NABSA Webinar: Shared E-Scooter Safety June 25, 2019 THE FUTURE IS SHARED



Your Presenters



Talia Pindyck

Epidemic Intelligence

Service (EIS) Officer,

Center for Disease

Control and Prevention



David ZaneInjury Epidemiologist,
Austin Public Health



Tarak Trivedi
Emergency Medicine
Physician and
Researcher, UCLA



Rachel Zack
Policy Strategist, Remix

Your Facilitator



Sam HerrExecutive Director,
NABSA

Injuries Associated with Standing Electric Scooter Use

Santa Monica and Los Angeles, California, 2017-2018

Tarak Trivedi MD, MS

C. Liu MD, A. Antonio DrPH, N. Wheaton MD, V. Kreger MD, A. Yap MD
D. Schriger MD MPH, J. Elmore MD MPH



Standing Electric Scooters

Santa Monica: September 2017

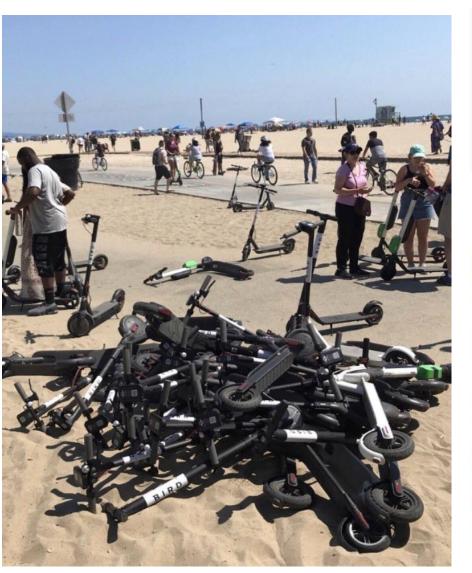




Transforming Transportation



...with real challenges







Impetus and Aim

- Traumatic injuries, mild to severe
- Research opportunity due to location
- Policy actively changing without solid evidence base
 - California law passed making helmets optional for adults
- Aim: Characterize the types of patients and injuries associated with electric scooter use



Methods

- Text search of all ED encounter notes at 2 major hospitals in West LA County
 - Ronald Reagan Medical Center and Santa Monica Hospital
 - September 2017 2018
 - Searched for specific terms: "scooter", "lime", "bird"
- Case identification and full manual review of the charts determined to be electric scooter associated injuries
- 4 datasets merged
 - ED visit characteristics
 - Imaging tests ordered
 - Diagnosis codes
 - ED Physician and Nursing notes

Methods: Automating Case exclusion

 Used Stata programming to identify cases and exclude to limit charts needing manual review

Examples

- "thunderbird blvd"
- "mobility scooter"
- "slime"
- "lime disease"

```
* Created shortned data to process
cap drop defyes
gen defyes=1 if is bird and scooter==1
replace defyes=1 if is lime and scooter==1
replace defyes=0 if index(note text,
replace defyes=1 if index(note text, "byrd scooter"
replace defyes=0 if index(note text, "mobility scooter")
replace defyes=0 if index(note text, "slime") & defyes=
replace defyes=1 if index(note text, "riding a bird") & defyes==.
replace defyes=1 if index(note text, "riding a "bird"") & defyes==.
replace defyes=1 if index(note text, "segway scooter") & defyes==.
replace defyes=1 if index(note text, "bird accident") & defyes==.
replace defyes=0 if index(note text, "lime away") & defyes==.
replace defyes=0 if index(note text, "cutting a lime") & defyes==.
replace defyes=0 if index(note text, "ladybird") & defyes==.
replace defyes=0 if index(note text, "lime disease") & defyes==.
replace defyes=0 if index(note text, "sublime") & defyes==.
replace defyes=0 if index(note text, "lime oil") & defyes==.
replace defyes=0 if index(note text, "lime green") & defyes==.
replace defyes=0 if index(note text, "power scooter for mobility") & defyes==.
```

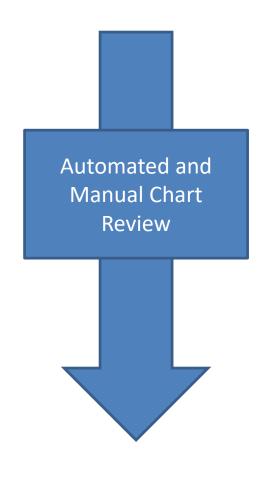
523 Emergency department encounters with medical record entry containing "scooter" OR "lime" OR "bird"

79 Excluded "Bird" or "lime" referred to in a different context, such as a name of a person or street or the animal or fruit 91 Excluded (wrong type of scooter) 48 Nonmotorized (eg, Razor) 18 Motorcycle or moped (eg, Vespa) 17 Mobility wheelchair 6 Knee scooter for injuries 2 Segway 17 Excluded event related to their intended use (eg, assault using scooter as weapon, lawsuit against scooter company, attempt to steat scooter) 13 Excluded Repeat visits for the same patient event (eg, suture removal, continued pain) 74 Excluded

Nonspecific type of scooter (insufficient information

available in chart)

Initial Search: 523 Visits



Final Count: 249 injuries

249 Emergency department encounters for standing electric scooter injuries

| Characteristic | Number (%) |
|----------------|------------|
| Total Patients | 249 |
| Riders | 228 (92%) |
| Non-riders | 21 (8%) |

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| Fall | 183 (80%) |
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| Blood alcohol level > 0.05% or documented as intoxicated | 12 (5%) |

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| Chest | 43 (17%) |
| CT scan | |
| Head | 74 (30%) |
| Head and cervical spine | 45 (18%) |
| Head, cervical spine, chest, abdomen, pelvis ("Pan-Scan") | 21 (8%) |

| Injury Characteristics | Number (%) |
|---------------------------|------------|
| Any fracture | 79 (32%) |
| Forearm/Wrist/Hand | 48 (20%) |
| Upper Arm/Shoulder | 17 (7%) |
| Face | 14 (6%) |
| Knee/Lower Leg/Ankle/Foot | 11 (4%) |

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| Head injury | 100 (40%) |
| Intracranial hemorrhage | 5 (2%) |
| | |

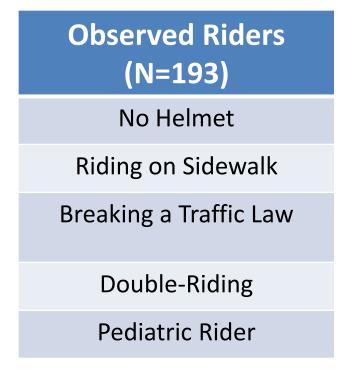
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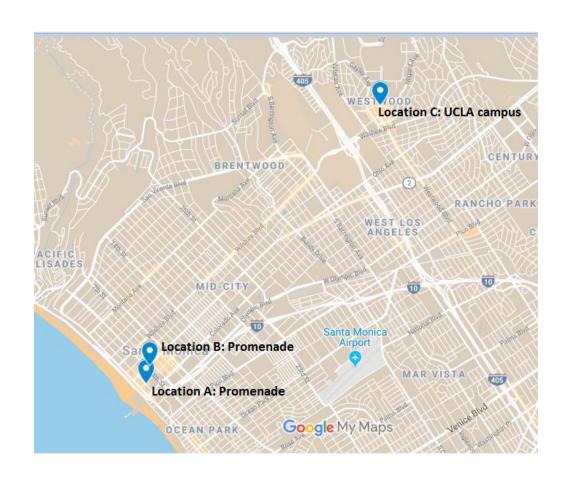
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| Contusions, sprains | 69 (28%) |
| Major intra-abdominal or intrathoracic injuries | 3 (1%) |

| Characteristic | Number (%) |
|---------------------|------------|
| ED disposition | |
| Home | 234 (94%) |
| Admit to floor | 13 (5%) |
| Intensive care unit | 2 (1%) |

Methods: Observational Component

- 3 Locations, 7 hours
- Weekdays and Weekend
- 5 Variables recorded





Methods: Observational Component

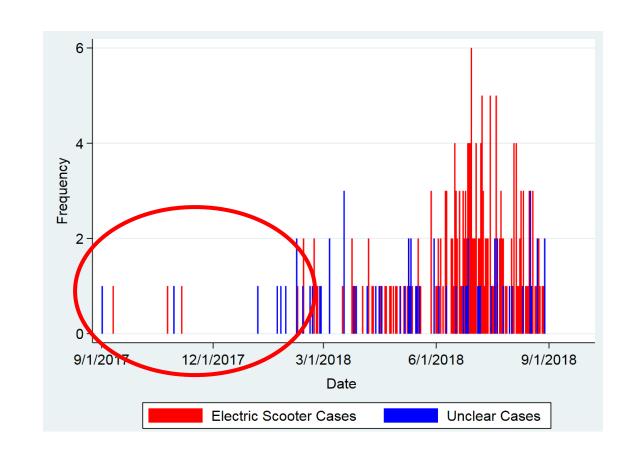
- 3 Locations, 7 hours
- Weekdays and Weekend
- 5 Variables recorded

| Observed Riders (N=193) | % |
|----------------------------|----------|
| No Helmet | 94% |
| Riding on Sidewalk | 26% |
| Breaking a Traffic Law | 9% |
| Double-Riding | 8% |
| Pediatric Rider | 5% |



Limitations and Considerations

- Did not have the ability to calculate a "rate"
- No comparison to other modes of transportation (bicycles)
- Limited information on mechanism
- Scooter use low in the first 6 months during initial roll-out



- 74 unclear cases
 - "Patient was riding a scooter"

Discussion

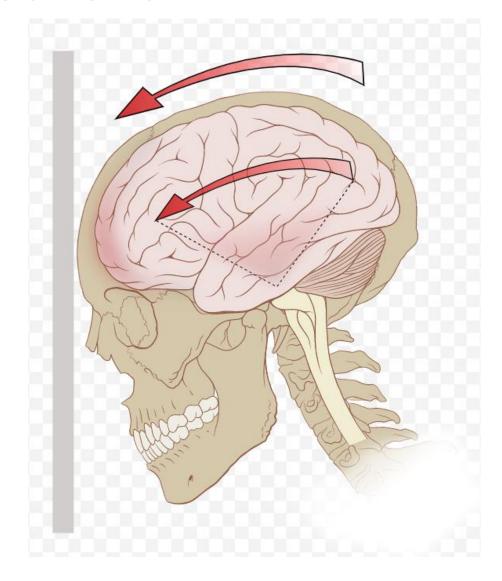
Electric scooters have the potential to lead to significant injuries

Existing regulations are seldom followed

 Transportation is often governed at local levels, a variety of policy solutions are being implemented, and best-practices policies should be identified.

Future Directions

 Longer-term consequences of injuries, especially concussion syndromes



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 Building data collection into Emergency Department triage work-flow



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 Changing the culture around helmet use through incentives or design







DOCKLESS ELECTRIC SCOOTER-RELATED INJURIES STUDY



Austin, Texas

SEPTEMBER- NOVEMBER 2018

E-Scoters

- Stand up
- Rented
- Speeds ~15 mph
- Electric power
- Dockless



Methods

Methodology

- Place: City of Austin, Texas
- Time: September 5 November 30, 2018
- Persons: sustained injury related to e-scooter identified through keyword searches
 - 1. Austin-Travis County Emergency Medical Services
 - 2. Hospital Emergency Department chief complaint from syndromic surveillance

Data collection

Patient interviews through telephone questionnaire
 Demographic
 Clinical
 User-specific
 Environmental

- Supplemented with EMS call reports

 Medical charts, when available
- Publicly available Fleet Data (Austin Transportation Department)

| | Confirmed |
|-----------|----------------------|
| Interview | D/R Electric Scooter |

| Medical | D/R Electric |
|---------|--------------|
| Report | Scooter |



| | Confirmed | Probable |
|-----------|-------------------------|----------|
| Interview | D/R Electric Scooter | |

| Medical | D/R Electric | Electric |
|---------|--------------|----------|
| Report | Scooter | Scooter |



| | Confirmed | Probable | Suspect |
|-----------|-------------------------|----------|---------|
| Interview | D/R Electric Scooter | | |

| Medical | D/R Electric | Electric | Canatan |
|---------|--------------|----------|---------|
| Report | Scooter | Scooter | Scooter |

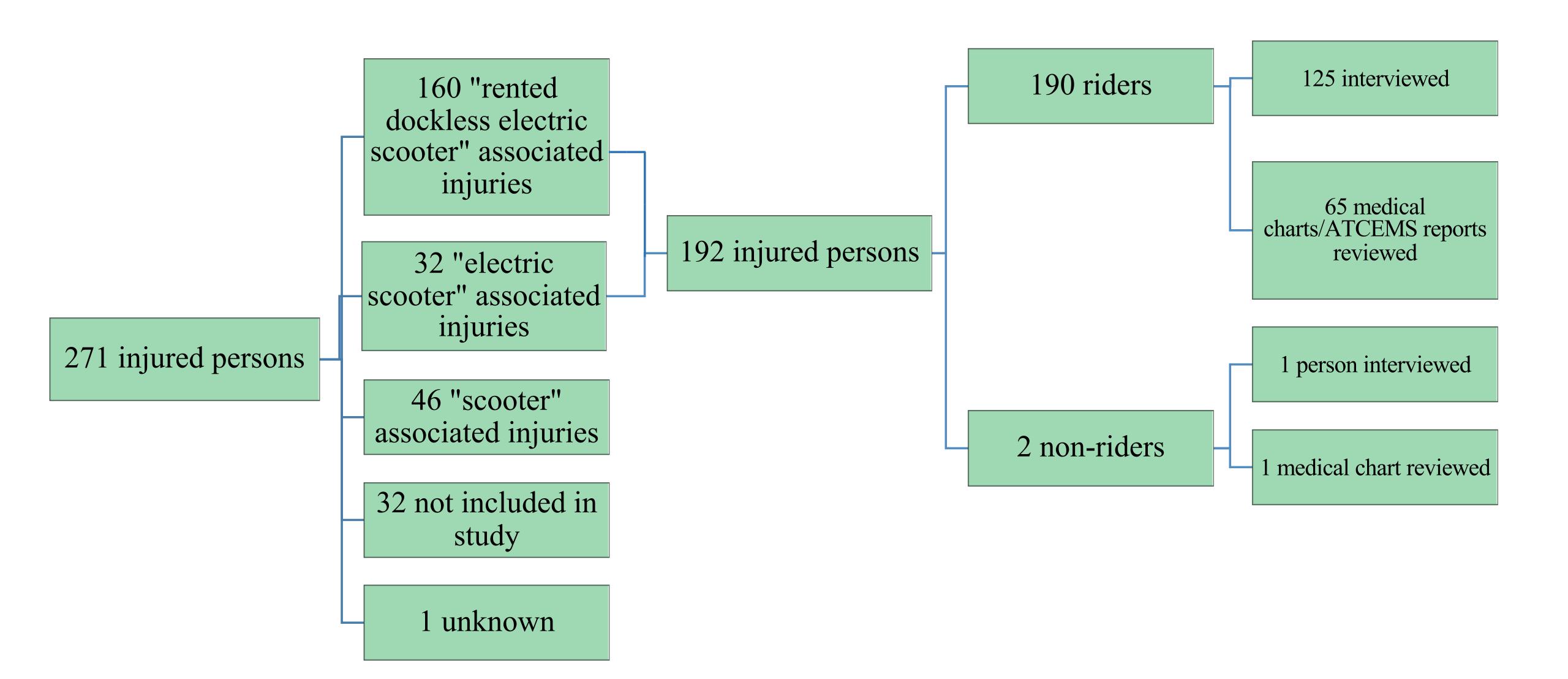


| | Confirmed | Probable | Suspect | Not a Case |
|-----------|-------------------------|----------|---------|------------|
| Interview | D/R Electric Scooter | | | Denied |

| Medical | D/R Electric | Electric | Coooton | |
|---------|--------------|----------|---------|--|
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Outcomes of classifying persons



Injury rate

- During the study period:
 - 190 injured riders
 - 936,110 e-scooter trips

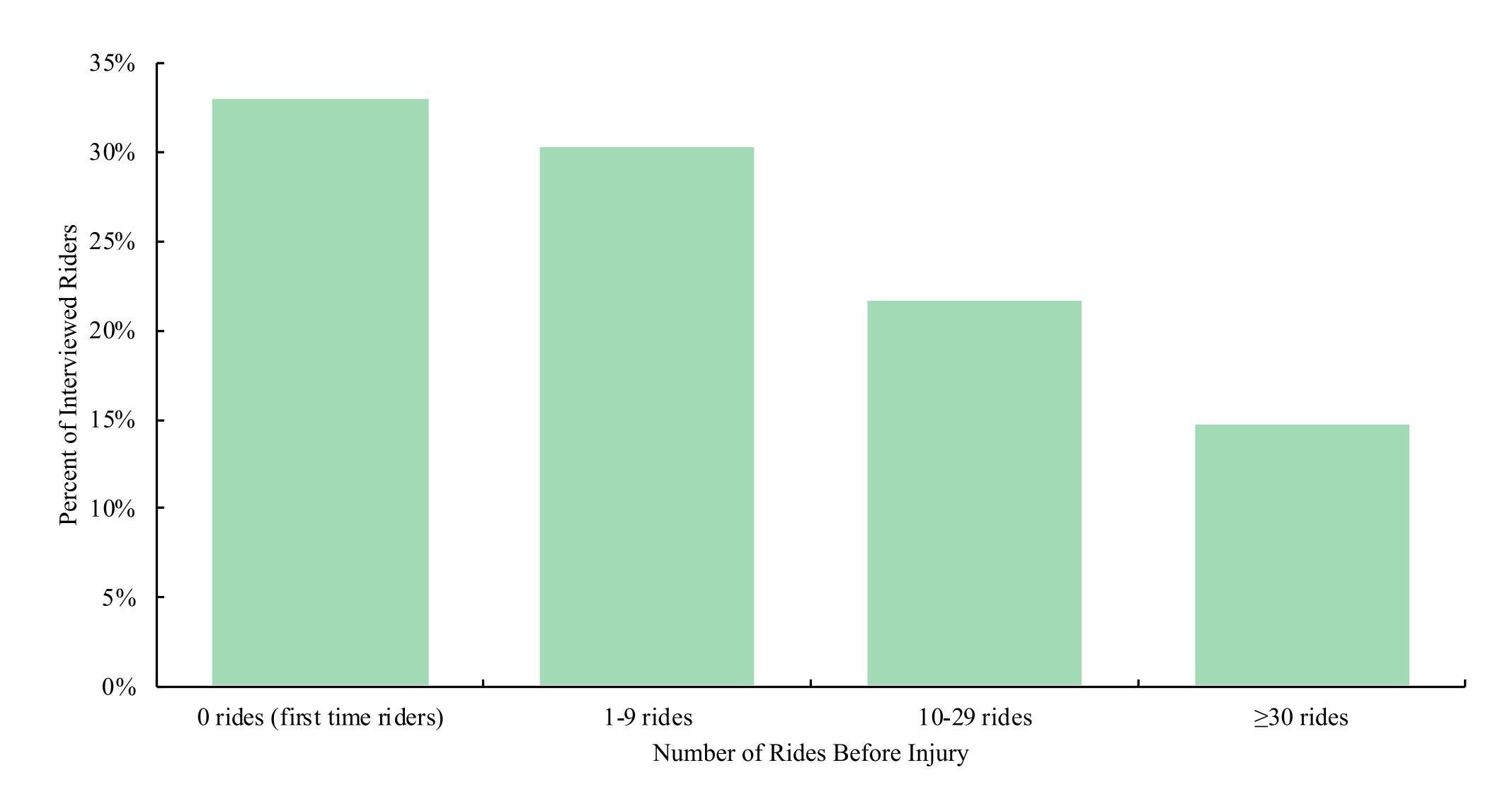
 About 20 persons injured per 100,000 e-scooter trips

Who were the riders?

- Over half (55%) were males
- Ranged in age from 9 to 79 years
 - oNearly half (48%) were 18 to 29 years of age
- Most (60%) resided in Austin

Scooter Rides Before Injury

First time electric scooter rider – 33%



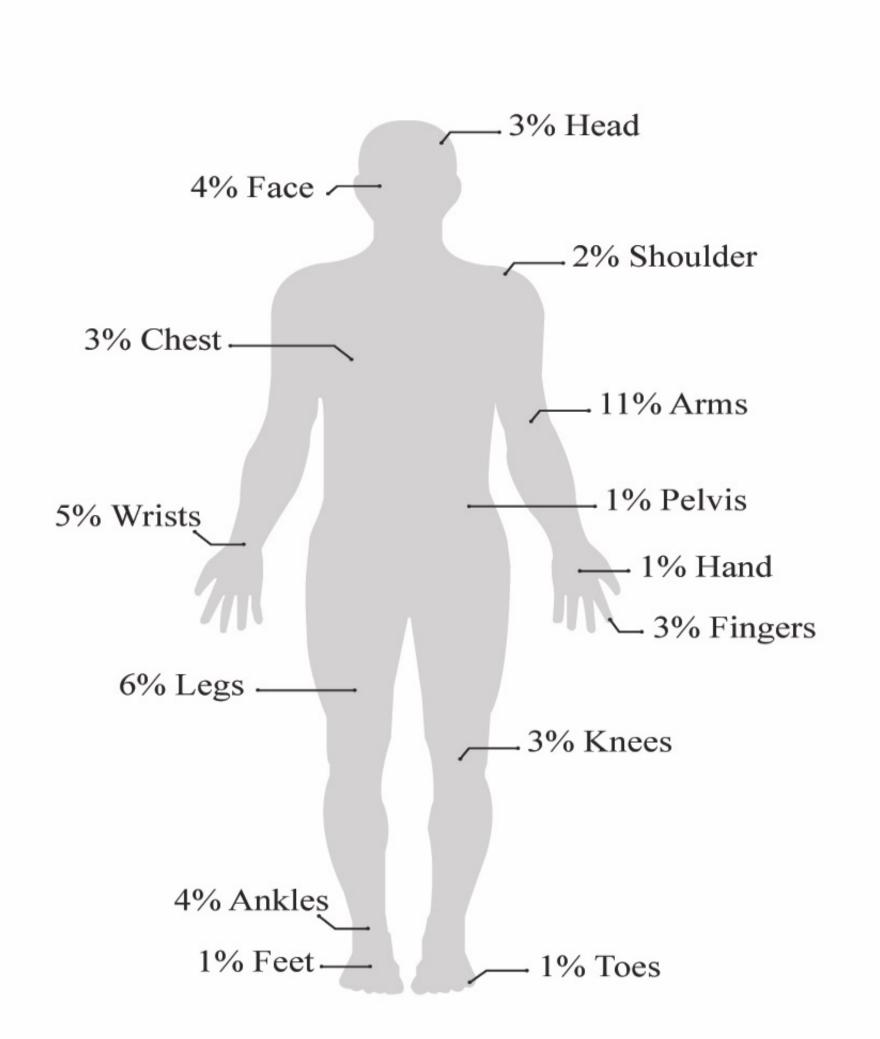
How serious were the injuries?

- 42% of the 190 riders had a serious injury*
- 7% sustained a traumatic brain injury

Where were riders injured?

- Head 48%
 - Face 40%
- Upper limbs 70%
- Chest/abdomen 18%
- Lower limbs 55%

Bone fracture locations



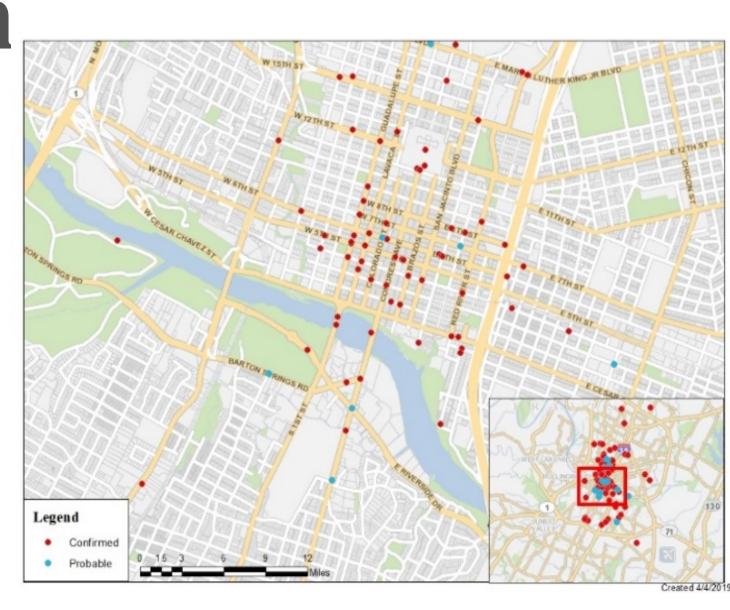
78 persons sustained at least one fracture

Injured riders

- 14% were hospitalized
- No deaths
- Only one rider (<1%) was wearing a helmet

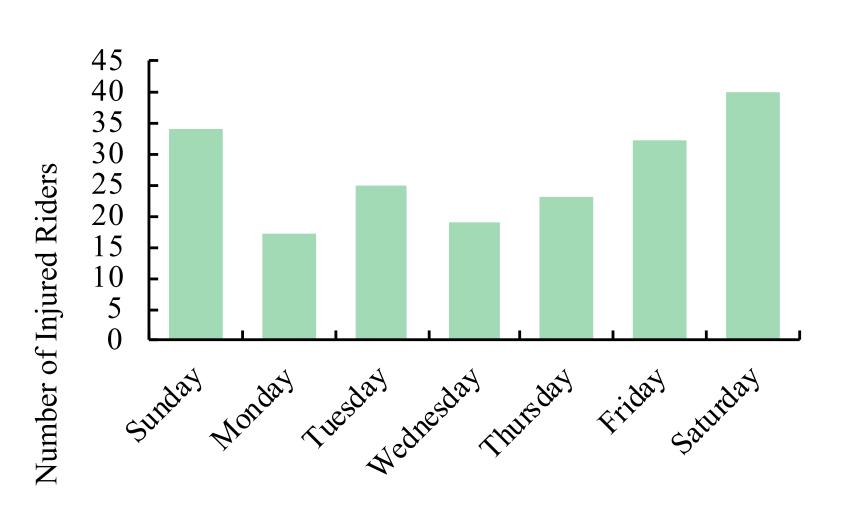
Geographic Characteristics

- Downtown Austin 31%
- University of Texas at Austin campus – 16%
- Injured while riding scooter on street – 55%
- Injured while riding scooter
 on sidewalk 33%



When were riders injured?

- About two injuries per day
- Saturday or Sunday 39%
- Between 6:00pm and 6:00am 39%



Day of the Week

Circumstances of incidents

- Involved a motor vehicle 16%
- Involved colliding with a motor vehicle 10%
- Others involved curb (10%), and inanimate object (7%)

Additional Information

- Drinking alcohol beverages within 12 hours preceding injury – 29%
- Excessive speed 37%
- Possible scooter malfunction 19%
- Believed surface conditions contributed to incident 50%
- Received training via scooter companies' phone application – 60%

Key findings

- First time using an electric scooter 33%
- Limited helmet use <1%
- Traumatic brain injury 7%
- Few collisions with motor vehicles 10%

Acknowledgements

| Austin Public Health | Centers for Disease Control and Prevention |
|----------------------|--|
| Jeff Taylor | Laurel Harduar Morano |
| David Zane | Talia Pindyck |
| Alice Tisdale | Sara Blythe Ballard |
| Jessica Stradford | Anjoli Anand |
| Ashley Hawes | Alexis Peterson |
| Flor Hernandez-Ayala | Erin Sauber-Schatz |

Acknowledgements

- Austin-Travis County EMS
- 9 area hospitals
- Austin Transportation Department
- Injured individuals that we interviewed

Questions?

Austin Public Health Contact Information:

- David Zane (david.zane@austintexas.gov)
- Jeff Taylor (<u>Jeff.taylor@austintexas.gov</u>)

Cities + Scooter Safety

Prepared for NABSA 6/25/2019





Our vision is to empower cities to manage all aspects of transportation and create equitable, safe, and accessible outcomes.







How are cities encouraging safe scooter programs?



Themes we will review

- → Infrastructure
- → Speed
- → Vehicle technology
- → Education
- → Enforcement



Courtesy of SFMTA



Infrastructure + Speed

Stats from Austin:

- \rightarrow 55% injured in the street
- → 50% believed a pothole or crack contributed to their crash
- → 37% reported that excessive scooter speed contributed to their injury

Stats from SF:

- → 58% of SFPD collisions occurred on the high injury network
- \rightarrow 83% of crashes occurred in the roadway





Courtesy of NY DOT



Vehicle Technology

Stats from Austin:

→ About ¼ were injured on the sidewalk

Stats from Santa Monica:

→ 8% of crashes were pedestrians (half hit by scooter, half tripped over scooter)



Courtesy of SFMTA



Education & Enforcement

Austin Study

- \rightarrow 33% were taking their first ride
- \rightarrow 30% were taking their 1-9 ride

Figure 6 -Complaints Received by SFMTA by Month¹⁴







Thank you



Q



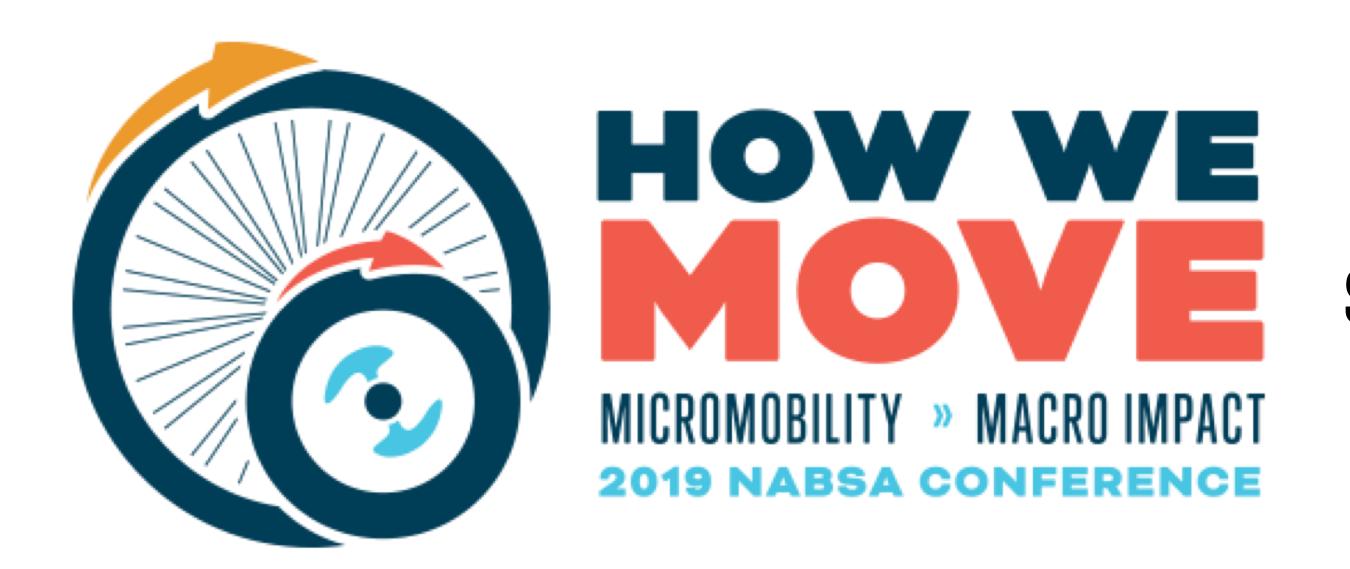
NABSA SHARED E-SCOOTER SAFETY PRINCIPLES AND RESOURCES

Shared e-scooters have quickly become a popular way for people to get to where they need to go. However, injury rates of riders in cities where they are deployed have raised flags for regulators, media, healthcare professionals, researchers, and operators alike.

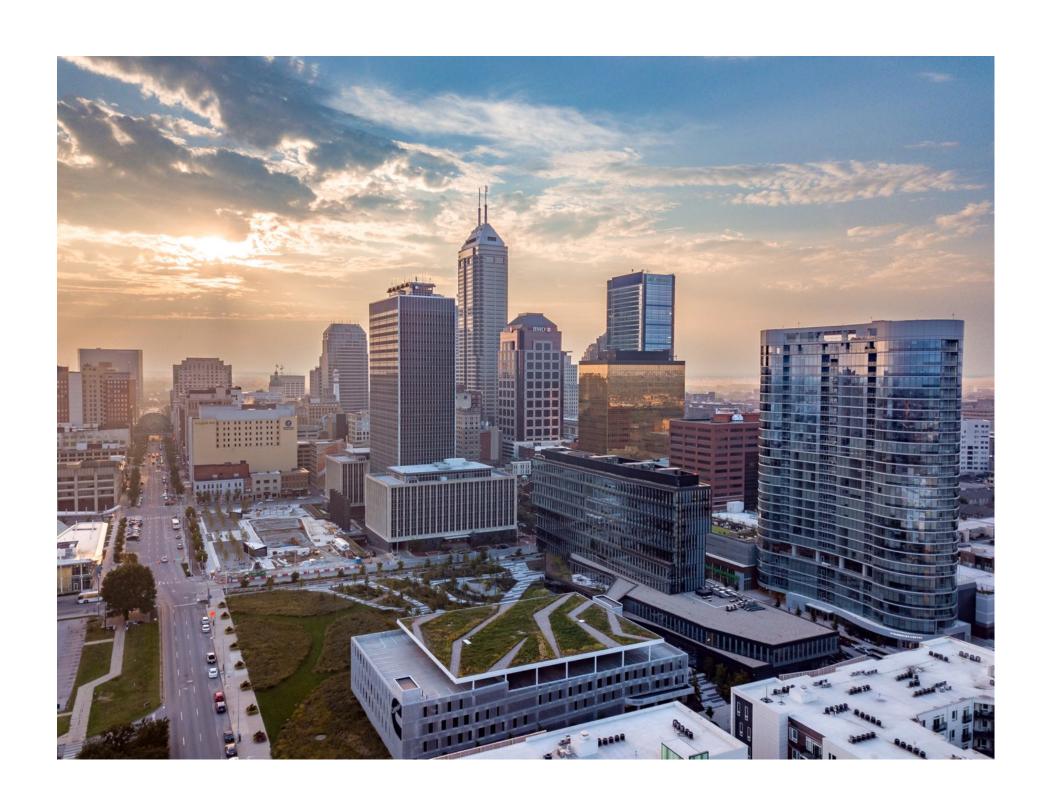
The popularity and rapid adoption of shared e-scooters in communities across North America speaks to the positive impacts that they can offer as a mobility option- low cost, low carbon, first/last mile connection, and more. And, this mode is still new for riders, operators, and regulators. Because so many people and communities are affected by this innovation in the way we move through cities, the safety of the vehicles and the places where they are ridden is paramount.

As detailed in the NABSA Code of Conduct, the association is dedicated to Safety, Cooperation, and Transparency in the bikeshare and shared micromobility industry. With this in mind, NABSA offers the following information to encourage safety as shared e-scooters are piloted and adopted in communities across North America.

· Shared e-scooters as a mobility mode are new, and only just beginning to produce the data we need to draw concrete conclusions. Preliminary research has been conducted by the Austin Public Health with support from the CDC, UCLA, and the City of Baltimore that



2019 Conference September 30 - October 2 Indianapolis, Indiana







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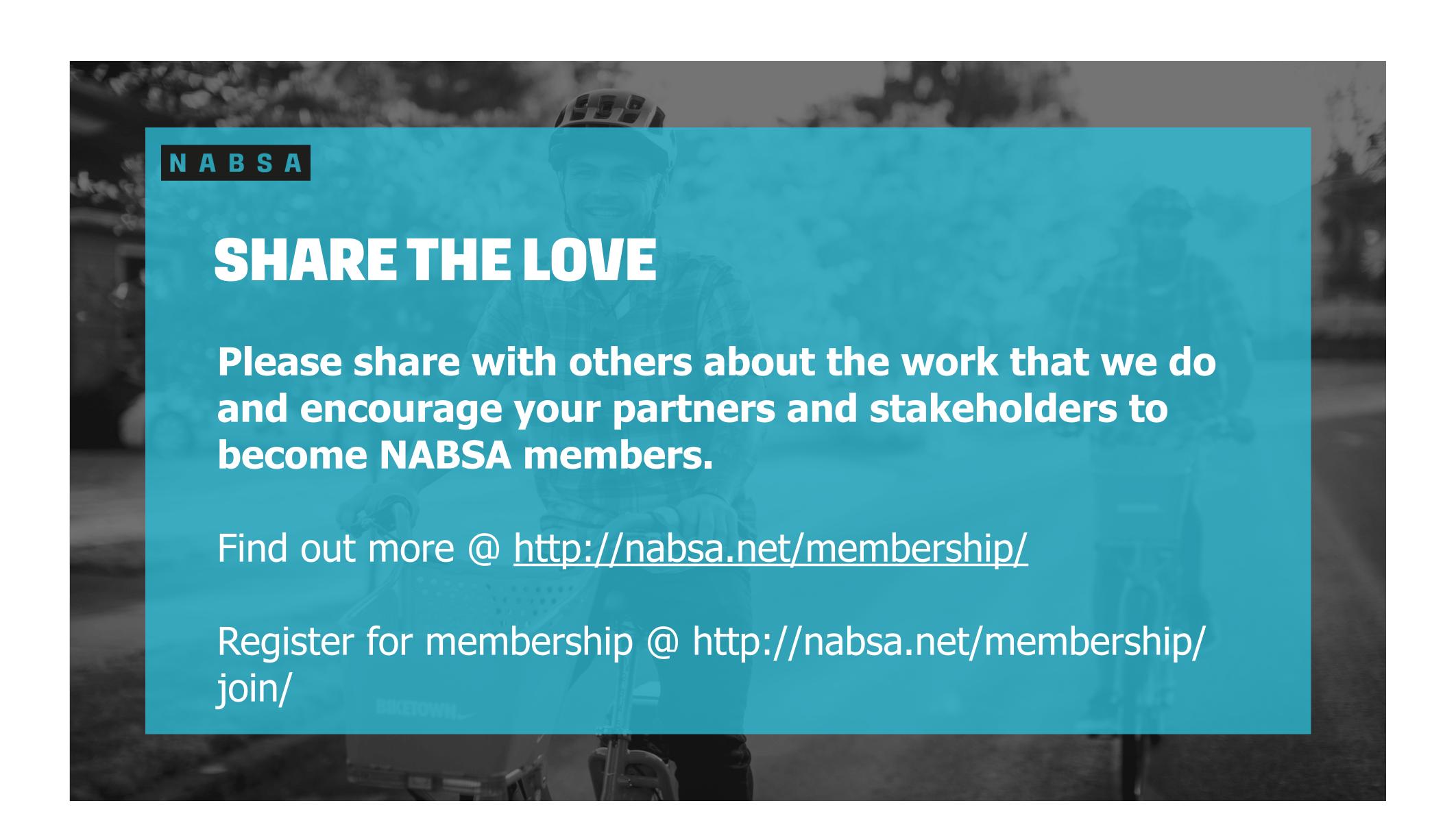
- 1) **Sign up for a Knowledge Share database account** at https://nabsa.net/sign-in-sign-up/ for unlimited access to hundreds of resources and members-only webinars.
- 2) **Sign up for the NABSA newsletter** and important announcements by subscribing on the homepage at <u>nabsa.net</u>.
- 3) Participate in the NABSA members-only email listserv. If you are not yet on the list, email executivedirector@nabsa.net to be added.

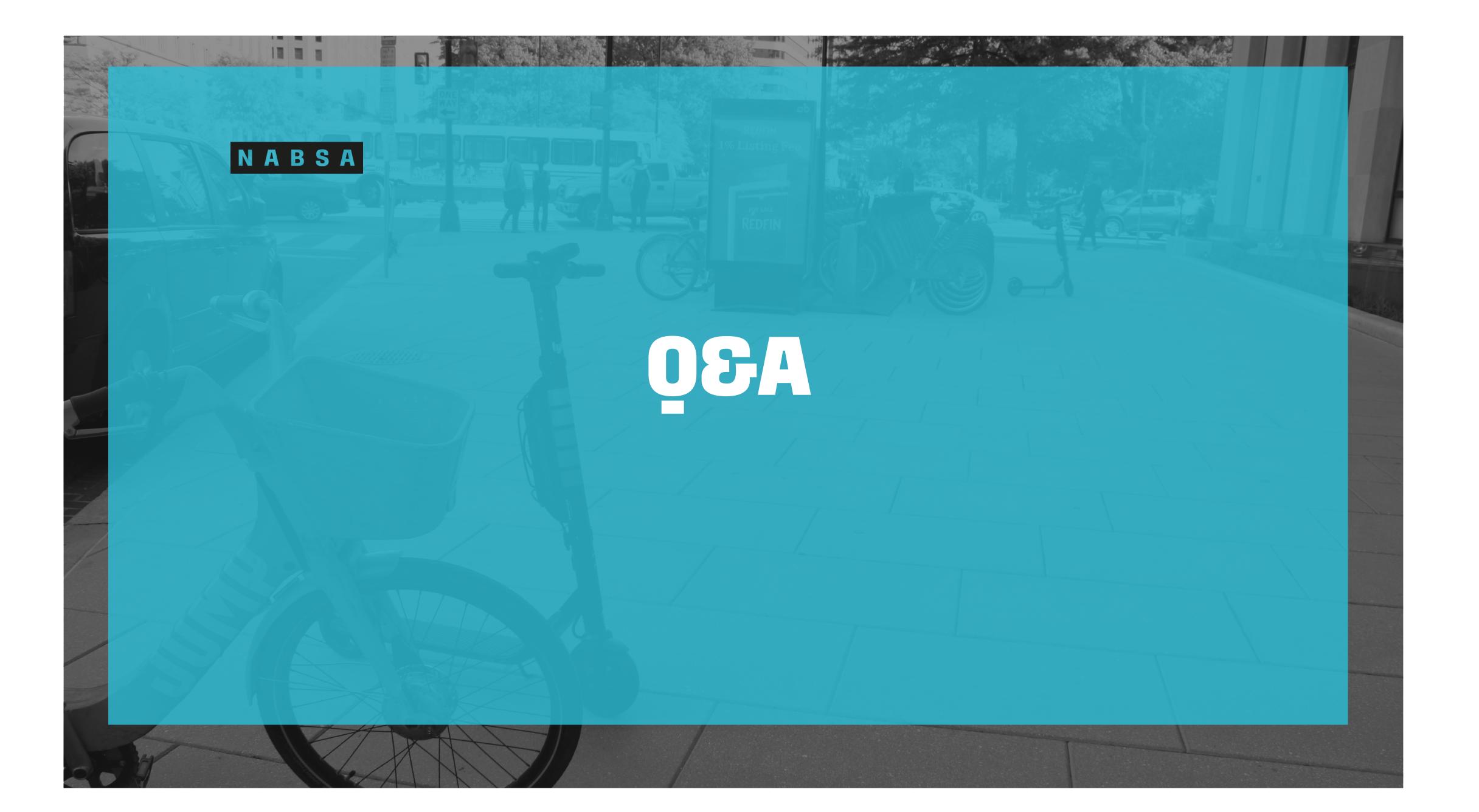
Interested in getting more involved in NABSA?

- 1) Submit resources to be added to the Knowledge Share database.
- 2) Consider running for a seat on the NABSA board in an upcoming election. More information about the NABSA board positions and elections is disseminated through the members-only listserv.

Questions? Contact executivedirector@nabsa.net

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nabsa.net
sam@nabsa.net
@go_nabsa