

Public Health Intervention Guidance

Preventing unintentional road injuries among under 15s – road design–Consultation on Evidence– Stakeholder Response Table 30th June – 28th July 2009

Stakeholder Organisation	Evidence submitted	Document Name	Section	Page No.	Comments Please insert each new comment in a new row	Response Please respond to each comment
Dept for Transport					Please consider attached draft review of 20 mph zones in Portsmouth. Document to be published Sept 09	Thank you. The document unfortunately does not present any data on the age of casualties and so has not been included in the review.
Liverpool PCT		review of effectiveness and cost effectiveness main report	General		The inclusion/ exclusion criteria may bias the findings of this report. By excluding studies that do not separately report injury outcomes for children a number of studies are excluded that do show evidence for the effectiveness of traffic calming. It seems inappropriate to divide the data in this way as a pedestrian is a pedestrian: traffic calming measures that reduce the speed of vehicles will do this for pedestrian road users irrespective of their age.	The inclusion/exclusion criteria were designed to ensure that the studies considered whether there is a benefit to the target population which is the focus of this guidance. The review includes studies which report on children where the age range extends beyond 0-15 years. The benefits to other populations were considered by PHIAAC when developing the draft guidance.
Liverpool PCT		“			It's likely that the studies that are then left, after stratifying the data do not reach statistical significance because the numbers are small. This implies that traffic calming measures are not significantly effective – there is evidence to indicate otherwise.	The evidence includes a number of studies that do reach statistical significance. In addition, it is important to take account of the trend in studies that do not reach significance rather than to rely solely on statistical significance. These issues were considered by PHIAAC when developing the draft guidance
Liverpool PCT		“			The Department for Transport's road safety strategy clearly recommends evidence based traffic calming, particularly with regards to children “some measures, such as traffic calming, produce greater than average benefits for children”. <i>Tomorrow's Roads: Safer For Everyone</i> , chapter 2.	Thank you for highlighting this.
Liverpool PCT		“			Evidence from Liverpool Unintentional Injury Prevention Audit on Traffic calming measures including: speed humps, road narrowings, 20mph zones, road closures and speed cushions shows	Thank you for this quote from the Liverpool review. The reviews carried out for this guidance looked for primary studies and was not a review of reviews (such as Morrison et

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					that: There is good evidence that these measures are effective in reducing traffic speeds and reducing injuries in the general population, and in children in particular (Morrison et al., 2003; Towner et al., 2001). For instance, the UK Urban Safety Project included measures to redistribute traffic, improve the safety of roads, and reduce speeds. Evaluations of the scheme found that RTAs were reduced by 13%, and that there were considerable cost savings in its implementation (Towner et al., 2001).	al), which have further methodological difficulties. The primary studies considered in both are likely to overlap. The publication by Towner et al is similarly not included as it is a review. Potentially relevant studies in Towner et al 2001 are identified in the review conducted for this guidance, although there are differences in exclusion/inclusion criteria (for instance date of publication). Papers from the Towner review which fall within the relevant date range are either included or listed in the excluded studies section, along with the main reason for exclusion.
Liverpool PCT		“			Additionally, the introduction of 20mph speed zones in the UK was effective in reducing vehicle speeds by 9mph, child pedestrian injuries by 70%, and child cyclist injuries by 48%. (Webster et al., 1996).	Thank you. The study by Webster and Mackie (1996) is included in the review.
Parliamentary Advisory Council for Transport Safety (PACTS)		Preventing unintentional road injuries among under 15's: road design.	General	n/a	LINGUISTIC ALTERATIONS Given that road death is an extremely emotional topic, particularly in the under-15 age group, PACTS asks that 'accident' be replaced with words such as 'incident', 'crash' or 'road death', and terms such as 'accident black spot' be avoided altogether, replaced by the preferred phrase 'high risk site'.	Thank you for highlighting this. In general, terms used reflect those in the original papers. However, the evidence statements included in the draft guidance have been edited to replace the term 'accident' with other suitable terms. Also, the term 'accident' is not used in the recommendations.
Parliamentary Advisory Council for Transport Safety (PACTS)			General	n/a	THE HISTORICAL BENEFIT OF TARGETS Although Great Britain has an encouraging history of road safety, our relative performance in the under 15 category is less successful. However, targets in this	The relatively poor performance in younger people is identified in the scope and is one of the factors behind the production of this guidance.

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					<p>area have been fundamental in generating public and private support and have encouraged greater activity at the local level. Good practice and experience and professional commitment to progress in this area should be drawn on and developed.</p> <p>PACTS recommends that current DfT road safety and road risk knowledge be drawn upon. In addition, PACTS have produced two documents which may be useful to the continuation of this research: 'Beyond 2010 – A Holistic Approach to Road Safety' http://www.pacts.org.uk/research.php?id=8 and 'Behave Yourself – Road Safety in the 21st Century' http://www.pacts.org.uk/research.php?id=16.</p>	
Parliamentary Advisory Council for Transport Safety (PACTS)			General	n/a	<p>TERMINOLOGY</p> <p>It should be noted that although terms such as 'moderate' and 'weak', when in connection with the evidence base, are essentially positive terms within the DH, among transport professionals and DfT the terminology could be misunderstood. A glossary explaining these terms would be particularly useful to prevent confusion on publication.</p>	Thank you. These terms are defined in the review (pages 29-30)
Parliamentary Advisory Council for Transport Safety (PACTS)			General	n/a	<p>HAVING ANOTHER LOOK AT AGE CATEGORISATION</p> <p>This consultation sees a child as being any person under the age of 15, the DfT considers a child to be any person under the age of 16, and Every Child Matters (DCSF) defines a child as being under 18. In order to streamline priorities and create more effective policy objectives, PACTS recommends the linking-up of these categorizations across the three</p>	Thank you. We are aware of the different ways in which age groups are broken down by different organisations involved in this area and agree that this is a potential source of difficulties and confusion. The age range reflects the original referral from the Department of Health and is consistent within the related guidance documents on unintentional injuries being produced by NICE.

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					<p>departments. In our response to the DfT consultation 'A Safer Way', we suggested the following breakdown:</p> <p>Children: 0-12 Teenagers: 13-19 Young Adults: 20-25</p> <p>This classification allows for the variations in risk profile which alter drastically through the age ranges.</p>	
Parliamentary Advisory Council for Transport Safety (PACTS)			PUIC on the Road: Cost-effectiveness evaluation	1	<p>THE SCOPE</p> <p>It is certainly productive to reconsider the evaluation process, and the research shows that the two processes deliver different results. PACTS supports the extension of PI's to include longer-term health costs and so on. However, it would be interesting to reconsider whether the study goes far enough. Given the strength of current policy priorities, it makes sense to use this opportunity to evaluate measures with an even broader selection of PI's – to include QALY difference based on improved environmental factors and QALY difference based on social mobility, health in general and so on.</p> <p>Equally, it seems inefficient to discard such a wealth of information on (a) other age groups and (b) age specifications within the under 15 – bracket.</p> <p>(a) The majority of road design measures put in place to protect the under-15 age bracket will also act in a protective ways for other</p>	<p>Thank you. We agree it would be useful to extend the analysis so that it incorporates all possible benefits but the team were limited by the data they were able to source within the time and resources available</p> <p>The rationale for modelling injuries sustained by adults as well as children is set out in Section 3 of the report. Although age related data are available for road casualties (RCGB 2008) the report indicates that DfT values for the prevention of injuries or accidents do not</p>

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					<p>road users. Whilst it may be interesting to consider the specific issues facing the under-15 group, the cost-benefit/cost-utility analysis will not give a clear picture if the full benefits are not calculated.</p> <p>(b) Though the research shows that there is room to reconsider some of the processes used by the Department for Transport (DfT) there is wealth of research and knowledge in the department which it would be imprudent to dismiss. It is clear, for example, that averaging the under-15 age group out to 8 years old is counter-productive. The risk profile faced by younger children is very different to that of older children.</p>	<p>distinguish between children and adults and there is little evidence of effectiveness distinguishing between children and adults. No evidence was found on the number and severity of casualties within the age categories utilised in the analysis for any of the interventions considered. However, we will raise these points with the authors of report.</p>
Play England					<p>Play England welcomes the chance to response to <i>NICE Preventing unintentional injuries among children and young people aged under 15: road design</i>. Play England is the leading national play organisation in England, is part of NCB and is supported by the Big Lottery Fund. We represent the views of the Play England Council. Play England is also a Government delivery partner, working with DCSF to implement England's first national Play Strategy.</p> <p>General comments On page 3, The Play Strategy should be included as a related policy document the NICE guidance aims to support.</p> <p>Play England is pleased to see that the activities/measures that will be covered include:</p>	<p>Thank you.</p> <p>While we agree that play is important. The list of policy documents is not intended to be comprehensive.</p>

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					<ul style="list-style-type: none"> • traffic calming • 20 mph zones • home zone. <p>However, Play England would like to see Routes to Play as activities covered by the scope. As highlighted in <i>The Play Strategy</i>, Sustrans has developed guidance on <i>Routes to Play</i>ⁱ suggests practical steps local authorities can take to help children and young people get to play spaces actively and independently.</p> <p>The scope should also cover Quiet Lanesⁱⁱⁱ, developed by the Countryside Agency, which is now Natural England. The aim of Quiet Lanes is to maintain the character of minor rural roads by seeking to contain rising traffic growth that is widespread in rural areas.</p> <p>¹ DCSF (2008) <i>The Play Strategy</i>. London: Department for Children’s Schools and Families and Department for Culture Media and Sport. http://publications.dcsf.gov.uk/default.aspx?PageFunction=productdetails&PageMode=publications&ProductId=DCSF-00951-2008&</p> <p>²Sustrans (2009) <i>Routes to Play: Improving independent travel to play spaces, a guide for local authorities on helping to ensure children and young people can get to play spaces actively and independently</i>. London: Sustrans.</p> <p>³http://www.naturalengland.org.uk/ourwork/enjoying/places/greenways/quiet_lanes/default.aspx</p>	<p>While ‘routes to play’ was not included specifically in the search terms, studies looking at this might have been expected to have been found if they included environmental changes of the type under consideration. However, the review team did not find any specific evidence relating to them.</p> <p>Quiet lanes are included in the scope and in the evidence reviews.</p>
Road Safety GB (formerly LARSOA)		general	general		Road Safety GB welcomes the proposed guidance on ‘Preventing unintentional road injuries among under 15s: road design’. Whilst we understand that it	Thank you. The PHIAC discussed the role of education and enforcement alongside engineering measures.

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					is important for you to limit the breadth of the scope in order to make the aims achievable; as an organisation we feel that a holistic approach incorporating education, enforcement, environment, engineering, legislation, and developments in vehicle technology, along with partnership working is vital in our work to bring about behaviour change and reduce road casualties.	<p>There is another piece of NICE guidance currently in development -Strategies to prevent unintentional injuries among children and young people aged under 15 (http://guidance.nice.org.uk/PHG/Wave17/12) which looks at legislation, regulation, enforcement and compliance.</p> <p>Please note that NICE will also be producing guidance on preventing road injuries among under 15s through education and equipment – see http://guidance.nice.org.uk/PHG/Wave18/56</p>
Royal College of Nursing					The RCN welcomes the opportunity to review the evidence synopsis for this guidance. It is comprehensive.	Thank you.

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Royal Society for the prevention of Accidents		Evidence Review 1	General		<p>Inclusion and Exclusion Criteria We are concerned about the Inclusion and Exclusion criteria that the NICE reviews have used to decide what research studies are eligible.</p> <p>The criteria are different from those used by local authorities and others to assess the effectiveness of traffic calming and 20 mph zones. This may create a confusing impression about the effectiveness of these measures.</p> <p>In particular, because the NICE literature reviews only include research which published the results for children separately from adults, studies which show the effectiveness of traffic calming in reducing road casualties of all ages (but did not separate the age groups) will be ignored, even where they have found traffic calming or 20 mph zones to be effective in reducing road casualties.</p>	<p>Thank you.</p> <p>The inclusion/exclusion criteria were designed to ensure that the studies consider whether there is a benefit to the target population which is the focus of this guidance The review includes studies which report on children where the age range extends beyond 0-15 years. The benefits to other populations were considered by PHIAC when developing the draft guidance.</p>
Royal Society for the prevention of Accidents					The NICE Reviews conclude that some of the findings relating to child casualties are not statistically significant. This may be because the number of child road casualties in any local area will be relatively small in the first place. This is recognised on page 131 of Report 1, but should, in our view, be made clearer.	Thank you. This issue will be emphasised in the guidance.
Royal Society for the prevention of Accidents					The fact that NICE's scope defines children as under 15 years of age, whereas in road casualty statistics children are defined as under 16 years, may also mean that the findings from the NICE reviews reach different conclusions on the effectiveness of traffic calming and 20 mph zones.	Thank you. We are aware of the different age definitions of children. The ages used in this guidance reflect the referral from the Department of Health and to be consistent with other NICE guidance on unintentional injuries. However the issue will be set out in the guidance.
Royal Society for					RoSPA recommends that NICE emphasise the fact	Thank you. This was noted by PHIAC when

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the prevention of Accidents					that these reviews have been limited to particular types of study and has not attempted to consider other benefits of traffic calming and 20 mph zones, such as casualty reductions for road users aged 15 years and above, speed reductions, environmental, health and social benefits of encouraging walking . These issues are mentioned on page 129 of Report 1, but again could be made clearer.	developing the draft guidance.
Royal Society for the prevention of Accidents					As we said in our earlier response to the NICE consultation for the draft scope of this work stream, there is much knowledge and good practice about the role of road design and road engineering in preventing death and injury to road users, including children, and it is important that NICE's guidance complements and supports existing guidelines and practice.	Thank you. Several experts and practitioners were coopted to PHIAC to inform the development of the draft guidance. In addition, the draft guidance will be the subject of stakeholder consultation and fieldwork to seek input from local practitioners.

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Yorkshire Play (Bradford City Council)		PUIIC Road: Review of Qualitative evidence	5.3.1.3	42	<p>This section discusses the distinction between “common” and “extreme” risk taking by children and young people. It is posited that “common” risk taking may be susceptible to design interventions to reduce incidence and / or severity of injuries, whereas “extreme” risk taking is unlikely to be thus amenable. However, in the glossary at the beginning of the review paper, examples of “extreme” risk taking are deemed to include playing ball games in the street. Including street ball games as an example of extreme risk seems at odds with discussion elsewhere in the paper of parents’ rational preference, in some instances, for children to play in the streets near home rather than travel to a distant and maybe dangerous park. The paper in fact refers to Home Zones as an appropriate design response in this context. We suggest therefore that, rather than using a “common vs extreme” model, it is more useful to categorise playful risk taking as “intentional” (eg playing chicken, holding onto buses while riding on a skateboard, etc) or “incidental” (i.e behaviour, such as a ball game in the street, whose motivation is not in itself to do with taking risks in traffic, but which is a function of available play opportunities.) This typology would enable a clearer distinction to be made between deliberate, thrill-seeking risk-taking around the hazards of traffic (which is probably not amenable to design solutions) and risk taking arising from normal play behaviour in adverse environments (which should be amenable to design solutions).</p>	<p>Thank you. The definitions of ‘common’ and ‘extreme’ risk are taken from the paper referenced (Sawyer 1998). The typology you suggest (incidental and intentional) is interesting and as you suggest may have some elements that are preferable to ‘common’ or ‘extreme’. However, in this review ‘common’ and ‘extreme’ are the terms used in the primary paper by Sawyer and it would not be appropriate to alter these. Examples are given of what is meant by these terms. The term is not used in the guidance other than in the evidence statement.</p> <p>We agree that it is important to address road traffic danger and this, rather than restricting the activities of children, is the focus of the draft guidance (to be published on 4th November). At the meeting to discuss the evidence the committee noted that we have a moral duty to protect children from injury, including on the road.</p> <p>Please note that NICE has also published guidance on promoting physical activity in children which emphasise the importance of play in a variety of settings (see http://guidance.nice.org.uk/PH17/QuickRefGuide/pdf/English)</p>
Yorkshire Play (Bradford City Council)		PUIIC Road; Review of qualitative evidence	5.3.2	47	<p>We strongly agree with the reviewers’ comments about the existence of a “blame culture” in relation to child road traffic injuries, that by implication seeks to control children’s natural behaviour rather than to</p>	<p>Thank you.</p>

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					create more child friendly environments. An important role of the NICE guidance, when published, should be to challenge this world view.	

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