

Approved May 21, 2025

## Cooper Jones Active Transportation Safety Council (ATSC) Meeting

April 16, 2025

10:30 a.m. - 12:30 p.m. Hybrid Meeting

Access ATSC meeting recordings at <https://wtsc.wa.gov/safe-driving/active-transportation-safety-council/>.

**Quorum Present:** ☒ Yes ☐ No

### Summary Notes

Agenda Item:	<b>Welcome</b>	Lead: Jessie Knudsen, WTSC Program Manager; Pat Hughes, Facilitator
Members were welcomed to the April meeting.		
Follow-Up: N/A		

Agenda Item:	<b>Approval of Meeting Minutes</b>	Lead: Jessie Knudsen
Minutes to be approved: March 19, 2025.		
The March minutes were distributed prior to the meeting for review. No corrections or additions were requested. The minutes will be posted on the <a href="#">Active Transportation Safety Council website</a> .		
Follow-Up: N/A		

Agenda Item:	<b>Public Comment</b>	Lead: Members of the Public
Speaker: Doug MacDonald, former Secretary of Transportation for Washington		
Doug MacDonald attended the meeting and shared his concerns about e-scooters and their safety implications and lack of discussion about their safety implications. Doug prepared a report highlighting findings from reports prepared by Washington state agencies. Doug commended Dr. Staci Hoff from the Washington Traffic Safety Commission on her efforts related to ensure the data got <a href="#">reported</a> . Doug emphasized the importance of making transportation decisions with good data.		
<i>Refer to Doug's report, attached: A1 – Doug MacDonald Public Comment</i>		
Follow-Up: N/A		



Agenda Item:	<b>Emergency Streets Presentation</b>	Lead: Dr. Kevin J. Krizek, Professor, University of Colorado Boulder; Tila Duhaime, Co-Director of Transportation Alternatives and Emergency Streets Co-Founder
<p><i>Refer to presentation:</i> A2 – Emergency Streets: Tackling Societal Desensitization to Traffic Violence &amp; Reinventing Obdurate Infrastructure</p> <p>Dr. Kevin Krizek (<a href="mailto:kjkrizek@gmail.com">kjkrizek@gmail.com</a>), a professor of environmental design at the University of Colorado Boulder who specializes in sustainable transportation and urban planning. Tila Duhaime (<a href="mailto:tilatila2@gmail.com">tilatila2@gmail.com</a>) is a transportation advocate and civic leader in Boulder, Colorado, known for her commitment to active transportation, user safety, and inclusivity mobility. Together, Dr. Krizek and Tila Duhaime shared about Emergency Streets, an exercise that dictates the “roadways within a half-mile radius of the crash site would be reduced by 20 miles per hour below the posted speed limit” (<a href="#">Duhaime, Krizek, 2023, p. 6</a>).</p> <p>For an in-depth recap of the presentation and discussion, refer to the <a href="#">meeting recording</a> between timestamps 13:21 and 1:28:40. A variety of comments were made verbally and via chat and were captured during the conversation between the council members and the presenters.</p> <p><i>Refer to document:</i> A3 – Emergency Streets Comments</p> <p>Post-meeting, Dr. Krizek shared that the council drives impact in two key ways: first, through its collective work, and second, through members serving as representatives to more localized groups. Dr. Krizek and Tila are more than happy to respond to any follow-up questions from committee members, whether about state enabling legislation, getting the Emergency Streets "kit" operational, or anything else that may be helpful.</p> <p>Follow-Up: N/A</p>		

Agenda Item:	<b>Legislative Report</b>	Lead: Mark McKechnie, WTSC External Relations Director
<p><i>Refer to presentation:</i> A4 – Traffic Safety Legislation: 2025 Update</p> <p>Mark shared an update on timely legislative tracking.</p> <p>Follow-Up: N/A</p>		

Agenda Item:	<b>Measuring ATSC Success</b>	Lead: Pat Hughes, Facilitator
<p><i>Refer to document:</i> A5 – Measuring ATSC Success</p>		



Q: How do ATSC's past recommendations fit in?

A: This is addressed in the Policy / Outcomes portion of the matrix.

Follow-Up: N/A

Agenda Item:	Closing Discussion	Lead: Pat Hughes, Facilitator
<p><u>Cooper's Birthday</u> April 16th marks Cooper Jones' birthday. This council was founded and continues to operate in his honor.</p> <p><u>In-Person Meeting</u></p> <ul style="list-style-type: none"><li>- Date: Wednesday, September 10, 2025</li><li>- Location: Spokane, WA</li><li>- If you have connections in Spokane or know of meeting venues, please contact Jessie Knudsen (<a href="mailto:jknudsen@wtsc.wa.gov">jknudsen@wtsc.wa.gov</a>) and Abby Williams (<a href="mailto:awilliams@wtsc.wa.gov">awilliams@wtsc.wa.gov</a>).</li></ul> <p><u>Washington Traffic Safety Summit</u></p> <ul style="list-style-type: none"><li>- We have funding available for ATSC members to attend the Summit.</li><li>- If you are interested in attending, please contact Jessie Knudsen (<a href="mailto:jknudsen@wtsc.wa.gov">jknudsen@wtsc.wa.gov</a>) and Abby Williams (<a href="mailto:awilliams@wtsc.wa.gov">awilliams@wtsc.wa.gov</a>) by <b>May 30, 2025</b>.</li></ul> <p><u>WSDOT E-Bike Rebate Voucher</u> Spread the word: People have until <b>noon on April 23<sup>rd</sup></b> to enter the drawing for an e-bike rebate voucher. <a href="https://ebikeswsdot.aptim.com/">https://ebikeswsdot.aptim.com/</a></p>		
Follow-Up: N/A		

**Present Council Members:** Alan Adolf, Yakima Valley Conference of Governments; Shelly Baldwin, Washington Traffic Safety Commission Acting Director; Barb Chamberlain, WSDOT Active Transportation Division; Charlotte Claybrooke, WSDOT Active Transportation Division; Jennifer Dieguez, WA Dept. of Health; Dr. Annemarie Dooley, Washington Physicians for Social Responsibility; Jesse Gilpatrick, Center for Independence; Tony Gomez, Seattle & King County Public Health; Will Habel, Clallam County; Cara Jockumsen, WA Dept. of Licensing; Kitty Klitzke, City of Spokane; William Lemke, Retired Public Employees Council, Judge (Ret.); Karen Messmer, Olympia Safe Streets Campaign; Dr. Steve Mooney, UW Dept. of Epidemiology; Venu Nemani, Seattle Dept. of Transportation; Jon Pascal, Kirkland City Council; Dr. Amy Person, Benton-Franklin Health District; Portia Shields, Yakama Nation; Harold Taniguchi, Commission on Asian Pacific American Affairs; Carrie Wilhelme, City of Tacoma; Kerri Wilson, Intercity Transit

**ATSC Program Manager:** Jessie Knudsen, Washington Traffic Safety Commission

**ATSC Program Support:** Abby Williams, Washington Traffic Safety Commission



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**ATSC External Facilitator: Patricia Hughes**, Trillium Leadership Consulting

**WTSC Staff: Dr. Staci Hoff**, Research Director; **Mark McKechnie**, External Relations Director; **Bernie Shah**, IT Manager; **Erin Vroman**, Program Specialist

**Guests: Tila Duhaime**, Bicycling and Pedestrian Safety Advocate; **Sara Hallstead**, Seattle & King County Public Health; **Dr. Kevin Krizek**, University of Colorado Boulder; **Doug MacDonald**; **Dr. John Milton**, Washington State Department of Transportation; **Amy Shaffer**; **Celeste Toyofuku**, Seattle & King County Public Health



**Unsafe on any street; unsafe on any sidewalk.  
Rented e-scooters in Seattle.  
News from the WTSC/HIPRC Report and elsewhere.**

For the Cooper Jones Active Transportation Safety Council  
April 16, 2025

Doug MacDonald, Seattle Washington, [dbmacdonal@earthlink.net](mailto:dbmacdonal@earthlink.net)  
Former Washington State Secretary of Transportation, 2001 - 2007

If you were among the vast majority of people in Seattle who have never ridden one of the thousands of stand-up rental e-scooters, mostly Lime green, sponsored by the Seattle Department of Transportation (SDOT) you would know this topic well. They're everywhere, riding on the sidewalks, weaving with and between cars on the streets. You've wondered, "Aren't those e-scooter riders risking a lot of injuries?"

Then you might also have asked: "Does SDOT actually know the injury risks to its e-scooter riders?"

And finally: "If SDOT does know, are they telling anybody?"

The answers are: Yes, those SDOT e-scooters are very dangerous for riders. Yes, SDOT knows how bad the injury risk is and has known for more than three years. And no, SDOT is not telling us what they know, and has no intention of doing so anytime soon.

That adds up to a very bad look for SDOT. This is an agency that tirelessly proclaims that safety is its core value. Its cherished Vision Zero safety program is anchored in the mantra that every fatality and serious injury on Seattle's streets and sidewalks is unacceptable. Or so they say.

In January, the Washington Traffic Safety Commission in Olympia published an extraordinary report from Harborview Injury Prevention and Research Center, generally shortened to HIPRC. [Electric Scooter Related Injury in Seattle](#) examined patient records of injured e-scooter riders at the Harborview emergency department and other UW Medicine-affiliated locations. Researchers found just a handful of injuries for 2020, when SDOT late in the year launched its e-scooter rentals. Then for 2021, about 50 patient injury records. For 2022, just under 80. For 2023, about 150. All told, 280 or so patient records of injured e-scooter riders quickly ramping up over just three years, 2021 to 2023.

Probing the patient medical records yielded a fact even more important than the number of the injuries. How do the injuries occur? The report found that the injuries overwhelmingly occur – 87 percent - from riders falling off the scooters, and only rarely from collisions in traffic, just five percent.



This simple fact, firmly quantified from the patient records, opens a very troubling backstory for SDOT. Because it comes to SDOT as no surprise and highlights the utter failure of SDOT to account to itself or burden the public with inconvenient truth.

SDOT has known at least since November, 2021 that there are many more scooter injuries overall than there are scooter/car collision injuries. They learned that when they opened about 4900 returns from e-scooter riders to a broadside rider survey aimed at information of its scooter rental program's first year: age of riders; number of rides taken by typical riders; riders' gender and income levels, and so on. In the survey SDOT also included questions about injuries – whether you had been injured and whether you had sought medical attention; also, a blank space for an optional tell-us-what-happened narrative response.

The [startling results](#) SDOT certainly never expected. More than 500 of their e-scooter riders respondents indicated they had sustained some injury, some more than once. Well over a hundred reported they had sought professional medical attention for their care. The narrative responses, never completely published by SDOT but obtained by Public Disclosure Request, told individual riders' grisly tales: broken bones, sprains, concussions, lacerations, lost teeth, contusions, long recuperations. The narratives were replete with references to hitting potholes, sidewalk uplifts, skidding on wet pavements, failed brakes. Car collisions were a rarity.

This led SDOT on a search of alternative facts to prepare its first year evaluation of the e-scooter rental program finally [published in April 2022](#). SDOT therefore scoured a body of 8000 Seattle Police Department documents called Traffic Collision Reports that are obligatorily prepared by SPD officers for every single traffic collision in Seattle to which an officer responds. The reports are prepared on a standard form and must be regularly submitted to the Washington State Patrol for use in statewide traffic collision data aggregation and analysis. But a rider pitched off an e-scooter by a big crack in a sidewalk? No police officer, and no Traffic collision Report. So SDOT's alternative facts came from the needles it found by looking in obviously the wrong haystack. For the first year of the e-scooter rental program, SDOT only located 17 Traffic Collision Reports involving e-scooters; one was an e-scooter fatality; five were coded by SPD officers as serious injuries.

The gap between the tiny injury picture pulled from Traffic Collision Reports and the big injury picture reported by hundreds of its own riders needed some comment, of course. The SDOT dodge was to bemoan that its original intention to collect emergency room data for its own understanding of e-scooter injury risk had been sidelined by the pandemic. It wrote in its report, now 36 months ago: "In the near future, SDOT hopes to engage with medical researchers to better understand rate and severity of injuries."

So SDOT did what, finding itself in this pickle? In June, 2022, it turned to whom else but its own hometown Harborview Medical Center and the highly regarded injury research and prevention specialists at HIPRC to try to revive the pandemic-foiled program of emergency room data collection. From SDOT:



“We are very interested in bringing whatever we can to the table to expedite this – e.g. hiring a consultant, supporting hiring a research assistant, etc. Would that be helpful. We appreciate your efforts on this so far and are eager to help get it across the finish line.”

That was 34 months ago. Through the remainder of 2022, SDOT and HIPRC jointly polished a research methodology. SDOT’s e-scooter program manager committed to providing \$75,000 to fund the study. SDOT drafted a Memorandum of Agreement for the study, tweaked into final form after vetting through the University of Washington Office of Sponsored Programs. Research staffers were identified and even began work. The SDOT program manager even praised the study to federal Centers for Disease Control in November 2022, 29 months ago.

“Our partnership with the HIPRC to develop a shared mobility injury study will help us better understand injury rates across demographics and meet the safety needs of our program going forward.”

Indeed, SDOT’s research program with HIPRC was poised to lead the way to nationally-significant improvements in data collection practice. Not just Seattle had encountered the inadequacy of traffic collision report data for e-scooter injuries. It was a national problem. So much so that an aptly titled report, [Data Challenges Associated with Assessing the Prevalence and Risk of Electric Scooter and Electric Bicycle Fatalities and Injuries](#) was issued by the National Transportation Safety Board in November 2022.

But was leading the way nationally to better data collection on e-scooter related injuries what SDOT really wanted? Something seemed to go amiss. The internal emails (dozens of emails obtained under a Public Disclosure Request are the source of this account) show that a key SDOT e-scooter manager was pulled away on temporary assignment to write the Vision Zero Top-to-Bottom Review document that the new SDOT Director arriving in October had commissioned. By the time the Top-to-Bottom Review draft was completed and she returned to e-scooters, the project apparently had stalled, as revealed in an internal email dated February 9, 2023, 26 months ago:

“Wanted to flag this as we have not officially signed the MOA, but HIPEC has been working. I know we’ve talked about going a different direction, which I think is certainly worth at least considering, but just feels like we need to make headway on that sooner rather than later so we’re not having them do more work.”

A scheduled progress meeting was abruptly postponed. HIPRC was told that some questions were being “run up the chain.” Answers must have come back down the chain pretty quickly, although neither executive accountability nor a defensible rationale are revealed in the internal emails.

On February 15, 2023 HIPRC was handed the bad news. The study had been red-lighted. “Our leadership is concerned that without some key pieces of information, the study results will not be actionable for us as a city department of transportation,” the email said.



And that was the end of that, regardless of what SDOT had promised the public and even boasted of to the federal CDC.

Except that matters then took an unexpected turn.

National discussion had caught up traffic safety and public health professionals in e-scooter data topics, especially the need for more information from hospital emergency departments. The recent NTSB report had been anticipated. An alert research director at the Washington Traffic Safety Commission had been paying attention to the development of the SDOT/HIPRC proposed research. She immediately recognized its opportunity to contribute to the national need to demonstrate better data collection practice, especially from emergency room records for which the SDOT/HIPRC proposal had been designed. She quickly found dollars to backfill for SDOT's funding withdrawal.

What had been an SDOT project became a Washington Traffic Safety Commission project. SDOT was left at the station. The work by HIPRC regained momentum very quickly in 2023 and was brought to conclusion by the end of 2024. Results were shared as a courtesy with SDOT prior to publication late in 2024. SDOT chose to keep its distance, making no comment.

The research report was elegant, simple and short. Apart from its two main findings, the sheer volume of injuries and their 87% connection with falls off the e-scooters and only rarely in traffic collision, there was much more.

First, the total number of e-scooter related injuries in Seattle to be located in emergency room records was surely even higher than the 282 that the HIPRC had identified at UW Medicine-affiliated locations. Because the HIPRC records search did not cover the emergency departments at Swedish or Virginia Mason, where many other injuries were surely seen.

Second, from the sizable sample of the records from which HIPRC could determine the fact, 97 percent of the e-scooter related injuries were sustained by riders of e-scooters in SDOT's shared scooter rental program. The big injury upsurge flowed directly and overwhelmingly from the SDOT program, not privately-owned e-scooters.

Third, while there are lots of ways to be injured riding an e-scooter, and surely, they span a big range of severity. But head and neck injuries are key telltales of significant and serious injury, and they were noted in 47% of the e-scooter injury records, a much higher rate than for injured bicycle riders. It's a lot easier to fall off an e-scooter than to fall off a bicycle. And that's not good, because pitching of an e-scooter is such a likely way to hit your head. A third of the e-scooter injuries were fractures, also always a serious injury.

Fourth, with such a high incidence of head injuries, it was clearly noteworthy so far as the pertinent sample of patient records could be determined, that helmets were worn by only 18 percent of the injured riders. A big problem, given that the Seattle City Council approving the e-



scooter rental program back in 2020 wrote into law an e-scooter riding helmet requirement in Seattle. Anyone can plainly see that neither SDOT nor SPD has taken any meaningful initiative to see that safety law observed.

Fifth, impairment from alcohol use and substance use is a huge problem among enough e-scooter riders to show up to an extraordinary degree among the injured. From the sizable share of the patient records from which the question could be answered, alcohol use was involved in 64 percent of the injuries and other substance use in 23 percent of the injuries.

From SDOT's standpoint, the actual injury count for Seattle in the report might just as well not exist. No one in Seattle, not a rider, nor a prospective rider, nor a mere passerby, nor the City Council or the media has heard one word from SDOT about what highly-qualified researchers at our own city's most preeminent public health institution have learned about the quantifiable e-scooter related injury risk in Seattle.

Yet this is in a study SDOT itself had basically initiated, helped design and proposed to fund just over two years ago. Before SDOT tried, but failed, to kill it.

This week, there is actually more news to add to the published study. First results have just become available from HIPRC's pressing into 2024 its examination of e-scooter related injuries at the UW Medicine-affiliated locations, including the emergency department at Harborview. For 2024, the preliminary count is 128, a slight decline from 150 in 2023. But that pushes the total number of e-scooter related injuries identified by HIPRC in four years, 2021 – 2024 to over 400. Add to that number the injuries very likely seen at Swedish and Virginia Mason. It is almost certainly the case that an all-in number for injured e-scooter riders in Seattle seen in the medical system is over half a thousand. Trusting the sampling from the 2020-2023 report, that's 97 percent made up of people riding SDOT's e-scooters. Recall that in the 2021 rider survey, only one scooter rider in five who reported some kind of injury had actually sought professional medical care. There has been an e-scooter injury epidemic in Seattle.

Meanwhile, SPD officers continue their business-as-usual filling out of hundreds and hundreds of Traffic Collision Reports, capturing every traffic collision they respond to. As you recall, in the only evaluation of its e-scooter program SDOT has ever published, SDOT located five Traffic Collision Reports indicating e-scooter rider serious injuries in the program's first year, plus one fatality. HIPRC found in the next few years, the emergency room tallies of e-scooter related injuries went up. Wouldn't it be logical that e-scooter injuries found by SDOT searching for needles, even if rare, in those haystacks of Traffic Collision Reports would have gone up, too? So long as SDOT was still searching those haystacks, SDOT should have found more e-scooter injuries, even though only a fraction of the injuries treated in the emergency rooms? Of course. Thanks to SDOT's release of 2024 Traffic Collision Reports in response to Public Disclosure Requests we know that SDOT reviewed at least nineteen Traffic Collision Reports reflecting e-scooter riders seriously injured in Seattle in 2024. Up from SDOT's first-year tally by about the proportion that the much larger emergency room tallies have gone up in the HIPRC review.



There was also one SDOT e-scooter rider fatality in Seattle in 2024. SDOT learned the circumstances only after it received a copy of a special police investigation that Lime itself asked SPD for. Won Jae Ro age 24, died at Harborview on October 9<sup>th</sup>. According to the King County Medical Examiner, the cause of death was blunt force injury to the head as a result of falling from a Lime e-scooter, not wearing a helmet. His friend told the SPD interviewer that he and Ro had been drinking together the night of October 5<sup>th</sup>; they had shared a bottle of wine and Ro himself consumed five or six hard liquor drinks. They then went to Dave's Hot Chicken Restaurant at 12<sup>th</sup> and E. Pike, visiting with friends before its closing. Ro then at 2:00 am on October 6<sup>th</sup> rode a Lime e-scooter southbound in the bike lane on 12<sup>th</sup>. According to his friend riding another scooter behind him, in the 700 block Ro just seemed to topple over for no apparent reason. The fire department responded to the friend's 911 calls and Ro was transported to Harborview, dying three days later. SDOT has never established a protocol for the fire department to contact SDOT regarding its aid responses to SDOT's injured e-scooter patrons. For the obvious reasons that there was no traffic collision, there was no Traffic Collision Report. The SPD investigator's report prepared for Lime somehow made its way to SDOT and was caught in the net of a Public Records Request. I can find no public-facing reference by SDOT to this fatality. This was the fourth death of an SDOT rental e-scooter rider in Seattle.

When will we ever see even a glimmer of transparency, never mind accountability, from SDOT about the injury risk of its shared e-scooter program? Don't hold your breath.

A few weeks ago, on March 4<sup>th</sup>, SDOT's Chief Safety Officer presented to the City Council Transportation Committee a progress update for 2024 on SDOT's Vision Zero initiative to eliminate fatal and serious injuries on Seattle's streets. It included a PowerPoint slide with a line graph depicting serious injuries to people walking and people biking, including in 2024.

Where on the slide could be seen the number of people seriously injured people riding e-scooters, asked Council Member Rob Kettle. SDOT replied that the presentation obstacle lay in outmoded coding conventions on the Traffic Collision Report form. Translated: SDOT knows the facts of the e-scooter serious injury collisions, since SDOT has read the nineteen individual Traffic Collision Reports it produced under multiple Public Records Requests. But the old form has no specific box for e-scooters. Therefore, some of the e-scooter injuries had been tucked into the people walking category and some into the people biking category. End result: inaccurate, artificially inflated tallies of both the seriously injured walkers and bikers. And complete invisibility in the presentation to the Council for all the seriously injured e-scooter riders. As for the 2024 e-scooter fatality, it is also nowhere to be seen.

None of this should come as a surprise. When finally completed in July, 2023, the Vision Zero Top-to-Bottom Review staved off any questions about serious injuries on, or falling off, SDOT's own shared e-scooters by simply whitewashing the topic out of the report. That was the document the new SDOT Director had promised in October 2022, in a *Seattle Times* op-ed, would be data driven, and would share the data, good and bad.



Just days prior to the SDOT Chief Safety Officer showing the misleading slide to the City Council, Mayor Harrell had appointed a new Interim Director at SDOT. [Adiam Emery](#) is eminently qualified and experienced. But there is a lot of hard work ahead. Few of the challenges facing SDOT are as problematic as its own sponsorship of a program that is injuring its own patrons, left and right, week after week and month after month.

It is time for years of dissembling and cover-up to stop. From fresh leadership at SDOT, the public deserves full disclosure of rental e-scooter injury risks.

There's more. Something has to be done to cease-and-desist the hundreds of e-bikes and e-scooters at any given hour of any day abandoned willy-nilly blocking sidewalks, bus stops and street furniture, all in contravention of the explicit terms of the vendors' permits. No other city in America can touch Seattle for e-scooter trashing of the pedestrian environment. No one on the sidewalk should have to jump aside and out of the way of an oncoming e-scooter rider appropriating the sidewalk – even worse, unseen from behind. Anyone can see that neither SDOT nor SPD has taken any interest in observance of the City Council's having written into law that e-scooter sidewalk riding is illegal. Nor should abandoned e-scooters litter the sidewalks, tripping hazards for the unwary, and worse for people with vision or mobility impairment for whom SDOT under the American with Disabilities Act must guarantee accessible sidewalks.

Then there is one more question SDOT has never answered for the public or the Council. How does the money actually work in the e-scooter concessions SDOT has conferred for conducting a private rental business on city streets and sidewalk? Take Lime, which is actually a privately owned San Francisco firm called Neutron Holdings, Inc., reputedly heavily invested in by both Uber and Google. Last summer, in August, it held virtually a monopoly of SDOT scooters, with a 78 percent share of e-scooters deployed and 87 percent share of e-scooter rides. How much money is Lime collecting in Seattle from its SDOT concession to use the public's streets and sidewalks for renting its e-scooters and e-bikes?

Probably SDOT itself doesn't know the answer for sure, although it ought to be able to make a well-educated guess. But anyone can make a rough back-of-the-envelope calculation based on Lime's pricing formula which is based on minutes of ride duration and distance-traveled, and can be matched to the number of trips, average trip durations and average trip distances drawn from [SDOT's data dashboard](#). That calculation conservatively suggests Lime in 2024 likely collected in Seattle something well north of \$20 million. How much did Lime return to the City of Seattle for that valuable concession under an SDOT permit authorized by the City Council? And further, what are the sources and uses of funding and their dollar amounts that support SDOT's management of the program? Is funding adequate so that SDOT can enforce Lime's compliance with permit conditions, such as the good repair of its scooters and their adherence to the permit's e-scooter parking conditions? How often, and how much, has Lime, or the City, paid in injury claims or damage claims arising out of the rented e-scooter program, not only for riders' injuries, but for third parties' property damage occasioned by SDOT e-scooters?



The last semblance of an actual report produced by SDOT on its shared e-scooter and e-bike program was published in April, 2022, three years ago. The City Council has never reviewed the program authorization, voted by the City Council in August, 2020, nearly four and a half years ago. It has never revisited SDOT's rosy representations of program expectations that have never been met to this day.

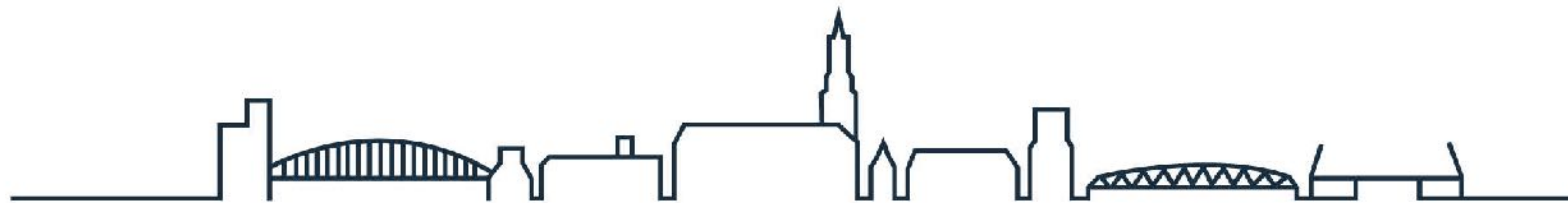
It's time for a full-on independent performance review of the entire program, starting with its safety record. Or rather, its injury record. Then moving to other public interest issues. That review cannot be performed by SDOT when its own shared mobility program manager, responsible for administering the program on the public's behalf, not the vendors' behalf, also wears a second hat. She is a board member of a national industry association, of which Lime is a dues-paying member, dedicated to promoting the expansion of shared e-scooter and e-bike programs around the country.

It's the City Council that has to call the question. Seattle, like Paris, which shut down its rental e-scooter program 18 months ago, has seen enough. In Seattle, fix it, if possible. Or end it.



# EMERGENCY STREETS:

**TACKLING SOCIETAL DESENSITIZATION TO TRAFFIC VIOLENCE  
& REINVENTING OBDURATE INFRASTRUCTURE**



**COOPER JONES ATSC | 16 APRIL 2025**



[Home](#)

## Reports

# Emergency Streets Addressing the Public Health Emergency on US Streets & Roadways

Public

Deposited

[Analytics](#)

**Citeable URL:** <https://scholar.colorado.edu/concern/reports/9g54xk375>

### Abstract

Traffic violence is outstripping local, regional, and federal efforts to reduce injuries and deaths. Governmental responses to the crisis have failed to stem the tide of death on our roadways. What can and should government agencies do? This paper describes a countermeasure known as “Emergency Streets,” which reacts to a demonstrated transport system failure with a compulsory, corrective response: all motor vehicle drivers in the vicinity must slow down for a period of time before being allowed to resume regular driving. A standardized response to fatal crashes like Emergency Streets can help sidestep some of the existing bureaucratic and cultural barriers to slower, safer driving, without compromising other public priorities.

**Creator**

White paper  
29 December 2023

#### Emergency Streets

Addressing the Public Health Emergency on US Streets & Roadways

Title Document  
Book 1.1 Book

Prepared for:  
Peter Borfiging, Secretary U.S. DOT  
Ronda Ruchak, Senior Advisor for Safety and Mobility, U.S. DOT  
Crista Newkirk, Climate Change Research and Technology Director U.S. DOT  
Misty Collins, Director, Centers for Disease Control  
Susan Seidman, Executive Director, American College of Emergency Physicians  
Jonathan Adams, Chief Executive Officer, Government Highway Safety Association  
David Peltz, Governor, State of Colorado  
Joe Neguse, Representative, State of Colorado  
John Hickenlooper, Senator, State of Colorado  
Michael Bennett, Senator, State of Colorado  
Michelle M. Lee, Executive Director, Colorado Department of Transportation  
Bill Heston, Executive Director, Colorado Department of Public Health and Environment

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# EMERGENCY STREETS WORKSHOPS IN THE PAST YEAR:



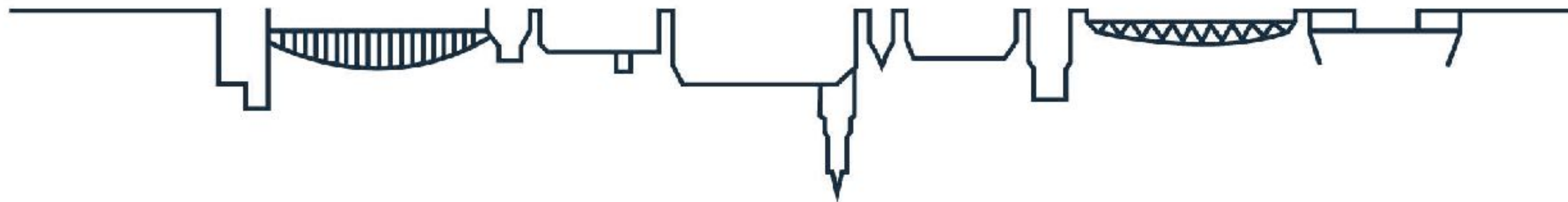




# **PART I: DO WE THINK OF TRAFFIC INJURY RISK AS DIFFERENT FROM RISK OF FIRES, FLOODS, OR EARTHQUAKES?**

## **WHY AREN'T TRAFFIC FATALITIES TREATED AS A PUBLIC HEALTH EMERGENCY?**

**(12 MIN)**





# Major Causes of Violent Deaths in the U.S. (deaths / day)

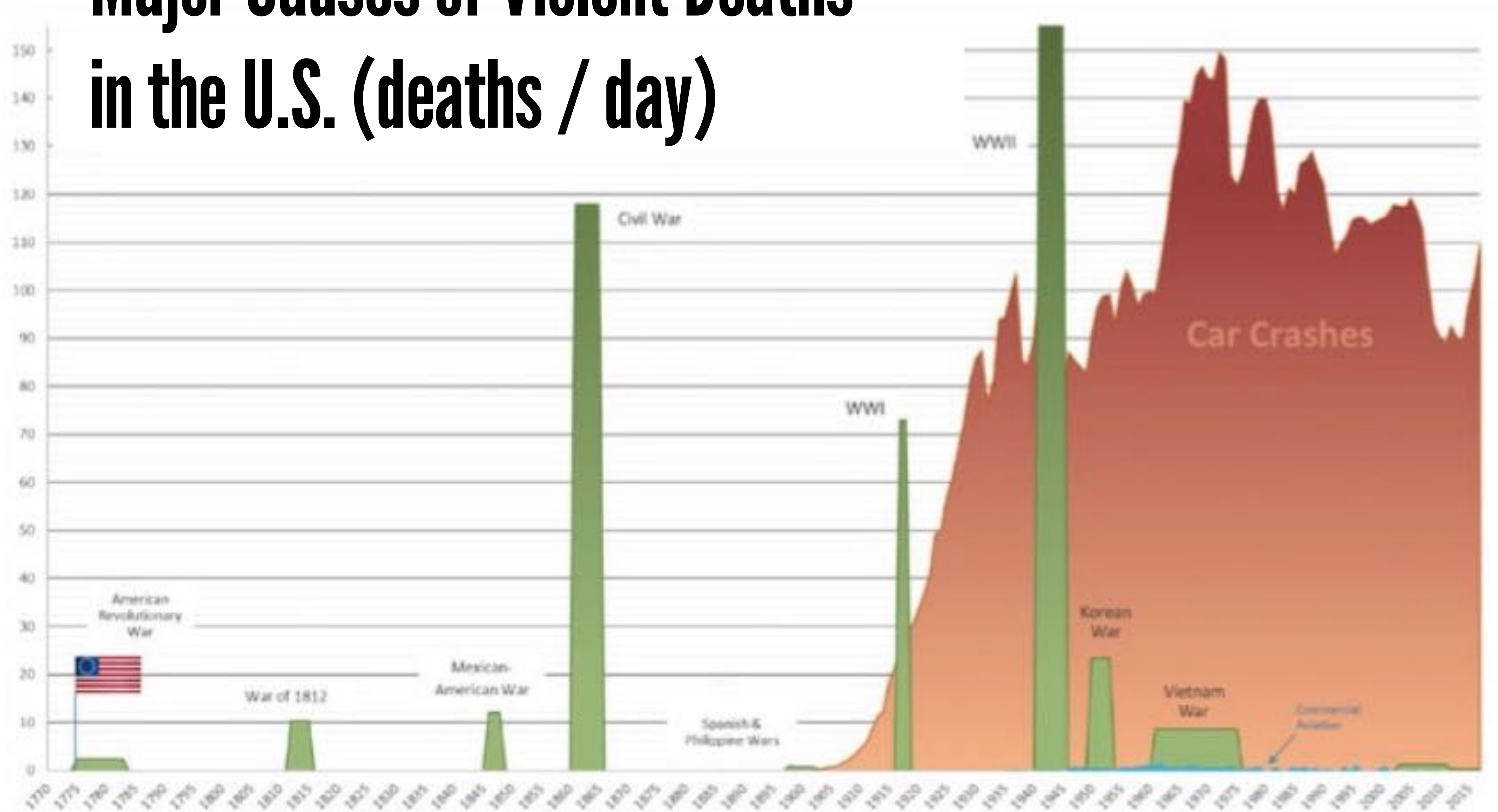
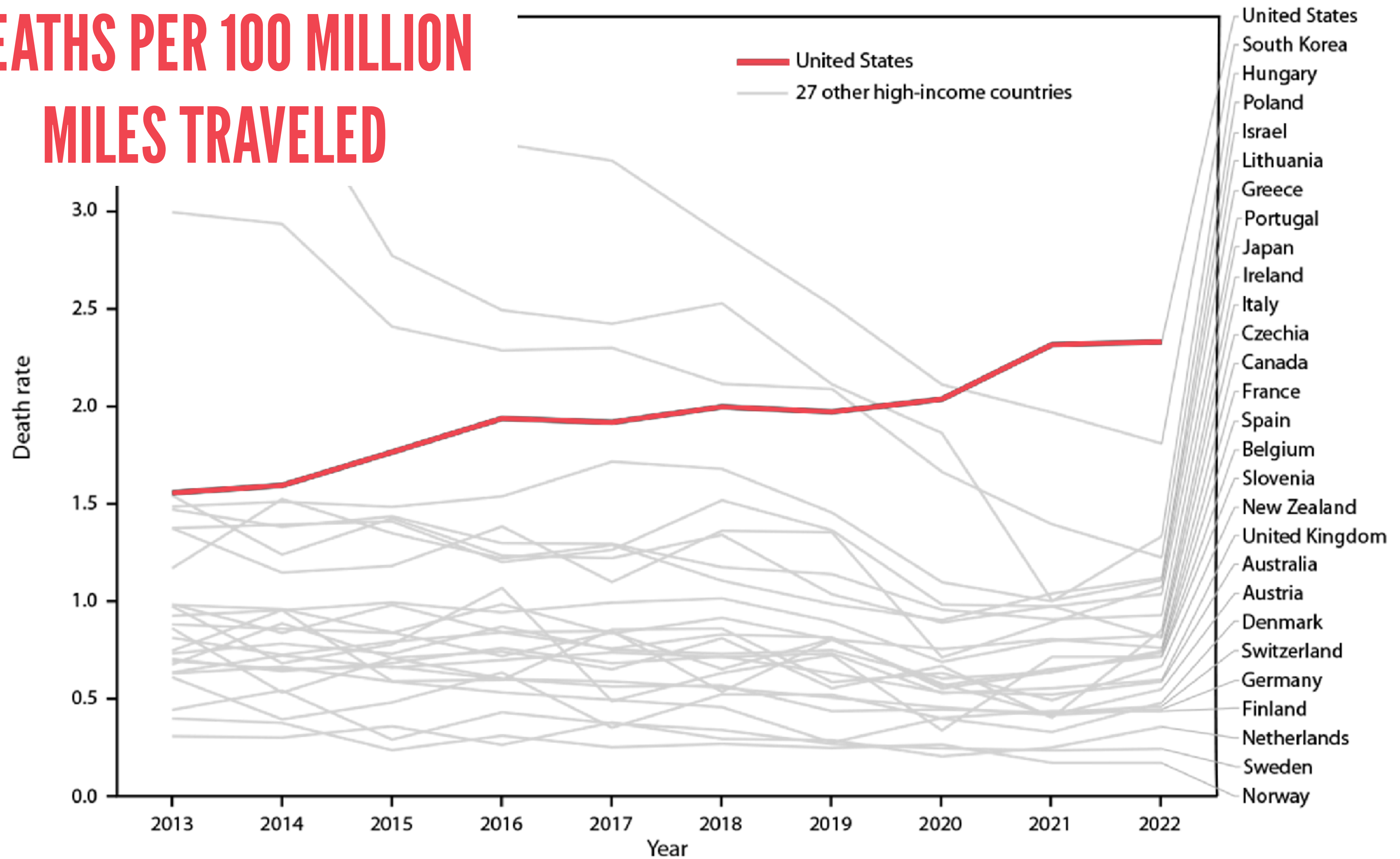


Chart: created by David Agnew ~2017 for company Next Maneuvers, Inc.



# DEATHS PER 100 MILLION MILES TRAVELED



Naumann RB, West BA, Barry V, Matthews S, Lee R. Pedestrian and Overall Road Traffic Crash Deaths – United States and 27 Other High-Income Countries, 2013–2022. MMWR Morb Mortal Wkly Rep 2025;74:134–139. DOI: <http://dx.doi.org/10.15585/mmwr.mm7408a2>.



# MOTOR VEHICLE (MV) CRASHES RANK AS THE LEADING CAUSE OF UNINTENTIONAL INJURY DEATH (U.S.)

## 10 Leading Causes of Death, United States

2021, Unintentional Injuries, Both Sexes, All Races, All Ethnicities, 2001 - 2021 with No Race,

	<u>&lt;1</u>	<u>1-4</u>	<u>5-9</u>	<u>10-14</u>	<u>15-24</u>	<u>25-34</u>	<u>35-44</u>	<u>45-54</u>	<u>55-64</u>	<u>65+</u>	<u>All Ages</u>
1	Unintentional Suffocation 1,072	Unintentional Drowning 476	Unintentional Mv Traffic 381	Unintentional Mv Traffic 489	Unintentional Mv Traffic 7,270	Unintentional Poisoning 23,167	Unintentional Poisoning 26,070	Unintentional Poisoning 21,011	Unintentional Poisoning 18,596	Unintentional Fall 38,742	Unintentional Poisoning 102,001
2	Unintentional Mv Traffic 106	Unintentional Mv Traffic 309	Unintentional Drowning 146	Unintentional Drowning 98	Unintentional Poisoning 6,929	Unintentional Mv Traffic 8,739	Unintentional Mv Traffic 6,977	Unintentional Mv Traffic 6,048	Unintentional Mv Traffic 6,465	Unintentional Mv Traffic 8,616	Unintentional Mv Traffic 45,404
3	Unintentional Drowning 38	Unintentional Suffocation 127	Unintentional Fire/Flame 95	Unintentional Poisoning 67	Unintentional Drowning 475	Unintentional Drowning 605	Unintentional Fall 714	Unintentional Fall 1,333	Unintentional Fall 3,278	Unintentional Poisoning 6,078	Unintentional Fall 44,686
4	Unintentional Poisoning 27	Unintentional Hot Object Or Substance 101	Unintentional Suffocation 37	Unintentional Other Land Transport 57	Unintentional Other Land Transport 169	Unintentional Fall 404	Unintentional Drowning 642	Unintentional Drowning 511	Unintentional Suffocation 889	Unintentional Unspecified 4,917	Unintentional Suffocation 7,182
5	Unintentional Natural/Environment 19**	Unintentional Pedestrian, Other 63	Unintentional Other Land Transport 34	Unintentional Fire/Flame 55	Unintentional Fall 150	Unintentional Suffocation 189	Unintentional Suffocation 285	Unintentional Suffocation 415	Unintentional Unspecified 702	Unintentional Suffocation 4,022	Unintentional Unspecified 6,392



## Pedestrian traffic deaths are rising sharply

From 2011 through 2021, annual U.S. pedestrian traffic fatalities increased by 77%, from 4,302 to an estimated 7,624. In 2021 pedestrians represented nearly 18% of all traffic deaths.

— US pedestrian fatalities

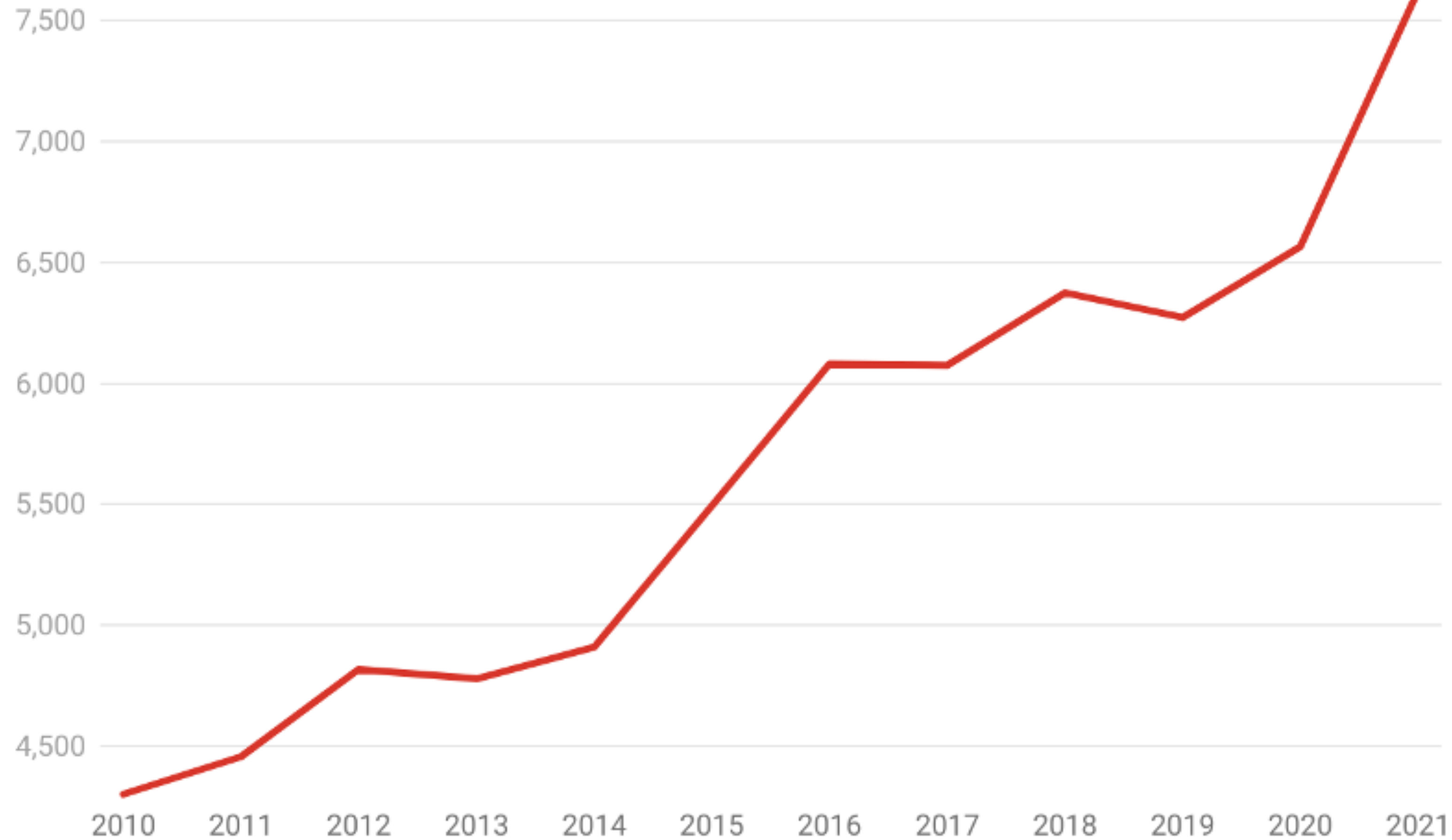


Chart: The Conversation, CC BY-ND • Source: Governors Highway Safety Association • Created with Datawrapper



PUBLIC HEALTH

# Opinion: America's Traffic Death Epidemic is a Public Health Emergency. The Surgeon General Should Treat It Like One.

Traffic violence claims almost as many lives as gun violence. So why hasn't the surgeon general declared it a public health emergency?



By Kevin J. Krizek

12:01 AM EDT on July 2, 2024





## HOW WOULD A CITY RESPOND TO...

- A carbon monoxide leak in an apartment building where residents require emergency oxygen treatment
- A forest fire, currently 12 km away, swiftly approaching town
- A report from a school teacher who spots two people, armed and masked, on the school grounds
- A mountain lion in town, who is ill and has been showing aggression to humans
- An airplane landing on a busy roadway in town

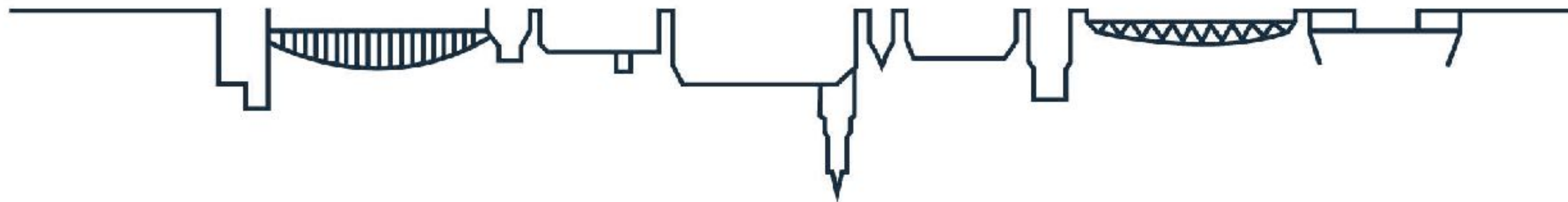




## **PART II: CAN TEMPORARY INFRASTRUCTURE EFFECTIVELY PROMPT USERS TO SLOW DOWN ON OUR EXISTING ROAD NETWORK?**

**WHAT CAN HELP PUBLIC AGENCIES GET USED TO USING THESE TOOLS? WHAT STRATEGIES CAN YOU OFFER TO OVERCOME SOME OF THE CHALLENGES?**

**(20 MIN)**





**FATAL  
CRASH AREA**

**REDUCED  
SPEED**

**-REDUCED SPEED-**





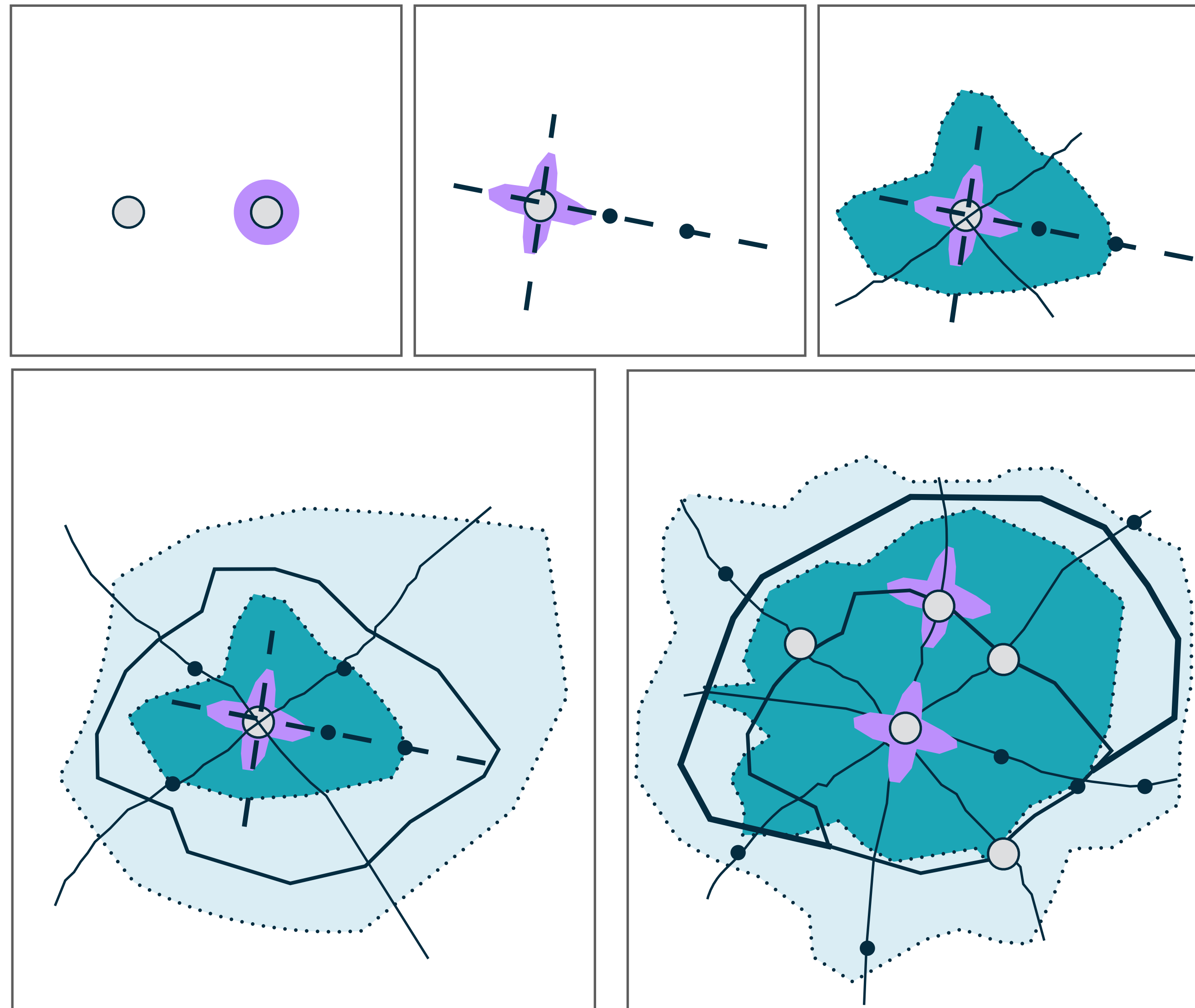
Hauer, E. 2009. "Speed and Safety." Transportation Research Record 10–17

Elvik, R. 2009. "The Power Model of the Relationship Between Speed and Road Safety: Update and New Analyses." Oslo: Institute of Transport Economics.

NTSB. 2017. "Reducing Speeding-Related Crashes Involving Passenger Cars." NTSB/SS- 17/01, PB2017-102341.



# FRAMEWORK COULD BE APPLIED TO URBAN SETTINGS OF VARYING SIZE





Emergency Streets Workshop  
audiences & questions

Civic Leadership

electeds  
directors of departments  
front line 'doers'  
first responders/enforcement

Policy officials

public health  
infrastructure providers  
legal

Advocacy efforts

Residents, community groups

Researchers, academics, students

systems thinkers  
behavioral  
policy analysts

Why this, what's the theory,  
using what rationale?

How would this be rolled out,  
by whom, using what \$\$?

Who would assess it, what  
would they investigate?

How can ES be better  
visualized?

Types of questions

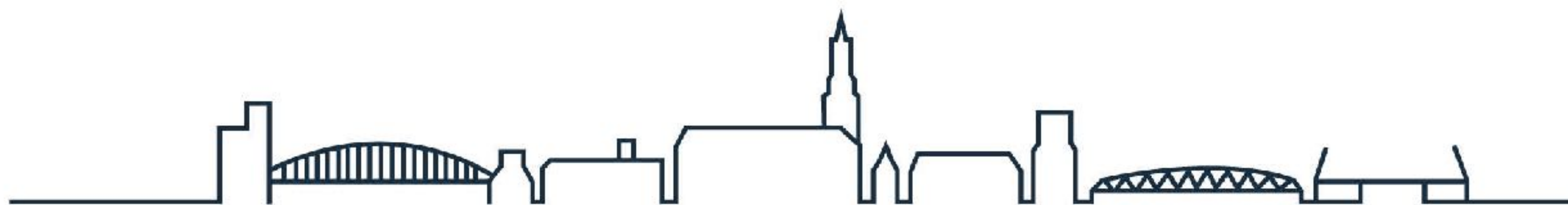


what communities have piloted this?  
who has my back (i.e., indemnation, liability)?  
help me understand my new role...  
what form do I fill out?

isn't this too reactionary?  
which transport policy should I amend?  
what's the precedent?  
won't this infuriate drivers?  
why can't we make something happen?

isn't that a large social cost to absorb?  
won't people will drive over the cones?  
does ES satisfy criteria for "good policy"?

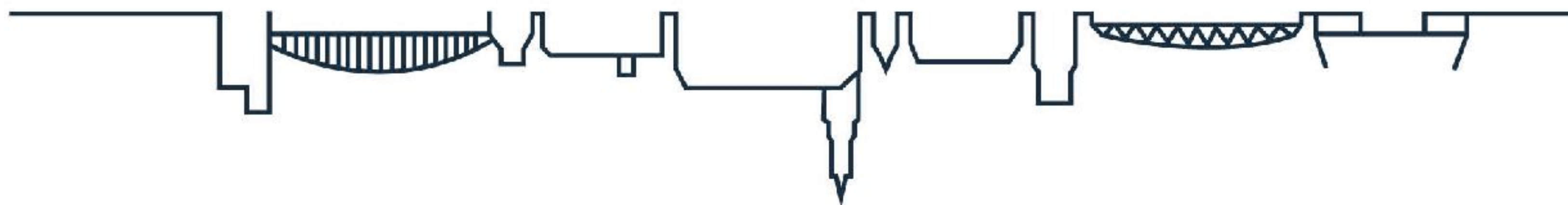




## **PART III: COULD ES REALLY BE APPLIED TOMORROW ON LOCAL/SUBURBAN ROADS?**

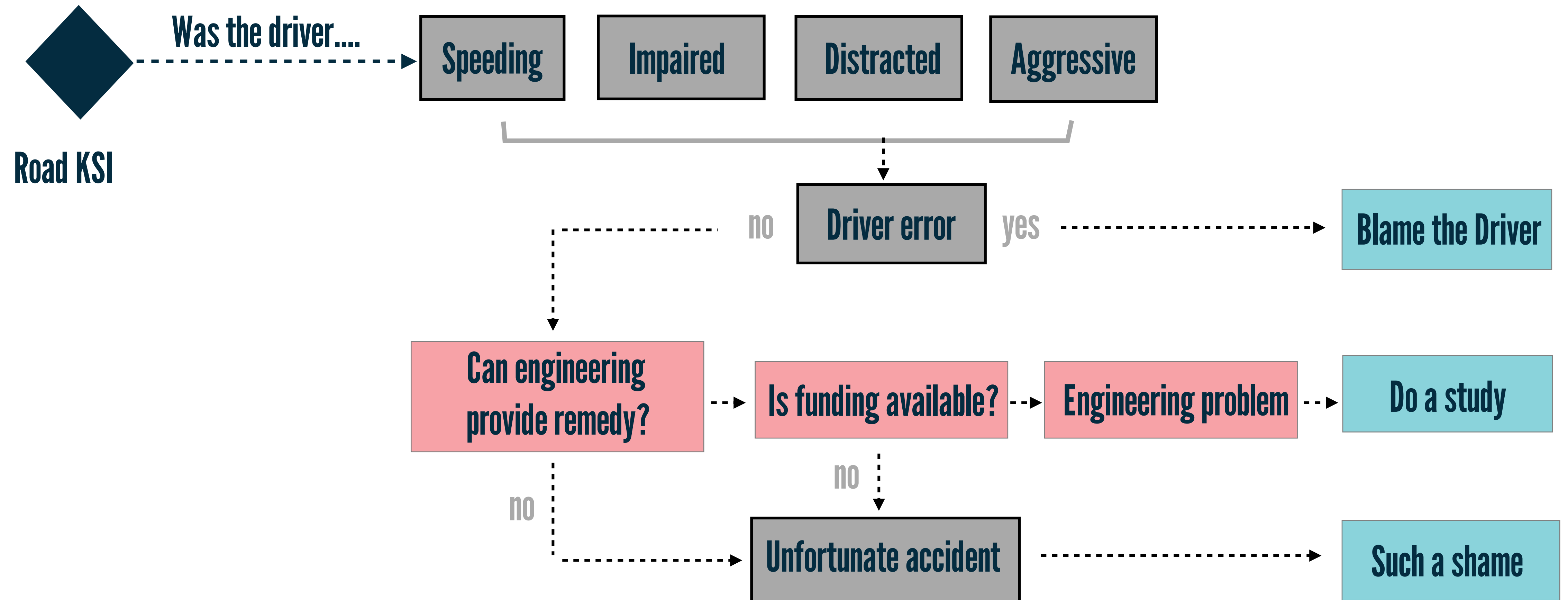
**WHAT STEPS ARE NEEDED TO PROGRESS THIS EFFORT AT  
COMMUNITY AND STATE LEVELS?**

**(25 MIN)**



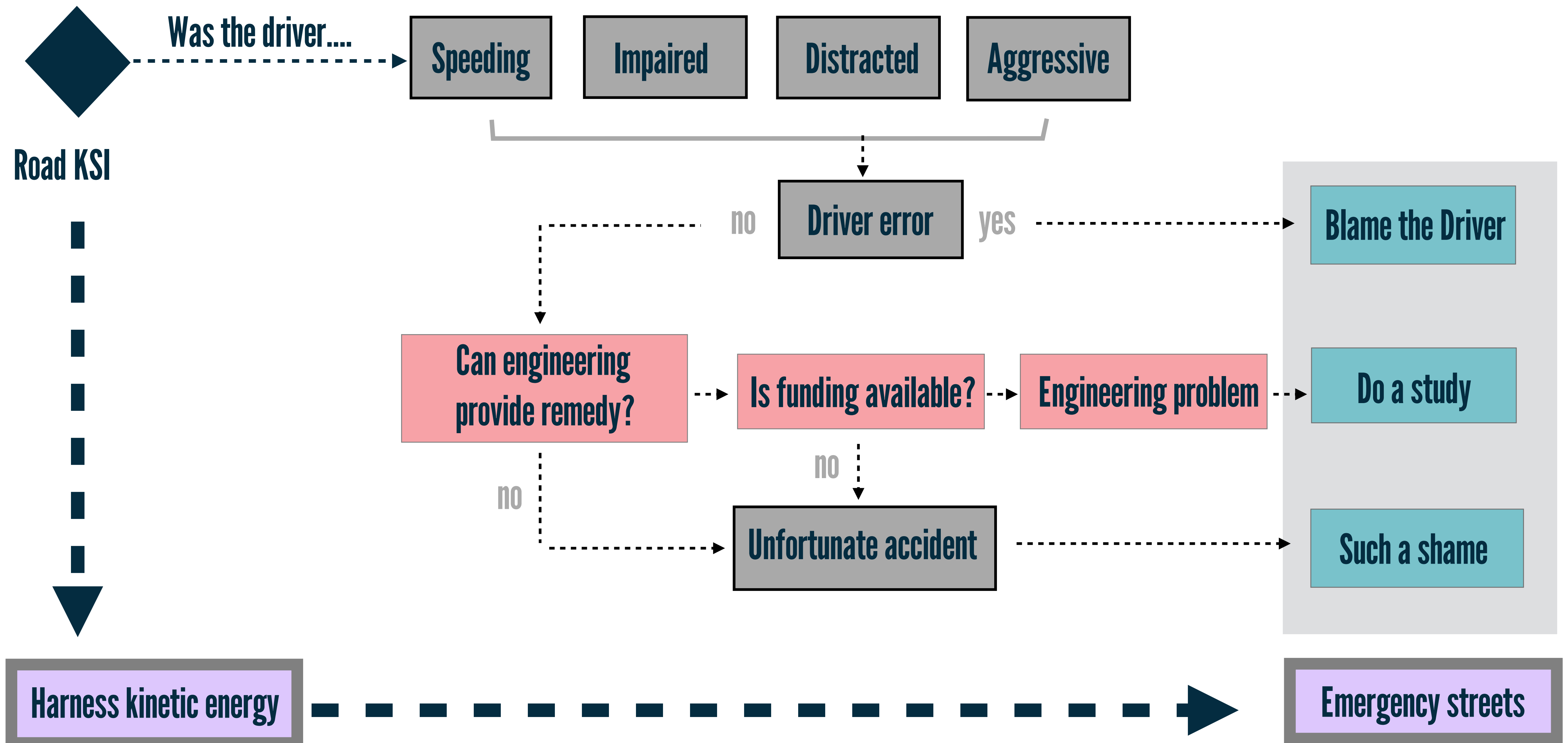


# WHAT HAPPENS NOW





# AN ALTERNATIVE APPROACH TO RESPONDING TO A FATAL CRASH





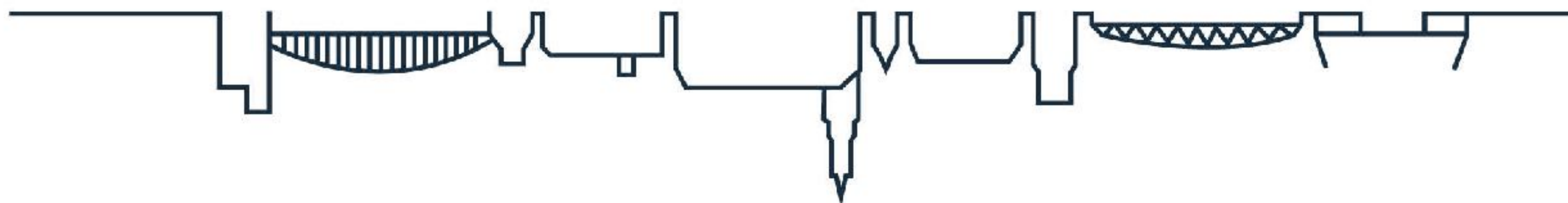


**CHANGING THE PARADIGM:**

**MOVING BEYOND SHORT-TERM FIXES**

**ADDRESSING THE PROBLEM**

**ACTUATING & REINFORCING NEW EVIDENCE**

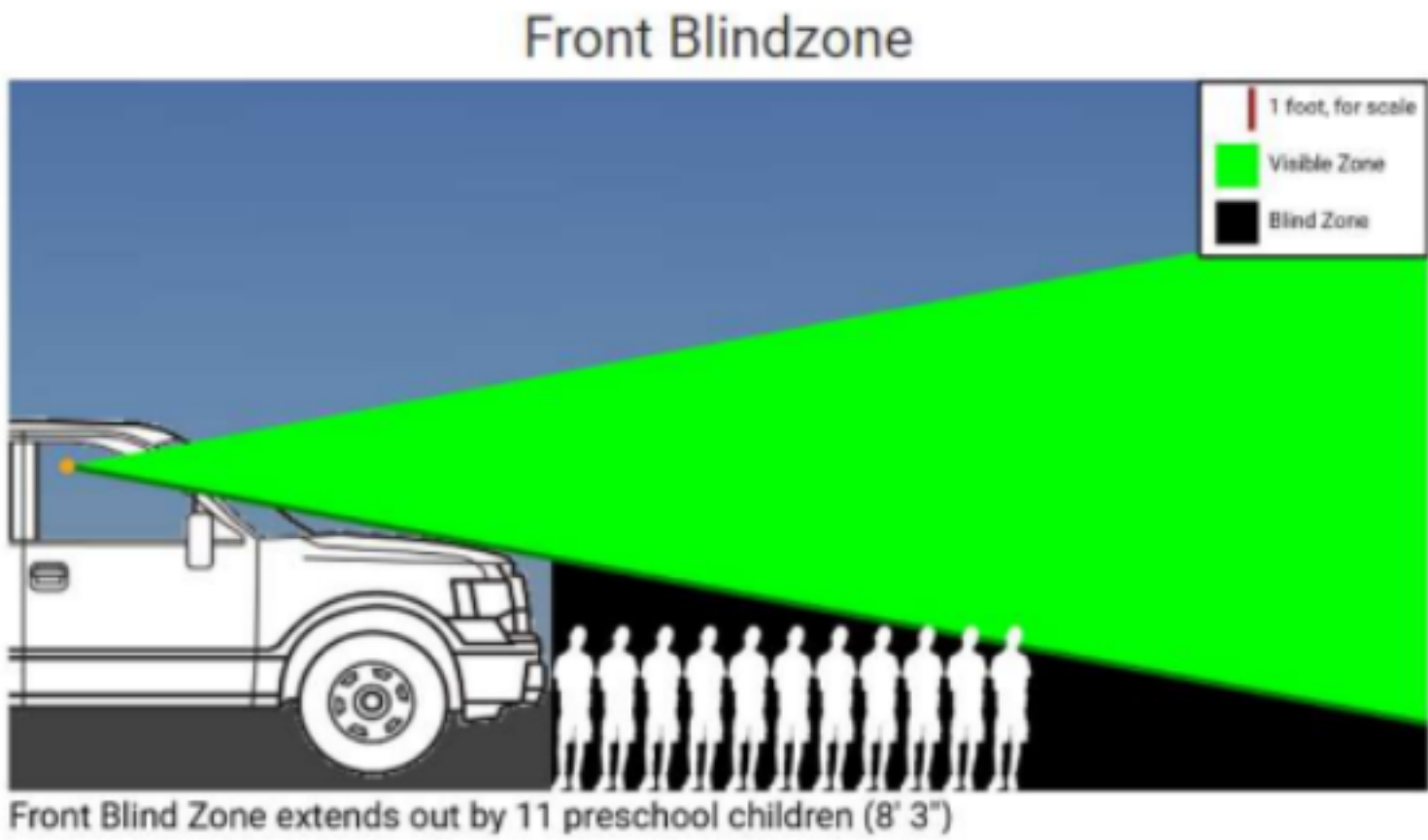




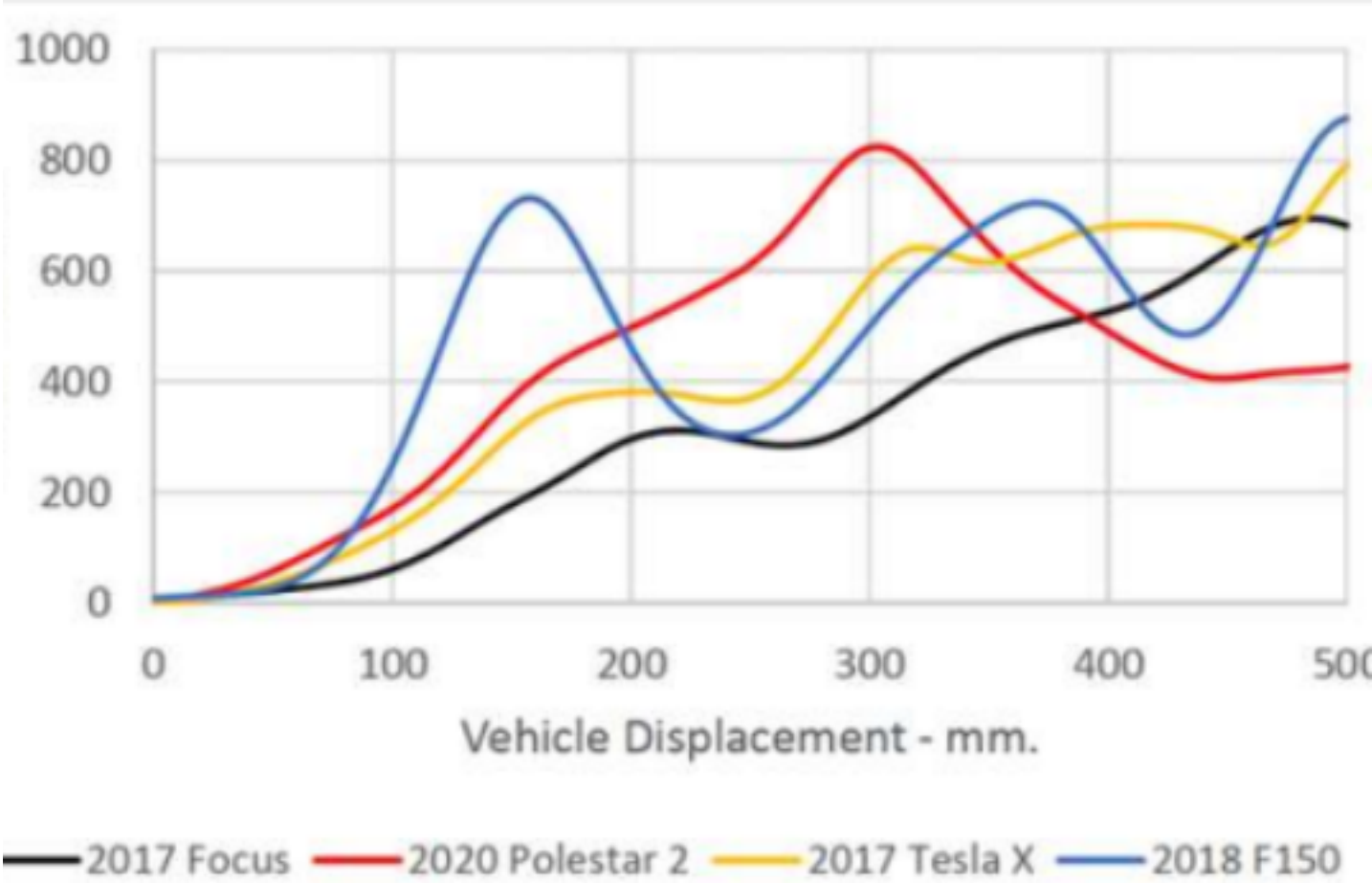
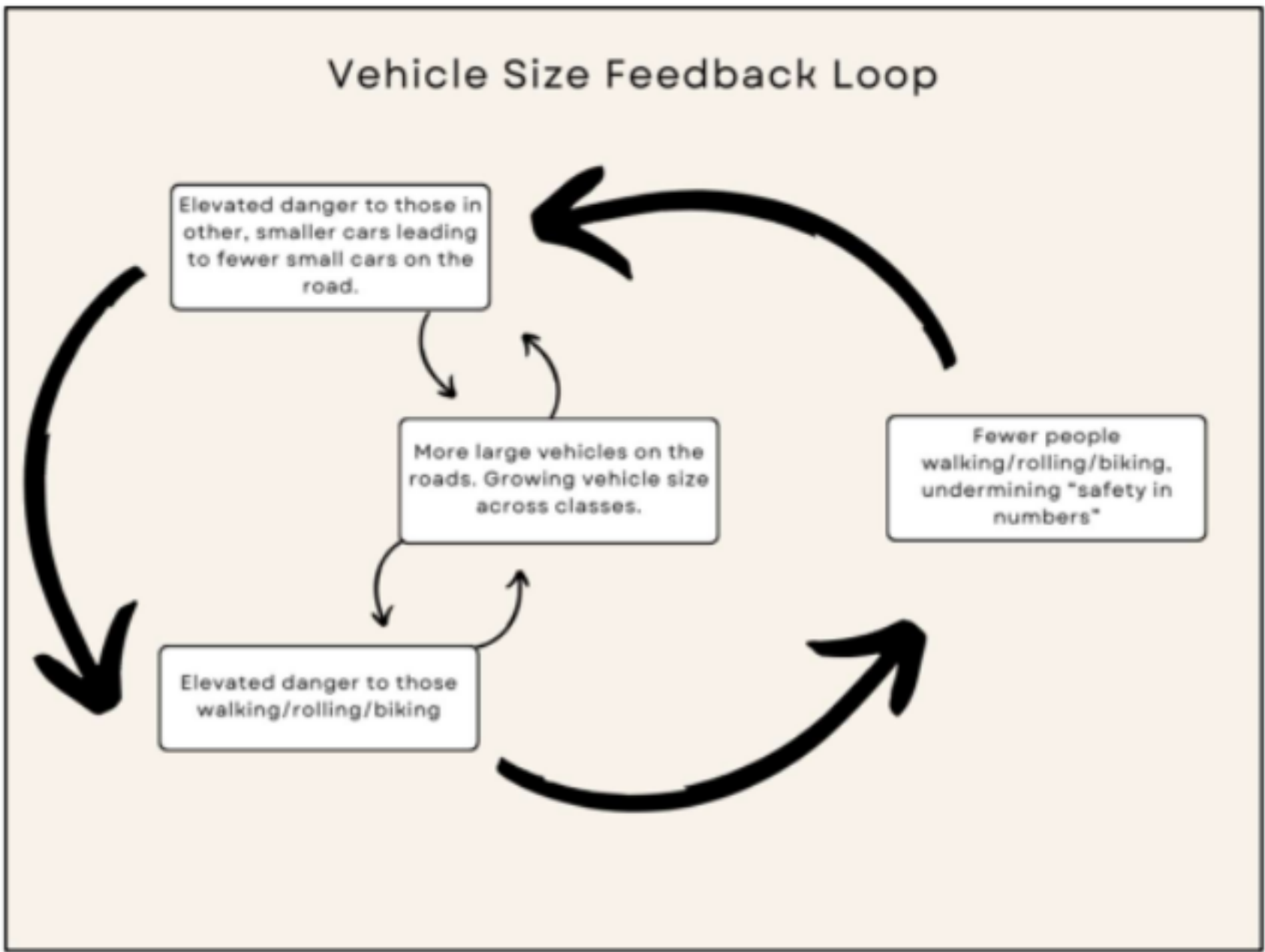
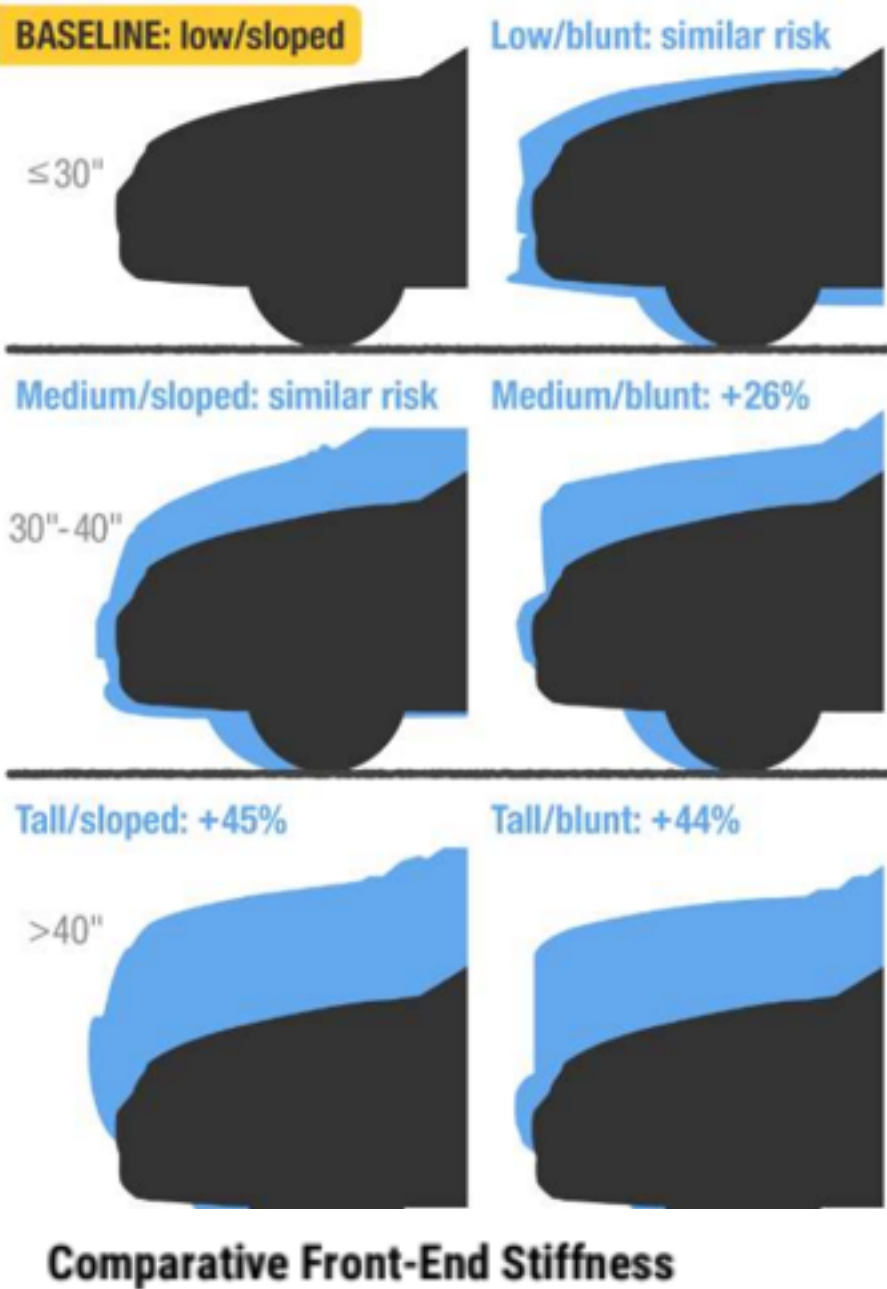
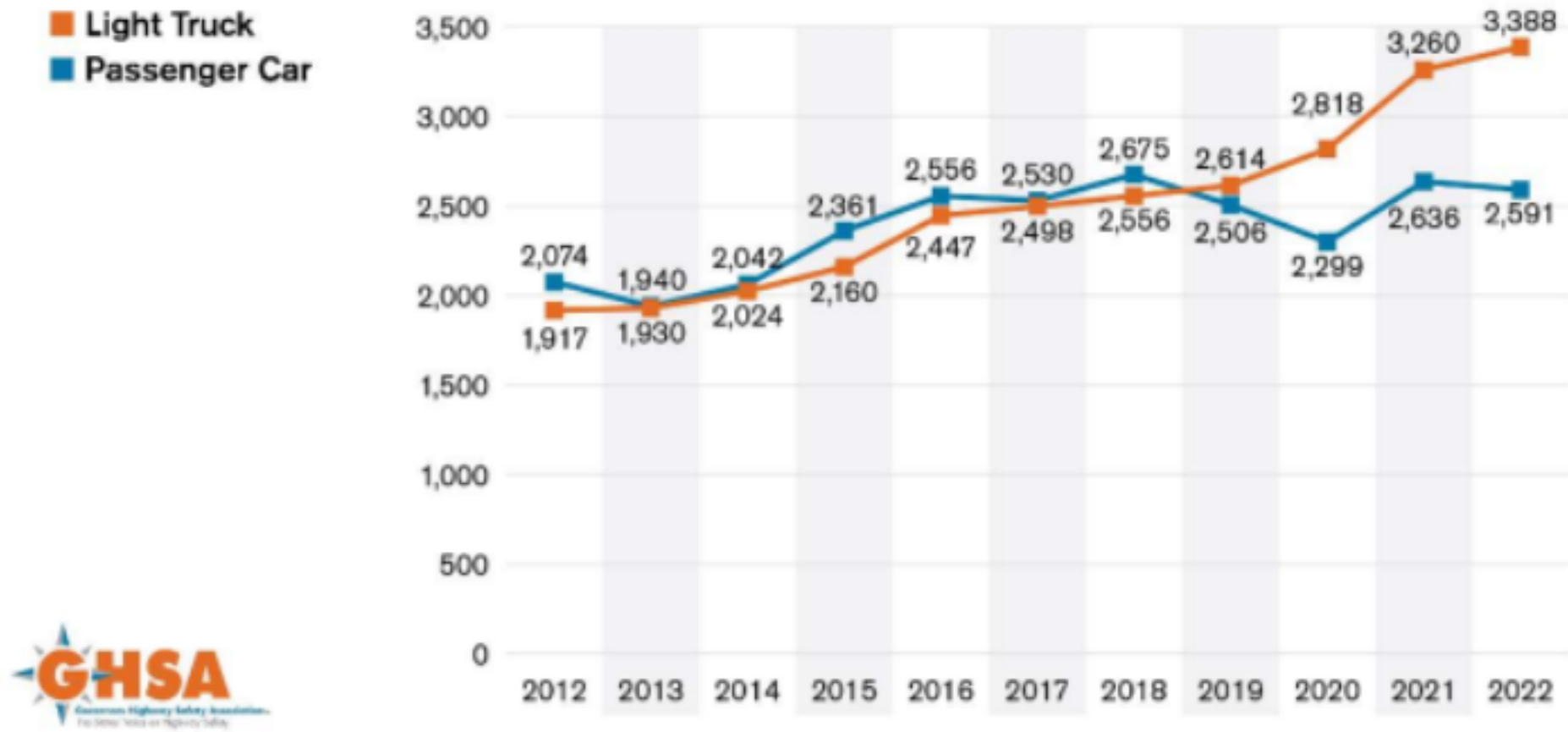




# INVOLVING A “BIG” THING > LIKELY TO RESULT IN A FATAL CRASH



U.S. Pedestrians Killed in Crashes Where the Striking Vehicle Was a Passenger Car or Light Truck, 2012-2022

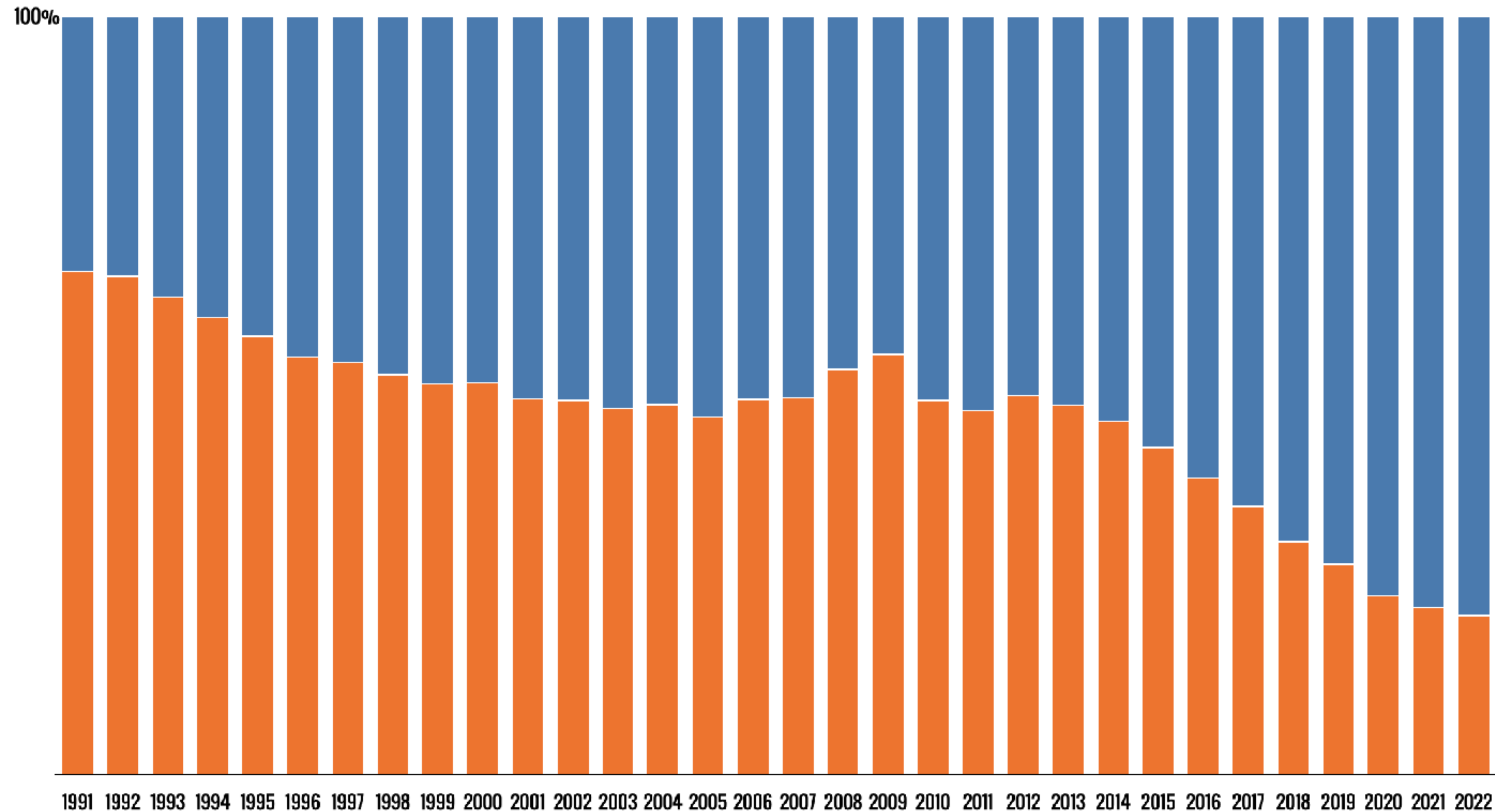




# NEW VEHICLE SALES AND LEASES IN THE US BY TYPE

Passenger cars  
Light trucks

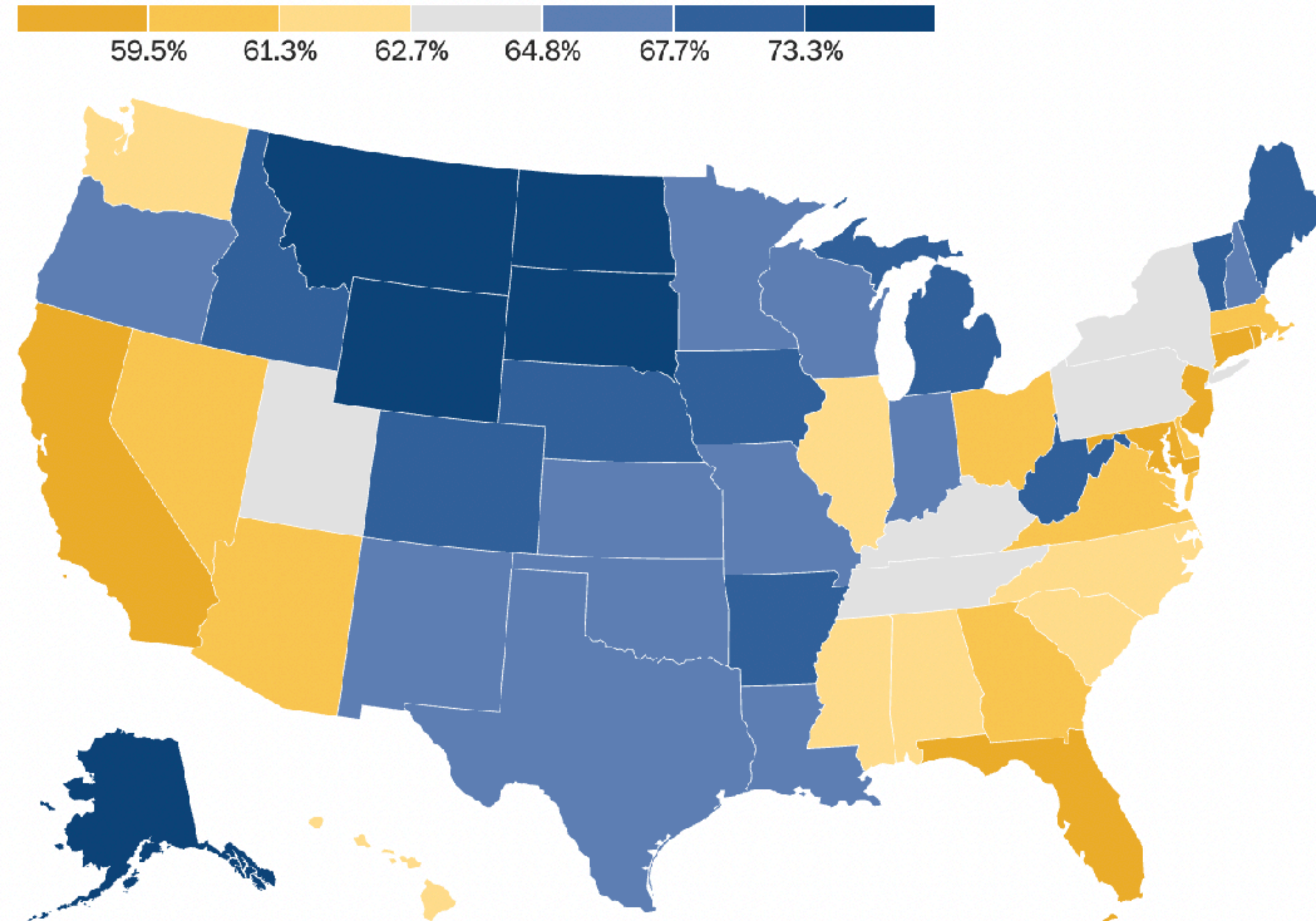
Percent





## True truck territory

Share of registered vehicles that are trucks, which includes pickups, vans, SUVs, crossovers and commercial vehicles



Note: If you could see D.C. on this map, it would be at 43.6 percent.

Source: Federal Highway Administration

DEPARTMENT OF DATA / THE WASHINGTON POST

Source: <https://www.washingtonpost.com/business/2023/04/07/trucks-outnumber-cars/>





# Make Your Gift

If you have questions please email [giving@cu.edu](mailto:giving@cu.edu)  
or call 303-541-1290.

Learn more about giving to [pure endowments and quasi endowments](#).

One-Time

Recurring

\$50

\$100

\$500

\$1,000

Gift Amount \*

50.00

☐ Make this a monthly recurring gift! (Your first gift will be charged immediately)

Designation

A Future with Safe Streets Fund



[Add Another](#)

☐ This is a payment on an open pledge

After completing your gift, you will have the opportunity to leave a comment or to indicate if your gift was made in memory or honor of someone special.

First name \*

First name

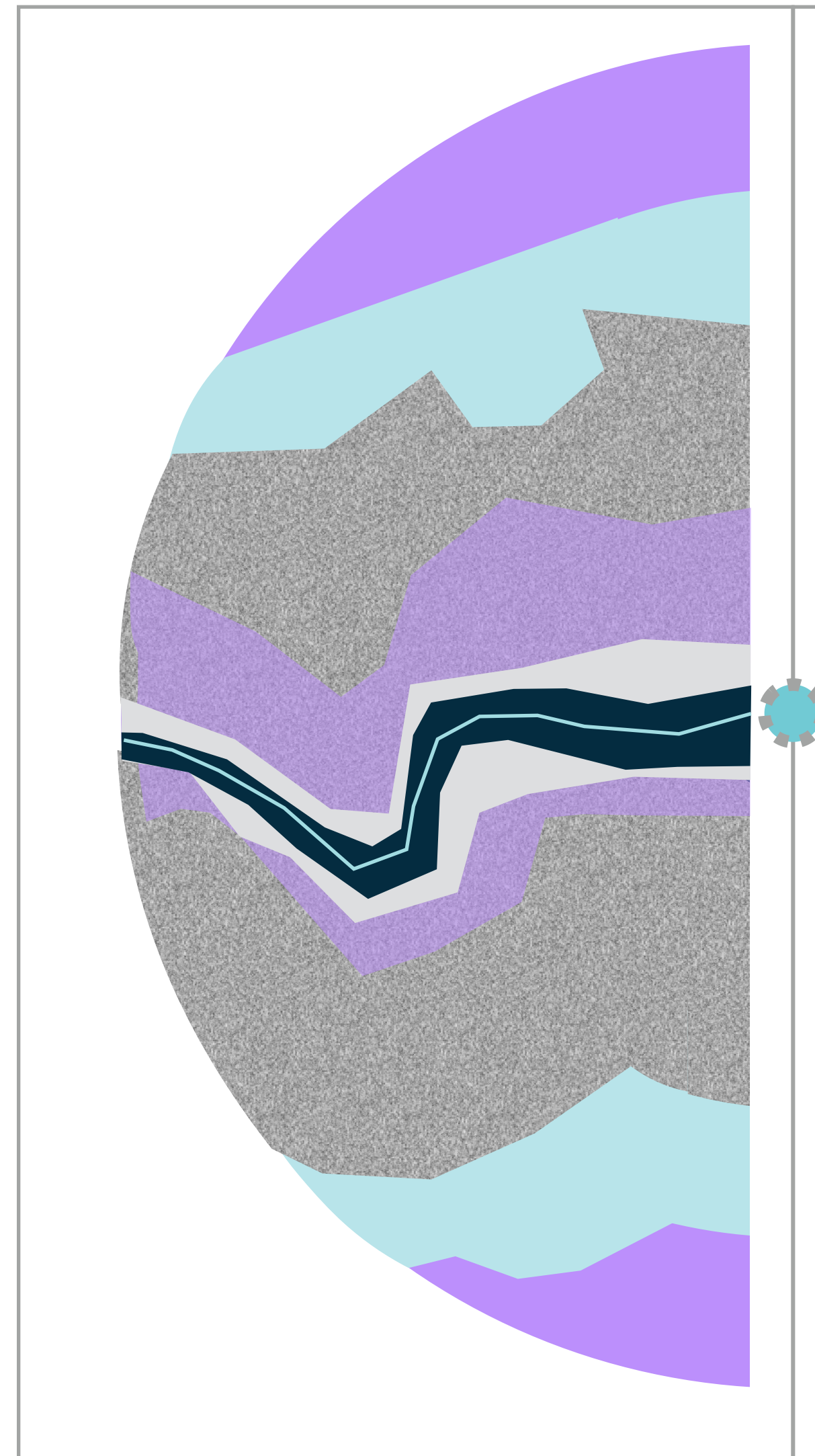


# WHY IS THIS NOT A PUBLIC HEALTH EMERGENCY?

- Record number of people are dying**
- Systemic issue (lack of feedback to meaningfully improve matters)**
- Society has grown numb to the problem**
- Responses to society have been inadequate (no vaccine in sight)**

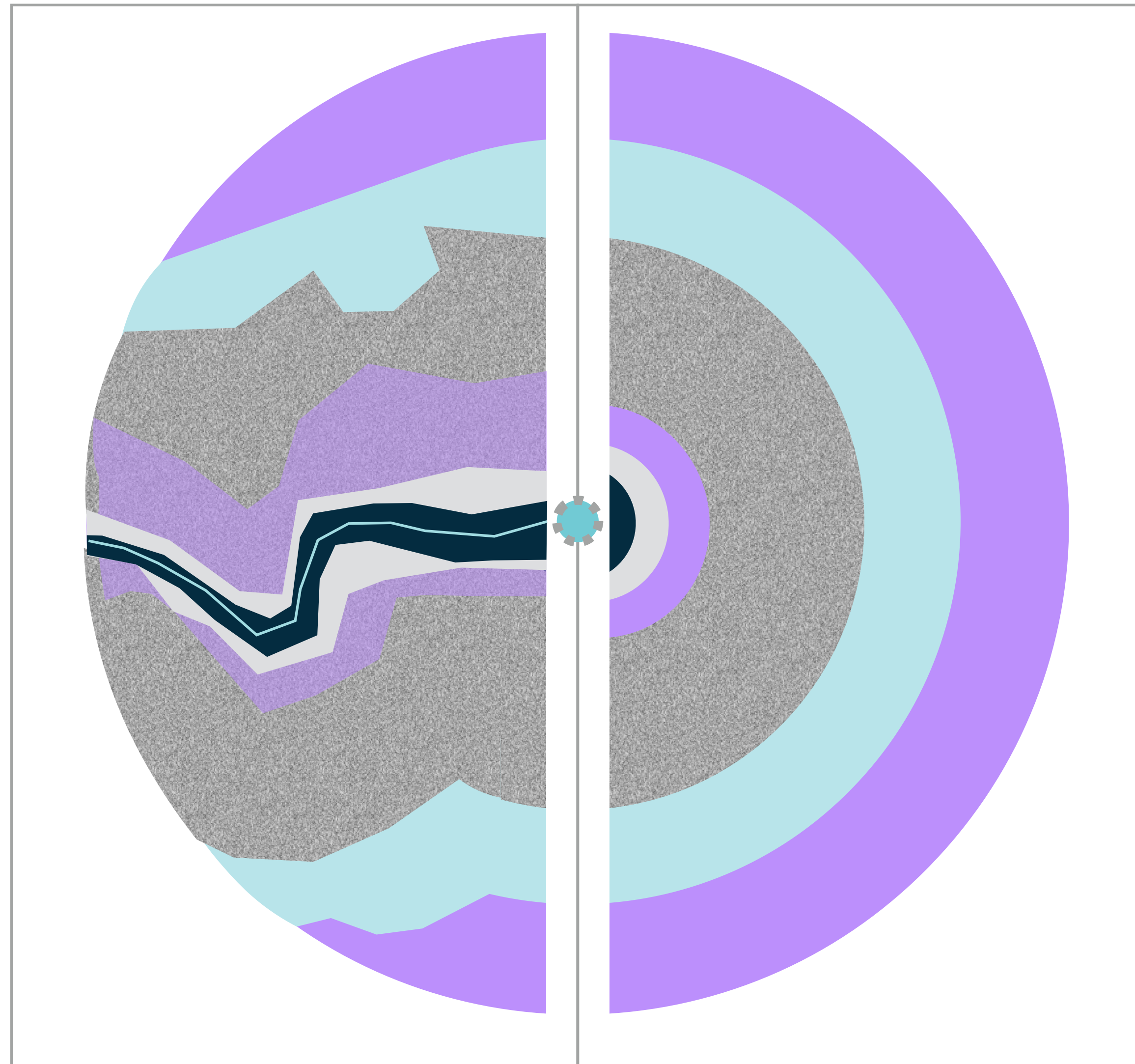


# EXISTING INFRASTRUCTURE SYSTEM - COMPLACENT WITH RISK & FAILURE



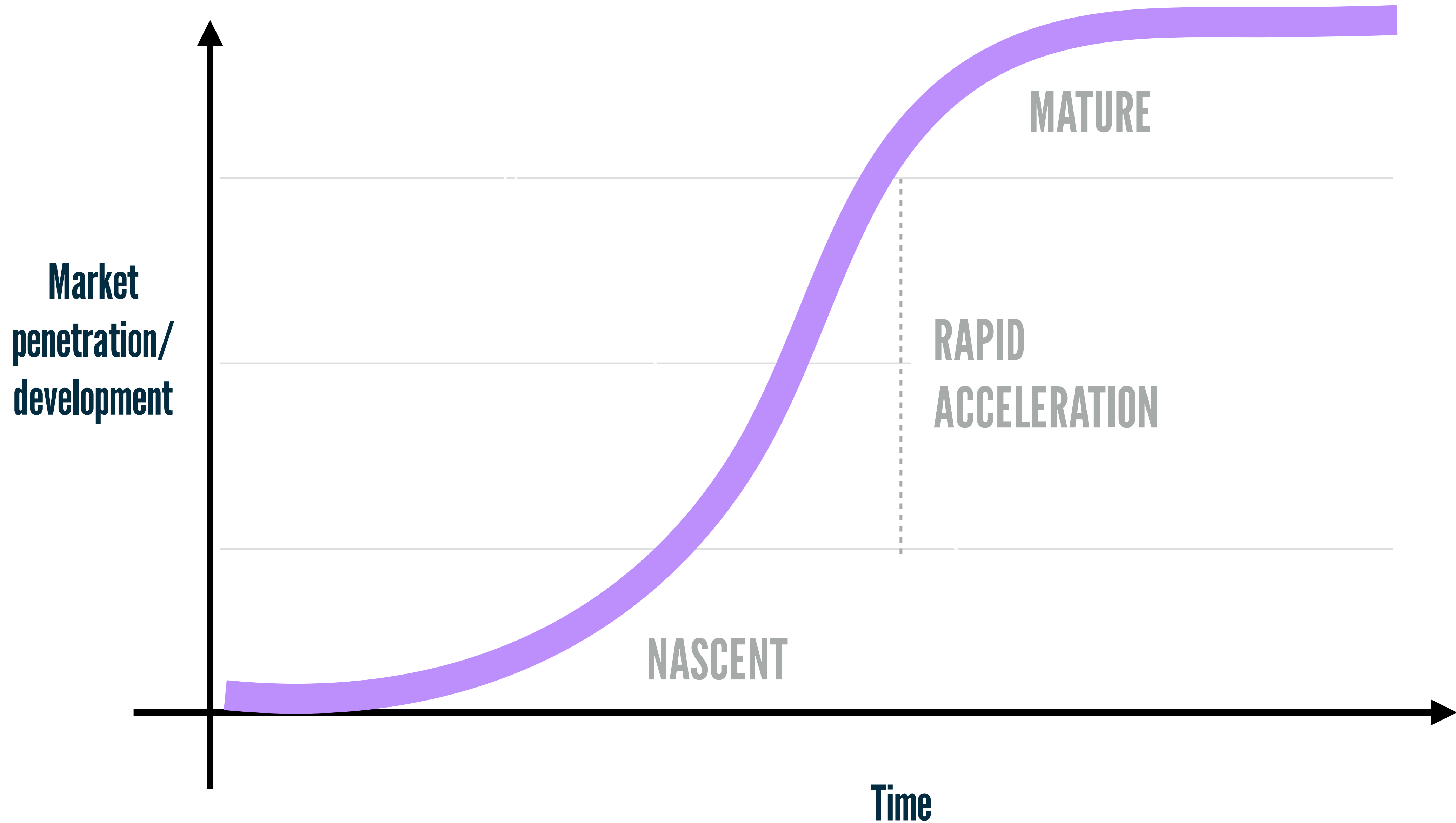


# CRAFT A BETTER PATH

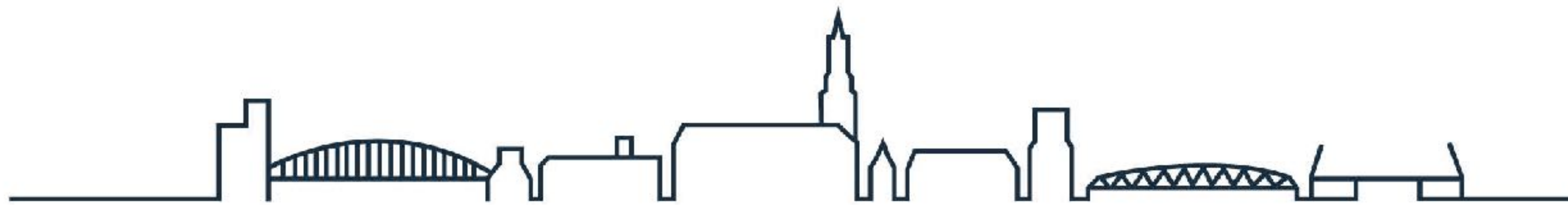




# NEW INFRASTRUCTURE NETWORKS







**A SUB-OPTIMAL SYSTEM MAY APPEAR TO BE RATIONAL OVER TIME**

**WHAT HAPPENS WHEN THE SYSTEM CANNOT EVOLVE QUICKLY  
ENOUGH OVER TIME, THEREBY NOT MEETING CHALLENGES?**

**MAXIMIZE LEARNING BY INSTALLING NEW PROCESSES TIED TO PAST FAILURES**



## April 2025 ATSC Chat Comments on Emergency Streets Presentation

Barb – Harold just described motornormativity--the fact that we tend to judge risks created by driving differently from risks in other realms.

- US research <https://findingspress.org/article/122974-windshield-bias-car-brain-motornormativity-different-names-same-obscured-public-health-hazard>
- UK research <https://www.sciencedirect.com/science/article/pii/S0959378025000172>

Barb - Offering a different description of the comparison than Harold's: Transportation systems can be thought of as electricity or water. We don't individually have to reduce the voltage coming from the dam or wear special gloves to plug a lamp into an outlet. The power is stepped down by trained professionals to a level we can interact with at the individual level.

Traffic engineering could be thought of as the system between the high voltage or water source and the household. We don't rely on an individual buying a filter to make their tap water safe to consume.

Karen Messmer When there is a fire, the fire chief or mayor speaks about the event. When someone dies in a traffic crash, the spokesperson does not describe how this is an epidemic, they typically only speak of the specific incident. There needs to be a spokesperson for this effort who is seen as an authority.

Barb - Washington's tort liability laws have a lot to do with this.

Kevin - tort liability laws...we'd like to look into those

Dr. Dooley - From a doctor's perspective we used to treat "accidents" in the hospital the same way i.e. blame behavior. Now due partly to Medicare and government rules there are no "accidents" only adverse events. They have to be tracked and action taken to prevent repeat the same adverse events. Otherwise the facility might be shut down.

Kevin - the motornormativity literature is a close cousin to the ideas presented in emergency streets

Jesse Gilpatrick, Center for Independence in Marysville, WA. I also collaborate with Emergency Management for disability inclusion. Driving is a privilege and personal that comes with a ton of responsibility. Yes, each individual drivers has their own unique of behavior and attitudes, especially when it comes to sharing the road. What I see more though is the lack of traffic knowledge. We take our driver education at a young age, but as



we get older, how many of us retain some of those knowledge? Is it possible to do a knowledge check at certain age to keep the road safe?

John Milton - The ability to determine the root cause and contributing factors in infrastructure safety is a difficult one. Take a persons walking across a road, is the person driven to cross midblock because the system was developed for large signal spacing to increase vehicle movement through the system (speed), and often along a road without protected sidewalks/access eg., a less safe walking environment, increased time to walk, adverse weather and unknown personal security considerations. How do we as practitioner address the situation? I see it as what can we do to balance or improve the personal safety equation.

Tony Gomez - Appreciate Tila's use of the term Public Health and Public Safety Approach. It's what we've done in our Seattle-Dr. King County Traffic Safety Coalition for 25 years which means a bigger tent towards marrying of the approaches. I have more thoughts on the overall approach to ES in this regard.

Mark M - When you talk to people in countries with much lower traffic deaths, it's not just road design they talk about. They talk about driver education, enforcement, and reducing impaired driving, in particular.

Kevin - there was mention above from the publication : findings press. There is now a new journal, called safety findings---and I am on the editorial board. regarding the report as mentioned. There's a good opportunity to publish it there.

Barb – Re, using lavender, orange, Color usage suggestions will make local engineers go consult the MUTCD

Tony- traffic violence term is a turn-off for those in public health, it encroaches into “violence.” Prevention of Violence - traffic violence is not part of World Health Org lingo. What language would help our cause?

Barb - A session that focuses on word choices and framing would be a good future topic. People don't even want to use the active rather than passive voice for traffic. You won't read "The ball was struck by the bat and a winning home run was achieved" in sports coverage. + Jessie, Steve

I often share this link, which cites research and puts it into usable terms <https://www.pedallove.org/from-victim-blaming-to-solutions-toolkit>. Designed for an advocacy audience, relevant for public agency communications as well.



Karen- The language situation includes the media reports that include 'whether the person was in a crosswalk or not' which seems to indicate that if one was not in a crosswalk, the person who was hit is to blame.

Barb - For those who aren't familiar with ghost bikes, those are another awareness-raising tool that could be placed in these locations if someone on a bike died there.

- [https://en.wikipedia.org/wiki/Ghost\\_bike](https://en.wikipedia.org/wiki/Ghost_bike)
- FYI on something Seattle Neighborhood Greenways did pre-COVID to mark pedestrian death locations <https://komonews.com/news/local/white-silhouettes-posted-across-seattle-to-honor-traffic-crash-victims>

Tila - This is about visible awareness –

Bill L - Seattle has a 25mph speed limit for all arterials regardless of safety in urban neighborhoods. We need a street by street and block by block determination and reduce to 20 mph when appropriate.

Tila- what ATSC could do - enabling state legislation, like Idaho Stop, “here’s a model that municipalities can put in their code.”

Dr. Dooley – I like the idea of fixing crash areas– we need to use it. Cities are afraid of liability and not following process. “Adverse events” – regulations force us to address them, are required to keep our funding.

I am allowed to use medical judgement to by-pass medical standards. Engineers are allowed to use engineering judgement if there is a special case ie., someone was killed i.e. installing temporary barriers

Barb – As WSDOT reviews bills, we ask: “does this work for my agency, and will it pass if written?” We would need statutory language – not if it increases tort liability – we are the broadest in the nation for winning. Can’t say “the street is the thing that killed people”. We can partner on the kind of language that could become an ATSC recommendation – to be clear about “don’t do this...because it will no longer be great”

I'll add that the current resource constraints for the transportation budgets, both state and local, raise barriers to adoption.

John Milton – contributing factors, even if not infrastructure – what can we do to remove the behavioral outcome.

Harold – I vote for doing something on this.



Barb - Personally I think it would be better to approach the temporary change as a tactical urbanism quick-build opportunity to trial the actual changes we'd want. A work zone isn't a roadway reconfiguration, it's a tiny detour.

Personally I think it would be better to approach the temporary change as a tactical urbanism quick-build opportunity to trial the actual changes we'd want. A work zone isn't a roadway reconfiguration, it's a tiny detour.

Mark M – half of fatalities involve an impaired driver, and for peds, half are impaired peds- they won't respond to built environment rationally. Fatalities rarely take place in the same exact location, which is another challenge for geographic patterns.

Barb - Where multiple crashes occur in the same corridor, slowdown after slowdown would be very informative.

Karen - Impaired driving further supports the need to reduce speed with physical design that slows driving behavior. That includes temporary structural reminders.

Portia – counties take a long time to do anything about danger areas, not getting the attention and response

Kevin- the sky didn't fall when we reduced speed limit; trying to do this so engineers and public works have a say -

Barb – Future discussion needed on what it would take for the crash investigations to happen that quickly. (Answer isn't just funding; it's also availability of people trained in all the topics listed.)

Tony - I have been part of Public Health Emergency or Severe Health Hazard declarations. I have tried over the years to get a similar declaration for traffic fatalities, serious injuries and the cost burden. I have not been successful. Maybe looking at state/local public health law change for how to get this kind of declaration/attention would be worth discussing.

Steve - Advocacy is not my area at all, but I wonder if testing this approach where with someone has been seriously injured rather than killed would be more politically effective. Someone with visible injuries talking to a local reporter about how high speed contributed to the collision that hurt them feels like they'd be an effective face of the intervention.

Barb - Following up on Portia's comment, in re-reading RCW 46.61.415 <https://app.leg.wa.gov/rcw/default.aspx?cite=46.61.415> on slowing speeds at the city level without a traffic study, I also found RCW 46.61.480 <https://app.leg.wa.gov/RCW/default.aspx?cite=46.61.480> about tribal powers over speed limits. That should be considered in this discussion too.





# TRAFFIC SAFETY LEGISLATION: 2025 UPDATE

Mark McKechnie, MSW, External Relations Director, WTSC

Bill statuses noted are accurate as of 4/15/25

Chamber cutoff for most bills is 4/16/25



# HB 1878: YOUNG DRIVERS

- ❖ Requires DOL to establish a program to provide vouchers to cover up to the average costs of driver training education courses for low-income drivers.
- ❖ Adds mandatory driver training education for new drivers who are 18 years old beginning January 1, 2027. Extends requirement through age 21 by January 2030. (Bottom line: Drivers born in 2009 and later will be subject to this requirement.)
- ❖ Requires new driver's license applicants under the age of 25, beginning May 1, 2026, and until January 1, 2031, to pass an online work zone and first responder safety course.
- ❖ Requires the Department of Licensing (DOL) to establish a program to expand education opportunities for driver training school instructors and a program to partner with tribal governments to provide young driver training education in tribal communities.
- ❖ Increases certain driver licensing and vehicle registration fees to fund the new programs.

Passed House 74-22

Passed Senate 38-11

Requires House Concurrence Vote





# HB 1596: INTELLIGENT SPEED ASSISTANCE DEVICES

- Requires the use of an intelligent speed assistance device, as a condition to a temporary restricted or occupational driver's license, under certain circumstances.
- Requires installation of speed limiter when the person has:
  - Reckless driving conviction (required for 150 days after license suspension ends)
  - 3 traffic infractions within 1 year, or 4 infractions within 2 years
  - **And** when one infraction includes 10+ mph over posted speed 40 mph or less or 20+ mph over posted speeds greater than 40 mph (During the first 120 days of the period of probation following 60-day license suspension)

Passed House 84-12

Passed Senate 40-8

Requires House Concurrence Vote



# SB 5238: SPEED AND RECKLESS DRIVING

Expands the conduct that constitutes Reckless Driving (RCW 46.61.500) to include when a person drives a vehicle more than 30 miles per hour over the posted speed limit.

Passed Senate 47-2

Awaiting vote in the House

House amendments would require concurrence vote





# SB 5374: TRIBAL TRAFFIC SAFETY

- Requires WTSC to establish a Tribal Traffic Safety Coordinator Program to assist tribes in implementing traffic safety strategies.
- Allows a tribal government representative to serve on the Cooper Jones Active Transportation Safety Council at the Traffic Safety Commission (Commission).
- Requires specified local planning efforts to work in coordination with affected tribal governments and assess impacts on affected tribal areas.

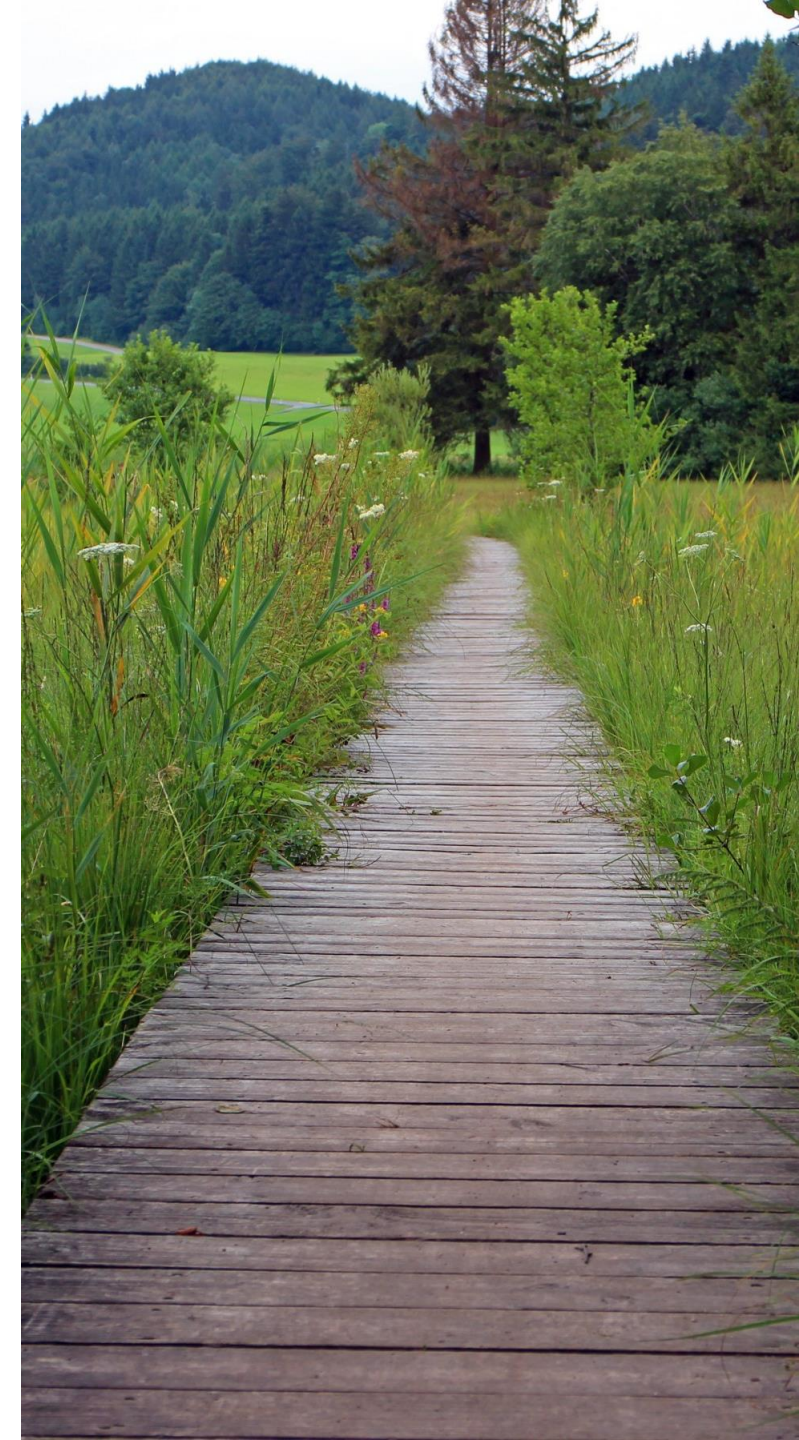




# SB 5581: SAFE SYSTEM/COMPLETE STREETS

- Integrates shared-use paths that are part of a state or local active transportation plan into certain highway planning, design, and construction.
- Defines the term roundabout, and updates definitions for crosswalk and intersection within the context of roundabouts.
- Requires the Washington State Department of Transportation (WSDOT) to identify existing or planned active transportation facilities on publicly or tribally owned property and determine if such facility provides equal or better access to destinations and is an appropriate network connection providing mitigation in lieu of fulfilling Complete Streets requirements on state rights-of-way, subject to a cooperative agreement and certain conditions.
- Authorizes WSDOT to implement Complete Streets requirements on Safe Routes to School Program, Connecting Communities Program, and Bike and Pedestrian Grant Program recipients, when there are changes on state rights-of-way.

Passed Senate 29-19  
Currently in House Rules





# SB 5595 SHARED STREETS

- Authorizes local authorities to designate a non-arterial highway a "shared street."
- Permits local authorities to establish maximum speed limits of 10 miles per hour on shared streets.
- Requires vehicular traffic traveling along a shared street to yield the right-of-way to a pedestrian, bicyclist, or operator of a micro-mobility device.
- Requires a bicyclist or micro-mobility device operator traveling along a shared street to yield the right-of-way to a pedestrian.



This Photo by Unknown Author is licensed under CC BY-NC



# HB 1423: NOISE ENFORCEMENT CAMERAS

- Authorizes automated vehicle noise enforcement cameras to be used as part of a pilot program to detect maximum permissible vehicle equipment sound level violations in zones designated by local ordinance as vehicle-racing camera enforcement zones in cities participating in the pilot program.
- Requires WTSC to oversee pilot and report to legislature by January 1, 2028. Pilot expires July 1, 2028.

Passed House 57-40  
Currently in Senate Rules





# HB 1515: ALCOHOL SERVICE IN PUBLIC SPACES

- Provisions for city, town, or county and LCB to approve temporary outdoor alcohol service licenses
- Intends local governments and LCB to approve expanded indoor and outdoor service in public spaces be allowed during single multi-day event in June-July 2026 (World Cup)
- Requires local governments that implemented expanded alcohol service to conduct a public engagement review or submit a report.





## BILLS THAT DID NOT PASS CUTOFFS (4/15/24)

- SB 5067: Reducing the per se BAC limit to 0.05 percent
- SB 5705: Increasing fines for repeat traffic infractions
- HB 1512: Limiting traffic stops
- HB 1110: Vacating convictions for DUI
- HB 1113: Authorizing courts to dismiss misdemeanor charges upon defendant's substantial compliance with court-ordered conditions

These bills and others that do not pass will be reintroduced in 2026.



## Measuring ATSC Success

**Goal:** *Reduce pedestrian and roller fatalities and serious injuries*

Area of Focus	Inputs	Outputs	Outcomes
<b>Policy</b>	<p>Study Group Meetings</p> <p>Proposals for support submitted</p> <p>Votes taken</p> <p>White Papers developed</p> <p>Council Meeting Presentations</p> <p>Council meeting-based Discussions</p> <p>Legislative Reports delivered</p> <p>Bills of interest tracked per session</p>	<p>Annual Report completed and delivered to policy influencers</p> <p>Letters of support compiled and delivered to policy influencers</p> <p>Recommendations developed</p> <p>Recommendations are funded</p> <p>Recommendations become state law</p>	<p>Recommendations implemented (percentage of the state by year one, number of cities/towns/counties that adopt the new law, number of infrastructure improvements made as a result)</p> <p>Active transportation user fatality rates in areas where recommendation-based laws are implemented decrease</p> <p>Active transportation user serious injury rates in areas where recommendation-based laws are implemented decrease</p>
<b>Collaboration</b>	<p>Member recruitment</p> <p>Hours of meeting time</p> <p>Hours of study group time</p> <p>Hours of administrative support</p> <p>Hours of Planning</p> <p>Outreach and vetting conducted (speakers, new members)</p>	<p>Council meeting presentations delivered</p> <p>Council meetings held</p> <p>Number of active members</p> <p>Ad hoc study groups formed</p> <p>Votes taken using consensus-driven decision-making</p> <p>Number of speakers</p> <p>Topics identified</p>	<p>Percent of council's roles filled</p> <p>Diversity of perspectives and locations represented</p> <p>Recommendations and white papers contributed to annual report</p>



	Onboarding Support EC meetings	White papers produced and delivered to policy influencers	
<b>Data</b>	Fatal Case Review member time	Number of Fatal Case Reviews held	Gap/new data is used to increase ATU safety
	Fatal Case Review Summary Presentation	Gaps Identified (Parking lots, Young Driver Education)	Gap/new data is used to procure funding for programs and projects that increase ATU safety
	Administrative Tasks (Data Collection and Evaluation, preparation, file packet compilations and distribution)	Trends identified (FCR to FCR, year to year, etc.)  Recommendations contributed to annual report	
	Facilitation	Recommendations become law	
	Process development and improvement	Gap/new data is collected  Gap/new data collection is funded	