

MANITOBA PUBLIC UTILITIES BOARD

Re: MANITOBA PUBLIC INSURANCE CORPORATION (MPI)
GENERAL RATE APPLICATION
2014/15

Before Board Panel:

Karen Botting - Chair
Regis Gosselin - Board Chair
The Hon. Anita Neville - Board Member

HELD AT:

Public Utilities Board
400, 330 Portage Avenue
Winnipeg, Manitoba
October 10, 2013
Pages 1392 to 1610



“When You Talk - We Listen!”



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1 --- Upon commencing at 9:31 a.m.

2

3 THE CHAIRPERSON: Good morning,
4 everyone. I'd like to, I'd like welcome you here to
5 our hearings. And I would like to welcome our two
6 presenters who have come from Pennsylvania; welcome
7 to Winnipeg. I will call upon, now, Mr. Triggs, who
8 will file two (2) exhibits for us this morning.

9 MR. MICHAEL TRIGGS: That's correct,
10 Madam Chair, two (2) exhibits we wish to file. The
11 first one is the resume of Dr. Allen Robinson. And
12 that would be filed as MPI Exhibit number 50.

13

14 --- EXHIBIT NO. MPI-50: Resume of Dr. Allen
15 Robinson

16

17 MR. MICHAEL TRIGGS: And the second
18 exhibit
19 is the resume of Mr. Brett Robinson. And that's
20 Exhibit number -- MPI Exhibit number 51. Thank you.

21

22 --- EXHIBIT NO. MPI-51: Resume of Mr. Brett
23 Robinson

24

25 THE CHAIRPERSON: Shall we start?

1 And now I believe we can start with our two (2)
2 presenters this morning. Mr. Triggs, would you like
3 to introduce them to us please?

4 MR. MICHAEL TRIGGS: Yes, Madam
5 Chair. I have a few -- a bit of introductory
6 statements to prepare the panel for what's -- Dr.
7 Robinson and Mr. Robinson will be testifying today.
8 We're bringing them forward as experts in driver
9 education and training programs.

10 The Board's - in Order 22/'13, the
11 Board expressed its wishes to explore a number of
12 road safety issues with the Corporation. Ms. McLaren
13 spoke in depth with a lot of those issues that were
14 identified in that Order.

15 As the Board is aware, MPI is
16 conducting its -- a review of its High School Driver
17 Education Program. Part of its review, MPI retained
18 Dr. Robinson and Mr. Robinson to conduct a global
19 review of existing driver education and retraining
20 programs. The idea was: Well, why reinvent the
21 wheel if something already exists out there?

22 Dr. Robinson and Mr. Robinson prepared
23 an eight hundred (800) page report on what exists
24 throughout the world in driver education and training
25 programs. The executive summary was provided to the

1 Board as part of SM-5 -- 5.4, Attachment B. And
2 since high school driver education is the largest
3 component of MPI's proposed road safety budget, at
4 \$4.3 million, the Corporation believes that it's
5 important for the Board to have a solid understanding
6 of driver education and training programs.

7 This is why the Corporation has
8 brought forward Dr. Robinson and Mr. Robinson as
9 experts in this area. And as it was stated in Ms.
10 Kalinowsky's letter of June 3rd, 2013, to Ms.
11 Grammond, the Corporation's putting them forward as
12 experts only in this area, and only to be bound by
13 the testimony in this area.

14 However, to all the Board and the
15 Intervenors the opportunity to explore their
16 extensive knowledge in such areas as distracted
17 driving, and motorcycle safety, and impaired driving,
18 and ro -- of technology in road safety, Mr. Robinson
19 and Dr. Robinson are willing to answer questions on
20 those areas.

21 But to be clear, I will not be putting
22 any questions towards them on those topics. And
23 we're just putting them forward as experts in -- in
24 driver safety and education programs.

25 Furthermore, further to Dr. Robinson -

1 - and can the -- they don't -- they don't have any
2 expertise in the areas of cycl -- road safety and
3 cycling road, and wildlife collisions, so they won't
4 be able to talk about that in their report.

5 For Mr. Oakes's benefit, would you
6 please know that Mr. Robinson is currently the
7 executive director of the American National
8 Association of State Motorcycle Safety Administrators
9 and to be able to discuss matters of motorcycle
10 safety with him, if he has any questions on that.

11 And a final point that I would like to
12 make before Mr. Robinson and Dr. Robinson begin their
13 testimony, is -- and you will hear this from them, is
14 that in order to prepare an unbiased research into
15 global best practices in driver education and
16 training programs, they did not look at what MPI does
17 in its High School Driver Education Program. That's
18 they're not in a position to speak to the pros and
19 cons of MPI's high school and drive -- High School
20 Driver Education Program because they did not look at
21 it.

22 With that, I can advise that the
23 nature of my questions to Dr. Robinson and Mr.
24 Robinson will use their report as a background for
25 informative discussion on what exists today and what

1 the future can hold for driver education and training
2 programs.

3 With that, I'll begin the discussion
4 to have them qualified as experts in the area of
5 driver education and training.

6

7 (BRIEF PAUSE)

8

9 MR. MICHAEL TRIGGS: I'll address Mr.
10 Robinson's -- Dr. Robinson's qualifications first on
11 that --

12 MR. BYRON WILLIAMS: Mr. Triggs --
13 or, Madam Chair, if I -- I'm -- the Board's secretary
14 may wish to affirm or swear the -- the witness.

15 THE CHAIRPERSON: Thank you.

16

17 ALLEN ROBINSON, Sworn

18 BRETT ROBINSON, Sworn

19

20 EXAMINATION-IN-CHIEF BY MR. MICHAEL TRIGGS (QUAL.)

21 MR. MICHAEL TRIGGS: Yes, and we'd
22 like to have Dr. Robinson and Mr. Robinson declared -
23 - determined to be experts in the area of driver
24 education and training programs. That's the
25 development, the curriculum of -- of those programs,

1 and speaking towards the -- the content of those
2 programs.

3 Dr. Robinson, you have a very long,
4 extensive history in the area of road safety going
5 back to 1964. Can you provide the Board with an
6 overview of your expertise in that area?

7 DR. ALLEN ROBINSON: Well, in 1964, I
8 began as a driver education teacher in Weaton,
9 Illinois. And it was an experience that would lead
10 to a life-changing behaviour. But in those three (3)
11 years that I taught in Wheaton, Illinois, I realized
12 that there was a whole lot more to training young
13 drivers than what I knew.

14 And so I, therefore, decided to go
15 Illinois State University and get a master's degree
16 in traffic safety, which I did. And in that degree,
17 I -- my emphasis was in college preparation of new
18 teachers. And when I finished that, I went to work
19 for a foundation whose principle purpose was to
20 improve road safety in the United States. And my
21 role was to work in the area of teacher training and
22 developing educational materials for driver
23 education.

24 I spent three (3) years with them and
25 then decided I needed a further dose of medicine and

1 went and got PhD at Michigan State University, where
2 I had an emphasis in secondary education so that I
3 would be able to further implement the types of
4 programs that are needed for training young people.

5 And I -- I left there and I spent ten
6 (10) year with the Motorcycle Safety Foundation. My
7 role there was to develop a rider education program
8 and a teacher training program for what I call non-
9 school professionals. In other words, it was not
10 being used in the public school system by trained
11 teachers; it was being used by enthusiasts. That
12 program, to various levels of -- of comparison, is
13 still in effect today in the United States.

14 I left there and went to where I
15 belong, at Indiana vers -- Indiana University of
16 Pennsylvania, where I became a professor in the
17 Highway Safety Centre. After ten (10) years of
18 working on projects and research activities and
19 developmental efforts, I became the director of the
20 Highway Safety Centre, where my responsibility was
21 teacher training courses for certification of driver
22 education teachers and managing twelve (12) to
23 fifteen (15) state and federal highway safety
24 projects.

25 I did that until 2010, in which I

1 retired and worked -- began working almost full time
2 with Highway Safety Services, an organization my son
3 and I created for the purpose of doing project and
4 developmental work under contract for those that were
5 interested in highway safety. So I have a variety
6 of experiences and backgrounds, but my primary
7 emphasis is to have -- is to develop materials that
8 are easy for teachers to use so teachers can do a
9 better job of training young drivers. Thank you.

10 MR. MICHAEL TRIGGS: In your resume,
11 you -- you have a number of professional publications
12 and presentations that you've made. It goes on for,
13 you know, two and a half (2 1/2) pages.

14 Can you just highlight on some of the
15 more significant presentations that you've made in
16 relation to the topic we're going to speak to today?

17 DR. ALLEN ROBINSON: Well, some of
18 the major activities that I've done certainly have
19 been with teacher training, trying to get people to
20 understand that you can't just decide you want to get
21 in a car and go teach somebody how to drive that car.
22 The person needs to understand a variety of
23 behavioural changes people go through as they learn.
24 They need to -- they need to understand sequencing of
25 behaviour, and they need to understand how to

1 evaluate them to make sure that they're succeeding in
2 the task of learning to drive safely.

3 Most people believe that you are
4 successful if you teach somebody to drive a car and
5 they get a driver's licence. That's so far from
6 success, it's unbelievable. You have to teach them
7 safe driving practices so that they are able to make
8 a choice between what's right and wrong when there is
9 a high-risk situation that can result in a life-and-
10 death decision. So my emphasis is trying to get
11 people to understand what safe driving practices are.

12 I guess some of the other areas that
13 I've worked on, and I'm not sure how they relate to
14 our charge here, but some twenty (20) years ago I
15 made a presentation to the American Association of
16 Motor Vehicle Administrators that if licensing and
17 driver education don't join forces and work together
18 to properly train and license young drivers, we're
19 never going to be successful. And I got booted out of
20 the room.

21 Well, today that has changed in our
22 country, and there's a great deal of cooperation
23 between the licensing agencies and the educational
24 departments in our country. So that's a couple of
25 the things that I've done. Thank you.

1 MR. MICHAEL TRIGGS: Also on your
2 resume on pages 5 and 6 there's a number of honours
3 that have been granted to you throughout your long
4 and distinguished career.

5 Can you just speak to a few of those?

6 DR. ALLEN ROBINSON: Well, it's
7 always better to start from the most recent. I -- I
8 guess, and I believe it's on here, I'm not sure, this
9 past spring at the Lifesavers Conference I was given
10 a outstanding contribution award from the
11 administrator of NHTSA, US Department of
12 Transportation, for work that I've done in highway
13 safety. I -- I certainly appreciated that because of
14 the importance it is to show that you can work with
15 federal government, and you can work with agencies,
16 and working together you can make changes in driver
17 education.

18 Driver education in our country has
19 had a tough time the last twenty (20) years. And the
20 last five (5) years we have finally broken the ice
21 and we're making improvements in cooperative
22 relationships to improve our driver education
23 programs. So that -- that is one (1) that I was
24 certainly quite proud of.

25 And then there was one (1) from my own

1 association, in which I was given the Kaywood Award,
2 which is recognition for work in promoting what our
3 association does, the American Driver and Traffic
4 Safety Education Association, and how I've helped
5 improve the ability of teachers to train new drivers.
6 Thank you.

7 MR. MICHAEL TRIGGS: Mr. Robinson,
8 you have your resume. It's been submitted as Exhibit
9 51 to -- to the Board.

10 Can you go over your experience in the
11 area of driver safety education training?

12 MR. BRETT ROBINSON: Good morning.
13 In the 1990s, I worked for the Highway Safety Centre
14 at Indiana University of Pennsylvania, where I worked
15 in a variety of training areas within highway traffic
16 safety, certainly driver education being one (1) of
17 those areas, but also rider education, working with
18 people who wanted to get their licence to become a
19 motorcycle operator, and also within commercial
20 vehicle training, working with a eight (8) week truck
21 driver training program.

22 And in each of those areas I was also
23 very heavily involved with instructor development,
24 instructor training, and developing curricula for
25 each of those training programs.

1 I also served as a regional
2 coordinator for a statewide motorcycle safety program
3 which entailed training instructors for each of the
4 training years; doing update training for motorcycle
5 rider education teachers; and conducting audits,
6 quality control for rider education teachers; working
7 with various companies on driver training programs,
8 training driver fleets for power companies as well as
9 for trucking companies.

10 Then in 1996 I had the opportunity to
11 go to work for the American Association of Motor
12 Vehicle Administrators, which represents all the
13 driver licensing agencies in the US and Canada. And
14 I held various positions with AAMVA and worked my way
15 up to vice president of Programs Division, where I
16 was responsible for all aspects of driver licensing
17 in the program area which dealt heavily with the
18 training.

19 And in that training, we developed
20 training curricula for training driver licence
21 examiners for those who tested, regular car
22 operators, motorcycle operators, and very heavily
23 within the commercial driver licensing program for
24 those who conducted examinations for commercial
25 operators.

1 I was also responsible for the
2 development/maintenance of the CDL testing system,
3 the tests that are administered to those who want to
4 receive a commercial driver licence, and then also
5 oversaw a certification program that certified
6 examiners in each of those areas.

7 I had a lot of other responsibilities
8 with AAMVA that broached into other areas, including
9 security, identification security, training people to
10 recognize fraudulent documents, and many other areas.
11 But the primary focus really was in -- in traffic
12 safety and dealing with examinations of those who are
13 seeking their licences, and then working with other
14 organizations.

15 As Allen mentioned, licensing and
16 training do go hand in hand. So as -- as I worked
17 for AAMVA as a licensing body, we worked very closely
18 with ADTSEA, the Motorcycle Safety Foundation, and
19 within the trucking industry for those who conducted
20 the training portion, and tied it to the licensing.

21 And then in 2005 I left AAMVA to move
22 back to Pennsylvania and we started Highway Safety
23 Services where today I'm currently responsible for a
24 number of activities within highway safety. And
25 those activities certainly include working with the

1 National Highway Traffic Safety Administration on a
2 variety of traffic safety issues as they relate to
3 driver education.

4 I serve as secretariat to a group
5 called the Association of National Stakeholders and
6 Traffic Safety Education. And that group is
7 responsible for overseeing national standards to
8 improve driver education in the United States. The
9 national standards were developed in 2009. And the
10 primary goal of this group is to seek voluntary
11 adoption from the states of these standards to
12 improve driver education.

13 And in the past two (2) to three (3)
14 years we've developed a strategic plan for getting
15 the standards implemented. We're currently providing
16 technical support to states to adopt these standards
17 for driver education.

18 We are currently developing delivery
19 standards to supplement the standards that have
20 already been developed, which describe how driver
21 education should be delivered; how it should be
22 taught; what are the minimum requirements for
23 classrooms, for vehicles that are used in driver
24 education and training; how it should be delivered to
25 students; how many hours of instruction should occur

1 within a day. Instruction should be spread out over
2 a period of time; it should not be taught in a very
3 short period of time, et cetera.

4 We have just begun two (2) new
5 projects to develop teacher training standards. What
6 are the standards for training driver education
7 teachers? We are also going to develop model
8 curricula for the training of driver education
9 teachers so that there is a common tool that is used
10 for training those driver education teachers.

11 And then also we're working on a
12 project to develop standards for providing online
13 driver education. Online driver education really
14 varies across the board in how it is delivered. And
15 the hope is to have some set standards which require
16 interaction for students who are involved with online
17 training.

18 One (1) of my other key activities
19 within Highway Safety Services is serving as
20 executive director for the American Driver and
21 Traffic Safety Education Association, which has a
22 primary goal of improving what driver education
23 teachers do and providing the resources that driver
24 education teachers need, including model curricula
25 which I've been very heavily involved with in

1 developing that curricula, and the training visuals
2 and training videos that are used with that
3 curricula.

4 I also serve as the executive director
5 for the National Association of State Motorcycle
6 Safety Administrators, which is one (1) of my newest
7 roles in assisting state motorcycle administrators
8 with their function in administering state motorcycle
9 safety programs, and expanding their focus from just
10 rider training to looking at all aspects of
11 motorcycle safety and how we can reduce motorcyclist
12 fatalities and crashes on the roadways.

13 MR. MICHAEL TRIGGS: Thank you, Mr.
14 Robinson. Madam Chair, the -- the purpose of -- and,
15 Madam Chair, the purpose of expert witnesses are to
16 assist a panel of Board members understand an area
17 where they may not have knowledge and expertise in
18 that. The topic that we wish to speak to today of
19 and to educate the Board on is that of driver
20 education and training programs.

21 And based on the extensive knowledge
22 and that, we'd like to have them qualified as
23 experts. I believe that Ms. Grammond and Mr.
24 Williams may have some questions on that point, but
25 this is our position so far.

1 THE CHAIRPERSON: Okay. Thank you.
2 Ms. Grammond, do you have any questions on that,
3 or...

4 MS. CANDACE GRAMMOND: I do, Madam
5 Chairman, thank you.

6

7 CROSS-EXAMINATION BY MS. CANDACE GRAMMOND (QUAL.):

8 MS. CANDACE GRAMMOND: My questions,
9 and I -- I can indicate for the panel's benefit and
10 for the benefit of -- of MPI and -- and others, I
11 don't have questions with respect to the driver
12 education side of things. I appreciate that these
13 witnesses are being put forward by MPI to talk about
14 driver education, but as we knew in advance and as
15 Mr. Triggs has indicated, the witnesses are able to
16 answer questions on other topics as well. Although
17 the answers on those topics, MPI will not consider as
18 binding on it as a corporation.

19 So what I would like to do is ask the
20 witnesses some questions about their qualifications
21 and experience in those other areas. A couple of
22 them have been touched on already, and then go from
23 there in order that we can clarify exactly what it is
24 that they're going to be qualified in subject to
25 MPI's proviso. So I'll proceed on that basis.

1 So, firstly, with respect to
2 distracted driving -- and I would perhaps direct the
3 question at Dr. Robinson first and then to Mr.
4 Robinson, so it's -- we'll keep the same order that
5 we've been using so far.

6 Dr. Robinson, can you speak to your
7 expertise and experience with respect to issues
8 regarding distracted driving?

9 DR. ALLEN ROBINSON: Yes. Distracted
10 driving is -- is a part of safe driving practices.
11 In other words, the students know how to drive a car,
12 and they know the skills, but if they don't
13 understand the risk that they put themselves in when
14 they're chewing gum, talking on the phone, texting,
15 playing videos, whatever it is they do, in the car,
16 and they don't understand that it's a very high
17 percentage of the accidents that now happen to
18 sixteen (16) and seventeen (17) year olds, we haven't
19 done our job.

20 So over the past five (5) years, if
21 there is a single topic that has grown in interest in
22 driver education, it's distracted driving. And how
23 do we get into the minds of young people and people
24 like us that driving a car is a serious, full-time
25 job, and that any of these other activities that

1 distract us from driving can very well lead to a
2 serious accident?

3 So my role has been collecting
4 evidence from -- from researchers, from developers,
5 case studies, where these things have had a -- had
6 have -- have had horrendous impact on families, so
7 that I can try to convince others that this is
8 something that they should avoid.

9 MS. CANDACE GRAMMOND: Thank you.
10 Mr. Robinson.

11 MR. BRETT ROBINSON: Yes. Two (2)
12 key areas with driver distraction lie in the areas of
13 education and then certainly outreach. Within
14 education I've been involved in a number of areas
15 where -- and again, it's not unique to teen drivers,
16 it's not unique to just regular operators.
17 distractions are a problem with motorcyclists,
18 commercial drivers, and with the four -- four (4)
19 wheel drivers and certainly teens.

20 Working with the American Association
21 Motor Vehicle administrators, we worked with them on
22 their model driver manuals, as well as a motorcycle
23 operator model manual and the commercial driver
24 licence operator's manual, and incorporated
25 information on distracted driving and also developed

1 test questions that go into the tests that are
2 administered for licensing that deal with distracted
3 driving.

4 Within the ADTSEA curriculum we
5 developed a complete section, a unit of instruction,
6 that focusses solely on distracted driving, utilizing
7 a lot of the resources that have been developed by
8 the Department of Transportation in the US and other
9 safety organizations to educate teens on the dangers
10 of distracted driving and how to avoid distracted
11 driving itself.

12 So in the education piece I've had a
13 lot of involvement from the educational perspective
14 certainly, reviewing the -- the studies that have
15 been done on distracted driving. I think it's one
16 (1) of the biggest challenges that we are facing
17 today in highway safety as our driving task becomes
18 more and more complexed and we create more and more
19 distractions in the vehicle itself. We've always had
20 distractions around the vehicle, but I think we have
21 more and more distractions in the vehicle itself,
22 particularly as we come up with more technologies and
23 more conveniences that we place in automobiles today.

24 And I've had some involvement with the
25 outreach, the programs are developed to reach out to

1 the general public and educate on distracted driving,
2 but in particular, distractions with motorcycle
3 operators and distractions with commercial drivers.

4 MS. CANDACE GRAMMOND: Thank you.
5 The next area that was identified that -- that you
6 gentlemen could speak to was motorcycle safety. And
7 I appreciate that both of you have mentioned that
8 already in your evidence with respect to
9 qualifications, and certainly it's referenced on the
10 face of both of your resumes.

11 Do either of you want to add anything
12 in terms of your experience and knowledge with
13 respect to motorcycle safety that has not already
14 been stated.

15 So again, Dr. Robinson, I'd ask you to
16 go first and then Mr. Robinson.

17 DR. ALLEN ROBINSON: I don't know what
18 else to say other than in -- in 1973 there was no
19 rider education at all in the US or Canada. And when
20 we began working in the field of trying to determine
21 how you're going to train riders, we started actually
22 with an empty bucket. And we filled that bucket, and
23 I think we made one (1) of the best training programs
24 possible for training not just young drivers, but
25 drivers of all age. And we combined it with a

1 teacher training program so that the teachers could
2 use the materials we were developing.

3 And I point out its value because it
4 still exists today. I am not currently involved in
5 any way in any motorcycle safety activities. But the
6 work I did twenty-five (25) years ago still lives.

7 MR. BRETT ROBINSON: Yes, I'll add
8 three (3) quick points. The first is that from 1985
9 to 2001 I was a certified Motorcycle Safety
10 Foundation instructor and taught the basic rider
11 education program. Then in 1992 I became certified
12 as a chief instructor to train instructors in rider
13 education, through 2001, at which time I was working
14 for the American Association of Motor Vehicle
15 Administrators, and it became difficult to do my
16 normal job, as well as spend weekends teaching
17 teachers for rider education.

18 I've trained teachers, instructors,
19 for the State of Pennsylvania as well as the State of
20 Maryland. In 2006 I began participating with the
21 National Highway Traffic Safety Administration's
22 state assessment of motorcycle safety programs, which
23 involves five (5) team members going into a state and
24 doing a complete assessment of a state's motorcycle
25 safety program.

1 It's a five (5) day assessment, which
2 also includes a lot of pre -- pre-study; becoming
3 familiar with what a state is doing with their
4 overall motorcycle safety program, which includes
5 eleven (11) guidelines for motorcycle safety, from
6 public education and outreach to highway engineering,
7 law-enforcement, rider education, program assessment,
8 in a total of eleven (11) areas. And I've
9 participated in, I think, it's close to eight (8),
10 nine (9) -- eight (8) to nine (9) state assessments
11 for rider educ -- or for motorcycle safety programs.

12 MS. CANDACE GRAMMOND: Thank you.
13 The third area that was identified that you gentlemen
14 could speak to, but that MPI would not take your
15 answers as binding, was impaired driving. So in our
16 forum, and I'm sure in yours as well, that basically
17 means driving under the influence.

18 Can I ask each of you to comment on
19 your experience and expertise in that area?

20 DR. ALLEN ROBINSON: Well, certainly,
21 when you're dealing with drivers, you -- you have to
22 study impaired driving because it affects all of
23 them. The interesting thing and dilemma that we have
24 in driver education is that the sixteen (16),
25 seventeen (17) year old population does not have a

1 high incident of alcohol involvement. But yet that's
2 the best time to reach them to teach them about don't
3 drink and drive.

4 My emphasis has been on not teaching
5 them responsible drinking, which is a buzz word that
6 all the alcohol industry uses and unfortunately a lot
7 of the safety community. My emphasis has been on
8 don't drink, don't drive. You just can't say, Well,
9 I haven't had too much; I can make it home.

10 But all of my work with the alcohol
11 involvement, again, has been secondhand: using other
12 people's research, using other people's PSAs, and
13 their developmental work, and making sure that it
14 fits into our curricular activities for training
15 drivers. We have a complete unit in our course on
16 impaired driving, and we do everything we can to get
17 young drivers to understand how serious a problem
18 this is.

19 MR. BRETT ROBINSON: I think again,
20 as I mentioned earlier, primary focus has been in the
21 educational area, some within the outreach area, in
22 regards to impaired driving. But also with cars,
23 motorcyclists, and not so much within commercial
24 driver licensing itself, certainly impaired riding is
25 a major issue with motorcyclists.

1 Educating law enforcement how to
2 recognize impaired drivers/riders can be challenging.
3 Working with. again, the American Association of
4 Motor Vehicle Administrators, including content in
5 their operators manuals about impaired driving,
6 impaired riding; and making that separation that if
7 you are going to drink to choose not to either drive
8 or ride.

9 And then including knowledge test
10 questions that are a part of getting your licence for
11 either non-commercial or for a motorcycle operator's
12 licence.

13 Certainly within the curricula that's used for driver
14 education, educating teens, again, it is a sen --
15 sensitive issue, particularly in the US since age 21
16 is the age for being able to purchase and consume
17 alcohol.

18 It is a sensitive issue discussing
19 this with sixteen (16), seventeen (17) year olds
20 because they shouldn't be drinking anyway. But as
21 Allen mentioned, this is the opportunity to educate
22 them while you have them in the classroom or via
23 online training on the dangers of consuming alcohol
24 and/or other drugs, because it's not just alcohol,
25 it's -- even over-the-counter drugs can have a

1 significant impact on your ability to operate a motor
2 vehicle safety.

3 So primaril -- primarily within
4 education I've dealt with the issues of impaired
5 operation.

6 MS. CANDACE GRAMMOND: Thank you.
7 The last topic then is the role of technology and
8 road safety. And so I would ask each of you to
9 comment on your experience and expertise with that.

10 DR. ALLEN ROBINSON: I'd almost say
11 none, except there are so many things happening today
12 with cars and the technologies that are coming in
13 them. You know, if you buy one (1), you -- you have
14 to make sure you understand what the screen's doing
15 in front of you.

16 So my experience has only been self-
17 taught in -- in the cars that I get into and the
18 shock that I get sometimes when I see how much a car
19 is talking to me, where it's telling me I can go and
20 can't go, the displays for backing.

21 What we know that we need to do is
22 that we need to make young people aware that they
23 have to study the technology in their car so that
24 they get the benefit out of it. The best example to
25 give is ABS. When ABS came out, it caused more

1 deaths than it saved because people applied the
2 brake. They did keep their foot on the brake, but
3 they steered too far. They didn't realize that they
4 could brake and steer, and so they went across the
5 lane and hit an oncoming car.

6 If we understand what the technology
7 can do, it's really going to make a difference in --
8 in the severity of our crashes. So I'm learning as
9 everybody else does. This -- this has been a quick,
10 running experience with the automo -- automobile
11 manufacturers the past five (5) years.

12 And -- and I put myself in the
13 category, if you'll excuse me, of the old people. We
14 don't like this technology very well. Thank you.

15 MR. BRETT ROBINSON: Technology
16 certainly is a broad category. You can include
17 intelligent transportation systems within technology,
18 which I certainly would not profess to an expert in
19 the area of intelligent transportation systems. I
20 think the primary focus is within the vehicle itself
21 and educating those who are going to deal with anti-
22 lock brake systems, traction control systems.

23 Generally, people are not aware of
24 what these systems are within their vehicle. We've
25 become familiar with anti-lock brake systems, but

1 most people are not familiar with what traction
2 control systems are within their vehicles as vehicles
3 become more and more sophisticated with their control
4 systems, computers in cars.

5 The computers that are in cars now
6 have more processing power than the computers we use
7 to go to the moon. So we do have the ability within
8 cars today for the car to monitor a lot of aspects
9 associated with that vehicle, including with traction
10 control systems. And as cars become more and more
11 advanced with their features, then we continue to
12 have more and more challenges in educating teen
13 drivers, educating the general public on the
14 capabilities of these cars and how to use these
15 systems.

16 This is, without a doubt, the most
17 dynamic area within vehicle operation today. We are
18 seeing more and more changes, more and more features
19 coming out as it relates to che -- technologies, and
20 it will continue to be a challenge for us all as we
21 educate operators on how to use these features.

22 MS. CANDACE GRAMMOND: Thank you.
23 Madam Chair, those are my questions with respect to
24 the issue of qualifications. So Mr. Williams may
25 have some questions.

1 MR. BYRON WILLIAMS: Just a couple of
2 questions, and at the appropriate time I'll certainly
3 make it clear that our client clearly agrees that
4 these are experts in driver education training. And
5 -- and I'll articulate that more carefully in -- in a
6 moment.

7 Perhaps, just -- Mr. Triggs could car
8 -- clarify. Based upon what I've heard so far, I'm -
9 - I'm assuming that MPI is not seeking to qualify
10 either Dr. Robinson or Mr. Robinson as experts in the
11 design and analysis of road safety summative or
12 outcome reviews.

13 Is that correct, sir?

14 MR. MICHAEL TRIGGS: That's correct.

15

16 CROSS-EXAMINATION BY MR. BYRON WILLIAMS (QUAL.):

17 MR. BYRON WILLIAMS: And Mis -- just
18 one (1) question for you, Mr. Robinson, at least to
19 start with. Clearly our -- our client has heard you
20 on driver education training, and we take no issue
21 with that. You mentioned some secondary involvement
22 in outreach campaigns.

23 But would I be correct in suggesting
24 that you're not purporting to present yourself as an
25 expert in the design of media and social marketing

1 outreach campaigns?

2 MR. BRETT ROBINSON: That is correct.

3 MR. BYRON WILLIAMS: Perhaps both, to
4 -- to both Dr. Robinson and Mr. Robinson in turn, can
5 you indicate what, if any, work you have done in
6 examining the approach of one (1) user group towards
7 the other?

8 For example, cars' behaviours to
9 motorcycles and vulnerable road users, whether you've
10 done any work as part of your driver education
11 training?

12 DR. ALLEN ROBINSON: Are you asking
13 have I done any studies of how one (1) group behaves
14 towards the other?

15 MR. BYRON WILLIAMS: More
16 specifically, I'll start with this. And I apologize
17 for the imprecision.

18 Within the driver education
19 curriculum, do you address the -- the behaviour of
20 one (1) vehicle, or a -- a motorized units to --
21 towards more vulnerable users such as motorcycles,
22 pedestrians, and cyclists?

23 DR. ALLEN ROBINSON: Absolutely.
24 Even though the motorcyclist is most often at fault
25 for crashes, we train our drivers to be aware of the

1 size of the vehicle, how hard it is to see, how it
2 needs to have space to manoeuver just like we do. So
3 we include that in traffic interaction. We include
4 that when we talk about visibility and in terms
5 called 'space management'. We want to make sure that
6 there's enough space for us and the other vehicles as
7 well. We do, do that.

8 MR. BYRON WILLIAMS: And -- and the
9 same to Mr. Robinson.

10 MR. BRETT ROBINSON: Yes. What I
11 would refer to is a major campaign called "Sharing
12 the Road." That has been a major campaign within the
13 US, which has been addressed with my work with
14 operator manuals, with AAMVA, and certainly with any
15 of the training curricula that we use, including the
16 development of training videos and working with other
17 organizations on sharing the road with other road
18 users, which is a common theme within all road users.

19 Not only do cars need to share the
20 road with motorcyclists, but motorcyclists need to
21 share the road with cars. Then you certainly add
22 into that dynamic commercial vehicles. Again,
23 commercial vehicles sharing the road with cars and
24 with motorcyclists. So within the educational as
25 well as within public outreach, I've dealt very

1 heavily with Share the Road campaigns. We all -- all
2 of us, as road users, even cars to cars, need to
3 learn to share the road with each other.

4 MR. BYRON WILLIAMS: Those are my
5 questions. I'll have some comments when you seek
6 them.

7 MR. REGIS GOSSELIN: Mr. Williams,
8 would you mind repeating your very first question?

9 MR. BYRON WILLIAMS: My -- my first
10 question to Mr. Triggs? I was just con -- confirming
11 that Manitoba Public Insurance is not seeking to
12 qualify either Dr. Robinson or Mr. Robinson as
13 experts in the design and analysis of road safety
14 summative -- S-U-M-M-A-T-I-V-E -- or outcome reviews.

15 MS. CANDACE GRAMMOND: Mr. Oakes may
16 have some questions.

17 THE CHAIRPERSON: Mr. Oakes...?
18 Sorry.

19

20 SUBMISSIONS BY MR. RAYMOND OAKES (QUAL.):

21 MR. RAYMOND OAKES: Thank you, Madam
22 Chairperson.

23 The short answer is that I have no
24 difficulty with a limited scope of the qualification
25 in terms of driver education. The difficulty and the

1 long answer will be dealt with in argument, where I
2 have all sorts of trouble with the testimony that's
3 being put forward before this Board and the way it's
4 put forward. We don't have the advantage of pre-
5 filed testimony; I'm not sure how that occurred. We
6 have witnesses being asked, "Do you have expertise in
7 an area," but then not being experts and produced for
8 that purpose.

9 So what do we make of their evidence
10 in that respect where we have questions, "Have you
11 done studies," "Ha -- do you have expertise in this
12 area," but then their answers aren't binding on the
13 Corporation, and the quality of that expertise is not
14 determined for this Board at the outset.

15 So I'll have a number of those
16 comments on argument. In terms of driver education,
17 I have no difficulty with these witnesses.

18 THE CHAIRPERSON: Okay, thank you,
19 Mr. Oakes.

20 MS. CANDACE GRAMMOND: Perhaps it
21 would appropriate to have any further comments from
22 either Mr. Triggs or Mr. Williams or Mr. Oakes, and
23 then we'll take a short break.

24 THE CHAIRPERSON: Oh, sorry. Oh, Ms.
25 Peterson -- Peters, I'm sorry.

1 MS. LIZ PETERS: I'm fine. No
2 questions.

3 THE CHAIRPERSON: Okay, thank you.

4

5 SUBMISSIONS BY MR. BYRON WILLIAMS (QUAL.):

6 MR. BYRON WILLIAMS: Madam Chair, I -
7 - if I -- I can indicate from the position of CAC
8 (Manitoba) that we would acknowledge the expertise of
9 these wit -- witnesses cumulatively or in --
10 individually in driver education training, including
11 the -- the development of curriculum and training
12 manuals, instructor training, driver and rider
13 training, and the review of driver education
14 programming.

15 In terms of the supplementary
16 questions from my friend, Ms. Grammond, we believe
17 that based upon the evidence we've heard today, which
18 is really, you've heard from both Dr. Robinson and
19 Mr. Robinson, that their primary focus on issues such
20 as impaired driving and distracted driving is within
21 the context of driver education and training.

22 And so certainly within -- we would
23 suggest that in terms of their expertise within those
24 areas, it -- it'd be restricted to, again, driver
25 education training as it may rel -- may relate to

1 distracted driving, motorcycle safety, and impaired -
2 - impaired driving.

3 So rest -- so I -- I think it's been
4 quite clear that neither Dr. Robinson or Mr. Robinson
5 purport to be experts per se in -- in these issues.
6 But in a -- in taking knowledge from -- from the
7 experts and then applying them to curriculum and
8 training, we would accept their expertise for that
9 limited purpose.

10 THE CHAIRPERSON: Okay, thank you.
11 Ms. Grammond...?

12 MS. CANDACE GRAMMOND: Unless Mr.
13 Triggs has any comments right now, we should probably
14 take a short break.

15 MR. MICHAEL TRIGGS: I have no
16 further comments.

17 THE CHAIRPERSON: Okay, thank you.
18 We'll take a short break for ten (10) minutes.

19 MS. CANDACE GRAMMOND: Yeah.

20 THE CHAIRPERSON: Okay, thank you.

21

22 --- Upon recessing at 10:19 a.m.

23 --- Upon resuming at 10:35 a.m.

24

25 THE CHAIRPERSON: We'll reconvene.

1 (BRIEF PAUSE)

2

3 RULING (QUAL.):

4 THE CHAIRPERSON: Okay, thank you
5 very much. The Board -- or the Public Utilities
6 Board panel accepts Dr. Allen Robinson and Mr. Brett
7 Robinson as experts in driver education and related
8 matters. But with respect to distracted driving,
9 motorcycle safety, impaired driving, and the role of
10 technology, they are not accepted as experts other
11 than as those matters relate to driver education.
12 Thank you.

13 Mr. Triggs, are you going to do your
14 direct now?

15 MR. MICHAEL TRIGGS: Yes, I am.
16 Thank you.

17 THE CHAIRPERSON: Thank you.

18

19 EXAMINATION-IN-CHIEF BY MR. MICHAEL TRIGGS:

20 MR. MICHAEL TRIGGS: Dr. Robinson and
21 Mr. Robinson, I'll be posing questions to you and as
22 a -- as a group of the panel and answer as you feel
23 who's best qualified that particular question.

24 So Manitoba Public Insurance in
25 general terms retained you to prepare a report on

1 driver education and tro -- training programs.

2 Please explain for the Board what exactly you were
3 retained to do.

4 DR. ALLEN ROBINSON: We were retained
5 to look at driver education worldwide, to find out
6 what are some of the things that are happening
7 throughout the world that might influence driver
8 education in Manitoba. We were supposed to be open
9 minded, dig as deep and as far as we could to find
10 out how are -- how are young people trained, and what
11 kinds of successes have they had in this training
12 worldwide.

13 We did not look at training in
14 Manitoba itself, but what is happening throughout the
15 world.

16 MR. MICHAEL TRIGGS: Thank you. Now
17 let's -- let's just start with basics. When you
18 speak of driver education training programs, what do
19 you mean? And what is its purpose?

20 DR. ALLEN ROBINSON: Well, this is
21 always a good question because 'driver education'
22 means a lot of different things to a lot of people.
23 And we have tried to define 'driver education' by
24 writing standards for people to use that describes
25 driver education. But for the purposes of today, I

1 want to try to make it as simple and as clear as I
2 can.

3 Driver education is taking young
4 people, or any person with no experience and training
5 them how to drive a car. We're -- we're training
6 them in basic skill development; that's start, stop,
7 turn, park, yield, etcetera. We're training them in
8 safe driving practices, which means to make choices
9 about the best route, the best way to stay out of a
10 crash, the best choice to make in terms of
11 distractions, drinking or other things that have an
12 adverse effect on their driving.

13 Driver education is not just getting a
14 licence. But it's being a safe, competent driver,
15 always making the right choices for safety.

16 MR. REGIS GOSSELIN: Do you mind if I
17 ask a question? I'm sorry, I'm interrupting you.
18 But you did very specifically say, Teaching people
19 with no experience. So in other words, a driver, a
20 middle-aged driver or a senior driver wanting to get
21 refreshed on training, that -- your definition would
22 exclude them from driver education.

23 Could you clarify that please?

24 DR. ALLEN ROBINSON: Yes, let me try.
25 Driver education; there are many in the United States

1 that get a -- a driver's licence for the first time,
2 they may be twenty (20), or they may be twenty-five
3 (25), they may be thirty (30). They're typically
4 foreign nationals who have moved to our country, and
5 so they have no experience. So driver education
6 would address their needs to make them a driver.

7 We do have programs of refresher
8 training, training for senior citizens, but that's a
9 different form of driver education and has a
10 different name on it. It is still teaching a person
11 safe driving practices, but it's not in the typical
12 terms of what we're describing here as driver
13 education.

14 MS. ANITA NEVILLE: Excuse me, when
15 you -- when you say it has a different name on it,
16 what does that mean?

17 DR. ALLEN ROBINSON: Well, usually if
18 you're -- if you have, for example, you may have a --
19 an adult program for those who have too many traffic
20 violations. That's called a violator program, but
21 it's still driver education. You may have a program
22 for senior citizens on how to safely get around and
23 make choices about when they should drive. That's
24 still driver education, but that's not the young
25 driver education or beginning driver education that

1 we're talking about here and which we surveyed
2 throughout the world.

3

4 CONTINUED BY MR. MICHAEL TRIGGS:

5 MR. MICHAEL TRIGGS: Thank you. What
6 were your research methodologies you undertook to
7 prepare your report?

8 DR. ALLEN ROBINSON: Our report was
9 primarily to go out and collect research from as many
10 countries as we could find on how they train drivers,
11 how they train teachers, and what kinds of results
12 they've had in terms of reducing accident and
13 crashes. Once we did the first round of studies
14 we began to identify countries that were of more
15 importance than others. And so we developed a survey
16 so that we could send this survey to them and
17 encourage them to fill it out, to give us more
18 detailed information about their country.

19 As you probably know, if you read a
20 story about something, maybe about you, I don't get
21 all the facts. But if I contact you and gave you
22 more specific questions to answer, I learn more
23 information.

24 And then after we did that survey we
25 identified countries that it would be beneficial to

1 have a telephone interview with. And we -- we were
2 obviously a little narrowed in how we -- we set this
3 up because we had to pick out countries in which we
4 found people that spoke English. And then Brett
5 conducted telephone interviews with a -- with a
6 series of countries. I don't remember how many he
7 did, but we used all of that information to help tell
8 us what is going on in each of these countries.

9 THE CHAIRPERSON: I just have a
10 question. You talked a lot about the driver
11 training. And you mentioned when you went to these
12 other countries you also found out a little bit about
13 the effectiveness of these driver ed programs in
14 terms of accident reduction, etcetera.

15 Can you tell me a little bit more
16 about the methodology these countries use to assess
17 the effectiveness of their driver ed program?

18 DR. ALLEN ROBINSON: I can tell you a
19 little bit. We did find that in European countries
20 they typically have better accident rates and
21 fatality rates than we do -- than we have here in
22 North America, but they have the same constraints as
23 we do in terms of conducting studies.

24 When you try to compare behavioural
25 results and you're comparing group A to group B, it's

1 difficult to track both of them because people in
2 group A may -- not disappear, but they just may not
3 show up in -- in the data that you're looking at. So
4 at the end of six (6) months you may not be
5 absolutely sure that you have a good, clear picture
6 between group A and 'B'.

7 In -- in the countries that did it,
8 that did research in which they measured whether or
9 not they met the objectives of what they were
10 teaching and whether or not there was a change in
11 their skill and behaviour between the beginning of
12 the training and the end of the training and post-
13 training, those were the ones that had more research
14 data for us to look at.

15 THE CHAIRPERSON: Okay. Thank you.

16

17 CONTINUED BY MR. MICHAEL TRIGGS:

18 MR. MICHAEL TRIGGS: Dr. Robinson,
19 can you just give the -- the panel a better idea of
20 the scope of the research you did and the number of
21 countries that you looked at in the first phase, and
22 then the scope of the number of countries that you
23 did the sur -- sent surveys to, and then who you had
24 -- the number of phone interviews you had?

25 DR. ALLEN ROBINSON: I'm not sure I

1 remember the full number of countries that we -- we
2 looked at initially, but we -- we eventually narrowed
3 it down to twenty-three (23) countries that had what
4 appeared to be the best programs. And that's where
5 we sent the questionnaire for follow-up and phone
6 interviews. We didn't see any point in looking at
7 seventy-five (75) countries if we're not going to get
8 any evidence, so we picked these twenty-three (23) to
9 look at, to see -- to see what they were doing.

10 MR. MICHAEL TRIGGS: What can you
11 tell the Board about the existence of a world-class
12 driver education and training program that
13 demonstrably reduces collisions involving young
14 drivers?

15 DR. ALLEN ROBINSON: Well, it doesn't
16 exist. That's why this is so important, what you're
17 doing. You're taking on an almost possible task.
18 Training people to do something that they have to do
19 to make it in this world puts a lot of limitations on
20 you.

21 You can't just say: I have provided
22 you training. I have tested you. And, Board
23 counsel, you don't meet the criteria, so you can't
24 have a driver's licence.

25 If we did that, they'd run us out of

1 the -- the room. So we're limited as to what we can
2 do in training as accepted by society. Society will
3 not allow us to restrict people for the use of an
4 automobile.

5 MR. BRETT ROBINSON: Where we are
6 fortunate is that while there is not a single world-
7 class program that we can identify, there have been a
8 lot of efforts in various countries throughout the
9 world looking at individual pieces, that as you take
10 these pieces and begin putting them together, looking
11 at the counter-measures that you can implement, it
12 gives us a starting point for improving what we're
13 currently doing today in driver education.

14 So as we share with each other across
15 the globe these initiatives in improving what we do
16 within driver education, we do have the opportunity
17 to -- to take these pieces, put them together, and
18 hopefully begin building a comprehensive system for
19 driver education. Because no one (1) single counter-
20 measure is going to make an improvement in driver
21 education.

22 We need to look at the entire system,
23 what can we collect that have been successes from
24 other countries, and assembles that system so we can
25 begin looking at it, evaluating it, and seeing if it

1 does help to reduce, in particular, teenage crashes
2 and fatalities. So there's a lot out there to learn
3 from.

4
5 DR. ALLEN ROBINSON: We need to
6 somehow get out of the negative and look at a little
7 bit of the positive. There have been dramatic
8 improvements in -- in our driving habits and our
9 accident rates and our fatality rates throughout
10 North America. It's also true in -- in Europe as
11 well. But it's just not moving as fast as what we
12 would like for it to.

13 If -- if we did nothing at all, it
14 would get worse. But we have had successes. And
15 when you compare us to some of the second-world
16 countries, we're sure nowhere near what they're doing
17 in terms of their road safety. So we have had
18 successes. We're just trying to have more.

19 MR. MICHAEL TRIGGS: Mr. Robinson,
20 just a follow-up a bit on one you were talking about
21 there.

22 What can you tell us -- your research
23 -- what does your research tell you about there being
24 a clear roadmap to a -- implementing a world class --
25 a world-class driver education and training program?

1 MR. BRETT ROBINSON: Well, again,
2 unfortunately I don't think that there is quite a
3 clear roadmap. I think there's a lot of efforts by a
4 lot of countries to do things that are unique within
5 driver education.

6 And there have been some successes,
7 particularly when you look at some of the European
8 countries. And even -- you do a comparison of the
9 fatality rates in North America for US and Canada,
10 their fatality rates are slightly lower. And I think
11 they can attribute it to some of the successes that
12 they've had with some of the programs that they've
13 developed, particularly within higher order training,
14 within stages of driver education having multiple
15 stages.

16 But to say that there is -- is a clear
17 roadmap anywhere in the world, I'm not sure that you
18 can say that. I think that we all have lots of good
19 ideas, great ideas, particularly within North
20 America, where we would like to see driver education
21 go. Driver education within North America really
22 hasn't changed much over the last thirty (30), forty
23 (40) years.

24 It is time to look at reinventing
25 driver education and look at what can driver

1 education be. And I do think that we're doing that
2 across the globe; certainly looking at it within
3 Europe, within Australia, looking at new ways of
4 delivering driver education, new ways of getting the
5 teen involved, more involved and taking more
6 responsibility in the learning process, not just
7 cramming information down their throat.

8 MR. MICHAEL TRIGGS: Thank you.
9 Let's get a little more into the substance of your
10 reports now. In your report you -- when you spoke of
11 driver education training programs, you identified
12 six (6) categories of driver education topics.

13 Please provide an overview of what
14 those six (6) topics are.

15 MR. BRETT ROBINSON: Looking at the
16 various areas within driver education for the purpose
17 of writing the report, we broke it down into six (6)
18 categories. The first being basic driving skills,
19 which does what it says: dealing with the basic
20 skills, how to operate the vehicle. Really dealing
21 with the physical skills, using the accelerator,
22 using the brakes; so, stopping, starting, turning the
23 vehicle. How to set your seats, your mirrors.
24 Revolving around the basic driving skills which is
25 typically what driver education is.

1 When you go to a driv -- through a
2 driver education program, go to a driver education
3 school, that's typically what is taught or the basic
4 skills themselves. Part of what we've learned in the
5 research is that basic skills will eventually be
6 acquired by the new learner as they gain exposure.
7 And historically, most of our training and education
8 has been focussed on these basic skills.

9 The second area was parent --
10 parent/guardian involvement, which really is a key
11 part of the learning process. As a new driver, a
12 teen needs to gain exposure within the operating
13 environment. They can only gain so much exposure
14 through a driver education program, through a driver
15 education teacher. And they need to spend time with
16 a parent or a guardian to gain as many hours of
17 practice, as many hours of exposure within the
18 operating environment as possible, so that they can
19 begin to relate that experience to one (1) of the
20 categories coming up, which is higher order learning,
21 decision making. It's tough to talk about decision
22 making if the teen has not gained exposure within the
23 operating environment.

24 So parent/guardian involvement really
25 a key part of the overall process.; a key part in

1 gaining that experience and getting practice.

2 Practice, practice, practice, practice, is very
3 important in the learning process.

4 Safe driving practices really goes to
5 the next

6 step from basic driving skills. Once the teen has
7 developed the basic skills, now they need to develop
8 safe driving practices. This is probably one of the
9 weakest areas within North America. It is an area
10 that has had quite a bit of research within Europe
11 and Australia in particular.

12 Safe driving practices focusses on the
13 higher order learning skills, dealing more with the
14 cognitive rather than the psycho-motor or skill
15 aspects of driver education. Dealing with the
16 decision-making process. Processing information,
17 recognizing hazards, searching the environment in
18 order to be able to recognize potential hazards. And
19 then making the decision of: How do I then deal with
20 these hazards? I may not be able to completely avoid
21 a crash, but how can I lessen the severity of a
22 crash? And the decisions that are made in leading to
23 reducing the severity of a crash itself.

24 To making decisions: Should I even
25 operate a motor vehicle? Am I under the influence of

1 emotions? Am I under the influence of over-the-
2 counter drugs because I happen to be ill? Which are
3 all aspects that can affect our driving; it's not
4 just alcohol. But it comes down to making the
5 decisions: Should I even drive in the first place?

6 To trip planning: A lot of us make
7 trips and we don't put a lot of thought into it, but
8 there's a lot that can impact us as a part of making
9 that trip. So safe driving practices really goes to
10 that next level. The mental, the cognitive aspects
11 that are associated with driving.

12 We often ask the question: What
13 percentage of driving is mental? What percentage of
14 driving is physical? And, generally it's 10 percent
15 is physical. That's the steering, applying the
16 accelerator, applying the foot brake. Ninety (90)
17 percent of that driving task is mental. Well then we
18 need to spend probably 90 percent of the time we
19 spend training teens on the mental aspects of
20 operating a motor vehicle. And that's safe driving
21 practices.

22 The fourth section dealt with vehicle
23 telematics. Certainly the technologies that we have
24 within vehicles, it is an ever-growing area as more
25 technologies come out in vehicles, as we continue to

1 manufacture vehicles and add new technologies.

2 But the telematics also, at least from
3 the driver education perspective and from the
4 parents' perspective, there are many tools that can
5 help us to track what teens do. You can call it a
6 black box. There are apps that you can use on
7 telephones that can also track where the teen is, can
8 help the parent in determining what they're doing at
9 any given time.

10 There are apps that can prevent the
11 teen from -- or, actually, their telephone from
12 ringing or being able to sent texts while the vehicle
13 is in motion. So there are controlling factors.

14 When you talk about distracted
15 driving, certainly texting is a -- a major problem
16 with teens. It's a part of their culture. And there
17 are telematics that can prevent that phone from
18 sending any kind of signal that they have a telephone
19 call or that they have a text message.

20 So telematics is, I think, an area
21 that we all have to keep a close eye on in the driver
22 education community in the coming years. The
23 telematics can create distractions, but the
24 telematics could also be a benefit for what we're
25 doing in teaching driver education and being able to

1 track what teens are doing during that exposure as
2 they gain more and more practice. Because not only
3 do they need to gain exposure or practice with a
4 parent or guardian in the vehicle, there's also a
5 concept of gaining practice through solo driving,
6 where they are on their own and they can begin to
7 learn from their own experience.

8 The fifth area is -- is certainly
9 technologies for driver education, education in
10 general. The technologies are really expanding in
11 how we deliver driver education: computerized
12 programs that help to deliver content; online
13 training, which also helps to deliver content.
14 Online training, at least in driver education, we
15 keep it's -- it's the thing of the future.

16 Well, online training has been around
17 for quite some time now. Universities have been
18 using online training; high schools have been using
19 online training. And certainly it is an area that we
20 need to expand within driver education itself.

21 I was quite surprised to learn that in
22 Europe, online training is not widely used. But we
23 really do seem to be moving more towards online
24 training in North America, particularly in driver
25 education. And there are a lot of efforts in moving

1 driver education towards online, whether it's the
2 entire course online or at least an integrated system
3 where a portion is spent online, then a portion is
4 spent still in the formal classroom.

5 Driving simulators are a valuable tool
6 for teaching driver education. However, we are
7 challenged, prohibited, I think, with the costs that
8 are associated with driving simulators. While they
9 do a wonderful job and they can put learners in
10 situations that we cannot typically put them in, in a
11 real-world setting, the costs sometimes limit us in
12 our ability to use driving simulators; and again,
13 another area we need to continue to watch closely and
14 look at what technologies can help us do a better job
15 in teaching driver education.

16 But I think, unfortunately, as we look
17 globally they're -- we're probably more ahead of
18 other countries, at least in North America, with some
19 of those technologies.

20 Driver instructor training, one (1) of
21 the biggest areas that we looked at and I think one
22 (1) of the biggest areas with recommendations coming
23 out of Europe, that there needs to be a lot more done
24 with driver instructor training. I think, globally,
25 the consensus is we do not do enough and we need to

1 provide better training to driver education teachers
2 and instructors; several reports out of Europe citing
3 that more needs to be done in providing suggestions
4 of what should be done for training driver education
5 teachers, and in particular when we move towards
6 teaching the higher order learning for driver
7 education, that teachers do require some special
8 training to be able to deal with higher order.

9 But typically, we have dealt with, in
10 -- in the past in driver education, providing facts,
11 dealing very much with the basics. But driver
12 education needs to move more towards helping the teen
13 to make their own decision, processing information,
14 not just teaching them what's important for passing
15 their driver test, but teaching them what is
16 important for lifelong learning and lifelong driving
17 skills so that they do not get involved in crashes
18 and do -- certainly does not result in fatalities.

19 So driver instructor training was --
20 was a key research area, and I think a lot we can
21 learn from some of the other countries, particularly
22 in Europe and Australia. Those were the -- the six
23 (6) areas.

24 THE CHAIRPERSON: Can I ask a
25 question on that? When you were talking about the

1 exposure for children, or young people learning how
2 to drive, and that parental involvement was very
3 important to help with that exposure, do you provide
4 any kind of training -- driver training for the
5 parents to ensure that the -- the exposure they're
6 giving them matches with what you're trying to
7 accomplish?

8 MR. BRETT ROBINSON: Typically what's
9 provided to the parent is called a "Parent-Teen" --
10 or a "Parent-Guardian-Teen Guide," which can vary in
11 length from the program that -- that distributes it.
12 The American Association of Motor Vehicle
13 Administrators has a model parent-guardian-teen guide
14 which provides guidance to the parent on providing
15 that instruction.

16 ADTSEA, the American Driver Traffic
17 Safety Education Association, also has a model guide.
18 And both ADTSEA's and AAMVA's provides lessons,
19 literally a checklist, that you go through with
20 lessons of what to practice with that teen.

21 Many driver education programs have a
22 parent-teen night, where you bring the parent or
23 guardian in for an evening and spend time with them
24 on educating them what they should do during this
25 practice phase. Because it is important that they

1 understand what the role is and that they also
2 understand that we, as adults, over the years have
3 developed many bad habits that we do not want to pass
4 on to our teens.

5 The -- the length of practice also
6 varies. There are countries in Europe that say you
7 can have a significant reduction in accidents,
8 crashes, and fatalities if you have up to two hundred
9 (200) hours of parent-guardian practice with a teen
10 over a two (2) year period of time, which is very
11 different than what we do, typically, here in North
12 America.

13 DR. ALLEN ROBINSON: Just a short
14 follow-up of that. We call it "Teen Guided
15 Practice." In other words, we don't want the parents
16 just driving with the teen to the grocery store. We
17 want the parent driving in specific environments
18 where they are practising skills that require
19 multiple decision making, perceptual choices of that
20 type, and then they have to report that back to the
21 driver education classroom, So there's a constant
22 interaction. Unfortunately, that doesn't always
23 happen, but that's what should happen.

24

25 CONTINUED BY MR. MICHAEL TRIGGS:

1 MR. MICHAEL TRIGGS: Now, you've --
2 you've spoken to the -- the six (6) topics of driver
3 education. What did your research tell you about
4 those -- those topics?

5 DR. ALLEN ROBINSON: Well, the -- the
6 research tells us, as Brett had identified, that the
7 most important thing is to deal with safe driving
8 practices. You could actually forget about basic
9 driving skills, they'll learn that on their own. But
10 if you don't teach them what high risk behaviour is,
11 how to make choices, then you're not accomplishing
12 much.

13 And if -- also, if you don't teach
14 them how to use the technology, both in the classroom
15 to learn and in the car to drive, you're -- you're
16 missing out on -- on some great help in terms of how
17 teens can be better drivers. Teens will become
18 better drivers; we just want them to become better
19 drivers more quickly.

20 MR. BRETT ROBINSON: And -- and I
21 would add, within those six (6) areas, the two (2)
22 that clearly stood out in the research were safe
23 driving practices and instructor -- training
24 instructor development. Very clear throughout the
25 studies within Europe and within Australia that

1 teaching higher order skills, higher order training,
2 with new drivers was, indeed, the most significant
3 enhancement that could be made to driver education
4 programs, that the basic skills will be picked up.
5 We talk about practice, practice, practice, gaining
6 exposure; they will gain the basic skills.

7 Sure, initially there are some basic
8 skills that need to be covered which lay the
9 foundation for them to go out and gain the practice
10 with their parent or guardian, but that we really
11 need to reinvent how we teach driver education and
12 what we focus on; and, as I mentioned earlier,
13 focussing on those mental skills. Again, 90 percent
14 of what we do in operating a motor vehicle is mental.

15
16 So I think the -- the research clearly
17 shows in Europe, with the various countries, that
18 that focus needs to be within those higher order
19 skills within the -- the GDE -- GDE matrix itself,
20 and then instructor training. Several studies
21 clearly showing that we have not done enough within
22 instructor training and that we need to do more, and
23 covering with instructors different techniques of how
24 to teach a varied audience.

25 We all learn differently. Certainly

1 that's true with teens. There are many different
2 ways in which teens learn. One (1) of the studies
3 that came out of Europe identified twenty-five (25)
4 different teaching approaches that could be used with
5 teaching teens. And I think if we were to look at
6 what we typically use in the teaching environment
7 today we'd probably be able to count them all on one
8 (1) hand of the different methods that we use to
9 teach teens.

10 So if we could take these twenty-five
11 (25) different approaches and apply them to how we
12 teach driver education, it may be a significant
13 enhancement in how it is delivered. And when we talk
14 about delivery, moving driver education more from
15 lecture to coaching. We need to coach our teens.
16 And I think 'coaching' really is the buzzword in the
17 educational community today. And how do we coach
18 teens to help them with lifelong learning and
19 lifelong safe driving practices.

20 MR. MICHAEL TRIGGS: In your reports,
21 you identified a number of ways in which things are
22 taught, they're learned for the students, and you di
23 -- you classify them as, you know, best practices,
24 promising practices, and emerging practices.

25 Can you explain what is meant by -- by

1 those?

2 DR. ALLEN ROBINSON: Sure. We wanted
3 to have some kind of a measuring stick to put on
4 things. So let -- let me start with 'emerging
5 practices'. It's -- it's a -- I'm trying to come up
6 with the right word. I'll give you two (2) examples.

7

8 We -- in the US, we developed
9 graduated driver licensing. It has nine (9)
10 components. Everybody sat down and looked at it and
11 said, You know, if we did this, it would make a
12 difference in our statistics. But nobody was doing
13 it. So people like you say: Well, why should you
14 even do this? You don't have any proof.

15 Well, if you will let us implement it,
16 we'll get some proof. So we implemented graduated
17 driver licensing and we began to see promising
18 effects. We saw that if you -- the more of the nine
19 (9) components that you use, the better the results
20 were. We began to see that this was something that
21 would have a drastic impact on fatalities, and over
22 the years it did.

23 Graduated driver licensing has had
24 major impact, and we started with it as an emerging
25 practice and it became a best practice. I will admit

1 though that part of its success has been that it's
2 discouraged young drivers to drive. There's been
3 fewer drivers. Well, who says that's not good?
4 Maybe they made the decision that this was too
5 complicated, too -- too much of a risk for them, so
6 they decided to wait until they were more mature to
7 start driving.

8 A second area that -- that would be an
9 example that maybe you've encountered, is dealing
10 with Stage 2 driver education. You know, to teach
11 all these things that Brett and I have talked about
12 in what is typically considered a 30+6 program is
13 really impossible. You just can't get all of that
14 done.

15 So if you have two (2) stages of
16 driver education in which you teach the basic driving
17 skills and you get them introduced to safe driving
18 practices, and then you let them spend some time with
19 their parents, fifty (50) hours, a hundred hours,
20 whatever you can get, you bring them back and now
21 that they've had experiences, you can talk to them
22 about the near crashes, about the -- the bad
23 behaviour drivers, about what happened in certain
24 kinds of environments, what kinds of decisions they
25 made.

1 And the results of this Stage 2 driver
2 education in Michigan, which is the only state that
3 has implemented it, has shown that it's having an
4 impact on young drivers. So, hopefully, as we get
5 more statistics out of the state of Michigan, we'll
6 get more people to consider that.

7 The problem becomes logistics. How in
8 the world do you do that? You get them once; how do
9 you get them back the second time? Because they
10 don't want to come back the second time; they want to
11 drive. So if there is not a formal program designed
12 to do that, it's not going to happen.

13 So that's just a couple of examples of
14 looking at how we used that terminology to measure
15 what was happening in European countries. As Brett
16 mentioned, when -- when we looked at the number of
17 hours they provide with parents, well, that sure is a
18 promising practice, if you can get that done. It's
19 not something that -- that I believe would be easily
20 done in North America. But we need more promising
21 practices and best practices. That's what we're all
22 working on.

23 MR. MICHAEL TRIGGS: Just for -- for
24 clarification, to make sure I under -- so -- so the
25 Board understands what you had said about the

1 graduated licence and how it became practice, am I
2 correct in -- in saying, just summarizing it as --
3 when it first came out, the idea, it was promising,
4 but it wasn't evaluated. It wasn't -- it wasn't
5 implemented, it wasn't evaluated, but it has now, and
6 that's what makes it a -- a best practice is the
7 evaluation of that?

8 DR. ALLEN ROBINSON: No, when it
9 first came out it was an emerging practice. It was
10 something that we thought would work, but we had
11 absolutely no proof that it would work. And then as
12 -- as states began to implement it, then we saw that
13 it was a promising practice, and a practice that
14 should be encouraged.

15 And as a result, states began to make
16 that a part of their driver licensing requirements.
17 And now, I -- I don't know the exact statistics, but
18 all states -- all of the states in the US have some
19 form of graduated driver licensing. It varies a
20 great deal, but it has proven to be an effective way
21 to have an impact on teen driving and teen safety.
22 So -- so now it's a best practice.

23 MR. MICHAEL TRIGGS: Thank you. And
24 you already --

25 MR. REGIS GOSSELIN: Sorry, could you

1 -- can I interrupt for a second, please? Just -- I
2 just wanted to -- in terms of definitions, I'm
3 looking at 'promising practices' from the summary,
4 and it talks about:

5 "Components for updating a Segment
6 1 or a basic driver education
7 program."

8 Could you explain that to me, please?

9 DR. ALLEN ROBINSON: I'm sorry, could
10 you --

11 MR. REGIS GOSSELIN: It's the -- it's
12 on page 6 under 'promising practices' from the
13 summary. The second -- the second item under
14 promising practices, it talks about:

15 "Components for updating a Segment
16 1 or a basic driver education
17 program."

18 DR. ALLEN ROBINSON: Okay. All
19 right. I -- I found it. What's the question?

20 MR. REGIS GOSSELIN: What is -- what
21 is it? I -- I'm just trying to understand what it
22 means.

23 DR. ALLEN ROBINSON: Well, Segment 1
24 is -- is the area where we're dealing with basic
25 driving skills, introduction to the driving task. We

1 know that we're doing some good things there, but we
2 -- that's an area that needs more improvement than --
3 than any of the other areas. And -- and we don't
4 have absolute proof that what we are now doing in
5 that area is working.

6 MR. REGIS GOSSELIN: And under the
7 'emerging practices' header, there is something
8 referred to as 'insight driver training.'

9 Could you define that for us?

10 MR. BRETT ROBINSON: Yeah. In --
11 insight driver training, and this again is an area
12 where instructors do need specific training, is
13 taking the learner and interacting with them in such
14 a way where you put them into scenarios. And in
15 these scenarios, whether it be a scenario or a
16 situation that they're about to encounter, or they're
17 currently encountering it, or have already
18 encountered it, and working with the team on how they
19 made their decision: Why did you make your decision
20 the way that you did to deal say with a potential
21 hazard?

22 It can also be done say in a
23 classroom, where you give them case studies and you
24 examine a case study. And the bottom line is you're
25 looking at challenging the team and identifying why

1 they make the decisions that they should make for
2 safe driving practices.

3

4 CONTINUED BY MR. MICHAEL TRIGGS:

5 MR. MICHAEL TRIGGS: In your report,
6 you identified that there's very few best practices
7 for driver education and training.

8 Why is that so?

9 DR. ALLEN ROBINSON: Thank you. It's
10 hard to prove, as I -- as I talked about earlier,
11 because people are so mobile, that it's hard to
12 conduct research that shows absolutely what we're
13 doing works. As soon we train them they go off to
14 college, they go the Army, they get married, they
15 move to another locale, so we're not able to do a
16 comparative analysis of their experiences.

17 And as a result, since you can't
18 absolutely say 'A', 'B', and 'C' works, then the
19 skeptics assume, well, then 'A', 'B', and 'C' doesn't
20 work. We don't -- we don't know for sure that it
21 does work and we don't know for sure that it doesn't
22 work.

23 MR. MICHAEL TRIGGS: A fundamental
24 question for Manitoba Public Insurance in considering
25 expanding resources to develop a new and im -- okay,

1 new and improved high school driver education program
2 is how much it shou -- should spend, where it should
3 spend its money for the best results IN reducing the
4 number and frequency of young drivers being involved
5 in collisions.

6 So what are the issues to be
7 considered by Manitoba Public Insurance and what
8 advice do you have an this -- matters?

9 MR. BRETT ROBINSON: This is always
10 the million dollar question, isn't it: Whe -- where
11 to spend your resources. And what I would suggest is
12 -- earlier I referred to a comprehensive program --
13 you need to define what your program is going to look
14 like, and creating a comprehensive program that is
15 going to have the greatest potential for success in
16 reducing teen crashes and teen fatalities.

17 Again, no one (1) countermeasure alone
18 is going to give you results; it's defining what that
19 system is. And part of that system is how licensing
20 and education work together. But also education;
21 what do we need to do from 'A' to 'Z' to accomplish
22 what we need to accomplish.

23 To think that you're going to
24 implement 'A' through 'Z' in one (1) year, or even
25 two (2) years, is not realistic. So I would suggest

1 a phase-in period where you identify what are key
2 elements that you want to include within your high
3 school driver education program and look at phasing
4 them in over a period of time, so that you don't have
5 such high financial resources in any one (1) given
6 year, that you can phase them in over a period of
7 time; and, certainly, starting with what are the best
8 practices.

9 We know these are proven. They've
10 been proven in Europe, Asia, and in Australia. We
11 know that these have had successes. So let's begin
12 by phasing these into our high school driver
13 education program. And those certainly include
14 advanced driving courses with emphasis on safe
15 driving practices, a second stage driver education
16 program which certainly goes beyond those basics of
17 driver education.

18 The second phase allows them to go out
19 and get some more exposure, gain practice, then bring
20 them in and focus on those higher order learning
21 skills, which is the other best practice that's
22 identified in the executive summary. Take what's
23 been learned from in Europe, Asia, and Australia in
24 higher order -- order learning, and begin
25 implementing those within Manitoba's High School

1 Driver Education Program.

2 Then beyond that, you can take a look
3 at the promising practices. Prioritize those
4 promising practices and identify which you would
5 implement first within your highschool driver
6 education program. Certainly driver education
7 standards -- there needs to be standards for how
8 driver education is delivered: enhancing components
9 within the Segment 1 driver education; multiple -- or
10 parent, guardian involvement; multiple stage driver
11 education; all of those should be examined; looking
12 at technologies and how they can be used in
13 delivering Manitoba's highschool driver education
14 program; from computer internet best -- Internet
15 based training, simulator systems, how can those be
16 implemented within the highschool driver education
17 program.

18 And then, certainly, one (1) I would
19 strongly recommend, even though currently it's not a
20 best practice, I see eventually becoming a best
21 practice, is instructor training.

22 Then as you phase in these elements
23 within the driver education program, both from best
24 practices and promising practices, I think what
25 you'll see as you continue to monitor some of the

1 emerging practices will become promising practices,
2 and some of the promising practices will become best
3 practices; and as that happens, identify those as
4 enhancements to Manitoba's Highschool Driver
5 Education Program.

6 So, in summary, I think it's
7 identifying what could be the most comprehensive
8 system that Manitoba could provide in its driver
9 education program, prioritizing certain elements that
10 can be implemented and then phasing them in over a
11 period of time, so that you aren't trying to create
12 the best in-class driver education program in one (1)
13 year. Because to do it in one (1) year is probably
14 not realistic, and needs to be phased in over a
15 period of time to be realistic within any financial
16 resources that are available as well.

17 DR. ALLEN ROBINSON: Brett frequently
18 talks about best practices of instructor training.
19 It's hard to define what best practices are for
20 instructor training, but I'll give you a little bit
21 of homework. If all of you will think today and
22 tonight about the three (3) teachers that have had
23 the most impact on your life, what were their skills,
24 and what did they do, and how did they help you. And
25 then if you'd just think, if we could put all those

1 skills that you thought of into this one (1) driver
2 education teacher, we could really change driver
3 education. We need good teachers.

4 MR. MICHAEL TRIGGS: You've
5 identified that it's a definite requirement to have
6 good teachers and that but, you know, Manitoba has a
7 problem with retaining teachers, and is -- my
8 understanding is that is something that's across the
9 -- globally, is that it's a problem as well. What
10 are -- what are your thoughts around, you know,
11 improving the retention of teachers?

12 DR. ALLEN ROBINSON: Retaining
13 teachers is not just a driver education problem; it's
14 a problem in all of education. People sit back and
15 they watch and they see somebody teach, and they say:
16 Oh, I could do that. That would be a lot easier than
17 running this jack hammer out here and getting all
18 sweaty and dirty.

19 So they decide they're going to become
20 a teacher. And then they get into the situation of
21 where they are teaching and find out how complex it
22 is, and decide: I've got to do something different
23 than this. These kids are driving me nuts.

24 Or in driver education, we've used the
25 wet pants theory. You know, as long as you get back

1 and you got dry pants, they didn't scare you to
2 death.

3 If you train that teacher properly,
4 and they know what to expect, and they don't get it -
5 - surprises, you're going to be able to retain them.
6 If they're untrained and they get scared, and they
7 confronted by bullies in a class, they're going to
8 walk away from it. And obviously they also have to
9 be properly paid for the work that they are doing.

10 MR. BRETT ROBINSON: Well, I would
11 also add that another key element is pre-screening.
12 A lot of people get involved, they think they want to
13 get involved in driver education and training, but
14 really don't know what they're getting into. And as
15 a result, you expend a lot of resources, particularly
16 financial, training that driver education teacher,
17 only for them to realize later that I really don't
18 want to get into this, this just isn't for me.

19 The other piece is continuing
20 education. All too often, in a number of fields, not
21 just driver education, we focus on the initial
22 training of an individual. Then we let them loose
23 and say, Good luck, we'll probably see you in a
24 couple years.

25 Well, continuing education is

1 important as well. Continuing to provide them with
2 tools and resources that they need to help them do a
3 better job in teaching but also to help make that job
4 more manageable, make that job easier and make that
5 job more enjoyable so it's not just about initial
6 training, it's the training that we continue to
7 provide driver education teachers.

8 And I'll also echo it comes down to
9 what you pay them. If you don't pay them well
10 they're probably not going to stay in that field.

11 MR. MICHAEL TRIGGS: I think you've
12 said in your -- your testimony that in the last five
13 (5) years a lot of new developments have become acro
14 -- occurred in driver education and that a lot of
15 these are emerging practices now. What guidance can
16 you give to Manitoba Public Insurance on how to pick
17 which ones of these emerging prom -- practices will
18 become promising or -- and then maybe even become
19 best practices?

20 MR. BRETT ROBINSON: That's certainly
21 a very good question. And in the executive summary
22 under emergencing -- emerging practices, there are a
23 number listed, I think, that are fascinating
24 approaches to how we teach driver education. And I
25 do think we need to continue to monitor each of

1 these. Certainly I think a number of these will move
2 into that promising practices category in the coming
3 years.

4 Teen training is a very interesting
5 approach that takes that approach from the training
6 being provided by the teacher to the training being
7 provided by everyone involved in a process. You do
8 have a teacher, and then you have two (2) or (3)
9 students in the vehicle as the learning takes place,
10 and it takes the responsibility of the teacher and
11 puts the responsibility on everybody so that
12 everybody is teaching each other. Then, as a result,
13 they're also learning more because they're more
14 actively involved in the learning process.

15 It takes the teacher and puts them
16 more in a facilitator's role, a coaching role, which
17 I think has a lot of potential, and as it becomes
18 more commonly used and evaluated I think we'll really
19 see that one move up into a -- a -- a promising
20 practice.

21 So really, it's -- it's monitoring
22 each of these approaches to teaching driver
23 education, continuing to see if research is conducted
24 around them to show their effectiveness, which then
25 can support moving them up to a promising practice.

1 Independent driving is another area
2 that I think that we will certainly see moving up
3 into a promising practice where the new driver goes
4 out, gains some exposure by themselves. The insight
5 driving, I think, has great potential as well.

6 So does situational judgment testing
7 and commentary driving. Although, as you look at the
8 research, I think there are some cautions that are
9 issued on commentary driving. But I do believe
10 commentary driving has a great amount of potential
11 within the learning environment in the vehicle.

12 Commentary can be done by the
13 instructor or commentary can be done by the student
14 driver. Commentary can also be done by the
15 passengers who are observing, which requires them to
16 provide commentary of what they're observing within
17 the environment as they're driving, verbally
18 identifying potential hazards that lie in front of
19 them.

20 Some of the cautions that are issued
21 is when do you actually utilize commentary driving.
22 And a caution is that you don't know early on in the
23 learning process as they're learning the basic
24 skills. They need to first acquire basic skills,
25 then in the latter part of the training, once some of

1 these basic skills have become automatic, then you
2 can begin using commentary driving. But I do think
3 that commentary driving can become a key learning
4 tool within driver education. Certainly, online
5 driver training is going to continue to emerge and
6 emerge and emerge, and I think will become
7 commonplace within driver education. And then
8 integrating all of those together.

9 So I -- I think, you know, even as --
10 since this report was completed, there's probably
11 more out there on new techniques for teaching driver
12 education that we could add to this report that could
13 also be identified as an emerging practice. But I
14 think the key is to continue to monitor these
15 emerging practices and look at what would work best
16 within the -- the Manitoba system.

17 There are potentially emerging
18 practices that would not work within the Manitoba
19 system, but identify those that you think could work
20 well within your high school driver education
21 program. And then evaluate them once you have
22 implemented. The key is to evaluate them, make sure
23 that they are successful. Because if it is not
24 successful, you certainly don't want to continue
25 doing it over and over again. If it is successful,

1 you want to make sure that it becomes an integral
2 part of your program.

3 MR. MICHAEL TRIGGS: On page 1 of
4 your report you state:

5 "To date, formal training itself
6 has not proven to be highly
7 effective in reducing accident
8 risk."

9 If this is true why should MPI, or
10 anyone else for that matter, invest in driver
11 education programs, particularly for young drivers?

12 DR. ALLEN ROBINSON: Well, I've --
13 I've answered this in -- in some ways previously. It
14 hasn't proven effective and it hasn't proven not to
15 be effective, either. Common sense tells us that
16 you're not going to go give the keys to a brand new
17 car to a sixteen (16) year old and send them out in
18 this traffic. Common sense says we've got to train
19 them on how to take these keys, turn this car on, and
20 manoeuvre it in traffic without running into
21 everybody.

22 Even though the -- the data says you
23 can't show that you've got a -- a reduction in
24 fatalities, what the data frequently shows is you
25 have a reduction in the number of crashes and in the

1 severity of crashes. We also have to look at
2 research design. Researchers are a very stubborn
3 group. For many years the only thing accepted by
4 researchers as effectiveness is whether or not you've
5 reduced fatalities.

6 There are far more ways to measure the
7 difference in -- in programs and what they do other
8 than true, official accident records. You know that
9 your accident records in Manitoba are -- I don't want
10 to say they're incorrect, but they're hard to use
11 sometimes. You could get a lot more information in
12 your research effort if you did surveys, if you did
13 self-reported accidents, and if you did comparative
14 analysis without going to the official records. You
15 would begin to see that you can prove differences
16 between programs.

17 Gradually, now, in the United States
18 our researchers are doing that. They're agreeing
19 that you can't wait on official accident data to
20 evaluate a driver education program. You have to
21 have other means for that evaluation. And that
22 evaluation is surveys and self-reported accidents.
23 And when you do use the self-reported accidents you
24 can find significant differences between trained and
25 untrained drivers.

1 MR. BRETT ROBINSON: And -- and I'll
2 just add that we continue to evaluate driver
3 education on what driver education has been for the
4 last thirty (30), forty (40) years. We've learned a
5 lot about driver education. We have learned a lot in
6 techniques that have been implemented in other
7 countries that can enhance what we do today in driver
8 education.

9 And what we need to do is to evaluate
10 what driver education can be. And I think that we
11 would see a lot of successes in reducing crashes, the
12 severity of crashes, and certainly the desirable
13 result of reducing fatalities.

14

15 (BRIEF PAUSE)

16

17 MR. MICHAEL TRIGGS: In your report,
18 you -- on page 1 you also state:

19 "Training should focus on creating
20 drivers who are safe and not just
21 technically competent. This
22 involves instilling novices with an
23 appropriate cognitive skill level
24 and safety-oriented motives. The
25 primary goal of training should be

1 -- should not be to help novices
2 pass their driving licence test.
3 Higher cognitive skill levels
4 should be analyzed as a basis for
5 developing quality driver training
6 objectives and testings."

7 What is meant by this statement? And,
8 in particular, please explain the importance of
9 cognitive skill level.

10 MR. BRETT ROBINSON: Well, again it
11 goes back to the higher order learning. All too
12 often, driver education programs, when you look at --
13 and I certainly want to refer to the United States in
14 this statement. A driver education course, their
15 primary learning aid is the state driver's manual,
16 which really provides basic information on how to
17 obtain a driver's licence.

18 And driver education should not be
19 just simply providing enough training in order to
20 receive a driver's licence. That deals primarily
21 with those basic skills, which many of the research
22 reports out of Europe indicate that we spend too much
23 time on the basic skills. The basic skills will be
24 acquired and that the focus needs to be on those
25 higher order skills, which would be the skills that

1 we need them to apply for lifelong learning and
2 lifelong safe driving practices.

3 So the -- the goal should not just
4 simply be to get a licence. It's one (1) of the
5 results that goes along with improving and enhancing
6 lifelong driving skills so that they continue to be a
7 safe driver.

8 We tend to focus on what they need now
9 as a teen. But keep in mind that teen eventually
10 grows up and becomes an adult. So it's not only how
11 we can help that teen to be a better driver, to be a
12 safer driver, and to avoid crashes, reduce
13 fatalities, but keep in mind they eventually become
14 an adult, as well. And as adu -- an adult, we want
15 them to also be a safe driver and reduce fatalities
16 as adult drivers.

17 MR. MICHAEL TRIGGS: How is higher
18 order learning achieved with young persons?

19 DR. ALLEN ROBINSON: Well, we've all
20 heard these studies about brain development in young
21 people's frontal lobe progresses quicker than the
22 back lobe and you've got to do this kind of training
23 for a sixteen (16) year old and this type of training
24 for someone somewhat older.

25 That really is true and it has an

1 impact on driver education and that what they're
2 stating is that we're trying to teach driver
3 education too early and that the brain development of
4 these sixteen (16) year olds is not -- not ready for
5 -- for this cognitive higher level learning that
6 Brett keeps talking about.

7 Well, that may be true. But I
8 challenge you to stop sixteen (16) and seventeen (17)
9 year olds from driving. Well, may I ask the
10 question. When can you get a licence in Manitoba?
11 Sixteen (16), all right.

12 So since we're not going to stop them
13 from driving, we have to figure out how can we
14 properly train them. And that fits the delivery
15 standards that Brett was talking about. If you try
16 to teach this sixteen (16) year old all of this
17 massive stuff we've been talking about in two (2)
18 weeks, it'll be wasted.

19 If you don't use distributed learning,
20 where you spread out the learning activities over a
21 period of time, in which you have building blocks, so
22 to speak, and we do some skill development this week,
23 next week we do some practice, the following week we
24 do some cognitive -- cognitive level teaching, and
25 then we do some home study in -- in cognitive level

1 practices, risk taking, decision making, and this
2 course lasts anywhere from seven (7) to nine (9) to
3 sixteen (16) weeks, if we spread that out, then this
4 young person who has, quote, "the slower brain
5 development," can learn these cognitive skills to
6 become a safe driver.

7 But if we do it in -- unfortunately
8 what we do too much of in the States, in a 30+6
9 program that gets done in two (2) weeks. We might as
10 well not even do it.

11 MR. MICHAEL TRIGGS: In a perfect
12 world, all driver education training programs would -
13 - should be world class, but it takes a lot of
14 resources to get there.

15 What are the considerations for an
16 organization like Manitoba Public Insurance that it
17 should take in considering to moving to creating a
18 world class program?

19 DR. ALLEN ROBINSON: Well, I guess
20 you first have to decide if you want to. There --
21 there's a lot of things that have to be looked at in
22 terms of -- of making changes, you know, and -- and
23 you're doing this by studying what's going on in the
24 world. That's a good step.

25 And I assume that you've been doing

1 some studying on what's going on in Canada, and in
2 particular Manitoba, so that you can decide, is it
3 worth putting resources together to change what we're
4 doing and come up with a world class effort. I
5 believe it is and -- and I don't believe that it's
6 cost exorbitant to where you can't do it.

7 If you put your resources in the right
8 places and you have the right components working
9 together, you can do this -- I started to say
10 relatively easy, but that's not true. You -- you can
11 do it without a great deal of difficulty. In other
12 words, if -- if you're improving your curriculum,
13 improving your instructors, and at the same time
14 working with parents and the community about what
15 driver education is, and utilizing the technology
16 that is available today, you can make drastic
17 changes.

18 And I'll end with that example. When
19 -- when most people teach driver education, as Brett
20 mentioned, they give them the state driver handbook,
21 which is all the laws. And then they give them a
22 textbook which somebody wrote about all -- all the
23 skills and the safe driving practices. And they tell
24 them to use those two (2) things to learn how to
25 drive.

1 What I see happening in the future is
2 when you come into a driver education class, you're
3 going to be handed a iPad. And that teacher is going
4 to do all the instruction via computer where they can
5 put problems into this iPad where each individual has
6 to analyze what that problem is and come up with a
7 choice. And that choice will be an indication of how
8 well they understand the risk and -- and the dangers
9 of what they're doing.

10 As we get into this, we -- we will see
11 that driver education changes dramatically. And --
12 and I think -- I don't think, I know, because I've
13 worked with it for a long time, as we provide
14 improvements in driver education we can see better
15 drivers in our community. But we need to make sure
16 that it's a unified program that everybody receives.

17 MR. MICHAEL TRIGGS: One (1) final
18 question. I'm going to be referring to SM-5, page
19 31. And it's what the -- the Corporation has
20 submitted as its goals on high school driver
21 education program review. And it says here:

22 "The goals of developing a new
23 improved high school driver
24 education program are:

25 1) improve high school driver

1 education to positively impact on
2 collisions and claims costs
3 involving young drivers, given that
4 young drivers in Manitoba continue
5 to be over-represented in fatal,
6 serious injury, and property damage
7 collisions;
8 2) create a practical approach that
9 blends conventional, instructional,
10 and emerging technologies to lever
11 -- to leverage best practices and
12 address weaknesses in the current
13 high school driver education
14 program; and
15 3) provide the Corporation the
16 ability and flexibility in the
17 future to expand the driver
18 education services to address the
19 unique education and road safety
20 needs of adults, including First
21 Nations people living on and off
22 reserves and adult immigrants."
23 What are your thoughts on -- on those
24 goals?

25 MR. BRETT ROBINSON: I certainly

1 think those are -- excuse me, good goals to have. I
2 think this is the first I've heard those three (3)
3 particular goals. And as you look at those goals,
4 certainly any jurisdiction needs to establish a goal
5 for reducing fatalities, crashes, within any age
6 category. And certainly we have a number of age
7 categories that are of high risk. Certainly the --
8 the mature driver is over-represented in crashes, and
9 certainly the young driver being over-represented in
10 crashes and fatalities, as well.

11 I commend Manitoba for looking at how
12 to enhance its High School Driver Education Program
13 and become a world leader in driver education. I
14 think one (1) of the key elements in having a
15 successful program, actually two (2) key elements,
16 are the ability to adapt, and I think that was
17 identified in one (1) of the goals, and having the
18 flexibility to make changes to the High School Driver
19 Education Program.

20 Well, you need to continually adapt
21 your program, and it is important to have that
22 flexibility. As things change within driver
23 education you learn of new strategies that have been
24 effective in reaching teens and reducing crashes and
25 fatalities, so I think that flexibility in which to

1 adapt the program and make changes as needed so that
2 you can continue to make enhancements to the overall
3 program.

4 The other key element is evaluation.
5 You need to have a good evaluation tool associated
6 with your driver education program to evaluate the
7 program on an ongoing basis. That's how you identify
8 the need in which to adapt your program. As you
9 evaluate it, if you see that certain areas are not
10 working well, well, certainly you need to adapt and
11 make some changes. Certainly if elements of your
12 program are doing very well, you want to continue to
13 include those as components within your overall
14 program.

15 DR. ALLEN ROBINSON: Those -- those
16 goals are achievable. What -- what I don't want you
17 to do is reach for the stars. In other words, as you
18 look at those goals, make a decision that you're
19 going to make 'X' amount of improvement.

20 You're -- you're not going to
21 eliminate crashes. You're not going to eliminate
22 teen deaths, but you want to make an improvement. So
23 when you look at crashes two (2) years from now, you
24 would like to see a percentage reduction. You'll be
25 lucky if you get a 1 to 2 percent percentage

1 reduction.

2 But, you know, you know the insurance
3 world, I don't. If you have a 2 percent reduction in
4 crashes, what does that mean in dollars? That's a
5 bunch of dollars. And let me give you an example of
6 where we screwed up. In the -- in the DeKalb study
7 in the early 1970s, when we did the only comparative
8 analysis that's ever been done, we made the stupid
9 statement that we were going to reduce fatalities by
10 10 percent, and we did not do it.

11 Does anybody know how much we've
12 reduced fatalities though? Anyone? We reduced them
13 by 2 percent. Can you imagine if you reduced
14 fatalities in Manitoba in the next five (5) years by
15 2 percent, how much that would mean? But because we
16 stated our goals improperly, everybody said, You're a
17 failure, and they still say that today.

18 So make good objective decisions about
19 how successful you think you can be, and then measure
20 it against that using the evaluation criteria that
21 Brett was talking about.

22 MR. MICHAEL TRIGGS: Thank you.
23 Madam Chair, that concludes my direct examination.

24 THE CHAIRPERSON: Thank you, Mr.
25 Triggs. Ms. Grammond, do you have some cross-

1 examination?

2 MS. CANDACE GRAMMOND: I do. I note
3 the time. I'm happy to start now. Or if you want to
4 take the lunch break we can do that and I can start
5 afterwards.

6 THE CHAIRPERSON: Oh. Maybe what
7 we'll do is we'll do some follow-up questions with
8 Mr. Gosselin.

9 MR. REGIS GOSSELIN: Perhaps we
10 should provide a preamble because, you know, our
11 responsibility as a Board is to ensure that MPIC has
12 just and reasonable rates. And -- and, you know, we
13 establish the rates based on prudent expenditures, so
14 the -- 'prudent' is the -- the key -- the key word
15 there. And so some of my questions relate to the
16 prudence of expenditures.

17 Now -- now, obviously, in your
18 document you made some reference to the fact that
19 driver education programs -- I'm reading from the
20 very first page, the third paragraph in that first
21 page. And the second sentence of that paragraph
22 says:

23 "Driver education programs using
24 public funds are now less
25 available. And many public schools

1 that used to offer driver education
2 no longer do so."

3 So I guess my question is, in respect
4 of this survey that you did, did you examine the
5 funding of these programs? In other words, did --
6 did you encompass how these programs that you
7 examined were funded?

8 DR. ALLEN ROBINSON: The funding that
9 we're talking about there is primarily the US in
10 which funding from public sources has gone down over
11 the past twenty (20) years, and funding for that
12 driver education has been self-funding. We really
13 don't know the funding mechanisms for the European
14 countries.

15 MR. BRETT ROBINSON: In the European
16 countries it does vary. For instance, Great Britain,
17 generally speaking, it's paid by the student, which I
18 think is rather consistent across many of the
19 European countries. However, it is funded by the
20 government to receive or at least subsidize to
21 receive driver education. In many of the European
22 countries it can cost thousands of dollars on the
23 part of the learner to get the instruction needed.

24 MR. REGIS GOSSELIN: Now, perhaps you
25 could enlighten me about the US situation, since

1 you're probably closest to that. In the US, based on
2 what you've indicated, the funding from public
3 sources for driver education has gone down. So that
4 basically suggests to me that -- that money for
5 funding the programs is coming from the students or
6 the parents of the students.

7 Is that right? Is that correct?

8 DR. ALLEN ROBINSON: That's correct.

9 MR. REGIS GOSSELIN: Now, are you
10 aware of any data would suggest that -- that funding
11 from parents is more effective than funding from a
12 source such as an insurer or a government and so on?

13 DR. ALLEN ROBINSON: I am not.

14 MR. REGIS GOSSELIN: Are you aware of
15 any data that would suggest that the fact that
16 students are expected to fund that from family
17 sources or from their own, restricts access to
18 programs?

19 DR. ALLEN ROBINSON: It does restrict
20 ass -- access, yes.

21 MR. REGIS GOSSELIN: And do you -- do
22 you know that -- do you have any data that would --
23 that would compare the results of students that had
24 not taken the program and become licenced as opposed
25 to students who have taken the program and -- and are

1 licensed? Have -- have you got any data that would
2 indicate more success, less success and so on?

3 MR. BRETT ROBINSON: Well, if they do
4 not become licensed they're not gaining that exposure
5 in which to do a comparison of those who have that
6 licence. What we do have are two (2) studies within
7 the US that compared students who only received
8 practice time with their parents compared to those
9 students who received driver education along with
10 practice from their parents. And it did show that
11 those who receive driver education along with
12 practice with their parents had fewer citations,
13 fewer crashes, and, as a result, fewer fatalities.
14 And those are two (2) States studies done in Oregon
15 and Nebraska that have been done within the last five
16 (5) years.

17 MR. REGIS GOSSELIN: Now, I -- I
18 recognize that you have not examined the Manitoba
19 program, but have you examined or, at least, read
20 about the funding of our training, driver education
21 training in Manitoba by MPIC? Have you -- are you
22 aware of any of that? Yeah. Okay.

23 Now, I guess one (1) of the -- one (1)
24 of the elements that was not addressed as part of
25 your report, which I expected would be, is the extent

1 to which driver training should be allied with
2 parallel initiatives. And you talked a little bit in
3 your oral testimony about graduated driver licensing.

4

5 But I guess, are there any other
6 initiatives that you're aware of that could be tagged
7 with driver education to increase its effectiveness?

8 DR. ALLEN ROBINSON: A question of
9 you first. Did you say we did not talk about
10 parental relationships in driver education?

11 MR. REGIS GOSSELIN: No, I -- I'm --
12 I'm talking about parallel initiatives either on the
13 enforcement side or at the community level that might
14 increase the effectiveness of driver education.

15 DR. ALLEN ROBINSON: We have not seen
16 any of that, no.

17 MR. REGIS GOSSELIN: Somewhat related
18 to -- somewhat related to the question I asked
19 earlier about the costs of driver training, do you
20 have any data, or are you aware of any data sources
21 that would address the issue of costs of driver
22 training elsewhere in the world?

23 DR. ALLEN ROBINSON: Well, I do know
24 of some costs in states that provide state funding
25 for driver education, and on the average they run

1 between three fifty (350) and four fifty (450) per
2 student. That is provided -- for example, in North
3 Carolina, it is provided through public funds and
4 then the school is allowed to charge an additional
5 seventy-five dollars (\$75). But on the average, it's
6 around three fifty (\$350) to four hundred dollars
7 (\$400), is what the cost of a program is.

8

9

(BRIEF PAUSE)

10

11

MS. ANITA NEVILLE: Thank you. Just
12 following up on that line of questioning. When you
13 talk about the funding increasingly being private,
14 that is, the student self-finances it, is the vehicle
15 by which you reach the student, the school, or does -
16 - is it a private endeavour?

17

Do you recruit, do you promote, or is
18 the education promoted through the schools, and then
19 they sign up, or...?

20

DR. ALLEN ROBINSON: You're correct.
21 It's -- it's school related, or school connected. I
22 don't know what phrase to use. In other words,
23 you're still using the public school classroom,
24 you're still using part of the other facilities of
25 the public school; the teachers work in those

1 classrooms, but they charge a fee that covers the
2 cost of paying the teacher and providing the car for
3 instruction.

4 MS. ANITA NEVILLE: Who -- who pays
5 that cost?

6 DR. ALLEN ROBINSON: The student
7 themselves.

8 MS. ANITA NEVILLE: The student
9 themselves. So the student is reached or the
10 connection with the student is made through the
11 school; it's not made through the general community?

12 DR. ALLEN ROBINSON: It depends on
13 the state and the community. It is possible in
14 almost all communities for a private entity to meet
15 certain standards and regulations, and set up a
16 private driver training school. And in that private
17 driver training school, they then charge a fee for
18 providing classroom and in-car instruction.

19 MS. ANITA NEVILLE: Are you aware of
20 any situations where those students who do not have
21 the resources to sign onto a course, that there are
22 programs, privately funded not through parents, but
23 privately funded through some company or some
24 organization in the community, that will underwrite
25 the cost of it for a student?

1 DR. ALLEN ROBINSON: I'm not aware of
2 that happening, no.

3 MS. ANITA NEVILLE: Thank you.

4 THE CHAIRPERSON: Okay. I believe
5 we're done for the morning, and thank you very much.
6 We'll resume our hearing at one o'clock, and we'll
7 take our break now. Thank you.

8

9 --- Upon recessing at 12:00 p.m.

10 --- Upon resuming at 1:03 p.m.

11

12 THE CHAIRPERSON: Okay. Good
13 afternoon and welcome back. We will begin the
14 proceedings again and we're going to begin with Ms.
15 Grammond, who will be doing her cross-examination.
16 Thank you.

17

18 CROSS-EXAMINATION BY MS. CANDACE GRAMMOND

19 MS. CANDACE GRAMMOND: So, Dr.
20 Robinson, Mr. Robinson, we know that the summary
21 report that we've been working with within the filing
22 is just that, that you provided a very lengthy report
23 to the corporation setting out the results of your
24 research. And I did speak with Mr. Triggs, briefly
25 this morning. We would ask that an electronic

1 version, as opposed to a paper copy, of that report
2 be provided in this proceeding.

3 Is that agreeable?

4 MR. MICHAEL TRIGGS: That's
5 agreeable.

6

7 CONTINUED BY MS. CANDACE GRAMMOND:

8 MS. CANDACE GRAMMOND: Thank you.

9 Yes. Now, Dr. Robinson, Mr. Robinson, I heard your
10 evidence earlier that your mandate did not include
11 reviewing the existing driver education program at
12 MPI.

13 Is that right?

14 DR. ALLEN ROBINSON: That's correct.

15 MS. CANDACE GRAMMOND: Did you review
16 the Northport report that was obtained by MPI with
17 respect to its existing program?

18 DR. ALLEN ROBINSON: I have read
19 that, but that was not included in our report.

20 MS. CANDACE GRAMMOND: Were you able
21 to glean any important information from your review
22 of that report?

23 DR. ALLEN ROBINSON: Nothing comes to
24 mind specifically, no.

25 MR. BRETT ROBINSON: It was not

1 within the scope of the project. I think that was
2 done intentionally so that we didn't have any bias as
3 we went out and conducted our global -- global
4 research, global review.

5 MS. CANDACE GRAMMOND: Thank you. So
6 I do have some questions with respect to the content
7 of the summary report that's on the record. So if
8 you can have that in front of you, if you don't
9 already.

10 If we look at page 1, we see in the
11 first paragraph there is reference -- and I'm reading
12 from the second sentence -- to the Manitoba program
13 providing a unique opportunity to shape the long-term
14 driving behaviours of new drivers. And then with
15 respect to MPI's role as insurer, it's in a unique
16 position.

17 My question is this: What is the --
18 the unique opportunity that we have here in Manitoba,
19 that's distinct from MPI's position as a monopoly
20 insurer?

21 DR. ALLEN ROBINSON: Well, the
22 greatest advantage that you have is that you're the
23 only one offering driver education. In most of our
24 states, they can't agree upon what driver education
25 should be. So there is no continuity, there's no

1 uniformity, there's no way to evaluate it. They just
2 go whatever direction. And you don't have that
3 problem. You're lucky.

4 MS. CANDACE GRAMMOND: Thank you. On
5 page 2 of the report we see -- and this is under the
6 heading 'Basic Driving Skills' near the bottom of the
7 page. And I appreciate that you've already given
8 evidence about what basic driving skills are and so
9 forth, so I'm not going to ask you to repeat
10 anything.

11 But there is reference in the second
12 paragraph, to the ADTSEA, the A-D-T-S-E-A, or
13 Canadian standards for driver education. And it, the
14 way I read this is that those are existing standards.

15

16 Can you comment on what document or
17 what authority you're referring to there?

18 DR. ALLEN ROBINSON: Yes, I can.
19 ADTSEA has developed standards periodically and
20 updated them to describe both classroom and in-car
21 instruction, as well as standards for teacher
22 training. And perhaps the phrase 'Canadian
23 standards' is not correct. It probably should've
24 said, "Ontario standards." Ontario did go to great
25 length to develop a set of standards for driver

1 education. And those are just two (2) documents that
2 you could use for reference.

3 MS. CANDACE GRAMMOND: Thank you.
4 Now, in that same paragraph there's reference at the
5 very bottom of the page that the Segment 1, or Basic
6 Driver Education Program, should be substantially
7 updated. And then the paragraph goes on onto page 3
8 to reference extended practice, higher cognitive
9 skills, and self-assessment.

10 So can you comment on whether those
11 are the three (3) items that are encompassed in -- in
12 what should be substantially updated or if there is
13 something else?

14 DR. ALLEN ROBINSON: No, that's it.
15 There are just so many places that they do as Brett
16 described. They have the -- the driver's handbook
17 from the DMV and they have a basic textbook, and they
18 don't make any attempt to go beyond that.

19 So one (1) of the first steps that can
20 be done is to go beyond those two (2) activities and
21 -- and get into cognitive level teaching, self-
22 assessment, risk awareness, decision making, those
23 kinds of cognitive skills.

24 MR. BRETT ROBINSON: And I think what
25 it's really making reference to is that we spend such

1 a great deal of time in Segment 1 on the basic
2 driving skills that what we really need is a
3 transition and taking some of that time that's spent
4 on basic skills and moving it more to a level 2 or
5 Segment 2 driver education program and spending more
6 time on the cognitive skills, the -- the cognitive
7 skills, again, being so important in that learning
8 process, the higher order skills.

9 MS. CANDACE GRAMMOND: Thank you.

10 And so just in terms of the -- the language, when you
11 talk about the -- the higher order or the cognitive
12 skills and so forth, is that the same as what's
13 referred to as Segment 2 here on page 3?

14 DR. ALLEN ROBINSON: Yes.

15 MS. CANDACE GRAMMOND: There's also
16 commentary in the report with respect to a certain
17 type of training that should be avoided, and that was
18 described as 'skid training' or 'track training'.

19 Can you comment on what that is and
20 why you believe it should be avoided?

21 DR. ALLEN ROBINSON: Well, skid
22 training is when you go out and -- and you take your
23 cars on a skid pad that has been treated so that as
24 soon as you apply your brakes you slide. The
25 intended purpose of those -- or you could do it on

1 ice if you're in Manitoba. The intended purpose of
2 that was to teach people how to control a car in a
3 slippery condition.

4 The problems we have found with it is
5 that after that kind of training, students go out and
6 assume a little bit too much risk because they think
7 they're better drivers than they really are.

8 MS. CANDACE GRAMMOND: Thank you.
9 Now, you gave evidence earlier, and -- and there's
10 reference here in the report, as well, at the bottom
11 of page 3, to multi-stage driver education. And I --
12 I think it -- I think it was you, Dr. Robinson,
13 although I may be -- maybe it was Mr. Robinson, that
14 spoke about spreading out the learning over time,
15 there being various stages within the driver
16 education course, and that it -- it going over seven
17 (7) to sixteen (16) weeks rather than -- than a
18 couple of weeks.

19 Is there anything that you can add to
20 that description of multi-stage driver education?

21 DR. ALLEN ROBINSON: I -- I don't
22 think so. The intent is, to -- to state it simply,
23 is that you learn the basic driving skills so that
24 you can go drive. You get some experience. You come
25 back and you apply that experience in terms of

1 cognitive learning about what the risks are and what
2 you can do to improve your perceptual driving skills.
3 You -- you go back and you do some practice with your
4 parents so that you apply both those knowledges and
5 those skill level things that you've learned. And
6 once you have completed them, you go through an
7 evaluation to see if you've completed the course.
8 The whole intent is to extend the learning process
9 and to have multiple learning activities.

10 MS. CANDACE GRAMMOND: And can you
11 comment on how long something like that would take to
12 implement or what you would recommend in terms of how
13 long a -- over what period of time a program like
14 that should be implemented?

15 DR. ALLEN ROBINSON: Administratively
16 is what you're asking? I'm not sure I know. If you
17 have trained the teachers as to what the components
18 are, it -- it should not take any longer than it
19 takes to run through the first series of courses. In
20 other words, if I've trained my teachers, I've
21 written my curriculum, I've got my components for the
22 parents that they're going to use for practice, I put
23 my enrollment notice out, and I enroll students, then
24 at the completion of that first series of courses you
25 could say I've implemented the course. Although you

1 really haven't. You should evaluate what went on
2 during that first stage of implementation to see what
3 needs to be changed.

4 But I started to say you could
5 probably do it in six (6) months. I -- I don't think
6 you could develop the curriculum and train the
7 teachers that quick. I think it would take you about
8 a year to get ready, and then about six (6) months to
9 do the implementation.

10 MS. CANDACE GRAMMOND: Thank you.
11 Now, there's commentary in the report, and -- and
12 some evidence has been given with respect to vehicle
13 telematics. And -- and I think it was you, Mr.
14 Robinson, that gave a description of what that is.

15 Can you tell us if that's -- or where
16 that is being used? I -- I think you said that it
17 was -- it was being used.

18 Do you -- do you have knowledge of
19 where?

20 MR. BRETT ROBINSON: Well, some of
21 the vehicle telematics, as far as reporting, is being
22 used really by the parent. There are a number of
23 companies who are available that the parents can
24 purchase some of these devices that help to report
25 back to them where teen is located, will even tell

1 them how fast they're -- they're driving, if they've
2 had to apply the breaks abruptly while they're
3 driving. So largely I would say they're -- today
4 there are commercial products that are available to
5 the -- the parents.

6 But as these products evolved --
7 evolve, they can become products that can be used by
8 the driver education program as well and, hopefully,
9 even require then that as the teen goes out and gains
10 experience, gains practice, that it be a requirement
11 that they have their vehicle outfitted so that it can
12 report back.

13 And, again, that's from the standpoint
14 of having tools that will report back on what the
15 teen is doing. Other technologies, certainly those
16 are going to continue to evolve and need to be a part
17 of the training process.

18 DR. ALLEN ROBINSON: It wasn't a
19 statewide program, but my last two (2) years at the
20 university we had monitoring systems. As a part of
21 teacher training you had to train a new driver.
22 Well, when you have sixteen (16) instructor
23 candidates in your class, it's pretty hard for you to
24 ride with all sixteen (16) of them and watch them
25 teach this new driver.

1 So we had designated driving routes,
2 set objectives, that were supposed to take place on
3 those routes. And we had that built into a GPS
4 system so that if you took a -- a student out to
5 drive, the GPS system tracked everything you did.
6 And as an example, there's certain skill points that
7 have to happen. If you didn't stop, it would
8 actually require you to stop, for example, and do a -
9 - a three (3) point turnabout. If -- if we didn't
10 see that that happened on the GPS roadmap, we dealt
11 with that when you came back. So they're --
12 they're used a great deal in instructor training to
13 provide more monitoring of what instructor candidates
14 are doing. And they have a lot of potential.

15 MS. CANDACE GRAMMOND: Thank you. So
16 if -- if I've understood that correctly, Dr.
17 Robinson, you are saying you've have experience using
18 telematics in teaching the teachers, as it were?

19 DR. ALLEN ROBINSON: That's correct.

20 MS. CANDACE GRAMMOND: And, Mr.
21 Robinson, you're speaking about the use of telematics
22 on an individual basis with -- between parents and
23 younger drivers?

24 MR. BRETT ROBINSON: That's correct.

25 And -- and even by use by the driver education

1 teacher. You -- you can have circumstances where a
2 parent will say, Yes, we did two (2) hours of
3 practice. Well, GPS might show, yeah, you went to
4 the mall for two (2) hours and went shopping rather
5 than actually practising and turning in miles during
6 that two (2) hours. So it has great potential.

7 MS. CANDACE GRAMMOND: So this would
8 be a way to monitor when -- when you talk about the
9 importance of parent/child driving time, this would
10 be a way to monitor that and -- and try to ensure
11 that the teen is behind the wheel with the parent to
12 the extent that is recommended?

13 MR. BRETT ROBINSON: Yes, it would.
14 It's also a good way to monitor the driver education
15 teacher. Are they indeed doing everything they
16 should be doing?

17 MS. CANDACE GRAMMOND: So on that, at
18 the end of the day, what do you recommend for pre-
19 license practice hours for new drivers? There is
20 reference to a -- a few different numbers within your
21 report of what's being used in -- in different
22 contexts.

23 What do you recommend as a range?

24 DR. ALLEN ROBINSON: You're talking
25 about the practice with the parents? Well, started

1 with fifty (50) hours ten (10) years ago as being
2 what was needed to provide a -- a new driver with
3 ample practice. The Oregon study used a hundred
4 (100) hours. I don't think that we're, ourselves,
5 capable of pinpointing an exact number of hours.
6 What we do know is -- is that it's a lot.

7 The key is, is that you have to
8 identify all your driving environments, all your
9 objectives, all your evaluations. And if the student
10 successfully completes all those evaluations, if
11 they've done it in fifty (50) hours, they're done.
12 We should look more towards performance-based than
13 the hourly-based expectations with this practice.

14 MR. BRETT ROBINSON: Our literature
15 review showed a variance from thirty (30) hours all
16 the way up to two hundred (200) hours. So there
17 really was quite a range in the amount of that pre-
18 licensing practice. A couple factors that have to be
19 con -- taken into consideration, the two hundred
20 (200) hours was over a two (2) year period of time.
21 So how long do teens need to possess that permit
22 before they can pro -- progress through the licensing
23 system?

24 It's certainly not a substantial cost
25 to the province, to MPI. This is time that the

1 parent or guardian spends with the teen. But you
2 also have to be realistic. How much time is that
3 parent or that teen -- and that -- that -- or
4 guardian going to be able to spend with that teen in
5 providing that practice time? Because they certainly
6 have their job, their daily activities.

7 So you really do have to be realistic
8 from the standpoint of that parent or guardian. But
9 obviously, as much time as can be devoted to that
10 practice prior to licensure will be of great benefit.
11 But you also need to look at independent driving time
12 - not only driving with the parent, but also driving
13 solo.

14 MS. CANDACE GRAMMOND: Thank you.
15 Now, one (1) of the things that was mentioned
16 earlier, probably with respect to all of the various
17 best practices, emerging practices and so forth, was
18 the -- the need to do evaluation after the fact to
19 try to determine if there's a need to adapt a program
20 and so forth.

21 Can you tell us about the how? How do
22 you recommend that those evaluations be done?

23 DR. ALLEN ROBINSON: Well, that's why
24 I said you -- you should set your expectations
25 realistically. In other words, you -- even though I

1 just -- I would prefer that we only evaluate the
2 driver education programs based on tested
3 measurements in that class, that's not sufficient for
4 the community or the insurance industry. We've got
5 to do some evaluation based on crash reduction and --
6 and accident reduction.

7 So if -- if we set a goal of a 1
8 percent reduction in crashes or a goal of a 1 percent
9 reduction in severity of crashes, then every six (6)
10 months or every twelve (12) months we could look at
11 that group, whatever that number is, and see what
12 kind of reduction they've had statistically in these
13 areas.

14 And I can assure you that there is no
15 accident counter-measure that can reduce these
16 numbers by any greater than 1 percent. So if -- if
17 your driver education program is close to that 1
18 percent, they're being successful.

19 And the second thing you need to do is
20 the actual evaluation of skill level. You can test
21 them on their cognitive knowledges, you can test them
22 on their risk awareness and acceptance of risk, and
23 you can test them on their empathy about what they
24 would do in certain driving situations. And you
25 could measure that against a set standard, and that

1 standard would tell you whether or not you're --
2 you're meeting your goals of your program.

3 MS. CANDACE GRAMMOND: Are there any
4 evaluation methods that you're aware of aside from
5 looking at accident counts, frequency, and severity,
6 and so forth?

7 DR. ALLEN ROBINSON: Ask that again.

8 MS. CANDACE GRAMMOND: Sure. What
9 I'm trying to understand is what your thoughts are on
10 measuring the effectiveness of these kinds of
11 programs after implementation. So you've talked
12 about evaluation within the class, and you've talked
13 about looking at accident counts, frequency and
14 severity, so forth.

15 Is there anything else that you're
16 aware of that can be looked at as a measuring stick
17 in terms of success?

18 DR. ALLEN ROBINSON: It -- depending
19 -- well, I don't know how you would do it in Manitoba
20 since basically you require everybody to have driver
21 education, but you could compare the group that has
22 driver education against a group that has not had any
23 driver education would be one (1) way.

24 And you can you do a -- kind of a pre-
25 post. You could look at accident data and test data

1 from the past two (2) years and compare that to the
2 new data that you derive after two (2) years of
3 implementing a new program to see what statistical
4 changes there are.

5 It's very, very, let me give you one
6 (1) more very, difficult to evaluate a driver
7 behaviour. Behaviours are tough to measure.

8 MR. BRETT ROBINSON: Also a part of
9 the how is the what and what can you track on drivers
10 within Manitoba. And I would assume, being the
11 agency that's responsible for insurance, that you can
12 track any number of data elements on any driver
13 within the system.

14 Within the state of Maryland, they've
15 been working on, for the last five (5) years, a
16 project with the National Highway Traffic Safety
17 Administration to build a system that can then be
18 shared with other states that track some twenty-two
19 (22) data elements on every operator who enters the
20 system.

21 And some of those data elements
22 include when did they take their test to get their
23 permit, what training did they take, did they receive
24 a citation, were they involved in a crash to -- did -
25 - did it require hospitalization.

1 And there are about twenty-two (22)
2 data elements that are tracked that help to be able
3 to identify by comparison -- let's say, for example,
4 you could have one (1) control group that did not
5 receive driver education in Manitoba. You could have
6 another control group that they received the current
7 high school driver education program. Then you could
8 have a third group that would be tracked for having
9 received driver education under your new system and
10 be able to compare each of those three (3) groups if
11 you can collect and track those various data
12 elements.

13

14 (BRIEF PAUSE)

15

16 MS. CANDACE GRAMMOND: Do you know
17 the name of the system in Maryland that you just
18 referenced?

19 MR. BRETT ROBINSON: I don't have the
20 exact name, but I can certainly get additional
21 information, put Manitoba in touch with people in
22 Maryland and with their -- they call it the 'Highway
23 Data Loss Institute' within Maryland. They track all
24 the data for the Motor Vehicle Administration, also
25 working cooperatively with their office of highway

1 safety.

2 MS. CANDACE GRAMMOND: And do you
3 know whether that program was something that they
4 created within Maryland for their own use, or was it
5 something that they obtained from an external source?

6 MR. BRETT ROBINSON: I believe it was
7 created in Maryland and it was created with funding
8 from the National Highway Traffic Safety
9 Administration with the intent that it could then be
10 shared with other states for not reinventing the
11 wheel, so creating a model program, a model system
12 that could then be shared.

13 MS. CANDACE GRAMMOND: Thank you. So
14 you gentlemen have provided this report to MPI. From
15 what I understand of MPI's evidence, it's in the
16 process of considering the report and the
17 recommendations.

18 If MPI decides to implement some or
19 all of the recommendations, would you pur -- expect
20 to have an -- an ongoing role and, if so, what would
21 that role be, in implementation?

22 DR. ALLEN ROBINSON: We would love to
23 have an ongoing role. We're not sure what that role
24 would be. But even if we're not involved, as long as
25 the recommendations are implemented, we would

1 delighted.

2 MS. CANDACE GRAMMOND: Thank you.

3 Madam Chair, those are my questions.

4 THE CHAIRPERSON: Thank you very
5 much, Ms. Grammond. Mr. Gosselin...?

6 MR. REGIS GOSSELIN: You -- we talked
7 earlier about the unique position that MPIC is in
8 relative to other jurisdictions and the -- the other
9 insurer, they're also responsible for driver vehicle
10 licensing and, of course, the principal funder of
11 driver safety education in Manitoba. So they -- they
12 have three (3) very important roles.

13 Are there any jurisdictions in the US
14 that you are aware of that has a similar role, or
15 even in Canada? Are you...

16 DR. ALLEN ROBINSON: I -- I know of
17 no one that has the uniqueness that you have.

18 MR. BRETT ROBINSON: Certainly in the
19 United States. But I would say across Europe there
20 are countries that -- that do have some similar
21 roles. But not within the United States. And I
22 don't think we're quite familiar enough with each of
23 the Canadian provinces. But there -- there may be
24 some similarities in the provinces.

25 THE CHAIRPERSON: Okay. Thank you.

1 Mr. Williams, from CAC, would you like to do your
2 cross-examination?

3 MR. BYRON WILLIAMS: I would be
4 honoured to. I just -- I wonder if we could step
5 down for two (2) minutes? I just have to consult
6 with My Friend Mr. Triggs and then with the court
7 reporter.

8 THE CHAIRPERSON: Yes, we're --
9 granted.

10

11 (BRIEF PAUSE)

12

13 THE CHAIRPERSON: Okay. Thank you
14 very much. We'll begin again with Mr. Williams.

15 MR. BYRON WILLIAMS: Yes, and I --

16 THE CHAIRPERSON: And do you have an
17 exhibit to...

18 MR. BYRON WILLIAMS: Yeah. And first
19 of all, I do want to apologize for -- for having to
20 stand down.

21 THE CHAIRPERSON: That's okay.

22 MR. BYRON WILLIAMS: I was trying to
23 do this before lunch but I -- I just got into the
24 room a bit late. The -- you should before you an
25 article from the ADTSEA, The Chronicle, called

1 'Development of Second-stage Novice Driver Education
2 and Training Program', and I would suggest be marked
3 as CAC Exhibit 10.

4

5 ---EXHIBIT NO. CAC-10: 'Development of Second-
6 stage Novice Driver
7 Education and Training
8 Program' article from
9 ADTSEA

10

11 MR. BYRON WILLIAMS: And, Madam
12 Chair, just for the benefit of the panel, and also
13 for Mr. and Dr. Robinson, there'll be three (3)
14 documents I'll be referring to. One (1) will be
15 their -- the executive summary of their report.
16 Another will be the CAC Exhibit 10. And I may be
17 referring to also to CAC Exhibit 6, which is the teen
18 drive -- drivers safety document. That would be by
19 Lonerio and Mayhew.

20

21 (BRIEF PAUSE)

22

23 THE CHAIRPERSON: Okay, thank you.

24 MR. BYRON WILLIAMS: Madam Chair, I
25 have one (1) extra copy near at hand if that would

1 help Board member Neville.

2

3

(BRIEF PAUSE)

4

5

MR. BYRON WILLIAMS: I don't believe

6 I made any incriminating marks in the document.

7 You'll let me know if I did.

8

9 CROSS-EXAMINATION BY MR. BYRON WILLIAMS

10

MR. BYRON WILLIAMS: Good afternoon,

11 Mr. Robinson and Dr. Robinson. Just before we start,

12 in terms of CAC Exhibit 10, the Jensen/Wagner

13 article.

14

Would that be an article that, coming

15 from the ADTSEA Chronicle, that you have at least a

16 passing familiarity with?

17

DR. ALLEN ROBINSON: I'm -- I'm

18 sorry. That comes from our organization, yes.

19

MR. BYRON WILLIAMS: And again, the

20 CAC Exhibit 6, which is the teen driving article by

21 Lonerio and Mayhew, that would be a document that

22 you've at -- at least had a chance to review?

23

Would that be correct?

24

DR. ALLEN ROBINSON: I'm aware of

25 that. I did not review it thoroughly because it's

1 not a part of our study.

2 MR. BYRON WILLIAMS: Fair enough.

3 And would you have reviewed the -- the study by
4 Williams et al on the feasibility study on evaluating
5 the driver education curriculum, sponsored by the
6 NHTSA?

7 Would that be a document that you
8 would be familiar with?

9 DR. ALLEN ROBINSON: Is that in
10 reference to the DeKalb study?

11 MR. BYRON WILLIAMS: No, sir. It's -
12 - it was I think in 2009, looking at how you might
13 evaluate the ADTSEA drivers' education curriculum.

14 DR. ALLEN ROBINSON: Yes, that's in
15 our review of the literature.

16 MR. BYRON WILLIAMS: Okay. Now, Mr.
17 Robinson, in your discussion with Mr. -- My Friend --
18 My Friend, Mr. Triggs, this morning, I believe you
19 stated something to the effect that any jurisdiction
20 needs to set goals for reductions in crashes and
21 fatalities.

22 Do you make -- remember making a
23 statement to that effect?

24 MR. BRETT ROBINSON: Yes.

25 MR. BYRON WILLIAMS: And I wonder if

1 you can highlight, from your perspective, what's the
2 value of setting targets, in terms of reducing
3 crashes and fatalities?

4 MR. BRETT ROBINSON: When you say,
5 "targets," do you mean counter-measures, or do you
6 mean --

7 MR. BYRON WILLIAMS: Sorry, I was
8 imprecise. What's the -- what's the purpose or the
9 importance of setting goals -- goals for reducing
10 crashes and fatalities?

11 What's the planning purpose served by
12 that, sir?

13 MR. BRETT WILLIAMS: Well, certainly
14 setting goals gives you a roadmap of where you plan
15 to head with your program that you don't move forward
16 with arbitrarily just pulling in components for the
17 sake of pulling in components for a program, that
18 they're clearly identified as components that will
19 help to achieve the results that you want to achieve
20 within that program. And then being able to measure
21 against those goals as well.

22 MR. BYRON WILLIAMS: Dr. Robinson, do
23 you have anything to add on that point?

24 DR. ALLEN ROBINSON: Well, if you --
25 you don't establish some goals of what you want to do

1 you have no idea if you got there. So you want to
2 measure where you're going and how well you've done.

3 MR. BYRON WILLIAMS: Now, My Friend,
4 Ms. Grammond, this afternoon scooped a number of my
5 questions on evaluation. But in terms of -- you do
6 recall discussing with her the potential for -- for
7 doing a study in Manitoba using a -- a con -- those
8 who perhaps had not taken drivers' education versus
9 those who are taking the current program, versus
10 those who might take a -- a Stage 2 safe practice
11 curriculum.

12 You recall that discussion?

13 DR. ALLEN ROBINSON: Yes.

14 MR. BYRON WILLIAMS: And if we were
15 looking -- let's -- let's assume, at a population
16 where 67 percent of grade 10 students take drivers'
17 education and 33 percent do not, would that provide a
18 -- a suffi -- in a population the size of Manitoba,
19 would that provide a -- a robust enough population to
20 undertake such a study?

21 DR. ALLEN ROBINSON: Probably not.
22 It's not enough numbers. You don't have enough
23 fatalities, and you do not have enough crashes. What
24 it would provide you with is some comparative
25 analysis, but it would not provide you with

1 significantly -- significant differences that, from a
2 research standpoint, that you could say this is
3 absolutely true.

4 MR. BYRON WILLIAMS: So unless I'm
5 misunderstanding, you're suggesting for a -- a
6 province the size of Manitoba that type of analysis
7 is -- is not feasible?

8 DR. ALLEN ROBINSON: It probably
9 isn't.

10 MR. REGIS GOSSELIN: I'm a little bit
11 perplexed by that answer because I can understand
12 that the -- it would be difficult to evaluate
13 fatalities given the relatively small number of
14 fatalities in the province.

15 But, you know, there's an extensive
16 number of collisions, so you would be able to
17 evaluate the performance in respect to the number of
18 collisions and the severity of those collisions,
19 wouldn't you?

20 DR. ALLEN ROBINSON: You are correct.
21 If you leave the fatalities out of it, you could do
22 that.

23 MR. REGIS GOSSELIN: So you could do
24 the -- the other numbers, specifically, the -- the
25 numbers you alluded to, which is the -- the frequency

1 of collisions and the severity of collisions?

2 DR. ALLEN ROBINSON: That's correct.

3 I -- I fell back into the old fold of only using

4 fatalities as the measurement. If you use those

5 other characteristics you could do a comparison.

6

7 CONTINUED BY MR. BYRON WILLIAMS:

8 MR. BYRON WILLIAMS: And indeed in

9 the DeKalb study in Georgia, they -- the sample size

10 was roughly fifteen (15) or sixteen thousand (16,000)

11 students, was it not?

12 DR. ALLEN ROBINSON: I believe so,

13 yes.

14 MR. BYRON WILLIAMS: And so what

15 we've clarified is if we wanted to do a summative

16 evaluation of the impacts of -- of this Phase 2

17 programming on reductions in collisions, we probably

18 have sufficient population in Manitoba to undertake

19 that?

20 DR. ALLEN ROBINSON: Thank you. As

21 long as you use criteria other than official accident

22 reports.

23 MR. BYRON WILLIAMS: Now, you had a

24 bit of a discussion with Ms. Grammond in terms of

25 your voluminous report. Can you indicate when --

1 when it was finalized?

2 MR. BRETT ROBINSON: I'm going to say
3 it was around June/July of this year. So it is very
4 recent.

5 MR. BYRON WILLIAMS: Have you -- have
6 you undertaken to have it peer reviewed by any spec -
7 - other specialists in the field?

8 DR. ALLEN ROBINSON: No.

9 MR. BYRON WILLIAMS: Just turning to
10 the American Driver and Traffic Safety Education
11 Association, or ADTSEA, I'll use the acronym for the
12 court reporter, A-D-T-S-E-A. Dr. Rob -- Robinson,
13 and for some -- some reason I keep wanting to call
14 Robertson, so I'm going to apologize if I do that.

15 But, Dr. Robinson, you're currently
16 the CEO of ADTSEA?

17 DR. ALLEN ROBINSON: Yes.

18 MR. BYRON WILLIAMS: We're going to
19 get you trained on that red -- red light yet.

20 DR. ALLEN ROBINSON: Enough prac --
21 enough practice, yes.

22 MR. BYRON WILLIAMS: And, Mr.
23 Robinson, you're vice president?

24 MR. BRETT ROBINSON: Of ADTSEA I'm
25 the execute director, that would be the second in --

1 MR. BYRON WILLIAMS: I might have
2 demoted you, I apologize for that.

3 MR. BRETT ROBINSON: That's quite all
4 right.

5 MR. BYRON WILLIAMS: If I were to
6 look at the purpose of ADTSEA, if I was to go to its
7 constitution, would I be correct in suggesting that
8 it's purpose is to promote traffic safety and its
9 benefits by improving and extending driver education
10 activities in schools, colleges, the private sector,
11 et cetera?

12 DR. ALLEN ROBINSON: Yes.

13 MR. BYRON WILLIAMS: And would I be
14 correct in suggesting that ADTSEA was formed in a --
15 in -- in the 1950s?

16 DR. ALLEN ROBINSON: Yes.

17 MR. BYRON WILLIAMS: And in the 1970s
18 you took over the management of the National Student
19 Safety Program? Agreed?

20 DR. ALLEN ROBINSON: Yes.

21 MR. BYRON WILLIAMS: Would it be fair
22 to say that ADTSEA describes itself as a national ado
23 -- advocate for quality traffic safety education?

24 DR. ALLEN ROBINSON: Yes.

25 MR. BYRON WILLIAMS: And amongst your

1 members you would have over one thousand (1,000)
2 professional and corporate members? Agreed?

3 DR. ALLEN ROBINSON: That's -- that's
4 a close figure, yes.

5 MR. BYRON WILLIAMS: And one (1) of
6 the services you provide to your members is a
7 national office which represents the interests of
8 your members by keeping track of legislation as well
9 as lobbying for legislation to support driver and
10 safety education? Agreed?

11 DR. ALLEN ROBINSON: No. That --
12 that used to be a goal of the association. But over
13 time that has changed. We do provide, upon request
14 of -- of any state, legislative body, information on
15 research or information on re -- on programs, we
16 provide that to them, but we're not an active
17 lobbyist.

18 MR. BYRON WILLIAMS: Thank you for
19 that. I want to talk a little bit about the risk
20 factors that are associated with young drivers. And
21 would it be fair to say that lack of experience is a
22 known risk factor associated with young drivers?

23 DR. ALLEN ROBINSON: Yes.

24 MR. BYRON WILLIAMS: And immaturity
25 is also commonly described as a -- another major cras

1 -- crash risk factor for young drivers?

2 DR. ALLEN ROBINSON: Yes.

3 MR. BYRON WILLIAMS: And what the
4 literature tells us is that young -- youthful drivers
5 are more likely than adults to speed, tailgate or
6 choose smaller gaps.

7 Agreed?

8 DR. ALLEN ROBINSON: That's correct.

9 MR. BYRON WILLIAMS: And one would
10 just have to drive with my children to be confident
11 that the literature is right.

12 DR. ALLEN ROBINSON: That's why we
13 need to train them not to do that.

14 MR. BYRON WILLIAMS: In terms of the
15 risk factors associated with higher risk of
16 collision, leaving aside young persons and just going
17 to the general population, would gender be one (1) of
18 the -- the risk factors?

19 DR. ALLEN ROBINSON: In -- in the
20 past it has been males have always had more accidents
21 than females. But that's been entirely because of
22 exposure. That exposure has changed where females
23 now have as much exposure as the males to the point
24 that they're either equal in crash involvement or the
25 females are greater in crash involvement.

1 MR. BYRON WILLIAMS: How about
2 socioeconomic status? Is that identified as a risk
3 factor?

4 DR. ALLEN ROBINSON: I don't know
5 that it's a risk factor, but I do know that you can
6 calculate accidents based on those characteristics.

7 MR. BYRON WILLIAMS: Focussing on the
8 risk factors of inexperience and immaturity, we can
9 agree that they both contribute to the excess risk of
10 young drivers in terms of collisions?

11 DR. ALLEN ROBINSON: Yes.

12 MR. BYRON WILLIAMS: Can we agree
13 that there is some evidence suggesting that
14 immaturity may play a relatively higher role in more
15 serious and fatal crashes than it does in more minor
16 accidents?

17 DR. ALLEN ROBINSON: I don't know
18 that.

19

20 (BRIEF PAUSE)

21

22 MR. BYRON WILLIAMS: Dr. or Mr.
23 Robinson, you might want to turn to CAC-7, that's the
24 traffic drivers safety document, so that's the one by
25 Lonerio. And page 5, sir. And, Dr. Robinson, fir --

1 first of all, I want to be clear that my client has
2 your point from your evidence of the -- the need to
3 focus on safe driving practice.

4 But I just want to chat with you for a
5 moment or two (2) in terms of some of the challenges
6 associated with traditional drivers' education. And
7 I'm going to just direct your attention to the first
8 indented paragraph at the top of -- of page 5 and let
9 you take a moment to -- to look at it, sir.

10

11 (BRIEF PAUSE)

12

13 DR. ALLEN ROBINSON: Okay.

14 MR. BYRON WILLIAMS: Focussing on
15 traditional drivers education, you see the suggestion
16 that one (1) of the -- the challenges is the
17 relatively short duration of the traditional courses,
18 agreed?

19 DR. ALLEN ROBINSON: Yes, we've been
20 discussing that all morning.

21 MR. BYRON WILLIAMS: And another
22 challenge ida -- and -- identified by Williams is
23 that the audience may be relatively unmotivated
24 regarding safety because their primary motivation is
25 -- is to get a driver's licence.

1 And do you have a thought on whether
2 that's --

3 DR. ALLEN ROBINSON: That's
4 absolutely correct.

5 MR. BYRON WILLIAMS: Okay. And
6 Williams goes on to suggest that a major impediment
7 is the inherent difficulty in affecting lifestyles
8 and development factors.

9 And would that be a statement that you
10 would agree is -- with, as well, sir?

11 DR. ALLEN ROBINSON: Yes.

12

13 (BRIEF PAUSE)

14

15 MR. BYRON WILLIAMS: I want to chat
16 for a moment in terms of the existing high school
17 driver education programming in the United states.
18 Would I -- we're ready? Okay. Would I be correct in
19 suggesting to you that there are three nationally
20 recognized models, being ADTSEA, NIDB, and DSAA?

21 DR. ALLEN ROBINSON: I'm not sure
22 that you're correct on -- on that because I'm not
23 sure what your definition of models are. But ADTSEA
24 certainly has a curriculum. NIDB certainly has a
25 curriculum. I do not know that DSAA has a

1 curriculum, but there are other providers of training
2 programs such as AAA.

3 MR. BYRON WILLIAMS: Fair enough.

4 And you mentioned this morning that, historically,
5 the traditional high school program has involved
6 thirty (30) hours of class time and six (6) hours on
7 the road?

8 DR. ALLEN ROBINSON: Correct.

9 MR. BYRON WILLIAMS: And am I correct
10 in suggesting to you that under the NHTSA-sponsored
11 novice tre -- teen driver education and training
12 administrative standards there is a move towards
13 forty-five (45) hours in class and ten (10) hours on
14 the road?

15 DR. ALLEN ROBINSON: The recommended
16 standard is forty-five (45) hours classroom, ten (10)
17 hours behind-the-wheel instruction, and ten (10)
18 hours of observation.

19 MR. BYRON WILLIAMS: Now, my client
20 was, of course, quite intrigued by your discussion of
21 safe driving practice.

22 Does ADTSEA currently have a
23 curriculum for high school with -- developed in terms
24 of Segment 2 or advanced driver training?

25 DR. ALLEN ROBINSON: Yes.

1 MR. BYRON WILLIAMS: And what
2 jurisdictions is it offered in, sir?

3 DR. ALLEN ROBINSON: It -- it's
4 offered in two (2) ways. Number 1, it's a part of
5 the ADTSEA 3.0 driver education curriculum in which
6 it's unit 5 and 6 of that curriculum. But it's also
7 offered in Michigan where it's a specifically
8 developed ten (10) hour classroom component used by
9 their driver education teachers.

10 MR. BYRON WILLIAMS: So the
11 difference between that and the traditional model
12 would be additional in-classroom component, sir?

13 DR. ALLEN ROBINSON: That's generally
14 correct. I -- I'm trying to be careful here so we
15 don't, you know, change what we're talking about. In
16 -- in our program that we offer the forty-five (45)
17 hours of classroom, it contains all the components of
18 a Segment 2 classroom.

19 But in Michigan, because they're able
20 to require that you have twenty-four (24) hours of
21 classroom, you go get 'X' amount of hours of parent
22 driving, then you come back and you take ten (10)
23 hours of classroom. They haven't increased the
24 classroom time, they've just chopped it up and
25 offered it differently.

1 MR. BYRON WILLIAMS: Okay. That --
2 that's helpful. And just so I'm clear, when we talk
3 about Stage 2 drivers' education in Michigan, there
4 would not be an additional on-road instructional
5 component.

6 Is that correct?

7 DR. ALLEN ROBINSON: No, there is
8 not.

9 MR. BRETT ROBINSON: Generally
10 speaking, in the US, the concept of a second stage of
11 driver education has not been widely accepted to
12 require them to come back for a second level of
13 training, only occurs within the state of Michigan.

14 MR. BYRON WILLIAMS: And just for the
15 clarification of terminology, when you make reference
16 for -- to Stage 2 programming in jurisdictions, let's
17 say, such as Denmark, that might differ from the
18 terminology we're using for Stage 2 in Michigan in
19 that in a jurisdiction such as Denmark --

20

21 DR. ALLEN ROBINSON: Absolutely.

22 MR. BYRON WILLIAMS: -- we would see
23 very different amounts of training on the road than
24 you see --

25 DR. ALLEN ROBINSON: Absolutely.

1 MR. BYRON WILLIAMS: Okay. Now, you
2 did mention in your discussion this morning that you
3 -- you've had some results from Michigan that please
4 you. I wonder if you could, by way of undertaking,
5 provide an electronic li -- link to any evaluations
6 of the Stage 2 programming in Michigan?

7 DR. ALLEN ROBINSON: Well, I -- I
8 could pro -- I could find that, yes. I don't have it
9 readily available, but it would all be through UMTA,
10 the University of Michigan, but that can be provided.

11 MR. BYRON WILLIAMS: Okay. And
12 certainly just to save on paper, my -- and you don't
13 need to do it today, but my client would appreciate
14 an electronic link to the research.

15 DR. ALLEN ROBINSON: Absolutely.

16 MR. BYRON WILLIAMS: Okay.

17 MR. BRETT ROBINSON: And there
18 certainly is research and a report available, several
19 reports on the effectiveness of the graduated driver
20 licensing program.

21

22 --- UNDERTAKING NO. 39: Mr. Robinson to provide
23 an electronic link to any
24 evaluations of the Stage
25 2 programming in Michigan

1 DR. ALLEN ROBINSON: Several of those
2 can be found on the NHTSA website, as well, under
3 "Teen driver safety," but I -- I will get the link.
4 You don't have to go look for it.

5

6 CONTINUED BY MR. BYRON WILLIAMS:

7 MR. BYRON WILLIAMS: Now, Dr.
8 Robinson and -- and Mr. Robinson, I'm going to stay
9 in the teen drive safety document and move to page
10 19.

11

12 (BRIEF PAUSE)

13

14 DR. ALLEN ROBINSON: Okay.

15 MR. BYRON WILLIAMS: And, Dr.
16 Robinson, I'll direct your attention to the middle of
17 page 19, where you'll see Lonerio et. al. discussing
18 different types of studies in terms of evaluations of
19 driver education program, those being experimental
20 studies, quasi-experimental studies, and ecological
21 studies.

22 Do you see that, sir?

23 DR. ALLEN ROBINSON: Yes.

24 MR. BYRON WILLIAMS: Now, would those
25 be terms that -- that you're familiar with?

1 DR. ALLEN ROBINSON: Yes.

2 MR. BYRON WILLIAMS: And can we agree
3 with the definition of 'experimental studies' as one
4 where students are assigned to -- to different
5 training conditions?

6 Would that be fair?

7 DR. ALLEN ROBINSON: Yes.

8 MR. BYRON WILLIAMS: And the most
9 famous of those within the US experien -- experience
10 would be the D-E-K-A-L-B County experimental study.

11 Agreed?

12 DR. ALLEN ROBINSON: The -- the
13 DeKalb study, yes.

14 MR. BYRON WILLIAMS: And in terms of
15 quasi-experimental studies, those would be
16 circumstances where naturally occurring groups are
17 compared.

18 Agreed?

19 DR. ALLEN ROBINSON: Yes.

20 MR. BYRON WILLIAMS: And just as an
21 example of that -- and either you or Mr. Robinson can
22 comment -- you wouldn't have a -- you -- you might
23 compare a population of those who've taken driver
24 education training with those who -- who haven't?

25 DR. ALLEN ROBINSON: You could, yes.

1 MR. BYRON WILLIAMS: You might not --
2 okay.

3 And we also see a term called
4 'ecological studies'. And can we agree that that
5 would be an assessment of changes in driver training
6 requirements or program differences across different
7 jurisdictions?

8 DR. ALLEN ROBINSON: Yes.

9 MR. BYRON WILLIAMS: Now, based upon
10 your review of the literature, in terms of driver
11 safety, would you be familiar with the term
12 'confounding variables'?

13 DR. ALLEN ROBINSON: I am not sure
14 that I am, no.

15 MR. BYRON WILLIAMS: Okay. And --
16 and I won't push it too far, and I'll just try and
17 describe in my inelegant fashion. And if you're not
18 prepared to walk with me, that's fair enough.

19 But if we are trying to understand the
20 role that driver safety training plays in reducing
21 collisions, would it be fair to say that we -- in our
22 analysis we should be controlling for other
23 statistically significant factors, such as age and
24 the number of months of driving?

25 DR. ALLEN ROBINSON: Absolutely the

1 amount of driving, yes.

2 MR. BYRON WILLIAMS: And by
3 'confounding factors', Dr. Robinson, just we're on
4 the same page, I -- I would suggest that what -- that
5 term is used to describe other signific --
6 statistically significant factors that -- that may
7 affect the result that you're studying?

8 DR. ALLEN ROBINSON: Yes.

9 MR. BYRON WILLIAMS: And ag -- again,
10 based upon your review of the literature, would you
11 be familiar with the term 'volunteer bias'?

12 DR. ALLEN ROBINSON: Absolutely.

13 MR. BYRON WILLIAMS: And as I
14 understand that term, and I'll ask you to agree with
15 me or to correct me, 'volunteer bias' refers to
16 volunteers typically having characteristics that make
17 them non-comparable to those who do -- do not
18 volunteer?

19 DR. ALLEN ROBINSON: Yes.

20 MR. BYRON WILLIAMS: And just in --
21 when we look at driver education analysis, volunteers
22 are typically individuals -- volunteers for driver
23 education training are typically individuals with
24 lower crash risk than those not volunteering?

25 Is that -- that's how it's used, sir?

1 DR. ALLEN ROBINSON: Yes. A -- a
2 different way to state that is that people who would
3 volunteer for driver education are people who are
4 safe anyway.

5 MR. BYRON WILLIAMS: Yet again, I --
6 based upon my experience with my three (3) sons, sir,
7 I -- I can't help but agree with you.

8 In any review of the literature that
9 one does, one would want to be cognizant of how the
10 studies in question treated confounding variables as
11 well as the risk of volunteer bias.

12 Agreed?

13 DR. ALLEN ROBINSON: Yes.

14

15 (BRIEF PAUSE)

16

17 MR. BYRON WILLIAMS: I want to turn
18 you to your -- the overview or executive summary of
19 your analysis which -- and -- and specifically to
20 under 'Safe Driving Practices', page 3. And the
21 bottom of page 3 and the top of page 4.

22 And Dr. Robinson, at the very bottom
23 of page 3 and turning now to page 4, you'll see a
24 sentence stating:

25 "Many countries are using multi-

1 stage driver education and have
2 seen a reduction in crashes."

3 Agreed?

4 DR. ALLEN ROBINSON: Yes.

5 MR. BYRON WILLIAMS: And I believe I
6 heard evidence from Mr. Robinson this morning that
7 you have -- know that Phase 2 techniques are proven
8 in Europe, Asia, and Australia.

9 Did you make a statement to that
10 effect, sir?

11 DR. ALLEN ROBINSON: Yes.

12 MR. BYRON WILLIAMS: And we'll come
13 back to that in -- in just one (1) second.

14 Turning to page 5 of your report,
15 you'll see under the conclusion, indeed the very last
16 sentence, a sentence reading:

17 "While at least fifty (50) of pre-
18 licensing practice are recommended
19 in any system, experience in one
20 (1) country shows that increasing
21 this to approximately one hundred
22 and twenty (120) hours reduced
23 crashes in the two (2) years follow
24 -- following licensing by about 40
25 percent."

1 Agreed? Now, are you referr --

2 DR. ALLEN ROBINSON: Yes.

3 MR. BYRON WILLIAMS: Oh, sorry. Are
4 you referring to Denmark, in terms of that statement,
5 sir?

6 MR. BRETT ROBINSON: Yes, I believe
7 it is Denmark.

8

9 (BRIEF PAUSE)

10

11 MR. BYRON WILLIAMS: Now, I want to
12 ask a little bit more about the study in Denmark.
13 There is some information about it in Lonerio, the
14 safe -- at pages 30 and 31, if memory serves me
15 correctly. So that's the teen drive safety, at pages
16 30 and 31.

17 Now, first of all, Dr. Robinson, in
18 terms of the Danish experience, am I correct in
19 suggesting to you that a new system of mandatory
20 driver education was implemented in 1986?

21 DR. ALLEN ROBINSON: Yes.

22 MR. BYRON WILLIAMS: Okay. And so
23 this mandatory system em -- emphasized defensive
24 driving, basic skills training on a closed course,
25 progressively more difficult training on the road and

1 at night, classroom con -- instruction in conjunction
2 with practical training, and a written test.

3 Agreed?

4 DR. ALLEN ROBINSON: I believe that
5 is correct, but I'm going by a very thin memory. I
6 do see that written in Lonerio's report, and I believe
7 it's correct.

8 MR. BYRON WILLIAMS: Okay. Fair
9 enough. And what they were examining in their study
10 was those who took this course compared to the crash
11 records of drivers twenty-five (25) to fifty-four
12 (54) years old, who were unaffected by the
13 implementation of the new driver education program.

14 Agreed?

15 DR. ALLEN ROBINSON: What do you mean
16 by 'unaffected by'?

17 MR. BYRON WILLIAMS: Didn't take it.

18 DR. ALLEN ROBINSON: Oh, okay. Yes.

19 MR. BYRON WILLIAMS: And of the two
20 (2) groups examined, the group that didn't take it,
21 so their crash rate decreased and the group that did
22 take it saw their crash rate decrease by more,
23 roughly 35 percent.

24 Agreed?

25 DR. ALLEN ROBINSON: I believe that's

1 correct, yes.

2 MR. BYRON WILLIAMS: And the analysis
3 of the Danish experience would be by, in particular,
4 the researcher Carstensen, spelled C-A-R-S-T-E-N-S-E-
5 N, for the court reporter.

6

7 (BRIEF PAUSE)

8

9 DR. ALLEN ROBINSON: I'm sorry, I
10 didn't get the question.

11 MR. BYRON WILLIAMS: Sorry. The --
12 the research was done by Carstensen, sir?

13 DR. ALLEN ROBINSON: Oh, yes. Yes.

14 MR. BYRON WILLIAMS: Okay.

15 DR. ALLEN ROBINSON: I heard you
16 spelling the name for the court recorder, and...

17 MR. BYRON WILLIAMS: Well, I should
18 have probably put a question mark at the end of that,
19 and I apologize.

20 Now, would it be fair that -- to say
21 that Carstensen -- the report has been criticized for
22 fa -- failing to control for confounding variables?

23 DR. ALLEN ROBINSON: Probably. As
24 most of these reports are.

25 MR. BYRON WILLIAMS: And just to that

1 point, if you can go to CAC Exhibit 10 for just a
2 moment, sir. That's the excerpt from the ADTSEA
3 report. That's development of a second-stage novice
4 driver education.

5 DR. ALLEN ROBINSON: Yes.

6 MR. BYRON WILLIAMS: And if you flip
7 to page 7 of that report, in the middle column, the
8 second paragraph, you'll again see a report -- or --
9 or a description of Car -- Carstensen's analysis by
10 Jensen, Wagner et al, agreed?

11 DR. ALLEN ROBINSON: Yes.

12 MR. BYRON WILLIAMS: And they ob --
13 observe as well that the study was completed under
14 less than ideal conditions, agreed?

15 DR. ALLEN ROBINSON: Yes.

16 MR. BYRON WILLIAMS: Now, Jensen et
17 al, do go on to say that -- that:

18 "This study, regardless of its
19 research design, has been the best
20 evidence of a positive effect on
21 novice driver safety by a program."

22 Do you see that statement in that
23 paragraph?

24 DR. ALLEN ROBINSON: No. No, I
25 don't.

1 MR. BYRON WILLIAMS: Okay. Sorry,
2 sir. If you go about halfway down you'll see,
3 "Regardless of the research" --

4 DR. ALLEN ROBINSON: I got it.

5 MR. BYRON WILLIAMS: Yeah.

6 DR. ALLEN ROBINSON: I got it.

7 MR. BYRON WILLIAMS: And is that a
8 statement you agree with?

9 DR. ALLEN ROBINSON: Yeah. Yes.

10

11 (BRIEF PAUSE)

12

13 MR. BYRON WILLIAMS: At -- at the
14 back of Jensen et al. on page 11, Dr. Robin --
15 Robinson, in the middle -- at the bottom of the first
16 column and towards the -- the top of the second
17 column you'll see a suggestion by Jensen, that, in
18 terms of the development of second stage novice
19 driver education and training, she's suggesting that:

20 "Future research evidence efforts
21 should include a pilot test of the
22 new curriculum."

23 Do you see that, sir?

24 DR. ALLEN ROBINSON: Yes, I do.

25 MR. BYRON WILLIAMS: And you had a

1 bit of this discussion with -- with My Friend, Ms.
2 Grammond. But if one were looking at testing this
3 curriculum, do you have any thoughts on -- in terms
4 of how -- how big of a size one would be looking at
5 in terms of a population, how long you would want to
6 take to -- to give a fair try to thi -- to this
7 approach?

8 DR. ALLEN ROBINSON: Well, when
9 you're doing a pilot test you don't have the same
10 constraints as you do when you're doing an -- impact
11 studies, some of these others you've been describing.

12 In doing a pilot test, I would be
13 quite comfortable with two (2) classes of twelve (12)
14 to fifteen (15) students in each, going through
15 whatever I had designed, and then measuring their
16 skills, their knowledge, their level of risk at the
17 end to see if it was -- if it met my predetermined
18 goal that I wanted them to meet.

19 I would also want to know whether or
20 not the activities, the materials, and the learning
21 was acceptable to them. You know, you can develop a
22 training program and get done with it and everybody
23 hates it, so it's not going to do you any good to go
24 forward. So you want to measure whether those who
25 have to use it, those who implement it, accept it,

1 and can work with it.

2 And if I did that twice I would be
3 comfortable with going on with a larger scale
4 implementation. So it would not be considered an
5 expensive endeavour.

6 MR. BYRON WILLIAMS: I have two (2)
7 questions following from that. The first one --
8 first one is, in terms of the -- kind of the goals
9 that -- that you might seek to evaluate coming out of
10 a -- a pilot project, as opposed to a -- a full-scale
11 implementation, I presume those would be intermediate
12 summative analyses like attitude change and things
13 like that --

14 DR. ALLEN ROBINSON: They would be
15 intermediate, yes.

16 MR. BYRON WILLIAMS: And in terms of
17 next steps for Manitoba, if one were, let's assume, a
18 reasonable and fiscally cautious service provider,
19 would a pilot project approach be something that --
20 that you would be recommending?

21 DR. ALLEN ROBINSON: Yes.

22 MR. BYRON WILLIAMS: Now, mis -- Mr.
23 Robinson, in your discussion this morning, you
24 referenced research or programming out of Oregon and
25 --

1 MR. BRETT ROBINSON: Yeah.

2 MR. BYRON WILLIAMS: -- Nebraska.

3 And I took it that you were referring to comparisons
4 between driver education students versus parent-
5 trained students. Was -- was that what you were
6 referring to, sir?

7 MR. BRETT ROBINSON: Yes.

8 Essentially, in -- in both groups, and particularly
9 in the state of Oregon, they both received supervised
10 practice from their parent. That's a requirement
11 within their graduated driver licensing system. One
12 (1) group, however, received formal driver education
13 where the other group did not. And that is a report
14 that's available both on the Oregon website as well
15 as the National Highway Traffic Safety Administration
16 website. That report is available.

17 MR. BYRON WILLIAMS: And would you,
18 by way of undertaking, be prepared to provide
19 electronic links to both the Oregon and the Nebraska
20 studies that you referred to this morning?

21 MR. BRETT ROBINSON: Yes, I can
22 provide links to the Oregon study. The Nebraska
23 study is in the final stages before publication, and
24 once it's ready, yes, that can be provided as well.

25

1 --- UNDERTAKING NO. 40: Mr. Robinson to provide
2 electronic links to the
3 Oregon study and the
4 Nebraska study
5

6 DR. ALLEN ROBINSON: But -- but let
7 me alert you on the Nebraska study. The feds aren't
8 always very quick to put final release on studies, so
9 don't hold your breath.
10

11 CONTINUED BY MR. BYRON WILLIAMS:

12 MR. BYRON WILLIAMS: Yes. And -- and
13 frankly, for -- for my purposes for this hearing,
14 Oregon would suffice. And I'll be on the lookout for
15 Nebraska afterwards.

16 Mr. Robinson, in terms of the Oregon
17 study, would I be fair in suggesting that one (1)
18 criticism of that analysis was the selection bias
19 issue?

20 MR. BRETT ROBINSON: Yes, more than
21 likely. Excuse me.

22 MR. BYRON WILLIAMS: Now, this can go
23 to either of you, I've got a -- a series of
24 questions. One (1) is, just in terms of good driver
25 safety program delivery, do you have any thoughts on

1 the suggestion that drivers' education training
2 should be limited to low-tech cars, i.e. without
3 gadgets, to create cognitive learning before moving
4 to more high-tech machines?

5 DR. ALLEN ROBINSON: I see no need
6 for that.

7 MR. BYRON WILLIAMS: Do you have any
8 views or have you reviewed any research testing the
9 hypothesis that improvements in vehicle safety
10 equipment, i.e., airbags, et cetera, has led to more
11 aggressive behav -- behaviour by teenagers?

12 DR. ALLEN ROBINSON: I've read no
13 indication of that.

14

15 (BRIEF PAUSE)

16

17 MR. BYRON WILLIAMS: In terms of
18 graduating from driver education programming, should
19 -- should teenagers be allowed to fail driver
20 education program programming depending upon their
21 test scores or insufficient parental driving
22 supervision?

23 DR. ALLEN ROBINSON: Ab --
24 absolutely.

25

1 (BRIEF PAUSE)

2

3 MR. BYRON WILLIAMS: In one (1) of
4 your discussions this morning, and I believe it was
5 with regard to some of the experience -- well, let me
6 try this another way. You made a comment something
7 to the effect that a certain programming change had
8 resulted in fewer drivers seeking early licensing.

9 Do you remember that?

10 DR. ALLEN ROBINSON: Yes, I do.
11 Graduated driver licensing, because it has so many
12 requirements in it, a lot of the teens said: Heck
13 with this, I'll just wait until I'm 18 and I'll go
14 down and get my license.

15 MR. BYRON WILLIAMS: And you said
16 something to effect that fewer drivers of that age
17 group might -- might be desirable or might not be
18 undesirable?

19 DR. ALLEN ROBINSON: What are you
20 saying?

21 MR. BYRON WILLIAMS: I'm not sure I'm
22 saying it very well, sir. I took your comments to
23 mean that that's not such a bad result if some are
24 choosing --

25 DR. ALLEN ROBINSON: Oh, no, it's not

1 such a bad result.

2 MR. BYRON WILLIAMS: And presumably
3 it's not such a bad result because some of the matur
4 -- maturity issues and cognitive issues that might
5 appear with sixteen (16) year olds may have resolved
6 by the time they're eighteen (18) or nineteen (19)?

7 DR. ALLEN ROBINSON: Right. And they
8 -- they may have made a very wise decision, that I'm
9 not ready. So it's unlike when everybody in this
10 room became sixteen (16) you had one (1) goal, and
11 that was to get that driver's licence and get going.
12 Teenagers don't have that goal today.

13 So when GDL was put into place with so
14 many restrictions, they just said, The heck with it,
15 I'll ride with friends or take the bus. Now, notice
16 that has to be in jurisdictions where there is public
17 transportation.

18 MR. BYRON WILLIAMS: Are you aware of
19 any research or analysis that examines the impact on
20 collisions or serious collisions from raising -- raising -
21 - raising the drinking age to twenty-one (21)?

22 DR. ALLEN ROBINSON: We didn't raise
23 it, we lowered it.

24 MR. BYRON WILLIAMS: Here it's ni --
25 18, sir. But are you aware, sorry, of any research

1 examining the question of whether there are -- there
2 are positive benefits in terms of reduced serious
3 collisions for young persons associated with a higher
4 drinking age?

5 DR. ALLEN ROBINSON: I'm not, no.

6 MR. BYRON WILLIAMS: I wish to thank
7 the Board for their -- their time, and both Dr.
8 Robinson and Mr. Robinson for their -- for their
9 patience.

10 THE CHAIRPERSON: Thank you. I was
11 just looking at the Danish study and I noticed, and
12 maybe I'm incorrect, but where their driver's
13 licensing didn't begin until they were eighteen (18)
14 or nineteen (19).

15 Am I correct in that?

16 DR. ALLEN ROBINSON: They're final li
17 -- I'm sorry. You mean their final licence was
18 issued at 18 or 19? That would be correct because
19 they went through a long training period.

20 THE CHAIRPERSON: Okay, thank you.

21 DR. ALLEN ROBINSON: Which is what
22 we're proposing.

23 MR. BRETT ROBINSON: That would a
24 non-restricted licence, starting off with -- with a
25 permit, progressing to an intermediate licence, and

1 then finally a full-on restricted licence. So
2 generally, yes, that is going to be at a later age,
3 of around eighteen (18), nineteen (19) years old.

4 THE CHAIRPERSON: Okay. Thank you.
5 Mr. Oakes, from the Manito -- the GMMG -- 'C', sorry.

6

7 CROSS-EXAMINATION BY MR. RAYMOND OAKES:

8 MR. RAYMOND OAKES: Thank you, Madam
9 Chairperson. THE CMMG's questions will not be overly
10 long. I'd like to start with you, Doctor, if I
11 might, you -- in the area where My Learned Friend,
12 Mr. Williams, started. And that's the area of goal
13 of crash reduction.

14 You made the statement, as Mr.
15 Williams talked about, that every organization needs
16 to set a goal for crash reduction. Was that correct,
17 sir?

18 DR. ALLEN ROBINSON: Yes.

19 MR. RAYMOND OAKES: And has MPI, in
20 the course of hiring you in this matter, made clear
21 to you what their percentage goal in crash reduction
22 is?

23 DR. ALLEN ROBINSON: Absolutely not.

24 MR. RAYMOND OAKES: If I told you
25 that in past years' hearings I cross-examined them on

1 that point and asked them to set a goal, and they
2 refused, would you have any dispute to that
3 statement?

4 DR. ALLEN ROBINSON: Oh, I don't
5 know. I don't have any dispute to it, no.

6 MR. RAYMOND OAKES: And I was a
7 little confused in another discussion you had with My
8 Learned Friend, PUB counsel, who asked you about
9 setting goals and the effectiveness of programs. And
10 you indicated that any program would be lucky to have
11 a 1 percent reduction in -- in losses.

12 Did I hear you correctly?

13 DR. ALLEN ROBINSON: I don't think
14 so. And on a couple of the things that you've
15 mentioned there's a little problem with terminology.
16 I believe that if you're going to implement a new
17 program, you need to establish some goals or
18 expectations of what that program is going to
19 accomplish. I wasn't talking about setting goals,
20 quote, "for an insurance company."

21 And then, what was the second question
22 was -- oh, the 1 percent. We know that, in looking
23 at national statistics for everything that we have
24 done in the United States, that when you get an
25 accident counter-measure, whether it's alcohol,

1 seatbelts, speed, driver education, motorcycle
2 safety, no matter how much money you spend on any one
3 of those, if you actually get a full 1 percent
4 reduction in crashes and deaths, you've done very
5 good.

6 So I say that because I want to
7 caution you not to set your goals too high, which is
8 what we did in the DeKalb study because we said we
9 were going to reduce crashes and deaths by 10
10 percent, and we did not. But I'll repeat, we did
11 reduce them by 2 percent, which you would be thrilled
12 today with a 2 percent reduction in fatalities.

13 MR. RAYMOND OAKES: We heard evidence
14 relative to the Denmark experience there in extended
15 driver training. And I heard Mr. Williams toss out a
16 percentage of some 40 percent. Can you reconcile
17 that, those numbers?

18 DR. ALLEN ROBINSON: I don't know how
19 they got such numbers, no. I -- that's -- that's
20 extremely high.

21 MR. BRETT ROBINSON: And certainly
22 that was just in our initial literature review. We
23 can certainly go back and look in greater detail into
24 any of the research projects that we collected as a
25 part of our literature review. Our -- within our

1 scope was not to dissect these reports, certainly and
2 primarily to collect and summarize them for
3 consideration.

4 MR. RAYMOND OAKES: And this 1
5 percent you speak of, is that -- can that be
6 cumulative? If we're spending money on each of the
7 areas you just talked about, we're spending money on
8 training, we're spending money on motorcycle safety,
9 we're spending money on research, we're spending
10 money in different areas, is it possible that each of
11 those might, in a properly designed program, show a 1
12 percent reduction in crashes and losses?

13 DR. ALLEN ROBINSON: Will one (1)
14 affect the other? Is that what you're asking?

15 MR. RAYMOND OAKES: No, I'm asking
16 whether, if you had a well-designed program in each
17 of those areas, that they might each produce a 1
18 percent reduction in claims experience.

19 DR. ALLEN ROBINSON: In their
20 specific area. For example, you might expect, with a
21 properly designed motorcycle safety and licensing
22 program, to expect a 1 percent reduction, yes. Are
23 you going to get it? I don't know, it's pretty hard.
24 But you could expect that. It -- it should be
25 achievable.

1 MR. RAYMOND OAKES: And, so, you're
2 saying that if you develop a pro -- program properly,
3 and then track the results of that program properly,
4 you should be able to measure actual claims incurred
5 reductions as a result of that program?

6 DR. ALLEN ROBINSON: I would say yes
7 to that. You should be able measure reduction in
8 claims and that nature, yes.

9 MR. RAYMOND OAKES: And again, you're
10 at a disadvantage from not being at these hearings
11 each year. Or maybe that's an advantage. I'm not
12 sure. You can tell me later.

13 But the Corporation has repeatedly
14 indicated, and I have a reference if your counsel
15 wishes, CAC/MPI-1-51. The Corporation has repeatedly
16 indicated that they're not in a position to measure
17 actual claims incurred reductions as a direct result
18 of its road safety awareness campaigns.

19 Can you tell me why they would fail
20 then?

21 DR. ALLEN ROBINSON: I can't answer
22 that, no.

23 MR. RAYMOND OAKES: You made a
24 somewhat gratuitous comment, Doctor, if I can
25 characterize it that way, that in motorcycle

1 collisions with cars, that motorcycles are more often
2 at fault than the cars.

3 You're not an expert with respect to
4 the crash data for Manitoba, are you, sir?

5 DR. ALLEN ROBINSON: I am not.

6 MR. RAYMOND OAKES: And if I tell you
7 that in these hearings we've had evidence to the
8 point that in a crash between a motorcycle and a car,
9 the private passenger vehicle is two-thirds (2/3)
10 more likely to be at fault, would you be in a
11 position to contest that statement?

12 DR. ALLEN ROBINSON: No, I wouldn't,
13 but I'd like to clarify the statement that I did
14 make. In single -- in motorcycle crashes, over 50
15 percent of them are single-vehicle accidents. So if
16 it's a single-vehicle accident, the motorcyclist
17 would be assumed to be at fault. But in multi-
18 vehicle accidents, it's almost always the car
19 driver's fault.

20 MR. RAYMOND OAKES: Thank you for
21 that clarification.

22 And you're familiar with hot mapping,
23 I would assume, as a safety expert?

24 DR. ALLEN ROBINSON: I -- I don't
25 know the phrase, no.

1 MR. RAYMOND OAKES: It may be endemic
2 to this jurisdiction. But hot mapping is where you
3 would take your area of activity, whether it's
4 Winnipeg or Manitoba, and you would put a little dot
5 for each intersection or other place that crashes
6 occur.

7 You're familiar with that type of...

8 DR. ALLEN ROBINSON: Yes. Yes, I am.

9 MR. RAYMOND OAKES: And I can tell
10 you that in the course of this year's hearing, we
11 asked MPI to produce a hot map of the Winnipeg
12 motorcycle crashes at intersections between 2008 and
13 2012, which was reproduced as Information Request
14 CMMG/MPI-2-2. And we were advised during the course
15 of the testimony that MPI had not produced this
16 previously for their own purposes, that they'd only
17 produced it in response to our request.

18 Would you expect an insurer to gather
19 and analyze data like this hot mapping in producing a
20 safety program?

21 DR. ALLEN ROBINSON: I wasn't asked
22 as a part of my contractual work to study anything of
23 that aspect. I was only asked to study driver
24 education programs worldwide.

25 MR. RAYMOND OAKES: In your

1 experience otherwise, have you found that this type
2 of hot mapping is a necessary tool in dealing with
3 research and analysis of collision data?

4 DR. ALLEN ROBINSON: It's an
5 absolutely necessary tool for law enforcement. I'm
6 not sure how an insurance company would use it.

7 MR. RAYMOND OAKES: If an insurance
8 company was involved in road safety design, would it
9 become relevant?

10 MR. BRETT ROBINSON: If you're also
11 referring to highway engineering, I would say the
12 answer is yes, where our problematic locations and
13 Canada's locations be attributed to how the highway
14 is designed.

15 MR. RAYMOND OAKES: Wouldn't you want
16 to study -- if you're looking at reducing collision
17 losses, wouldn't you want to study what factors are
18 present at those intersections and determine why the
19 crashes occurred?

20 MR. BRETT ROBINSON: Part of it lies
21 with who has the responsibility for education and --
22 and testing. I think those are two (2) areas within
23 a jurisdiction that would want to take a look at
24 those hot maps and see how they can adjust the
25 education of the general public, doing outreach, and

1 then also doing testing of that type of motor vehicle
2 operator.

3 MR. RAYMOND OAKES: Mr. Robinson, you
4 -- you were asked questions whether you're aware that
5 MPI, more or less, covers the waterfront in terms of
6 everything to do with not only insurance, but driver
7 licensing, testing, road safety. All of these are
8 the mandate of the Manitoba Public Insurance Company.

9 Would you not agree that because they
10 occupy the waterfront, that they should be now --
11 analyzing the data of crashes at intersections?

12 MR. BRETT ROBINSON: Well, I'm
13 certainly not familiar with the -- the structure
14 within MPI. Intentionally, we were, I think, kept in
15 the dark as a part of our research study so that we
16 did not try to make comparisons from MPI to what we
17 gathered globally in our literature review.

18 But I would certainly agree whoever
19 has that responsibility would want to take on that
20 function of identifying where there are problematic
21 locations in relation to collisions, whether it be
22 multiple vehicle or single vehicle - for example,
23 motorcyclists running off the side of the road.

24

25

(BRIEF PAUSE)

1 MR. RAYMOND OAKES: Are you in a
2 position to talk about what the applicable amount of
3 road safety expenditures should be for a corporation
4 like MPI?

5 DR. ALLEN ROBINSON: We are not.

6 MR. RAYMOND OAKES: Would you expect
7 that a corporation such as MPI that spends roughly
8 \$11 1/2 million in road safety a year would have a
9 research component to their road safety division?

10 DR. ALLEN ROBINSON: I'm -- I'm not
11 prepared to say how MPI should be structured, no.

12 MR. RAYMOND OAKES: Do you think
13 research might be important in road safety?

14 DR. ALLEN ROBINSON: Well, I do
15 believe it's important, but I don't know how an
16 organization -- what mandate that they're supposed to
17 maintain.

18 MR. RAYMOND OAKES: I'll ask you the
19 driver training questions then.

20 Would you agree with me that if you
21 had a driver safety program it's important to get as
22 much uptake as possible of trainees?

23 DR. ALLEN ROBINSON: 'Uptake'
24 meaning...?

25 MR. RAYMOND OAKES: People signing up

1 for it.

2 DR. ALLEN ROBINSON: Oh, yes.

3 MR. RAYMOND OAKES: And are you
4 familiar at all with jurisdictions that offer
5 incentives by way of deductions of the cost of
6 insurance for people who take those safety pro --
7 training programs?

8 DR. ALLEN ROBINSON: That has been a
9 tradition in the States for people who take training
10 programs, based on the assumption that because there
11 were trained they're going to have less incident of
12 crashes, so they give them a reduction in their
13 premium. I don't know how much of an incentive that
14 is to take the program, though. The -- the incentive
15 is usually pretty small.

16 MR. BRETT ROBINSON: The other
17 incentive is a waiver of any additional licensing and
18 testing requirements. So by going through training,
19 you are then waived of any additional testing
20 requirements.

21 MR. RAYMOND OAKES: So your
22 experience has included other jurisdictions where
23 there is a financial benefit for someone to take
24 driver safety training or rider safety training?

25 MR. BRETT ROBINSON: Sure.

1 MR. RAYMOND OAKES: Those would be my
2 comments and questions at this time.

3 THE CHAIRPERSON: Okay. Thank you.

4 MS. ANITA NEVILLE: Thank you. I am
5 wondering if you have done it -- well, let me back
6 up. The focus of the conversation here today has
7 been driver education as it relates to high school
8 students and young people.

9 I am wondering whether you have had
10 any experience on driver education with people at
11 mid-life or a senior population, and the impact on
12 road safety.

13 DR. ALLEN ROBINSON: We've had quite
14 a bit of experience with the fifty-five (55) and
15 older in which classroom programs are provided on a
16 voluntary basis to -- to seniors who want to update
17 their knowledge of what the rules of the road are,
18 what -- what they can do to reduce their
19 probabilities of being in a crash.

20 All of those, though, are classroom,
21 one (1) day, volunteer teachers, and hundreds of
22 thousands of seniors take them. How effective they
23 are, I don't know.

24 MS. ANITA NEVILLE: Has there been
25 any evaluation of the results of those programming --

1 of that programming? Have those --

2 DR. ALLEN ROBINSON: No, there has
3 not been.

4 MS. ANITA NEVILLE: There's been
5 nothing done.

6 DR. ALLEN ROBINSON: No, no.

7 MS. ANITA NEVILLE: What
8 jurisdictions have they been done in?

9 DR. ALLEN ROBINSON: They're done in
10 every one of our states. 'A' -- what's their
11 initials?

12 MR. BRETT ROBINSON: AARP.

13 DR. ALLEN ROBINSON: AARP offers
14 these courses in -- in every jurisdiction. The
15 National Safety Council, through their chapters, make
16 them available in every state. I don't know what the
17 numbers are though of people who take them, but I
18 think it is significant.

19 MS. ANITA NEVILLE: Can you or would
20 you comment on your view of the -- of the
21 effectiveness of these programs?

22 DR. ALLEN ROBINSON: I think they're
23 effective because people always need retraining, more
24 information, continuing education about what they're
25 doing. If they're willing to come and spend six (6)

1 hours with me to learn what they can do to keep
2 themselves safe in a car, I am sure that it will be
3 beneficial for them.

4 You would not be able to mandate it
5 because I -- I just don't think that they would come.
6 But I'm glad that those two (2) organizations offer
7 those. My organization, ADTSEA, does not. We just
8 work with the young driver.

9 MS. ANITA NEVILLE: Thank you.

10 THE CHAIRPERSON: Ms. Peters, do you
11 have any questions?

12 MS. LIZ PETERS: No, no questions.

13 THE CHAIRPERSON: Okay. Thank you.

14 Ms. Grammond, did you have --

15 MS. CANDACE GRAMMOND: I don't have
16 questions. We should just ask if Mr. Triggs has any
17 redirect.

18 THE CHAIRPERSON: Mr. Triggs...?

19 MR. MICHAEL TRIGGS: No, I don't.

20 THE CHAIRPERSON: It's twenty (20) to
21 3:00. I think we'll take a ten (10) minute break, or
22 a fifteen (15) minute break. And we will return in
23 fifteen (15) minutes.

24 And I believe you had -- do you want
25 to make a comment?

1 MS. CANDACE GRAMMOND: Yeah, I -- I
2 agree, Madam Chair. Let's take a short break. I
3 think we can excuse the Robinsons, because I think
4 everyone has asked what they wanted to ask.

5 So when we return after the break,
6 we'll have Mr. Johnston back up and we'll get Mr.
7 Pelly on the phone and I'll have some questions about
8 actuarial matters flowing from some of the
9 undertakings that were filed.

10 THE CHAIRPERSON: In that regard, I
11 would like to thank very much for -- Mr. Robinson and
12 Dr. Robinson for coming and joining us today. It's
13 been very useful. And I hope you have a good trip
14 back to Pennsylvania.

15 DR. ALLEN ROBINSON: Thank you. And
16 thank you for excusing us this afternoon.

17 MR. BRETT ROBINSON: Thank you.

18

19 (WITNESSES STAND DOWN)

20

21 --- Upon recessing at 2:40 p.m.

22 --- Upon resuming at 2:59 p.m.

23

24 THE CHAIRPERSON: Welcome back. I
25 would like to call upon Ms. Kalinowsky to file some

1 undertakings.

2 MS. KATHY KALINOWSKY: Yes, good
3 afternoon. We do have three (3) undertakings to file
4 today. And I've spoken with the Board secretary, so
5 we coordinated the numbers. I've distributed the
6 undertaking -- undertakings to the Intervenors and
7 Board counsel and Board secretary.

8 Undertaking number 24 should be marked
9 as MPI Exhibit number 52.

10

11 --- EXHIBIT NO. MPI-52: Response to Undertaking
12 24

13

14 MS. KATHY KALINOWSKY: Undertaking
15 number 26 should be marked as MPI Exhibit number 53.

16

17 --- EXHIBIT NO. MPI-53: Response to Undertaking
18 26

19

20 MS. KATHY KALINOWSKY: And
21 Undertaking number 34 should be marked as MPI Exhibit
22 number 54.

23

24 --- EXHIBIT NO. MPI-54: Response to Undertaking
25 34

1 MS. KATHY KALINOWSKY: And having
2 said that, I do know that we would like to -- and I
3 mentioned previously when I filed a number of
4 undertakings, but we would like to speak to some of
5 the undertakings that we had filed earlier. So I
6 didn't know if that would be appropriate for me to
7 ask the witnesses to speak to some of those
8 undertakings that are now exhibits, and then do some
9 cross-examination, of course, later on that.

10 So in that regard, if individuals
11 could look towards MPI Exhibit number 24, which is a
12 chart on interest rates. Sorry, it's MPI Exhibit
13 number 35, which is a chart on interest rates.

14

15 (BRIEF PAUSE)

16

17 MS. KATHY KALINOWSKY: So I know Ms.
18 Reichert would like to address that.

19

20 MPI PANEL, RESUMED:

21 MARILYN MCLAREN, Resumed

22 HEATHER REICHERT, Resumed

23 LUKE JOHNSTON, Resumed

24

25 RE-DIRECT EXAMINATION BY MS. KATHY KALINOWSKY:

1 MS. KATHY KALINOWSKY: So, Ms.

2 Reichert, please if you could speak to that.

3 MS. HEATHER REICHERT: Yes. Thank
4 you. We filed this exhibit in response, actually, to
5 a question that Mr. Williams asked with respect --
6 with respect to the Conference Board of Canada and
7 whether or not we had charted their interest rate
8 forecasts from previous years. And we responded that
9 we had. So we thought it would be appropriate to
10 actually file that with -- with the Board.

11 And I just wanted to highlight for you
12 that if you take a look at this chart in front of
13 you, all of the red lines are the Conference Board of
14 Canada forecasts. All of the blue lines are the
15 standard bank and global insight forecasts.

16 So -- and you can see the compar --
17 what we did was -- was put the same symbol on the
18 lines to indicate the same year of the respective
19 forecast. So you can see, in February 10, right at
20 the beginning of this chart, where the black line is
21 where -- indicating the actual interest rates for
22 that period, you can see how the Conference Board of
23 Canada was very close around that actual black line
24 with their forecasts. So they -- they were quite --
25 quite good in their forecast at the beginning of that

1 period.

2 If you look then to February 11, just
3 over a bit and, again, looking at the -- the top of
4 the -- the -- where the black line goes up, you can
5 also see there that the Conference Board of Canada
6 is closer to forecasting what actually happened with
7 the interest rates. The interest rates did go down.
8 And the Conference Board of Canada was forecasting a
9 lower interest rate than what the standard banks and
10 global insight were at that time.

11 And then, finally, if you look at
12 February 12, where you can see the -- again, the
13 black line has dipped below the 2 percent. Again,
14 the Conference Board of Canada is closer to the
15 actual, and they're forecasting them more the
16 standard banks.

17 So I just wanted to -- to bring that
18 to the Board's attention. Thank you.

19 MS. KATHY KALINOWSKY: If there are
20 no questions on that one from the Board members right
21 now, I'll move to another one that I'll ask Ms.
22 Reichert to speak to. That would be MPI Exhibit
23 number 30, which was Undertaking 5.

24

25

(BRIEF PAUSE)

1 MS. KATHY KALINOWSKY: Okay, Ms.
2 Reichert, would you like to address MPI Exhibit
3 number 30, if the Board members and others have it in
4 front of them.

5 MS. HEATHER REICHERT: Yes. Thank
6 you. This particular undertaking was very early on
7 in the hearings in re -- in response to a question
8 about differences between the 2013 GRA and the 2014
9 GRA, specifically as it related to expense categories
10 of claims expense and operating expense.

11 And it was a -- it's a difficult
12 question to answer quickly. And so what we prepared
13 here is -- is a couple of schedules that actually I'm
14 hoping to incorporate into our GRA submission for
15 next year because I think it will definitely help the
16 Board in understanding, with respect to corporate
17 expenses, both normal, corporate operating expenses
18 and improvement initiative expenses, how -- once
19 we've budgeted those items, how we then move through
20 to allocating to basic normal operating expenses,
21 basic improvement initiatives.

22 This first page of the table, number -
23 - or schedules, page 1, attached to the -- the
24 paragraphs there, is what that particular schedule is
25 doing. It does exist currently in -- in our GRA

1 submission but not presented in exactly the same way,
2 and I think it's helpful for the Board.

3 So we have our corporate normal and
4 our corporate improvement initiatives. Those are
5 allocated based on the cost allocation methodology
6 that the Board approved from -- from last year, a
7 multi-layered, multi-stepped cost allocation process,
8 to arrive at the basic normal operations and the
9 basic initiatives expenses that you see in the middle
10 of the page.

11 And then, at the bottom of the page,
12 we're showing what the actual percentage allocation
13 is for each of the individual expense lines, the
14 compensation, data processing, et cetera, for normal
15 operations, improvement initiatives, and then in
16 total.

17 So you can see from this particular
18 page that in total, normal corporate operating
19 expenses, this year's GRA compared to last year's
20 GRA, are less by \$6.4 million.

21 The corporate initiatives are a little
22 bit higher this GRA than last GRA, by seven hundred
23 and twenty-five thousand (725,000). From that gross
24 difference, then there are allocations made to Basic,
25 resulting in the -- in the Basic normal operations

1 being \$2.6 million less in this GRA than last year's
2 GRA.

3 And, again, based on specific
4 allocations for the improvement initiatives, you can
5 see that Basic improvement initiatives are eight
6 hundred and fifty-eight thousand (858,000) more in
7 this GRA than last GRA.

8 Of course then the total is the
9 combination of some costs being lower, and the
10 improvement initiatives being higher, to get at an
11 overall Basic, this GRA compared to last GRA, being
12 \$1.8 million lower.

13 The actual question that we were asked
14 during the hearings is answered essentially on the
15 page 2 of this. Because once we have our Basic normal
16 operating expenses and our Basic improvement
17 initiative expenses there's one (1) more cost
18 allocation that is done to take those overall
19 expenses and break them down into the cost categories
20 that you see on our pro forma statements, being:
21 claims expense, road safety expense, operating
22 expense, and regulatory expense.

23 So that's a further allocation, if you
24 will, of all of these components of Basic normal and
25 Basic improvement initiatives. So the next page

1 shows how Basic normal, in 2013 GRA, has been split
2 between each of those four (4) categories, similarly
3 in 2014, and what the differences are as it relates
4 to normal operations for those four (4) components.

5 The middle section does the same thing
6 for improvement initiatives, for those four (4)
7 components, to arrive at what was actually on the
8 particular schedule that we were being asked a
9 question of. At the very bottom of this, the total
10 Basic difference between are within those four (4)
11 categories of claims expense, operating expense, road
12 safety, and regulatory.

13 So, at that particular time, the
14 question was why is there a \$4 million less in
15 claims expense this GRA compared to the last GRA.
16 And to answer that you really do need to understand
17 what happened at the corporate level, how that
18 impacted overall Basic, and then how that was split
19 between the different cost categories.

20 So, this was done, and this was
21 prepared for the year 2013/'14, which was the year
22 that we were being asked about. But it is my hope
23 that, by including this kind of schedule next year in
24 the GRA to compare every year of the 2014 GRA to what
25 we provide for the 2015 GRA in this manner, that that

1 will give the Board a complete picture of what is
2 happening with the operating expenses and what
3 individual aspects change between one GRA -- GRA and
4 the next GRA.

5 And of course then it's my hope, if we
6 provide that within the application itself, that that
7 will reduce significantly the number of requests that
8 we have to slice and dice the operating and --
9 operating expenses in varying different ways, which
10 gets to be quite cumbersome and difficult to manage
11 for all parties. So that was what I wanted to -- to
12 highlight for you. So bottom line is, essentially,
13 why have claims expenses been -- why are claims
14 expenses, overall, less? It's because corporate
15 operating expenses are lowered by 6 million.

16 The main reason that corporate
17 operating expenses are lower is because we increased
18 the vacancy allowance that was about thirty-three
19 (33) -- or pardon me, 3.3 million of the overall
20 reduction in corporate expenses, and other reductions
21 in data processing and printing made up the bulk of
22 the -- the remaining difference. And all of that's
23 flowed through, in the way that I've described, to
24 the four (4) categories. Thank you.

25 MS. KATHY KALINOWSKY: And then we

1 have another undertaking that Ms. Reichert would like
2 to speak to. And that was an undertaking that was
3 just filed about ten (10) minutes ago. It's
4 Undertaking number 24, which is MPI Exhibit number
5 52, relating to investment returns.

6

7 (BRIEF PAUSE)

8

9 MS. HEATHER REICHERT: Okay. Thank
10 you. So this particular undertaking was prepared to
11 respond to what would the rate indication be, or what
12 would the impact be to the Corporation if we were to
13 perfectly duration match our bonds with our claims
14 liabilities.

15 So this was prepared using two (2)
16 different assumptions and I'm trying to think that
17 the best way to -- to walk you -- to walk you through
18 this.

19 We -- we did it based on the scenario
20 of the GRA interest rate forecast, as per our
21 submission. So what would happen to our -- our
22 forecast if we were perfectly duration matched. And
23 then we also did it using the September adjusted
24 interest rate forecast to give another example of
25 what the impact might be.

1 Because we're already halfway through
2 the current year, there was no point in suggesting
3 that we would be duration matched for all of '13 --
4 all of 2013/2014. So we made the assumption that we
5 wouldn't be duration matched until the end of
6 2013/'14.

7 But in doing that, because we knew we
8 would be releasing the -- the second quarter results,
9 we also thought that it was realistic to be replacing
10 the first six (6) months of our forecast with our six
11 (6) months of actuals to give a clear picture and
12 then to give a better forecast of what would happen
13 in -- in each of the -- the years going forward if we
14 perfectly duration matched. So that's what we -- we
15 have done.

16 If I could ask you to please turn to
17 the very last page of this undertaking. And I'll --
18 I'll just try to -- to summarize. I believe that
19 when we -- we were discussing earlier on in the
20 hearings, we did talk about the fact that if we were
21 to duration match, that would mean less -- a less net
22 positive result to the Corporation from the
23 increasing interest rate environment because we would
24 be lowering the duration of -- or pardon me, we would
25 be increasing the duration of the bond assets.

1 So when you -- the schedule is trying
2 to summarize the -- the differences between the
3 different scenarios that -- that we run -- that we
4 have run. The very top one (1) is our basic
5 submission in the GRA unchanged from what we
6 submitted in June. The next one (1) is the April GRA
7 interest rate forecast with the first six (6) months
8 of 2013 having actual results, and then the remainder
9 of 2013 having forecasted results to bring the
10 durations of the bonds and the claim liabilities the
11 same.

12 So there are changing assumptions that
13 occur during 2013/'14. We reduce our cash levels to
14 buy more bonds in order to increase their duration
15 and match them with our claims liabilities. So
16 that's one (1) of the assumptions that has been
17 changed. And then that flows through to the -- the
18 remainder of the year.

19 So -- so the first column there under,
20 "April," the only change is to the first year,
21 2013/'14, to reflect actuals. And the next set of
22 lines, that is reflecting actuals for the first six
23 (6) months but assuming that duration matching
24 continues throughout the outlook period.

25 What you can see happens from the very

1 last set of -- set of lines in that section is
2 throughout the outlook period there is a negative
3 difference between the non-duration matched
4 assumptions and the duration matched assumptions.
5 And the extent of that impact is a reduction over the
6 four (4) years, from 2014/'15 to 2017/'18, over those
7 four (4) years, a reduction of 30.4 million in net
8 income.

9 If we had submitted this particular
10 scenario of duration matching using April interest
11 rate assumptions, the indicated rate would have been
12 higher than the 1.8 because, as you can see by the
13 middle, the six million nine-six-seven, (6,967,000),
14 that's the average impact to the reading years of
15 duration matching. And that would be another point
16 six (.6) of a -- of a percent would -- would -- point
17 six (.6) or point eight (.8) of a percent. And that
18 would have then meant we would have been asking for a
19 2.6 percent increase instead of the one point eight
20 (1.8).

21 We also ran this scenario using
22 September adjusted standard interest rates because
23 that had been one (1) that had been focussed on a
24 fair bit. The same thing was done here. We took the
25 adjusted standard rates and we included actual

1 results for the first half of 2013/'14. So that's
2 the only difference there between that and the
3 otherwise submitted September adjusted scenario.

4 The second set of lines there show
5 what happens to that forecast, again assuming we
6 duration match at the end of '13/'14 and stay
7 perfectly matched throughout the next four (4) years.

8 In this case, the impact to net income
9 over the four (4) years, from 2014/'15 on, is 41
10 million reduction. So in an increasing interest rate
11 environment, as we said, duration matching will
12 negatively impact the net income of the -- of the
13 Corporation.

14 In this case, with the September one,
15 all of these scenarios assumed a 1.8 percent rate
16 increase; so every single one assumed the 1.8 percent
17 increase was included. And you can see from the --
18 the second set of lines under the September section
19 that it really is indicating a very slight negative
20 average impact on the rating years, so would not
21 impact that 1.8 percent but still indicates 1.8
22 percent would be needed regardless of whether you're
23 using the September adjusted rates or the April
24 adjusted rates.

25 So that was really the -- the end

1 conclusion from running these two (2) scenarios.

2 Thank you.

3 MS. KATHY KALINOWSKY: And thank you
4 for that, Ms. Reichert. Mr. Johnston does want to
5 address one (1) of the undertakings that was filed,
6 and that is marked as MPI Exhibit number 40. So it's
7 Undertaking number 29, which is MPI Exhibit 40, in
8 regards to motorcycle serious loss frequency.

9

10 (BRIEF PAUSE)

11

12 MR. LUKE JOHNSTON: Okay. So the
13 Undertaking 29 was -- I think I called it, I don't
14 know, unfortunate or something. But the -- in
15 CAC/Bike Winnipeg-2-1 we had serious loss frequency,
16 but we had -- for motorcycles, we had taken the
17 number of serious motorcycle claims divided by all
18 vehicles. And 'not very helpful' was my -- my word
19 there, so.

20 What we did is we restated the numbers
21 to be serious motor -- motorcycle losses per thousand
22 motorcycles. And now in the table you can -- it
23 gives you a better picture of the -- the serious loss
24 risk for motorcycles. If you go to the last column,
25 the average of those numbers is about point five

1 (.5). And if you go to the motor vehicle column
2 total, the average there is about point o eight
3 (.08). So on average per vehicle, motorcycles have
4 about five (5) to six (6) times the serious loss
5 frequency, as -- as motor vehicles.

6 MS. KATHY KALINOWSKY: Thank you for
7 that. And Ms. Reichert wants to just make one (1)
8 further note on the record about something that she
9 spoke to earlier on.

10 MS. HEATHER REICHERT: I'm sorry.
11 Yesterday I took an undertaking that -- with respect
12 to, we were looking at the September adjusted
13 interest rate forecast. And Ms. Grammond asked me
14 about the '13/'14 forecast, with respect to that
15 particular assumption, which indicated \$51 million
16 net income to the Corporation would be achieved. And
17 she had asked if that would happen. And I said
18 because the actual six (6) months had act -- had
19 already occurred, that it would not be the 51 million
20 and that I would respond with an undertaking to
21 provide that.

22 The amount that would -- would result,
23 again, assuming no duration matching, assuming the
24 same assumptions that we had in that particular pre-
25 ask, with September adjusted interest rates and at

1 average, and the highest one (1) removed from the
2 calculation, it had indicated 51 million net income
3 '13/'14.

4 If, again, I -- I draw your attention
5 to the page we were just looking at, that, based on
6 the six (6) month of actual results that have
7 occurred, would only be 30 million -- 30.3 million.
8 So that is the impact of the first six (6) months of
9 actual results with the forecasted September rates
10 continuing from there on to the end of '13/'14. It
11 would be 30.3 million, not 51-point-whatever million.
12 So that's Undertaking number 37, just so that we can
13 get that in the record. Thanks.

14

15 (BRIEF PAUSE)

16

17 MS. KATHY KALINOWSKY: Chair, we are
18 finished at this point.

19 THE CHAIRPERSON: Okay. Then I'll
20 turn it over to Ms. Grammond.

21 MS. CANDACE GRAMMOND: Thank you.

22

23 RE-CROSS-EXAMINATION BY MS. CANDACE GRAMMOND:

24 MS. CANDACE GRAMMOND: I'm sure we'll
25 have some questions on Exhibit 52, Undertaking 24,

1 once we've had a chance to review the documents and
2 consider your evidence, Ms. Reichert. Just one (1)
3 quick question.

4 With respect to page 3, where the
5 interest rate forecasts are reflected, can you
6 confirm that the -- under the column called "Sep" --
7 "September Adjusted Standard Forecast," that the two
8 point five (2.5) shown for the second quarter of
9 current fiscal year is an actual number?

10 MS. HEATHER REICHERT: Yes, I can.

11

12 (BRIEF PAUSE)

13

14 MS. CANDACE GRAMMOND: So it's sixty-
15 one (61) basis points higher than what's in the GRA
16 application?

17 MS. HEATHER REICHERT: That's
18 correct.

19 MS. CANDACE GRAMMOND: Thanks. So,
20 Mr. Johnston, I have a few questions for you with
21 respect to Mr. Cheng's report that was filed as
22 Exhibit 32. So if everyone can go to MPI Exhibit 32,
23 this is the external actuary's review of the DCAT as
24 at February 28th, 2013.

25

1 (BRIEF PAUSE)

2

3 MS. CANDACE GRAMMOND: Does everyone
4 have that? Okay. Good. So, Mr. Johnston, first
5 question.

6 Can you tell us whether there are any
7 substantive differences between the DCAT report that
8 was just filed, having been approved by the MPI
9 Board, and the document that was filed back in July?

10 MR. LUKE JOHNSTON: There are no
11 changes, other than to redate and sign the report.

12 MS. CANDACE GRAMMOND: Thank you. So
13 going then to Exhibit 32, Mr. Cheng's documents, can
14 you comment on whether there were any differences
15 between the DCAT report that was provided to him on
16 August the 12th giving rise to this review and that
17 which was filed with the Board back in July?

18 MR. LUKE JOHNSTON: There are no
19 differences. But Mr. Cheng was obviously aware that
20 the document was draft. He was given the identical
21 document as the Public Utilities Board, knowing that
22 if the Board had any concerns with that DCAT report,
23 his peer review may have to be redone or revised.

24 MS. CANDACE GRAMMOND: Thank you. On
25 page 6 of Mr. Cheng's report we see the findings and

1 recommendations. And he states there on page 6 with
2 respect to the definition of 'satisfactory future
3 financial condition' as follows. This is in
4 paragraph number 2.

5 "I believe the threshold for
6 failing this test should include
7 monies available under the
8 accumulated other comprehensive
9 income section of total equity, not
10 just the rate stabilization
11 reserve."

12 And then later, on the same page, he
13 says, in the second paragraph number 2:

14 "MPI and their regulator should
15 consider AOCI when determining
16 satisfactory financial condition
17 and when deciding whether to issue
18 rebates and/or surcharges."

19 So I have a couple of questions. I've
20 pointed you to two (2) quotes. Can you tell us about
21 the Corporation's view on those two (2)
22 recommendations that I referenced?

23 MR. LUKE JOHNSTON: We've -- we've
24 talked about this a little bit at the hearings. And
25 what Mr. Cheng is alluding to is, particularly in a

1 situation where you may issue a rebate if you were
2 over the RSR target indicated in the report but you
3 had significant negative balances in AOCI, that might
4 be a consideration that -- that you want to pay
5 attention to. These are unrealized and likely, you
6 know, to be realized in the -- in the near future,
7 the opposite being true if there's -- if you had
8 excess funds and the -- the AOCI was significantly
9 positive.

10 The -- to the other point, Mr. Cheng
11 is su -- suggesting as well that the amounts in AOCI
12 also be considered when assessing satisfactory
13 financial condition. I haven't done that in -- in
14 the DCAT report. We've based the recommendations on
15 the actual decline in the RSR target, not the -- the
16 decline in the RSR target plus any losses in
17 accumulated other comprehensive income.

18 So I definitely understand his point.
19 And one (1) way we tried to address this particular
20 issue is where there is equities involved and there
21 is significant unrealized gains or losses, we tried
22 to show those amounts, at least in the scenarios, so
23 he'd be aware of them and the Board, as well, would
24 see, you know, a particular recommendation as an RSR
25 decline of a certain amount plus other unrealized

1 losses of -- of such an -- such an amount.

2 So that was our -- that was my way of
3 addressing Mr. Cheng's concern. But -- but again, we
4 didn't actually select a DSR target considering AOCI.

5

6 (BRIEF PAUSE)

7

8 MS. CANDACE GRAMMOND: Can you
9 comment on how if -- and I appreciate you -- you said
10 you haven't redone the analysis.

11 But can you comment on how the current
12 RSR proposed level of 172 million would be affected?

13

14 (BRIEF PAUSE)

15

16 MR. LUKE JOHNSTON: I'll do this with
17 just the caution that I'm only looking at this one --
18 the one (1) particular scenario that created the \$172
19 million target and not re-evaluating all scenarios.
20 So just -- it is possible, though unlikely, that
21 another scenario may be larger now -- once that's
22 considered.

23 But, in particular, the one -- the --
24 the combined scenario that generated the \$172 million
25 target, there's also an unreali -- an increase in

1 unrealized losses of \$51 million. So you would add a
2 -- about \$50 million to the -- to the target, 223
3 million.

4 MS. CANDACE GRAMMOND: Thank you.
5 Now, on page 8 of Mr. Cheng's report, under the
6 heading "Opinion," he states:

7 "The assumptions and methods
8 employed are appropriate with
9 respect to the DCAT."

10 And then on page 11 in a -- in a sort
11 of similar vein, he says:

12 "I believe the actuarial
13 projections made by the chief
14 actuary represent a reasonable
15 forecast."

16 Taking into account those two (2)
17 comments, can you tell us whether you believe that
18 Mr. Cheng intends to include within the scope of
19 these observations the Corporation's base scenario,
20 i.e., GRA forecast, for interest-rate changes?

21 MR. LUKE JOHNSTON: My -- my
22 understanding was that Mr. Cheng would review all
23 adverse scenarios and the base scenario part of --
24 part of the DCAT report. Part of the actuary's role
25 is to also evaluate the reasonableness of the base

1 scenario. If the actuary determines that the base
2 scenario is not in fact reasonable, it can be
3 modified, particularly if the DCAT is done
4 subsequently to the -- you know, say -- say six (6)
5 months after the base scenario was developed and now
6 it's quite a bit different. That is -- that's one
7 (1) example.

8 But in this particular case that --
9 that's my understanding, Mr. Cheng would review all
10 as -- all aspects of that report.

11 MS. CANDACE GRAMMOND: Can you
12 comment on whether any information, other than the
13 DCAT report, was provided to Mr. Cheng to do his
14 review? So, for example, did he get the investment -
15 - in -- investment income section of Volume II of the
16 GRA?

17

18 (BRIEF PAUSE)

19

20 MR. LUKE JOHNSTON: I can't -- I
21 can't recall all pieces of information that I gave
22 Mr. Cheng. I didn't -- I -- I don't recall
23 specifically giving him the rate application, other
24 than advising him of its existence. He -- he's well
25 aware of that, though.

1 In the DCAT report the base scenario
2 is outlined at a high level. But on page 19, for
3 example, the -- the Corporation's interest rate and
4 assumed investment returns are outlined on that -- on
5 that page, along with the assumed claim liability
6 discount rate going forward.

7 So at a minimum, he ha -- he would
8 have that information so he could assess our interest
9 rate forecasts at a high level.

10 MS. CANDACE GRAMMOND: Can you tell
11 us whether Mr. Cheng or his colleague that assisted
12 him, engaged the Corporation in any specific
13 discussion on the subject of its base scenario
14 forecast for interest rate changes?

15 MR. LUKE JOHNSTON: Not to my
16 knowledge, I -- I don't believe so.

17 MS. CANDACE GRAMMOND: Okay. Thank
18 you. On page 15 of Mr. Cheng's report, he says,
19 under the first paragraph entitled "DCAT Model," last
20 sentence: "I did some testing of the model." And he
21 seems to be making specific reference to the
22 financial model underlying the DCAT. But he also
23 notes that the scope of his work excluded a detailed
24 validation of the financial model.

25 So can you com -- comment on what the

1 extent was of his testing of the model?

2 MR. LUKE JOHNSTON: I can't really
3 comment on the level of detail that Mr. Cheng
4 reviewed the model. We provided all information that
5 he requested, the DCAT report, supporting exhibits,
6 any questions that he had. But in terms of the
7 analysis that he conducted and everything around that
8 I -- I don't know the -- the details of that.

9 MS. CANDACE GRAMMOND: So he wasn't
10 giving a working copy of the financial model
11 software?

12 MR. LUKE JOHNSTON: No, he was not.

13 MS. CANDACE GRAMMOND: Just a moment,
14 Madam Chair, if I may.

15

16 (BRIEF PAUSE)

17

18 MR. LUKE JOHNSTON: One comment I
19 might add to that is I don't know that Mr. Cheng does
20 this particularly in the DCAT. But on the policy
21 liability review, Mr. Cheng actually has his own
22 internal models that he puts all of our data in, runs
23 them through, and validates through his own models.
24 As a -- as another way to -- to test our assumptions
25 in our liability review.

1 So, again, I don't know the extent of
2 his testing but I'm -- I'm sure he has other
3 proprietary models that he uses to look at forecasts
4 like these.

5

6 (BRIEF PAUSE)

7

8 MS. CANDACE GRAMMOND: Just a couple
9 more questions, with the Board's permission. We
10 talked yesterday I believe, about the second quarter
11 report that the Corporation filed. And we went
12 through the retained earnings, and Basic and the
13 other lines, and the amount of AOCI. Would the
14 Corporation be able to advise of the balance of AOCI
15 related to Basic at the end of the second quarter?
16 Basic only?

17 MS. HEATHER REICHERT: We can take
18 that as an undertaking.

19 MS. CANDACE GRAMMOND: Thank you.

20

21 --- UNDERTAKING NO. 41: MPI to advise of the
22 balance of AOCI related
23 to Basic at the end of
24 the second quarter, Basic
25 only

1 CONTINUED BY MS. CANDACE GRAMMOND

2 MS. CANDACE GRAMMOND: One other
3 question. Mr. Johnston, you had indicated that with
4 AOCI, the DCAT would reflect an RSR target of 50
5 million more, so about 222 or 223 million. It's
6 reflected -- is -- is that what you said?

7

8 MR. LUKE JOHNSTON: Sorry, just to be
9 clear, I just put the provision on that that I only
10 looked at that one (1) scenario. My expectation is
11 it would still continue to be that scenario, but for
12 the one seventy-two (172) target in particular there
13 is an additional \$51 million loss on the -- in
14 unrealized gains and losses. So adding to the two
15 twenty-three (223) I believe the number was.

16 MS. CANDACE GRAMMOND: In -- in the
17 Basic annual report included in the application,
18 there's an equity balance as at February 28th, 2013,
19 of some \$225.8 million.

20 So would it be fair to say that if
21 AOCI is included that Basic would be at the requisite
22 target?

23

24 (BRIEF PAUSE)

25

1 MS. CANDACE GRAMMOND: The reference,
2 if it would help, for that Basic annual report was
3 Volume III, AI-6, Part 1A, page 3.

4

5 (BRIEF PAUSE)

6

7 MR. LUKE JOHNSTON: Can you repeat
8 that please?

9 MS. CANDACE GRAMMOND: The reference
10 or the question?

11 MR. LUKE JOHNSTON: The reference.

12 MS. CANDACE GRAMMOND: Volume III,
13 AI-6, Part 1A.

14

15 (BRIEF PAUSE)

16

17 MR. LUKE JOHNSTON: My apologies. If
18 you go to DCAT -- the DCAT report, which is RSR-2,
19 page 56.

20

21 (BRIEF PAUSE)

22

23 MR. LUKE JOHNSTON: That's, yeah, RSR
24 -- that's Volume II, RSR-2, page 56.

25 MS. CANDACE GRAMMOND: I have it. I

1 don't know if the panel does. Yeah, everyone appears
2 to have it.

3 MR. LUKE JOHNSTON: So I -- I -- you
4 caught a -- I think I misspoke. Looking at the
5 second table on the top of page 56 is the change
6 relative to the base scenario. And the 172 million
7 is shown in the retained earnings RSR piece. And
8 then there's a \$51 million change in unrealized
9 gain/losses.

10 If you go to the top table, the
11 approximation for AOCI is on the bottom -- bottom
12 line, unrealized gain/loss. You can see that -- that
13 the -- in the reference section, AI-6, I believe,
14 we're at about \$84 million in AOCI. As this scenario
15 runs out, the -- the unrealized gains decline from 52
16 million down to about 6 million. So my correction to
17 -- to my comment would be that 172 million would
18 still be the indication. AOCI, in this particular
19 scenario, would be approximately zero at -- at the 6
20 million indicated on the -- in '16/'17.

21

22 (BRIEF PAUSE)

23

24 MR. LUKE JOHNSTON: Just to -- to add
25 to that, the reason for the bottom table is in this

1 particular case you are starting with a fairly
2 positive balance in AOCI. If we were starting at
3 zero, the ta -- the bottom table is showing you the
4 full extent of that impact. You did lose, you know,
5 all your -- your unrealized gains in -- you just
6 started off with a big number. If you had started at
7 zero or negative, it would have been even more so
8 negative by that amount.

9

10 (BRIEF PAUSE)

11

12 MS. CANDACE GRAMMOND: So in the AI-6
13 reference that I gave you the equity balance in Basic
14 was 225 million. Are we to compare that with the
15 \$172 million target that's being presented or no?

16

17 (BRIEF PAUSE)

18

19 MR. LUKE JOHNSTON: I -- I think I
20 understand your question better now. So, as I
21 mentioned, our -- our DCAT report is assessing the --
22 the target level of the RSR. And that target level
23 does -- does not include balances in AOCI. I
24 understand that Mr. Cheng recommended that -- that
25 those balances be considered but that is not --

1 that's not the basis for the -- the target that we've
2 proposed.

3 So the comparable (sic) number on
4 AI-6 is the one hundred and forty-one four seventy
5 thousand (141,470,000), or 141 million, in retained
6 earnings.

7

8 (BRIEF PAUSE)

9

10 MR. LUKE JOHNSTON: And just -- just
11 to add that per the original -- original question on
12 -- on the Joe Cheng report, page 6, his note at the
13 bottom does state that:

14 "AOCI should be considered in
15 determining satisfactory financial
16 condition. Our recommendation is
17 in regards to the parti -- the RSR
18 target at one seventy-two (172)."

19 He also then goes on to note that AOCI
20 is a -- I'll quote:

21 "When deciding whether to issue
22 rebates and/or surcharges that this
23 is -- should be considered by the
24 Board."

25 We would totally agree with that. So

1 as -- as we spoke before, if there is a very large
2 positive AOCI ne -- positive or negative balance,
3 that's something that should be considered when
4 deciding on rebates or surcharges.

5 MS. CANDACE GRAMMOND: But if I
6 understand you correctly, what you're saying is, even
7 in the context of Mr. Cheng's recommendations, the
8 Corporation maintains its position that AOCI should
9 not be considered for the purposes of setting the
10 RSR?

11 MR. LUKE JOHNSTON: Yes.

12 MS. MARILYN MCLAREN: If I could, Ms.
13 Grammond, this is an area that is evolving, clearly,
14 especially in light of the evolving standards that we
15 talked about earlier in terms of IFRS-4 and 9. I
16 mean, it's hard to say what we will be looking at
17 three (3) to four (4) years from now.

18 But in terms of the comment of Mr.
19 Cheng in terms of, you know, rebates and surcharges,
20 we agree. Do we think we already have an excess of
21 funds in the RSR because it should include the money
22 that is in other comprehensive income? No. And I --
23 I'm not sure that that's what Mr. Cheng would be
24 suggesting either.

25 I think it's a consideration. We've

1 agreed with that. But the extent to which you now
2 today have funds or an accumulation of some sort of
3 asset value in other comprehensive income, that could
4 disappear tomorrow, it increase tomorrow. We don't
5 believe that that is -- with the accounting rules
6 we're working with today, that is not substantive,
7 reliable money like excess retained earnings RSR is.
8 It's just not the same and should not be considered
9 to be the same.

10 Directionally, when making decisions
11 about rebates and surcharges, that's a whole
12 different game. And directionally, as we see the
13 potential to move more uncertainty into the income
14 statement through some of this, IFRS-4 and 9, and by
15 the same token, some other things that may very well
16 move volatility out of it but move a significant part
17 of our asset base out, then that's a different
18 circumstance. We'll have to think about that very
19 carefully as those issues evolve.

20 MS. CANDACE GRAMMOND: Thank you,
21 Madam Chair. Yes, those are my questions at this
22 point.

23 THE CHAIRPERSON: Mr. Williams, have
24 you any further questions?

25 MR. BYRON WILLIAMS: I have many, but

1 none that I wish to ask today, Madam Chair.

2 THE CHAIRPERSON: Mr. Gosselin...?

3 MR. REGIS GOSSELIN: I just want to
4 go back over Exhibit 52, and I just want to reflect a
5 little bit on the, you know, a -- an observation that
6 I'm surprised by the degree of sensitivity in the
7 results from a matching of bond duration with claims
8 liabilities.

9 And I guess the -- the -- the -- that
10 -- that the follow-up question would be: In an
11 environment where rates, contrary to the accepted
12 wisdom that they'll be going up if rates go the other
13 way -- in other words, rates head down and they stay
14 down relative to your forecast.

15 Now, my reading of that would be that
16 your claims liabilities would go up and your value of
17 the bond, of course, would go up as well, but then
18 your -- the value of the claim liabilities would be
19 higher than the increased value of the bond. So it
20 tells me that there would be a -- a hit to your
21 bottom line in that case.

22 And so I -- am I -- is that assessment
23 wrong? I mean, am I --

24 MS. HEATHER REICHERT: I --

25 MR. REGIS GOSSELIN: To the extent

1 that you're not matched?

2 MS. HEATHER REICHERT: So to the
3 extent that we're not matched, if we stay at the --
4 the duration levels that we are today and interest
5 rates go down, that is the risk that we are trying to
6 mitigate, what we've been talking about, and not
7 forecasting interest rates to go up too much.
8 Because if interest rates do go down, then, yes, we
9 are negatively impacted.

10 The increase in the claims liability
11 and the value of the claims liabil -- liability will
12 exceed the increase in the asset, and it will be a
13 negative impact to the Corporation. Yes.

14 MR. REGIS GOSSELIN: But the point
15 I'm making is I'm trying -- I'm trying to establish
16 in my own mind is that that would prevent -- the
17 matching of -- of your exposures would prevent the
18 loss, ba -- basically. I mean, if you were matched,
19 rates go down, theoretically they both should be the
20 same and you know, your -- your --

21 MS. MARILYN MCLAREN: No, you're
22 absolutely right. But in all honesty, it's, you
23 know, in the face of everyone saying they're going
24 up, are we prepared to have ratepayers incur that
25 higher cost of fully matching? We've taken the pain

1 on the way down.

2 And if I -- I -- I think, you know, if
3 we were ha -- here, you know, asking for even a
4 higher rate increase because we were also going to
5 intend to fully match, and we really also were saying
6 that, you know, we -- we expect to see -- to not
7 retain the sixty-two (62) basis points increase that
8 we have from April, that it's going to come back
9 down, we would be, in all likelihood, but in some
10 quarters, criticized as incredibly overly
11 conservative.

12 And we -- and we shouldn't, you know,
13 we've -- we've tried to find a balanced approach here
14 by saying we are not at this point prepared to make
15 Manitobans pay the full cost of -- of completely
16 matching, now that they've sort of taken the pain on
17 the way down.

18 We are not prepared to take what has
19 proven to be very optimistic bank interest rate
20 forecasts. We've -- we've imposed our own risk
21 tolerance or -- or to a certain extent, lack thereof,
22 on those forecasts. And we're in a position that we
23 think is prudent and in the best interests here in
24 the rate application. That's what we've done.

25 That's not to say that if the kind of

1 volatility, you know, if that sixty-two (62) basis
2 points are -- are lost and it bounces, you know, if
3 we have that kind of volatility we absolutely will --
4 we will constantly, on a monthly basis, be asking
5 ourselves the question about this duration and
6 duration matching.

7 This is something that will absolutely
8 happen at MPI over the foreseeable future. But with
9 such consensus that they're going to trend up more
10 than down, it didn't seem appropriate for us at this
11 time to come forward with a strategy that was fully
12 matched and have that embedded in our rate at this
13 time.

14 MR. REGIS GOSSELIN: Now, I guess in
15 respect of the scenarios that you used for
16 establishing a DCAT, now embedded in that would have
17 been assumption around the misma -- the -- the ma --
18 pardon me, the matching of claims liabilities to bond
19 duration.

20 What was that?

21 MR. LUKE JOHNSTON: The -- the same
22 difference as in the base forecast, which I believe
23 was one (1) -- one point eight (1.8) years.

24 MR. REGIS GOSSELIN: And -- and to
25 the -- and all of these discussions are related, of

1 course, because in the discussion around other
2 comprehensive income, for example, a low rate
3 scenario which you do -- you -- you evaluated. I
4 mean, one (1) of the options available to -- to MPIC
5 in that kind of an environment, facing a significant
6 loss, it seems to me that you would try to realize
7 the gains in your other comprehensive income
8 portfolio, or at least the gains described to -- or
9 the comprehensive cover -- you'd realize those, to
10 the extent that they're liquid, to -- to address the
11 -- to address the -- the shortfall in revenue.

12 I mean, that would -- it would be --
13 seem natural to me assuming, of course, that the
14 change in rates doesn't impact your investments.
15 You'd realize your investments, put them down against
16 your losses, and you'd still have a risk -- a risk --
17 an RSR available.

18 MS. MARILYN MCLAREN: From the
19 perspective of a, sort of investment portfolio
20 management philosophy, you have -- we have to be a
21 little bit careful with that. We -- we certainly --
22 that is exactly the impact of what we did with our US
23 passive fund. We had other reasons for changing to a
24 different fund this year.

25 But, absolutely -- and we would be

1 looking at a significant loss this year because of
2 the impact of interest rates if we hadn't sold that -
3 - those US holdings, realized those gains. That's --
4 that's the big turnaround we've had between Quarter 2
5 and Quarter 1. So we've done that. We -- we do
6 understand that.

7 There was a time, many years ago,
8 where we realized a significant value of gains in --
9 in the bond portfolios and helped to restore a really
10 compromised RSR at that time. We need to be careful
11 with how much of that we do with what we would be
12 left with. Now, the only -- sort of the other
13 comprehensive income is pretty -- it must be solely
14 Canadian equities at this point.

15 So, you know, I mean, we've -- part of
16 the reason we had as many -- took -- took the hit we
17 did back in '09, and had as many impaired investments
18 as we did in '09, is because prior to that we had
19 been taking gains out of the Canadian equity
20 portfolio. And what the managers did is they didn't
21 change their view of what stocks they wanted, so they
22 would -- to give us the gains that we asked for, they
23 would sell stock and re-buy exactly the same stock at
24 the new higher price, right?

25 So then when everything fell in '09,

1 it fell below that new height. If we'd -- if we'd
2 kept those on -- on the books, so to speak, at
3 purchase price, and not taken those gains, we
4 wouldn't have had the hit when the market took such a
5 dive in '09.

6 So the extent to which you can do some
7 of that is something we do think about. It -- it has
8 happened in the past. And -- and in terms of the US
9 it, in no small part, saved our forecast for this
10 fiscal year. Exactly. That's exactly what we did.

11 MR. REGIS GOSSELIN: I just want to
12 make sure I understand the -- the mismatch that
13 exists now. And -- and I -- I acknowledge the
14 difficulty, you -- you know, trying to re-balance
15 that in the current environment.

16 But was there any -- were there any
17 operational reasons for having the mismatch to start
18 with? I mean, was there -- is there a justification
19 why there is that -- that spread? Or is it simply
20 just a -- a technical issue?

21 MS. MARILYN MCLAREN: I mean, for the
22 most part, you know, it's -- it's really related to
23 our objectives stated in the investment policy
24 statement where we believe that we can -- that there
25 are real advantages to ratepayers from investments in

1 real estate and -- and equities and things like that.

2 We'd be nothing but perfectly matched
3 if we were back solely in bonds, right. So, I mean,
4 it's really related to that more than anything else.

5 MR. LUKE JOHNSTON: Just one (1) --
6 one (1) follow-up to your question about -- about
7 equity, unrealized gains and losses. Stemming from
8 our comments last year at the hearings and the DCAT
9 technical conference, one (1) -- one (1) part of the
10 equity scenarios that was really looked at was
11 assumed turnover, how much would be realized or
12 unrealized in the case of a significant market crash.

13 We had fairly aggressive assumptions
14 in the DCAT that we -- everything would be realized
15 within two (2) years. We were asked a lot of
16 questions about, you know, what did you actually
17 realize when the stock market crashed and what did --
18 and we modified those assumptions considerably.

19 So the new DCAT reflects much improved
20 assumptions on turnover. But to your point, it
21 doesn't say, Okay, well, now we're in a bad position,
22 how much is in -- you know, how -- do we have any
23 realized on equity, should we sell them. It -- it
24 doesn't -- doesn't do that.

25 MS. CANDACE GRAMMOND: Madam Chair, I

1 just do have one (1) more question on this issue.

2

3 CONTINUED BY MS. CANDACE GRAMMOND:

4 MS. CANDACE GRAMMOND: Just to make
5 sure that we're on the same page or that we
6 understand each other, when the -- when MPI talks
7 about being perfectly matched and in con -- the
8 context of Exhibit 52, does that mean duration
9 matched or net income immunized?

10 Can you just clarify that?

11

12 (BRIEF PAUSE)

13

14 MR. LUKE JOHNSTON: It would mean
15 duration matched on a corporate basis, so the --
16 again, the -- the investment portfolio was corporate
17 and it's matching to the corporate duration. Most of
18 that's Basic, but it -- duration -- duration matched.

19 MS. CANDACE GRAMMOND: Thank you.

20 THE CHAIRPERSON: Okay, that will end
21 our proceedings for this afternoon. And we'll
22 reconvene tomorrow at 9:30. And I believe we have a
23 presenter from CAC -- that CAC is bringing forward,
24 Mavis Johnson. So thank you. Have a good evening.

25

1 (PANEL RETIRES)

2

3 --- Upon adjourning at 4:04 p.m.

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6 Certified correct,

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10 _____

11 Cheryl Lavigne, Ms.

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