

Committee for Infrastructure

OFFICIAL REPORT (Hansard)

Road Safety Strategy to 2030: Department for Infrastructure

19 June 2024

NORTHERN IRELAND ASSEMBLY

Committee for Infrastructure

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Members present for all or part of the proceedings:

Mrs Deborah Erskine (Chairperson)
Mr John Stewart (Deputy Chairperson)
Mr Danny Baker
Mr Keith Buchanan
Mr Stephen Dunne
Mr Mark Durkan
Mr Andrew McMurray
Mr Peter McReynolds

Witnesses:

Dr Chris Hughes Department for Infrastructure
Mr Liam McEvoy Department for Infrastructure
Mr David Mullan Department for Infrastructure

The Chairperson (Mrs Erskine): I welcome from the Department for Infrastructure Dr Chris Hughes — nice to see you again — director of safe and accessible travel; Liam McEvoy, director of road asset development; and David Mullan, head of strategy, governance and driving policy branch. As usual, the evidence is being reported by Hansard, if you are all content. I will allow you to open up the discussion briefly — for about five minutes — because we are keen to come to members' questions. We have all the documents in front of us, which have been read in advance. I will hand over to you.

Dr Chris Hughes (Department for Infrastructure): Thank you for the opportunity to brief the Committee. Chair, I promise that I will be very brief. First of all, we are conscious that, when we discuss this topic, we are talking about the most horrific thing that happens to the families and people involved. We never lose sight of that, and I know that, in our discussions, members will reflect on that as well.

This morning, I checked on the latest road fatality figures. This year, to date, we have had 30 fatalities on our roads. That compares with 34 last year, which, as members will be aware, was the worst in eight years. Two years ago, it was 15, and, this year, we are sitting at 30 at this point in the year. At this point, we are already double where we were two years ago. We are not quite as bad as last year, but last year was one of the worst on record. When we talk about the strategy, we are fully conscious of that, and I know that the Committee has been briefed by a number of people on that.

Members are aware of the strategy document. It has been published in draft form since October 2022. It has just recently been approved by the Executive, so it is now an Executive-approved road safety strategy. The preparations for its launch will be brought forward in the period ahead.

The strategy builds on previous road safety strategies. Its approach is to look at the three aspects that cause collisions and fatalities: people, roads and vehicles. It looks at all three because they are the different factors that occur. They can ebb and flow, and each can come to the fore, so we need to keep an eye on all three.

The strategy contains targets. The main target is an international target, which is working towards zero deaths on the roads by 2050. Interim targets have been set as staging posts on the way to that. For example, by 2030, we are looking for the number of people killed on the roads to be less than 35. At this point in the year, we are at 30, and it is 2024, so the challenge is colossal. Within that main target, there are other targets.

I will leave it at that and move to questions so that we can make ourselves available to you.

The Chairperson (Mrs Erskine): Super. Thank you. The draft has been agreed by the Executive. Can you pinpoint any changes between the draft and the final version from the Executive?

Dr Hughes: The approach was that there was some fine-tuning of aspects of the body of the draft.

Mr David Mullan (Department for Infrastructure): The draft is, essentially, the draft that was shared with you and approved by the Executive.

Dr Hughes: What you have is what it is.

The Chairperson (Mrs Erskine): There are no major changes in the outcome figures or anything like that.

Dr Hughes: No.

The Chairperson (Mrs Erskine): We heard from Sam Donaldson on funding. I am not sure whether you are aware of that evidence session, but it was quite lengthy with a lot in it. What struck me in that session was the part played by investment in trying — pardon the pun — to drive down those numbers. Can we explore the breakdown of the funding that road safety received over the past eight years and how that has correlated with deaths on the roads?

Dr Hughes: There are aspects to the question on funding for road safety. Vast amounts of work that the Department does are based on road safety, and there may be particular aspects of it that you are interested in. For example, the work that Liam and his folk do is focused on road safety: spending on roads and road maintenance is part of the commitment to road safety. We do other promotional and educational activities on road safety. It depends on the departmental budget, and you can look at it at that level. We know that people do not die because of the roads. Members are aware of the condition of the roads, but, when we look at the cause of fatal collisions, we see that 95% are due to people driving while distracted or while their attention is elsewhere. The reality is that the people aspect — the people involved — is what causes fatal collisions and accidents in which people are seriously injured. I do not want to diminish that.

It depends on the budget, aspects of which have gone up and down. If you want to ask about anything in particular, I may be able to help you more.

The Chairperson (Mrs Erskine): You started by saying that we have had 30 fatalities this year on the roads. That figure is double what it was two years ago, and, at this stage last year, 34 people had died on the road. I have not seen huge amounts of money in anything budget-related that has come to the Committee. We have a lovely strategy sitting there, but where is the money coming from? I do not see it attached to the road safety strategy. In some respects, that seems counterproductive, in that you have a lovely strategy, but how will you fund it to get those outcomes? How realistic is it if you are not putting money into it? The fatalities are double what they were two years ago, and we have not finished 2024 yet, so there is an issue with investment. You talked about the people aspect: that requires education, enforcement and advertising to get the messaging across.

Dr Hughes: You will be aware that an equality impact assessment (EQIA) of the departmental budget is live at this point. You will know that the process for that is that the final budget decisions will be taken when the feedback after four weeks has been fed in and assessed. That is where we are in that process.

The Minister's view on public-sector funding in general is that there has been underinvestment. I listened carefully to Chief Superintendent Sam Donaldson's extensive Committee evidence session. He talked about the budget cuts that the PSNI is dealing with. We absolutely recognise that reality. At this point, the budget for this year has yet to be decided and confirmed. A lot of other moneys are spent on road safety. Sam was clear that he has fewer police officers available to do that work. There is less money available, for example, to be spent on promoting the messaging on road safety, which means that we have had to look at how we do more with less. Having the budget available to support the delivery of the strategy is absolutely an issue, Chair.

The Chairperson (Mrs Erskine): Do you agree, then, that there is a correlation between investment and saving lives? From looking at the figures, investing in road safety by getting the messages across reduces our numbers.

Dr Hughes: That is part of it. Spending money is one way of delivering messaging. Having money gives you more choices and options — there is no question about that — but we need to take the budget that is available to us and make it work. We are looking at low-cost and no-cost options for delivering messaging. Doing all of it would be better, but we are looking at what we can do with what is available to us. For example, the way that young people consume media is different from the way that it was done when I was a young person. There are options through social media channels and aspects of communication platforms that can be used. We also have a great focus on working with, for example, the three sporting codes, which are supportive. A lot of political leaders have thrown their weight behind Share the Road to Zero, and we have all signed up to that campaign and encourage other people to do so. We are doing what we can within the available budget, but having more budget gives you more options. There is no question about that; it is the simple reality.

The Chairperson (Mrs Erskine): Before I come to other members, I have one more question. You mentioned the evidence session with Chief Superintendent Sam Donaldson. The police are a partner organisation, and they have significantly reduced the number of officers working on road safety, which does not help enforcement. What engagement has there been with the likes of those partner organisations on the need to invest to achieve the road safety strategy priorities?

Dr Hughes: The engagement with partner organisations is extensive. I am aware that Chief Superintendent Donaldson, when he was here, mentioned that we have set up a strategic forum, which is chaired at grade 3 level in the Department. The forum involves the partner organisations that contribute most to the actions taken to address collisions and fatalities. The idea behind that forum is to look specifically at how we can make best use of the funding that is available across the organisations. It is to ensure that planning is coordinated and coherent. Each partner organisation will get its funding from within its ministerial allocation: the Department gets an allocation; the Minister decides on what that is; and the forum looks at whether there are areas in which the partners can share data or coordinate actions. There is a lot of cooperation on the ground and at operational level, as there always has been. Cooperation is a feature of the people involved: when people are engaged in this area, they really care and try to do their best, and we are trying to get to that top level by asking, "Are there things that we can do to fine-tune the best use of the resources?". Those are the responsibility of the organisations and their accounting officers and, in the Department, the Minister. At the most senior official level, we are trying to ensure, at an operational level, that the connections are being made to make the best use of the resources.

The Chairperson (Mrs Erskine): Thank you. I move now to other members.

Mr Stewart: Thank you for coming along today and for your answers so far. We all acknowledge that we are dealing with life and death. I can think of few higher priorities for the Committee and Department. Our thoughts go out to the families of those who have lost their life on our roads, tragically, this year. What I took from Chief Superintendent Donaldson's evidence was that there is a mass commitment from everyone — every stakeholder — to do this, but I came away thinking that, without the investment, the Road to Zero is just a pipe dream. What are your thoughts on the current trajectory of funding — I appreciate that there is a limited budget — and the ability to get there? Is it achievable without the funding being in place?

Dr Hughes: You will have anticipated this answer: funding is a matter for the Minister. When the Minister decides on what the funding is, we make the best use of it that we can. When you look at the budget that DFI spends, you see that the funding available to spend on the wider aspects of road safety is huge. Vast amounts of DFI's budget will be spent on things that will help to improve roads, which can be counted in this area. That is where we are.

Your question on the achievability of the target in the Share the Road to Zero strategy is a good one, because it is a challenging question that needs to be asked. The target is to get to zero deaths by 2050. Targets have a number of aspects: for instance, you need to make sure that they are something that you can aspire to and work to, but they also have to be realistic. The notion of achievable zero deaths by 2050 needs to be considered in the realm of knowing that vehicle technology is advancing at a colossal rate: vehicle safety systems and features will save us from the worst of our own judgements. As technology improves — it is improving rapidly — it makes that aspect of the 2050 target something about which we can say, "Yes, that is something we can do". On building sites in the 1920s, a death a week was considered acceptable: that is not considered acceptable any more, and it does not happen — and that area has not had the same technological advances. The interim targets are, perhaps, because they feel very close, more challenging. That is difficult. We have to set challenging targets and then work towards them. There is an element of not wanting to lessen the targets, because that would be like saying that a lower target was OK. Those targets are there, and those are what we are working to.

Mr Stewart: Thanks, Dr Hughes. You referred to the fact that 95% of fatalities are caused by driver error or driving without due care and attention etc. To that end, those causes can be targeted through awareness campaigns and education. How does the future budget look? I grew up, as did everyone here, I think, seeing horrific images in road safety adverts, which had an impact on me and many others; in fact, some people could not even watch them. We do not see those adverts as often any more

You talked about the low-hanging fruit when it comes to young people. It would be easy to target them through not very expensive social media campaigns. At Committee, two weeks ago, I talked to Sam Donaldson about engaging with the national broadcaster — sorry, this is a three-part question — to see whether we could do free adverts through it, given the seriousness of the issue. Is that being looked at? Could you broaden that out?

Dr Hughes: We have a team that specifically looks after the communication aspect. It works closely with the PSNI. I am conscious that that issue was raised. Unfortunately, due to staff leave arrangements, I have not been able to speak to our person on that, but I know that that issue was logged, so we are now conscious of it.

For younger people in particular, the low-cost and no-cost aspects have been specifically targeted at them for quite a while, and, as I mentioned, we have worked with the various sporting codes. Social media is a large aspect of that. Digital campaign advertising has been commissioned.

Mr David Mullan (Department for Infrastructure): The digital campaign is being prepared to go alongside the launch of the road safety strategy. When we look at the communications, we see that those advertisements are there. They are historical, but they are still being shared through the Share the Road to Zero campaign. The new digital campaign looks at how we can bring something like those back in but for a modern audience. It is about simple things, even such as how the aspect ratio is wrong when you look at those videos on your phone and things like that. Work is being done on that. Again, it is about targeting the key elements that we identify, because it all has to be data-driven. Back in the day, the campaign on seat belts was all data-driven. We knew that it was a fundamental problem that we wanted to address, just as careless driving and inattention are now.

We keep talking about careless driving and inattention, but this applies to all road users, be they motorcyclists, pedestrians or whoever. Everybody contributes to the level of carelessness. It is probably worth saying that the 96% figure relates to all collisions resulting in death or serious injury, but those collisions are caused by the inattention of all sorts of road users, not just drivers.

The advertisements have to be targeted, and we have to do the best we can with what we have at the minute. The team is working on that. It works with other media outlets and so forth. They are all corporations with their own budgetary requirements and things that they can and cannot do, but they are good at sharing the messages. Unfortunately, we wake up most days to news of collisions, and we get that news through the BBC and so on. Those messages certainly are coming through.

Mr Stewart: Hopefully, something will come out of the correspondence with the BBC. I see it almost as a requirement for it to get involved, given the seriousness of the issue. I would love to see that being pursued.

I come back to your point about the social media campaign. Certainly, whether previous campaigns said, "Do not use your mobile phone" when that became a legal issue or had a lasting effect through the horrific images that we used to see, they made you feel as though you were being targeted and that there was a constant cycle of trying to reinforce the message. Will we, particularly young people, feel as though we are being targeted to try to prevent collisions and to raise awareness?

Mr Mullan: We certainly hope so. The challenges that you have —.

Mr Stewart: Is the plan to make it so that, effectively, you cannot avoid it?

Mr Mullan: Sorry?

Mr Stewart: I am trying to get at the idea of not being able to avoid the message.

Mr Mullan: That is the ideal scenario. Unfortunately, the challenge is that a lot of the social media apps have algorithms that determine what people can and cannot see. That comes down to the person as opposed to the outlet that shares it. There is also the option to scroll past the message. It is a challenge, and we are certainly looking at it. There is still a lot of learning in that realm.

Mr Stewart: Finally, Sam Donaldson raised his belief that we should look at fines and penalty points. Has the Department had any engagement on that through consultation with stakeholders, the PSNI or the Road Safety Partnership? Is that being looked at, given those comments?

Mr Mullan: Not as yet. I am aware that Mr Donaldson suggested that the fines were not appropriate. I suppose that the question is this: what is an appropriate fine? There has certainly been discussion about, for example, increasing the fines and penalty points for mobile phone use. That may make a difference to careless driving. Nothing is off the table, but we have not had those conversations just yet.

Dr Hughes: DOJ leads on sentences and fines etc, and DOJ staff are turning their minds to that issue. There is the issue of a sentencing and fining review. What we can do to address it quickly is to try to get the message out about going dry. Chief Superintendent Sam Donaldson was promoting and talking to you about the messaging around the "fatal five", and that aspect can certainly play into it. Within our current reach and capability, we now know what all we can do: anything that we can do to make a difference.

Mr Stewart: Thank you very much.

The Chairperson (Mrs Erskine): I also raised that issue with the Department of Justice to try to get some information.

Mr Dunne: Thanks for your presentation, gentlemen. We all appreciate the funding challenges and the ongoing work. I welcome the strategy as something that we can all buy into. Safe people, safe roads and safe vehicles are three good, basic, central themes to keep focused on.

I have a couple of questions. The figures released last week for those killed or seriously injured (KSI) were alarming. They showed that 377 people were killed or seriously injured in collisions due to alcohol or drugs. Folks, what more can be done in conjunction with the PSNI and the Justice Department to improve those figures?

Dr Hughes: The Minister has asked officials to look at the issue of drink- and drug-driving, as well as mobile phone use. The Minister has asked us to look at that, and doing so will specifically address those issues. We are beginning to work with the Minister on that. Until we see the outworking of that ____

Mr Dunne: Is there anything further on that? The statistics are alarming. What are the biggest factors in those shocking statistics? At this point, can you expand on that or give action points around it?

Dr Hughes: There is legislation in the public domain on changing the drink-driving penalties and the options for tackling drink-driving. That has been on the statute book since 2016. There are options in that legislation to reduce the blood-alcohol limit. The Minister has asked us to look at what can be

done in that space. Legislation is available. It contains options to reduce the blood-alcohol limit for professional and new drivers from 80 mg to 20mg. The problem is that the detection equipment that can pick up that lower level is not available, so we need to look at what can be done in the real world. The Minister has asked us to see what we can do.

People know that they should not drink and drive. When Sam Donaldson gave evidence to the Committee, he said that he was sick, sore and tired of people asking, "How many drinks can I have?": people know that they should not do it. People know that they should not take drugs and get behind the wheel. We can look at those aspects, but there is an element of saying, "People are aware, and that is the behaviour that they choose to undertake". That matter is being looked at and actively pursued.

Mr Dunne: It is about the balance of awareness and education, but also consequences —

Dr Hughes: It is, yes.

Mr Dunne: — which is where the legislation comes in.

Mr Mullan: It might be worth expanding on that. The strategy has been produced, but it is the action plan that follows from it that will be critical to what we do going forward. Looking at the action plan from last year — we are finalising the report on that — we see that lots of good work is being done in the course of business as usual. People are still dying on the roads, however, so it is critical that we do more.

Through the likes of the report on drink- and drug-driving, we are able to gather evidence. It is about what we now do with that evidence. Communication is part of that. We have the comms on drink-driving, which are reiterated, and you will always see that campaign around Christmas. We know when people are more likely not to be caught with alcohol or drugs in their system, and the police use that information to determine when and where to do those enforcement programmes. When we start to use all that information, it is about sitting down and asking "What does the action plan look like going forward?". Dr Hughes is looking at how we drive that forward.

Mr Dunne: I appreciate that, thank you. What impact has the limited road maintenance service over the past number of years had on those alarming and shocking statistics? As local representatives, we may think of the things that we are regularly contacted about, such as potholes and the poor condition of the roads. Sometimes, those are thought of as affecting car users, and the fact that they affect cyclists, motorcyclists and pedestrians is overlooked. What impact has that had?

Dr Hughes: Before I ask Liam to come in, I will say that we know that that is not the cause of fatalities. The condition of the roads —.

Mr Dunne: Collisions as well.

Dr Hughes: There is a difference between collisions and fatalities.

Mr Dunne: It all comes under road safety.

Dr Hughes: It does, completely, yes. Fatalities are more likely when people drive quickly, for example, so speed is an issue. We are aware that it is an issue and that it causes problems. It is not directly linked to road deaths in a massive way. I will go back to the point that 95% of fatal collisions are a result of road user behaviour. In that context, it is clear that what road users — drivers, passengers, pedestrians and cyclists — do causes that. Liam, would you like to comment on limited maintenance?

Mr Liam McEvoy (Department for Infrastructure): I take your point, Chris, about that, but safe roads is an important aspect of the strategy. I will also pick up on the Chair's point about the maintenance budget and budgets generally for those things. Safe roads, which is about making sure that our road network is in a safe condition, is a key part of contributing to road safety. That is about the integrity of the road surface, the roadside, and markings and signage. That is a key aspect of what we do. You are right to say that the limited maintenance service that we have had for the past number of years, since, I think, 2015, has had an adverse impact on the condition of our roads.

Many of our roads are in a poor condition. We have been severely under-resourced in our ability to maintain our roads to the standard that, from an engineering point of view, we would ideally like to. However, while many of our roads are in a poor condition, our analysis of the road safety statistics suggests that there is no direct correlation between those factors. Whilst there might be roads that are in a poor condition, we will continue to prioritise our activities according to our funding to make sure that poor road conditions do not become unsafe road conditions.

I will go back to your point about budgets, Chair. I have some figures for the maintenance budget, and I appreciate that this is only a proportion of the Department's overall budget. In 2019-2020, our structural maintenance out-turn was £106 million. In 2020-21, it was £100 million, and in 2021-22, it was £105 million. Last year, we had a provisional out-turn of about £120 million. Those are large numbers, and I reiterate that they still represent a significant underinvestment in what is required. In today's prices, an independent assessment says that we should invest approximately £191 million. Those are large numbers and large proportions of the Department's capital budget. The investment profile has been flat enough over the past five years, with a slight upturn last year, but that still represents a significant underinvestment compared with what we would ideally want to invest in road maintenance.

Mr Dunne: Finally, briefly, I want to ask about the map in the strategy that shows European road deaths. It is interesting that we are, ironically, at the better end of that. Can you give us a line or two about the international situation beyond Europe? Is there any other best practice? How do we sit in comparison with the rest of the world?

Mr Mullan: We have to balance the line between the positive message about how well we are doing worldwide while avoiding complacency. It is important that we do not lose sight of the fact that people are dying on our roads, but, from an international perspective, we are doing incredibly well. The statistics that we have come from different sources, so there are slightly different measurements, but I will give you a couple. The World Health Organization (WHO) pulls together all the worldwide figures, and those are based on deaths per 100,000 inhabitants. Globally, there were 16·7 deaths per 100,000. The best-performing area is Europe, with 7·4 deaths per 100,000. The next best is America, with 15·3, which is double the European rate. The worst-performing area is Africa, with 27·2. The figure for south-east Asia and so forth is somewhere in between.

The global figures show that Japan and Singapore are very high performing and that the best are Norway, Sweden and Switzerland. Locally, we look at the European figures, and, with those, the statistics flip slightly. The figures are given in deaths per one million of population. Norway is the best-performing country, with 21-4 deaths per one million. The UK is third, with 25-8 per one million, and the Republic of Ireland is sixth, with 30-8. We have had to do some calculations, because Northern Ireland is linked in with the UK, but we are sitting at 28-8. For context, the highest in Europe is Romania, at 85-8. When we look at the countries that have a figure below 35, we see Norway, Sweden, UK, Denmark, Switzerland, Ireland, Germany and Finland. Those are all wealthy nations. I want to avoid complacency, but we are probably punching above our weight.

Importantly, when we were looking at the revision of the road safety strategy, we had to ask, given that people were still dying, whether the strategy that we had in draft form was the right strategy. When we look at the global context, we see that it is the right strategy. When we look at the countries that are doing really well and ask why they are doing well, we see that it is because they have a strategy and are continuing with it. They have a safe systems approach and a heavy focus on engineering, education and enforcement. We absolutely need to do better in what we do, but, in general context, the strategy is the right way for us to go.

Mr Dunne: Thank you. Sam Donaldson, when he was on the seat that you are on now, said that no country had got it perfect yet. That is an important point.

Mr Durkan: I just keep getting more and more questions. It is normally the opposite way. Thank you, gents, for coming along and for the presentation. I suppose it is good news that the Executive have approved the road safety strategy. However, it will be something of a pyrrhic victory unless there is an adequate or appropriate budget line to go with it. We are all in agreement that we want to get to zero. We are on the road to zero, but, if we do not put fuel in the vehicle, we will get nowhere near it. A few members have expressed that fear, and we have to make sure that we are going in the right direction and are not reversing due to a lack of investment across the board.

Chris, you mentioned the available legislative options. We discussed those briefly before, as well as items that have been on the statute book since 2016. You mentioned those specifically in regard to drink-driving legislation and limits, but other tools are on that menu. Has there been much exploration of dusting down the proposals for graduated driving licences (GDLs) and other such proposals that the Assembly approved after extensive consultation and work by officials, the Committee of the day and others? At the time, that measure was held up as the way forward as a model of good practice, but it has gone nowhere.

Dr Hughes: That is another of the options that the Minister has asked us to look at. We are looking at what can be done on that specific issue.

Mr Durkan: Are you aware of any particular reason why that has sat on the shelf since 2016? I suppose the fact that we have not had an Assembly for five of the past eight years or more will not have helped. I am not asking you to make a political judgement on that —

Dr Hughes: Thank you for that.

Mr Durkan: — but there is stuff that would require ministerial sign-off and direction. The combined impact of that and the budgetary situation regarding maintenance that we have heard about, which has also been particularly impacted, given that we have not had an Assembly and the luxury or safety net of monitoring rounds, has been disastrous for road safety.

Dr Hughes: Introducing graduated driving licences will take an investment of capital funding. That is absolutely an issue, and it takes decisions and leadership. It also requires the Driver and Vehicle Agency (DVA) to operationally plan for and deliver that. By the way, its commitment to graduated driver licensing is absolute. It takes the circumstances to say, "That is a priority for you. Here's the funding to go ahead and do that, so go ahead and do it".

If you look at graduated driver licensing internationally, which is the perspective that David just shared, you see that we already have many aspects of what countries recognise as graduated driver licensing. For example, we have a structured and systematic driving test that includes hazard perception, and we have the rules of the road in the Highway Code. We have many parts of graduated driver licensing. However, there are elements of it that other parts of the world have brought in that we do not have. We are part of the way there simply through the arrangements that we have in place. However, those other bits take investment, decisions and time. The Minister has asked us specifically to look at what is possible for that.

Mr Durkan: Does evidence exist of how well or otherwise those pieces work?

Dr Hughes: It is really interesting. That is a really good question and an issue that I have looked into. Other parts of the world, such as parts of the US, brought in graduated driver licensing in the 1980s and 1990s. However, because it has a federal system that is state-driven, the approaches can be different. So the evidence is not what you would anticipate. Research was done on how it would impact on Northern Ireland. As you would expect, the more elements that you bring in — for example, a curfew for newly qualified drivers and an extended restricted period — the more you find that every bit of it helps. It is difficult to disentangle the percentages on that. However, we know that those elements will help, because they encourage better driver behaviour and support young drivers to get experience on the road.

It is a two-part issue. Much more time and structured investment are involved in training drivers to get the experience that they need before they sit and pass their driving test. The GDL will allow learner drivers to be trained on motorways and in the safe use of satnavs and the like in order to deal with the modern driving environment. They will have a much more structured driving instruction period, and then they will have a period where they are more supported to gain the experience to be safe drivers after that. We know that young drivers are disproportionately represented in fatal collisions in particular. You will know from the news that that is the case. We are looking at what we can do on that. The Minister has asked officials to look at it.

The Chairperson (Mrs Erskine): Sorry, Mark. If it is helpful, I will say that we asked the Minister about that, and we got a letter back last week. We have asked for a briefing specifically on the options that the Minister will look at. We will look more at the issue, because it is important in terms of how it relates to the Road Traffic (Amendment) Act (Northern Ireland) 2016.

Mr Durkan: Super.

On the budget, I remember a time when — I am not sure whether this was a formal agreement or there was just an understanding in the Executive — road safety was sacrosanct and the then Department of the Environment's road safety budget specifically for advertising was ring-fenced. Those days are gone. However, other members and you accept and understand the importance of advertising and have lamented the lack of both advertising and information that we have been able to get out there. It is important that we get a bigger bang for a smaller buck, if you like.

Mention was made of the fact that social media may be a better or more effective way to reach younger people. You talked about getting political leaders and others on board, but I am not sure how influential we are with anyone, let alone younger people. Has any work been done to identify or get on board influencers who may be able to relate better to young people or to whom young people may relate better?

Dr Hughes: I know that the communications team has very much looked at that. I mentioned that the three sporting codes — rugby, soccer and the GAA — have all been engaged and involved in promoting the messages.

From talking carefully about it with our communications team, I know that it recognises that, particularly for young people, once you get a message out and get the value from that, you cannot keep going back to it, because they will say, "There's that same soccer player" or "There's that same GAA star". You need to keep finding new ways of doing that. That is a challenge that the communications team is conscious of and is looking at, so it is seeing what it can do while being conscious of the fact that its audience will be looking for something that it has not seen before. That is very much part of the thinking.

Mr Durkan: Regardless of the amount of money that is spent and effort is that is put in, whatever legislation you have and however much advertising you do, a lot of it comes down to luck. If we look at the KSI figures, we see that, whilst the number of lives lost last year was absolutely horrific — one life lost is horrific — and the numbers have been going in the wrong direction for a couple of years now, the number of people who have been seriously injured has reduced. There is such a fine line, and that underscores the fragility of human life.

Mr Mullan: That is a really important message. Obviously, nobody who goes out makes a conscious decision to kill themselves or other people, but people make a conscious decision to lift the phone or to go a little bit heavy on the accelerator. Lots of conscious decisions contribute to the figures, but nobody believes — I think that this is a point that Mr Donaldson was making last week — that it will happen to them or their family. The message that we really need to push is that people need to take personal responsibility. The people who will save lives are the people who are out using the roads.

When we talk about it coming down to luck, we find that, in some instances, it absolutely is luck. It is lucky that people come away from some collisions, but it is about those conscious decisions. The conversation that we need to have at a societal level is this: what are individuals doing to avoid collisions? What decisions are they making?

There is a wee part of technology that will help with that in the future. There are mechanisms in vehicles that tell you when you are drifting across a lane and that stop you using your phone and so forth. However, it is about people's decision-making. People choose to switch those things off. People choose to switch off the little beep that tells them when they are speeding.

Mr Durkan: Finally, finally —.

The Chairperson (Mrs Erskine): Yes, finally.

Mr Durkan: It is just on that engineering aspect. This just came into my head as you were talking about some of the modifications. There are things that are in cars now that were not in them in years gone by. Has any issue been highlighted, for want of a better expression, about headlamps? At first, I attributed this to my just getting older, but they seem to be brighter and more dazzling. Other people have shared some of their concerns.

Mr Mullan: Construction is dealt with at Department for Transport (DfT) level, and it is looking at that, because the question has been asked whether they are getting brighter. I do not know enough of the detail behind it, but we are all linked in with UK-wide construction and use, and that is being looked at.

The Chairperson (Mrs Erskine): That is a good point, because at night-time I notice it.

Mr Mullan: Maybe the problem is that we are all just getting a wee bit older.

The Chairperson (Mrs Erskine): Speak for yourself. [Laughter.]

Mr Baker: Last year's figures showed an eight-year high, and they are already double this year. We know that human behaviour is the big player. What does the data say about what has really changed since those couple of years when the rates were increasing rather than decreasing?

Mr Mullan: All the data is pointing towards inattention. Once there is a collision that results in a fatality or serious injury, the police investigation unit, which does an absolutely unspeakable job — fair play to those individuals, and we are thankful for them — pulls together the information that we use in order to determine what communication or policy etc decisions we make.

Over the last lot of years, there has been an increase in the figures, but the reason is roughly the same. It is inattention. The PSNI report that was published a couple of weeks ago highlighted the principal causal factors. The principal causation factors are highlighted at number one, but there are others. For example, we know that speed is a key causation factor but is regularly not the principal causation factor. It is:

"Inattention or attention diverted
Driving too close
Emerging from a minor road without care
Impaired through Alcohol/Drugs - Driver/rider
Crossing or entering road junction without care
Turning right without care
Overtaking on offside without care
Wrong course/position
Changing lane without care
Having excessive speed having regard to conditions".

That is all human error. It is absolutely falling back to the 96%. The key message is that roads and vehicles are not killing people; people are killing people. That said, we need to keep our eye on all three aspects. If we entirely turn our focus to people, the other things could slip. You are right: the numbers are going up, but the causation factors are not. It is about identifying and focusing on those. We refer to inattention or careless driving, because so many elements fall under that category.

Mr Baker: We touched on international best practice. Something that came into my head when Mark was talking was the key part that manufacturers could play in reducing our bad behaviours. The fact is that you can turn things off. Is there engagement with manufacturers about stopping that? If you get in a car and do not put your seat belt on, the car will beep until you put it on. Are we going to a place where you cannot start a car if your mobile phone is on or anything like that?

Mr Mullan: We are getting much better. There are international standards for car manufacturing that have to be followed. Car manufacturers will make commercial decisions. If you go into a car showroom, you will see that there are different levels of the vehicle. The safety features seem to improve the more you pay: there is something inherently wrong in that. Perhaps we need to have a think about that. However, we cannot influence that here; it is a global issue.

Dr Hughes: There is a difference in driver assist tools that help you to be aware that you are speeding, for example. There is a new driver assist information system that uses GPS and camera scanning to alert you to what the speed limit is. If you are going from a 50 mph or 40 mph zone to a 30 mph zone, it will tell you that. Driver assists turn on each time you turn the vehicle ignition on, but you can turn them off. However, whenever you turn the vehicle ignition off and turn it back on again, they reset. In practice, people say, "I'm not having that", and they turn it off, but, by the twelfth time, they are fed up because they have stopped at the shops. Even the people who are determined to turn those systems off end up behind people who have those systems and follow the assists. There is an

interface where the technology impacts people. The people who turn them off are perhaps less concerned about driving, but they are in a society where other people are being helped. There is a curious interface there.

As David said, there are commercial decisions. Our car market here is tiny, so we are impacted by what happens with vehicle standards and development on a global level. All those factors play a role, but, as David said, sometimes the more you pay, the more safety features you get.

Mr Baker: I am trying to think outside the box, because a lot of the questions have been asked. There is a place at the table for insurance companies as well. Anybody who has bought insurance in the past wee while has seen it go up. I have not had an accident, but my insurance has gone up. Is there a role for the insurance companies to play?

Mr Mullan: We are asked about the cost of insurance regularly. It is more of a commercial decision, and it is regulated. Our input as a Department is to reduce the number of collisions. Ultimately, uninsured drivers, collisions and claims drive up all our costs. We need to tackle those issues. There are benefits to the road safety strategy beyond saving lives. There are economic benefits, and there are environmental benefits, because we will create an environment that will encourage people to walk and cycle and use active travel routes. Whilst we focus heavily on road deaths and things like that, there are wider benefits, including economic ones. If we reduce collisions, we will reduce premiums. Those are linked.

It is also about technology. We have a meeting with the Association of British Insurers (ABI) about trying to gather information from black boxes. Do black boxes reduce collisions? If we measure the number of collisions by age group, gender type and things like that and we take all that data and assess it against those who have black boxes, will we find a marked difference? I do not know how we would use that information. It is about how we use that data to drive forward policy and decision-making, but it is all on the calendar for work.

Mr McMurray: Thank you for your responses so far. I am ticking off questions as we go along, which speaks to clarity of your presentation. Mr Mullan makes a profound point about safety features and price points.

I will go back to driving licences. I am trying to be brief and, at the same time, tie in some of the answers that have already been given. You mentioned novice drivers as being the most at-risk demographic. I can understand that. I have two children growing up.

Following on from graduated licences, people who work in certain areas have to have a certificate of professional competence (CPC) as well as their driving licence. As someone who drove in a previous role, I would have benefited from having a CPC. We have talked about influencers. During the training and licensing stage is probably when learners pay most attention to people, so could a CPC have an effect on bringing down the number of accidents? Are CPCs being considered? I was listening to the points that you were making and going over them in my own head.

Dr Hughes: It is a fascinating question. Once people get their driving licence, they are left to their own devices as to whether they choose to do, for example, an advanced driving course. If they do, they can perhaps get lower insurance premiums. It becomes a political decision in many ways. For example, the debate around driver licensing for people when they get older, which is one of the areas that we cover in the Department, is impassioned. We have not looked into the area that you have mentioned. It is an interesting thought, although I suspect that we might be getting into tricky territory. Rather, it is about how people behave when they have their licence. If people have a drink or speed, they know that they should not do that. Yours is a really interesting point, however.

Mr Mullan: It is worth saying that CPCs are in place for commercial drivers, so we have them for drivers who are on the road more often. As Chris said, there would be a big societal impact if people were to be asked to pay to be retested and retrained.

Mr McMurray: Yes. I am talking not about doing it to the same extreme as with the CPC but about having some sort of graduated driving licence. I am not talking about people revalidating their licence. I do not know.

You made the point about carelessness and trying to influence young drivers, but how can you guarantee that they are influenced?

Mr Mullan: An example of that might be where people, if they are caught speeding, for example, get an opportunity to undertake the course as opposed to taking the penalty points. Those courses are there for exactly that purpose, which is to reiterate all those messages. I suppose that it is there to a degree, but I take your point.

Dr Hughes: When we look at the data on the age of the people involved in causing collisions, we know that, as people become more experienced drivers, they are much less likely to cause a collision. Experience is therefore involved. We look at the data by age profiles. Mark made the point about improving training for drivers and stuff like that, which is something that we know that we can look at. As David said, it would become a societal conversation.

The Chairperson (Mrs Erskine): May I pick up on a few points briefly? You have discussed some of the causes of drink-driving that you are looking at. Has there been any engagement with Translink on the lack of night-time transport and with the taxi industry about its taxi provision to get people home at night if they are out socialising? That could be part of what causes people to say, "It's difficult to get home, so I will just drive home".

Dr Hughes: There is extensive engagement with Translink, which is done in another part of the Department, and with the taxi industry, which is done by me. In fact, I met industry representatives yesterday afternoon, and we are conscious of the issues around availability of those services. Potentially, what you raise has an impact, but, at the end of the day, people know that they should not drink and drive. It is therefore really about personal responsibility. It is that straightforward. Yes, extra provision might help, but what we have within our target is telling people, "Don't do that".

The Chairperson (Mrs Erskine): It really is that simple.

Dr Hughes: It really is.

The Chairperson (Mrs Erskine): I have a question about the action plan that is linked to the road safety strategy. I take it that you will be able to provide some detail on the action plan for 2024-25 to Committees and that there will be an opportunity for each Committee to express its view.

Dr Hughes: Absolutely. We would welcome the opportunity to do that, once the action plan is done. The budget-setting process has worked its way through, and the action plan is now being taken forward. The action plan, deliberately and consciously, is contributed to by all the key players, such as the PSNI, the Department of Justice and the Department of Health through the Fire and Rescue Service and the Ambulance Service. All those players are contributing to the plan, although our colleagues in DFI Roads do not. The reason that Roads does not contribute to the action plan is that our Roads colleagues are doing a good job of making sure that, to pick up Liam's point, they fix the worst defects that might cause fatalities. All the contributions are being pulled together and are going into the action plan. It is being pulled together at the moment. Of course we would welcome the opportunity to make ourselves available to the Committee to discuss the action plan.

The Chairperson (Mrs Erskine): Yes, and with other Committees as well, such as the Health Committee; indeed, with all the Committees.

Is there any detail on the timescale for the completion of the report on the 2023-24 action plan? Will that be shared with us?

Mr Mullan: We are finalising the report and getting it cleared at the minute. It is a factual report. It is about measuring success or otherwise against the actions that were in it and then doing an assessment. Again, it is about making the point that people are dying on our roads. It is a retrospect of last year, and it then focuses on the coming year.

Dr Hughes: It will be published —.

Mr Mullan: Over the next couple of weeks. It is out for clearance at the minute.

Dr Hughes: That report is in the process of being —.

The Chairperson (Mrs Erskine): In the next four weeks.

Mr Mullan: I would say comfortably, yes.

Dr Hughes: I am slightly hesitating, because we are in a pre-election period, but it will probably be published just when it is done.

The Chairperson (Mrs Erskine): Will it be published?

Dr Hughes: Yes.

The Chairperson (Mrs Erskine): Will the Committee have sight of it before it is published?

Dr Hughes: I can take that question away and see what we can do.

The Chairperson (Mrs Erskine): It would be good if the Committee could have sight of it before it is published.

Dr Hughes: We will see what we can do.

The Chairperson (Mrs Erskine): Thank you.

Mr K Buchanan: Thanks, gentlemen, for coming along. I have two or three questions. The strategy that we are looking at is to run until 2030: have we a strategy in place today?

Dr Hughes: Yes. It has been approved by the Executive, so it is —.

Mr K Buchanan: No. I mean the one that we are working to today. Have we a previous strategy?

Mr Mullan: That strategy was in draft format, and it is published in draft format. All that we have done now is revisited and revised it to make —.

Mr K Buchanan: When, roughly, was the draft published?

Dr Hughes: In October 2022.

Mr K Buchanan: Prior to then, had we a strategy?

Dr Hughes: We had a strategy until 2020, which was rolled forward because of COVID.

Mr K Buchanan: Right, so this is the new strategy. What is the difference between this one and the old one, which is the one under which we currently operate?

Dr Hughes: The basic approach is the same.

Mr Mullan: The approach is the same. During the revision process, we asked ourselves these questions: is the approach to the safe systems the correct approach? Is the focus on vehicles, people and roads, and is that the right approach? Are the targets correct? The outcome was that it was on the right trajectory, so we have retained the previous strategy, with very little change being made to it.

Mr K Buchanan: I do not mean this disrespectfully, but it is a bit of a copy and paste with a tweak.

Dr Hughes: That would diminish the challenge that we had to make sure that what is in it was right. To return to the point that David made, the countries that are doing really well internationally took that approach and have stuck with it. We challenged ourselves to make sure that it was the correct approach. We did extensive engagement, and there was a consultation. David referenced the international evidence that we looked at. We specifically spoke to the PSNI, DOJ, the Fire and Rescue Service, policing and community safety partnerships (PCSPs), the Road Haulage Association (RHA), the Motorcycle Action Group (MAG), Cycling Ulster, Sustrans and the Inclusive Mobility and Transport Advisory Committee (IMTAC).

Mr K Buchanan: I appreciate that my use of "copy and paste" was perhaps not the best comment to make, so let me say that you have tweaked or modified the strategy.

Dr Hughes: We verified that it was legitimate.

Mr K Buchanan: If we have hit a peak in the past two years and we follow the same approach but with less money, how will that work?

Dr Hughes: That is the challenge.

Mr Mullan: The action plan is critical to that.

Mr K Buchanan: In your opening remarks, you made the point about 95% of collisions being due to people. We cannot get people to stop throwing tins of Red Bull — other drinks are available — crisp bags and McDonald's wrappers out of their car windows. We cannot get them not to do that, which theoretically does not or should not cause fatalities. How will we get them to listen about road safety? If I were travelling to Belfast 10 years ago and were in the wrong lane, if I had indicated, I would have been let in: that is not the case today. People are the problem: is that what we are saying?

Dr Hughes: Absolutely.

Mr K Buchanan: People blame the roads and everybody else but themselves. How do we change people?

Mr Mullan: That is absolutely the challenge. We are looking to develop the action plan over the next year. Going forward, we will have to be pragmatic and adjust it to deal with the issues in hand. At the minute, it is a one-year plan that will set out business-as-usual activity to improve road safety. We have to support that with the bigger, strategic items, and a big part of that is education. People are dying.

Mr K Buchanan: I am not writing off a generation, but, for anyone aged 18 and over, do we say, "It is a waste of time having the conversation with them"?

Dr Hughes: Gosh, no.

Mr Mullan: No. Absolutely not.

Mr K Buchanan: OK. Do we start at P1? How do Norway and Switzerland manage it? There, people do not throw their rubbish out of their car windows. They have a clean country, and they broadly follow the rules, so do we start at P1?

Dr Hughes: The earlier we start, the better. We are well aware that children's influence on the behaviour of their parents is massively strong. It was used effectively in "Stop smoking" campaigns. What you say is absolutely right. If you have ideas that we are not considering, the degree to which we would welcome those is —.

Mr K Buchanan: It is about the narrative that I hear on social media every day. Going by the statistics that Chief Superintendent Donaldson presented when he was at the Committee, of 288 deaths in the previous five years, the road was relevant in only four cases, yet people say that it is all about the roads.

Dr Hughes: Absolutely.

Mr K Buchanan: People do not understand, even when they are told, "You were flying on the road". I will leave it there.

The Chairperson (Mrs Erskine): Finally, the Motorcycle Action Group is coming to the Committee. Do you feel that there was enough input into the draft road safety strategy from every stakeholder and group? Was enough consultation held on it?

Dr Hughes: Yes. That is what we set out to do, and we got 62 formal responses, plus a lot of informal ones. The Motorcycle Action Group came to two, if not all three, of our public forum meetings, plus I separately met the group. Motorcyclists are vulnerable road users, so they have been extensively consulted, and I am aware of the issues that they have raised. They were particularly keen on public funding for further training for motorcyclists. As the people responsible for driver licensing, however, our challenge is that public funding — a scarce and precious thing — is a matter for political decision. We were being asked for something above the minimum standard required, so we asked, "Are you saying that the standard for motorcycle licensing is not adequate? The answer that we got was, "It is adequate. We do not want to make it harder". Throughout the Highway Code, how other road users should treat vulnerable users such as cyclists, pedestrians and motorcyclists is, of course, writ large. Stakeholders were extensively consulted.

Mr Mullan: To give you some reassurance, I will tell you that that is not the end of the consultation. We have set up a framework to assist with the delivery of the strategy over the coming years, and that framework has three layers to it.

The strategic layer is the forum that Sam Donaldson talked about, with key decision makers across all the partner organisations driving the direction. The tactical forum is the action group, which is about all the actions that will be in the action plan or that were in the previous action plan. It meets quarterly so that we can assist and challenge one another and see how we can best work together to deliver those actions.

We then have a range of operational fora, such as the road safety PR group, which does all the communications strategies, and the statistics and analytics group. Within that, we will be reactive in dealing with emerging issues. We know, for example, that we want to engage with IMTAC, the cycling community and the motorcycling community. Once we have the action plan, we can drive forward the delivery of those actions. The likes of the Motorcycle Action Group will absolutely be part of that.

Dr Hughes: The conversation remains open.

The Chairperson (Mrs Erskine): I am glad to hear that the conversation remains open. We were not privy to the conversations that happened in any meetings, but, in its correspondence with the Committee, the Motorcycle Action Group has levelled some criticism. It feels that none of its input was included in the draft road safety strategy. Would you like to comment on that? Do you feel that you were able to input its concerns and asks into the strategy?

Dr Hughes: Absolutely and specifically. Its asks were vocally made. It attended all the public meetings and then got a specific one-to-one session afterwards, so we are clear on what the Motorcycle Action Group's views were at the time. We engaged with the local and the national group. When the national group was involved, its members said that, from a national point of view, from looking at the various road safety approaches across the strategy, they were content that voices were being listened to.

Funding was the main concern raised with us. There was a desire for funding for additional training, over and above the minimum requirement from the public purse, for people who ride motorcycles. That was the key issue that was raised. It is a matter of the use of public funding, which is for an action plan rather than for the strategy to determine. When it goes into the action plan, the question becomes one of whether it is a use of public funding.

From the strategic point of view, what I was keen to tease out was this: if there is an ask for further training, is the training that is required adequate for people to conduct themselves safely and ride their motorbike or other machine safely on the roads? The answer was yes, so they were content. When I led the consultation, I was particularly keen to ensure that that aspect of it was landed.

My understanding is that the ask was for further funding from the public purse for training over and above the minimum requirement. That was reflected in a series of three local conversations, plus possibly a fourth, and then one at a national level with Motorcycle Action Group representatives across the UK. Its voice has certainly been loud, well listened to and carefully considered.

The Chairperson (Mrs Erskine): Thank you. You might not be able to give it to the Committee now, but I would like to see a breakdown of the funding specifically for departmental advertising over the past eight years. It would be really useful if you could provide the Committee with that.

Dr Hughes: Of course.

The Chairperson (Mrs Erskine): Following on from the Deputy Chair's point, we have asked some broadcasters for evidence on advertising, so, if you could provide the Committee with some figures from the Department, that would be great.

Dr Hughes: I am happy to.

The Chairperson (Mrs Erskine): We have run over, as usual. Thank you very much for your time today and for all your work on the road safety strategy for Northern Ireland. We really appreciate it.

Dr Hughes: Thank you for the opportunity, Chair.