk about random speed cameras—which I suppose are mobile speed cameras—being reintroduced across the State.

Dr ANDREW McDONALD: Whenever speed limit enforcement is mentioned the shock jocks talk about revenue raising. How can we deal with the perception that this is revenue-raising rather than a safety issue?

Mr HARTLEY: It is difficult. I know that traffic operations cost the New South Wales Police Force about \$240 million. Even though the revenue does not come to us, it is probably less than \$100 million. My argument is that we are not paying our way if that is the case. It costs a hell of a lot to have all these vehicles and people on the roads. We do not care about revenue. I read in a report what it costs us to enforce and the revenue collected by the Government, but we are way behind the eight ball if we are talking about cost recovery with regard to policing activity.

Mr GEORGE SOURIS: I refer to the issue of policing at school zones. There are two aspects: Speed and illegalities occurring at the actual crossing, particularly with parents dropping off kids parking illegally, obscuring visibility et cetera. Is my perception correct that when police officers patrol these areas or set up an invigilation of some sort it is usually speed detection on the departure side? Is there a policy? Do local commanders have their own different policies?

Mr HARTLEY: It depends on the length of the school zone if they are using radar equipment. We have some restrictions on where they can and cannot use radar equipment for technical and health and safety reasons. We do not work the first 50 metres coming into a school zone.

Mr GEORGE SOURIS: You never do?

Mr HARTLEY: That applies to any road rule. The car is allowed to slow down. We give people 50 metres of grace to come back to the right speed. If you are doing 60 kilometres an hour coming into a school zone, you get 50 metres of grace before we ping you for speeding. That is how we need to operate the equipment for driver fairness. That is how we set up our gear. We need to be able to track the car's speed coming in and slowing down. That gives a good tracking of the speed they are doing.

Mr GEORGE SOURIS: I am more troubled to hear that. It is as the cars reach that critical point in the lead-up and actually in the zone that is the most dangerous part, not 30 yards after the crossing where there is not much activity. In fact, that is usually very close to the end of the zone.

Mr HARTLEY: That is taken into account in the engineering of most school zones. It is discussed with local police officers. They are probably put back that 50 metres to make it safer.

Mr GEORGE SOURIS: The point I am making is that it is better to slow down the car as it crosses the crucial bit rather than to catch it later.

Mr HARTLEY: The crucial phase is probably 30 metres into the zone as far as we are concerned. Our policy and process says that the first 50 metres allow the driver grace to slow down to the appropriate speed. In reality, they are doing 50 kilometres an hour or 60 kilometres an hour coming into a 40-kilometre-an-hour zone. If they are going at more than 60 kilometres or 65 kilometres an hour they will be booked anyway for the offence outside the zone. If they were travelling at high speed they would be pulled over anyway.

The Hon. RICK COLLESS: What about 80-kilometre-an-hour and 100-kilometre-an-hour zones leading into a school zone? Do they have a longer grace zone?

Mr HARTLEY: It is still the same 50 metres. That is only fair to allow drivers to check the sign and look at their speedo. They travel that distance in one or two seconds.

Mr GEORGE SOURIS: Do you think it would be better to police them before they get to the crucial bit?

Mr HARTLEY: We do. A sign is a sign. It is a policy we have in place to be fair to all drivers. We go to court and there is a dispute, or they say they were right on the line or before the line. We need three seconds to check their speed in that zone.

CHAIR: The rangers in my local council area issue fines generally to mums in four-wheel drives—I hate to characterise—and they go to court and get section 10s. The council is getting very frustrated that fines are being issued in school zones but the courts are not supporting that. Are police having the same experience?

Mr HARTLEY: We get very few not guilty decisions now. Most offences are recorded on video. If you are pulled up for speeding by an officer in a highway patrol vehicle, it is all on tape. The offenders normally plead guilty. Section 10s in other areas certainly frustrate us with drink driving and those sorts of offences, particularly in country areas, but this is a different issue.

The Hon. IAN WEST: The majority of injuries occur in metropolitan areas—94 per cent of pedestrian fatalities and injuries. A number of those involve buses. Buses have been involved in 17 fatalities and 310 injuries in the past five years. Only 2 per cent of pedestrian injuries have involved heavy vehicles, but they have been involved in 16 per cent of fatalities. Do these figures have a bearing in determining where you target your resources?

Mr HARTLEY: The bus turning is the big issue. Most of them involve the bus driver turning across intersections and not seeing people crossing. However, there is no pattern for us to target. With speeding we know there is a high crash rate on X or Y road and we can target that. However, there is no pattern to where pedestrians are being killed. It is not Oxford Street, George Street or Liverpool Street or any particular street that we can target. We all see potential accidents every day.

Dr ANDREW McDONALD: We know there is no pattern, so you have to act on evidence that does not exist. What should we be doing? In your opinion, what is the most effective thing the Government could do to reduce the pedestrian road toll—no science, just an opinion?

Mr HARTLEY: I think education—pretty strong education—for the people in the main impact group, which is probably the 35 to 65 age group, that walk on roads is a fairly significant risky task.

Dr ANDREW McDONALD: So it is pedestrian education rather than driver education?

Mr HARTLEY: Yes. I think that the most I read are people walking out in front of a driver and there is not a lot of evidence given that the driver could see the person for a long distance before and avoid them. The other thing you can do is to reduce the road speed to 30 or 40 kilometres per hour in all zones. That is one way of reducing fatalities to almost nil, and you are reducing your injuries too.

The Hon. ROBERT BROWN: Your division, the traffic division, do you have any resources, such as foot patrol type resources, in the metropolitan area, say the CBD? We see police foot patrols. They do not come under your command, do they?

Mr HARTLEY: No, they do not.

The Hon. ROBERT BROWN: Because of the propensity of injuries, not so much fatalities but injuries, in the CBD with slow speed collisions, but turning and all that sort of caper, do you think there would be any value in a program—like you have programs on speeding—having the Sydney LAC have a bit of a hit on pedestrian education at crossings and things? In other words, either police officers in their foot patrols or police volunteers when they are standing at a crossing say for half an hour at peak hour on Monday morning handing out not infringement notices but little notices to pedestrians who cross on the red blinking light or run across the road or anything like that. Is there anything that can be done in this very high injury area of the metropolitan areas?

Mr HARTLEY: Again it is about resources. I should mention that for the last 12 months we have issued 465 fines, or thereabouts, for people jaywalking, so to speak, across the State. That is not a big number, but it does indicate that most occur in the metro area. If there are complaints to the local commanders they will react and put an operation on. But again it is resources. If there is no road safety benefit to stop the pedestrians, there might not be a road safety benefit proven there, they might go and do mobile phones or something more important that they see.

The Hon. ROBERT BROWN: If it is brought to the attention of a local area command, in the Sydney CBD is there a traffic committee upon which the police sit with the local council?

Mr HARTLEY: Yes.

The Hon. ROBERT BROWN: To your knowledge has that ever been raised as an issue?

Mr HARTLEY: Not to my knowledge.

Mr DARYL MAGUIRE: Just a follow-up question with regard to that. Was it ever the case that parking officers, brown bombers, et cetera, had the authority or power to issue a ticket or direction with regard to pedestrians if there was a dangerous activity occurring?

Mr HARTLEY: Not issue an infringement. They certainly were special constables, which gave them a bit more of a power to confront somebody, but certainly there was no power to issue an infringement to those people.

Mr DARYL MAGUIRE: Would that be an additional benefit to help monitor—

Mr HARTLEY: It certainly could be. I think the only issue is you raise the assaults on those people. You are probably creating another problem by fixing another.

Mr DARYL MAGUIRE: What I am saying is the reinforcement of the message rather than being the infringement—the brown bomber giving direction as in, "That's a dangerous act", rather than issuing infringements.

Mr HARTLEY: You would probably find an escalation, that is the only issue, and a lot of people are not taught to deal with the escalation. They might be uptight—one in three might be a potential assault of a person, so that is what worries me. It is great in theory but it is just the practical part of having somebody not skilled, not armed or equipped to deal with somebody who may be violent.

Mr DARYL MAGUIRE: So the answer is extra resources for the police to be able to do their job?

Mr HARTLEY: Pedestrian fatalities are certainly a concern to me. I just cannot see how I can put resources into an operation that would target that activity across the year, when in fact it would be a detriment to our drug-driving campaign, our drink-driving campaign, our speeding campaign. The resources would come from there to there no matter what I had. I think the bottom line is you have to work out where your best resources should be.

The Hon. RICK COLLESS: My question has partly been answered by Mr Brown's question, I think. The concerns I have relate to the activity of pedestrians walking on flashing red lights and even leaving the kerb after the red light has come on while there is traffic waiting to go through on a green arrow. The issue of policing that I think you have answered, but the activities of pedestrians generally in areas away from crossings also is of concern where you see people run across to the middle of the road where there is no divided road. They might be standing on a double yellow line waiting for a gap in the traffic and then they dart across again. I have had someone thump my car as I went past them, indicating that I should have stopped and let them across. How can we better police those sorts of crazy activities that some pedestrians embark upon?

Mr HARTLEY: I think you will find that some of those activities are, in general terms, legal to do if you do not impede, but the fact is—

The Hon. RICK COLLESS: They are not very smart though, are they?

Mr HARTLEY: Not very smart at all. I think the only solution I see is the big fence in the middle of the road that makes people walk to the crossing at each end. It does not look real flash but I think most schools have the big fence in that middle lane of a roadway to make people walk to the crossings. That is an engineering solution that would help.

The Hon. RICK COLLESS: In relation to the comments you made about lighting, particularly in regional areas on roads that pedestrians use, have you collected any data on the amount of accidents that occur in that situation where there is no street lighting?

Mr HARTLEY: The data would be available on the system but I have not actually looked at that.

CHAIR: Both the Roads and Traffic Authority and the police were not heavily criticised but criticised about data collection. One submission, I think from memory, suggested you would be far better off using ambulance data for injuries because the police record fatalities and then an injury might be more severe or less severe. Do you think there is any scope for improving the data collection in relation to all accidents, not just pedestrians?

Mr HARTLEY: Yes, there certainly is. I just might add that for an injury accident a police officer has to input 200 different points of data for any injury crash on the computer. So our data is quite significant. The fact is that a police officer cannot tell whether an injury is serious or whether it is minor or major or what the criteria might be. So what I think we should do is leave our criteria very simple for a police officer to answer—Injured? Yes or no; Taken to hospital? Yes or no; Blood sample taken? Yes or no—and put it on our system. That would then need to match the hospital records, rather than a police officer trying to make some sort of judgement without any expertise in the injury level of a person. It would be just impossible to do.

CHAIR: Dr Job said they had been trying to match hospital records with the police and their own records and it has proven to be very difficult, given privacy concerns, of course. It has been suggested that when a police officer returns, say, to Camden police station to enter his or her data up, the scene of the accident is at Camden, not necessarily the actual location.

Mr HARTLEY: No. I will go through just a couple of points, if I may, so that you know where we are coming from. The nearest intersection or landmark; if not the nearest street, distance from landmark in kilometres or metres; direction; LAC and sector; street name; street number; property name; again, proximity—all of these figures have to be put in. So it is down to a reasonable closeness. When I am out somewhere like Yurong Creek or somewhere down Wagga way, I might be a kilometre north of RMB 324 and that is your nearest landmark. The police officer will hop in the car, press their odometer and drive back to the nearest landmark to say, "Here is where the crash occurred".

Mr DARYL MAGUIRE: You do not use GPS?

Mr HARTLEY: We have the capacity, but there are different types of GPS, and to rely on that as a single factor would then mean that the police officer would not be able to go back and identify the scene. So we say no, it has to be a landmark, a post office box number or some site that we can say that that is accurate, and GPSs are not always accurate—certainly our records are not either, but the GPS can be out by about 40 or 50 metres.

The Hon. RICK COLLESS: One of the other issues is when you ring the triple-0 number they ask you what the cross street is, and if you are reporting an accident that is halfway between Yurong Creek and Henty there is no cross street there and when you tell them it is halfway between two villages or adjacent to a village where there is no cross street, it confuses their system completely.

Mr HARTLEY: I cannot answer that one.

The Hon. RICK COLLESS: But it is a problem trying to get the message through to you guys when there is a problem.

Mr HARTLEY: I left the country 10 years ago from Wagga Wagga so I cannot comment on the problems faced now. If there was an issue raised our communication would look at it again and see what the problem was.

Mr DAVID HARRIS: The highest rate of fatalities seems to be in the 65-plus age group. Do you personally see any value in an education program for seniors? We do it in schools and I notice the ad at the back here where, again, it is a younger person, but we do not seem to target the seniors where they seem to consistently have the highest number of fatalities.

Mr HARTLEY: I think any education is certainly worthwhile to any group, but our problem with the elderly is I think fragility is the issue that causes the death rather than the actual incident and I think that is a problem we cannot address. The problem is they get hit by a car and get a broken hip—

Mr DAVID HARRIS: A lot of them do not understand that.

Mr HARTLEY: Education would be great, but I do not know how you would get it out there.

Dr ANDREW McDONALD: That brings me to the education of the police force pedestrian campaign with the Bronze Lion Award. I have not seen that ad. Has that ad been rolled out?

Mr HARTLEY: Yes, it was rolled out last year across the metro area to the *MX*, the local metropolitan papers that people in that group read. So it was not broadly across the State statewide because, one, the funding would be too expensive for that and, number two, our target audience was a group that may do this in Sydney streets.

CHAIR: Thank you for taking time out of your very busy day to come and talk to us today.

Mr HARTLEY: Good luck with your deliberations.

(The witness withdrew)

PAUL JAMES RILEY, Road Safety Manager, Institute of Public Works Engineering Australia, Level 12, 447 Kent Street, Sydney, sworn and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I should also point out that any deliberate misleading of the Committee may constitute a contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence to the Committee. Would you like to make a brief statement before we proceed to questions?

Mr RILEY: Yes, I would. Thank you very much for the opportunity to give evidence in this very valuable inquiry. My opening statement will just be to basically give an overview of what I have presented, and that is certain issues that have just been brought up about the data. I believe that the biggest issue is you do not know what you do not know, and that is where I have come from with my submission. It is not a matter that there are vast flaws in the information that is used, it is just that I see from my experiences in this current job and in 19 years as a paramedic that there is a lot of information that is available that could be very useful as an adjunct to what there currently is that would be very helpful for such an inquiry.

Mr DARYL MAGUIRE: Would you expand on that?

Mr RILEY: Certainly. I will use an example. Assistant Commissioner Hartley answered some questions. I am currently working with the newly formed Ambulance Research Institute to gain information for local government areas on crash injuries and their cost to the community. Basically, we are trying to provide accurate locations where accidents have occurred and provide that to council as a dollar value. That might sound as if it is dehumanising things, but it will provide them with information that they do not currently have. For example, if a local government area experienced 100 incidents of pedestrians being injured or of pedestrian-related incidents in any one year, you would not know how many of those were seriously injured and how many of them actually walked away. The reason for that would be, as Assistant Commissioner Hartley said, they do not follow up with the hospitals. They do not have the time and it is not their primary goal.

The Ambulance Service has very accurate information because it uses GPS. When a paramedic turns up on scene, they push a button to say that they are on scene. There is no radio communication at the time. They push a button, and they will always be within several metres of the scene; they will not walk 200 or 300 metres just to get to a crash site. So you will instantly have, for every incident, an exact location. If we married that information with that of the trauma hospitals—all of the hospitals in fact, but predominantly trauma hospitals—we would be able to find the injury level for each of those people.

Research has been done—and I have included it in my submission—indicating that a certain abbreviated injury score allotted to a patient or person indicates a dollar value. The abbreviated injury score was developed in 1971 for the sole purpose of quantifying and measuring motor vehicle related injuries. For example, an abbreviated injury score of 1 equates to around a \$11,700 cost, and that includes an element of functional capacity index. So it incorporates a lot of different aspects to an injury. An abbreviated injury score of 5, which is a very significant injury, if it involves multiple injuries, equates to an \$860,000 injury. Through our collaborative effort with the Ambulance Service, we are hoping to provide local government areas with a GIS map, which shows dot points and a colour reference to say there have been X number at an abbreviated injury score of 5, 4, 3, 2, 1, and then all of the others. The interesting thing is that you will find that there are probably a lot more "others" than there are of the serious.

When I was in the Ambulance Service I worked for a while in the position of trauma clinical support officer. It was a role that was being trialled. We looked at serious injury and how the Ambulance Service could better deal with it. The number of serious injuries is a very small portion of the total number of calls that the Ambulance Service receives. That is why I come back to: you don't know what you don't know. There are an awful lot of calls. If you get 10 injuries, and in 9 cases the person walked away and one resulted in a person being in hospital for a year, would it not be better to know where that one was, rather than the other 9?

There are many incidents that the police do not get to know about. This comes from working as a motorcycle paramedic in the city, and it is an observation more than anything at this stage. That is not because of any problem facing them. Every day, for the many years I worked in the city, you would get at least one pedestrian hit. I used to say to my family that if I came home and I had not been to a pedestrian incident in the

day, there was something wrong, because they were that frequent. Most of them do not involve anybody being injured. Many of them involve somebody being brushed by a car. You have indicated the case of the person who stands in the middle of the road, with a person on their mobile or on their iPod and just do not take any notice and they step into a vehicle. Many of those people are too embarrassed to go to hospital and they are not badly injured. But it would be a good thing for councils to know how many of those cases there are a year. I would estimate there would be hundreds of them. They are not people with an injury, but knowing that information would give council a better picture of where there is potential for injuries to occur.

Our office in Kent Street is just near Town Hall, and there are barricades on Druitt Street where people have been killed. That was in response to pedestrians being injured there. As was indicated, fences in the middle of the road would probably be the only way to stop people being injured. But it would be good to know where incidents, even minor incidents, are occurring. The police do not get called to them. If they do, they probably do not get there in time, because the person has already gone back to the office or gone home. There are a lot of these incidents occurring. There were numerous incidents involving little or no injury where the persons ran away, embarrassed. I think it would be good to not wait for someone to be badly hurt, but to indicate a problem area.

The Hon. ROBERT BROWN: You are talking about better data collection. You mentioned where an ambulance officer or a paramedic gets to the scene, both press a button.

Mr RILEY: Yes.

The Hon. ROBERT BROWN: In the case of other than a minor injury, is it appropriate to have ambulance officers, who are there primarily to save lives, filling in forms? Secondly, you mention interrelating that data with a hospital. The hospital situation is an emergency room or emergency reception, and again we have problems with emergency units in hospitals being understaffed and so on. In terms of just producing data that is fairly broadly indexed 1 to 10, could not the ambulance officer or paramedic simply assess, broadly speaking, what the range is? At the end of the pickup I assume they have to talk to someone to say where they are going, which hospital or whatever. Would it not be better if they could simply say index 10, or 1 to 5, even though it might be a broad guess and the person may later become a fatality? We heard Assistant Commissioner Hartley talking about a number of points of data. You could not have ambulance officers doing that, could you?

Mr RILEY: They do not need to.

The Hon. ROBERT BROWN: What do they need to do?

Mr RILEY: The predominant data that the ambulance officers need is already included. They do not have to fill in anything else. The process that I am suggesting and am aiming for will not even involve ambulance officers doing anything different from what they currently do. The radio communication system in the ambulance does allow for a voice-over radio, but it also has a data channel, or data radio; so when they get on scene, they press a button, and that is recorded. The interesting thing is that it is matched to the location given on the 000 call. That is something else we are looking at, to see how often that varies. One of you gentlemen indicated that there are problems where there are two town—

The Hon. ROBERT BROWN: And cross streets.

Mr RILEY: Yes. That will not come up with a definite location on the initial call, but it will when the ambulance gets on scene. The paramedic is always filling in information on a patient health care record, recording the date, the time and the location, as in a street location, but the information gathered in addition to that is obtained when they press the button and it gives a position of longitude and latitude.

The Hon. RICK COLLESS: In what form is that information transmitted? Is it a GPS type of location?

Mr RILEY: That is exactly what it is. But they have two huge databases and they marry them together, so that they can have the patient health care record, which is handwritten, married to the information that has come from the 000 call. That information is already being joined and collated. We are looking at getting that and matching it to the trauma system.

The Hon. IAN WEST: Mr Riley, I understand that your institute is interested in establishing a data collection system in combination with the Ambulance Service and local councils. Have you had any preliminary discussions with the Ambulance Service, the Roads and Traffic Authority and the councils?

Mr RILEY: We certainly have. I am currently spending a day a week with the Ambulance Service, beginning this process with the Ambulance Research Institute. This is a fairly newly formed institute. The main reason for it is that in the health industry there is a huge gap in evidence from when someone is injured or becomes sick to when they enter the hospital system. Most research is based from the time that they have entered the hospital system. There is a lot missing in those 15 minutes to three-quarters of an hour that it took to get someone into the hospital system. So they do have a lot of information; it just has never been formulated in a way that can be researched effectively. That is the intention of the system.

Interestingly, in all of the emergency medical services research conducted worldwide in recent years, only about 54 trials have any real validity to them. There is more research being done on constipation than there has been done on things like what effective treatments there are in emergency medical services. I have spoken with the RTA about this. We have given them the intent of what we are doing, and asked whether they wish to be involved, and they have said that they had already looked into hospital data.

The Hon. IAN WEST: I would like to know whether you have actually had discussions about your proposal with police and local government.

Mr RILEY: Local government, yes.

The Hon. IAN WEST: And the Ambulance Service?

Mr RILEY: Yes.

The Hon. IAN WEST: What is the feedback?

Mr RILEY: The Ambulance Service is quite excited by the prospect of being able to utilise their data. I have not spoken with the police. I mentioned this idea to Assistant Commissioner Hartley at a forum some time ago, and he saw no problem with the direction we were taking. I have indicated, through councils, that we are doing this and asked whether they would be interested in a trial. Within two hours, I had 25 councils saying they would welcome extra data. I stress that we are not saying that the data they currently get is no good. It is collected for different reasons. Quite often, if somebody sues a council over a road-related incident and they seek information, the information is old, relatively speaking. But there is good reason for that. We are looking to try to accelerate that process so that they can see where the priorities are before them.

Mr GEORGE SOURIS: We have heard a fair bit about the further statistics and information you want and how to collect it and so on. Where does that lead us in terms of public works and engineering? All these paths have been leading to medical outcomes, what happens in a hospital, and so on. Where is the connection between the statistics and what you feel you need as extra statistics and information for engineering purposes?

Mr RILEY: One of the biggest would be in response to a comment by a gentleman who has done a lot on the legal aspects for councils, and he says that in recent years many legal decisions that have been handed down indicate that road authorities—and councils are road authorities—need to have a method of identify where their problem areas are, as well as a method of prioritising the treatment of those areas. I have asked several people from councils how they prioritise the roads issues they have. It is normally on the volume of vehicles, the volume of trucks, or a number of motor vehicle-related incidents. They are the primary reasons.

As I have indicated, what we aim to do is provide a dollar value to say that there has been \$5 million worth of injury caused on this section, even if it is only a small section of road; yet there could have been 50 times the number of incidents in another area, but they are very low-grade incidents. It gives something to hang your hat on, for want of a better term, to say, "Here's a method of prioritising where you need to address it." It might not be a result of the roads, but I am hoping that ultimately it will encourage more road safety audits so that you can have some sort of point at which you would say, "Here is a dollar value at which we say we need to investigate this section of road"—whether it is \$100,000 or \$1 million—"that has been shown to be a problem area. Let's look at that. That's a priority."

The other thing is that there are forestry roads in and around New South Wales. Because it is not a public road, it does not get onto a lot of databases. There are private roads and car parks. There are some fairly significant injuries in car parks. There are also cycleways that do not get onto the database because they are not public roads, or they are near it but quite often are not included. A lot of motorcycle crashes are not included. I do not know how many times I have picked up a motorcyclist who has said, "You're not going to call the police, are you?" It is simply because it has been a single vehicle crash. They have done something wrong, and they know they will be booked for it, if the police are involved.

I dare say the police do get involved, but sometimes that is not going to be the case. If the ambulance controller is flat out at the time of the call, they are not going to call the police unless they are asked to. Sometimes people get off. Those sorts of things do not get onto the database, nor, as I said, do the "refused transport" cases in the city when people get knocked over by a car and then get up and walk away.

Mr GEORGE SOURIS: It all leads to how black the black spot is.

Mr RILEY: Without becoming a black spot.

Mr GEORGE SOURIS: As opposed to what engineering is suggested from it.

Mr RILEY: The other thing too is that, if you are looking at injury, there is three to five times the number of injuries as there are deaths. To my way of thinking, it is a much better approach to look at serious injury and where they are, rather than waiting for black spots to be a black spot because you have a lot more data to indicate where the patterns are through injury than you have through death.

Dr ANDREW McDONALD: What you are suggesting will be very resource intensive, so the reality is that it may not happen for some time. Given the limitations of what we now have, what would you recommend that this Committee should do about the problem at hand, which is the increase in pedestrian fatalities in 2009?

Mr RILEY: Find out exactly where they are. As I said, you need to know the size of the problem.

Dr ANDREW McDONALD: The previous witness, Assistant Commissioner Hartley, has looked at that and has said that there is no pattern.

Mr RILEY: Probably from working in the city and my observations in the city, I think one that is a lot simpler—although it is certainly not simple but it is one of the most significant impacts you could have—would be to make the entire central business district [CBD] a 40 kilometres an hour zone. It has been proven in data that there is a significantly reduced risk if you are hit at 40 kilometres an hour. You are not going to stop people talking on their mobiles and you are not going to stop people from wearing iPods. I travel by train and I walk only a short distance to the station, but every day I see people nearly walk in front of a car because of those two things alone. That is in a very short distance.

You are not going to re-educate people on those things. You are not going to stop people from standing in the middle of the road when they are in a hurry because traffic lights take too long. We live in a society in which people will stand at the microwave and yell, "Hurry up!" We are not likely to change people too much. The only thing you can do, and perhaps a major thing that you can do, is perhaps slow people down. People are going to hate that, but the evidence is there to suggest that if being hit at 40 kilometres an hour, you have a significantly reduced risk of injury and death.

Mr DARYL MAGUIRE: But Mr Riley, what you are doing is expecting drivers to change. What you are doing is accepting that the use of technology is unenforceable or that people cannot be re-educated, yet drivers need to be re-educated to drive at lower speeds. I would disagree and say to you that the experiences you have seen are those that all of us have seen. As I said earlier, you can walk out onto Macquarie Street and see, with monotonous regularity, people stepping in front of traffic who are unaware and who are on mobile phones or with Walkmans, without any regard for their safety or for the safety of drivers. Already there are traffic problems associated with cities and major towns, et cetera. I think the solution has to be far more progressive than just looking at an overall speed limit. We know that reduced speed reduces accidents, but the fact of the matter is that they will still occur, even though you are driving at reduced speed because of the actions of people.

Mr RILEY: Yes, and you are probably talking about less than 5 per cent of the people who are going to be driving in a way that will cause an injury to a pedestrian through their driving. But it is usually a combination of things. It is a combination of people perhaps driving too quickly with pedestrians being so close to the road, and also when pedestrians are doing the wrong thing. Are you ever going to avoid that completely? No.

Mr DARYL MAGUIRE: Earlier in a submission it was suggested that the global positioning system [GPS] is inaccurate. Is that the opinion of the Ambulance Service or others who use GPS? How accurate are you finding that GPS is, within metres?

Mr RILEY: I have heard the same argument or discussion, and I really could not have a qualified discussion on that. I can only say that I am aware that it used to be something that was controlled by the United States Government. It depends on how much accuracy they afford it. I really do not know. But from the Ambulance Service point of view, I am assuming it is reasonably accurate because if you have a problem, there is an emergency procedure to use with the radio and that gives your exact location through latitude and longitude.

Mr DARYL MAGUIRE: On another Committee, we undertook an inquiry into non-feasance when insurance was an issue with councils. Councils adopted GPS as a means of identifying potential dangers on roads, such as potholes, bridges, et cetera. I assume that it was accurate. Do you think it is worthwhile carrying out some further investigation as to the accuracy of GPS?

Mr RILEY: Absolutely.

Mr DARYL MAGUIRE: Who would do such a thing?

Mr RILEY: I really would not know. It is not an area that I am at all familiar with.

CHAIR: We might investigate that.

The Hon. RICK COLLESS: My question really carries on from where Mr Maguire left off. Devices such as mobile phones have all got GPS capacity on them. I am referring particularly to areas outside the metropolitan area and the difficulty of getting a message through to triple-0 numbers about where you are, exactly. If I were to ring triple-0 on that phone, it would have a capacity, I am sure, to be able to identify exactly where that call was made from.

Mr RILEY: Not the Ambulance Service, but I imagine the telephone company would.

The Hon. RICK COLLESS: The facility is there.

Mr RILEY: Yes.

The Hon. RICK COLLESS: Do you believe that we should be looking at that technology so that as soon as the triple-0 call is made from a mobile phone, it is automatically logged onto a GPS coordinate which goes straight through to the ambulance and the police?

Mr RILEY: Absolutely. That would be a fabulous way of filling in a lot of the gaps in information that exist. When people give information, mobile phones have actually caused a lot of problems in terms of the accuracy of the data relating to location. For example, if you are driving to work and you are on General Holmes Drive, you ring triple-0 and you are on your phone and you are still driving because you had just seen a pedestrian hit—you do not want to stop because you cannot stand the sight of blood, and a lot of people are like that—you ring. Eventually you get on, and they will go through the patter of asking you a series of questions. By the time they say to you, "What is the nearest cross street?" You just look out your car window and you see the next street, and you give them that.

The Hon. RICK COLLESS: And you are 5 kilometres away.

Mr RILEY: Yes. That is something which, through observation only, I noticed. Quite often the cross street that was given was several blocks away from where we were. I often wondered why, and that is how we

figured it out. It does not make a great deal of difference in the big picture, I suppose. It might make a difference of 30 seconds in time to get to someone, and that could make a difference.

The Hon. RICK COLLESS: In non-metropolitan areas, it is considerable. They could be kilometres out.

Mr RILEY: That was the thing that Assistant Commissioner Hartley said about the police, who might zero their speedometer and give a location that way. That would be good if that always happened. I would imagine that that is not totally the way it happens all the time. If an estimate is given as to a distance, you could be incorporating five or six corners in a section of road on which you really want to know where it actually happened, and you will not know exactly. Having a GPS coordinate from a mobile phone would be a brilliant way of assisting.

CHAIR: Mr. Riley, thank you for your submissions today. I am sure that there will be many of your colleagues from the Institute of Public Works Engineering who would have been delighted to hear the evidence of Dr Soames Jobs today that there are lots of engineering solutions to these traffic problems, and that having more and more data helps. I am interested also in the educative role. You were at the NRMA Road Show at Homebush. Unfortunately because of ambulatory problems, I could not get around and take a look at all the exhibits. I am going to ask the next witness about that. Was there anything there that you saw about pedestrian behaviour relating to all those schoolkids on that day?

Mr RILEY: It was not something that came to mind.

CHAIR: Do you think there is a role for education as well as engineering solutions to these problems?

Mr RILEY: Definitely. Education in these sorts of matters is something that is like cutting the grass: it is not something that you can do once and then just leave it. It is something that you have to keep at, and not just continue with one particular line of thinking, but continually change and adapt to whatever the needs are. But definitely, yes: from my role with road safety officers and their ability to provide education, I see them as a fantastic link to the community from councils.

CHAIR: As you know, we took up their case on your behalf. Thank you very much for attending today, and for your continuing interest in road safety.

Mr RILEY: Thank you very much.

(The witness withdrew)

ANNE MORPHETT, Senior Policy Advisor—Road Safety, NRMA Motoring and Services, Level 1, 9A York Street, Sydney, 2000, affirmed and examined:

CHAIR: I draw your attention to the fact that your evidence will be given under parliamentary privilege and that you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I should also point out that any deliberate misleading of the Committee may constitute contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence you give to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Ms MORPHETT: I will make a very brief statement. Thank you for the opportunity to present on behalf of NRMA Motoring and Services. One thing I would like to point out is that although we represent motorists, all motorists are pedestrians at some time and we are taking an increasing interest in the area, partly because of the higher incidences of pedestrian crashes, and also because we believe that there are gaps in some of the education service provision. That is one reason that we are more involved in the issue.

CHAIR: I attended the wonderful NRMA show at Homebush that schoolchildren attended on three consecutive days. I remember the ambulance scene and I know other information was provided. Due to a physical difficulty, I sat in my seat and watched the show but did not get around. Did the NRMA have any information on pedestrians at the show for the schoolchildren?

Ms MORPHETT: The emphasis was primarily on young people as passengers and as drivers, because of the overrepresentation of young people in crashes. One of the speakers from the brain injury unit was struck as a pedestrian, an intoxicated pedestrian. We include him in it because one of the things that young people do not think about is their risk as pedestrians. The emphasis is not so much on their behaviour, except in that respect, but we try to get them to understand that wherever they are on a road they are responsible for their behaviour. Certainly as a driver of a vehicle they need to look out for pedestrians who are crossing, not just about crashing into another vehicle, whether a motorcycle, a cyclist, a car or a truck; it is also about striking pedestrians because of the serious nature of them being so vulnerable. That is emphasised, but not in terms of their behaviour in crossing the road.

The Hon. ROBERT BROWN: If you were present when the previous witness, Mr Riley from the Institute of Public Works Engineering Australia, gave evidence, you would have heard him talk about the same issue raised by the NRMA; that is, lack of data. Has the NRMA had discussions with groups such as the Ambulance Research Institute rather than waiting for the Roads and Traffic Authority data to be updated, in order to obtain more data? Or is that not in the interests of the NRMA?

Ms MORPHETT: Yes, it is something we have discussed at board level. One of our concerns is that any changes to licensing or road regulations, or changes to the infrastructure, should be evidence based. It should be the data that determines the speed zone, the location of traffic lights or the location of a pedestrian crossing that should be based on the data. We have expressed our concerns to the Roads and Traffic Authority about public access to data that is in the interests of the general public. We have written to them. We have also raised it with the Minister and his office. We know that there are some problems with the way that the data is recorded.

I guess one thing we are particularly concerned about is what they do not make public but have the capability of doing; that is, doing geographic information service [GIS] mapping where a crash has occurred. I heard the Committee's discussion around the accuracy of the global positioning system [GPS], and how those crashes are recorded. We feel that that would assist for serious crashes, injuries and fatalities. We would be able to collect quite a lot of data. In a road safety program that I was involved in, which was more towards disciplinary in the New England area, and they GIS-mapped 10 years of data of crashes involving women drivers, because it was the only part of the State where women drivers were a higher at-risk group than male drivers.

They could map using their run codes, so you could see what kind of crash it was—run off road, left-hand or right-hand, strike a post or tree. They had the capability to do that. We think that should be public, as it would assist local government in determining black spots and road improvements. Some crashes happen because of road infrastructure. It is not necessarily the driver's problem. In pedestrian crashes, if there is a history of

pedestrian crashes we would like to see more at T-intersections or cross-streets, which would help determine whether we should move the pedestrian crossing from near the corner to a mid-block crossing. We think that there are weaknesses with the data, but we also welcome greater openness of the data.

The Hon. ROBERT BROWN: I have a point of clarification. You mentioned that you have taken these concerns and your suggested measures to the Minister. Have you had a formal consultation process with the Roads and Traffic Authority over the NRMA's concerns about the type of data and the release of the data?

Ms MORPHETT: We have written some letters. It was raised at the recent ministerial Roadsafety Roundtable called by the Minister for Police and the Minister for Roads by our organisation as well as two or three other organisations that were representing different user groups.

The Hon. ROBERT BROWN: But you have had no detailed discussions following that?

Ms MORPHETT: No, we have not had anything in response.

Dr ANDREW McDONALD: In your submission you referred to the enforcement of speed limits. Could you expand on that? You said that the NRMA said that the enforcement of existing speed limits would provide immediate safety benefits perhaps more quickly than any other single safety measure.

Ms MORPHETT: Visible police presence is what we are referring to there because we know that you only have to see a police car for everyone on the road to change their behaviour, no matter what kind of road-user group. The other reason, from an education point of view, is that getting a fine in the mail four weeks later is not the best way of learning. We know from talking to police and our members and the public that what stays in their mind is their behaviour. I guess it is quite often the anxiety that they feel being pulled over by the police, and sometimes it is embarrassment. Sometimes it has a more significant impact on their behaviour.

Dr ANDREW McDONALD: Knowing that we could halve the road toll if everyone drove to the speed limit, what is the opinion of the NRMA about point-to-point or random speed cameras as a way of reducing the road toll?

Ms MORPHETT: We have supported the point-to-point for heavy vehicles. There are concerns, and we would like more information on point-to-point for any driver. One concern is what is the best use of resources? One reason we have supported visible police presence is that the highway patrol cars can pull over people for speeding, but they also act as random breathalysers. They can pull over people for dangerous driving who use their phones.

Dr ANDREW McDONALD: My question is quite simple: does the NRMA support point-to-point use for motor vehicles at this stage?

Ms MORPHETT: Not at this stage.

Dr ANDREW McDONALD: Does the NRMA support the use of random speed cameras, as used in Victoria, at this stage?

Ms MORPHETT: In the unmarked—

Dr ANDREW McDONALD: Covert.

Ms MORPHETT: I will take that question on notice, because we are having debate at the board level at the moment on that issue. We have been looking at the evidence from Victoria.

Dr ANDREW McDONALD: On the child injury issue that you have suggested, will you expand on that? That is the enactment of legislation assuming driver responsibility for accidents involving a child pedestrian in a residential area. What recommendations have you made on that?

Ms MORPHETT: We are working with other agencies. Overall our emphasis is on education and prevention rather than legislation.

Dr ANDREW McDONALD: But you have put in your submission that you recommend that it be enacted? It is in the executive summary, where it states, "The best performing countries...the majority of these countries ... have enacted legislation assuming driver responsibility for accidents". Do you have a position on that?

Ms MORPHETT: I cannot find it.

Dr ANDREW McDONALD: It is page 6 of the executive summary. It mentions international research, including the best performing countries in pedestrian safety.

CHAIR: We will defer that question until the Committee officer finds it in the submission.

The Hon. RICK COLLESS: In your submission you raise the issue of daytime running lights. You commented that low-beam headlights are not as effective as dedicated daytime running lights. What is the difference between them?

Ms MORPHETT: I will take that on notice. I have put this together, but parts came from our technical vehicle expert. I can confirm that we have written an entire paper on daytime running lights.

The Hon. RICK COLLESS: There has been a lot of discussion over the years about daytime running lights. The Committee is not absolutely clear on the difference between low-beam headlights and daytime running lights.

The Hon. IAN WEST: I will revisit the issue of the evidence given by Mr Riley from the Institute of Public Works Engineering Australia, and the issue of data gathering. Have you had any discussions with that institute? Do you have any views as to the proposals it put forward on data collection?

Ms MORPHETT: Yes, I have had some discussion with Mr Riley on the issue. We have shared the same concerns about the quality and availability of the Roads and Traffic Authority and Police Force data. We are interested to see what the Ambulance Service will do about it. We think that the greater accuracy and transparency about how the data is collected is a benefit to everyone involved in road safety. We are hoping that is supported by other agencies. We cannot contribute to it, but we believe that it is of benefit to everyone if that data is collected.

Dr ANDREW McDONALD: I have found what I was referring to earlier; it is on page 29 of the submission.

CHAIR: Please restate your earlier question.

Dr ANDREW McDONALD: Under the headline "International Research" at the top of page 29, it states that legislation assumes driver responsibility for accidents involving child pedestrians in residential areas. That is a dot point. Does the NRMA have a position on that legislation?

Ms MORPHETT: We have not looked at the legislation as an option for the reason I said before. We believe that there is a greater need for more education. One of the programs around child pedestrians that has been funded by the Motor Accidents Authority [MAA] and conducted by the MAA and Kidsafe Australia, supported by other organisations, was to educate parents about the need to hold their child's hand in traffic. A lot of parents do not understand that traffic being complex and children being unpredictable they do not have the necessary cognitive skills and vision skills to judge the flow of traffic.

We believe there is not enough education in this area, and that goes not only for parents and children as pedestrians, but also for the responsibility of young people and adults. Concerning some of the comments made by Mr Riley, I think we do educate drivers but we should be educating pedestrians to change their behaviour because education can work. It can be a challenge, but it is being done. Again, we should try education before legislation. Legislation does not necessarily change behaviour. I would look at trying to change behaviour in other ways.

In the United Kingdom, road crashes are the biggest killer of children aged 11 to 16. So the United Kingdom has created some excellent road safety advertisements designed by young people for young people. They have developed one advertisement that was shot entirely on a mobile phone, and it was workshopped with

young people. It is about how to use mobile phones around and on roads. It ends with one of the kids fooling around and being struck by a car. It is getting the message across. I suggest that there is a place for it; New South Wales is lacking that kind of campaign. The campaigns that are very effective are targeted at specific groups. They often have more impact if it is young people being involved in the development of that, because young people know what will work with their peers. The same thing applies to parents. We do not do that much for parents. There is an assumption that suddenly when you have children you will understand all the things that will make them safe. Road crashes are one of those things that no-one expects will happen to him or her, or to family members.

CHAIR: Campaigns such as the pinkie campaign, which has won international awards, are targeted at specific groups. At various times this morning the Committee has been told about young people with iPods and mobile phones being distracted when they are crossing the road. However, the evidence we have been given reveals that the people who need to be targeted are males between the ages of 35 and 60. They are the ones who most commonly are hit. Do you have any great ideas about how to target that group in a pedestrian safety advertising campaign?

Ms MORPHETT: I think you are right; road safety is a huge problem that is gender based. That is true whether we are talking about driver or pedestrian issues. The severe injury and fatality rates for intoxicated pedestrians reveal that it involves the 18-year-old to 70-year-old age group. We are concerned about the fact that it is a hard group to reach. You need to reach those people when they are not drinking, which is why the in-venue advertising has had less impact. In a number of the campaigns that have been developed we are trying to include people who might influence those men. Some of the campaigns are a bit like the prostate cancer campaign. Instead of trying to target men they get the wife or partner to put some pressure on the man to go off and have a check. Perhaps that is an angle at which we need to be looking. Public health campaigns have a fairly high success rate in behaviour change because they are so specific and targeted. I suggest that that is one of the things at which we could look.

The Hon. ROBERT BROWN: A pinkie campaign for speeding pedestrians.

Dr ANDREW McDONALD: Today a number of people have raised the issue relating to the 40-kilometre-an-hour speed limit for the central business district. Could we have the opinion of the NRMA?

Ms MORPHETT: Large parts of Sydney now have 40-kilometre-an-hour speed limits. Sometimes the traffic is moving at 40 kilometres because of congestion, which reduces the need to have an area as a 40-kilometre area. One of the things we are interested in is the use of variable speed limits. At high pedestrian times the limit would be set at 40, but at other times the limit could go back to the 50-kilometre urban speed limit. There is not always a need to have a pedestrian zone 24 hours a day and seven days a week. If you used variable speeds you would be able to allow the traffic to flow at an appropriate speed, but you would not be inconveniencing traffic flow at times when there was not a greater risk of pedestrians.

These crashes occur at different times and for different reasons. Intoxicated pedestrians represent only one group. We do not necessarily look at impatience being due partly to the timing of the traffic signals in the central business district where pedestrian crossings are located. I also suggest that many of the night crashes—and this is why we are interested in geographic information system [GIS] mapping of night-time crashes—are caused because of poor lighting and poor visibility. Some of the things we have suggested to improve safety measures include high visibility beading on pedestrian crossings. Motorists will have a long lead up and when they realise they are approaching a pedestrian crossing they can slow down and scan the road more carefully to see whether pedestrians are around.

We also think that mid-block crossings are something to be considered when we have enough data to make those changes. In the central business district, part of it is line of sight. You have advertising or street furniture blocking the line of sight and motorists cannot see a pedestrian crossing coming up, or they do not know it is an area where pedestrians frequently step onto the road. Referring to education, we are also trying to encourage people to wear clothing that will make them more visible to drivers. Again, we do not see very much advertising on some of those commonsense issues.

The Hon. ROBERT BROWN: Following your suggestion of high visibility pre-warnings of night and low-light conditions approaching crossings, I have noticed that a number of crossings on small suburban streets that have pedestrian safety zones on either side also have large high-visibility reflective signs at night. If pedestrians are standing behind that sign you cannot see them. That reduces the visibility of that pedestrian to

the length of this table rather than another 10 metres either side. Do you think local councils and authorities have given enough thought to the design of pedestrian crossings? I am not talking about central business district pedestrian crossings in full light; I am talking about outer metropolitan crossings.

Ms MORPHETT: I think the use of islands gives people a safety opportunity. However, motorists need to be able to see them. One of the things I would like to see trialled—again it is used in other parts of the world—is material that has high reflectivity, in particular, at night but also during the day. When the islands are built the angle faces the driver. In the example you have given, if there are two pedestrians they would be blocking what is designed—

The Hon. ROBERT BROWN: I am talking about a pedestrian who is behind the reflective sign, or the reflective striping. It is so high that car drivers are blinded by the reflectivity and cannot see what is behind the sign.

Ms MORPHETT: In that case the lower the reflectivity the better it would be. We encourage pedestrians to make eye contact with the driver, so there is that connection. The reflectivity could be lower and those islands could be clearly marked. We know that people have a tendency to run across the road and to stand on fairly narrow islands.

CHAIR: The message to our young journalism students today is, "Do not cross the road tonight wearing dark clothes. Put on a reflective vest before you go out."

Mr DARYL MAGUIRE: That was the message when I was child at school. If you go walking at night you wear lighter coloured clothes. It is basic stuff. You referred earlier to mid-block light control crossings, in which I have an interest. Have you seen that technology in action?

Ms MORPHETT: A lot of things are available that we are not trialling in Australia. I mentioned in the submission the puffin crossings from the United Kingdom. One of my colleagues is from the United Kingdom. We know that people often stand and wait because it is on a timer. The technology is aware of the fact that if people are not standing on the crossing the traffic should continue to flow, but if a pedestrian is standing on the crossing that will have the effect of changing the lights. We would like to see in Australia a lot more of the technology that is available and that is being used in other countries. We know that more mid-block crossings are being used in other countries. I refer to the recent incident of the person who was struck because there was no green arrow.

Mr DARYL MAGUIRE: Do you know whether those sensors work on infrared, or are they pressure sensors?

Ms MORPHETT: Some are pressure sensors and some are infrared. A whole range of technology is available. In some places it has been designed to help people with disabilities. In other places it was better than the existing technology; it related simply to timing. With the increasing age of the population, and with frailty as a huge issue, even a minor fall becomes a risk. One of the recommendations we put forward related to increasing the timing of the lights so that elderly pedestrians have more time to cross the road. We know that that will have an overall benefit for other pedestrians as they will not have to hurry. Young parents with prams and other things also find it more conducive to not racing.

Dr ANDREW McDONALD: Page 5 of your submission refers to what the NRMA is seeking.

Ms MORPHETT: Yes.

Dr ANDREW McDONALD: However, not one of those recommendations addresses driver behaviour. Could you comment on that?

Ms MORPHETT: We placed an emphasis on infrastructure and pedestrian behaviour. We do a lot—I have probably not noted it in the submission—relating to driver awareness, in the same way as the Youth and Road Trauma Forum raised issues relating to drivers and their awareness. Again, we would be happy to participate in more of those education campaigns. In the child safety area we do a lot of work to inform parents how to put children in cars and how to handle them around cars. We give advice to parents about getting in and out of their cars. Some of it relates to drivers and some of it relates to their responsibility as parents for getting

the occupants out of their cars safely and on the side of a footpath, in particular, when it involves young children.

CHAIR: I thank the NRMA for its submission.

Ms MORPHETT: I will provide the document on daytime running lights.

CHAIR: We are interested also in the NRMA board as NRMA members and as Committee members. What is the position of the NRMA on random speed cameras?

Ms MORPHETT: Covert cameras?

CHAIR: Yes.

(The witness withdrew)

HAROLD CHARLES SCRUBY, Chairman and Chief Executive Officer, Pedestrian Council of Australia, PO Box 500 Neutral Bay, New South Wales, affirmed and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to any information you may provide. I also point out that any deliberate misleading of the Committee may constitute a contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence that has been given to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Mr SCRUBY: Yes. I will read my statement, if that is all right. In one email I was informed that I had between 30 and 45 minutes, and in another I was informed that I had 30 minutes.

CHAIR: You have 30 minutes.

Mr SCRUBY: You have a copy of our list of 18 items that we wanted to discuss, but there is no time to do that. I am disappointed that I have been permitted only 30 minutes to make this submission. As of yesterday, pedestrian deaths in New South Wales were up 36 per cent on the figures for last year. There are no definitive reasons for that increase. Deaths appear to be widespread, disparate and of no general cause. There are many and varied causes, and hence many issues to address and many possible solutions that we had hoped to provide to the Committee. Due to the short time allocated I will attempt to concentrate on the main issues that I believe are contributing to pedestrian trauma. There is an inadequate time in which to address many serious issues.

Pedestrians are the largest and most vulnerable road user group. The Pedestrian Council of Australia [PCA] has been in existence for over 12 years and is the peak body representing pedestrians and pedestrian safety in Australia. Unfortunately, pedestrians and pedestrian safety are not backed up by big money, huge corporations or large motoring organisations, and have to struggle and shout for every safety initiative. I am indeed hopeful that the short time allowed for this presentation is not a reflection of the manner in which pedestrians generally are treated in the road safety mix, and that this inquiry—urgently called for by the Minister for Roads—will result in a safer environment for pedestrians in New South Wales and a great reduction in pedestrian road trauma.

Only three weeks ago, we appeared in this very establishment—in fact, in this very room—before the Victorian Road Safety Committee inquiring into a single issue—use of car parks. We were given well over an hour and the ability to present our concerns and issues using PowerPoint. I have the transcript here. We therefore request further time with members of the Staysafe Committee and its staff to provide a more detailed and comprehensive report on most of the abovementioned issues. That is the document you have in your hand. We ask that in one year's time we review the findings and recommendations of this inquiry and independently assess the results.

The first issue is data. The data available on the Roads and Traffic Authority [RTA] website could not be less informative. Data is the key to avoiding future crashes. Compare the RTA data with that provided on Traffic Accident Commission [TAC] website in Victoria, which includes the road toll, the year-to-date road toll, rolling 12 month, road toll annual, serious injuries, road safety month summary report, online crash database, drink-driving statistics, speed statistics, fatigue statistics, seatbelt statistics, young driver statistics, older driver statistics, motorcycle crash data, pedestrian statistics, road user statistics and gender statistics. I will not bore members, but Victorian data is about six months old in terms of serious injuries. In New South Wales it is up to two years old and longer.

Because injuries are so much greater than deaths, this information is a vital indicator as to future crashes. We implore this Committee to push the RTA to have a website similar to that of the TAC and Queensland. We get limited information every day. How can we analyse that? This is critical. I sat on the National Road Safety Strategy Panel and they were all critical of New South Wales with regard to the lag in providing serious injury data. There is a 10 to one ratio—that is, 10 serious injuries to one death. From that you get very good data, which could prevent crashes.

The first issue is intoxicated pedestrians and problems and solutions. The theme is "never let a mate walk home drunk". Anecdotal evidence suggests that 40 per cent of pedestrians killed are over 0.05 BAC. There is little data on drug pedestrians. By the way, alcohol is a drug, but we try to separate them for the point of the argument. While it may not be dangerous to walk home at a 0.06 BA—it is still legal to drive up to 0.08 BAC in New Zealand, although we are not recommending that—the staggering statistic is that one-third of that 40 per cent of pedestrians killed are high range. Most of the victims were asleep, playing or lying on the road. When pedestrians are highly inebriated there are no educational messages that prevail in their mind. Taxi drivers are legally permitted to refuse to pick them up and many simply walk home. We believe that the only way to minimise their harm is to implement an education and awareness campaign that you should never let a mate walk home drunk. That is the only suggestion we can come up with. It is a vexed issue for us and we do not know the answers.

The next issue is enforcement generally and speeding in school zones. Our freedom of information request of March 2009 found that the only primary schools where there is any effective enforcement are the 74 locations at which the RTA has installed fixed speed cameras. Police enforcement in the remaining 9,937 zones in New South Wales is virtually non-existent. In 2008, fixed cameras booked on average 2,054 motorists per location. In the same year, police booked an average of 1.17 motorists in the remaining school zones. As the FOI proves, the chances of being booked by police in a New South Wales school zone are virtually nil. This table shows that 99 per cent of offences occurred where there are fixed speed cameras.

On 21 May 2006, the then Minister for Roads, Eric Roozendaal, issued a media release stating:

School safety speed cameras: Fifty speed cameras, including mobile cameras to be rotated between school zones, will be commissioned. A mixture of fixed and mobile cameras will covertly monitor school zones in consultation with police. The cameras will only operate in school zone hours and all revenue from them will be put straight back into road safety projects. The safety alert systems could also be fitted to house speed cameras. There will be no excuse for speeding through school zones – signs at every school zone will warn motorists that speed cameras operate in school zones. Any school zone could have a camera in it. When it comes to school zones there is no excuse for reckless behaviour of any kind. I know the public don't like speed cameras but this school zone speeding has to stop. These are tough measures but we are talking about the safety of our children.

Since the death of Senior Constable Peter Wilson in 2006 during a speed gun radar check WorkCover has instructed New South Wales police that they can conduct these enforcement operations in only a very limited number of locations throughout the State. Most schools zones do not meet these criteria. In fact, the head of the P&C at the Gladesville Public School has asked three separate senior police officers to conduct speed enforcement operations outside the school on Victoria Road and she has been told on each occasion they cannot do it.

New South Wales once had up to 40 mobile speed cameras. There are now none in operation and no reason has ever been given for their removal. They are now the only effective way to enforce speed limits in school zones. Covert speed cameras are supported by the RACV and there is overwhelming evidence that they significantly reduce road trauma. The RTA's 2005 covert speed camera trial was most successful and recommended that they be used across New South Wales. I had to FOI that.

Given that I am under oath I will tell the Committee that I was told by a senior member of Mr Roozendaal's staff that the reason the mobile speed cameras were abandoned and that Mr Roozendaal's promise was broken was that Mr Costa said, "I have many demerit points. I don't want mobile speed cameras in this State." I am under oath. Am I not allowed to say that?

The Hon. IAN WEST: You can say it all you like, but we want your information not someone else's.

Dr ANDREW McDONALD: That is a disgraceful bit of hearsay that is unacceptable.

CHAIR: Please continue with your evidence.

Mr SCRUBY: I turn to illegal parking in school zones. In 1999 the Pedestrian Council was instrumental in persuading the Auditor-General to undertake a major review of street parking enforcement. The then Police Commissioner, Peter Ryan, opposed sharing same with councils. The report was a damning indictment of inefficiency and ancient work practices. Following the release of the report, it was agreed to share the enforcement function between police and councils. The Auditor-General made a series of findings and recommendations. I have a copy here if members would like to see it and I will tender it. A decade later and few of the recommendations have been implemented and the system has effectively degenerated into a revenue-

raising operation by councils, which are almost completely focused on parking meters and time zones. The audit findings stated:

- Accountability* Responsibility for enforcement is devolved to Local Area Commands (**LACs**) of the Police Service and to certain councils when authorised by the Commissioner of Police. But devolution is not matched by appropriate arrangements for accountability. For example:
- there is no measurement of the success, or otherwise, of enforcement (because objectives have been interpreted rather than developed from due process) either at the LAC level or the corporate level
 - the role is often performed in a perfunctory way rather than being by adequate strategic planning either at the corporate or local level
 - surveys to determine the level of compliance with the law have not been undertaken by the Police Service and councils generally. But where undertaken by others, surveys indicate the law is often and regularly breached and on occasions without fear of infringement

The recommendations were to clarify the objectives and the relative priority to be achieved from enforcement and the allocation of responsibilities for enforcement of street parking between the Police Service, councils and other organisations. In our view that has never occurred. There is a pass-the-parcel mentality between the police and councils. The police generally do not see parking as part of their regime. I am not blaming anyone for this; I am simply saying what has happened over a decade. We have a lot of evidence to prove this and I will provide it in a minute.

By the way, the Auditor-General is currently conducting a review of school zones. That will be an interesting report in comparison with this Committee's report. The Police Force and the councils, to the extent applicable, undertake a review of enforcement arrangements. The review will address issues such as: establishing effective arrangements for enforcement service and outcomes to be achieved; the introduction of technology and other aids to assist enforcement; compiling an appropriate set of indicators to measure performance; providing clear and comprehensive guidelines to staff on the law; and the exercise of discretion.

We did a recent FOI on Ryde City Council and discovered that the general manager and one of the directors had issued an instruction in writing to the council not to book vehicles on footpaths or nature strips. That is the way it has degenerated. Unfortunately, councils are far more interested in parking meters and not upsetting what we call the "natives". They do not like booking their own people. Can we prove this? We did an FOI on school zone enforcement last year. We found that in 180 councils in New South Wales to 30 June 2008 there were more than 10,000 school zones. Of that, 90 councils did not issue one ticket in a school zone in the year. An average of 1.84 tickets were issued per school zone for illegal parking. The number of public safety infringements issued was 27 per cent, while the number of traffic flow, parking meter and time zone infringements was 83 per cent. By the way, that is defined in the local government's review of parking enforcements. They defined every offence as either "P" for public safety or "T" for traffic flow. Councils such as Maitland, which has 106 school zones, issued nine tickets in a whole year and Cessnock, which has 111 school zones, issued one ticket.

In May 2007, the New South Wales Government released the review to which I just referred. The review has not found evidence that councils use parking enforcement primarily as a revenue-raising tool. We disagree with that finding. Our FOI has proved that in New South Wales there is a meter-maid mentality. It is all about revenue raising, and safety be damned! There is no direction, no objectives, no priority, no consistency, no transparency and no accountability. There is no auditing, no council comparisons, no benchmarking, no statewide review, no overall management and no duty of care. It has led the Pedestrian Council to conclude that councils cannot be trusted with road safety. I will move on to prove that.

It must be understood that following the death or injury of any person in New South Wales councils, unless sued, do not contribute one penny towards road trauma—not one penny. These costs are paid by insurers, health departments, social security departments, et cetera. I know that because I was the deputy mayor at Mosman and the chairman of the traffic committee for five years. Councils are primarily concerned with revenue raising from parking meters and fines and penalties. We have provided three case studies. I will not go into them but let me give you an example from one—this is three years ago.

This is a case study at North Sydney council. If everyone is familiar with Berry Street leading onto the Pacific Highway, there is a pedestrian crossing there. That pedestrian crossing has four parking meters illegally installed within 20 metres on the approach and 10 metres on the departure side. At a local traffic committee I said to the mayor, "We should be moving those meters to be in line with the RTA's technical directions and the

Australian road rules". The mayor said to me to stop making extraordinary claims. She said it has huge implications. She said, "If we follow these guidelines—

The Hon. IAN WEST: Is this really necessarily, to quote other people?

Mr SCRUBY: It is, absolutely.

Dr ANDREW McDONALD: This is hearsay evidence, Harry.

Mr SCRUBY: This is out of the *Mosman Daily*; it is a quote.

CHAIR: Committee members have all got questions they want to ask you. Do you think you could wrap up your address to us in the next couple of minutes so that we can ask some questions?

Mr SCRUBY: I just want to make this point because I think it is critical to the whole of the relationship between the State Government and councils. I will make this one and tender the others as evidence. She said to me, "If we follow these guidelines we will virtually lose parking all over North Sydney. Twenty metres is an extraordinary amount. This has huge implications." This is in the *Mosman Daily*.

The Hon. IAN WEST: It is a quote from a paper.

Mr SCRUBY: Which was quoted from her.

The Hon. IAN WEST: How do you know that?

Mr SCRUBY: I was there. "An RTA rep said the council had misinterpreted the technical directions for pedestrian crossings and confirm figures quoted by Mr Scruby." Just let me finish. Three years ago the police then wrote to her and said, "Please move the four meters". The RTA wrote to her, through Les Wielinga, and said, "Please remove the four meters". The local traffic committee, the regional traffic committee wrote to her and said, "Please remove the four meters". The Minister wrote to her and wrote back to me at the beginning of this year and said the meters were going to be removed. Today the meters are still there.

This is just one case. It is right throughout New South Wales. This is obstructing line of sight in front of pedestrian crossings. This is an inquiry into pedestrian safety. There could be nothing more important than providing adequate line of sight in front of pedestrian crossings. In the *Bussell v Campbelltown* decision in 2002 three Court of Appeal judges found, "Councils must provide adequate line of sight on pedestrian crossings and refuges". I can show you 100 examples in North Sydney where every crossing and refuge has been compromised to provide more on-street parking. This is a critical issue to this inquiry. I am sorry to labour it. I can show it right through. I will move on. I will have to précis this because there is no time. But this is what I am trying to say about an inquiry into pedestrian safety: It takes a lot of time to explain the detail, but the devil is in the detail. I am sorry to be a bore but I have been at this for a long time—over 25 years. We were responsible for the first 40-kilometre school zone in Australia, and look at it today: We have had a win.

Driver distractions: I will précis it. Number one, I think you will all agree that use of hand-held mobile phones is out of control—absolutely out of control. It is not how many the police book it is how many are not. Suggestion number one is that we should look at confiscation of mobile phones; other States are considering it. We think a three-month penalty might be good. Already we have a \$1,000 penalty, confiscation and nine demerit points for using radar devices. The use of hand-held phones has been equated by organisations throughout the world as being as dangerous as low- to mid-range driving, yet the penalty is only three demerit points and a \$220 fine.

I will get back to pedestrians. The use of MP3 devices and mobile phones when crossing the road is a death sentence. We believe—and we do not know about penalties because police just do not even enforce people crossing against red lights, but as for penalties perhaps the Committee would like to review that—we believe there should be an advertising campaign expressing the dangers of using MP3s and mobile phones when crossing the road. Many of these MP3s have now got noise cancelling devices—they cannot hear a thing. What were we all taught as kids? Stop, look and listen. Remove the audio function and we are all in danger. Second, we believe the manufacturers should have a warning on all these packs—definitely on the MP3s—like a cigarette pack: "Do not use these devices when crossing the road". Telstra did a major campaign telling drivers not to use hand-held phones. Why can they not do the same?

Outdoor advertising: You have all seen throughout the city JC Decaux has placed outdoor advertising in front of every pedestrian crossing. How that contract was signed we do not know, especially when you consider *Bussell*. To add insult to injury, these things now scroll. So you have got distraction and obstruction. If you have a look down here at lunchtime or some other time, have a look at Martin Place and Pitt Street. You come up, there is a good nib created by the local authorities so we can see the pedestrians and they shove a newsagency on it with an advertising scrolling thing so that you cannot see pedestrians and they cannot see the motorists. The RTA commissioned a major study seven years ago, which was supposed to lead to some sort of policy. It is gathering dust while we see them everywhere.

Thirty- to 40-kilometre zones in the city and CBDs: Nearly a decade ago Carl Scully and the RTA agreed in writing—I have it in writing—that we should have a 40-kilometre zone in the city. They even agreed to pay for the changeover. Lord Mayor Clover Moore instituted a major review; the council agreed to put in a 40-kilometre zone. It was immediately overturned by the then roads Minister Michael Costa. No reasons were ever provided. Central business districts such as North Sydney, Chatswood, Parramatta and the entire Balmain peninsula are all 40-kilometre zones. To our knowledge there has never been one complaint—never. All areas of high pedestrian activity should be 40-kilometre zones—even 30-kilometre zones, as in Europe and behind Parliament House.

Business, commerce, tourism are all enhanced when there is a safe and welcoming environment. In Melbourne they are now turning many of their shopping strips into 40-kilometre zones, including Toorak Road. New South Wales must emulate this major road safety initiative wherever possible, including country towns, if we are serious about reducing pedestrian trauma. Confiscation of vehicles: A study by the NRMA in 2005 revealed that 96—do you want to ask questions?

Dr ANDREW McDONALD: Yes. This is ridiculous. Everybody else has given us the courtesy of allowing us to ask some questions with 60-second introductory statements.

Mr SCRUBY: I am sorry. I see this as important.

Dr ANDREW McDONALD: This is extremely important, which is why I would like to ask you a question.

Mr SCRUBY: I was asked if I could use that as my précis and then have an hour or two to talk about it.

CHAIR: Let me just clear things up in case people in the gallery misunderstand. Everyone is asked to put in a submission to the Staysafe inquiry into pedestrian safety. Your submission is one page and you are now choosing to speak about that rather than producing all the evidence for us to read beforehand, which is what everyone else has done. That is why you were sent an email, which went to everyone, to say you would be given an opportunity to make an opening statement and then you would be asked questions. The Committee wants to ask questions. There are five minutes left. You can choose to speak for the rest of the time and we will finish at 12.30.

Mr SCRUBY: I apologise for that. I will tender the balance of this, but I want to make a couple of quick points. I have appeared before the Committee several times before, mainly before Paul Gibson—I have not been before it for five years—but in those times we were just given a précis and then we were asked questions. We were given a chance to make a statement. I apologise if I have mucked it up but we see this as extremely important; we know there are a lot of people being killed and we could avoid a lot of this.

CHAIR: We see this as extremely important and we are speaking to 10 people today.

Mr SCRUBY: Parking: Can I just hand one thing around to you so we can just talk to this very quickly?

The Hon. IAN WEST: I can read the transcript next week.

Mr SCRUBY: This is not the transcript. I want you to see some photos. This is to do with the death of a young kid Joshua Greasby two years ago. It is to do with the penalties for parking on footpaths. At the moment the penalties for parking on a footpath are \$81—it is about the same price as for parking in the Governor

Macquarie Tower. The penalties for parking elsewhere—can I pass these around now—the penalties are \$81 for stopping or parking on a footpath, \$189 for stopping on a bicycle path, \$405 for interfering with a ticket machine. That is how crazy these things are. The current law is encouraging people to park on footpaths. Ask any ranger where do couriers and truckies park during peak hour? They all go up on the footpath.

We have been begging the RTA for eight years to change the penalties. I was part of the review of all the penalties five years ago. They promised to review it. In 2002 they issued the Footway Parking Discussion Paper. It has been sitting there ever since. We have got the support of the police, we have got the support of Clover Moore, we have got the support of all the major groups such as the blind, people from ParaQuad, P and C, COTA—they all want the penalties increased for parking on footpaths, nature strips and driveways. Please, Committee, consider this seriously. It is ridiculous now that outside here it is very cheap to park on the footpath. In fact, with double jeopardy we can park on the footpath out here forever after one fine: they can only fine you once.

Finally, I would like you to have a look at this. This is one of the great anomalies. By the way, just very quickly, we should be confiscating vehicles. In New South Wales at the moment if two motorists are racing, even at 60, they can both have their vehicles confiscated for three months. But if I were to drive up the Pacific Highway at 150 kilometres an hour, be a disqualified driver and have a BAC of 0.2, the police give me my weapon back the next morning. The most important people we should be confiscating the vehicles from—and this is the NRMA who found that 96 per cent of their members felt that people who drive while disqualified should have their vehicles confiscated—are alcoholics. We must confiscate the vehicles of alcoholics. It is absurd that we give vehicles back to alcoholics. In Western Australia they have just started it: from 1 July they will confiscate all vehicles of disqualified drivers. We ask the Committee to consider confiscating the vehicles of all disqualified, dangerous drivers and alcoholics, high-range drink-drivers, for three months; second offence: forfeiture. This has been in place in New Zealand for a decade and it has had extremely good success.

Finally, bullbars. Could you all look at those photos I pass around of bullbars? The EU banned all bullbars in 2006. The British Transport Research Laboratory estimates the legislation would prevent 140 deaths and more than 1,500 injuries among British pedestrians and cyclists in any one year—one year, and that is in Britain. This does not include drivers and passengers. The Australian Design Rules at 42.9.1 states, "No vehicle should be equipped with any object or fitting not technically essential which protrudes from any part of the vehicle so it is likely to increase the risk of injury to any person". That vehicle you are looking at, the one with the big bullbar, was registered in, I think, August 2006. It is an illegal bullbar and yet the penalty is about \$150.

We ask the following: We request the penalties for driving a vehicle with an illegal bullbar or a modification be the same as for driving a vehicle with a fishing rod holder; that is, three demerit points and \$252. By the way, look at the potential for harm. It is much worse than the fishing rod holder to have a five-poster: they are designed to push animals under vehicles. They kill people. New South Wales Police and the RTA conduct a regular enforcement program to ensure the use of these illegal devices is minimised. The police will conduct a major enforcement program at the forthcoming Deniliquin Muster that New South Wales adopt the European standard for frontal protection on all new vehicles no later than 1 January 2012 and ask Fair Trading to ban the sale of all bullbars that do not meet the Australian standard.

We have much, much more. We can save many lives, we just need more time with members of the parliamentary Staysafe Committee. I apologise for taking up too much time at the moment.

CHAIR: No member has any questions now.

(The witness withdrew)

(Luncheon adjournment)

PATRICIA MONICA BARONE, Chief Executive Officer, City of Sydney Council, 456 Kent Street, Sydney, and

LEONARD PAUL THOMAS WOODMAN, Road Safety Officer, City of Sydney Council, 456 Kent Street, Sydney, sworn and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and that you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I should also point out that any deliberate misleading of the Committee may constitute contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Ms BARONE: Firstly, I would like to give the Lord Mayor's apology. She has been taken ill and cannot attend today. Secondly, I thank you for the opportunity to address the Committee. We have made a submission and we have also tabled statements, but I would like to make a few opening remarks.

I want to stress that the City of Sydney is very concerned with the inner city, and so our issues and our responses to those issues is very much inner-city focussed. I would like to really stress that pedestrian safety as well as the wellbeing and enjoyment of our city by pedestrians is one of the highest-order priorities for the City of Sydney. The reason is that every time a pedestrian is hurt or killed in our city we are confronted in really the most terrible way by the failure of all of the transport and traffic planning that could have led to this occurring.

If I could leave you with just one thought after today I would like it to be the feeling of frustration that we feel at being unable as a city to implement some of the things that we think could start to address this issue, and the sadness and sense of failure that we feel every time there is an incident in our city. We have to stop pretending that we can leave things the way that they are, and that we can leave traffic to be managed in the way that it is in the city. We cannot really continue to think that we can fix safety issues and pedestrian safety issues in the city just through simple interventions like putting up another sign, another fence, another crossing and so on.

We know that nothing will really change in the inner city until we change the mindset and start to put pedestrians at the top of the sustainable transport hierarchy, rather than continue to leave them at the bottom, which is what is occurring now. Our 2030 Vision, copies of which have been tabled for the Committee, estimates that by 2030, on an average working day, we will go from having 660,000 to 1 million pedestrians in the city. So, if we want to address issues of safety and accommodate those pedestrians, we really need to start making those changes now.

I try to make an effort to walk to all of my meetings round the city. I think that is an appropriate thing for me to do in my role, and that it is an appropriate way to behave in the city. When I walk round the city I make lots of contributions. I do not contribute to congestion, because I do not get in a car, but make a big effort to walk. I keep myself fit, and therefore reduce the likelihood of becoming ill and being an impost on the health budget. Also, I add to the safety and amenity of the city, because we all know that cities have lots of people moving around in them, and moving around in them and enjoying life adds to the safety of the city.

Yet, as a pedestrian, my safety is compromised. Nothing in the way that inner city traffic is managed supports my decision to walk. I have to walk on footpaths that are alongside some of the most dangerous vehicles on our roads, the buses, because we put the bus lanes right beside the footpaths. I have to wait ridiculous amounts of time to cross the road, and when I stand at a traffic light when it does change I have to make my way across very quickly to get to the other side. And the noise means it is very difficult for me to hear and to enjoy those city streets.

We have done lots of studies about this, and we have tabled the Jan Gehl study because that uses an international methodology for measuring the way people move around cities and the pace at which they can move. We have also started the process of trying to implement that study, which would show the way we would calm the city and reduce the ways that cars move around and through the city in order to make it safe and more enjoyable for pedestrians. This is the sort of thing that is happening all over the world. Global cities all over the

world are taking these steps, and we very much hope that Sydney will catch up, both for the sake of pedestrians in our city and our safety as for the ongoing prosperity of our city.

Mr DARYL MAGUIRE: At page 2 of your submission you state that 1 per cent of pedestrian injury crashes occur as a result of excessive speed in the CBD and 84 per cent of crashes involving pedestrians and motor vehicles in 2007 directly resulted from pedestrians stepping off a footpath into the path of a vehicle. Do you have any updated figures for 2008-09? Have you identified any change in behaviour? To what are you attributing the fact that 84 per cent of pedestrians are stepping in front of motor vehicles? Are they distracted, or is this a trend?

Ms BARONE: I might pass to Len.

Mr WOODMAN: There is quite a delay in getting data from the RTA. We have to rely on that data as being the most accurate data. It is taken through police records and comes back to councils after it has been reviewed by the RTA. So we do not have any data that shows the very recent statistics. When we say that 1 per cent are put down to excessive speed, that is how the police have recorded the accident. What it is saying there is that, as far as police records are concerned, the vehicles were not exceeding speed limits or the driver did not lose control, so the evidence they have got at the scene is that the vehicle may have been travelling within the posted speed limit, and therefore police do not record it as excessive speed. However, my personal view is that if they are going at speeds that do not allow them to stop in time, then they are probably going a bit too quick for the conditions.

With regard to pedestrians stepping off the footpath, yes, they may well be distracted. We do not have a lot of evidence on that. The data that we do receive from the RTA does have a section that asks whether distraction is a component in that. If I look at 2007, of the 376 pedestrian crashes that occurred in the City of Sydney, only two records show that the pedestrian was distracted, and in both cases it says that they were distracted by "some other distraction". There is a coding that says they could have been on a mobile phone. But only two records show that they were distracted.

Mr DARYL MAGUIRE: Are you saying in your submission that the accuracy of the data is questionable?

Mr WOODMAN: I would not say so much questionable, but lacking in detail.

Ms BARONE: Detail that enables us to make those assessments, yes.

Mr WOODMAN: Yes. Also, if the time it takes to get that data to us could be improved, that would be an advantage for us.

Mr DARYL MAGUIRE: You also suggest that constantly-changing speeds can be confusing to drivers, for example 10 kilometre shared zones, 30 kilometre zones, 40 kilometre zones and 60 kilometre zones. I think the suggestion was that the city become a 40 kilometre an hour zone. That would mean in some areas you are suggesting raising the speed limits to a blanket 40-kilometre an hour zone. Is that the drift of the discussion?

Mr WOODMAN: No. The city's approach would be to have the speeds currently in the city at 50 kilometre an hour signposted in some cases as 50 kilometre an hour, because the open speed limit now being 50 kilometre an hour the streets do not need to be signposted at that limit. But some are and some are not, and some are 40 and some are 60. What we would be looking for in general—and obviously there would be some variations, depending on each individual location—is an ideal place to have our laneways and small, narrow streets that accommodate pedestrians more than motor vehicles, and have very narrow footpaths, if they were shared zones, where pedestrians had the right of way and drivers had to be careful of them. Other streets like George Street could have a universal 40 kilometre an hour. We also have a number of State roads through the City of Sydney local government area that are still signposted at 60, even though there are high levels of residential activity.

Our residential streets off perhaps the main State roads ideally would be 40 kilometre an hour. More recently, we have been undertaking a number of what we call pedestrian cycling and traffic calming plans, which have involved considerable community liaison and a number of community workshops. The overlying

feedback that we have from the community is that they do want lower speed limits in their local areas. That is almost across the board.

Mr DARYL MAGUIRE: It has been suggested in previous submissions, that infrastructure has not kept pace with population growth. Do you think it is the fact that engineering solutions have not been implemented as fast as our population has grown and perhaps that on the issue of embracing new technologies, such as in the United Kingdom and other places, with sensed crossing zones, we lag behind?

Mr WOODMAN: Are you referring to things like puffin crossings and adaptations of the pelican crossings?

Mr DARYL MAGUIRE: I am talking about crossings that are monitored by infrared and other sensor devices.

Mr WOODMAN: Those are the pedestrian user-friendly crossings. When I travel around other countries I do feel that our streets may be improved by having more up-to-date types of crossings which I know arguably may not fit in with the overall SCATS program that the RTA has for controlling city traffic. I do not have any scientific evidence, but crossing a road in England does seem to be a little bit easier, even down to the fact that you have a green flashing light.

Ms BARONE: Might I add that all those things exist? The point is that you have to make a decision about why you want them and what you want to achieve. The city, in doing all of its pedestrian and traffic calming studies, can come up with many different ideas about the way that you can calm a street, how you can manage traffic better, and how you can give pedestrians more comfort and security. All of those sorts of things can be worked out. The city even has resources to put those sorts of interventions into place. But the point is that there has to be agreement about the kind of city that you want, and you have to have greater co-operation from all the different authorities that have to participate in giving those approvals. Until there is a shift in mindset about making it more comfortable and safer for pedestrians, people will always argue about those things. Of course, we could bring in the technologies, and we would love to see those technologies, but you still have to set them. You still have to put a setting on them that says that they will change every so often or they will pick up this or pick up that. Who determines what that setting is? That is the discussion we have to have. Of course we then have to ask for the technologies as well.

Mr DARYL MAGUIRE: What you are saying is that that is far more complex to implement than to have a blanket speed, which is a simple solution.

Ms BARONE: It is more complex. Can I say that I think the blanket speed is something that the city would like. When we say "blanket", obviously we would make distinctions. You do not have a 40 kilometres an hour speed limit in a lane where people are walking. It has to be appropriate. We would just like to see the speed lowered. With all those other interventions, speed would be lowered anyway.

What you do not want are speed bumps all over the place. You do not want the noise, the stopping, the starting and all that nonsense. That is a terrible way to design those things into a city. What you need to see are things being calmed and streets being narrowed, where appropriate. One of the other things that we have talked about—and again I stress that this is about the inner city—is that we do not even have a road hierarchy, so everyone can go everywhere. That is not really a very sensible way to do it.

What you should have are places where pedestrians go and where cyclists go and places where buses go and places where trucks go and places where cars go. Of course trucks have to come into the city. Things have to be loaded and unloaded, but they should have a place where they can go, and in other places, it should be made very clear and very legible and very safe and comfortable for pedestrians and for cyclists. And you have to make those policy decisions and then choose the appropriate technology or infrastructure intervention to achieve them. But what we do not have is cohesion about what are those policy decisions about how we run an inner city in order to meet all of those different needs. It takes all levels. We need cooperation and support very much so from the State Government to be able to achieve that.

Dr ANDREW McDONALD: It has never ceased to amaze me that Liverpool can do it, and Sydney city cannot. Liverpool has a 40 kilometres an hour zone, but that is by the bye.

Ms BARONE: The City of Sydney does not have the authority to do it. We have asked—believe me—repeatedly.

The Hon. IAN WEST: Where do you come from?

Dr ANDREW McDONALD: Liverpool! The NRMA has suggested a differential speed limit where it will be 40 kilometres an hour during some hours and 60 kilometres an hour during other hours. I just want you to comment on the feasibility or sense of that.

Ms BARONE: Again, I do not think I am qualified to say. Len is much more qualified than I am to say, "Oh yes, that'll work", or, "It won't work." Again, the point here is: for what purpose, at what times, and why? We want the city to work. We have to determine what the purpose of a decision like that would be. I think that all of these things could be discussed and could be part of the thinking about how we go forward. However, I would say that one of the things that contributes to safety is consistency. There has to be a consistent approach: every time I see this, it means that; every time I see this light, it means that. We know that from road safety. I am not a traffic engineer, but we all know from our own experience that it just becomes intuitive, and so you need to have those consistencies.

The Hon. RICK COLLESS: In the light of your comments about the overall plan that the city has to have for traffic management, what is your vision for traffic management in the city? Do you want cars out altogether and only have buses and trucks in there? Do you see that people should be able to come into the city if they need to, or want to? By narrowing everything down and slowing everything down, even if there are only public transport and freight vehicles coming into the city, surely you are going to make the conditions worse by slowing, narrowing and shutting everything down?

Ms BARONE: Firstly, I really want to make sure that people do not think that we think that cars should not come into the city. Of course cars have to come into the city. I was recently walking back from Parliament House and I was coming up to the intersection near David Jones. The cars were stopped, and in the middle was an ambulance with the siren on. I thought, "Oh boy, I would hate to be the family of whoever is in that ambulance."

The cars need to be able to move. Some people need to be in cars and they need to be able to move. I have had the Ambulance Service visit us and say, "Can you provide us with parking so that we can just have an ambulance in the CBD and we can get to an accident? Because if we're not parked close by, we can't get through." That is a terrible situation. First and foremost we need to get anything off the road that does not need to be there—right—because some people will need to be there. I always say that if you have three small children and you have to get around, you need car. As you get older or if you have a disability, you need a car.

We just want to first be sure that the people who really need it can use it by giving the people who do not need it alternatives, right? If I do not need it, and it is so comfortable and I have alternatives, I would use those alternatives so that people who do need it can have that road space, right? That is the first thing. Overall what we are saying is—and you see this in every modern city—that people need to be able to get to the city by, if at all possible, great public transport. Once they get to the edge of the city, they should be able to move around it with ease. If they are able-bodied and willing, they should be able to walk around it. We ought to make it so easy for them that they go, "Oh, I can't wait to get off the bus and walk to work because it is a lovely walk through the city."

If they can ride a bike and they would like to, then we support that. Then you provide mass transport, such as light rail or whatever, around the surface for those longer distances or for those who cannot ride a bike, and they can take the transport vehicle instead. Therefore you are clear. That is how it works. In most places or in cities that have successfully implemented this kind of transport and traffic management, the transport that brings you to the city is not the transport that takes you across it or around it. All we are trying to say is that, as the city grows, remember that under the State's own policies we will have 97,000 more jobs in the city by 2030 and all of those extra people. Those roads are not going to get any wider. The infrastructure is not going to get any greater. We cannot retrofit it.

The Hon. RICK COLLESS: It is getting narrower, and that is the concern I have. If there will be all that extra traffic movement, either by public transport or whatever, you are narrowing things down and it is only making things worse.

Ms BARONE: We will be saying that there are some places where we could narrow it and make it more comfortable so that pedestrians have those ways through. We have to have a unified plan, I think. I do not think you can just leave it and think that the infrastructure will take it by doing nothing.

The Hon. ROBERT BROWN: We are in a city that ostensibly was designed a couple of hundred years ago and has not really changed from when we had the horse and cart.

Ms BARONE: Yes, that is right.

Dr ANDREW McDONALD: I wanted to ask about naked streets. I do not know whether Australian drivers can drive on naked streets.

Mr WOODMAN: It was Hans Monderman's idea of taking away all the signage and all the rules. I do not have any evidence, unfortunately, because I did not have a video camera with me, but a few months ago I walked—whereas now occasionally I ride—back to the bus at Wynyard from Town Hall. I walked down York Street and got to its intersection with Market Street. If anybody knows that intersection, they would know that it is very, very busy. The traffic lights were all flashing amber and there was a sign saying that drivers had to stop at traffic lights that were not working.

My first thought was, "Let's get on the phone and call the RTA transport management centre and see if they're aware of it." Then I stood there and waited for a little while, and drivers coming along in all directions who were faced with the flashing amber lights slowed down considerably. They started to move forwards, one at a time. The pedestrians started to queue up on the footpath until there was quite a number of them, and then they progressed across the road and the drivers gave way. There were no horns going off and no blasting. Everybody settled down.

I looked at that and I thought that, yes, there is potential. That is how I would answer that question. They are trying it in the United Kingdom and they are trying it in the Netherlands. We may have a little bit of difficulty with regards to the mindset for driving motorcars, but it would be something that would be worth trying. I believe that it could be done. We will not know unless we try, but I think we can.

Mr GEORGE SOURIS: In the interim phase, what is your feeling of pedestrian signals that count back? What is the word for them?

Ms BARONE: They are countdowns.

Mr GEORGE SOURIS: Signals that count down either the green light, the red permanent light, or the flashing light.

Ms BARONE: They have them in lots of cities, of course. Just recently I was sitting next to someone from New York and I said, "How do you like Sydney?" He said, "Oh, we love Sydney. Sydney's fantastic, but why do you treat pedestrians like that?" That is exactly what he said. He said, "Why don't you have the phasing?" I do not know if this is true, but you can seriously walk through Manhattan and lights just change for you, as a pedestrian, and you have the counter so that you always know as you walk that you have plenty of time, so I will have to wait: or, I do want to go across, so I will speed up. It is just an aid for pedestrians.

The Hon. ROBERT BROWN: That is actually done for a specific purpose—to slow down the pedestrians to the extent that the muggers can catch up with them!

Ms BARONE: There is not a lot of that, in Manhattan anyway.

Mr GEORGE SOURIS: By the way, you can do that if you start at Macquarie Street and go down Martin Place. If you travel at a certain speed, the lights will indeed do that for you all the way. Anyway, you do not like them, do you?

Mr WOODMAN: No, we do like them. May I add that recently I was in Thailand and they have great big markers across the roadway for the drivers. An added benefit is that if we were to get into the same mindset, the drivers all seemed to switch off their engines when they saw that they had 120 seconds of a red light to go. I

was quite pleased to see also—this may be different in Sydney—that they all did not start their engines at three seconds and get ready to go as soon as the lights changed to green. That may be an issue.

Mr GEORGE SOURIS: I could give you another good example—motorists turning their lights off to save electricity!

Mr WOODMAN: Pedestrians need to have the appropriate amount of time to cross, and they need to be able to wait only a reasonable time. We may have to wait 120 seconds, particularly in the rain, so that is another increment. They may take a chance of going, and unfortunately that is one of the reasons why perhaps our pedestrians have accidents.

Mr GEORGE SOURIS: The intersection right in front of your shop would be a very good place to trial it.

Dr ANDREW McDONALD: Sydney cannot control its own traffic because the State Government does that. Is there any other city that can? Can Melbourne do it? Can Brisbane do it?

Ms BARONE: Melbourne has some slightly different bylaws and things, so they are able to do some things. You know, in Melbourne there are lanes and things that they can close at lunchtime so that pedestrians can go through. They actually can change some of those things and they can do that directly, I believe. But that is all I know. Of course, Brisbane has a much larger role in transport and delivery of public transport, so I imagine that they have different rules that they can apply.

The Hon. ROBERT BROWN: And bigger corridors, too.

Ms BARONE: Yes.

Dr ANDREW McDONALD: And overseas? In London, I know that it does its own.

Mr WOODMAN: In Transport for London (the transport authority for Greater London) in particular, now they are recommending 20 miles an hour, or 32 kilometres an hour, as a speed limit across residential areas, which would be something we would look at.

CHAIR: In earlier submissions, such as the one from Paul Riley from the Institute of Public Works Engineering, there is a reference during his previous life as an ambulance officer to unreported accidents. He believes that there are a lot of pedestrian accidents that are unreported. That does not help councils in planning for the future to make better decisions about what might be necessary. Do you have any views on that?

Ms BARONE: You feel the same way, do you not?

Mr WOODMAN: I do feel the same way. I know that Paul is looking at some program whereby we can perhaps find more information from hospital admittances. It would be nice. I must say that I am not totally knowledgeable about the connection between an ambulance arriving at a crash and the police. I know that police have an event number that is carried through right to the RTA to data that comes out. Whether that is the same as any number to a crash or incident that is given by the Ambulance Service and hospital admittance, I do not think it is. But I would stick my neck out and say that with all the modern technology and computers and everything, surely if there is one crash or one event, it starts off with a number that everyone can trace and everyone has, who needs to have access to that information. That would be a better situation.

CHAIR: Thank you for attending today and thank you for your very detailed submission.

The Hon. IAN WEST: I just want to know whether or not there are any proactive discussions taking place about coordination between yourselves and Mr. Riley's organisation as well as Assistant Commissioner Hartley and others?

Ms BARONE: About reporting, or the whole thing?

The Hon. IAN WEST: The whole process of the Institute of Public Works Engineering Australia's thoughts on starting up this database.

Mr WOODMAN: Yes, I have had discussions with Paul Riley, his office is just across the road from ours. I believe we are to have a meeting next week, and that is on the agenda. I really would like to support him and see what we can do, even using a City of Sydney as a trial if we can get the Ambulance Service and hospitals involved.

CHAIR: Can the Committee keep the copies you have handed up?

Ms BARONE: Yes, they are for the Committee's use.

CHAIR: They will make interesting reading. Thank you for attending today and giving your evidence.

(The witnesses withdrew)

MICHAEL BERNARD REYMOND, Councillor, North Sydney Council, 200 Miller Street, North Sydney, sworn and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to the information that you provide. I point out also that any deliberate misleading of the Committee may constitute contempt of Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence of the Committee. Would you like to make a brief opening statement before we proceed to questions?

Mr REYMOND: Yes. I have prepared a one-page summary of the council's submissions, which I will hand around rather than read out. It is conveniently on one page, front and back, because, being a politician, I know we do not want to read a lot. It is more appropriate to have it summarised in point form.

CHAIR: The Committee has read the submission from North Sydney Council. Would you like that document to be taken as your opening statement?

Mr REYMOND: Yes.

CHAIR: North Sydney has a high percentage of pedestrian casualties, 17 per cent, and one pedestrian fatality from 2003 to 2007. The North Sydney Road Safety Action Plan identifies pedestrian safety as a major priority for council. Do you have any observations about the recent increase in pedestrian fatalities in New South Wales since the beginning of the year? Have you noticed any pedestrian accident trends, particularly in North Sydney?

Mr REYMOND: Other than as stated in the mayor's letter of 2 July, I agree with what is there.

CHAIR: The submission of North Sydney Council describes the impediments and delays to pedestrian movements at signalised intersections resulting in many pedestrians disobeying signals and running the red light. Has North Sydney taken up those concerns with the Roads and Traffic Authority?

Mr REYMOND: We have. At this point I add two observations. I invite Committee members to go to Martin Place and Elizabeth Street at any time between 8.00 a.m. and 6.00 p.m. and observe at that intersection the failure of the Roads and Traffic Authority. Through the City of Sydney I have asked the Roads and Traffic Authority to change the phasing and observe that cars coming from David Jones up to King Street then to Elizabeth Street, pull up at a red light at Hunter Street, if not at Bent Street. Pedestrians regularly run the "Don't Walk" arrow. If you then walk down on the same day to George Street and observe the phasing at Martin Place and George Street, you will see that it is very short. The traffic coming from Circular Quay regularly pulls up at almost every set of traffic lights in George Street, yet in Elizabeth Street the Roads and Traffic Authority has a completely different policy about phasing. That illustrates the very point that this council is making about more green time.

Secondly, I was in Washington in May. I do not know how many of you have been to Washington recently, but I took this photograph on my phone-camera, which I am happy to pass around. It shows a completely different system for telling pedestrians what time they have to cross the lights. It flashes a red hand signal saying "Don't Walk Now" and underneath it shows in red either 5, 4, 3, 2, 1 or 0. Then there is a white signal indicating that pedestrians can cross, with the white numbers. All across Washington they have these signals, and different phasing for different streets. When I showed this to the Roads and Traffic Authority committee person at our traffic committee, he said, "Yes, we know about it. I think it is a good idea." But that is where it will stay; it will die there.

I would like to relate another experience in relation to phasing. We corresponded for two years with the Roads and Traffic Authority in relation to the signalised phasing at Military Road and Wycombe Road, Neutral Bay, where there had been at least one fatal accident, which is referred to in our submission. The committee decided to ask the Roads and Traffic Authority to have an on-site inspection of that intersection, which took nearly six months to arrange. There were three Roads and Traffic Authority representatives, the council representatives and the local member of Parliament. They were not convinced to change the phasing until they saw an elderly lady with a walking frame crossing from the south side of Military Road to the north side. At that intersection she did not make it to the other side before the cars were on top of her.

That convinced them to add two seconds onto the phasing. The reason for telling you these stories is to illustrate the bureaucratic mindset that I personally feel is in some elements of the Roads and Traffic Authority, which is why it is so difficult for councils and others to get changes made, sensible pragmatic changes, to simple issues such as those. The whole mindset of some people, not everyone, in the Roads and Traffic Authority is dominated by the "traffic must move continuously" mindset. When you look at the traffic moving you find that it does not move the way they think it is moving.

CHAIR: Every member of this Committee is thoroughly familiar with Martin Place and Elizabeth Street and all its traffic phasing. We walk up and down there regularly. This morning we raised this matter with the Roads and Traffic Authority and we received confirmation that the wonderful Sydney Coordinated Adaptive Traffic System [SCATS] is designed to move cars, not pedestrians, around the city. This morning the Roads and Traffic Authority representatives said that they are looking at countdown timers, but there are three different types. The favoured one is the one you described in America where people get an idea of how much time they have to get through the lights. The Roads and Traffic Authority is examining that, and gave sworn evidence on that this morning.

Dr ANDREW McDONALD: The timers you saw in Washington, did they go for 30 seconds or 6 seconds?

Mr REYMOND: Interestingly they varied. I saw one at 40 seconds, in a narrow street. I could not understand why they had 40 seconds. Others were just 10 seconds. There were quite significant variations. My experience was that I felt I was not frustrated at the intersection.

Dr ANDREW McDONALD: The evidence given to the Committee this morning was that that is inconsistent with the SCATS, and that is why they do not do it.

Mr REYMOND: I thought it was an excellent idea. My personal experience, having spent just over a week there, was that it worked everywhere I walked. And I walked everywhere. I do not know whether you would personally agree with me, but the biggest frustration at lights is knowing how long I have to walk across, when it is not green.

Dr ANDREW McDONALD: As you know from the demographics, in your area there is a tendency towards more aged people than in other parts of Sydney.

Mr REYMOND: Yes.

Dr ANDREW McDONALD: Has that been a major problem for your councillors?

Mr REYMOND: It is a problem in terms of what I see personally in the streets around North Sydney. Elderly people take slightly longer to walk across a street. That illustration I gave of the experience in Military Road is a classic example.

Mr DARYL MAGUIRE: Does your council have a regime of reviewing pedestrian crossings and arrangements around the immediate area of those crossings, where they are in parking bays that encroach on the 20-metre exclusion zone, the line of sight? Do you have a regular précis of those crossings?

Mr REYMOND: I believe we do, but the problem for our council, and all councils, is that a lot of those crossings are non-compliant with current Roads and Traffic Authority standards. For a council to go around and change them all would involve hundreds of thousands of dollars. Therefore, they tend to be changed when there is a serious issue. If the law were changed, and councils were required to fund all those upgrades to the standards, we would look to the State Government to provide the money

Mr DARYL MAGUIRE: They become obsolete because of increased requirements by the Roads and Traffic Authority and the Government?

Mr REYMOND: Yes.

Mr DARYL MAGUIRE: Rather than long usage?

Mr REYMOND: Yes. In Kirribilli, where I live, there is a crossing at Aloysius Junior School that I believe does not comply with the standards. Yet it is perfectly safe, because of the things the council has done over the years, recognising where that crossing is, because it is not a serious traffic hazard for pedestrians.

Dr ANDREW McDONALD: Do you have any 40-kilometre per hour pedestrian zones in your council area?

Mr REYMOND: I think we do, but I cannot think of one off the top of my head.

Mr DARYL MAGUIRE: In your submission you have stated that many motorists appear to be unaware of some of the Australian rules and their application to pedestrians. On what basis was that statement made? From what information was that derived?

Mr REYMOND: I cannot give a precise answer to that.

Mr DARYL MAGUIRE: Would you like to take that question on notice?

Mr REYMOND: Yes. It probably arises out of ranger activity, when people complain about something and they are told the rules. That seems to be a bell ringing in my year.

Mr DARYL MAGUIRE: You will take that question on notice? I am interested to know where that came from.

Mr REYMOND: Yes, certainly. I will address that for you.

CHAIR: Out of curiosity, have many North Sydney rangers been assaulted?

Mr REYMOND: Not for sometime, because we have very good policies in place for dealing with people.

CHAIR: Thank you for your attendance and for your submission.

(The witness withdrew)

CARMEL MARY DONNELLY, Acting General Manager, Motor Accidents Authority, New South Wales, Level 25, 580 George Street, Sydney, affirmed and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to the information that you provide. I also point out that any deliberate misleading of the Committee may constitute a contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence given to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Ms DONNELLY: I will make a brief statement. As members are aware, the MAA oversees the compulsory third party personal insurance scheme in this State. Our intention in putting in a submission was to assist the Committee, as we are able to provide information on the compensation, health treatment and other costs associated with road crash injury. Injured people have up to six months to put in a claim for compensation, they might well need rehabilitation for some time, and it might take some time for claims to finalise. I want the Committee to be aware that the data we are able to provide is a lag dataset, but it is valuable in the sense that it enables evaluation of how well different road safety programs are going, and it enables us to understand the full costs downstream. It relates to long-term trends rather than to short-term trends. I am aware of your terms of reference and I thought it was important for you to understand that.

I have a few additional comments to make. The key point we made in our submission is that over the longer term the claims for pedestrians, as with all road-crash injuries, have been steadily declining. We do not have any evidence that that has turned around, albeit being a lag indicator. We made some comments in our submission about vulnerable groups. The last thing I wish to say is that we have some later information and analysis on that.

We highlighted the fact that children aged 16 and under tend to have higher cost claims. I want to add for your benefit that they have a low rate of claims proportionate to their numbers in the population. Likewise, we point out that people between 30 and 59 tend to have higher cost claims. I think that is likely to be linked to them having a higher earning capacity and a higher compensation payout for that reason. People aged 21 to 25 and people aged over 70 seem to have a high rate of claims for being injured as a pedestrian. That is all I want to say as a supplementary comment.

CHAIR: Those aged 21 to 25 and those aged over 70?

Ms DONNELLY: They seem to be overrepresented in having a claim. Some of those claims may be minor to moderate injuries, so they are not all high-cost claims in the population.

Mr GEORGE SOURIS: I refer to research, to the gathering of information and so on. Today we heard from the Roads and Traffic Authority, the police and the Ambulance Service about gathering statistics and information. Does your information and statistics come from your own claims, practice and so on?

Ms DONNELLY: Yes.

Mr GEORGE SOURIS: Do you get information from those other agencies? Do you give your information to those other agencies? Is there some kind of central body that deals with this information that you are aware of?

Ms DONNELLY: I think the answer is yes. We are still working on it. We are working jointly with the Roads and Traffic Authority and Health funding the Injury Risk Management Research Centre at the University of New South Wales to which we all provide our data. That is a clearinghouse and a research organisation. I have discussions on a regular basis with Dr Soames Job and other executives in the Roads and Traffic Authority. I think there is a potential for us to be feeding information back to the Roads and Traffic Authority and evaluating those safety features in cars that seem to be associated with less severe injuries and lower costs. There is more that we can do in that area. Likewise, I have good networks with the Ambulance Service and its information. I think there is potential for making it easier to pull all that data together. It is not a trivial exercise.

Mr GEORGE SOURIS: Are there any obvious inconsistencies? For example, one organisation might rate an injury on a grading of one, two, three, four or five, and another agency might rate it differently on a grading of 10. You might also do something different. Do any of those sorts of issues exist?

Ms DONNELLY: I have not come across those sorts of issues significantly. Within my own sector of compensation schemes even nationally there is a bit of a difference. The insurance sector and compensation schemes tend quite early on to use codes that relate to the severity of the injury. It may not be the same sort of coding that hospitals use, but they are fit for different purposes. Some work could be done in mapping those codes. I think that work should be ongoing.

The Hon. ROBERT BROWN: An earlier witness talked about overall community costs relating to minor and severe injuries and death. Obviously your evidence is limited to costs within claims in the comprehensive third party [CTP] system.

Ms DONNELLY: Yes.

The Hon. ROBERT BROWN: I refer to some of the numbers that were quoted. The deemed cost of a death is about \$1.7 million, the deemed cost of a severe injury—in your terms that relates to critical injury—is \$300,000, and a minor injury is \$10,000. Whilst the scales seem to correspond with your scales of how these costs increase, does the Motor Accidents Authority do any extrapolation of those costs outside the insured costs? Have you done any research on the overall costs to the community of these types of accidents, or just to the insurance groups?

Ms DONNELLY: We look at the total impact. We know that within our system about \$1 billion a year is paid out to road crash injuries.

The Hon. ROBERT BROWN: All road crash injuries?

Ms DONNELLY: All road crash injuries. It is not particularly incomplete when you come to pedestrians because none of them are the "at fault" driver, which is how our system works. When we look at the payments each year for pedestrians we find that they vary. However, it is around \$200 million to \$250 million.

The Hon. ROBERT BROWN: Let us say 20 per cent?

Ms DONNELLY: Yes. If you have a severe injury it could mean that we will not know the real cost until six or seven years down the track. These are estimates.

CHAIR: This might be a policy matter on which you cannot comment. You have looked at how the Victorians set up their Traffic Accident Commission and how their insurance system works.

Ms DONNELLY: Yes.

CHAIR: Are there any benefits in the way in which they operate as opposed to the way in which New South Wales operates, or is it best not to comment?

Ms DONNELLY: I think it is a quite complex decision. Obviously Victoria has a publicly underwritten scheme, which means that the Government is taking the choice of wearing the risk for whatever might happen relating to the liabilities that come from compensation. The New South Wales policy position has been to have a privately underwritten scheme. I believe that the consensus around our scheme is that it is working well and we are continuing to refine it. If you were to change from one model to another it would add risks and costs. When making that decision you would need to take a lot of things into consideration. It means, however, that the Victorian system is a different system from the system that is used in New South Wales.

Dr ANDREW McDONALD: I refer to the Lifetime Care and Support Scheme, which I see has 44 people in it. You might not be able to answer this question, but has that number increased over the past few years, and have there been any improvements in the rate of survival of severely injured patients?

Ms DONNELLY: I will answer that question so far as I can. The Lifetime Care and Support Scheme comes under a different agency. Before I came here today I had a discussion with its chief executive officer and we work quite closely together. I will answer that question so far as I can. If I am not able to do so I will take it

on notice and come back to you. At present there are 56 pedestrians in the Lifetime Care and Support Scheme. The Committee might know that that scheme started taking in children in 2006 and adults in 2007. I understand that the number of children coming into the scheme is still lower than projected. We are now looking at a three-year period of lower than projected figures, which is good news.

The age of participants in the scheme is generally older than was projected. That is interesting because it means that they are surviving. In the past someone might have been considered to be so vulnerable, because of his or her advanced age, that he or she would not have been expected to not survive. Those people are now surviving. I hope that somewhat answers your question. I understand that most of the pedestrians in the scheme tend to require more care on a daily basis than others. In fact, 96 per cent of the injuries are brain injuries rather than spinal cord injuries, which is represented in other forms of road crash.

Dr ANDREW McDONALD: I ask you, as the head of the MAA, what this Committee should be doing about the incidence of pedestrian safety?

Ms DONNELLY: I am part of a team across government. As you know, the Roads and Traffic Authority is the lead agency and it has a lot more people who know about road safety. Increasingly, the severely injured group is an important residual group at which we need to look. Where we have seen an improvement in reducing claims it has followed the same curve of reduction in casualties, as reported by the Roads and Traffic Authority. We are seeing a faster reduction in the low severity injuries, which I guess makes sense. People are now surviving crashes, or they are opening doors and getting out of crashes that in the past would have caused more severe injuries, or even minor injuries.

The challenge for us is to reduce severe injuries. In our supplementary analysis it seems that we have a higher rate of claims for people who are outside the Sydney metropolitan area—not in absolute numbers but ten claims per thousand people, which is more than the numbers that are in rural areas. This is the sort of information I would be giving to the Roads and Traffic Authority to let it know what we are seeing. I have a Masters degree in public health, but I am not as deep a specialist as Dr Job. From our scheme it makes sense to us that severity of injury seems to be associated with the speed of impact, which is pretty well intuitive. That is another concern of which we are aware.

Mr DAVID HARRIS: The Motor Accidents Authority has a role in providing safety programs. You refer in your submission to programs for younger people and children.

Ms DONNELLY: Yes.

Mr DAVID HARRIS: Are there any programs for seniors? Should seniors be educated about their limitations as they get older, for example, the risks associated with them crossing the road?

Ms DONNELLY: Pedestrians have been a priority group for some time. As we noted in our submission, we have been working with Kidsafe for some time, and we have focused on kids needing a hand in traffic. The data that I mentioned earlier shows a higher rate of claims, although that is not always severe for people over 70. I agree with you that it is an emerging group. Since the Centre for Road Safety was established we have had our doors open for proposals for work. We run programs, as it says in our legislation, and fund and support. If there were proposals to do that sort of work with people in the seniors age group I would be happy to consider them, and I would obviously consult with Dr Job.

Mr DAVID HARRIS: The Council on the Ageing submission highlighted that as one area. I do not know whether it has made a submission to do that.

Ms DONNELLY: I am not aware that it has. It might not have come to me yet if it has.

The Hon. IAN WEST: I refer to data, its timeliness and usefulness and where it is aimed. Have you been involved in any discussions with the lead agency—the Roads and Traffic Authority—the police, Mr Riley from the Institute of Public Works Engineering Australia or any other appropriate bodies?

Ms DONNELLY: I or members of my team have talked to Mr Riley and to the police over the past year or so. I have had discussions with the New South Wales Ambulance Service and the Roads and Traffic Authority about data issues. My primary role has been thinking about what we can do to improve the intelligence that we are getting.

One of the amendments to our legislation that was passed by Parliament introduced an extended benefit to everybody who is injured in a motor vehicle accident, regardless of fault, if they submit what we call an accident notification form. Up to \$5,000 can be accessed even if you are the at-fault driver. That does not come into effect until April next year. That form has to be lodged within one month of the accident. It will mean that instead of us having data only on the people who can find someone else at fault we will get information about what is happening across the board. That will improve our understanding of injuries.

The Hon. IAN WEST: Will discussions take place in the next few weeks or months? I appreciate the data that you collect in terms of your IBNRs, data lags and so on is slightly differently focused than perhaps the Traffic Service Branch of the Police Force, the Roads and Traffic Authority or even, perhaps, the Institute of Public Works Engineering Australia.

Ms DONNELLY: Yes.

The Hon. IAN WEST: I would have thought that the data would be able to feed into the University of New South Wales research centre that you use, or am I off the mark?

Ms DONNELLY: No, I do not think you are off the mark at all. We have supported some research bids to bring together more of a clearing house approach to extend the data that is available. Perhaps I am not quite understanding the question. Do I know that I will have conversations in the next month to bring that data together? I may well do.

I have been aiming more at ensuring that our information is available to other people who might find it helpful than the other way around. I have been building up a project for what we find downstream is the impact of different sorts of environments, different vehicles and different types crashes and feeding that back into understanding where the risk is now. It is a bit of a moveable feast. You can bring down the numbers in one place and then you need to know about the next area to tackle. We can inform that.

The Hon. IAN WEST: Do you see any barriers to exchange of information and the building of a database between all those different agencies and organisations?

Ms DONNELLY: It may not be that the solution is building one computer system. However, I certainly think that the will and the interest are there. The challenge is not only making it available for one-off research but also having it as a resource that is easy to access. It is not as simple a task as we would like it to be. However, I do not feel that there is any lack of will and cooperation.

The Hon. IAN WEST: Is it important? Is it worth the effort?

Ms DONNELLY: I do think it is worth the effort. The MAA has invested in some collaborative approaches with that in mind over the years to build up that capability.

The Hon. ROBERT BROWN: In your submission you refer to your collaborative efforts and you have talked about that in respect of data. What mechanism do you have to ensure collaboration with local government and at what level? In other words, is there a formal process for collaboration with local government authorities?

Ms DONNELLY: At the moment I do not believe there is a formal process. But, as I said, the door is open. We will get proposals at any time; we do not have a limit on when people can approach us with ideas.

The Hon. ROBERT BROWN: I note that your data says that roughly 50 per cent of the claims are minor claims accounting for 24 per cent of pedestrian cross claims. We have gathered from previous witnesses that minor injuries in metropolitan areas are by far the largest in number—but not necessarily in severity—and therefore in claims. Would you agree with that? In other words, severity equals outer metropolitan and country areas in terms of high claims and multiple claims is the norm for metropolitan and CBD-type areas.

Ms DONNELLY: In terms of people making a compensation claim, our data would show that whereas in the Sydney metropolitan area there might be 1.3 or 1.4 claims per 10,000 people, outside the Sydney metropolitan area it is more like 10 per 10,000. So there is a higher frequency. The distribution for claims

overall is one in which the larger number are more mild and moderate, but the costs are driven by the smaller number of more severe injuries.

The Hon. ROBERT BROWN: So severity is the key?

Ms DONNELLY: Injury severity is our real focus. I should add for the benefit of the Committee that we are not simply interested in reducing risk before the accident occurs. Our primary role is to assist in reducing the social impact after the injury.

Dr ANDREW McDONALD: The MAA has a statutory responsibility to prevent or minimise injuries as a result of road crashes. A lot of that involves education. What safety education is the MAA involved in and how has it been targeted and evaluated?

Ms DONNELLY: We are going through a bit of a transitional phase with regard to that. Since the Centre for Road Safety was established we have been aiming to work more as part of a team with them as the lead agency rather than to go off on our own and perhaps duplicate effort and so on. We have sponsored programs over the years in which we have guest speakers accompanied by police youth liaison officers going into schools to complement the curriculum. We have had those evaluated and often there are lessons for improving the linkage to the curriculum. One of the things that that evaluation tends to show is that no matter how much social goodwill there is with regard to a guest speaker, if they are on their own and not part of a larger program it does not have the same impact. That has caused us to carefully consider how we can add value given that the Roads and Traffic Authority and the Department of Education already have programs.

In recent times we have tried to support programs by assisting in evaluating where we think there is a gap. As I said, if our team is approached about a program we will talk to the Roads and Traffic Authority and ask whether it is already supporting it, whether it is doubling up on something, whether the model is working and whether we can assist by evaluating it so that we can all make an informed choice. We receive proposals for education programs and we send them out for high-level peer review before we go down that path. We are in a lot more of an evidence-based mode and on a knowledge basis than we have been in the past.

Dr ANDREW McDONALD: Is the current data collection about injuries accurate? Is it adequate for describing what the MAA needs?

Ms DONNELLY: Our collection of data?

Dr ANDREW McDONALD: The current data collected relates to road crash injuries that generate claims. You get a lot of data, but is it adequate for what you need?

Ms DONNELLY: I believe we have some work to do, but we are doing it. It is not so much related to this inquiry. One of the emerging challenges for compensation schemes in the western world is that even if you make resources available and make it easy for people to access treatment the issue is whether they are getting the best health outcome they can. That is one of our primary concerns after an accident. To that end, we have just undertaken a program with some independent experts to analyse our core information system to establish what we will need for the future and to begin developing a business case for the next generation of information. That is about continuing to be able to add value and tackling the next problem that is emerging.

CHAIR: The MAA sponsored the Speed Blitz Blues.

Ms DONNELLY: That might have been before my time.

The Hon. IAN WEST: How long have you been there?

Ms DONNELLY: A bit more than two years.

CHAIR: Instead of running your own advertising campaigns, are you working with the Roads and Traffic Authority?

Ms DONNELLY: We might have been very useful in the past, but we are asking whether we have a role in advertising since the establishment of the Centre for Road Safety and how we can play a part in that team approach. That is quite a good question, and answer is probably not.

The Hon. ROBERT BROWN: Dr McDonald's question related to your collaboration in education and you said that what you now provide is more detailed analysis of the programs put forward. A previous inquiry related to young driver education. Evaluation—or the lack thereof—of education programs seemed to be one of the key elements. Perhaps everybody is being a bit more focused in properly evaluating the many programs.

Ms DONNELLY: I think that is true. There is a limited spend, so we must use it wisely. I think I have had this discussion with the Committee before. It is a balancing act. I have worked in many sectors—emergency services, health and the authority—and there is a really strong will on the part of members of the community to do something about the problem. The challenge is not to have people's good will spent on something that has already been proved not to work and to keep improving what we are investing in.

CHAIR: Thank you for coming and for your submission.

(The witness withdrew)

(Short adjournment)

ANNE LESLEY DEANS, Chief Executive, Youthsafe, 600 Victoria Road, Ryde, and

MAUREEN ELLEN OWEN, Assistant Chief Executive, Youthsafe, 600 Victoria Road, Ryde, sworn and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to information you provide. I should also point out that any deliberate misleading of the Committee may constitute a contempt of Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Ms DEANS: Yes, if I may. Thank you for the opportunity to be part of the inquiry and I hope we can be of assistance. Obviously, our interest is in young people, and for pedestrian safety we are particularly interested in that in the social context of young people. I have brought some supplementary information for Committee members. One of the pages in the kit contains some quotes I would like to share with the Committee from young people that Youthsafe recently interviewed who were out on Friday and Saturday nights. They were 18-plus into the early twenties. Some of those quotes illustrate a couple of key points. One is that there is not a lot of planning goes into safe journeys home and also often they are walking a fair distance to get home. Some of the quotes are talking about spending two hours walking home in the early hours of the morning after being out drinking alcohol. I thought that the Committee might be interested in some of those recent real-life experiences of young people.

We have been exploring a number of strategies and the kit also has some of our resources. One of the programs that we have is What is the Plan? which addresses safe celebrating with community groups. There are some parents facts sheets, and parents, of course, are a really important aspect of helping set boundaries and supporting young people to plan and have back-ups in place and so forth. So a lot of our strategies are also looking at working with parent groups.

Another area that we have been looking at, which we refer to in the submission, is Safe Alternative Transport. It is not the whole answer in its own right but it has perhaps some potential for a complementary strategy and we have recently completed two reports on that, and I will leave a pack with the full reports here if the Committee would like to see those.

CHAIR: I was about to ask you the question how many males and females there were in this Getting Home Safe After Socialising, because my 20-year-old daughter always knows how she is going to get home.

Ms DEANS: The majority are males, and I think that that also illustrates another point, that society tends to allow young males a lot more freedom than they allow females.

CHAIR: My daughter comes into the city, catches the train or the late rider bus home and gets to Campbelltown station about four o'clock and then phones me to pick her up, or one of her friends will be the designated driver for the night. So it seems the girls always have a plan to get home. Thinking back on my three sons, their plan was always someone would drive; they never caught public transport, and I think they probably did not have a plan to get home. When you are on the urban fringe you have got to actually think about it a lot more before you go out, or they stay in town and share a motel room. It is interesting there were nine males and two females.

Ms DEANS: Three or four females.

CHAIR: I will read that with interest.

Mr DAVID HARRIS: I was very interested in your submission about new high school students and the actual injuries and fatalities during travel to and from school, an area I had not really thought of at all before. You said that you have put together a resource on the way to school that you mail out to schools offering them to buy them and then just send them out as a letter or something. Have you had much of a take-up from schools doing it? Do they see that as being an important area or do they wait until they have actually had a problem and then try to use the resource?

Ms DEANS: We do get quite a take-up with it. I have not got the actual figures with me. We have been doing that for a couple of years now. It is the after-school hours in particular, and it is not just the journey home, it is what the kids do after they get home as well that is an issue in terms of road safety and pedestrian safety for young people in this age group as a whole. But between 12 and 15 years there tends to be an increase in risk-taking behaviour. The facts sheet is targeting parents and it is in the pack that I have just handed around. So that is trying to give them tips for helping them prepare for the new levels of independence and responsibility and longer journeys and so forth and raises a number of issues including the walking between the different types of transport, because often they might be hurrying, and, again, planning—having backup plans is important. But we mail it out and make it available free to the community and schools. The school mail-out is a key distribution strategy but also community-based professionals, such as road safety officers and so forth, would use them with various projects that they are undertaking in the local community as well.

Mr DAVID HARRIS: It has been mentioned a few times today about not just young people but the population in general using iPods and mobile phones and all those sorts of things. Is that coming through in the surveys you do as an issue in terms of safety?

Ms DEANS: I cannot say that the consultations have particularly brought that up. There is not a lot of evidence to tell us exactly what the impact of that is. We are aware and we have looked at some material around that indicates that distractions, which would include iPods and mobile phones and so forth, increase the risk, but we have not found anything yet that really quantifies exactly what that risk might be. But it is certainly something that we would keep an eye on as a potential risk factor.

The Hon. ROBERT BROWN: You will have to forgive my memory, Chair and Committee members. This Committee recently completed a similar inquiry into young driver fatalities, et cetera. Did your organisation make a submission to that inquiry?

Ms DEANS: Yes, we did.

The Hon. ROBERT BROWN: An earlier witness from the accident authority mentioned that one of the things that is being applied now more and more is peer review of education and community programs. Do you put forward your programs for some sort of evaluation to organisations like the Motor Accident Authority?

Ms DEANS: We tend to get more funding from the RTA rather than the MAA, although the MAA have recently supported us with learner driver mentor program work. With all of our program areas we integrate an evaluation component and we advocate an evaluation as part of initiatives that are being put in place in the community. So where we might be working with community-based professionals—for instance, with Safe Alternative Transport we are doing a pilot project working with them to undertake an evaluation of that. We as an organisation are also externally reviewed by Quality Management Services and have full accreditation; we have leading practice in two of our standards and will be up for review again next year.

The Hon. ROBERT BROWN: Do you have any interaction with, say, local government road safety officers and any of the local government programs, for example, Ryde?

Ms DEANS: Yes, we do. In fact, I sit on the Ryde Safe Communities Committee. With the road safety officers, amongst other things we send out about a quarterly email news update about new information that is coming through that is relevant to our groups. We have an annual forum—in fact, we have a forum coming up in November this year—on getting home safely for young people from socialising, and we normally have about 200 registrants for that, and that includes a lot of community-based professionals including road safety officers. So we have quite a bit to do with them. They will also come to us for support with pilot projects that they might be doing or advice about some of the community projects that they are putting in place.

The Hon. ROBERT BROWN: Do you have a rough idea of how many individual young persons you might speak to, or who have taken part in a program or that you have been able to reach?

Ms DEANS: Yes. I do not necessarily have those figures here. We can provide those.

The Hon. ROBERT BROWN: If you would.

Ms DEANS: Yes, we have programs that go into schools and that engage young people, and there are consultations.

The Hon. ROBERT BROWN: Are these programs run by the schools or by your organisation?

Ms DEANS: They are run by us. Our two safety sheets, on young drivers and safer celebrating, go into all the learner-driver kits as well. So we have quite a reach.

Dr ANDREW McDONALD: School travelling times are interesting. It appears to me that while they are high-risk times, they are a bit less risky than they were about ten years ago. Do you have any comment on that? Do you have any feelings about the safety of school travelling times?

Ms DEANS: A lot has been done in recent years to improve the safety of journeys for schoolchildren. The school travel time after school also embraces kids who have actually got home from school getting out and playing sport or engaging in other socialising. So there is still that socialising element for school kids during that time of day.

Dr OWEN: One of the complexities is that the ways children travel have changed too. If we are looking at young children, increasingly they are travelling by car. So, if we are looking at pedestrian injuries, the rate has come down. But how much that might be attributable to a change in mode of travel is debatable. But, obviously, there have been a huge number of initiatives around schools to make them very safe.

Dr ANDREW McDONALD: Do you have any data on changes over the past ten years in the ways that children get to school? Are more of them being driven?

Dr OWEN: We do not have that data with us today, but we could access that information. Certainly, there has been an increase in the numbers travelling by car.

The Hon. IAN WEST: The submission of the Institute of Public Works Engineering states that information on the severity of injuries does not reflect consistent measures and prevents accurate comparison of data collected, and the lack of a precise operation definition of serious injury means that there is no sound basis for providing an accurate picture of serious injury throughout Australia. I would like to know whether you agree with that claim. Do you also think that lack of information about the significance of pedestrian injuries also prevents the establishment of community costs for rehabilitation and treatment?

Ms DEANS: Where to start! In terms of serious injury, that is difficult to define precisely. The view that we take is that there are clearly some injury groups that are serious injuries, such as brain injury with permanent neurological deficit, spinal cord injury with permanent neurological deficit, and very significant or multiple orthopaedic injuries which result in potentially lifetime disabilities. So our view of serious injury is injury that is likely to result in long-term, if not lifetime, disability.

Dr OWEN: Also, hospitalisation data that we can access looks at the number of days in hospital, and that would give some indication of the degree of injury and seriousness of injury.

The Hon. IAN WEST: Did you say hospitalisation data?

Dr OWEN: Hospitalisation data would give some indication of the number of days in hospital, and that would give some indication of the seriousness of the injury, and that is accessible.

The Hon. IAN WEST: How do you get access to that, and how is that collated?

Dr OWEN: That is available through NSW Health, so that is already collated.

The Hon. IAN WEST: And you can access that?

Dr OWEN: Yes.

Ms DEANS: Injury ratings are often related to likelihood of death, rather than the disability component. We take a view on serious injury that is perhaps a little different from that of others. Obviously,

death is serious, and the closer you are to that, the greater the problem. But that is not necessarily an indicator of long-term disability. I think there is not good awareness of the disability issues.

Mr GEORGE SOURIS: Dr Owen, you said there is an increased incidence of schoolchildren being driven to school, and that you also observed less injury or a pattern of fewer injuries. Did I get that right?

Dr OWEN: There has been an increasing trend, probably over a couple of decades, for children to be driven to school. That is associated with mothers being in the workforce and those sorts of issues. Generally, we use vehicles far more than we did in the past. I was only trying to say that it is complex, so that we cannot necessarily say there are fewer pedestrian casualties. There are lots of issues that might impact on why that might be the case. That is all I was pointing out.

Mr GEORGE SOURIS: I was going to ask you to perform the complicated task of assessing school zones, public transport and parents driving their kids to school.

Dr OWEN: We do know that school zones are extremely safe. There is plenty of evidence that within the school zones children are very safe.

Mr GEORGE SOURIS: I wanted to ask you about the journey itself. I am assuming that the journey is somewhere within as much as 10 kilometres from home. You are not really referring to the issue in the 15- to 25-year age group.

Ms DEANS: That is our main focus.

Mr GEORGE SOURIS: You do not seem to be identifying separately the journey to an entertainment precinct, that is, the CBD, Kings Cross, Darlinghurst, et cetera, and then the journey home, and maybe even the consequences of their activities particularly with alcohol. Am I right in thinking that you are more saying that after school there might be a gathering of young people somewhere, say at a friend's place, which might necessitate a journey home of even up to 10 kilometres? What I am talking about could be up to 30 kilometres of course.

Ms DEANS: There are a couple of areas. As young people start high school and their journeys home from school are more complex, we have to be aware of their increasing levels of independence and responsibility and greater complexity in their journeys. That is one aspect. Then they may well be engaged in activities such as sports or other social activities, and there is the getting to and from those activities. Those journeys are an issue during school travel times, and that tends to be the younger age groups, particularly 12 to 15 years of age, where risk-taking starts to be on the increase. So we do have a concern about that age group as well.

Then, when you start getting up to the 15- to 20-year-olds, their social activities in the evenings are of particular concern for us as well. We have done a lot of work with safer celebrating. There are issues for under-18s and over-18s, and there are issues related to formal social activities and informal social activities. For the under-18s, there are the get-togethers in parks, beaches or backyards that are unplanned and unsupervised, and suddenly with texting there will be a lot of people that they do not know turn up, or they have not thought about how they are going to get home, and they have not thought about whether they are going to drink or not, and alcohol may turn up with new people arriving, and drugs may appear on the scene. There are some real risk issues there, not only for transport but that is certainly a significant factor. But then the over-18s, who are going out and socialising in the city or centres, or at licensed venues and so forth, also have an issue with getting home, because they may want to stay on until the early hours of the morning, when the transport infrastructure is not compatible with their need to get home.

Mr GEORGE SOURIS: I noted a few of their answers were: we will just stay here until...

Ms DEANS: Absolutely right. A number of them said that they start again at 5 o'clock, so they will hang. What will they do in those four or so hours? It will probably be more drinking.

Mr GEORGE SOURIS: As for pedestrians, is it better to try to get them home at 3 o'clock on some kind of public transport system, or is it better to let them sleep on the beach until tomorrow?

Ms DEANS: There are no easy answers, and these are complex issues. There is not a one size fits all solution; it has to be a multi-strategy approach. We are really trying to understand young people, the way they work, what is normal and important for them, what risks confront them, and look at a whole range of options that help to support them to make safer decisions, to plan properly, to engage parents to support them, to assist with transport and be backups. Then there are a lot of other options that probably work best at the community level but with statewide infrastructure support. That is the sort of approach that we would advocate.

Dr ANDREW McDONALD: The Commission for Children and Young People found that young people die of many causes, often with some from certain socioeconomic groups enduring difficulties. How has Yoothsa tried to approach that group with regard to pedestrian safety?

Ms DEANS: The view that we take is that all young people are vulnerable road users. The data certainly points to an increased incidence. In terms of tackling some of the much lower socioeconomic groups, the kids who might be homeless and that sort of thing, they are often not interested in a lot of the programs that we might have because they are worried about where the roof over their head will be that night, and the whole of their time may be preoccupied with that. But there are organisations involved with young people in those sorts of circumstances who will come to us for support and advice. Yes, we have that unique combined expertise of knowing and understanding young people, and also knowing and understanding injury and understanding prevention. So you have community-based professionals who might know that group and understand the age, but do not understand the injury issues. You might have health promotion people who know about injury, but do not know about relating to young people. We best serve that population by supporting the community groups and professionals who are working with them on a day-to-day basis.

Dr OWEN: I would add that one of the groups that we have been specifically targeting recently is migrant and refugee young people. They are not necessarily interested in road safety issues when we speak to the migrant workers, but they are very interested for example in sport, so we have been using sport as a way in, and then we are delivering messages around getting to sport safely or getting to your casual job safely. Also, we have been working through the learner driver mentor program, because the more disadvantaged young people are the harder it is for them to get their driver hours up. So we have been targeting them also.

Ms DEANS: We have a nominal fee for service for some of the services we provide, but that is not exactly what you call an income. It is basically that, if people have to pay something, they value it a little bit more, so it is a nominal fee. It is mostly government grants. We are a registered charity.

The Hon. RICK COLLESS: Is your sphere of influence only in the metropolitan area, or do you have activities in regional areas as well?

Ms DEANS: We have a statewide role. Obviously, we are Sydney based. A large proportion, two-thirds of the youth population, lives in Sydney and the surrounding areas.

The Hon. RICK COLLESS: So that means that a third live outside Sydney, of course.

Ms DEANS: That is exactly right. You are absolutely right. We are very conscious of the rural areas. There are some activities that we take to rural areas. We have had forums in rural areas. We have gone out to events that have been run in rural areas and supported them. We try to support rural people by having community-based professionals come to some of our Sydney-based forums, and so forth.

A lot more we are using technology as a way of getting out there. For instance, with our What's the Plan Program. We can more easily get our Presenters out to community groups in Sydney and surrounding areas. We have this kit, which I will leave with the Committee. There is a two-minute disc in all of your packs about this program. This is the sort of thing that has been specifically designed. It is a DVD resource. It has fact sheets and session plans so that it can be taken up by people in a community, or by youth group leaders and educators. That can be used in rural areas. So we are increasingly using those sorts of things to extend the program to rural areas as well. We have another one for young people in casual work, which is a similar sort of thing to this.

CHAIR: Thank you very much for attending, and thank you for agreeing to commence earlier, since we were running ahead of time. I must say that that is a very rare thing for a parliamentary inquiry. I thank you for the pack. I would make a suggestion for the Helping Teenagers to Celebrate Safely Program: perhaps we

should tell them not to put the invitations onto the social network pages, and to do that only by hard copy so they do not get 5,000 people attending.

Ms DEANS: Yes, thank you.

The Hon. ROBERT BROWN: I must say that this has been an excellent proposal and information set that you have given to us. Thank you very much.

Ms DEANS: Thank you very much. We appreciate that.

CHAIR: Can we get a copy of that kit?

Ms DEANS: I am leaving this kit for you. This has the reports relating to safe alternative transport. It has the full kit for What's the Plan? and it has a full set of resources, including our annual report.

CHAIR: If you could give that to the secretariat as you leave, that would be excellent. Thank you very much.

Ms DEANS: Thank you so much.

Dr OWEN: Thank you very much.

(The witnesses withdrew)

JOHN ARTHUR EVERNDEN, Accredited Access Consultant, Independent Living Centre NSW, No. 1 Fennell Street, Parramatta, 2150, and

ANNE-MARIE ELIAS, Policy and Communications Manager, Council of the Ageing NSW, Level 4, 280 Pitt Street, Sydney, 2000, sworn and examined:

Mr EVERNDEN: I appear to support the submission made by Council on the Ageing NSW.

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and that you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I should also point out that any deliberate misleading of the Committee may constitute contempt of Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of your evidence to the Committee. Would you like to make a brief opening statement before we proceed to questions?

Ms ELIAS: Yes. I will make a brief opening statement to provide background. The Council on the Ageing was established in 1956. We are probably best remembered for starting Meals on Wheels in New South Wales. We also established Carers New South Wales and Volunteering New South Wales. We ran Seniors Week until the eighties, and we established the Seniors Information Service. I regard our organisation as quite out there and certainly protecting and advocating on behalf of the needs of older people, which now means 50 years plus.

We are also part of the Council on the Ageing [COTA] national network, and in preparation of the submission we drew on our colleagues from other States to see if there was any good practice occurring or insights that we could be given. We are taking on, I believe, a great deal of leadership in this arena. We recently established an Age-friendly Environment Working Group, and the networking group are people such as John Evernden, the NRMA, Housing NSW, several councils in New South Wales. As well, the Age-friendly Environment Working Group is chaired by Dr Catherine Bridge, who is with the Faculty of the Built Environment at the University of New South Wales.

CHAIR: Do you intend to make an opening statement, Mr Evernden?

Mr EVERNDEN: Just briefly, Mr Chairman—the Independent Living Centre provides information on assistive technology and access issues to help all sections of the community to create more access to our environment for people of all ages and all abilities. I manage a project called You're Welcome, which is designed to help councils and other sections of the community to solve barrier problems with practical experience. I am an engineer, and I have had a lot of experience in working with people.

The Hon. ROBERT BROWN: You are a good bloke then, are you?

Mr EVERNDEN: I think so, thank you. My submission is supported by anecdotal evidence that has been gained from this project and from the fact that I have been working with and for people with disabilities and older people for nearly 30 years. In 1992 I presented a paper at the Australian Road Research Board conference in Perth entitled Access Committees: Educating the Road Designer. s "". The issues raised in that paper were the design and location of kerb ramps and the design of traffic islands, both of which are included in my current submission.

I began my engineering career in road design nearly 50 years ago. One of the first principles I learnt was the importance of sight distance. Three of the examples I have included in my submission relate to the hazards to pedestrians because of short sight distance. My concern obviously is for pedestrians, but particularly slow-moving pedestrians who represent, unfortunately, an increasingly larger percentage of the population. They include older people, people who use scooters and wheelchairs, people with mobility disabilities, people with hidden disabilities such as heart disease and asthma, people with cognitive disabilities such as vision and hearing impairment, parents with strollers, parents with small walking children, people with temporary disabilities such as pregnancy or football injuries, people with luggage or groceries, and delivery personnel. In association with the Council on the Ageing, the Independent Living Centre requests the Staysafe Committee to review the design of intersections in relation to the submissions we have made. Thank you.

CHAIR: Thank you. Mr Harris has the largest aged population in New South Wales in his electorate.

Mr DAVID HARRIS: In new areas, which are another issue in my electorate, have they taken on board your advice when they are designing new roads? I know that in older areas it is a little bit more problematic because redesigning existing roads is quite difficult, but in new areas and new estates, are you finding that the information that you put forward is being taken on board, or are you just being met with a brick wall?

Mr EVERNDEN: Unfortunately, no. In many new estates there are no footways at all, so everyone, such as people with prams or strollers and so on, has to use the road. We are encouraging people to get out and enjoy the facilities outdoors, but we are now putting people on the roadway.

The Hon. RICK COLLESS: Just expanding on that, what you are talking about is that there are no paved footways on the footpath. Is that right?

Mr EVERNDEN: I am sorry, there are no paved footways, yes. If you are in a wheelchair, you cannot drive down a grassy footway.

Mr DAVID HARRIS: That is interesting because in my electorate every new estate has footpaths as part of the development application. There is more concern about the line of sight to crossings and things like that because roads are narrower and the houses are closer. Anecdotally, I am not seeing that. What you are recommending in your submission should be put into new designs, and that worries me.

Mr EVERNDEN: I think the examples I have in the submission are more like busy main roads, although the same situation does appear in local areas. There is one example in Fairfield where there is a left-hand turn into a residential street. Around the corner is a kerb ramp, which is hidden by some bushes.

Dr ANDREW McDONALD: There is one also in Merrylands.

Mr EVERNDEN: There is one at Merrylands and the other one, which is right around the corner, is in Fairfield.

Dr ANDREW McDONALD: I have seen photos of it.

Mr EVERNDEN: Yes.

Dr ANDREW McDONALD: You cannot see where the gofer track is.

Mr EVERNDEN: Yes. One of the problems with road design is that, while the design may look wonderful on the plan, you are only seeing the plan view, which does not always necessarily translate into the site situation. The three examples I have given show traffic turning left down an incline, so that does not help the sight distance.

The Hon. ROBERT BROWN: In COTA's presentation, in section G you refer to pedestrian safety and strategies in other jurisdictions, and that you have consulted with them.

Ms ELIAS: Yes.

The Hon. ROBERT BROWN: You have listed a number of items there. Can I correctly assume that those are the order of priority that you would suggest for bringing in to New South Wales?

Ms ELIAS: Not specifically. They are in the order in which they came.

The Hon. ROBERT BROWN: Have you raised these issues with the Roads and Traffic Authority?

Ms ELIAS: No, we have not because, again, they come from other jurisdictions. We will be working through our Age-friendly Environment Working Group with a much more robust group of people, whom I have already mentioned—representatives from Housing New South Wales, different local government councils, the Independent Living Centre, and the Faculty of the Built Environment. As a working group we can put forward a submission around what we think needs to happen.

The Hon. ROBERT BROWN: In addition to those agencies you have mentioned, are you part of any formal consultative group that talks about pedestrian safety issues, or road safety issues? Are you part of any other consultative group?

Ms ELIAS: No.

The Hon. ROBERT BROWN: The groups that you speak to—the local government authorities, for example—have road safety officers.

Ms ELIAS: Yes.

The Hon. ROBERT BROWN: And they constitute a number of committees with other groups. Do you feel that COTA has enough access to those other agencies so that your views can be adequately expressed, or not?

Ms ELIAS: Probably not. There is a representative from the Local Government and Shires Association on our working group. We believe that is a step in the right direction in gaining a bit more access to local government. As I mentioned, two councils, namely the Council of the City of Sydney and the Marrickville Council, have sent along representatives. When they see that we are actively involved in not inhibiting their work, but rather bringing forward a consumer perspective and trying to work together to find solutions that are going to work for all parties, perhaps we will be invited onto a greater range of advocacy points in local government.

The Hon. ROBERT BROWN: It is not just certain local demographic areas that have a problem. We are part of an ageing demographic.

Ms ELIAS: Exactly.

The Hon. ROBERT BROWN: These issues will become more and more prevalent for town planners, local government and agencies such as the Roads and Traffic Authority and everybody else.

Ms ELIAS: Exactly.

The Hon. ROBERT BROWN: Have you had formal discussions with the New South Wales Police Force on issues such as this?

Ms ELIAS: No.

CHAIR: I am regularly nearly run over in the main street of Camden by a fellow on a gofer. Those gofers or buggies will become an increasing problem, because in Camden we have nursing homes and retirement villages that are, quite rightly, close to the centre of town, where they need to be, so people have easy access when they are able to walk. But when they are not able to walk, they use scooters or buggies or whatever. If there is no footpath they can travel on the road, as Assistant Commissioner Hartley informed the Committee this morning. They will become a big problem, and not that far down the track.

Ms ELIAS: Exactly.

CHAIR: Have you addressed that?

Ms ELIAS: Through the age-friendly working group we are working with the NRMA in looking at what we can do about that situation. We understand that there is an increasing prevalence. It is difficult, because it is not yet legislated, but they need driving lessons and awareness lessons. Between the two agencies and probably if I can permit myself to say this, including the New South Wales Independent Living Centre, in that landscape we probably have an opportunity and responsibility to develop a facts sheet and some education for consumers who are using those. Also, there are issues about the width of footpaths, because scooters are not able to travel along them. Hence, they travel on the road or the grass, which is far more dangerous. It is a challenge, and we are looking at that with the right people, I believe.

CHAIR: As another example, a fellow—who does not try to run over me when driving back to his village—obviously has eyesight problems. There is a wide verge on the old Hume Highway at Camden near the

hospital and rather than travel close to the gutter he travels on the white line because he must be able to see it. When I swing around the corner, suddenly there is that fellow on a scooter. He is nearly hit by every car that passes him. This is a problem because technically they are pedestrians, as Assistant Commissioner Hartley informed the Committee this morning.

Ms ELIAS: Yes, they are. They are using those aids to improve their mobility and reduce their social isolation. We certainly do not want to discourage that, because it is a good tool. However, there are some hoons out there. It is likely that a grumpy old person was a grumpy young person; and if someone is an older hoon, it is likely he was a younger hoon. They are people, like you and I are people. I do not think that any of us are going to change dramatically in character or personalities as we age. Again, it is a responsibility for us to be able to provide them with the right information for their safety, and also for the safety of others in some circumstances.

The Hon. ROBERT BROWN: When a person reaches the age of 50 they should automatically be required to own and drive a Volvo for two years.

Ms ELIAS: Or a Saab.

Mr GEORGE SOURIS: There is a list in the summary of various jurisdictions. What do you think really stands out that would make the most contribution? I cannot tell what weighting is applied when I see "larger traffic lights". Is that a really important one, or should it be at the bottom of the list?

Ms ELIAS: The slowing down of traffic, pedestrian crossing lights, would benefit not just older people but a wide range of people. I apologise that in the submission I mentioned puffin technology without explaining what that was.

The Hon. ROBERT BROWN: It has been explained to the Committee.

Ms ELIAS: Okay. I know that the alarmist side of the Roads and Traffic Authority and infrastructure will say that if you start slowing that down it will cause mayhem because there will be a build-up of traffic, and so forth. We understand that. Hence, the use of this technology will be a lot more focused, and it will only change and extend the lights when pedestrians are waiting at that signal. It is not that every single pedestrian crossing will be delayed; it is only those where it is sensed that there is a number of pedestrians.

Also, the conditions of our footpaths are just astounding. I walk from Redfern to the city every day, to 280 Pitt Street. I am far from athletic but I am reasonably fit, and I would like to believe reasonably young, although I am edging towards the 50-plus mark, with a few years to go. I am on the other side now.

The Hon. RICK COLLESS: What is the other side?

Ms ELIAS: The downhill side? No, it is the new horizon side. I trip quite a lot, and it is only because of the unevenness of the footpaths. I do not shuffle when I walk, but clearly I am not lifting my feet as if I am marching. I am noticing it a lot more. I joined the Council on the Ageing [COTA] in August last year, so obviously I am a lot more aware. I notice young people struggling to cross signals, let alone older people. In fact, on our way here we walked and noticed an older person with a cane who just made it. She no sooner had stepped on the kerb that the lights turned green and the cars were going. That is really concerning. What adds to that is the disrepair of the roads. If you are tripping over in trying to get from A to B, that is not helpful.

I would like to cite a very recent example. Council on the Ageing runs a seniors peer education program, in which we train-up and skill peer educators to go out and deliver sessions to other people. One of our 70-plus peer educators walked across a pedestrian crossing to catch a train from Chester Hill. She was coming into the city to train a group of public housing peer educators, as a mentor. Her contribution to this society is important and valuable. She was not rushing, I checked that, and she fell. Earlier today I called her to see how she was doing. Essentially, she is having X-rays and ultrasounds to identify the extent of the damage.

That woman was robust and quite healthy. The first thing that came to mind was that if she were a more frail older person, what would the damage have been. Although she is a healthy and active older person she may not be able to return to her previous life. That worries me greatly. We have a Federal policy of social inclusion and healthy ageing—as well as a State policy, mind you—and the Council on the Ageing is not seeing that following through across all departments. We feel that this is not just about older people; it is about lots of people, as John Evernden highlighted, people with young children, people with prams, people with intermittent

disability. Someone might break an arm or sprain a leg or whatever, and it is only when you are in those situations that you see the full impact of how badly our cities are designed.

Cities are very much designed around cars, and we can be forgiven for that. Because of the ageing population we really need to redirect that. One of the recommendations from the age-friendly working groups that we will be putting in our pre-budget submission to the State Government and the Opposition later this year will be that a very sensible way of moving forward is to overlay population maps over infrastructure and planning maps. Currently that is not done.

The Hon. ROBERT BROWN: That is an interesting concept.

Ms ELIAS: It is a very interesting concept, because we build all of these things without really looking at the population. I will throw in a little thought around that. My parents are in their late 70s and early 80s and they can no longer visit me. So, it is not just about where older people live but also about the whole community being accessible to older people. I am quite sad that because I live in Redfern, with lots of narrow streets, and I do not have a ramp leading up to my home, my parents cannot come to see me. Obviously that is a concern for many people. This is not just about where older people are living, because older people move, they downsize, they move to different areas. It is also about where their families are, where their social networks are. If we are serious about healthy ageing and about promoting social inclusion and encouraging people to be active well into their 80s we really need to start thinking of those types of issues.

CHAIR: I can reinforce what you have said. Two weeks ago I was on crutches for a week. I was amazed at how difficult that was. As a former councillor, I know that councillors are quite often in the mainstream of deciding the best footpath to be provided. I argued against pavers because I believe the old tar is the best. Councils engage in huge arguments with heritage groups and others in trying to decide what is the safest for people. But it is nearly impossible. Lay people take advice from engineers, and engineers have professional differences about the best. Sometimes it is not easy to decide on the best footpath construction, to come to a sensible resolution for the safety of people.

Ms ELIAS: Probably it would put this Committee in good stead to show some leadership in this area. It is a whole-of-community responsibility; it is not just the councils or the police or planning and infrastructure. I am certainly aware of that and when I see an older person trying to cross a road I will help. I will go out there and help them carry their things, or assist them to cross the road. They do not always want that assistance, and that is fair enough. It would really put the Committee in a very different light to show some leadership in this area and to possibly highlight the cost to the State of not making these changes.

When I was looking at the puffin technology in Western Australia I noted that they ended their report by saying that "if funds allow they will implement this". That is just not good enough. If the funds are not available, then find the funds and make them available. Because the cost to the hospitals and the communities—if I lost my parents, or their ability to be mobile, that would have a devastating effect on my family and on my job to be honest. My parents are active and they help me with my children and they make my life a lot easier and they enable me a great deal. You will find that you want everyone to be mobile and to feel that they have access to things.

Another aspect, I guess, is lighting. There are some real problems with that. I do not know what the scope of this Committee is, whether it could consider backup lighting. Recently I was driving along Parramatta Road and turned right into Glebe Point Road, and all the lights were out. I could barely see where I was going. I was aware that lots of pedestrians cross that road without looking at the lights. I wondered why there is not a system of solar lighting as a backup if the streetlights go out. At the moment we might need to wait two or three days, and heaven knows what accidents can happen in that time, and, again, what would be the cost to the State of any accidents occurring, because we do not have contingencies.

The Hon. ROBERT BROWN: Not to circumvent COTA being proactive in getting onto some of the organisations and committees, but one thing this Committee might care to recommend to the Roads and Traffic Authority is that the RTA recognise COTA as a stakeholder and start to involve you in some decision-making processes. That is not to say that COTA should not be standing up for itself, and you seem quite capable of doing that, and asking to be involved. Certainly from the range of witnesses we have had in this inquiry and previous inquiries it appears to me that the groups around the State that are involved in youth education, looking after youth, seem to have a far more active voice and are already included in some of these fora.

Ms ELIAS: Yes.

Dr ANDREW McDONALD: COTA would know that people over 60 comprise 17 per cent of the population, and 40 per cent of pedestrian fatalities. What are the things that COTA would recommend that are achievable that Staysafe should recommend to reduce that?

Ms ELIAS: We need a plan.

Dr ANDREW McDONALD: What should be in that plan? What measures?

Ms ELIAS: That plan should be everything from appropriate lighting and backup lighting. We now have solar energy, which may reduce the cost of some of these things and perhaps we should move to solar lighting for streetlights eventually anyway. The way that we repair footpaths is quite a big priority. Just in walking around the city I notice quite a lot patch-up jobs to fix a footpath, which actually does not enable people to walk safely along them. I believe also that the overlaying of maps will give people a good insight. Whether they act on them is another story. At least in planning and infrastructure they should look at the demographics and populations for those areas. From a futuristic point of view, if you have these concerns as a matter of fact for prospective areas or prospective developments, that is probably a really good start. I appreciate the difficulty in being retrospective but, for example, I would start with the hotspots. You know the areas where pedestrians—and not just older pedestrians—are affected. That would be a clear indication of a good place to start in trying to address those problems.

Dr ANDREW McDONALD: The lighting of footpaths?

Ms ELIAS: Yes. Again I stress that it is a whole-of-community responsibility. It would be phenomenal if you could form a roundtable after this with some of the people who have submitted to the inquiry and some of the key stakeholders. It is about moving forward and it is about bringing all the right stakeholders together to find the best possible solution. I defer to John.

Mr EVERNDEN: The You're Welcome Program, which has just about run out—unfortunately it has only two weeks to run—is targeted at only 11 councils in Sydney because it is funded through the Department of Community Services Area Assistance Scheme for western Sydney. I talk to councils and encourage their engineers and planners to revisit their standards to ensure that they are up to date and to include everybody. It is not just a question of saying, "This is the way in which road design will be done and we will keep doing it that way." We need to include everybody—people with all forms of disability and people of all ages. Am I able to table an example?

CHAIR: Yes.

Mr EVERNDEN: I have several copies to hand around. This is a new intersection, or a newly reconstructed intersection, at Hastings Road and Old Northern Road, Castle Hill. I mentioned in the submission that we are concerned about slip lanes where a vehicle is allowed to turn left, usually around a very large radius, without having to slow to a minimum. Our recommendation is that left-hand turns should have the smallest possible radius, and arrange for vehicles to turn almost at right angles. The example I have shows a new intersection that has just been reconstructed and traffic control lights that have been installed.

You will see on the left-hand side that the left-hand turn from Hastings Road into Old Northern Road is almost at right angles and it has a reasonably small radius. The importance of that is that the kerb and the side of the traffic island are straight, which means you can construct a reasonable kerb ramp, which is okay. However, if you turn to the second photograph you will see a pathway leading from a bus stop down to the intersection. Imagine that you are blind and that you use a cane. I am sure you have heard people using the term "shorelining". People with canes knock the cane along the building line, which is called shorelining. They also do that to pathways to give themselves direction. If you are blind and you are walking towards this intersection and you have the cane in left hand, you are shorelining along the outside of the concrete footway.

The Hon. ROBERT BROWN: Straight onto the road.

Mr EVERNDEN: Not exactly. If you follow that right around you finish up at the kerb—not on the kerb ramp but at the kerb. Your left foot is on the level concrete and your right foot is on the slope. Go to the third photograph, which I have altered. I would say that this is a better design where you direct the person

straight into the kerb ramp. Once you get there, if you are standing on that kerb ramp, because it is a slip lane and there are no traffic lights, there are no cues at all to guide you as to when to cross. There are no tactiles on the kerb ramp. I know that the Roads and Traffic Authority is reluctant to use tactiles—and in some cases for very good reason—because tactiles give a person a sense of direction.

If the kerb ramp was on the corner and the tactiles led you out into the middle of the intersection—as I have shown in one of the other photographs—that would present quite a danger. In this case I believe there should be tactiles. Because there are no other cues when you are at an intersection the tactiles would help to indicate that there is something in front of you. If you are blind but you can hear and you wanted to cross over to the first traffic island, you would hear the audio tactiles for the direction across to the larger island right in front of you.

To the left of that photograph there is another direction across Old Northern Road and you can hear the audio tactiles there. If there are no other cues and you hear the audio tactile that directs you across from one island to the other, you may assume that you can leave safely, whereas in fact you may be stepping in front of a vehicle. Once you get onto that first island, again there are no tactile cues. You can detect the audio tactile button on the post and feel the edge of the traffic island with your cane. You can then cross safely to the second median, or the second island, which is very large as you can see. Once you are there, there is no indication at all as to where you can go. If you keep walking forward you could possibly run into the traffic light, or walk off the side of the median.

I would suggest that you have walkthroughs where you cut through these islands, so that the path you travel is at the same level as the roadway. Walkthroughs have many pluses. You reduce the amount of concrete you use, which is environmentally friendly; you create vertical sides on the concrete median either side of pathway so you can shoreline along; and the black asphalt against the white concrete gives you some vision. Most people who are vision impaired have some sort of vision, and if they cannot discern shapes they can discern colours, so black on white is the best combination.

In this situation it would have been better if an access consultant had been involved in the design to point out these things on the drawing board. Those are the sorts of things that the You're Welcome Program is all about in talking to councils and to other people involved in the public domain to make it more accessible for everybody—people of all ages and all abilities.

Ms ELIAS: COTA recommended that the State Government expand and continue the You're Welcome project. We have not had any response, apart from no. Perhaps that is a response. This project, which has been funded for two years, is providing a free service to local government in relation to accessibility. I am glad John went through those photographs as it reveals the knowledge and background of this person and his team. We cannot understand why, with an ageing population and the concerns that Staysafe has highlighted, a project of that nature would not be a number one priority for the Government to expand statewide. It is not that expensive—if my memory serves me correctly it would cost about \$500,000 to expand the program statewide and to have it operating for three years. It is not a great deal of investment when you look at the outcome of such a program.

The Hon. ROBERT BROWN: Does local government fund that program?

Mr EVERNDEN: The Department of Community Services funds that program. The Department of Community Services will not refund the current project.

CHAIR: It has been operating for only two years?

Mr EVERNDEN: Yes. The Area Assistance Scheme is going under a new program and you can get funding for up to three years—up to \$100,000 for each of the three years. I intend to make a submission to increase this program statewide. This funding relates to only five areas of the State—the Illawarra, the Hunter, western Sydney, which has already been done, and a couple of other areas. Over the next three years I will promote this program to the rest of the councils in those areas, for example, the Illawarra next year, the Hunter the year after, and that sort of thing.

CHAIR: Thank you for coming in today and thank you for agreeing to start early. Thank you also for your submission.

The Hon. ROBERT BROWN: It was an excellent submission.

(The witnesses withdrew)

JAKE OLIVIER, Senior Research Fellow, Injury Risk Management Research Centre, IRMRC, Building G2, Western Campus, University of New South Wales, sworn and

JULIE HATFIELD, Senior Research Fellow, Injury Risk Management Research Centre, IRMRC, Building G2, Western Campus, University of New South Wales, and

RAPHAEL HILIARY GRZEBIETA, Professor and Chair of Road Safety, Injury Risk Management Research Centre, IRMRC, Building G2, Western Campus, University of New South Wales, affirmed and examined:

CHAIR: I draw your attention to the fact that your evidence is given under parliamentary privilege and you are protected from legal or administrative action that might otherwise result in relation to the information you provide. I also point out that any deliberate misleading of the Committee may constitute a contempt of the Parliament and an offence under the Parliamentary Evidence Act 1901. Your submission has been received and will be authorised for publication as part of the evidence of the Committee. Would you like to make a brief opening statement before we proceed to questions?

Professor GRZEBIETA: Yes, we would. We have highlighted three main issues in our submission that we would like to reaffirm. The first issue is to do with safer systems, safer roads, safer vehicles and safer road users. Under that context and heading we propose that a 40-kilometre-an-hour limit be placed in areas of high pedestrian activity. The second issue is that we have a rising older population that will be, or possibly already is, overrepresented in the area of risk of mortality. We need to be doing something now for older pedestrians with regard to extending times for crossings, ramps, proper footpath access and any other cues that are needed to assist them in crossing the road and avoid being struck by vehicles. What is being done for the general population might not necessarily be useful for older pedestrians. I think there is a special need there.

The third important issue we want to highlight is that we would like to see some sort of promotion towards all road users—in other words, that all road users respect one another. Pedestrians should respect the roads on which drivers travel and, likewise, drivers should respect pedestrians wherever they walk. There must be a responsibility of usage for every road user. I am from Melbourne but I migrated to Sydney three years ago. I have probably come close to striking about six pedestrians since I have been living in Sydney—pedestrians who are jaywalking, going against red lights, et cetera. We need that mutual respect. In a reverse situation drivers must slow down in high pedestrian activity areas because someone might suddenly pop out from behind a car and they need to be mindful of that. We need some education along those lines, or at least some promotion in that regard. We are now open to questions.

Dr ANDREW McDONALD: The 40-kilometre per hour limit has been raised by a variety of people with a variety of opinions. The NRMA has suggested that there be a differential speed limit, where it is 40 kilometres per hour during working hours and more at other times. Can you comment on that idea?

Professor GRZEBIETA: I think in high pedestrian activity areas they are still pedestrian active when the sun sets.

Dr ANDREW McDONALD: They are suggesting the CBD of Sydney.

Professor GRZEBIETA: They are still pedestrian active. My concern is that with the normal lighting that on a vehicle—in other words, low beam, which we are required to use—you cannot see a pedestrian in a darkened area unless there is light shining on them from overhead or you have your high beam on. If you have your low beam on and you are travelling at more than 40 kilometres per hour you will not have time to react if you have not seen that pedestrian. You will strike that pedestrian at the speed at which you have been travelling. That is why we are proposing 40 kilometres per hour, predominantly for the dark areas.

It is just a matter of physics. That takes into account perception and reaction time. You will have time at least to apply your brakes and reduce your speed if you have not seen the pedestrian as a result of inappropriate lighting. The other thing that we are seeing and I should mention it is that we are starting to get smarter vehicles. In other words, we are starting to see—particularly in high-end vehicles like Mercedes, Volvo et cetera—head-up displays. In other words, the driver will become more aware of what is ahead of them. Even though they may not be able to see the pedestrian, there will be some sort of warning system. But we are still a long way from that.

Dr ANDREW McDONALD: Is that in your submission?

Professor GRZEBIETA: Yes.

Dr HATFIELD: The variable speed limits relate to acceptability. There are two competing interests. On the one hand, making something variable makes it more acceptable to people when, for example, pedestrian activity may not be so high. They are more accepting of having the lower limit when pedestrian activity is high; it is okay and everybody is being responsive to the prevailing circumstances. The other side of that coin is complaints about variability and knowing what the speed limit is where. Often it is a very difficult game to win.

Unless there can be very clear distinctions about when it is a high activity area and when it is not and some sort of uniformity in different areas and at different times, I think the consistency argument wins. Otherwise, it will be too variable from area to area and the time frame will be too variable from area to area for people to have any kind of idea about what is going on and when. The CBD of Sydney is potentially a bit different because it is a very delineated area and it could be something that is strongly promoted for particular times, although the boundaries are an issue. As a more general application looking at other high pedestrian activity areas, I think variability would prove to be something of a nightmare.

The Hon. RICK COLLESS: I refer to your comments about education and drivers and pedestrians needing to be educated. We heard evidence earlier that it was very difficult to educate pedestrians, particularly those who bounce along the road with iPods in and telephones on. In the case of alcohol, it is impossible. How do you propose that we overcome that issue, particularly when pedestrians have been drinking?

Professor GRZEBIETA: I was not exactly saying "education". I was saying promoting awareness. How we promote awareness, I am not 100 per cent sure. You are right in terms of how you deal with a drunk pedestrian. We need to start to thinking about whether there are other safeguards we can introduce to prevent pedestrians wandering off into the streets alone. Do we get them a cab or do something else, for example, not provide them with so much alcohol during serving time? That is another issue that has been examined. We need to address those issues on a case-by-case basis. I am not suggesting education works; in fact, it is borderline whether it does.

The Hon. RICK COLLESS: It becomes much more of an issue in some isolated regional communities in particular, where there might be one hotel in the town or village and there are scattered houses within three or four kilometres of the hotel. They all walk home afterwards and in that situation the streets are invariably unlit. There are quite serious accidents in those villages involving drunk pedestrians and motor vehicles.

Professor GRZEBIETA: That needs to be approached in a different way. That is what we are referring to in the safe systems approach. In other words, we figure out a way to reduce the conflict between the pedestrians and the fast vehicles. We either slow the vehicles right down or we put in barriers. You put in fences or some other barriers that prevent people coming out. You have to address the physics of the system if you cannot address the behavioural part.

I want to add one more thing about variable speeds. There is a new system coming in called the Intelligent Speed Adaptation [ISA] system. That is going to start coming in very soon. In fact, there is a conference happening shortly where the ISA will be looked at for a day or two. If we start to get those systems in vehicles then variable speed limits could be a reality. The driver is given enough warning as to what the speed limit is. I certainly use my GPS and it tells me what speed I am doing and I can check very quickly. The issue here is letting drivers know what is happening and that tactile feedback works.

CHAIR: Dr Job said that the Roads and Traffic Authority is conducting the largest trial in Australia with the ISA in Wollongong at the moment. I drove a car along Macquarie Street with the ISA and was amazed.

Mr GEORGE SOURIS: I drove one of your cars down in Melbourne.

The Hon. RICK COLLESS: We should also point out that the ISA has been promoted very strongly by this Committee over the past six or seven years.

CHAIR: The previous chairman had strong thoughts about it. My question relates to something you said at a ministerial roundtable about four or five weeks ago. This morning both Dr Job and Assistant

Commissioner Hartley argued that in pedestrian safety the faster you go the more likely it is that a fatality will occur. They both argued for the reintroduction of random speed cameras. I know your views, but would you like to state them for this Committee?

Professor GRZEBIETA: Absolutely. Random speed cameras need to be reintroduced—in particular, covert speed mixed with overt cameras. It is an imposition put onto the driver that they should drive at the speed limit. If they do not, they could be caught and they could be pinged. That has a direct effect. Certainly, there is a direct connection between speed and risk of injury. That has been proven and shown internationally. Victoria has had a good track record in that regard. I strongly support the introduction of extra speed cameras, and particularly the mix of covert and overt cameras.

CHAIR: We have asked the NRMA for its opinion on that and I am interested to see what the board comes up with.

Dr HATFIELD: This relates to pedestrian injury and not so much to speed management, and it appears not to be that relevant. However, insofar as speed management is concerned it is critical to pedestrian safety, this Committee could also advocate further for ISA and address the problem that people really do not understand it and feel that the consequence of it is that they are potentially less safe under circumstances where they need to change their speed. The current systems are passive where people can override them simply by depressing the accelerator.

The Hon. RICK COLLESS: But they have to deliberately do it. That is the thing. There is a warning that they are exceeding the speed limit. That is a very important point. A lot of drivers are caught because they are speeding down a hill and things like that. This system prevents that happening; you have to deliberately speed to go over the limit. That is where it becomes much more enforceable.

Dr HATFIELD: There is the group of people who want to deliberately speed and then there is the group of people who feel that you are taking away their control and they will not have any control over the vehicle. That is an inaccurate perception and it is one that needs to be addressed before ISA will be acceptable to people.

The Hon. RICK COLLESS: As a result of that ISA technology there will be a whole suite of technologies coming forward such as warning systems about pedestrians on the road, the distance between cars and so on. Some exciting things will come out in that regard in the next 10 or 15 years.

The Hon. ROBERT BROWN: What range of formal advice do you give or does your centre give to any statutory committees or others that are set up to consider these issues? In other words, is the centre a stakeholder in any of the groups that meet—the Roads and Traffic Authority, the police et cetera?

Professor GRZEBIETA: Our core funders are the MAA, the RTA, and the Department of Health and we have a deed of agreement with those bodies.

The Hon. ROBERT BROWN: So you act virtually as a technical adviser to those bodies?

Professor GRZEBIETA: Yes, we do. But we are independent in terms of publications. At the moment the way the deed of agreement is set up we do not need their full agreement if we decide we want to publish information that might be controversial for each of the funders. That is in the deed and it is locked in. We have autonomy in that regard.

Mr DAVID HARRIS: At the end of your submission there is some expert opinion on why there may be a recent increase in pedestrian trauma. You have mentioned some interesting things, firstly, the reduction in penalties for exceeding the speed limit. If I read that correctly, even though that would not have come into force, you are saying that people may have had the impression that it had. The others are quite sensible and clear. The final comment relates to shared pedestrian footpaths, which are becoming more and more common. I was not aware that the injuries from bike accidents were counted in the data. Can you comment on the speed limits and the shared pedestrian footpaths?

Professor GRZEBIETA: I will defer to my colleague on the speed limits because she has a better grasp of that. In relation to shared footpaths, the cyclists riding on the roads are at the greatest risk. We are seeing a lot of fatalities and serious injuries as a result of cars striking them. There is discussion about shared

footpaths for cyclists and pedestrians. That is all well and good and councils can consider that sort of thing. However, if a cyclist travelling at a speed greater than 10 kilometres per hour strikes a pedestrian and they fall over the likelihood of death is quite high. There have been incidents where younger people have been struck by cyclists and they have experienced serious injury.

All we are saying is that if you start shifting the risk by transferring the cyclists from the road onto the footpath, you are probably going to see an increase in pedestrian injuries. You are shifting the vulnerability from the cyclist to the pedestrian. We would prefer to see segregation. In other words, you have pedestrians, cyclists and cars, and we keep the different road users travelling at different speeds separate if we can. I know it is difficult for a city like Sydney, which has very constrained roadways. However, if you are going to mix the traffic then you have to ensure that you enforce the speed limits. If it is a car mixing with either cyclists or pedestrians, they should travel at 40 kilometres per hour maximum if it is a through way. If it is a shared environment where there are pedestrians mixing and walking with cars, then the speed limit should be 10 kilometres an hour. Similarly for a cyclist, it should be 10 kilometres per hour on a shared footpath.

Mr DAVID HARRIS: In the data if there is an injury or a fatality with a bike, in that situation that is counted in the data that we have been looking at today?

Professor GRZEBIETA: I do not think so, no.

Dr HATFIELD: That is a cyclist.

Professor GRZEBIETA: That is a cyclist and it gets counted as a cyclist. If it is on the road involving a vehicle and a cyclist then it will be counted.

The Hon. ROBERT BROWN: As a pedestrian.

Professor GRZEBIETA: Or a pedestrian is struck by a vehicle, likewise. But a cyclist striking a pedestrian on a footpath I do not think is counted.

Dr OLIVIER: It is counted in the hospitalisation record, which is a different dataset.

Mr DAVID HARRIS: It is entered in the pedestrian data?

Dr OLIVIER: Yes. They are two different datasets: one is from NSW Health hospitalisation data and the other is RTA's TADS database, which has the traffic crashes, which could include a pedestrian.

Professor GRZEBIETA: But having said that, the risk of a cyclist striking a pedestrian and killing them is about one a year for the whole country.

Dr HATFIELD: At the moment it is.

Professor GRZEBIETA: At the moment, that is right. Serious injuries—injuries in general, I have forgotten the number now, it is somewhere in the order of 20 per year, something like that, nationwide. So it is not as dramatic as some people would have you believe.

Dr OLIVIER: It is not that dramatic for most age groups but it is sort of dramatic when you get to older groups.

Professor GRZEBIETA: Yes—older pedestrians it is fatal.

Dr OLIVIER: The analyses we have had—not recent data but the data we have—there seems to be a spike amongst the elderly.

Professor GRZEBIETA: I would not be putting a bicycle path in front of an old folks home that's for sure.

Mr DAVID HARRIS: There was a second part to the question about the reduction of penalties for exceeding speed limits.

Dr HATFIELD: Essentially, the argument runs that speed kills pedestrians; that enforcement is one of our major approaches to controlling speeding. There is some evidence that the level of penalty influences the efficacy of the enforcement, which stands to reason—people are not going to take a \$1 fine very seriously but they will take a \$200 fine seriously.

The Hon. ROBERT BROWN: Or the points.

Dr HATFIELD: Or the points.

The Hon. ROBERT BROWN: But points are not the issue.

Dr HATFIELD: In this case, yes. In fact, the evidence related to penalty points rather than dollars. The promotion of the change in penalties is liable to have had an effect in two ways. Firstly, the mere information that the penalties will be reduced sends a message that speeding is not such a problem. After having fought tooth and nail to convince people that speeding is a problem—speeding is dangerous, you should slow down, it is safer—to reduce the penalty sends the wrong message. Secondly, how close attention does anybody pay to the media? "The penalties are going down". Do I know what date they are going down? If it has appeared in the media some people, and possibly a large group of people, will think it has already changed, it is changing tomorrow or it is changing next week. So that mere information is almost certainly going to have had an effect on average speeds, and I do not know that to be the case in terms of measured speeds, and that will filter into the effects on injury in crashes.

The Hon. RICK COLLESS: So you are referring to the recent changes in the penalties?

Dr HATFIELD: That is correct.

The Hon. RICK COLLESS: But the penalties for the higher speeding levels were dramatically increased and the difference was up to 15 kilometres an hour over the speed limit previously you lost three points, up to 10 kilometres an hour now you lose one point, but from 10 to 20 you lose four and from 20 to 30 you lose five, and over that it is six.

Dr HATFIELD: That 10 kilometres can be quite problematic at particular speeds.

The Hon. ROBERT BROWN: That first 10 kilometres?

Dr HATFIELD: Yes, the first 10—even the first 10.

The Hon. RICK COLLESS: The justification for that though was that most people that speed by less than 10 kilometres are those people I was referring to that are overrunning down a hill or things like that; they are not deliberately speeding. It is the ones who are driving more than 10 kilometres an hour, who know they are speeding—the deliberate speeders—they are the ones that should be caught.

Dr HATFIELD: Sure. Whether they are doing it deliberately or not does not change the physics of the situation.

The Hon. RICK COLLESS: I understand that.

Dr HATFIELD: So, for example, in a 50-kilometre-an-hour zone that shift from 50 kilometres to 60 kilometres has a profound impact on injury outcomes.

Dr ANDREW McDONALD: Point-to-point speeding cameras, does your organisation have an opinion on them?

Professor GRZEBIETA: Yes. They should be introduced.

Dr ANDREW McDONALD: Similarly for trucks?

Professor GRZEBIETA: And for cars, as they are for trucks, yes, absolutely. They should be introduced.

Dr ANDREW McDONALD: The NRMA gave 19 recommendations for pedestrian safety, none of which involved driver behaviour. Are you able to add to any suggestions to change driver behaviour to reduce pedestrian accidents?

Professor GRZEBIETA: One of them was feedback. Tactile feedback is key. You need to get that feedback. We see attempts made, positive attempts, where we do get signage that is out there: it tells you what speed you are going at and please slow down. Obviously, enforcement is another way. Enforcement has a direct effect. The other way is, of course, the GPS system, which certainly will have an effect. The whole idea is to try and help the driver be within the speed limits. The speed limits are set, mostly set for the reason that it is to do with physics so that you can survive a crash. If you have an error at that speed, if you couple it with some braking, with some avoidance, then you will survive that crash, and the vehicles are designed and built to that particular scenario. But the issue of drivers not being provided enough information is a concern as well.

Dr ANDREW McDONALD: On yesterday's radio—and we all live with shock jocks—the shock jock said he drove at the speed limit around Sydney, on the M5 and M7 at the speed limit, and the traffic just zoomed past him. All Staysafe members are familiar with that. Does Sydney traffic exceed the speed limit more often than it should, from your measurements?

Professor GRZEBIETA: We have not measured any speeds, but having heard what you have just told me, and it is just an opinion, if you have a higher tolerance limit on your speed infringement then people are going to use it; they will travel at the higher speed—whatever speed they can get away with.

Mr GEORGE SOURIS: Ten per cent, to be precise.

Professor GRZEBIETA: That is right.

Mr GEORGE SOURIS: Possibly going over some slightly old ground from this session, you indicated in your submission that there is no evidence for the benefit of school zones in reducing residential speed limits from 60 to 50. But earlier on I think you said there ought to be almost a blanket 40-kilometre imposition on high pedestrian areas. Have I missed something? I am confused.

Professor GRZEBIETA: We were just explaining it, and I will defer in a moment to my colleague Jake Olivier, who has looked through the statistics. We had some evidence from the Department of Health, trainees, who assisted us with this data. What we were trying to do was see if we could distinguish from the current data that we have got when we introduced the 50-kilometre-per-hour speed limit and if there was any evidence of the introduction of the 40-kilometre-per-hour limits at school crossings, whether we could tease that out of the data, and unfortunately the data is not refined enough or there is not enough information in there for us to have been able to tease that out. But what we did find was that there was a halo effect. In other words, by introducing these speed limits people are slowed down and, as a result of that, we are seeing an overall drop in pedestrian injuries. But Jake maybe has a bit more to add to that.

Dr OLIVIER: We found from roughly 1997 to 2006 that pedestrian injuries about halved across New South Wales regardless of age groups. That effect seemed more pronounced amongst children than adults.

CHAIR: What was the base date?

Dr OLIVIER: The base date was 1997 to 2006, so about a 10-year period. We do not have data past that because it is not quite available yet. It is there; we will eventually get it. But it roughly halved and it seemed more pronounced amongst children than older persons and the elderly. When we were analysing the data for young people we tried to identify whether or not an injury occurred on three types of road—State highways, classified roads or unclassified roads. Unclassified roads were where most of the drop from 60 kilometres an hour to 50 kilometres an hour would have occurred. The problem with that kind of data is that there are not a lot of records exactly which roads were affected and which ones were not. But that is sort of a general category that most of those should follow.

The problem with that is starting in the early nineties, as many councils gradually went in that direction, the RTA said, "You can make it 50 initially as long as you make the signs and post them and we will let you do that", and eventually it became more and more of a rule. But that got phased-in very, very gradually. So we do not have a time where it just happened. It is very difficult to find if there was a vast decrease out of that because it was so gradual. The same thing for school zones in that the school zone program was sort of

phased-in gradually in that there were signs and certain things up for a long time and eventually it became more and more strict, more flashing lights, et cetera. So that was also very, very gradual.

So we could not attribute to them exactly the decrease in either of those things, but there was certainly a decrease and something is happening; we just could not say it was that. We also could not say that it was better cars; we could not say it was anything in particular. The only thing we were able to show was that the decrease was much more pronounced for males than females and much more pronounced in urban areas than rural areas, which in some ways makes sense because males in urban areas are much more riskier than other demographic groups. So what has happened is that if there have been any interventions that have worked it has targeted the right population, at least in that 10-year period. It is not quite even amongst boys and girls but that gap has drastically narrowed.

Professor GRZEBIETA: We need to probably just add a little bit more in that we are not sure if it is because parents are possibly driving their kids to school—that is another factor that we could not isolate out of the data. But certainly the young boys, there was a substantial drop. So that was kind of interesting because they tend to be a bit more active, I think, in their youth than girls.

CHAIR: Interestingly, Youthsafe put the same view, that there are more parents driving kids to school and going through their social mores. Thank you for your excellent presentation. It is always good to hear you, as I heard you at the roundtable. Unfortunately we have not got enough time to keep going today. Thank you for coming in. We really appreciate it.

(The witnesses withdrew)

(The Committee adjourned at 4.28 p.m.)
