

13 May 2026

Nigel Gray
fyi-request-34473-e9888bc0@requests.fyi.org.nz

REF: OIA-21856

Dear Nigel

Request made under the Official Information Act 1982

Thank you for your email of 11 April 2026 requesting the following information under the Official Information Act 1982 (the Act). I will respond to parts of your request in turn as follows:

A. Medical-Event Crashes (2023, 2024, 2025) For each of the last three calendar years, please provide:

The number of fatal crashes where the primary contributing factor was recorded as a medical event.

The number of serious-injury crashes where the primary contributing factor was a medical event.

The number of minor-injury crashes where the primary contributing factor was a medical event.

The Crash Analysis System (CAS) does not have a “primary contributing factor” as there is no hierarchy.

The following document falls within the scope of your request and is enclosed:

- Attachment 1 – Crash data – medical events and drugs 2023-2025 (*spreadsheet*).

The number of fatal crashes removed from the official road-toll dataset because they were determined to be caused by a medical event.

Based on information from our Crash Analysis System (CAS), the number of deaths provisionally excluded from the official road death statistics, due to a medical event for years 2016 to 2025 inclusive, is outlined in a table on the following page:

Year	Number of Deaths
2016	24
2017	24
2018	19
2019	29
2020	30
2021	20
2022	33
2023	23
2024	22
2025	39

Excluding deaths (as an “*Excluded – medical event*”) from road death statistics is provisionally agreed by Ministry of Transport Te Manatū Waka, New Zealand Police and NZ Transport Agency Waka Kotahi (NZTA). Agreement is based on medical evidence provided to New Zealand Police investigating officers (for example, medical history or preliminary post-mortem results). However, the actual cause and manner of death is ultimately a decision for the Coroner, and provisional exclusion decisions may be confirmed or reversed following the Coroner’s findings.

It is also important to note that there are limitations with this information:

- Recording of the reason for exclusion has been inconsistent over time. Our data team has advised that data from 2023 onwards is reliable, but earlier years may be incomplete.
- To compile the historic figures, the data team reviewed information from a range of sources (which includes CAS, correspondence between NZTA and New Zealand Police, Police Serious Crash Unit reports, and Coroner’s findings). Even with this work, there remains a possibility that some cases may have been missed.
- Some crashes involving a death that was excluded may not appear in the CAS database and, where a fatality is excluded, the crash severity recorded in CAS may be classified at the next-highest injury level.

Information is also held by the Ministry of Transport and is published on its website at: <https://www.transport.govt.nz/statistics-and-insights/safety-road-deaths>

The Ministry holds data which relates to deaths that have been excluded from the official road death statistics due to different reasons (for instance; a suicide, or that a crash occurred in an offroad area because of a medical event). If you click on the “*Daily updated provisional road deaths*” tab on the website, then click on the “*All data*” tab in the table, then scroll down and move the horizontal bar at the bottom of the table to the right, you will see a column which denotes if the death is included (true or false). The Ministry does not publish the reason for the exclusion.

The exact Police or CAS factor codes, definitions, or descriptors used to classify a crash as a medical event.

Information for this part of your request is outlined in a table on the following page:

Code	Definition	Description
504	Medical illness	Used when a driver or road user (including pedestrians) indicates that they suffered symptoms of an illness which they were aware of. This includes epilepsy, colds and other illnesses for which drugs are being taken.
501	Sudden illness	Used when a driver or road user (including pedestrians) indicates that they suffered an illness which they had no prior knowledge of – for instance; heart attacks, epilepsy, blackouts, food poisoning and aneurisms which a person had not experienced before. The code can also be used for illnesses that a person knows about which they take prescription drugs for, and the illness is believed to be under control. The code also applies for coughing, sneezing, vomiting and cramps.

The number of cases currently coded as “suspected medical event” or equivalent where coronial findings are pending.

This information is not held by NZTA. I am therefore required to refuse this part of your request under section 18(g)(i) of the Act as the information requested is not held by NZTA, and there is no reason to believe that it is held by another department or organisation.

B. Drug-Related Crashes (2023, 2024, 2025) For each of the last three calendar years, please provide:

The number of fatal crashes where drugs were recorded as a contributing factor.

The number of serious-injury crashes where drugs were recorded as a contributing factor.

The number of minor-injury crashes where drugs were recorded as a contributing factor.

The number of fatal crashes where both alcohol and drugs were contributing factors.

The factor codes, definitions, or descriptors used to classify drug involvement.

Information for these parts of your request is outlined in Attachment 1.

The number of cases initially coded as “pending toxicology” that were later updated to “drug-related.”

As the CAS database only shows the current state of a crash report, we would not be able to confirm if a record had been previously recorded as “pending toxicology” and then updated.

I am therefore required to refuse this part of your request under section 18(g)(i) of the Act as the information requested is not held by NZTA, and there is no reason to believe that it is held by another department or organisation.

C. Classification and Data-Handling Procedures Please provide:

The internal Police guidance, instructions, or criteria used to determine when a crash is classified as:

a medical event

drug-related

alcohol-related

excluded from the official road toll

Any procedures or thresholds used when updating crash records following coronial findings or toxicology results.

This part of your request was transferred to NZTA by New Zealand Police, who advised us that it does not hold the information you are seeking for this part of your request.

As NZTA or New Zealand Police does not hold any such information, I am therefore required to refuse this part of your request under section 18(g)(i) of the Act as the information requested is not held by NZTA, and there is no reason to believe that it is held by another department or organisation.

We can, however, advise that, while NZTA holds information that gives guidance on classifying crash records, New Zealand Police also includes information about a specific crash in a traffic crash report (TCR) when they send it to us. New Zealand Police also records drug and alcohol test results and comment in TCRs that, for instance, a driver experienced a medical event.

E. Administrative Notes

[...]

If coronial delays affect final classification, please provide the current Police coding and note which cases are pending.

NZTA does not hold any information regarding coding used by New Zealand Police. We also consulted with New Zealand Police who advised that it does not hold this information.

I am therefore required to refuse this part of your request under section 18(g)(i) of the Act as the information requested is not held by NZTA, and there is no reason to believe that it is held by another department or organisation.

We can, however, advise that NZTA codes crashes whereas New Zealand Police do not. Instead, New Zealand Police provide a narrative for a TCR to explain what happened, and we only know about this if the Coroner has given a ruling for a fatal crash when we receive a copy of the findings.

It is important to note that, as not all deaths from crashes are referred to the Coroner, NZTA has no knowledge of what might be pending. This would need to be referred to the Coroner's Court.

Under section 28 of the Act, you have the right to ask the Ombudsman to review my decision to refuse parts of this request. The contact details for the Ombudsman can be located at www.ombudsman.parliament.nz.

In line with NZTA policy, this response will soon be published on our website, with personal information removed.

If you would like to discuss this reply with NZTA, please contact Ministerial Services by email to official.correspondence@nzta.govt.nz.

Yours sincerely

A handwritten signature in blue ink that reads "Driscoll".

Josh Driscoll
Manager, Ministerial Services