From: roadsafetystrategy@infrastructure.gov.au on behalf of Office of Road Safety

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Sent: Tuesday, 9 March 2021 1:56 PM

To: RoadSafetyStrategy

Subject: National Road Safety Strategy 2021-30 - have your say submission - John

Gillett [SEC=OFFICIAL]

Attachments: eth_apphuman_negligible-lowrisk_20190829-(1jl.doc

Submitted on Tue, 2021-03-09 13:54

Submitted values are:

Name

John Gillett

Organisation

Self/RACP

Email

State

Qld

Which area/s of the draft Strategy are you commenting on (select all that apply):

Targets for reducing deaths and serious injuries, The social model, Remote areas, Vulnerable road users, Risky road use

What is your primary area of interest in road safety?

I am a Regional Palliative Medicine Physician having come from a background of Rural Medicine. As a rural doctor, I was involved in all areas of road safety/survival ie Licence Medicals, Disease assessment, Drug Driving assessment, BACs, Road Trauma, Medivacs and Autopsies.

What road safety issues are the most important to address?

Opioids are thought to contribute 3-7% to road trauma morbidity and mortality. Many Palliative Care patients are still capable of driving yet take Opioids and other medications which can impair driving ability. The current guidelines are quite vague on this issue as is the academic literature. This area needs further definitive research. I am currently involved in a small research project on this aspect of road safety.

What do you believe are the strengths of this draft Strategy?

Apart from little mention of drugs both prescribed and illicit, the report coverage is quite comprehensive.

Is there anything important that you think is missing from this draft Strategy?

Two areas stand out as being overlooked. Firstly the effect of drugs apart from alcohol on road safety. In my own specific area of Opioids it is thought that patients on stable doses are possibly/probably safe to drive. This is not clear and needs further research.

In education for remote doctors further study on prevention of Motor Vehicle Crashes (MVCs) through education on topics such as licence medicals is not funded yet education on trauma treatment after a MVC is highly funded. It seems 'Preventative' funding lacks the glamour of post crash trauma funding.

Do you give permission for your submission to be published on this website following the end of the consultation period?

. Yes