

## CORONER'S COURT OF THE AUSTRALIAN CAPITAL TERRITORY

**Case Title:** Inquest into the death of Alexis Saaghy

**Citation:** [2026] ACTCD 7

**Decision Date:** 5 June 2026

**Before:** Coroner K J Archer

**Findings:** See [36-37]

**Catchwords:** **CORONIAL LAW** – MANNER AND CAUSE OF DEATH – death following a traffic accident – negligence – not driving to the conditions – finding of guilt after trial – observations of trial judge as to the availability to inexperienced of powerful vehicles – public safety issue – recommendation that the Government review that issue

**Legislation Cited:** *Coroners Act 1997 (ACT) ss 13, 52, 55, 58A*  
*Crimes Act 1900 (ACT) s 29*  
*Road Transport (Driver Licensing) Regulation 2017 (NSW)*  
*Road Transport (Safety and Traffic Management) Act 1999 (ACT) s 6*

**Cases Cited:** *R v Hamdan (No 3) [2022] ACTSC 326*

**Texts Cited:** Marc Sibbald and Jerome Carslake, “*Utes increase the risk of Death*”, Fleet Auto News, (29 January 2024)

**File Number:** CD 299 of 2020

## CORONER ARCHER:

### Introduction

1. On 3 November 2020, Ms Alexis Genevieve Saaghy died at The Canberra Hospital (**TCH**) from head injuries sustained in single vehicle accident that occurred on Longmore Street in Wanniasa in the Australian Capital Territory (**ACT**) on 31 October 2020. Ms Saaghy was 16 years old at the time of her death. I will, with respect, refer to her as Alexis.
2. I have chosen to publish my findings in this inquest as it is in the public interest to provide an accessible record of road accident deaths that occur in the ACT, so as to better facilitate consideration of road safety issues.

### Jurisdiction

3. Alexis' death was reported to the ACT Coroner's Court, as it appeared to be "directly attributable to an accident", for the purposes of s 13(1)(g) of the *Coroners Act 1997* (ACT) (**the Act**).
4. Section 13 of the Act requires me to hold an inquest into the manner and cause of Alexis' death. In doing so, I must make findings as required by s 52 of the Act. That section of the Act relevantly provides:

#### **52 Coroner's findings**

- (1) A coroner holding an inquest must find, if possible—
  - (a) the identity of the deceased; and
  - (b) when and where the death happened; and
  - (c) the manner and cause of death; and
  - (d) in the case of the suspected death of a person—that the person has died....
- (2) The coroner, in the coroner's findings—
  - (a) must—
    - (i) state whether a matter of public safety is found to arise in connection with the inquest or inquiry; and
    - (ii) if a matter of public safety is found to arise—comment on the matter

5. A Coroner's ability to make findings as to the "manner" of a person's death after criminal proceedings that are relevant to the death have been conducted is constrained by the operation of s 58A of the Act. Specifically, s 58A(2) of the Act prohibits a Coroner from making findings that may be "inconsistent with the judgment or verdict of the court that finally determined the guilt or innocence of the person for the related indictable offence".

## The Criminal Proceedings

6. Soon after Alexis' death, criminal proceedings against Mr Ameen Hamdan (**Hamdan**), the driver of the relevant vehicle, commenced in the ACT Magistrates Court. Hamdan pleaded not guilty to a series of charges involving Alexis and another passenger in the car, Mr Dandash. The principal charges were culpable driving causing the death of Alexis and culpable driving causing grievous bodily harm to Mr Dandash.
7. On 17 January 2022, Hamdan was committed to the ACT Supreme Court for trial, and he stood trial from 5 September 2022.
8. On 12 September 2022, the jury found Hamdan not guilty of the two offences of culpable driving but found him guilty of the alternate charges of negligent driving, causing the death of Ms Saaghy and grievous bodily harm to Mr Dandash. The maximum penalty for negligent driving causing death is two years imprisonment: s 6(1)(a) of the *Road Transport (Safety and Traffic Management) Act 1999* (ACT) (**Road Transport Act**). The maximum penalty for negligent driving occasioning grievous bodily harm is one year imprisonment: see s 6(1)(b) of the *Road Transport Act*.
9. On 28 November 2022, His Honour Justice Elkaim sentenced Hamdan:
  - (a) For the offence of negligent driving causing death Hamdan was sentenced to 18 months (reduced from 20 months) imprisonment to commence on 28 November 2022 and end on 27 May 2024.
  - (b) For the offence of negligent driving causing grievous bodily harm Hamdan was sentenced to seven months imprisonment (reduced from eight months) to commence on 28 April 2024 and end on 27 November 2024.
10. The sentences of imprisonment were ordered to be served by way of an intensive corrections order on core conditions.

## Evidence

11. The findings that follow are made based on material received by me during the inquest. That material reflected the evidence produced to the Director of Public Prosecutions for the purposes of the prosecution of Hamdan and included:
  - (a) statements from investigating police;
  - (b) an expert report from Leading Senior Constable McCue (as to the movement and speed of Hamdan's car);
  - (c) a coronial police report;
  - (d) interviews with members of Alexis' family; and

- (e) an autopsy report from Professor Duflou.
12. Consistent with my obligations under section 58A(2) of the Act, I also had regard to the findings made by His Honour Justice Elkaim during the sentencing proceedings, including his findings as to the facts relevant to sentence.

## **Circumstances Surrounding Alexis' Death**

### *Chronology of Events*

13. On Friday 30 October 2020, Hamdan was driving a blue Nissan Navara Utility (**the Navara**) registered in the ACT. At about 8:00pm Hamdan picked up Mr Dandash from his residence then shortly after picked up another young person (**the young person**) from another residence. Over the course of the night, they attended house parties in Kambah and Chisholm staying for a short time at each. Hamdan and Mr Dandash left the party in Chisholm, leaving the young person and drove to a place in New South Wales (**NSW**) to pick up Alexis.
14. Hamdan returned to Chisholm with Alexis and Mr Dandash, and after picking up the young person drove them all to the Mount Ainslie Lookout. Whilst at Mount Ainslie it started to rain. A short time later they departed and Hamdan drove them around the Tuggeranong area.
15. At about 1:50am on Saturday 31 October 2020, Hamdan was driving west along Longmore Crescent, Wanniassa, ACT, between Sainsbury Street and Brooke Place. Alexis was seated in the front passenger seat, Mr Dandash in the rear driver's side seat and the young person in the rear passenger side seat. Longmore Crescent is a typical residential street – an un-signposted 50km/h zone with residences, footpaths, and large mature trees on both sides of the street.
16. At that time, light showers of rain were falling, the road was poorly lit by street lighting and was wet but in good repair. There was no traffic in the vicinity. While driving around a sweeping left hand bend, Hamdan lost control of the vehicle and it skidded for about 25 metres to the opposite side of the road. The vehicle left the road surface on the northern side of the Longmore Crescent between Brooke Place and Sachse Place and collided with the trunk of a large mature tree on the front passenger side.
17. As a result of the collision, both Hamdan and Alexis lost consciousness in the front of the vehicle. Mr Dandash and the young person were able to extricate themselves from the vehicle. The young person alerted occupants of the surrounding residences to call 000 for emergency assistance.

18. At about 1:57am, ACT Police attended the scene and found Hamdan still seated in the front driver seat of the vehicle, with Alexis in the front passenger seat unresponsive.
19. ACT Fire and Rescue (**ACTFR**) and ACT Ambulance Service (**ACTAS**) attended the scene shortly after. ACTFR removed the roof of the vehicle in order to get Alexis out of the vehicle.
20. All occupants of the vehicle were taken to TCH. The young person, Mr Dandash and Hamdan were treated for injuries. Mr Dandash sustained significant injuries including a fractured humerus on the right side (with limited long term sequelae including a scar). Hamdan suffered a brain injury and reduced vision in his left eye as a result of the crash.
21. Alexis sustained multiple injuries including significant head trauma. The swelling of her brain was extreme and was viewed by medical staff to not be survivable.
22. On Tuesday 3 November 2020 Alexis died, soon after her life support was removed.

#### *Manner of Hamdan's Driving*

23. The verdict returned in Hamdan's trial indicated that the jury were satisfied that Hamdan's driving was negligent<sup>1</sup> but not so negligent as to amount to culpable driving<sup>2</sup>.
24. Justice Elkaim reviewed the evidence produced at the trial (including contested expert evidence as to speed) and made findings that the vehicle may have been travelling below the speed limit at the time of the collision and dismissed the suggestion that Hamdan's driving might have been influenced by the presence of a kangaroo on the road. His Honour characterised the element of negligence found by the jury in these terms<sup>3</sup>:

As to the alternative charges of negligent driving, the evidence was that it was raining, probably heavily, at the time of the collision. The speed limit in the area was 50 kph. Even if the vehicle was travelling at 49 kph a finding of negligence was open. A prudent driver drives according to the conditions. Driving at the speed limit in the conditions that existed is enough to have established negligence.

It is also significant that the offender had been told to slow down by other occupants of the vehicle as he approached a roundabout close to the scene of the collision.

.... the offender was a P plate driver who had held his provisional licence for less than twelve months. This meant that at the time he was driving he was not permitted to have more than one non-family peer with him in the vehicle (s 31 of the *Road Transport (Driver Licensing) Regulation 2000* (ACT)). In fact, there were three peers in the car, in breach of a condition of his licence (s 60(1) of the *Road Transport (Driver Licensing) Regulation 2000* (ACT)). One might minimise this contravention as being of little moment. I would strongly disagree with this categorisation.

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<sup>1</sup> s 6 *Road Transport (Safety and Traffic Management) Act 1999* (ACT)

<sup>2</sup> s 29(6) and (7) *Crimes Act 1900* (ACT)

<sup>3</sup> R v Hamdan (No 3) [2022] ACTSC 326 [12], [13], [17]

Had there been only one other person in the vehicle, it must logically follow that a death or occasioning of grievous bodily harm would not have occurred.

25. An issue arose at the trial as to Hamdan's manner of driving prior to the collision. His Honour Justice Elkaim found that video on taken on Alexis' phone suggested that before the collision area Hamdan may have been driving in a manner described as drifting.<sup>4</sup> Drifting is a driving technique which involves intentionally oversteering, causing the rear wheels to lose traction causing the car to slide sideways through a turn, while still maintaining control of the vehicle. The jury's verdict was inconsistent with a finding that Hamdan was using this driving technique at the time of the accident.

### **Matters of Public Safety**

26. A review of the designs and configuration of the road at the point where the collision occurred did not suggest there was a general concern about the safety of that road. Police assessed the roadworthiness of the Navara after the accident and, subject to the constraints posed by considerable accident damage, found that it was roadworthy. The car's absence of side airbags compromised its general level of safety.
27. Issues of public safety do arise in respect of the *type* of car that was being driven by Hamdan. In his sentencing reasons Justice Elkaim raised his concerns as to the safety of the car being driven by an inexperienced driver. The car was a 2011 Nissan Navara D40 dual cab ute. His view was that the car was "unstable" (there was expert evidence to that effect) and not so much a car as a "light truck":

They are vehicles suited to off-road, commercial and farming duties. I have little doubt that only a small percentage of these vehicles are used for those purposes. In my view their sale should be restricted to persons, like farmers, trades persons and genuine off-road enthusiasts, who have a legitimate use for them.

These types of vehicles are unsafe and dangerous. They should not be marketed and sold as suitable for normal suburban use.<sup>5</sup>

I understand that apprentices might be required to have their own utilities for work purposes. If that is correct the requirement is inappropriate. These vehicles should not be in the hands of inexperienced young drivers.<sup>6</sup>

### *P Plate Drivers and High-Performance Cars*

28. What follows must be considered in the context of the jury's verdict. The driving of Hamdan was "negligent" in the sense that Hamdan did not drive to the conditions.

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<sup>4</sup> (n 3) [6].

<sup>5</sup> (n 3) [21]-[22]

<sup>6</sup> *Ibid* [24]

29. At the time of the collision the Navara was nine years old. The car was large and heavy. The vehicle has a wheelbase of 3200mm and a track width of 1570mm. The vehicle was 2125mm in length and 1850mm in width. It weighed approximately 1200kgs. The car was being driven by a P plate driver who had held his licence for less than 12 months. His licence was an ACT Provisional 1 C licence.
30. With the greater prevalence of SUVs and electric vehicles on the road, the cars that are being used by inexperienced drivers are becoming heavier and more powerful (whether they are new or second hand). Further, data collected by the Monash University Accident Research Centre indicates that the risk of death and serious injuries posed by utility vehicles compared to a medium car is 30% higher when in a collision.<sup>7</sup>
31. In some Australian jurisdictions (for example, New South Wales, Queensland, and Victoria) there are restrictions placed on inexperienced drivers (P plate drivers) being able to drive cars described as “high performance” vehicles. To use NSW as an example, P1 and P2 drivers are banned from driving high-performance vehicles that have:
  - (a) Power to tare mass ratios of greater than 130kw per tonne or,
  - (b) Modified engines that need to be approved by an engineer or,
  - (c) Other vehicles classified as high performance.
32. In respect of category (a), clause 36(2) of the *Road Transport (Driver Licensing) Regulation 2017* (NSW) provides a car meets this definition if it has a power to mass ratio (**PMR**) greater than 130 kilowatts per tonne. A vehicle's PMR is calculated by its power (measured in kilowatts) divided by its mass (measured in metric tonnes).
33. No such restrictions apply in the ACT and holders of P plate licences can drive cars exceeding power of 130kw/T.
34. It should be made clear that in this case the PMR of the vehicle in question was less than 130 kw of power per tonne and Hamdan was driving within the law when driving both in the ACT and in NSW.
35. I also observe that apart from performance characteristics, there are other variances between NSW and the ACT regarding restrictions that apply to P plate drivers,

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<sup>7</sup> Jerome Carslake, Director of Road Safety Partnership Program, Monash University Accident Research Centre, as quoted in Fleet Auto News, January 29, 2024 (fleetautonews.com.au)

notably as to the speed applicable to P plate drivers.

36. It may be incongruous that Hamdan was subject to differing licence restrictions as he moved between NSW and the ACT on the night and early morning during the journey that led to Alexis' death.

**I recommend** that that the ACT Government consider reviewing the restrictions that apply to P Plate drivers in respect of their use of high-performance cars.

37. Alexis' family were provided these findings in provisional form and comment invited. They made the entirely valid submission that in the ACT young drivers were disproportionately associated with fatal accidents. The suggestion was made that the regime of regulation of P plate drivers in various areas should be reviewed to increase penalties and to bring ACT regulation of P plate drivers into line with NSW. Given the narrow scope of the regulatory issues that are connected to the driving associated with Alexis' death I make no findings or comment that a general review of P plate regulation is warranted. However, I will refer the family's correspondence to the Attorney-General for her consideration. My published findings in respect of road accident deaths in the ACT since becoming the dedicated Coroner in 2022 provide a resource against which those representations can be assessed.

## **Formal Findings**

38. Based on the material before this inquest, for the purposes of s 52(1) of the Act, I find:
- (a) Alexis Genevieve Saaghy died on 3 November 2020 at the Canberra Hospital as a result of head injuries sustained in a motor vehicle accident.
  - (b) A relatively inexperienced driver, behind the wheel of a powerful and unsuitable car, failing to drive to the conditions of the road, were factors that likely contributed to the collision that caused her fatal injuries.
39. I find a matter of public safety arises in connection with the inquest into Alexis' death.

## Postscript

40. It was made clear through the many victim impact statements given by Alexis' relatives that she was much loved and dearly missed. She was a young woman with a bright future, who is described as being selfless, caring, generous and empathetic. She loved animals and was passionate about the environment and has clearly left a huge and unfillable hole in a grieving family. Alexis' mother described her daughter to me as the light of her family, as someone who went to great lengths to ensure her loved ones knew how special they were to her, and as someone with great aspirations for her future.
41. If there is anything positive that arises from such a tragic loss, it is that once it became clear that Alexis would not survive her injuries, her family, with remarkable generosity, consented to the donation of her organs. The impact that act of kindness has had on other families going through distressing and difficult times is immeasurable. I extend my sincere condolences to Alexis' family and friends

I certify that the preceding forty-one [41] numbered paragraphs are a true copy of the Reasons for Decision of his Honour Coroner Acher

Associate: Ella Mansfield

Date: 5 June 2026