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BITRE Road Trauma Review
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Submission to Bureau of Infrastructure, Transport and Regional Economics (BITRE) regarding Impact of road trauma and measures to improve outcomes [draft report, November 2014]

St John Ambulance Australia thanks BITRE for the opportunity to provide input into the *Impact of road trauma and measures to improve outcomes* [draft report].

St John commends BITRE on the draft report and the measures to improve outcomes contained therein. St John recognises however, that despite many new technologies targeted at preventing accidents from occurring and education campaigns to deter hazards such as driver distraction, road accidents remain an unfortunate reality now and into the future. As such, St John remains concerned that **there is still no initiative to prevent the loss of life and serious injury between when an accident occurs and the arrival of emergency services**. Current road safety initiatives do not prepare road users to act to save lives and reduce injury *during* an emergency—first aid does.

Road traffic accidents are an important public health issue that require prevention initiatives as well as a post-crash management approach. First aid is a vital initial step in the provision of effective post-crash management care and is crucial for limiting the consequences of an accident to the casualty.¹

Research suggests that there is a 'golden hour' following a road traffic accident whereby victims stand a greater chance of survival and injury reduction if first aid is applied while waiting for the emergency services to arrive.² A 2012 study conducted in Iraq found that the mortality rate from injuries sustained in traffic accidents is significantly lower when first aid techniques are applied at the earliest opportunity.³

The first 3–5 minutes following a road traffic accident are crucial.² For example, it is estimated to take only 4 minutes for a victim of a road traffic accident to die from a blocked airway (anoxia) if no treatment is provided. Up to 85% of preventable pre-hospital deaths may be due to a blocked airway (anoxia).⁴ Often, if death is to be prevented, it is by bystanders or others involved in road traffic accidents taking a very simple action to ensure the victim's airway is clear or assisting in preventing uncontrolled bleeding.⁵

Additionally, research demonstrates that once a person has undergone first aid training, their willingness and confidence to assist at the scene of an accident increases.^{6,7,8} Research has also suggested that first aid training may impact driver behaviour, with participants less likely to take risks.^{6,7,8}

With the Australian Institute of Health and Welfare reporting response times for an ambulance ranging between 14.8 to 22.5 minutes across the nation in 2014, bystanders may be the only hope for a casualty in the prevention of death or lessening the effect of serious injury.⁹ Response times may be further exacerbated for regional and remote, and outlying urban areas.

Driver training and license renewal require fundamental reform if lives are to be saved. This concept is not new. The European Union, through its Directive 2000/56/EC, required all member countries by 1 October 2003 to ensure applicants for learner driver licences had basic first aid knowledge.¹⁰ To date Austria, Bosnia and Herzegovina, Estonia, Germany, Hungary Latvia, Lithuania, Slovakia and Switzerland require the possession of a first aid certificate before a driver's licence is granted.¹¹ Additionally, United Nations resolution adopted by the General Assembly on 10 April 2014, Improving Global Road Safety (A/Res/68/269) encourages Member States to implement comprehensive policies on post-crash care (and to consider enacting legislation to protect legally bystanders who in good faith provide care to those injured in a crash).¹² This initiative is part of the Decade of Action on Improving Global Road Safety. It is important that Australia also act on this important resolution.

Any person can provide assistance at a road traffic accident. However, the better skilled in first aid the bystander is, the more effective the intervention. Basic first aid awareness in the Australian driver community could be easily achieved via online training, such as the St John Ambulance (Western Australia) *Click to Save* (www.clicktosave.com.au) and the St John Ambulance (Northern Territory) *First@Scene* (www.firstatscene.com.au) initiatives. These e-learning initiatives are developed at relatively low cost, are simple to administer, can be administered en-mass and have the potential to reduce injury and save lives on Australian roads.

During an emergency, basic first aid awareness can mean the difference between life and death and can be the one thing to lessen the degree of serious injury a casualty experiences.⁵ St John Ambulance Australia urges BITRE to consider mandatory first aid learning for road users as a measure for decreasing fatalities and serious injury on Australian Roads.

Yours sincerely,



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¹ International Federation of Red Cross and Red Crescent Societies. First aid for a safer future: Focus on Europe, September 2009. Retrieved from <https://www.ifrc.org/PageFiles/53459/First%20aid%20for%20a%20safer%20future%20Focus%20on%20Europe%20Advocacy%20report%202009.pdf?epslanguage=en>

² British Red Cross. Anyone can save a life: Road accidents and first aid. London, 2001.

³ Murad, M, Larsen, S, Husam, H. Prehospital trauma care reduces mortality. Ten year results from a time-cohort trauma audit study in Iraq. *Scandinavian Journal of Trauma, Resuscitation & Emergency Medicine* 2012, 20:13 doi doi:10.1186/1757-7241-20-13. Retrieved from <http://www.sitre.com/content/20/1/13/>

⁴ Hussain, L, Redmond, A. Are pre-hospital deaths from accidental injury preventable? *British Medical Journal* 1994, 308, 1077-80.

⁵ World Health Organisation. World report on road traffic injury prevention: summary. Geneva, 2004.

⁶ Arbon, P. The role of bystander first aid in road trauma. *Journal of the Australasian College of Road Safety*, 2008, 19(3), 21-24.

⁷ Larsson, E, Martensson, N & Alexanderson, K. First-aid training and bystander actions at traffic crashes: A population study, *Prehospital and Disaster Medicine*. 2002, 17(3), 134-41.

⁸ Mauritz, W, Pelinka, L, Kaff, A, Segall, G, Fridrich, P. First aid measures provided by bystanders at the accident site. A prospective epidemiological study in the area of Vienna, *Weiner Klinische Wochenschrift*, 2003, 115, 698-704.

⁹ Australian Institute of Health and Welfare, 2014. Australia's health 2014. Australia's health series no. 14. Cat. no. AUS 178. Canberra: AIHW. Retrieved from <http://www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129547783>

¹⁰ <http://www.grsproadsafety.org/our-knowledge/first-aid>

¹¹ Adelborg K, Thim T, Secher N, Lerkevang Grove E, Løfgren B. Benefits and shortcomings of mandatory first aid and basic life support courses for learner drivers. *Resuscitation* 2011;81:614-17. Elsevier, UK.

¹² http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/68/269&referer=http://www.un.org/en/ga/68/resolutions.shtml&Lang=E