

Session 6: Highways bodies; Medical; Policing and Justice Policy

Panel 1- Highways Bodies

Witnesses: Graham Dalton, Chief Executive, Highways Agency (GD)
Mike Ashworth, Strategic Director, Derbyshire Council/ADEPT Transport Board (MS)
John Dawson, Advisor, Road Safety Foundation (JD)
Anthony Smith, Chief Executive, Passenger Focus (AS)
Rob Gifford, Safety Adviser, Passenger Focus (RG)

Panel 1 Start:

SG: Good afternoon. Thank you so much for coming. As you gathered, we are taking a sound recording, we will be producing written transcripts in due course. Now, I'm hoping one or two more members of the commission will turn up but we'll make a start because we're constrained for time. It's very kind of all five of you to come along, but it does mean that we'll have to be quite brief in the way we address the issues. Do any of you wish to say anything by way of introduction? Or shall we just start straight away?

SG: Okay, thank you.

SG: Richard, Richard Allsop?

RA: Thank you, chairman. We will want to talk about a lot of things, of course, but our focus is on responsibility for transport safety in the UK. And so to begin with we'd like to ask you all collectively what gaps, what ambiguities, what opportunities for change you see in responsibility for transport safety in the UK?

SG: Anthony, Anthony Smith.

AS: I think, from our perspective as we currently represent Britain's rail passenger and England's bus passengers outside of London, as we move towards a position whereby we might be representing the users of the strategic road network the gap, I think, we might put forward for consideration is how those modes of transport interact with each other. With the safety on the railways and the improvements that have taken place, often the greatest risk now is posed by third parties who are not using the railway but who are on it or driving across it, or whatever. And I suspect the behaviour of others on the roads may have an equally, sort of, unpredictable impact. So I don't know the answer, but I just wonder if that is a gap that is worth considering.

SG: Any other...?

MA: Mike Ashworth. The statutory duty for road safety obviously sits with local authorities, I think there is, in other words to provide road safety measures and education and training and engineering measures, etc. But I think the gap, if I was to put my finger on it, is political leadership. And it's political leadership at the most senior level, at national level. I think there is, seeming to my mind, a lack of real interest in road safety at the very highest level.

SG: You specifically mention that in relation to road safety, rather than transport safety as whole. You think the other modes are –

MA: I think the others, well, I'm not qualified to really speak particularly about aviation and rail. But I think there is a worry from the practitioners and those people in local government that there doesn't seem to be the same sense of direction at national level that we would have liked.

SG: Rob Gifford.

RG: Rob Gifford. I think, I'd like to pick up on something that both Mike and Anthony have said which is that, yes, there is a statutory duty via the 1988 Road Traffic Act on local authorities. And equally, there's a statutory responsibility on the rail industry, via the Health and Safety at Work Act, to get risk as low as reasonably practicable. There isn't an overall duty on government to get risk as low as reasonably practicable within the road safety sector. And I think that picks up the leadership point, and I think it picks up, in my view, is a gap, that overall political responsibility.

[00:35:07]

SG: So there's both a gap in the legislation and in the political leadership?

RG: Yeah.

SG: John Dawson.

JD: I think the first thing to do is to get the numbers on the table. When we talk about transport safety it is overwhelmingly a road safety problem. If you look at the legislative framework for workplace safety, just look at the numbers dying. We've got the whole HSE apparatus and yet more people die on Graham's network every year than die in all workplace crashes put together. And you can add the rail and other modes into that, and you still get this huge disparity. So any proportionate response has actually to say the focus, above all, has to be on getting the roads right and moving that towards zero. The legislative control of road safety is weak, diffuse, and at least 50 to 75 years out of date in comparison with workplace safety, particularly product safety, let alone aviation and marine and rail. The next thing is there is no separation between the responsibilities for providing safe roads and the responsibility for speaking for safe roads. So if you write to the Minister with a problem about safety on the road, the person who is responsible for producing the road will give you the reply, which is a very strange thing to happen if you think about it. Where is the separation you would expect and you get in the other transport modes? So that's basically putting my thing on the table.

SG: Thank you. Graham, do you want to comment on that? Graham Dalton.

GD: Taking the question as posed, focus on the responsibility, I don't see any ambiguity from a roads' perspective of responsibility. I think I'm quite clear as a highway authority, on behalf of the Secretary of State for Transport, what my responsibility is towards road users and towards road workers, no different. The ambiguity is actually between modes, and I think that's in the tolerance of injuries and levels of death, and I think that's the ambiguity, which is probably a social thing as much as anything.

SG: Yeah. I think what you've all said reflects what we've been finding, and I think is a generally held view that we started with a transport safety enquiry, we're driven back all the time to the road situation. So I think we are particularly interested in learning from the other modes of what we should be applying on the road side. Yes, Anthony Smith.

AS: Can I just add something? I think it might be quite interesting to try and understand what the users' view of all this is. Because on the bus and rail side we don't do a lot of work about safety, because before we ask any questions about people's satisfaction we ask them what they'd like to be asked about. And safety never, on rail or bus, comes up as a top of mind issue. The railways are deemed and felt to be very safe, and I think buses it's rather the same. I do wonder what road users might say. I mean, I don't really know. There might be some research but I wonder if they would hold the same opinion, I don't know. We hopefully will find out.

[Laughter]

SG: Perhaps we'll just hold that question, it's a very good question and I would like to come back to it later in the session because we do want to ask you about developing thinking on that. Mike Ashworth, you want to say...?

MA: Just in response to that particular point, at local level and directors being responsible for the highways and transport at county or unity transport authority level, I can assure you there's a lot of

interest in road safety. And there's a lot of interest in road safety amongst the public, and their voice is well heard, so both in local area committees, individual petitions, there is an awful lot of activity going on at the grass roots level about road safety activity, and road safety complaints. So the views of the public are well known at local level.

SG: Yes, good. Rob, briefly.

[00:39:23]

RG: Briefly, actually as a newly elected member of a local authority, rather than Passenger Focus, absolutely Mike, you know, what do we get complaints about as elected members: potholes, road safety and the hole in the road. Just to pick up, however, back to my proper role, for here at any rate, I do wonder, I mean, one of the major contributions in rail safety over the last few years have been through the establishment and work of the Rail Accident Investigation Branch, which parallels marine and aviation. Is it now time for a Road Accident Investigation Branch of the same type? I pose that question.

SG: What's your answer?

RG: Yes.

SG: Do your colleagues have an answer to that question?

JD: I think there's very much a case, if you look at the skills in local authorities, to think about analogies of failing schools, failing hospitals, and so forth, I was really struck doing a BBC documentary going to one of the least safe roads in Britain, how helpless the local authority felt in terms of what its reaction could be to it. I think, you know, there are authorities in this country who are absolutely outstanding, and there are authorities who simply don't get it. And somehow we've got to find this supportive frame, supporting frameworks, particularly since local government reform over the years has made authorities smaller. So it's, you know, it's taking the best of the ADEPT, sort of, practice, and it's actually making that more insistent through a roads inspectorate or an accident investigation branch which is supporting authorities in developing rectification schemes.

SG: Thank you, that's clear.

MA: I would echo that, I think that emphasis is not so much on an investigator, because that sounds as though the issue of road death, the killed and seriously injured on the roads of the country is extremely complex, there's too many of them for individual investigations or collective investigations. But I think there is role for some support and guidance, and maybe peer challenge, on some of the things that are going on. So maybe rather than calling them accident investigators, some sort of peer challenge, independent peer challenge organisation would help.

SG: Jeanne Breen, I think we want to explore the Highways Agency's situation.

JB: Yes, please. To start with, a few questions to the Highways Agency. And starting off, which for me is really the crux of road safety and accountability and focus, talking about long term goals and targets, and I know that there is the future to think about in that regard, but I wonder if you could just run through what long terms goals and targets that you're currently pursuing towards the safe use of the road network by all users? Could you say something about current thinking about what you might do for the future? How is safety performance being assessed at the moment, how might it be assessed in the future? And as well, apart from looking at deaths, serious injuries, social costs, are you looking at targeting and monitoring intermediate outcomes, things like mean speeds, safety rating level of road infrastructure using iRAP or EuroRAP star safety ratings? I'm interested in really where the agency is in terms of its results focus. Is it looking at death and serious injury, is it looking at trying red wall crashes, you know, what is it trying to do?

SG: Graham Dalton.

GD: There were quite a lot of points in that question.

[Laughter]

GD: So I shall be selective on the ones I answer, please come back with the ones I inadvertently miss. Let's start with the road worker community, before we forget them because that's part of the community, I am absolutely clear we have a programme that's aiming for zero, we set that at the agency and the executive team in the agency, we've adopted that as our objective because we don't want anyone killed or hurt when they're working for us. And it is an exposed, a high risk environment, particularly working at night on high speed networks, and often at times when drivers are at their least alert. So we've got an aiming for zero programme and we are working our way through trying to reduce the exposure to road workers, for example from the end of this year we expect to have stopped live crossings of motorway carriageways on foot, which is not prescribed that they have to do it, but the things you have to do to put out temporary signage has necessitated those moves. So that's the approach we're taking on the road worker community.

[00:44:47]

For road user, I'm an executive agency in the Department of Transport, I answer to minister, so I am working to the goals or objectives set for road safety and to make our contribution, because we are part of the safe roads system.

JB: Could you say what they are, because...?

GD: The three bits I tend to think of are engineering the highway, engineering the vehicle, and capability and competence of the driver. And the bit that –

JB: I'm talking about goals and strategic targets, quantitative targets.

GD: The objective I'm working to is a 40% reduction in killed and seriously injured, against a 2005-2009 benchmark, by 2020. And that is something that current projections indicate we will achieve. Now, that's through interventions, some of which we can make, and we can do it by engineering the highway, and by that I include how we operate it. That's interventions that motor manufacturers, vehicle manufacturers make about the protection that their vehicles give to, both, occupants and anyone that they may hit. And it's about driver awareness and driver safety. And for the most recent four years we have focused solely on our own element, which is the highway and operating it, and I anticipate in future years, as we go through the reform programme that's on the cards at the moment for the agency and is subject to legislation being taken through Parliament at the moment, if that is enacted and if there is a strategic highway company, then I expect us to play a more prominent role in influencing the driver behaviour through driver information programmes, and the like, and the contribution that the driver can make. And certainly a bit more about vehicle condition, I think it's limited what we can, in all honesty do, with vehicle manufacturers, and certainly vehicle condition is an issue.

JB: Can I ask, are you thinking for the future to extend your aiming for zero goal for road users in general? You'll be aware that various countries in the European Union, Australasia are doing this. And there has been generally a paradigm shift in the road safety profession towards trying to aim for the more severe end of the injury spectrum in terms of casualty reduction, rather than trying to prevent crashes in general, which has been really the focal point, certainly from the engineering side, in a lot of countries. Is this something –

GD: As a philosophy and as a, you know, management team in the agency, as a philosophy, yeah, clearly we don't want anyone to be hurt whilst using our network. In terms of setting that as formal targets, no, we're not. I'm working to the brief and the specification provided to me by the Department, that is quite a demanding specification anyway, so in terms of being, we've got something ambitious to work for. I think if the reform goes through and we're getting into our first five year period, the sorts of things we would be putting into that is then making the case for an appropriate level of investment. And if we can do something that puts us on a trajectory that says by some date then no one will be hurt or injured, that would be good. But we don't feel that it's, by any means, all within our gift, our control. The fundamental difference between road and other networks

is it's an open access network and I don't vet the competence of the people who use it, or what they turn up with, or the numbers of people who turn up.

SG: Just for clarification, the situation that you describe now is that there's a target or the thing you mentioned set by the Secretary of State which you work to, you didn't set those?

[00:49:04]

GD: At the moment I have, it's not a surprise to us when it comes over the hill, it's a stretch target, so my current performance specification is a stretch target and I'm expecting that to be embodied into the performance specification for the new company. But that is work in progress.

SG: That was my question. So you're expecting one of the specifications in the road investment strategy to be of that nature?

GD: I'm going to quite correctly give you the qualification, it's work in progress, and the Secretary of State will sign it off. But I'm expecting a safety objective in there, and I'm expecting it to be consistent with the 40% reduction by 2020.

SG: And are we expecting, perhaps Anthony Smith might be the person to address this to, a corresponding function to audit and comment on the setting of that target and the meeting of that target in the new regime?

AS: I think, as Graham says, it's, kind of, quite exciting work in progress at the moment, from the drafts that are going backwards and forwards. But it's not something we've discussed, to be honest, chair, we haven't got that far into the detail of this yet. It might well be a very helpful suggestion that you might make that we could have a look at that. But I don't suspect that will be our key area of expertise, to be honest.

SG(?): You've commented on the comparison with other modes and my sense on it, and maybe colleagues too, is that in the rail industry it has been enormously helpful to have independent audit and investigations, as you mentioned earlier. So I suppose the question is whether we should really try and replicate that in the road situation.

AS: I think allowing for the complete difference in the type of network which Graham has identified, you know, the success story of the railways over the last few years does seem to be down to a number of factors. One of which is the audit and the open data which is now available on the whole system, and secondly I think the user pressure has been heightened and, sort of, made more systematic. And I think between those two things it's had a very powerful effect.

SG: John Dawson, you've been in the audit business.

JD: I have. And I think this is a very exciting time, and if I were Graham I wouldn't be lifting my skirt too much at this point because it's a work in progress. But I can say to you that in the last 12 months the staff from the Highways Agency, I've been proud to put them on a stage, where for the previous six or seven years I have not and I've avoided doing so. The level of comprehension is rising extremely quickly in the HA, and this management catalyst is really a once in a generation opportunity. So I have had a problem, and I have taken flak for the Highways Agency on public stages in the last 12 months, simply because I think Graham needs more time, and I think we need to see what's happening. But I'd say this, the safe system philosophy is about shared responsibility, it's good to be looking at what the drivers are doing, it's great that the vehicles are the single greatest contribution to improved road safety in Britain. But the roads are the direct management responsibility of the new government corporation. They need to be explicitly, systematically measured for infrastructure safety in tract, because otherwise what will happen is what many authorities do, they say, "Oh, our crashes are going down." But actually those crashes are going down because the Chancellor's doing badly or well with the economy, the weather. There's this demographic drift on Graham's network, for example, the older drivers avoid it and they're the ones with rising numbers and rising numbers of deaths. There's the take up of telematics insurance in young drivers. There's the vehicle safety which of course is the prime improvement. And if you just track the number of deaths on the

highways network and claim credit for that as a performance, I actually have no idea whether the Highways Agency has done badly or done well because we're not measuring the things under its direct management control, the most important one of which, all TRL research says, is the infrastructure safety.

And every year we publish all these outstanding successes on infrastructure safety where people have just bothered to do something and sometimes don't even know the effect they've had. So a disciplined approach to infrastructure safety by the new government corporation could be a fantastic fillip to everybody. They'll be the market dominant authority in Britain, they'll provide an example for the local authorities across Britain, and better than that, with a couple of market dominant operators in Europe we can talk to the roads industry and the motor industry at a European level to develop some of these technologies which require a brand new co-operation. For example, Sweden has a co-operation agreement between Volvo and its transport authority. Over 40mph, the laws of physics can't be rewritten, high speed roads have got to play their role, so what are motor manufacturers looking to expect from the roads of the future, what are the designers and the vehicle engineers going to be doing, and what are the designers in the roads industries going to be doing? We've got a big way to travel, and the driverless car is just a dream in practical reality, it's decades away, we've got to go through this hard work of doing the Pentium 1, 2 and 3 [laughs] for the next decade.

[00:54:45]

SG: Thanks John, that's helpful. Rob Gifford and then Kate.

RG: Well, I just wanted to make another cross-modal comment, if I may, which is that, I mean, rail has for a number of years, and its credit to RSSB for holding this data, had something known as SMIS, which is the Safety Management Information System. Did I get that right, John?

Not JD ?: You did.

RG: Thank goodness for that, I have to write it down. What SMIS tells you is not just how many people are killed or injured, but also what's happening to the network itself, what's happening to broken rails, for example. Now, Graham's HA holds a lot of data on, for example, burst tyres, which is potentially a security risk. It's the underlying factors that you need to understand. I hesitate to disagree with what I don't think Jeanne meant but what she implied, was you just concentrate on the high end severity and you don't worry about the rest.

JB: Yes, I was saying that.

RG: You were saying that?

JB: Yes.

RG: Well, I am disagreeing with you then. That's always a good move in a select committee equivalent.

[Laughter]

I've done it before and I'll do it again. But you need to know that the network itself is getting safer, underlying risk is being taken out, and I think that's what SMIS helps the rail sector to do, and I think it's what Graham's data could help for the HA.

SG: Do you want to come back on that?

JB: Yes. I mean, I think the, I suppose the international focus on trying to reduce death and serious injury is there. The targeting of the severe end of the injury spectrum has a profound effect on the type of intervention you actually implement. And what results you are going towards is highly important. Is if you're trying to, for example, prevent all crashes you will choose certain interventions which may actually lead to more deaths and serious injuries. And I'm thinking of traffic lights, for example, versus roundabouts is a good example of where you would be wanting to be very clear about what results you're wanting to achieve. You'd choose roundabouts if you were wanting to

reduce death and serious injury. I'm interested where the Highways Agency is going towards that, because I've heard several presentations about focusing on incidents, and such things as burst tyres, etc. But I'm interested to know whether or not, in terms of looking at the underlying factors or contributory factors to death and serious injury, such as speed, such as the quality of street furniture, etc, whether or not you are looking at these intermediate outcomes as an important part of your strategy and an important part of future targeting.

[00:57:35]

GD: Yes.

JB: Great.

[Laughter]

GD: I disagree with John and John's view is to fix the infrastructure, as articulated, and actually making the infrastructure resilient so when things go wrong there's an element of that we need to, but actually I'd rather make sure things don't go wrong in the first place. So when we get far more automation on vehicles we won't need run off protection. So what are we doing? I mean, over the last four years we have done quite a lot less, we've done very little about driver information and driver education for a number of reasons, not least of which was it was a clear brief on our last spending round where I couldn't spend money. So we'll focus on the things we could do. We have put quite a bit of effort into vehicle condition and things like the tyre campaigns, just basic traffic management compliance with red Xs on motorways, installing systems, managing the systems, making the systems more driver friendly and intuitive. So it's things like the queue protection, we get congestion, there's a lot of people using the network so we get queue protection. We're running a programme of pinch point schemes; the brief was to build something like 125 capital investments on small schemes around the network that would improve traffic flow. So we're doing those and they're under the heading of economic improvement and performance improvement, actually a very significant proportion of those bring a safety benefit as well. Because if you're taking out queues, taking out delay, or improving a small piece of network, normally around a junction, up to current standard from whatever it may have been, you get a safety benefit as well.

SG: Mr Dalton, you mentioned in passing there was a matter that you've not been able to do perhaps you would have liked to have done, because of direction from government. Would you see yourself having more freedom under the new regime, assuming that happens, to design your own mix of policies?

GD: I hope that, and I think we will, you know, in 2010 we were under some serious austerity measures, a lot of people across the country were, and I make no apology for doing so. And despite that we have kept a declining rate of killed and seriously injured. So I think, you know, we shouldn't forget that. I would like to get back to a more balanced approach so that I can do things about working with enforcement bodies, so that enforcement is targeted at where it makes a difference. And working with driver and user capability and information so that we are finding a constructive way of getting the message through, and it can be just down to the basics of taking a break, so drivers keeping alert. It can be down to the basics about speed, it's not just blanket speed enforcement, it's about behaviour on speed and speed in traffic flow and likely queuing points. Recognising that it's, you know, it's a sensitive area and, you know, a political lead helps, in a social respect it helps.

SG: I think we have to move on. Kate Carpenter first and then John Abbott.

KC: Yeah, I wanted to drill a bit more into the agency's network, and some of this is relevant to the local authority network as well because there's a bit of an overlap obviously, some of your lower standard roads, you know, single carriageway roads are similar to the local authority roads in form. We know there obviously is a disparity in collisions across the network, there are higher risk locations and lower risk ones, we've got a massive increase in spend in the agency budget in coming years, and at the same time a big increase in other spends, so pressure on other things like developer schemes impact on other things like (inaudible 01:01:48), and so on. And in that, sort of, context in which there's going to be, sort of, opportunities and threats to safety of four areas really. One is how you

bring the safety governance improvements, the safety governance for projects that are coming in recently are, in my view, are a massive improvement in quantifying road worker risk, road user risk, so interested in how those benefits could be rolled out to the wider network with lessons learnt. How small teams within the agency dealing with things like the evaluation of safety impacts for proposed schemes, and so on, how those small teams, because that's not really about budget, that's about staff resources for whom you can't magic up increased budgets, how they'll cope with that increased workload.

[01:02:31]

The third part is whether we think we have enough knowledge, Stuart Lovell gave a great presentation to PACTS recently about, you know, targets and approach, and some of the enforcement issues you've mentioned, like direct enforcement and inappropriate use of (inaudible 01:02:45) and smart motorways. Do we have enough knowledge about the relationship between, for example, geometry and safety performance, because the research in recent years in to things like the man of the streets shows there's a correlation between the apparent level of safety and safety performance. So if it looks low standard and is, it's likely to have a good performance, and in some cases lower standards have better performance, so talking to people in safe roads design teams who are just dealing, do we think you've got enough knowledge for what's quite a big challenge in dealing with delivering a big programme. And the fourth part bit of it is the, as you mentioned about (inaudible 01:03:24), not just setting a speed limit, but the enforcement more widely and the scope for variable speed limits, mandatory variable speed limits on all purpose trunk roads. I know that there's a plan to do that with express roads, but clearly those roads have much higher risk and therefore there would be a bigger benefit in that, so it's interesting how the agency sees those as an opportunity or a threat.

GD: I think you get the high score for the amount in one question.

[Laughs]

Right, Kate, listen, I think I'll try and sweep a few of those together. There's a thing about workload, you're right, a significant increase in capital, capital budget, opportunity for capital investment. One of the important things in the draft legislation would enable us to make investment that's not strictly on our network, so it will help us with some of the interface with local authorities. So at least we don't get things held up because there's no match funding for the other half of the scheme, things like that I think are very small steps which are disproportionately significant. So that would be really good. A big increase in capital funding, not necessarily a big increase resource or OpEx funding, and operational costs and so on come out of that money. So, you know, this is still live and fixing all those budgets is still live. And I, and others, need to continue to make the point that once you've got a thing you need to operate it.

In terms of capacity, I mean, we're doing a lot of refreshing about how we work, I've got quite a dynamic, quite a young team, relatively young team in the agency who are taking a pretty fresh look at what we do, the degree to which we specify things because it's the results we want, rather than being prescriptive about how to do it just because that's how we do it. And we've been very clear on how we use our resource, and we'll test the boundaries a little bit. So I am less concerned about coping with the volume of work in building new, I am optimistic that getting to a proper programme of route based planning and medium to long term planning will enable us to go through and upgrade routes appropriately. Don't expect them to be all badged as safety upgrades, actually if you get a performance upgrade you'd probably get a safety upgrade as well. But performance upgrades comes from vehicles not hitting each other, most of which are bent metal, some of which are hurt people, and very occasionally they kill people. So with performance upgrade we tend to the safety improvement as well. The sorts of innovative stuff I'm actually quite excited about is getting back into some of the design guides and designs standards, yeah, one of the things I want to do is improve cycling safety, not by putting cycle lanes on or off my network, but getting a whole generation of highways engineers retrained and trained in modules for designing for cyclists, pedestrians, in the urban and suburban environment. And frankly, when they and I were at university it was not covered.

- KC: And motorcycling, hopefully.
- GD: Even motorcycling. Although a surprising number of highways engineers ride motorcycles, I'm not sure why. Do we have knowledge against geometry and safety performance? Actually, my answer was going to be slightly different, the bit that I haven't got, I don't employ psychologists and I think I ought to. The experience I have had on going through a smart motorway, developing that whole concept through active traffic management, part time use of a hard shoulder as a running lane, is that drivers did not necessarily get it. Not when it was in use, it was fine when it was in use, it was when it was out of use they still used it. And we've actually got, one of the great things about the network, roads in general and our network in particular, is just how intuitive they are, how we rely on that intuitive response and particularly at times of snap decisions. So, as to the sort of difference I think it ought to make is a little bit of occupational behaviourists or psychologist within my business helping us really get that side of it taken differently.
- [01:08:05]
- GS: That's a very interesting thought. Because of course, if you're interested in aviation safety you do a lot of work of that kind, and train drivers going through red lights, and all that kind of stuff, an interesting gap. Anthony Smith.
- AS: I think, just referring to your first point, chair, about gaps, one thing that is very interesting about the RSSB approach right from the beginning is it's been very much an evidence based body. And I think you had a dowry of some money out of the rail accidents in the '90s and the early '00s which helped in that. But there's been a very clear user input to the setting and calibration of the safety measures on the railway. And I think just echoing Graham's point about psychologists; I think architects always tell that a sign is a failure. Now, on that basis the railways are still failing somewhat because they're not intuitive in the slightest. But I think getting the users involved in the safety discussions is very, very important.
- GS: Interesting point. Now, I'd like to get John Abbott in a second and also to involve the local authorities, but I think Barry Sheerman you want to make a point before that.
- BS: I apologise for fiddling with the volume but I couldn't hear some of the questions and answers. I chaired a committee in this room for about ten years and I know people forget there's a volume, so you can hear a bit better now. But can I ask a broader question? (Inaudible 01:09:33), so apologies to the witnesses. What I was trying to get from what we've heard so far is how, when we think about the culture, the broader direction, and all the time that I've been involved with transport safety I worry about (inaudible 01:09:51), a lively culture means that just that, liveliness. And what worries me is lack of, because of the cuts in local authorities, you know, the interest, the capacity in authorities (inaudible 01:10:06) I see the number of researchers and departments that part of that lively culture. Is that just me or does the culture need attention?
- SG: That is a very broad question. Mike Ashworth.
- MA: I think as far as the culture in local authority is concerned this is still, even though there are less road safety people and people involved in accident investigation, there is a really strong culture of doing the very best they can with the limited resources that they've got. And you've touched on that, and I'd like to, hopefully, to have some opportunity to expand on the problem within local authority. If only we had the same levels of funding that the Highways Agency have got. But I think there is a culture amongst the public that needs addressing, and I don't know, I'm not sure that we've got the complete answer to that because different users have got different types of cultures. You've got the motorcyclists who've got a particular culture, that's the leisure bikers, you've got cyclists and pedestrians, so there's this, and they're all influenced, all those cultures influence the local members, the councillors, the elected members of each council. So it's really trying to influence the overall culture of how people behave on the road is, I think, equally as important as actually all the engineering training and publicity work that goes on.
- BS: All my experience in the education (inaudible 01:11:39) if you're not educating skilled people to come through and work (inaudible 01:11:45), they'll come through universities, work in services, work as

your employees (inaudible 01:11:53). And what I do notice is of centres of excellence, I mean, we always used (01:11:53), but that's what's worrying me in terms of what I call culture.

MA: I agree, that is a real issue for us.

[01:12:10]

SG: Rob Gifford.

RG: I think Mike's answer and your line of question, Barry, are reflecting something that was said earlier about the importance of sharing that practice across the operators, if you like, across the local authorities. I mean, I'm conscious of having worked with a local authorities that, you know, there is a real commitment to road safety within most, I don't think we can say all, local authorities. But probably it's very disparate within those local authorities even. If there's a really powerful Director of Environment and Transport, or Director of Highways, who's had a background in casualty reduction, then it's central to the work of that local authority. And it's central across, both, education and enforcement, sorry, education and engineering, and working with the local rotated partnership in improving enforcement. I'm not sure that's in every, in all our 143 local authorities, and that's where Mike's earlier point and John's point about, you know, sharing what we know works and getting the less good performers up to the level of the good would be a real step forward.

SG: John Abbott.

JA: Yeah, thank you. Actually that was very useful, Rob, because that's the theme I wanted to just pick up on, particularly with Mike, and trying to keep it brief. But in the railways over the last 20 years we have tried to go down the basis of capturing data, evidence, the ability to compare one part of the country with another, important to know the safety of one station to another. It doesn't matter how you draw the comparisons. And then when you've got the data and the information you can start to identify, well, what's working and what isn't in terms of measures and improvements, and so on. And some things don't work so you should stop doing them, some things do. And I wonder what would really help the various different local authorities create a kind of level playing field of understanding, what would benefit you, what would we need to do differently to enable you to make more informed decisions really?

MA: Yeah, it's a very good point. The current situation is, obviously, that there is all the police stats 19 data, we know all about that, that's very well rehearsed and studied by the accident investigation teams. We've got the national comparison site, DFT comparison site which is helpful to actually get some, if you're set up, peer review arrangements, there is that opportunity. I think, I'm, sort of, coming from this at a slight different angle because I, it's not complacency, but I've been really trying to push this across where I've got influence. And I think picking up the point about whether there needs to be an independent investigator, some support on that, I think there'd be some benefits. But I chair a Midlands service improvement group which comprises of 14 county authorities and 8 unitary authorities, and underneath that group there are various task groups. And one of those task groups is accident investigation and traffic and road safety. And they share, because they're talking together, they'd share that localised information and data, and through, you know, just talking to each other it makes a big difference. So if I was going to say what could make a difference is, sort of, echoing that around the rest of the country. So there is this localised... Because what works in Cornwall might not work in Derbyshire, because in Derbyshire we've got a real problem with leisure bikers going through the Peak District, it's not the same maybe in Shropshire necessarily. So there are lessons to be learnt, but there are, sort of, equals around the country. So there's lots of data, there's lots of information out there, but it's intelligent use of it.

SG: Anthony Smith.

AS: I think getting the quality of the input much better must help, obviously. But I think Graham's point about psychology is terribly important because if you look at train crowding, there's now a great emphasis on giving passengers the information so that they make an informed decision that the end carriage is empty, the front one's full. It produces a tiny change in behaviour because most individuals don't behave the way the planners think having been given perfect information about the

market they then react in a completely economic and rational way. They don't, they want to be at the front so they're in the parachute stick at Paddington to get out in two seconds flat. Discuss. People are weird.

[Laughs]

[01:16:49]

AS: We are weird.

MA: Yes, absolutely.

SG: Rob Gifford.

RG: I'm glad Mike's mentioned his Midland service improvement group because I think it's one of the few in the country, and it is a very good group. I've attend it because I did some work for Leicestershire reviewing their service, Leicestershire and Warwickshire reviewing both services. And that group is a very good group. But I think it is not very common around the country, there used to be a south-east one, it's down to individuals and it's down to geography, and it's down to transport links actually, and it doesn't have be real meetings in full time, it can be virtual. But I do think that Mike's absolutely right about sharing that practice around the region is absolutely critical, around the regions is absolutely critical.

SG: So if, as you've both said, it's a successful and productive exercise, it isn't happening everywhere, shouldn't there be some duty or obligation on somebody?

RG: Yes, absolutely.

SG: (Inaudible 01:17:48)

RG: Yes, yes.

SG: And if it can't, if it can't be a minister saying it, how –

RG: How do you make it happen, yeah.

SG: Mike Ashford.

MA: Thank you, Mr Chair. I'll step in ADEPT because my role as the chair of the transport board, I'm newer on the transport board, one of the key things that I've been asked to, one of the priorities for ADEPT, and I think regional sharing of information, regional groups are going to be quite important. Because it's not just, you know, there's lots of other things that we could share information on efficiencies, on procurement processes, in their own safety areas, not just in the (inaudible 01:18:30) maintenance efficiencies programme. But there's all sorts of areas where you could actually share good practice. And I think one of the things that we need to resurrect is the regional interest. But, and I will make this (inaudible 01:18:44), it is the issue of resources. Local governments, the pips are coming out of local government in terms of resources, one-third reduction on revenue budgets across the country, and you can't keep on squeezing those without some effect on resources. And the same for capital, and the capital resources are being squeezed because it's all going to, not all of it, a large proportions of it that would be spent on safety measures are being pushed into the LEP world for regeneration and growth. There's top slicing of what we call our integrated transport block, now is going into the local growth funds for the local enterprise partnerships. And their agenda, unfortunately, is more about jobs, growth and housing, rather than road safety.

SG: Andy Smith and then John Dawson.

AS: A very brief observation, interesting around the country looking at the capacity and capability of local authorities to contract or deal with the bus industries in their areas. And needless to say it varies enormously, you've got a whole spectrum and, you know, we've come the conclusion, well, you're

not sure if that's a postcode lottery or the great side effects of devolution, it could be one or the other. But the funny thing is often it just seems to boil down to the individuals, you get a very capable individual in area who seems to take to themselves the responsibility and they make it happen. And then other areas you don't get these people.

[01:20:18]

SG: So we've pointed out again the difference with many other areas of safety regulation where it is absolute requirement to make things as low risk as reasonably possible, I think that's a statutory duty. What I hear you saying, and I think I agree from what I know, that some places you've got a good individual who makes (inaudible 01:20:41) do some good work here. (Inaudible 01:20:43) so it's not consistent, I suppose, is the weakest way of putting it. John Dawson.

JD: It's about subsidiarity. I think I just wanted, as we haven't really talked about the economics of all this, and I think that was a lovely sort of, entry into this. We talk about this country losing 2% of its GDP in road crashes, and I remember Lord Dubs and I, with the help of the LGA, went round talking to local authorities in groups and asking why, if road safety was of such importance, which it is at an emotional level, why the decisions in terms of resource allocation were taken so differently. And one of the, sort of, consistent responses was that as a cabinet we never receive an economic proposition from the road safety community, it's all cottage industry stuff, it's all about the engineers, we're not quite clear what it is they're trying to do. So there's an enormous scope, I think, in arguing the economic case in each local authority alongside other serious programmes, and making sure they're evaluating them on exactly the same basis, so the rates of return are much more transparent. And this again brings me to my concern, if you like it as a rule of thumb, let's not argue the toss, but let's say a third of the casualty reduction can come from road infrastructure, a third can come from behaviour, and a third can come vehicles. The problem at the moment we have is that if the infrastructure is going backwards because the maintenance standards aren't being adhered to, we will not see that loss, that opportunity cost, actually coming through in the numbers. Because the raw numbers will just say, "Well, the telematics insurance has been brilliant, you know, we've got 30% of young drivers now using telematics units and reducing their crash rates by a third," and so on and so forth. So we just, we need to disaggregate, and this is where my difference with Graham perhaps is. He's being slightly mischievous, I think, in that he has 100% responsibility for the infrastructure in terms of the Highways Agency. But you can do a great deal also influencing the operations, and influencing the vehicle sector and on the behavioural side. But ultimately, you know, in a shared responsibility system, the infrastructure, is something we have to measure as a component explicitly. There should be no two star roads on the national road network, there are. Things like the A21 in Kent, how does that happen? How is it still there in that current state with that kind of crash rate? And if countries like Paraguay can commit to a three star minimum for their infrastructure, I'm sure Britain can. And that needs to be carried forward, but all these other things have to be done as well and we have to prioritise, and the economics is the, if you like, is the clue to how we tackle the problems, the areas where we're going to save the most lives for the money we have available first.

SG: Yeah, and something I've learnt from your work in the past, even before the cuts, the 2010 cuts, there are a lot of small schemes, relatively minor schemes with phenomenal rates of return in terms of safety benefits per pound spent. I suspect the implication of what Mike Ashworth has said is that we'd be less able to deal with those now than we were in the past, and they will remain undealt with. Mr Ashworth.

MA: I think the point I was trying to make about the LEP, the world of local growth funds, there are opportunities, I'm not denying there aren't, for safety to be incorporated in any scheme or transport scheme that's introduced to generate growth. But the overall lot of, I think, and I'm not trying to defend the Department of Transport here, but they have actually contributed most of the money towards the local growth fund. In spite of Michael Heseltine saying there ought to be millions made available, the Department of Transport have had to stump up sums of money to support the local growth fund to pump prime the LEP world really. And local authorities are right in the middle of all this in terms of the world of trying to get local transport boards organised and new schemes, etc. But the issue is clearly there are going to be slightly different agendas, economic growth has been high on the agenda and that's been recognised by the (inaudible 01:25:25).

BS: We shouldn't let John get away with that first part of his thing, not that it's so bad, it was so good. Can I ask, John, is it because, it's a macroeconomic scale, is that because most people out there out real world think as, you know, people would think of bird watchers, a whole bunch of twitchers, we're actually, you know, obsessed with things like safety, and road safety in particular? It's always been the case in the House of Commons, you stand up and become a champion of road safety you're seen as slightly odd. You have a look at those figures and it's 2% of GDP that is a very, very... And perhaps we ought to force our way on to the macro agenda by, you know, I'm thinking of Tony Travers at the London School of Economics and Public Policy Institute looking at this, or IFS, the IFS looking at it. We should get ourselves more on the national agendas.

[01:26:25]

JD: I don't want to lift too many of my skirts from next week either, but the G8 task force on social impact investment is basically focusing on how these blockages, these market failures, where you could do something but you don't have the money because there are institutional problems. I'm working at the moment with the Transport Accident Commission in Victoria, which is one of two places in the world you can go, Iceland being the other, where you have effectively a closed system. So the TAC in Victoria can invest in road safety, and because it pays out the bodily injury claims it has a financial interest in finding out what will reduce its claims. And the point about the social impact initiative, which we'll be talking about in about ten days, is you don't have to reform your institutions if you could find a new financial instrument to link the people who can deliver the saving with the people who are actually going to benefit from the saving. And TAC are doing some very detailed work to work out how their claims records have actually reduced when, for example, they have implemented their safer intersection and safer road sign programme, which is probably about 100 times bigger than this country, to link the reduction in claims after they've done the programme with before so that we have, if you like, some very- I mean, they call it visibility, don't they [laughs], visibility of what the hell is going on in one of the few places in the world you can actually see it.

SG: Rob wants to comment and I'm going to bring in Richard Allsop for our last round of questions in this session. So colleagues please, I'll check whether we've missed anything else out that we wanted to cover in the time. Rob.

RG: If I could extend John's point there, because I think actually we've seen a similar pressure, economic pressure within the insurance industry in this country. You know, what are the big costs to the insurance industry in this country? They are whiplash, and there's been a huge interest in the insurance industry in all those autonomous braking systems that are in cars, because it's stopping the rear end shunt, and it's stopping the pay outs on whiplash. And I think that, that's the kind of leadership that's come through an economic model. We haven't seen a similar leadership on an economic model for the serious and fatal crashes.

SG: Excellent point. And a similar thing with the new forms of motor insurance where you've got the measuring devices which relate the risk to the performance of the car, that insurance companies have developed. Richard Allsop.

RA: Can I come back to you, Mike? You've said a number of things that relate to what I'm just going to ask and perhaps give you an opportunity to draw it together a bit. Thinking of the current capacity of local authorities in relation to their statutory road safety duties and how you therefore have to prioritise the use of the resources you have, I mean, there seem to us to be two very significant differences since 2010. One is the localisation of responsibility for allocation of budgets, and that for some authorities leads into very big changes in the amount allocated to road safety work. And secondly, what you've alluded to at the beginning, although in a more general way, no longer having a national casualty reduction target. And I wonder if you can give us a feel, your feel, for the balance between the effects of these two different but concurrent changes on how you've been able to go about your jobs?

SG: Mike Ashworth.

MA: Thank you. On capacity there is no doubt in my mind that there is an increasing pressure on the resources, and I'm talking about the revenue resources, the staff resources to be able to deliver road safety design, education, training and publicity, there's no doubt about that. If you're taking one-third out of a council's budget on a regular basis you've got to accept there will be less staff delivering the service. The way local authorities are addressing that is to try to integrate the teams into other areas of work. So the one you were talking about, sustainable travel, you're talking about general maintenance of the highway, you'd expect the safety teams to have some input into the design and what comes out of the schemes and what little money we've got. So there is that element of integration. Some may feel that is a weakness, if it's built up in the proper way I think it could be regarded as a strength because it's making an opportunity of different funding streams. Local sustainable transport funds, for example, maintenance funds, if it's done in an integrated way I think there are some benefits to that. But the overall, if you're looking at it from a purist point of view, I think the overall general expertise is drifting away from local government, just purely because of the revenue cuts.

[01:31:54]

In terms of the point you were making about the localisation of budgets, 2010 there was a road safety grant, we all knew where we stood, we knew what we were getting. There was the hypothecation, the issue with safety cameras, but fortunately we're getting back into the position now of, I'll call it hypothecation, but we've the rewards for driver training awareness, and that's really helping. And that's creating almost, in a way, a ring fenced budget for those partnerships, and that's good news, and that can be developed. But going back to the issue that you raised about targets, it's interesting to hear, you know, that one of the objectives of each local authority, those objectives should be very well contained in each authority's local transport plan, so the objectives about safe and efficient use of the highway network. And within the local transport plan there should be clear guidance on what targets are that the authority are setting in terms of casualty reduction targets. We, in Derbyshire, are setting a 50% reduction (inaudible 01:33:02) by 2020. And the issue that you've raised, I think, is the current road safety strategy doesn't have any strict guidance on what targets there ought to be and left it largely to the decision making of each individual council. And going back on this issue that John has raised about ambition, you could almost look at those targets that have been presented in the local transport plans and the casualty reduction targets to see what sorts of ambitions they've got. Because, I think, my view is that there should be no excuse, but every authority should be aiming for the higher (inaudible 01:33:42) that's being announced in the road safety strategy. I think there is merit in having some, going back to my original point about leadership, I think some merit in having a national road safety target, but local accountability. Budgets are so tight that we're going to have to think of innovative ways of using those budgets to implement road safety practice and schemes. But I think there is merit in having a national road safety target.

SG: In summary, am I right to hear you imply that had there been national targets the road safety profession activity within local authorities would have had a stronger negotiating position, shall I put it, for resources than has been the case?

MA: I think it's slightly more than that because we, you recall the days of comprehensive area assessments and the Audit Commission, and there was this accountability in a more strict way. And of course the current government said, "We don't want any of that." So there was that, sort of, lesser accountability to central government. But I think the thing that is probably missing a little bit is the accountability to the general public and how they understand what should be being achieved.

RA: Thank you. I think that advice to us to think about what the pattern of local targets is across the authorities, that's one we'll certainly make a note of that, thank you.

SG: Jeanne Breen, and then we must wind up on the session.

JB: Just to clarify one point about targeting, we know that a large number of deaths and serious injuries occur on quite a small part of the network. And given the tightness of resources it seems to me that there might be effort at targeting high risk, high volume sections of the road network quite

specifically. I'm not clear yet as to how far this has been done, either by the Highways Agency for the roads that it is responsible for, or at local level. Could you say something about that?

SG: Graham Dalton.

GD: Yeah, I think it brings us back quite well. Mr Sheerman talked about the culture, actually the culture is there in the people who work on the network, the people who design vehicles, they all do their bit. But the human nature is to put the effort into the bit you can't control. So the culture is to get it there, the question is about overall ownership. John Dawson has just had another pop at two star roads, I know the A21 down in Kent has got some standard lengths. Most my network is very high condition, I could go and spend millions and millions and millions of capital money on a very small return on the A21 in Kent. I would rather spend a lot less money helping Mike in Derbyshire get at those motorcyclists before they even get off the A38 or the M1, and get them there in a safe condition. What people do they respond to incentives, whether it's a target, targets are difficult, and they innovate and they do great stuff, but there is a big social acceptance, right where we started there was this social acceptance of 12,000 people being killed very year and 8 times that –

[01:37:13]

JB: What I'm trying to say is you've got the network of roads that you're responsible for, you've got data on death and serious injury, you know where in the network these deaths and serious injuries are occurring. And I'm saying from the information that I have that we're looking at a small part of the network which is very amenable to targeting with all sorts of different intervention. And you mentioned the enforcement as well as safety engineering. I still don't know whether or not you're actually doing this, it's not clear. Sorry.

SG: Mr Dawson.

GD: Well, if you take it on national statistic you wouldn't be spending the money on road safety on the strategic –

JB: I'm talking about your network, I'm talking about your network.

GD: If you take the national statistics you wouldn't be spending money road safety on the Highways Agency network. On the Highways Agency's network we do spend the money on the bits that need improving. Frankly, you get capacity, you get performance, incident reduction and safety improvements –

JB: 15% of all deaths occur on your network, 15% of all deaths.

GD: And as a proportion of traffic and proportion per vehicle mile, so we can cut the statistics whichever way we like, we put a lot, a lot of work in to making sure that we operate, maintain and improve the network. And we spend the capital money to the best effect we can. And I keep saying again, I know it's an annoying truth, but if you put money in to make it flow better you actually reduce the incidents, you reduce the injuries, you make it safer. That's what happens. What I would like to do is tackle, John talked about a two star road down in Kent, I've also got vehicles that are sold as five star vehicles and are maintained in two star condition, and I've got drivers who I suspect, in some cases, are not even up to two star, and we need to tackle the lot.

JD: At last, we've got there, we need to tackle the lot.

SG: Mr Ashworth, did you want to comment there?

[Laughter]

GD: Sorry to agree with John.

JD: I was waiting for that last, "We have to tackle the lot."

[Overspeaking]

MA: I was going to answer yes, because accident investigation is a critical part of, you know, the local authority work. There are direct interventions that can be found as a result of the interrogation of the casualty data. We use a mixture, we use a mixture of specific cluster information, and also we use the very helpful information from the Road Safety Foundation on road lengths, in other words, routes and their rating. Historically, and I'm sure John will confirm this, we've always predominantly gone back to the cluster situation and addressed individual locations. But teams are working all over the country in local authorities looking at the data, looking at the stats and our team data, analysing it and coming up with engineering measures or ETP measures that can address that. So, but the issue, I would say, it's resources, that's it.

[01:40:04]

RA:: Thank you, Graham, for reminding us of the scandal of tolerance.

SG: I'm afraid we're going to wind up because we've got another session. But just before we do, I wonder whether any of you would like to offer one recommendation you'd like to see in our report? What would be top of your list? Rob, Rob Gifford.

RG: I think one is, you've got a very good example of a professional body that's doing good stuff in ADEPT here. I'm not sure that TAG, the local authority Technical Advisors' Group or Road Safety Great Britain is at that level of professional skill and competence and ability that ADEPT is. Getting the professional bodies representing road safety to work better together.

SG: Any other want to offer something? Anthony Smith.

AS: Boost the voice of the user in all levels of this debate, including the trade-offs which would need to be made.

SG: Yeah, thank you.

MA: Recognise the resource issue, as we said.

SG: That's Mike Ashworth, thank you.

JD: I'd like to see us follow the Dutch and the New Zealanders, and to have three star minimum national roads and four stars for roads of national significance, as the New Zealanders have adopted, because it's an economic based decision.

SG: Graham Dawson.

GD: I think actually just show rather more effectively the consequences, frankly, not necessarily the numbers killed, but the life-changing consequences of those that are seriously injured. And try and find a way of agglomerating it so we do get some impact, at the moment's too diffuse (01:41:41).

SG(?): Make the public aware of the consequences of this.

GD: Get these people aware.

SG: Thank you, gentlemen, that is very kind of you. If you want to submit information to us at any time we welcome it very much. Thank you.

Panel 2—Medical, Policing and Justice Policy

Witnesses: Dr David Tovey, Editor in Chief of The Cochrane Library, Cochrane Injuries Group
Professor Tim Coats, Chairman, Trauma Audit and Research Network (TARN)
Martin Jones, Deputy Director Sentencing, Criminal Justice Group, Ministry of Justice
Emma Sydenham, London School of Hygiene and Tropical Medicine, Cochrane Injuries Group

Panel 2 start:

[01:45: 105]

SG: Right. Ladies and gentlemen, thank you very much for coming. We're here to learn from you, this is not a select committee; we're not here to catch anybody out. You'll see that we're taking a transcript of this session for our internal use, so be aware of that. Do any of you want to make an introductory statement, or shall we just start in with the questioning? And so we should start with Jeanne Breen. You're on, it's you.

[Laughter]

JB: I thought we were going to have your general –

SG: Oh, I beg your pardon, you're absolutely right, yes, our standard form is to start with a question from Richard Allsop, which is a standard question. Sorry about that.

RA: We weren't clear in our own minds whether we were going to ask you this, but we will. Just to emphasise that our focus is on responsibility of transport safety in the UK. Just to ask you whether you perceive particular gaps or ambiguities or opportunities for improvement in responsibility for transport safety in the UK?

[01:46:14]

SG: Emma (inaudible 01:46:15).

ES: Can I start?

SG: I beg your pardon, Emma Sydenham, I can't read your handwritten thing.

ES: So there is an ambiguity that with increases in travel will mean more injuries due to increased exposure to road danger, but at the population level there will be fewer deaths due to the benefits of exercise. And there is also an ambiguity in that there is shared responsibility of road users, whether they be pedestrians, drivers and cyclists to obey the rules of safety, and also government agencies and the design of the road legislation and enforcement. However, we think that there is a great opportunity to use existing research and to commission new research which can guide policy, which will address all of these areas.

SG: Any others? Dr Tovey.

DT: I should say that I'm, in a sense representing Ian Roberts who's the lead editor of the injuries group. My role is Editor in Chief of Cochrane, so I don't have a particular injuries, traffic brief. So I suppose when I look at this question I think about the gaps and opportunities being in relation to the use of research, and the use of high quality research as exemplified through the example by systematic reviews. So people are very familiar now with the use of systematic reviews for medical interventions for individual patients, you wouldn't expect a drug to come on the market without there being randomised trials for its benefits and harms. And, you know, that is a, sort of, common currency, certainly within the health system. So I suppose the opportunity seems to me is to translate some of that work into other areas, so increasingly in health we're thinking about how we evaluate health systems, interventions, hospital at home, community diabetic care, those sorts of things, and look at high quality evidence for those sorts of interventions, which aren't just an individual patient but maybe aimed at a population. And we're increasingly seeing these sorts of systematic reviews undertaken in areas really quite a long way from health. So thinking about interventions such as transport safety, and the group that I'm here to represent, Cochrane Injuries Group, already has a number of systematic reviews relating to health and safety questions. So that seems to me an opportunity for the evidence to drive the policy, than perhaps the other way around.

SG: That's helpful. Professor Coats.

- TC: So I chair the Trauma Audit Research Network which basically looks at what happens to patients once they get in to the NHS system. And I guess, I'm not an expert on where the responsibility for safety lies, but one thing that always strikes me is the disconnect between transport safety and health. What happens in the hospital has a huge effect on outcomes, the number of patients killed, and so forth. So wherever the responsibility lies, I think that connection with health is an important one.
- SG: Yes. Martin Jones, did you want to comment?
- MJ: Just to say my interest is the criminal law and sentencing, and working for the Ministry of Justice as a civil servant so it's a tricky question for me to answer.
- SG: Understood.
- MJ: However, I guess my key point would be the road traffic legislation is drafted in such a way that there are very severe maximum penalties available for the most serious criminal offences. The whole framework to enable enforcement here, we keep that actively under review, of course, and from time to time we'll change that to ensure it flexes to take account of what is happening out there. And that's something that we will continue to do.
- [01:50:10]
- SG: Thank you. Jeanne Breen.
- JB: I've got two or three general questions. Firstly, do you think that the UK, and Dr Tovey has already said some words about this, but let me broaden it a bit, do you think that the UK in our policy making that we're paying sufficient attention to the evidence base in road safety intervention? And I'm thinking particularly about the current strategic framework in relation to the evidence base, so that's a first general question probably mainly directed at the Cochrane Group. Although there is a supplementary, in a way, for Mr Jones in terms of penalties policy, I mean, there is evidence that increasing penalties, which seems to be quite a popular thing that some petitions do because it's a relatively easy thing for them to do. What evidence are you aware of that increasing penalties deters potential offenders from actually breaking important safety rules?
- SG: Let's come to the penalties question after we've dealt with the first of those.
- JB: Okay. Do you want the third one, or shall I come back to that?
- SG: Let's deal with those.
- JB: Okay, fine.
- SG: Dr Tovey.
- DT: Sorry. It probably isn't for me to answer the question of whether we're doing enough to look at an evidence based approach, and Tim may have different views and a more expert view about that. And I suppose one looks at, say, the range of Cochrane reviews in this area and looks at some things which are clearly effective, street lighting, the number of, that sort of thing, and are clearly in place. Although from the sessions we've been having earlier there clearly is a certain amount of thinking about that and whether street lighting needs to be all done in the same way. But one also looks at some interventions where the evidence is much less clear cut, or maybe even where the evidence rather suggests there are things that are not effective. So we think of some education interventions, for example in terms of, you know, a number of people of my acquaintance have been taken to education schemes in lieu of having points on their licence. Now, as far as I can see the Cochrane review of such schemes suggests that they have limited or rather uncertain effect. Now, I don't know how much those things cost, but in a resource scarce environment one imagines that people would only be offering these schemes if they were found to be cost effective. Maybe the evidence is rather thin for that, and so that would indicate to me that maybe the evidence isn't

uppermost in our thinking. Similarly, road traffic education in schools, for example, seems simply to lead to people trying to get a licence sooner and may lead to more crashes, rather than fewer. So I've no doubt that there are a number of schemes that reflect the evidence very effectively in terms of road traffic control but, you know, clearly that's, from what I see parachuting in to this slightly new is that there are some things that perhaps the evidence base is a lot less weak than the policy would suggest.

SG: It sounds to me, in road safety, a bit like (inaudible 01:54:00) in health that actually I think you're saying there are myths out there which the evidence is clearly able to dispel, and yet we carry on. I think others have said education, the effectiveness of education in road (inaudible 01:54:17) is well known but we still put vast resources into it. And I'm wondering, perhaps it's not for you to say, but why does that gap in (inaudible 01:54:27), which we probably wouldn't tolerate in other areas of medicine?

[01:54:35]

DT: I think it's difficult. I mean, and again Tim probably has a better answer to this than I do, but my sense is that one of the great difficulties in health is when people assume something must be of benefit. So there are a number of health interventions over the last two decades that people have implemented because they seem to make such obvious sense that nobody could think of a reason not to do it. And then when you look at the evidence, and I suppose the obvious example, one of the examples would hormone replacement treatment which I, as a GP, I happily doled out for most of the ten years I was in practice, and the evidence when you look at it is much weaker, or indeed suggests the opposite from what you thought. So I think, one of the suggestions, and I think probably around education type interventions, is people assume what on earth harm could it do, surely it must be a benefit. And actually, the harm is always the fact that it costs something anyway and, you know, people have talked all afternoon about scarce resources, but also, you know, there may be unforeseen consequences that are harmful, such as for some reason people being stimulated to start driving sooner because they've had some education at school, for example. So that would be my best guess, but I think it probably is only a guess.

SG: Professor Coats, did you want to comment?

TC: I think part of it is because the information, the evidence is a little bit disconnected in that the things around the patients, from a health perspective, are not really connected to the things around the incident that led to them becoming patients. I think perhaps, you know, a good example is the trend towards an ageing population and what we're seeing from a health perspective of very many more elderly people being injured in road traffic collisions. Now, what are the particular characteristics that have led to that trend, in the previous session you heard that including psychology in road design would be good, I think actually it's psychology with a particular interest in the psychology of ageing is the piece that's needed in the future. So I don't think, because we can't connect together, we've got very, very rich databases, both around the accident and around the health aspects of the consequences of those incidents, but it's very difficult to mix them together. And there's one project in Cambridgeshire CTARP which is putting together the hospital data, the TARN data, the stats 19, the police, fire service and local authority data. But those sorts of projects are pretty few and far between.

GS: Are colleagues aware of that exercise? Perhaps –

JB: In Cambridge, the Cambridge one?

GS: Yes.

JB: No, I haven't come across that before.

TC: It's small, it's based on one county, it's not a large project but I think it's a very interesting approach of trying to match, when you have no unique identifier that will match a patient from my perspective with someone who's involved in a road traffic collision. There are ways of doing that and I think that's a very interesting approach.

- SG: We might like to follow that up. What's it called?
- TC: CTARP, the Cambridgeshire Trauma Accident and something programme.
- SG: Thank you, that will help us find it. Now, sorry, any other comments on the first question there? Yes, Emma Sydenham.
- ES: Well, I think something that could be improved in this area is that when there is a public policy or a programme which is initiated that is based on evidence that that be more clear. So that the public is aware that the research is being used, and that that the public wants research that they understand why some of these policies are being implemented, they're based on research. Now, there has historically in this country not been as much research in controlled trials in road safety as there have been, say, in other European countries. Where you look at where the evidence comes from in some of the Cochrane reviews, the evidence comes from Europe, from the '60s even, and the data from the UK, there has been more of it since the '80s. And so there's also a changeover time in the development and publication of this research in this country. However, the research is there, much of it is automatically collected and so it is inexpensive to collect, it just needs to be analysed and then used.

[01:59:20]

- SG: Yes. Now, the second question Jeanne put was about sentencing.
- JB: Yes, that was related to evidenced base, really, I mean, just how far does sentencing policy, I suppose, reflect evidence base? And I note that in many countries focus in terms of general enforcement policy, which includes the penalty system obviously, is on deterrents, deterring potential offenders. And I just wondered what your take was on where we are in terms of our knowledge about the relationship between penalties and deterring potentially dangerous behaviour.
- MJ: I think what I would say is that the evidence of the deterrent effect of sentencing is fairly limited. And I guess the best example that I would give around this is actually the abolition of the death penalty, and there was quite a lot of debate in 1965 about if you abolish the death penalty will it sufficiently deter murders? If you look at the figures over a time series, absolutely no difference at all, and the highest murder rate, I think, ever seen in the United Kingdom was in the 19th century when, you know, hangings were routinely taking place. So there's quite a lot more to it than that. I think the main deterrent, in our view, would be being caught, is the reality. So I think it's interesting in the road traffic context, you know, behavioural change, if it's a police car driving along the motorway and how fast the people are going, I think there's an impact there. Speed cameras are the other one, where if people see a speed camera, how does that change their behaviour? There's also some good evidence around the introduction of automatic number plate recognition, so actually things like driving without insurance or driving without tax, actually the chances are you'll get caught much more quickly, and some indications that that's led to a change. I think on driving, I think it's particularly difficult because, as I would describe it, you know, if you set out in the morning and you decided to rob a bank everybody knows that if you get caught having robbed a bank you're going to go to prison for quite a long time, that's what the statistics would tell. I think on driving it is very tricky because, of course, as you set out in the morning, for the overall majority of people they're not thinking that they're going to commit a serious driving offence, they're going to have an accident and something terrible is going to happen, somebody's going to die or get seriously injured. The consequences of that, both in terms of the impact on the victim, you know, tragic consequences, and then of course for the offender the likelihood is and the figures show that, you know, if you cause death by dangerous driving almost every single person who commits that offence is likely to go to prison for quite a long period of time. And that balance is actually quite difficult. So, I mean, over time, I was reflecting this morning that 20 years the maximum penalty for causing death by dangerous driving was just 5 years, it's now 14 years. And again, if you listen to the, people would suggest do we need to go higher again? I guess my view is if you look at that time series again has there been a really serious change in behaviour, about increasing those maximum penalties? Not really.

JB: In the past you've carried out surveys of drivers' perceptions of risk of being caught, so, you know, 1 in 250 drivers think that there's a high chance of getting caught for drink driving, whatever. Are you doing that now? I mean, I note that that work was carried out, when I was aware of it, about 15, 20 years ago, I mean, are you, is that something that you're routinely doing?

MJ: Speaking for myself in the Ministry of Justice, with my responsibility of sentencing, it's not something that I'm actively involved in. However, we're always looking for a range of evidence out there, I suspect it's something, if anybody the Department of Transport, is looking at in terms of the behavioural stuff around that. And certainly we'd be taking account of any evidence that we get through as a result of that.

[02:03:13]

SG: It seems to me that in some areas, perhaps this is to the education point, public attitudes have changed fundamentally, like drink driving is perhaps an example, seat belt wearing maybe as an example. But there are other areas like using mobile, handheld phones or texting whilst driving which the evidence, I think, is absolutely clear is very dangerous, where the enforcement is more or less, it's not non-existent but it's very weak. And I wonder why the system, I'm not blaming you particularly, why the system doesn't do something about it. Where's the failing here, because if the evidence is believed it could save a lot of lives by sorting that out.

MJ: I think there's a really good point there which is, I mean, I can't remember how many years ago now, it was about five years ago, I think, that driving with a mobile phone was made a criminal offence. Before that it was classified as careless driving, and then it was a matter for police discretion, do they pick it up or not? If you look at the figures, actually the number of people prosecuted for the offence of driving with a mobile phone has actually gone up quite significantly, quite surprising numbers. And I'll be very happy to share the latest numbers in relation to the number of convictions for that offence. Once you then get into the really serious stuff, I'm aware of many, many cases in which somebody is convicted of causing death by either careless driving or dangerous driving, and the direct evidence produced in court was they were sending a text message, you know, 90 seconds before the accident, or on the phone. And I do think it is around enforcement and, you know, actually being stopped and saying, "You just can't do that." And very, very, important because it's absolutely clear that the evidence shows that that's a very dangerous activity.

SG: So in that particular instance the indication is that the fault in public policy is the lack of enforcement, the lack of recourses given to enforcing this particular problem?

MJ: I don't think I'd be qualified to, sort of, judge in relation to the front end enforcement of the system. What I would say is that the figures show that a very significant number of those are crossing the front door of the court and being prosecuted.

SG: But not enough.

MJ: Perhaps not.

RA: Well, I mean, there is an intermediate stage, isn't there, between detection and then prosecution, for which offence are you prosecuted. And I mean, the traffic law if you try very hard to redefine the two key offences in such a way that the courts would be, well, the prosecution service and the courts, together, would be more inclined to convict of the higher offence, it has zilch effect. And I don't know whether there's any thought of a having another go at that, is there?

MJ: Well, the Ministry of Justice, I mean, Jeremy Wright went in Parliament in the spring time and the government introduced the new changes to the law in the Criminal Justice and Courts Bill, in particular increasing the maximum penalty for causing death by disqualified driving, following concern about drivers who are repeatedly disqualified from driving, seven, eight, nine times, still driving and then causing an accident. And I saw some sentencing remarks in which the judge said, you know, "Clearly you're a menace on the roads, you know, repeatedly disqualified for careless driving, dangerous driving, and ultimately an accident being inevitable." So we increased the

maximum penalty there. However, the government at the same time indicated it was going to look in particular at the serious driving offences and consider, you know, is that framework working as well as we would like it to. And that's something that we're certainly actively looking at, and we'll be providing recommendations to ministers in relationship to how does the framework work at that very top of the scale. Because, as you've said, you know, we have changed the law a number of times over the last, sort of, five to ten years, and indeed before that. And my own view, having seen a number of these cases, is it's dreadfully difficult stuff, but absolutely right that you ensure the maximum penalties are appropriate and the law is operating in the best way it possibly can.

SG: Thank you. Unless there's some more comment on that from the others, Jeanne, you had a third question.

[02:07:13]

JB: Yes.

SG: And then Kate Carpenter.

JB: And I'm not quite sure whether I'm supposed to be asking this, so forgive me if... [laughs]. But I'll do it anyway. Reducing the consequences of injury following a road collision is clearly an important road safety strategy, and it's great to see, especially in lower, middle income countries and in global plans and in policies of international organisations, that finally being recognised. And in the sense the health and the transport sectors are coming together in strategic ways. And in certain EU countries there have been recent studies, I'm thinking of Sweden and Spain, about different elements of that access to emergency medical systems, the influence of swift emergency medical response, that sort of thing, the things that you can do in terms of the work that you do, identifying specifically improvements in trauma care. I'm interested in your view about what potential you think exists in the UK to reduce the severity of injury in road collisions through further improvements in emergency medical response, further improvements in road trauma care. Has there been recent research, is there a need for a review? Do you have any thoughts?

SG: Professor Coats.

TC: Sorry.

SG: It's just for the record.

TC: Yes. Two points (inaudible 02:08:48), so one, the European aspect, and the other, recent changes in the UK. There is a large natural experiment going on around Europe at the moment as different countries have very different ways of delivering trauma care. There are several trauma registries similar to the UK one around Europe, I chaired a group in Idstein(?) about five or six years ago that has agreed a set of common data definitions for data collection for severe injury. What we are still applying for is the funding to actually be able to put our data together in such a way that we can make meaningful comparisons about patient outcomes and relate those to the way that the patients were treated through the trauma system. So I think you're right, there is a significant potential with all of these different ways of treating patients around Europe to understand more about what is very different, because the Continental method is rather different from the, sort of, UK, USA model and there is not good comparative evidence.

I think the second part is the recent changes in the UK trauma system which have been absolutely profound and had, from our tracking over the last three or four years, a significant improvement in outcomes in terms of reducing mortality. Trauma care has been reorganised into a small number of major trauma centres in the UK, it's been, even in a time of austerity, one of the areas the NHS has been investing a significant amount of money in. And we're the, sort of, independent view to track the effect of that, and that looks like there has been, although we're only three years into the programme, a significant reduction in the number of deaths. Death in hospital from road traffic collisions went down just after the turn of the century, in the early 2000s, it's always difficult to relate that to a particular thing, but it's probably improved access to head injury care, because there were quite large changes in head injury care, and it plateaued through the latter half of the 2000s. But

since the reorganisation and formation of trauma networks and major trauma centres it has gone down again in the last four years. In fact, I think I heard in the previous session one of the targets was a 20% decrease in road mortality for the layout and organisation of highways. If you'd have done nothing to roads health would have achieved that for you. So it is, I think, difficult to have, you know, there is a complex system a patient goes through that those patients, those half of road traffic deaths that get to hospital, there's a complex system they go through, so having mortality as the end point for an intervention in road safety, I think, has a number of difficulties in interpretation, particularly if you don't include changes in health mortality in your analysis of the statistics. And I've seen a lot of analysis from the road safety industry that doesn't include changes in health in their analysis of mortality statistic.

SG: Yes.

[02:12:25]

JB: That's interesting.

SG: That is very interesting, yeah, very helpful.

TC: For example, I mean, there's quite a large piece of analysis on why severe injury is perhaps only going down a little, but killed is going down fairly rapidly. You know, why should that be from a safety perspective? Well, I think that is mainly health in that some of those killed are being prevented, and that's the reason why there's this confusing, from the road safety point of view, difference between long term changes in severe injury and long term changes in killed.

SG: You mean what would have been a death has become a serious injury because of the interventions, yes.

RA: It's a temporary phase, the long term trends in particular remain similar. There was a phase in the 00s when they diverged and have now largely come back together again.

JB: Can I just follow up?

SG: I just wanted to invite the others to comment on that particular point. I think Emma Sydenham may have had something to say. Emma?

ES: Well, I'm just going to say that there are reviews about the effects of individual treatments and also in health systems which are published in the Cochrane library. But I think we also need to be reasonable and expect moderate benefits in future improvements in trauma care and have more reasonable expectations that some of the benefits may be, sort of, in the single digits in terms of percentage benefits, and not very high. So we need to have reasonable expectations of what the benefits may be. And from the issue of targets, and one of the important considerations in people not dying is of them having a long term serious injury, for example a head or a spinal cord injury, which of course has very expensive consequences in terms of treatment. And so the balance of the cost of the interventions which may have prevented the injury with their likely treatment outcomes also needs to be balanced. And this information is available in reviews of research which include cost effectiveness.

JB: Just one, just to finish up on that question, as far as I'm concerned. Just access to the emergency medical system and emergency medical response, Swedish and Spanish research indicates that if you can reduce the time between notification and arrival at a centre for medical assistance, whatever that might be, by so many minutes you're going to, there's a, sort of, dose response thing going on there. Is that anything that you can comment on from the UK point of view as to whether or not our emergency medical response times are generally pretty good, or...?

TC: So there is a balance to strike between the time between injury and getting to hospital, and the time between injury and getting to the right hospital that's able to treat your injuries. So the reorganisation of trauma care in the UK that's taken place over the last three or four years includes a large element of bypass of a local hospital to get to a major trauma centre. So, if anything, in the UK what we've

been doing is increasing our times between accident and arrival in hospital, but once you get there all the right stuff gets done. In the past what's happened is you've gone to the nearest hospital, you've got to hospital quickly but then you've got to have a transfer to the right hospital. So there is a complex balance, at the moment in the UK we use a 45 minute bypass time, if it's going to take you more than 45 minutes to get the specialist hospital you go to the local hospital for some stabilisation first. And there is a very active discussion around whether 45 minutes is right, the evidence around 45 minutes is mainly expert view, rather than anything more substantial.

JB: Do you think that this area deserves further work?

[02:17:16]

TC: I think it's a very active area of discussion and it is an important part of the future way that patients will flow through our trauma system. And is an important part of questions like how many major trauma centres does the NHS need and where does it need them?

SG: That also must extend to the disposition of the emergency services themselves, as the time before the occurred, between the incident and first –

TC: So there's two times, one is ambulance getting to the incident, and the other is once you get there, getting to the hospital. There is not as good evidence as perhaps we would like about whether getting there in five minutes rather than eight minutes actually makes a difference. Again, that's mainly based on expert opinion of the sorts of times that people take to deteriorate after a severe injury.

SG: That is interesting. And Dr Tovey on this.

DT: I mean, I was interested in this conversation because I've been, over the last few weeks, trying to read and understand a system at the Cochrane (inaudible 02:18:29) review of helicopter services against ground based emergency medical services. And it's a jolly hard review to, you know, make strong interpretation of and recommendation of. But it's written by a group of US based trauma experts and it looks at 25 studies, and you'd think on the basis of 25 studies you would be able to be quite conclusive. But it turns out that that it's fantastically, it's more complicated, and I guess it's obvious to people in the field but, you know, the difference between the study was in an urban area or rural area, what was the nature of the injury and what was the severity of the injury, and who was in the helicopter and what equipment did they have, and all those things seem to make a difference. And so, you know, in fact, always disappointingly it's hard to reach any firm conclusions from the review, despite this, you know, reasonable level of not very good quality evidence. But, you know, it would be easy to raise hypotheses on the basis of it and, you know, you might speculate that helicopters have a place in specific situations perhaps, you know, more in rural than in urban, where the transfer distance is longer, where people are more severely ill. When you're transferring between units it seemed to me that the evidence was slightly more compelling of some benefit. But I'm afraid at the moment I think we're at the hypotheses generation stage, not the, sort of, formal conclusion stage, and that's one of the frustrations of evidences sometimes. I think we've raised a number of questions that hopefully will be answered over the next few years.

SG: Professor Coat?

TC: Ian Roberts, who I think was going to be here, has a very nice slide of the proportion of funding for clinical research that goes into different areas. And on the slide you can't actually see the bar on the pre-hospital care funding because it's so small compared with other areas.

SG: Certainly the possibility is, you know, shifting a little bit of money from other bars into this might produce a very high return, if we can stack the evidence up.

TC: I think it's quite a high cost activity for the NHS, it's often having better evidence to spend, whether or not we're spending that money in the most effective way I think would be a good thing. You know,

I'm not going to, I don't think I can commit about whether, you know, that would actually, you know, greatly improve outcomes. But it's an area of high spend for the NHS where better evidence would allow us perhaps to better target the funding.

SG: Thank you, that's very clear. Kate Carpenter, did we cover the question you were going to ask, did Jeanne cover it before?

KC: I think (inaudible 02:21:24). Two things we've been (inaudible 02:21:27) in previous sessions, one is how good is the feedback, are lessons learnt, are we seeing the data trail leading to improvement, are the people finding out the causes (inaudible 02:21:39), road designers, other organisations. So interested in whether there's any, sort of, particular feelings on that. The other is the prevention aspect and the public health aspect, in the very first session we looked in some detail at the public (inaudible 02:21:56). Do we have enough evidence about the prevention aspect of harm? And that might be, you know, driving licences, (inaudible 02:22:11) do we have enough information of that side of the picture?

[02:22:19]

SG: Anybody want to comment on that?

ES: I'd say we do have enough information when it comes to certain questions. So, for example, we can say with some certainty that post-licence driver education, so driver retraining programmes, which Dr Tovey mentioned, there's a review which includes 300,000 people and finds that there is certainty of no effect. And so, as Dr Tovey mentioned, maybe it should be considered what the cost of this programme and maybe that should be reconsidered. There is good evidence for graduated driver licencing, there was a review up to date 2009 including 34 studies which showed that, for example, among 16 year old drivers the median decrease in per population adjusted overall crash rates during the first year after licencing was 15%, with a range between 27% and 6% reduction in injuries. Maybe that is something that should be considered, likewise efforts in reducing drink driving. And also the use of speed cameras, there is good evidence that they are effective in reducing speeds, there's a reduction in the proportion of speeding between 14% and 65%. Now, in that review the range of the magnitude of effect was large. However, if there was more research then the magnitude of effect could be clarified, however there is good evidence from 35 studies that it does reduce speed, so that is good evidence.

SG: I think David Davies had a question you wanted to put.

DD: If I could follow up with Professor Coats, I mean, Marilyn Woolf is your colleague, has been very helpful towards PACTS and gave a marvellous lecture at our conference last year about the impact of improved trauma care on reducing road casualties. We've been trying to work towards a number, which you were alluding to, about the quantitative impact, how much of the reduction in road deaths of the last whatever period you were to choose, ten years, can be attributed to improved trauma care. Because I think, as you say, you know, road safety professionals sometimes ignore that from the equation and it would be really useful to know how much can be attributed, you know, to that side of the equation, and whether we're near to a figure?

TC: Trouble is, ask an academic about (inaudible 02:25:55) you're going to get a very highly qualified answer. Yes, it is, as a rule of thumb, half of the deaths are pre-hospital deaths which health are not going to do anything about. Of the, approximately, half the patients that get to hospital or get to hospital and don't die very soon, because I think the patients that die very soon in hospital put in to the, sort of, same category as the pre-hospital deaths. In the last, since 2000 the mortality in those patients, when adjusted for injury severity, the ratio is about 0.5, something like that. So, but that is adjusted for injury severity, so your chances of dying are about half when you've adjusted for injury severity. What does that mean? I guess what you're asking about is what are the unadjusted figures for absolute numbers, and that is, the ratio is about 0.8, something like that, so perhaps, say, a 20% reduction which would roughly be a 10% to 15% reduction in the overall number of road deaths. That is a back of the envelope answer for the last 14 years or so, and I'm sure that could be something that if a harder figure was useful to the committee we could work at looking at putting some estimates there that weren't just me making something up on the back of an envelope.

SG: Okay.

RA(?): So 14 years, or 40 years?

TC: 14, since 2000.

JB: That would be really helpful.

SG: Yes, so it would be helpful, thank you. Look, we're coming to the end of the time we have, I just have one question, perhaps colleagues will check for other things we just need to pick up.

[02:27:54]

RA: The victim question.

SG: Yes, okay, well, you do that one.

RA: So, Martin, we've already, I think, covered enough of the question of the driving offences and all the related things. But, we have had put to us the fact that the situation of a victim of traffic crime, in terms of support in various ways and compensation, is not the same as a victim of some other kinds of severe crime. Now, we recognise of course that by no means all road casualties are victims of traffic crime because it's possible for someone to be killed or injured on the roads without a crime having been committed. But for those where crime has been committed can you tell us anything about, has any thought been given to whether those victims could be, their associates and so on, could be brought fully within the remit of the provision for victims of other violent crimes and similar?

MJ: I think what I would say, I'm the Deputy Director responsible for sentencing, but I know the position in relation to victims, perhaps I can talk about that, but come back to the commission if there's anything I want to add to that. But my understanding is there is a homicide scheme that is established to support families where there's been a murder or a manslaughter case. And the question that I first asked is why doesn't somebody who's had their, you know, wife or children be killed by dangerous driving, why aren't they entitled to the same scheme? They're not, it's not currently within scope and there are certain parts of that scheme which wouldn't apply for those sorts of cases. However, if you've been the victim of, you know, losing somebody through causing death by dangerous driving you would be entitled to support that is very close and very equivalent to the kinds of thing that you would get under the national homicide. So certainly the victim support services that come in place can be called in once you're into that sort of situation. Of course when you go court, again, the witness service that's in place right across the courts in England and Wales will again support the families, you know, you are a victim of crime in the same way as somebody who's been a victim of a burglary or any other, sort of, serious case. So that sort of support would still be in place for you.

RA: Yes. Well, thank you. I think we might need to follow up with a written question on that, mightn't we, because representations to us from the victim groups don't give that picture. That may be that they are not aware, of course, of the position. But we may need to get you and your colleagues to clarify that outside this session, please.

SG: Professor Coats.

TC: Just a quite thought, we get a lot of statistics in health about the victims of road traffic incidents but perhaps you'd get a, and a lot of our, perhaps, prevention is based on victims. But if you do a culpability analysis of incidents those that are responsible for causing the incidents may have a different spectrum of demographics than those that were actually the victims. And we have a lot of information about the victims, but perhaps, in a way, that sort of culpability analysis, and there's some signal from the Cambridgeshire project that, you know, for example, if you look at those that are culpable for the incidents they are older. And it tends to be younger people, less experienced drivers that are injured, perhaps because they're unable to avoid the incident. So some of our assumptions, I think, might be challenged if we look at culpability as well as just the victim.

SG: Well, that's a very interesting observation to end on. Unless there's anything pressing we've missed? End it there. Thank you so much for your help.

[End of Transcript]