

ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

Patron: H.R.H. The Prince of Wales



Fellowship and Standards/Fellowship Services

Telephone: +61 3 9276 7448

Facsimile: +61 3 9276 7432

8 January 2016

Committee Secretary
Senate Rural and Regional Affairs and Transport References Committee
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Sir/Madam

Inquiry into aspects of road safety in Australia

At the advice of the Chair of the Senate Rural and Regional Affairs and Transport References Committee, Senator Glenn Sterle, the Royal Australasian College of Surgeons (RACS) is pleased to provide a supplementary submission to its earlier advice to the Inquiry (Submission Number 11) which was lodged in February 2015.

Many people and organisations involved with road safety have a shared vision to reduce trauma from crashes on Australian roads. The National Road Safety Strategy 2011-2020, unanimously agreed to by all state and territory Transport and Infrastructure ministers, set a target to reduce both deaths and serious injuries by at least 30 per cent by 2020.¹

To date, Australia has no national measurement of the number of serious injuries due to road crashes, and this is a major gap in efforts to improve road safety. Without statistics to quantify the trends in the number of serious injuries from road crashes, it is not possible to determine whether:

1. Road safety actions are effective in reducing serious injury.
2. Some states and territories are having better outcomes than others.
3. There is variability in trauma care services, and if this impacts on patient outcomes.

The National Road Safety Action Plan 2015-2017 has identified this problem, and includes a task to match crash and hospital databases to improve measurement of non-fatal crashes. However, this is a two-year pilot study, which has only recently commenced and the future deployment of its findings are uncertain.

A recently-released Austroads report shows that the NSW Government is paying a high cost to manage seriously injured road traffic collision survivors.² Fatalities are decreasing but serious injuries are on the rise. The average in-hospital cost of treating an individual with injuries sustained in a car crash in NSW is \$22,380. The ongoing cost can be substantial. A media report from September indicated that 30 people are hospitalised with serious injuries from car crashes every day in NSW, costing taxpayers around \$3.4b annually.³

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The Australian Trauma Registry collates data from 27 designated trauma centres across Australia, and published its inaugural report in 2014, containing data from 2010 to 2012.⁴ The Registry includes information on trauma cases arising from a variety of mechanisms including transport, falls, fire, suffocation and drowning. The report found that 20,435 patients with an Injury Severity Score greater than 12 (patients with a severe and often lifelong injury) were admitted and treated over three years. Transport was the major mechanism of injury (52%) and the median unadjusted length of stay in intensive care units was four days, although there were varied outcomes depending on where patients were treated.

The Registry could be linked to existing trauma, cost, and ambulance data registries, and can offer uniquely clinically relevant information as well as linked outcomes beyond mortality, which existing datasets may not. The Registry has gone beyond the feasibility stage, already has a good track record with broad acceptance, and has contracts in place with the 27 trauma centres.

Managed by the National Trauma Research Institute (NTRI), the Registry is a partnership of The Alfred and Monash University, based in Melbourne. It is potentially an incredibly valuable source of information on trauma resulting from road transport crashes, capable of guiding policies and actions to reduce serious injuries from road crashes, and informing the National Road Safety Strategy 2011-2020, which currently possesses no metric regarding serious injury.

National trauma registries are in place in the United States, United Kingdom (funded by the National Health Service) and Canada. The NTRI has received funding from the Australian Government to assist Saudi Arabia, India and China to advise, build and manage their national trauma registries, yet seed funding provided by the National Critical Care and Trauma Response Centre and Alfred Health in 2010 for the Australian Trauma Registry has now been expended.

To continue its work, the Registry requires funding support of \$150,000 per year for three years. In addition to this required funding, the NTRI and Monash University are willing to provide an in-kind contribution of up to \$100,000 for administrative and overhead costs.

Funding the Registry would provide governments and policy makers with:

- Relevant information on serious injuries from road crashes.
- Identification of sub-groups of patients and areas of trauma care that may require focused attention.
- A better understanding of variability in trauma care, and options to use the practices of the best performers in other centres across Australia.
- The ability to develop and validate measures of trauma performance and cost, and improve efficiency.

RACS, with the support of the Australian Automobile Association, recommends that the Commonwealth support the Registry by providing \$450,000 for a three-year period to allow the establishment of private and public partnership.

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Yours sincerely,

Professor David Watters, OBE FRACS
President

John A Crozier AM CSM, FRACS
Chair, Trauma Committee

Cc The Hon. Sussan Ley MP, Minister for Health
 Prof Julian Smith, Chair, Professional Standards & Development Board, RACS
 Assoc Prof David Hillis, CEO RACS
 Mr John Biviano, Director, Fellowship & Standards, RACS
 Mrs Deborah Jenkins, Director, Relationships & Advocacy, RACS

¹ Australian Transport Council. National Road Safety Strategy 2011–2020. Canberra: Australian Government; 2011.

² Hatfield J, Friswell R, Williamson A. Road Crash Injuries: Cost and Prevention. Sydney: Austroads Ltd.; 2015.

³ O'Rourke J. Crash and learn: Bold plan to reduce the shocking \$3.4b cost of accidents on NSW roads. Daily Telegraph. 21 Sep 2015. p15.

⁴ Australian Trauma Quality Improvement Program. Caring for the Severely Injured in Australia: Inaugural Report of the Australian Trauma Registry. Melbourne, Victoria: Alfred Health; 2014. Available from: <http://ntri.org.au/img/aust-trauma-registry-inaugural-report.pdf>. Accessed 11 Dec 2015.