



**PUBLIC AGENDA  
TRAFFIC SAFETY COMMITTEE**

**Tuesday, November 10, 2015, 8:45 a.m.  
Committee Room E, Ground Floor, City Hall  
Members**

**Mr. K. Claffey, Chair  
Ms. C. Janzen, Vice Chair  
Ms. S. Bater  
Sergeant D. Bryden  
Mr. J. Chan  
Mr. B. Girling  
Mr. D. Hingston  
Councillor A. Iwanchuk  
Mr. C. Kuhnke  
Mr. R. Meier  
Mr. A. Reichert  
Ms. D. Taylor**

**Pages**

**1. CALL TO ORDER**

**2. CONFIRMATION OF AGENDA**

**Recommendation**

That the agenda be confirmed as presented.

**3. ADOPTION OF MINUTES [FILE NO. CK. 225-8]**

**Recommendation**

That the minutes of regular meeting of the Traffic Safety Committee held on September 8, 2015 be adopted.

**4. TRAFFIC SAFETY COMMUNICATION/EDUCATION [FILE NO. CK. 225-8]**

**4 - 7**

The Chair will provide an update regarding a recent meeting with Rawlco Transit.

Carl Kuhnke will update the Committee regarding the SGI Project Evaluation Report which was submitted to SGI on behalf of the Traffic Safety Committee. SGI required this report to be submitted upon completion of the project with respect to the \$2,000 grant the Committee received. A copy of the report is attached.

**Recommendation**

That the information be received.

**5. REPORTS FROM ADMINISTRATION**

**6. MEETING SCHEDULE FOR 2016 [FILE NO. CK. 225-8]**

The following is a proposed schedule of meetings for 2016:

- Tuesday, January 12
- Tuesday, February 9
- Tuesday, April 12
- Tuesday, May 10
- Tuesday, June 14
- Tuesday, September 13
- Tuesday, November 8

**Recommendation**

That the meeting dates for the Traffic Safety Committee for 2016 be approved.

**7. NEW ISSUES RAISED BY COMMITTEE MEMBERS [FILE NO. CK. 225-8]**

<b>7.1</b>	<b>Pedestrian/Vehicle Accidents (A. Iwanchuk)</b>	<b>8 - 8</b>
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Information attached.

<b>7.2</b>	<b>Lorne Avenue Overpass - Signage (K. Claffey on behalf of G. Willie)</b>	<b>9 - 10</b>
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Information attached.

**7.3 Traffic Concerns (K. Claffey)**

- Add a white line on Cumberland between 8th Street and 7th Street. There are two driving lanes there, and there should also be a sign indicating that the right lane ends at the end of the block near 7th Street.
- Needs to be an added lane sign when turning right (heading north) from Hart Road east on 22nd Street.
- 23rd Street and 5th Avenue there needs to be a 4-way stop now that there are bike lanes. Visibility concerns.
- Concern about the bike lane on 4th Avenue and when parallel parking. Licence plates needed for bikes so they can be accountable for damages.
- 19th Street and 3rd Avenue needs to be a "this lane must turn left" sign (facing east).
- One way sign when behind Midtown Plaza going onto Auditorium

Avenue.

- Walk lights are burned out on a lot of the intersections on 8th Street.
- Needs to be an added lane sign on Circle Drive heading south where College Drive merges on to Circle Drive to go to 14th Street.
- 3rd Avenue and 25th Street - the left turn lane heading north is way too narrow. Needs to be wider.
- Advisory sign at the cloverleaf interchange needs to be changed from 30 to 40 km.

#### **7.4 Bicycle Helmet Safety Study (C. Kuhnke)**

11 - 12

Information attached.

### **8. ADJOURNMENT**

**SGI and the Acquired Brain Injury Pilot Project  
Community Grants Program**

Project Evaluation Report

*Please complete and return this evaluation form within 4 weeks of the completion of your funded project. If your project is ongoing, please complete and return this form as a status report before October 31, 2015. Attach more pages if additional space is required.*

*Forward to:*

Shannon Ell  
Supervisor  
SGI Traffic Safety Promotion  
5104 Donnelly Cres.  
P.O. Box 1580  
Regina, SK S4P 3C4  
Fax: (306) 359-0312

**Date:** October 30, 2015

**Name of program:**

**Saskatoon Transit System Bus Backboard Media Campaign**

**Coordinating agency:**

**City of Saskatoon Traffic Safety Committee**

**1. Activities undertaken:**

A bus backboard campaign was undertaken to highlight the dangers of intersections and the need for extreme caution when entering one, whether or not the right-of-way is yours. The advertisement focused on a crushed bicycle at an intersection with a child's bike helmet lying on the ground

**2. Location:**

Community in which project was delivered:

The backboard graphic was designed in Saskatoon and mounted on STS buses throughout the city, maximizing on the budget permitted.

**3. Activity period:**

When was the project delivered? (Please indicate start date/time and end date/time.)

The ads commenced in May of 2015 and are still mounted. The intended stop date was this month but we have received a free extension on the campaign from the advertising managers at Rawlco, through to the end of December. This will cover the early winter and Christmas seasons also.

**4. Partners:**

Please indicate volunteers, agencies and businesses that helped with your project.

Saskatoon Transit, Rawlco, Saskatoon Public Schools, Saskatoon Police Services, and the volunteer efforts of members of the Saskatoon Traffic safety Committee

**5. Resources:**

Indicate the expertise of the person who delivered your program.

Rawlco manages the bus backboard advertising for Saskatoon Transit. It is a media firm. The bus backboard example is attached to this submission.

**6. Target group:**

How many people attended your program? **The backboards were mounted on a number of city buses, randomly selected and changed to create maximum exposure to drivers, pedestrians and others.**

What was your target group? **Anyone on the roads of Saskatoon either following or seeing the back of a city bus**

Did the participants come from your target group? **Not necessarily – members of the public.**

Were there participants from other communities? **The member organizations of the Traffic Safety Committee were all involved**

If attendance is not applicable, how many people would you estimate were reached by your efforts? **Please see summary attached. Members of the Committee surveyed colleagues, family members and members of the public-at-large to get empirical data/results.**

**7. Publicity:**

Did your event receive media attention or other free publicity? Please describe.

**As above – these were publically viewable.**

**8. Financial:**

Please attach a summary of the actual vs. budgeted revenues and expenditures for your project.

**We matched the \$2000 received from SGI and invested \$4000 in the campaign**

**9. Outcome:**

Did you meet the intended goals of your project?

**Absolutely. Citizens were apprised of the inherent dangers of intersections, no matter how well-signaled and controlled**

What effect has your project had on your community?

**Unknown without a much larger and well-sampled survey, which would cost more than the campaign itself.**

Do you consider your project a success? Why? Please describe the things that went well, and the things you would do differently.

**Yes, from the results attached. Clearly more buses would result in more viewership and more awareness. One cannot gauge, however, the effectiveness of this campaign without a larger sample and crash results specifically related to intersections at which the campaign focused.**

**10. Future plans:**

Do you plan to do a similar project again?

**We would happily do this again next year, with assistance from SGI.**

Thank you!



## SURVEY RESPONSES

### Question Posed:

Have you seen this ad on Saskatoon Transit System Buses?  
(with picture above shown)

### Responses (of 175 total survey, in person)

Yes, definitely: 25

Possibly but not certain: 16

No, not that I recall: 134

41 'yes or possibly' out of the universe of 175 is a 23.4% response rate, or almost one in four. While this does not lead to any definitive conclusions, a quarter of those surveyed did see it, or think they saw it. This may also be an indicator of driving habits, good or bad, regarding distracted driving, but a conclusion cannot be drawn.

## Fast, Joyce (Clerks)

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**Subject:** FW: Pedestrian/Vehicle Accidents

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**From:** Iwanchuk, Ann (City Councillor)  
**Sent:** October 27, 2015 3:32 PM  
**To:** Fast, Joyce (Clerks)  
**Subject:** Pedestrian/Vehicle Accidents

Hi Joyce - I would like to add this to the agenda for the next Traffic Safety Committee.

Thanks,  
Ann

## MD Ambulance Care

MD Ambulance Care, October 27<sup>th</sup>, 2015 – An increase in the number of pedestrians being hit by vehicles has prompted Paramedics to ask drivers and pedestrians to be aware. In August of 2015, Paramedics responded to 14 people being struck by vehicles which is an increase of 50% vs. last year (2014- 7) almost averaging 1 every second day. In September of this year Paramedics responded to 17 calls for pedestrian being struck over the 14 from 2014.

“The fact is any pedestrian struck by a vehicle is always going to come out on the losing end, whether it’s the drivers fault or the pedestrians” states Troy Davies MD Ambulance spokesperson. “Our paramedics have noticed this trend increasing and we wanted to release this information so that drivers remember to limit the amount of distractions in their vehicles and pedestrians make eye contact with drivers before crossing the street. With Winter coming right around the corner drivers will lose the ability to stop on a moment’s notice”.

Paramedics have also responded to 13 cyclists who were struck by a vehicle in August and September of this year. This is two more than last year at this time.

----- End forwarded message -----

Ann Iwanchuk  
City Councillor, Ward 3  
Cell: 306.380.6870

## Fast, Joyce (Clerks)

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**Subject:** FW: Lorne Avenue exit - west bound on Circle Drive South  
**Attachments:** Lorne Avenue overpass signage.pdf

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**From:** Claffey, Ken [<mailto:ClaffeyK@spsd.sk.ca>]  
**Sent:** October 05, 2015 9:35 AM  
**To:** Fast, Joyce (Clerks)  
**Subject:** FW: Lorne Avenue exit - west bound on Circle Drive South

**From:** Gregg Willie [<mailto:gregg.willie@gmail.com>]  
**Sent:** Monday, October 5, 2015 9:17 AM  
**Subject:** Lorne Avenue exit - west bound on Circle Drive South

There was an accident at the Lorne Avenue exit from Circle Drive south westbound this weekend.

I work over in the south industrial area now (Bioriginal Food and Science on Lorne and Melville) so use this exit all the time.

I see lots of semis make a sudden move from the main lanes on Circle into the Lorne Avenue exit, right where the accident happened.

I think the issue is signage. Once you come over the overpass that jumps the south bound Idyllwild Drive lanes that join Circle drive south headed east you start to take the Lorne Avenue exit. As you get closer to Lorne Avenue you can see a sign mounted on the Lorne Avenue overpass over the Lorne Avenue exit lanes marking Hwys 11, 16 and Circle Drive West (I think). This sign is for the people exiting off of Idyllwild and heading west on Circle south but seems to confuse the out of town truckers who think they are in the wrong lane at an exit and swing to the right as they approach the exit. Sometimes this move is very late, sort of an accident waiting to happen! I probably see a truck do this once every week or two on my commute.

An additional sign on the Lorne Avenue overpass marking the straight through lanes in the same way as the Idyllwild exit lane is marked would eliminate this.

I attach a marked up Google map showing where the sign is currently and where an additional sign might reduce the chances of more accidents.

I had noticed this a while ago and meant to send an email, the accident this weekend reminded me to quit delaying!

Thanks for passing this along to the committee!

Regards,

Gregg

New Saskatoon Bridge...

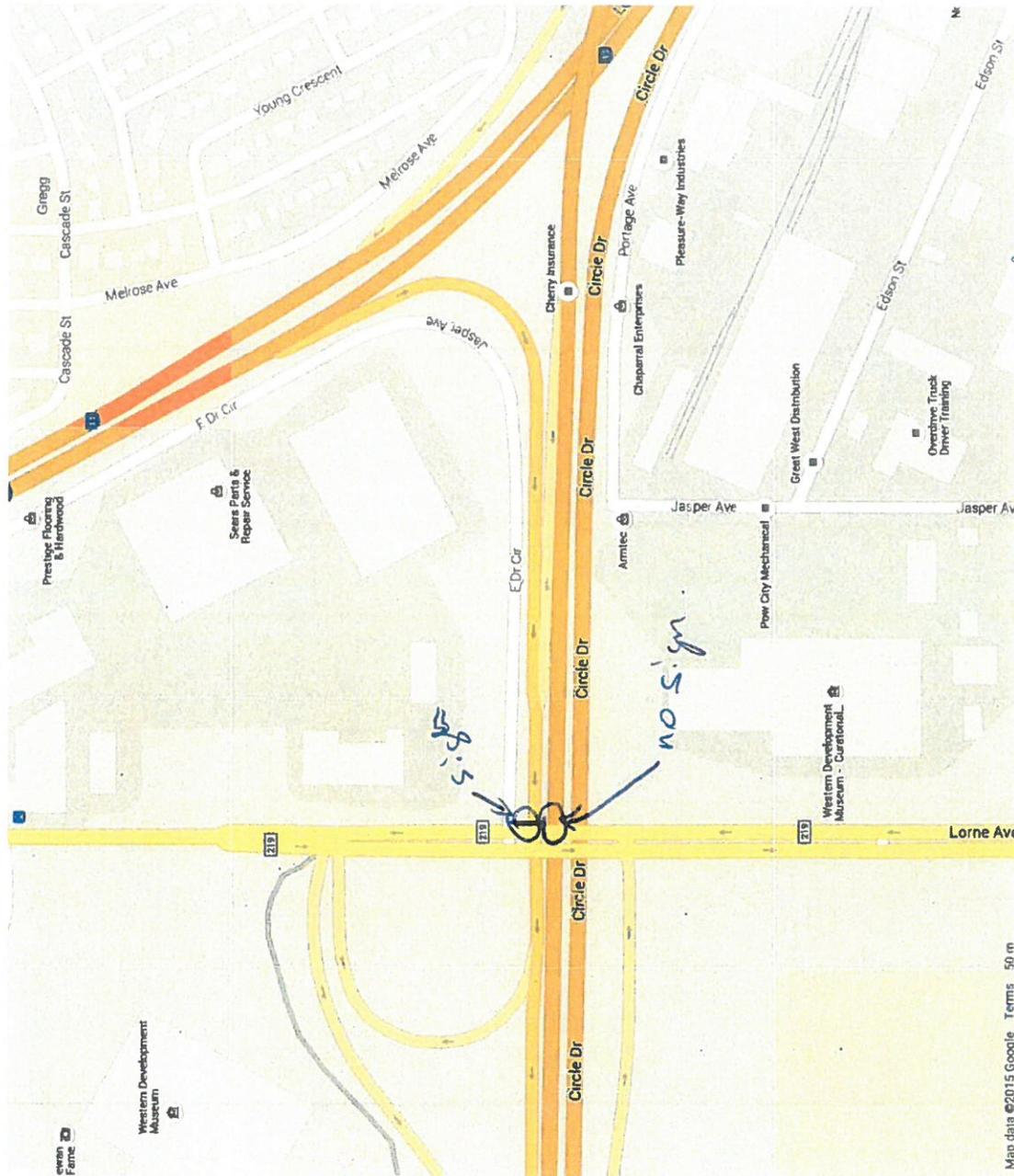
The newest Saskatoon Bridge on Circle Drive South crossing the Saskatchewan River to connect the east and west sides of the city.

645 views

SHARE

Untitled layer

New Saskatoon Bridge



Made with Google My Maps

Map data ©2015 Google Terms 50 m

# Helmeted Bicycle Riders Have Significantly Reduced Severity of Injury and Lower Death Rates After an Accident

*A new study indicates an injury protection need to make cyclists' helmets more protective and helmet laws stricter*

## NEWS FROM THE AMERICAN COLLEGE OF SURGEONS

CHICAGO (October 8, 11:15 am CT): Helmeted bicycle riders have a 58 percent reduced odds of severe traumatic brain injury after an accident compared to their non-helmeted counterparts, according to researchers from the University of Arizona, Tucson. Their findings were presented today during the 2015 Clinical Congress of the American College of Surgeons.

The researchers performed an analysis using the 2012 National Trauma Data Bank (NTDB) of the American College of Surgeons, analyzing records of 6,267 patients who had a traumatic brain injury after a bicycle related accident. Among the group of patients, just over 25 percent were wearing helmets.

“We know for a fact that helmets help you prevent head bleeds in case you get into a bicycle-related accident,” said Ansab Haider, MD, one of the study coauthors. “But the real question was, if you get into a bicycle-related accident and end up with a head bleed, does helmet use somehow protect you?”

The researchers found that among this group of patients—those who sustained traumatic brain injury after a bicycle related accident—the ones wearing helmets had a 58 percent reduced odds of severe traumatic brain injury and a 59 percent reduced odds of death. Further, the use of helmets reduced by 61 percent the odds of craniotomy (an operation to remove part of the bone from the skull to expose the brain) and facial fractures by 26 percent.

“If you are severely injured and you were wearing a helmet, you are going to fare better than if you were not,” said Bellal Joseph, MD, FACS, lead study author. “When you hone in on that severe group of people who actually developed a brain injury, and then look at how they did, the helmet really made a difference.”

The researchers also looked at the impact of age and gender on bicycle accidents where a traumatic brain injury occurred.

“We tried to see how the pattern of helmet use varied over different age groups,” Dr. Haider said. “The lowest incidence of helmet use was seen in the age group of 10-20 years of age. But as we went up every 10 years, the likelihood of helmet use went up.”

Drs. Joseph and Haider said that the trend of helmet use increasing with age continued to rise with each decade of life, until the age of 70, when the rate went back down for the first time. They also found that females are more likely to wear helmets than males.

The researchers also found that in the patients they studied, the likelihood of facial fractures was higher for those who weren't wearing a helmet at the time of the accident. Dr. Haider said that helmet use helped prevent fractures to the upper part of the face, including the area around the eyes, the orbital lobe. However, helmet use wasn't as effective at preventing fractures to the lower part of the face, such as mandibular jaw or nasal fractures.

As a result of their findings, Drs. Haider and Joseph said that the next step is to create injury prevention programs to increase helmet use among bicyclists, to manufacture better helmets, and to develop and enforce stricter laws for helmet use. They said that they already participate in many prevention programs in Tucson, which is a very bike-friendly city.

“That’s where future efforts need to focus in on—making helmets that really make a difference,” Dr. Joseph said. “Ultimately, the important message is patient care and how we can make our patients safer and more protected. We need to take this data and take it to the next level and move forward with policy and injury prevention, especially for the younger age groups.”

Other study participants included Peter M. Rhee, MD, FACS; Mazhar Khalil, MD; Narong Kulvatunyou, MD, FACS; Bardiya Zangbar Sabegh, MD; Terence O'Keeffe, MBChB, FACS; Andrew L. Tang, MD, FACS; Rifat Latifi, MD, FACS; and Randall S. Friese, MD, FACS.

*“FACS” designates that a surgeon is Fellow of the American College of Surgeons.*

[Read the abstract](#)

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### **About the American College of Surgeons**

The American College of Surgeons is a scientific and educational organization of surgeons that was founded in 1913 to raise the standards of surgical practice and improve the quality of care for all surgical patients. The College is dedicated to the ethical and competent practice of surgery. Its achievements have significantly influenced the course of scientific surgery in America and have established it as an important advocate for all surgical patients. The College has more than 80,000 members and is the largest organization of surgeons in the world. For more information, visit [www.facs.org](http://www.facs.org).