

From: John Crozier
Sent: Tuesday, 12 November 2024 3:10 PM
To: Portfolio Committee 6
Subject: RE: Inquiry into the use of e-scooters, e-bikes and related mobility options - post-hearing responses - 30 October 2024
Attachments: Transcript (1) - CROZIER CORRECTED - E-bikes - 30 October 2024.pdf; Draft-key-e-scooter-rules-October-2024.pdf

with a significant injury score—is also submitted to the State Trauma Registry, which is maintained by the Institute of Trauma and Injury Management, which works within the ACI.

JOHN CROZIER: If I could just augment—in this jurisdiction in the last 12 months there were 53 fatalities on bicycles. **Accurate transcription**

The CHAIR: In the last 12 months in New South Wales? **Factually incorrect - should be 5 years**

JOHN CROZIER: In the last 12 months in New South Wales. This is data from Bernard Carlon, Transport for NSW, presented yesterday at a meeting with the Institute of Trauma and Injury Management, at which I was a participant. I do commend Hardeep Singh, who has collated work on behalf of the State that does show an almost exponentially rising trend in e-mobility related injury in the State, with peaks at the end of the year—exactly the time of the year when a range of gifts are being given—and more recently these will include electric motorised devices. Against that background of 53 fatalities of the cyclists and 9,536 hospitalisations of cycle-related injuries, where it's not clear how many of these are with an electric motor as a component of the bike or whether it's a conventional bike—because coding is actually very problematic in this very rapidly evolving space.

I want to contrast that fatality rate with the pedestrian burden. In the last 12 months in New South Wales, there were 231 pedestrian fatalities—four times the number of fatalities as a pedestrian in New South Wales than was the case on bicycles. There were 4,700 pedestrians hospitalised in New South Wales, with injuries often requiring prolonged hospitalisations, a number of surgical procedures and, frequently, rehabilitation prolonged for years and years afterwards. That is especially the case when a brain injury is involved. Already, we've got a significant and growing burden in the hospitals.

The difficulty with coding is a very, very key problem. I know that in Liverpool Hospital, where I work, we've been using artificial intelligence to drill through the plain text fields entered in the emergency department. We have found that to be a much better way of identifying the probability that somebody has presented to the

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I have attached the Draft Road Rules as requested by the Chair in close comments to me

Yours sincerely

John

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Committed to Indigenous health

RACS acknowledges the Traditional Owners of country throughout Australia and recognises their continuing connection to land, waters and community.