

STATE OF FLORIDA

IMPAIRED DRIVING

ASSESSMENT

June 15-20, 2008

National Highway Traffic Safety Administration
Technical Assistance Team

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ACKNOWLEDGEMENTS

The Technical Assistance Team acknowledges and thanks Mr. Kevin Thibault, Assistant Secretary, Engineering and Operations, and Governor's Highway Safety Representative, and Marianne Trussell, Chief Safety Officer, Florida Department of Transportation (FDOT), for their support and able assistance in making this review possible. In addition, the team acknowledges and thanks Mr. Randall Smith, Traffic Safety Administrator, and Ms. Shelia McKinnon, Traffic Safety Impaired Driving Coordinator, FDOT. They were responsible for the assessment logistics, coordinating and compiling briefing materials, identifying presenters, scheduling appearances, and time keeping for the assessment team.

Ms. Evelyn Avant, Impaired Driving Division, National Highway Traffic Safety Administration (NHTSA) facilitated the assessment process. Ms. Sandy Richardson, NHTSA Region 4 Office, also assisted with the facilitation of the assessment process. The team would like to thank NHTSA for helping to give a national and regional perspective to the assessment. The team wishes to commend Ms. Belinda Goodwin, Administrative Consultant to the Team, for her ability to manage the production of a final report in a short period of time, which has been invaluable.

The team also thanks each of the participants in the review for the time and energy invested in preparing and delivering their presentations. Their candor and thoroughness in discussing their activities to target impaired driving in the State of Florida greatly assisted the team in conducting a complete review.

The team believes this report will contribute to the State's efforts to enhance the effectiveness of its impaired driving program in preventing injuries, saving lives, and reducing economic costs of motor vehicle crashes on Florida's roadways.

Although the team realizes the assessment is a review of all impaired driving activities, the team commends and encourages all who are involved in the day-to-day functions of reducing impaired driving in Florida.

INTRODUCTION

In 2006, 42,642 persons were killed in 38,588 fatal motor vehicle crashes in the United States. Traffic fatalities are the leading cause of death among persons 1 to 34 years of age, and alcohol is the leading cause of fatal traffic crashes by an overwhelming margin. Motor vehicle crashes are the principal cause of on-the-job fatalities and are the leading cause of unintentional death in the United States. Nationwide, the economic cost of motor vehicle traffic crashes exceeds \$230 billion annually.

Alcohol was involved in approximately 41 percent (17,602) of the total number of traffic fatalities in 2006. In 2006, an estimated 13,470 people were killed in traffic crashes that involved at least one driver or a motorcycle operator with a blood alcohol concentration (BAC) of 0.08 g/dL or above. This is a decline of 0.8 percent from the 13,582 fatalities in 2005. The 13,582 fatalities in 2005 were the highest since 1993, when 13,739 people were killed in crashes involving at least one driver or motorcycle operator with a BAC of 0.08+.

The mission of the National Highway Traffic Safety Administration (NHTSA) is to reduce deaths, injuries, and economic and property losses resulting from motor vehicle crashes. In its ongoing pursuit to reduce alcohol-related traffic crashes and subsequent fatalities and injuries, NHTSA continues its program of providing Technical Assistance Teams to the states upon request. NHTSA offers a Program Assessment process to allow a state to use highway safety funds to support an evaluation of existing and proposed alcohol and other drug – impaired driving control efforts by a selected team of experts.

NHTSA staff facilitates the process by assembling a team composed of individuals who have demonstrated competence in impaired driving program development and evaluation. Examples of program expertise among team members may include criminal justice, enforcement, engineering, evaluation, prevention, program management, traffic records, and substance abuse prevention/treatment/rehabilitation.

The Florida Department of Transportation's Traffic Safety Program requested NHTSA's assistance in assessing the State of Florida's alcohol and drug impaired driving countermeasures program in June 2008.

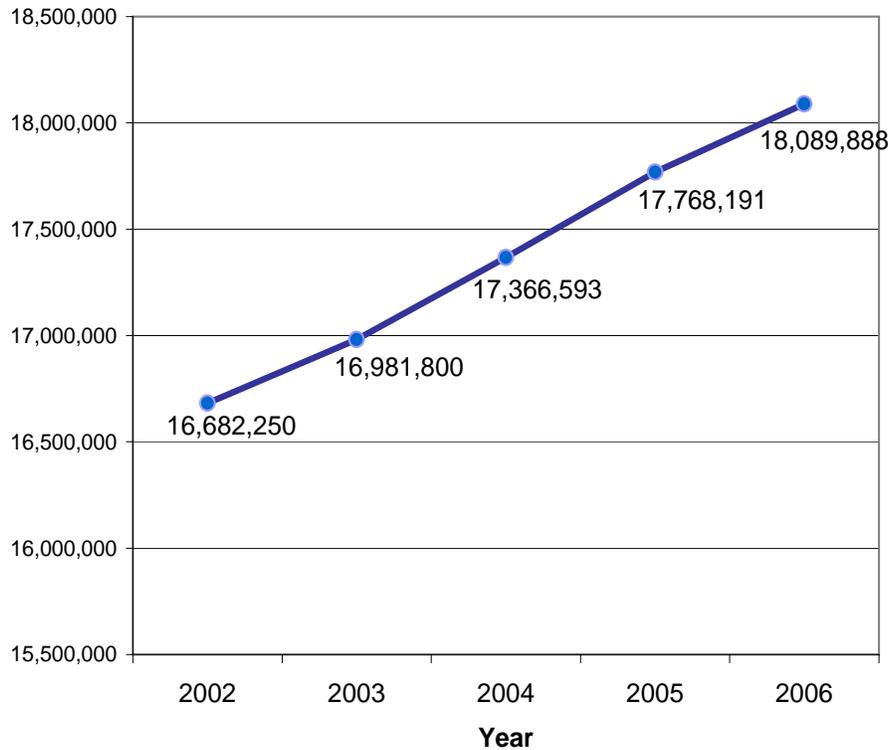
The Florida Impaired Driving Assessment was conducted at the DoubleTree Hotel located in downtown Tallahassee, Florida from June 16 to 20, 2008. Under the leadership of Marianne Trussell, FDOT, Chief Safety Officer, and Randall Smith, FDOT, Safety Office Administrator, arrangements were made for program experts (see Agenda) to deliver briefings and provide support materials to the team on a wide range of topics over a three-day period.

Demographics

In 2006, the population in Florida reached 18,089,888, which represents an 8 percent increase since 2002. According to the U.S. Census Bureau, in 2006, Florida ranked as the fourth most populous State in the nation. The Florida Department of Highway Safety and Motor Vehicles (DHSMV) estimates there are approximately 15.6 million licensed drivers in the State and 15.5 million vehicle

registrations. Forty-seven percent of all Florida residents live in the most densely populated counties in the State including Broward, Duval, Hillsborough, Miami-Dade, Orange, and Palm Beach. Appendix C, Demographic/Census Information includes a complete breakdown of overall population growth by county. Figure 0.1 shows the rate of population growth between 2002 and 2006.

Figure 0.1 Population Growth



Source: Florida Traffic Crash Statistics Report 2006

Economy

According to Enterprise Florida, Inc., a statewide economic development organization, there were approximately 9.1 million people employed in Florida in 2007 and due to an abundance of job opportunities, Florida continues to experience rapid labor force growth. Over the last five years, Florida's labor force has increased at a rate more than twice as fast as the nation (12.6 percent versus 5.7 percent, respectively). Table 0.1 provides a six-year summary of Florida's labor force growth rate in relation to the national rate. Table 0.2 depicts total employment for both Florida and the United States.

Table 0.1 Florida and U.S. Labor Force

Year	Florida	Annual Growth	United States	Annual Growth
2007	9,147,797	2.3%	153,128,667	1.1%
2006	8,938,975	3.1%	151,414,917	1.4%
2005	8,669,995	3.0%	149,295,333	1.3%
2004	8,418,134	2.4%	147,382,917	0.6%
2003	8,219,800	1.2%	146,499,500	1.1%
2002	8,124,929	1.6%	144,856,083	0.8%

Source: Enterprise Florida website (Florida Labor Force & Employment):

Table 0.2 Florida and U.S. Total Employment

Year	Florida	Annual Growth	United States	Annual Growth
2007	8,779,299	1.7%	146,049,417	1.1%
2006	8,633,652	3.6%	144,421,167	1.9%
2005	8,335,901	3.9%	141,715,500	1.8%
2004	8,026,552	3.1%	139,241,500	1.1%
2003	7,785,547	1.6%	137,729,250	0.9%
2002	7,662,511	0.5%	136,480,917	-0.3%

Source: Enterprise Florida website (Florida Labor Force & Employment):

Highway Safety

Traffic fatalities have been on the rise in Florida since 1996, but in 2006, Florida's fatality numbers declined for the first time in 10 years. The 2006 figure of 3,365 is a 4.75 percent decrease from the 3,533 traffic fatalities reported in 2005. Preliminary data for 2007 indicates the State will record approximately 70 fewer traffic fatalities than in 2006.

Florida's continued economic growth has resulted in an increase in vehicle miles of travel (VMT) which grew to 203,782 million in 2006. Despite these increases, the rate of fatalities per 100 million VMT decreased in 2006 to 1.65, which represents a 6.25 percent decrease from 1.76 rate in

2005. Despite these gains, Florida’s efforts to reduce traffic fatalities and injuries are hampered given the more than 300,000 people who move to the State each year, and the large tourist population which is not immune to traffic related crashes.

Impaired Driving Program

In 2006, Florida reported the biggest drop in alcohol-related fatalities of any state in the nation. Alcohol was involved in 32.6 percent of the traffic fatalities in 2006, and the alcohol-related fatality rate dropped to 0.54 per 100 million VMT.

Over the past five years, an average of 22,804 impaired driving crashes occurred annually on Florida’s roadways resulting in over 1,000 fatalities which represent nearly 33 percent of all traffic fatalities. An average of 3,564 people has also been injured in crashes each year which represents 12 percent of all traffic injuries. Appendix D, Florida Highway Safety and Motor Vehicle Traffic Statistics Report 2006 includes more detailed statistics and information.

In 2006 a total of 256,200 driving crashes occurred resulting in 137,282 serious injuries and 3,084 fatalities. Alcohol-related crashes represented nearly 9 percent of the total, alcohol-related serious injuries were nearly 2.5 percent, and alcohol-related fatalities were 3.5 percent. Table 0.3 shows statistics on alcohol-related crashes, serious injuries, and fatalities in Florida from 2002 to 2006.

Table 0.3 Alcohol Related Crashes

Florida	2002	2003	2004	2005	2006
Alcohol Related Crashes	21,533	22,752	23,013	23,864	22,858
# of Serious Injuries	3,691	3,627	3,590	3,573	3,341
# of fatalities	1,007	1,096	1,093	1,239	1,099

Source: Florida Traffic Crash Statistics Report 2006

PRIORITY RECOMMENDATIONS

1-A: State, Local, and Tribal DWI Task Forces/Commissions

- Establish an executive level Governor’s Traffic Safety Council with impaired driving as the highest council priority.

1-B: Strategic Planning

- Develop and implement a comprehensive strategic plan specifically for impaired driving with well-defined, short and long-range impaired driving target goals for all areas of an impaired driving program including, but not limited to:
 - A targeted reduction in impaired driving crashes, injuries, and fatalities;
 - A targeted reduction in average BAC;
 - A targeted increase in DUI arrests and convictions; and
 - A targeted reduction in underage involvement in DUI crashes.

1-C: Program Management

- Develop and implement a plan of projects to make best use of available Section 410 funds.
- Fill open positions, particularly the Law Enforcement Liaisons, as quickly as possible.
- Complete and distribute the “Traffic Safety Program Manual.”
- Increase understanding of and participation in the Traffic Safety Program through widespread communication of the program, including its goals and objectives, funding available, results, and opportunities.

1-D: Resources

- Complete the necessary components to meet the criteria to continue to qualify for Section 410 funds.

3-A: Impaired Driving Laws

- Enact a zero tolerance minor operating a motor vehicle under the influence of alcohol offense (any detectable amount).
-
- Enact a primary seat belt law.
- Enact legislation providing for enhanced criminal penalties, including minimum mandatory jail sentences for convictions of any DUI offenders with blood alcohol levels of 0.15 or higher.

- Utilize search warrants for a blood sample when the offender refuses a breath or blood test.

3-B: Enforcement

- Require that the Standardized Field Sobriety Testing training meets or exceeds standards set by the International Association of Chiefs of Police and the National Highway Traffic Safety Administration.
- Ensure that Law Enforcement Liaisons participate in Florida Department of Transportation District Community Traffic Safety Team meetings.
- Communicate to all affected agencies future changes to the DUI grant process, procedure, or funding prior to the change.

3-C: Publicizing High Visibility Enforcement

- Develop and implement an impaired driving media campaign that is coordinated, sustained, emphasizes heightened enforcement, and uses all cost effective media (paid, earned and donated).

3-D: Prosecution

- Adequately fund State's Attorneys' Offices or seek alternative sources of funding such as court fees.

3-E: Adjudication

- Expand use and implementation of problem solving courts, including DUI Courts.

3-F-1: Administrative License Revocation and Vehicle Sanction

- Independently review the operation of Florida's administrative driver license review process to determine if the process can be improved by providing additional training; providing resources, such as access to Traffic Safety Resource Prosecutor; or mandating minimum educational requirements for the Administrative Hearing Officers.
- Conduct a pilot project to evaluate the effectiveness of impoundment or immobilization of vehicles of repeat offenders with 3 or more DUI convictions.

IV. Communication Program

- Develop, fund, and implement a comprehensive, data-based marketing plan in support of impaired driving which identifies target audiences, includes diverse populations as indicated in the traffic safety data, includes approaches and materials which are culturally

sensitive and target audience appropriate, incorporates resources from business and other partners, and evaluates for effectiveness.

- Support mobilizations, crackdowns, sobriety checkpoints, and other law enforcement efforts with a strong, comprehensive media program.

5-B: Treatment and Rehabilitation

- Implement only DUI education programs that address alcohol and other substance use, abuse, and addiction as causal factors in impaired driving and other serious medical, social, and legal problems.

6-A: Evaluation

- Identify and market to all stakeholders (data collectors, managers and users) Florida Highway Safety Strategic Information Plan and Highway Safety Performance Plan.
- Develop a DUI Strategic Safety Impact Evaluation Plan.

6-B: Data and Records (see section 1-E)

- Develop and present a course in safety data availability and its use in problem identification and impact evaluation to members of Traffic Records Coordinating Committee (TRCC), Technical Advisory Committee (TAC) and the academic community.

6-C: Information and Records Systems (including Licensing)

- Ensure timely adjudication of all pending citations.

I. PROGRAM MANAGEMENT AND STRATEGIC PLANNING

Effective impaired driving programs begin with strong leadership, sound policy development, program management, strategic planning, and an effective communication program. Program efforts should be data driven, focusing on populations and geographic areas that are most at risk, and science based, determined through independent evaluation as likely to achieve success. Programs and activities should be guided by problem identification and carefully managed and monitored for effectiveness. Adequate resources should be devoted to the problem, and the costs should be borne, to the extent possible, by impaired drivers.

1-A: State, Local and Tribal DWI Task Forces or Commissions Advisory

States, local subdivisions and tribal governments should convene Driving While Impaired (DWI) task forces or commissions to foster leadership, commitment and coordination among all parties interested in impaired driving issues. Task forces and commissions should:

- *Enjoy active support and participation from the highest levels of leadership.*
- *Include members that represent all interested parties, both traditional and non-traditional, such as representatives of: government – highway safety, enforcement, criminal justice, liquor law enforcement, public health, driver licensing and education; business – employers and unions; the military; medical, health care and treatment; multi-cultural, faith-based, advocacy and other community groups; and as appropriate neighboring countries.*
- *Recommend goals and objectives, provide policy guidance and identify available resources, based on their wide variety of interests and through leveraging opportunities.*
- *Coordinate programs and activities to ensure that they complement rather than compete with each other.*
- *Operate continuously, based on clear authority and direction, established by law.*

Status

At the highest organization levels within the State, 13 organizations and agencies plus two federal agencies came together to form the Strategic Highway Safety Plan (SHSP) Executive Committee, which committed to review progress of SHSP goals and safety initiatives, dedicate staff to implement the SHSP, provide guidance on transportation safety issues, and ensure coordination with planning and budget processes. A 20-member steering committee led multi-disciplinary teams who developed area goals, objectives and strategies.

A primary recommendation of the “Special Management Review” for the Impaired Driving Program (June 4 – 8, 2007) was to “establish a Governor’s Task Force to obtain high level support for impaired driving issues.” Since this review, the Florida Department of Transportation (FDOT), in conjunction with the SHSP partners, have prepared an Executive Order to establish a Governor’s Traffic Safety Council. The council would support all areas of traffic safety, with impaired driving as a priority among other traffic safety issues. At the time of this assessment, the status of this task force is in limbo. The State Safety Office is working through the organization of the FDOT and the Secretary of Transportation to determine

appropriate timing and an appropriate strategy to approach the Governor to determine his support. Given other priorities within the State, including a critical budget crisis, it is not determined as to when or how this approach will be made.

There is a Governor's State Leadership Task Force for Reducing Underage Drinking. This task force began in 2006 and is composed of K-12 school representatives, state agencies, community prevention specialists, and enforcement. Another recommendation of the "Special Management Review" was for the State Safety Office to become a member of this task force. Membership on this task force is neither set in statute nor executive order; participation in the task force is therefore at the discretion of the Executive of the Department of Children and Families (DCF). The FDOT Safety Office is currently not a member and does not have the opportunity to participate in its activities.

The Florida Technical Advisory Committee on DUI Enforcement and Prosecution (TAC) provides an important coordinating function for impaired driving efforts in the State. The FDOT Safety Office holds meetings of this committee approximately every four months. Several subcommittees of the TAC focus on specific aspects of the impaired driving program, including:

- DUI Case Preparation;
- In-Car Video;
- Sobriety Checkpoints;
- DUI Law Update;
- Breath Testing;
- Legislative;
- Youth and Alcohol;
- Standard Field Sobriety Testing (SFST);
- Blood Alcohol Concentration (BAC) Testing; and
- Bureau of Administrative Review.

The TAC helps identify new problems and solutions, develops new legislation, monitors case development, and promotes education and enforcement waves. The TAC has also published manuals on case preparation and testimony, coordinated responses to legal challenges and addressed legislative issues. The TAC includes most of the needed partner groups to provide a comprehensive task force to support impaired driving goals and programs; however, private sector partners, public health, youth, and multi-cultural groups do not appear to be currently involved. Another primary recommendation of the "Special Management Review" for the Impaired Driving Program was to "provide direction, tasks, and assignments to the Committee." Part of this direction is provided by a "co-chair" structure in which the FDOT Traffic Safety Administrator and the Director for the Institute of Police Technology and Management (IPTM) share responsibility for the committee. In addition, various subcommittees of the committee are in the process of defining their goals and specific tasks.

Some multi-jurisdictional task forces exist in a few parts of the State which focus specifically on enforcement. These law enforcement task forces coordinate efforts across agency lines and provide mutual support to help make maximum use of limited resources and manpower. These task forces are specifically limited to enforcement and are not in place in all parts of the State.

The Department of Children and Families fund eight underage coalitions. In addition to these coalitions, there are Strategic Prevention Framework (SPF)/State Improvement Grant (SIG) grant-funded coalitions throughout the State. New coalitions are assisted by “coaches,” former successful coalition coordinators. In addition, the coalitions are working with similar deliverables for their projects, helping ensure consistency in focus and priorities.

The State has an extensive network of Community Traffic Safety Teams (CTSTs). CTSTs are locally based groups of highway safety advocates who are committed to solving traffic safety problems through a comprehensive, multi-jurisdictional, multi-disciplinary approach. Members include local city, county, state, and occasionally federal agencies, as well as private industry representatives and local citizens.

Each FDOT District has a CTST Coordinator who works closely with the CTSTs in their geographic area, and the FDOT Safety Office acts as a liaison to the District Coordinators. In addition to the individual, local teams, the CTSTs formed a statewide CTST Coalition. Since this coalition’s first meeting in 1995, it has grown to represent 62 teams in 56 counties. The CTST Coalition holds quarterly meetings to share successes, safety materials, and programs and to facilitate technology transfer among the CTSTs.

The CTSTs, SPF/SIG, and the other underage community coalitions represent a tremendous resource for the communities. The amount of coordination among them varies according to location and priority. Efforts aimed at the underage target audience would benefit from strong coordination and communication among all the local coalitions.

The State also has a Traffic Records Coordinating Committee (TRCC), organized June 2006, which consists of an Executive Board and Technical Committees. The Committee is composed of representatives from the following:

- Department of Transportation;
- Department of Health;
- Department of Highway Safety and Motor Vehicles;
- Agency for Healthcare Administration;
- Office of the State Courts Administrator;
- Florida Highway Patrol; and
- Office of Motor Carrier Compliance.

This committee would also benefit from the following partners:

- Department of Business and Professional Regulations;
- Division of Alcoholic Beverages and Tobacco;
- Bureau of Driver Education and DUI Programs and Division of Driver Services;
- Florida Office of Drug Control;
- Florida Department of Children and Families;
- Driver Training Schools;
- Insurance Companies;
- Technical Advisory Committee (TAC);

- Academic Community (University and Colleges); and
- Sheriffs and Chiefs Associations.

There are currently three technical committees:

1. The traffic records electronic data set committee,
2. The law enforcement training committee, and
3. The geographic information system committee.

The TRCC operates under a Charter signed by the Executive Board which defines the committee's mission, purpose, governance, and membership. FDOT provides staff support for the Executive Board, the FDOT Director of the Safety Office serves on the Executive Board, and a staff member of the Safety Office serves as the Chair of the Law Enforcement Training Committee. The TRCC provides important coordinating, planning, and advisory functions which are critical to achieving improvements in the traffic records system.

Recommendations

- **Establish an executive level Governor's Traffic Safety Council with impaired driving as the highest council priority.**
- Continue to support the Technical Advisory Committee on DUI Enforcement and Prosecution, to provide on-going support to all DUI programs and issues.
- Expand the Technical Advisory Committee on DUI Enforcement and Prosecution to include those groups which are not currently represented, including but not limited to private sector partners, public health, youth, and multi-cultural groups.
- Develop specific goals, objectives and activities for the Technical Advisory Committee on DUI Enforcement and Prosecution and its subcommittees.
- Include FDOT State Safety Office in the Governor's State Leadership Task Force for Reducing Underage Drinking.
- Expand law enforcement task forces to provide coverage across the State.
- Enhance coordination among the local traffic safety and prevention coalitions, particularly regarding efforts on behalf of underage drinking prevention.
- Continue to support and expand the membership of the Traffic Records Coordinating Committee.

1-B: Strategic Planning

Advisory

States should develop and implement an overall plan for short and long term impaired driving activities. The plan should:

- *Be based on careful problem identification that uses crash, arrest, conviction, driver record and other available data to identify the populations and geographic areas most at risk.*
- *Allocate resources for countermeasures determined to be effective that will impact the populations and geographic areas most at risk.*
- *Include short-term objectives and long-range goals.*

Status

The “Florida Strategic Highway Safety Plan” (SHSP) was completed September 2006 by the Florida Department of Transportation in partnership with 12 additional organizations and agencies, including:

- Florida Department of Education;
- Florida Department of Health;
- Florida Department of Highway Safety and Motor Vehicles;
- Florida Highway Patrol;
- Florida Operation Lifesaver;
- Florida DOT Office of Motor Carrier Compliance;
- Metropolitan Planning Organization Advisory Council;
- Florida Police Chiefs Association;
- Florida Sheriffs Association;
- Federal Highway Administration;
- Federal Motor Carrier Safety Administration; and
- National Highway Traffic Safety Administration (NHTSA).

These organizations formed the SHSP Executive Committee that committed to review progress of SHSP goals and safety initiatives, dedicate staff to implement the SHSP, provide guidance on transportation safety issues, and ensure coordination with planning and budget processes.

Under the SHSP process, based on analyses of the percentage of fatalities and serious injuries over a five-year period, alcohol impaired driving was selected as one of ten “countermeasure areas,” ranking 8th out of the ten top areas and was subsequently selected as one of nine “emphasis areas.” However, in subsequent deliberations by the SHSP Steering Committee, impaired driving was not included in SHSP consideration as it was believed that this issue was “addressed in a comprehensive manner through other programs.” The Executive Committee then chose to focus efforts and resources for the following five years on four emphasis areas:

- Aggressive driving;
- Intersection crashes;
- Vulnerable road users (pedestrians, bicyclists, and motorcyclists) and
- Lane departure crashes.

To recognize the importance of impaired driving, alcohol issues were categorized as one of three “continuing priorities areas,” along with occupant protection and traffic data; but no SHSP goals, objectives, activities or resources for impaired driving have been identified.

The Alcohol Program Area is a key component of the “Highway Safety Performance Plan” (HSPP). This Plan is developed by the Florida Department of Transportation (FDOT) Safety Office using a six-point approach:

- Analyzing data from the “Highway Safety Matrix”;
- Reviewing statistics from the annual Department of Highway Safety and Motor Vehicles “Traffic Crash Facts” book;
- Reviewing data from the annual Florida Uniform Traffic Citation Statistics report;
- Meeting with advisory groups, including the Technical Advisory Committee on DUI Enforcement and Prosecution;
- Reviewing the results of public opinion and observational surveys; and
- Utilizing the knowledge and experience of Traffic Safety Section staff.

[The “Highway Safety Matrix” is an analysis of the relative degree of traffic safety problems overall and in six safety program areas. The “Matrix” provides fatality and injury rankings of cities and counties divided into three population groups. These rankings are used to assist in determining which agencies will receive funding.]

For the FDOT federally-funded highway safety impaired driving program, rankings of locations are based only on alcohol crash data. It could be helpful to develop rankings of locations based on other related data, such as citation or conviction data, to also assist with identifying high priority areas of the State.

The FY 2008 HSPP provides 10-year trend data for impaired driving and establishes three short-term goals:

1. To reduce alcohol fatalities to 1,070 annually by December 31, 2008.
2. To reduce the alcohol related fatality rate to 33.0 percent annually by December 31, 2008.
3. To reduce the alcohol related fatality rate per 100 million vehicle miles traveled (VMT) to 0.56 by December 31, 2008.

Short term goals are limited to fatalities, with no goals presented for injuries, for priority target audiences such as those who are underage, or for important components of an impaired driving system, such as reducing BAC, increasing citations, and increasing convictions.

Project selection is based primarily on the results of a review conducted by a designated Traffic Safety Program (TSP) planner. Proposals known as “concept papers” are submitted to the TSP and reviewed for the following:

- Whether it is a continuing or new request;
- If it satisfies a specific traffic safety need;
- If it supports the goal for the program area; and
- Past funding history of the requesting agency.

Proposals are ranked within each program area. Requests from agencies ranked in the top 25 percent of the “Highway Safety Matrix” for the specific program area are given priority for funding.

A Traffic Records Assessment, conducted in June 2006, recommended the development of a strategic plan for the traffic records system. A “Traffic Safety Information System Strategic Plan” was completed and adopted by the Traffic Records Coordinating Committee (TRCC). This plan presents a comprehensive and well-defined approach to creating improvements in traffic records, including mission, purpose, goals and objectives, and recommended projects with estimated cost per project for FY 2008 and FY 2009. Along with other components of a traffic safety program, the impaired driving program would benefit from traffic records enhancements that would result in greater timeliness, accuracy and completeness, access, and use in planning.

Recommendations

- **Develop and implement a comprehensive strategic plan specifically for impaired driving with well-defined, short and long-range impaired driving target goals for all areas of an impaired driving program including, but not limited to:**
 - **A targeted reduction in impaired driving crashes, injuries, and fatalities;**
 - **A targeted reduction in average BAC;**
 - **A targeted increase in DUI arrests and convictions; and**
 - **A targeted reduction in underage involvement in DUI crashes.**
- Elevate impaired driving to “emphasis area” status of the State Highway Safety Plan (SHSP) and take advantage of the resources available through on-going SHSP processes.
- Analyze data from multiple sources to identify target population groups and priority locations.
- Prioritize and implement the recommendations of the “Traffic Safety Information Strategic Plan.”

1-C: Program Management

Advisory

States should establish procedures to ensure that program activities are implemented as intended. The procedures should provide for systematic monitoring and review of ongoing efforts to:

- *Designate a lead agency that is responsible for overall program management and operations.*
- *Ensure that appropriate data are collected to assess program impact and evaluation.*
- *Measure progress in achieving established goals and objectives.*
- *Detect and correct problems quickly.*

Status

Department of Transportation (FDOT) serves as the lead agency responsible for overall program management and operations of the Traffic Safety Program (TSP). Within FDOT, the TSP resides within the State Safety Office, managed by the Chief Safety Officer. FDOT is a decentralized organization operating through seven district offices and Florida's Turnpike Enterprise. The designated Governor's Highway Safety Representative is the FDOT Assistant Secretary, Engineering and Operations. This Secretary is one of three assistant secretaries who report to the Transportation Secretary who is appointed by and reports to the Governor.

TSP is responsible for coordinating and administering the traffic safety program. To carry out these responsibilities, TSP will:

- Develop and administer the annual State Highway Safety Plan;
- Manage traffic safety projects in federally designated priority program areas and in other areas as may be assigned or as determined by problem identification processes;
- Provide oversight to districts and assist them in the development and implementation of traffic safety projects at the local level;
- Develop statewide traffic safety policies and procedures using input from district, division, and others;
- Communicate and coordinate activities with the districts;
- Provide state agency and federal liaison;
- Ensure compliance with state and federal regulations;
- Administer traffic safety evaluation and research;

- Provide legislative information on traffic safety issues;
- Review, approve, and execute grants, contracts, and subcontracts;
- Approve subcontracts or process them for federal approval;
- Provide operational oversight to assure conformity with program and project management policies and procedures; and
- Monitor the activities, results, and expenditures of approved state agency grants.

Day-to-day operations of the traffic safety program are conducted by the TSP. The Program is led by the Traffic Safety Administrator. According to the TSP organizational chart, the section includes one Financial Specialist, five Traffic Safety Specialist positions, plus consultant positions for law enforcement liaisons and a Traffic Records Coordinating Committee coordinator.

A primary recommendation of the “Special Management Review” for the Impaired Driving Program (June 4 – 8, 2007) was that the State Safety Office employ an experienced, full-time Impaired Driving Coordinator and an assistant. The office recently hired a Traffic Safety Specialist. The Specialist has considerable grant management experience but not specifically with Impaired Driving Programs.

In addition to the Traffic Safety Specialist for the Impaired Driving Program, other positions critical to the operations of the Traffic Safety Program have been filled within the last two to three years, including the Chief Safety Officer and the Traffic Safety Administrator. In addition, the section has recently undergone considerable turnover, including replacement of the Financial Specialist and the recent loss of two Law Enforcement Liaisons (LELs). At the time of this assessment, half of the LELs (three LELs plus the LEL supervisor) positions were vacant. In addition, the position for consultant to serve as the Traffic Records Coordinating Committee Coordinator was recently filled. Thus, the TSP has been and will potentially continue to operate with new and relatively inexperienced personnel.

According to the “Traffic Safety Program Manual,” currently in draft form, the Highway Safety Performance Plan (HSPP) is developed through a series of internal meetings within the TSP. The first several meetings are attended by TSP staff only. These initial internal meetings allow for the review of previous year comments (by National Highway Traffic Safety Administration and Federal Highway Administration), staff assignments, and the production of rough drafts for each program area. Once drafts are produced, the meetings are expanded to include other FDOT partners for solicitation of comments. NHTSA and the FHWA are invited and encouraged to attend all meetings and make recommendations, as necessary.

Information about the TSP and development of the HSPP is communicated to existing and potential sub-grantees through discussions from the traffic safety specialists and presentations by the Chief Safety Officer, Traffic Safety Administrator, and other staff. This development process does not include a general publication of a Request for Proposals or other similar

publication which communicates goals and priorities, objectives, funding available, potential activities, and guidelines specific to the different program areas, including the impaired driving program. Highway Safety Concept Paper Guidelines, selection criteria, and lists of items eligible for funding are available within the published, online “Highway Safety Concept Paper Instructions.”

The FDOT Safety Office web site at <http://www.dot.state.fl.us/Safety/> provides general information on the functions of the office, including important information, instructions and forms for the development and implementation of the Traffic Safety Program. This web site does not provide program goals or objectives. Documents that would be helpful to understand the purpose, scope, and operation of the program, such as the “Highway Safety Performance Plan” (HSPP) and “Annual Report,” do not appear to be available from this site. Documents needed for a sub-grantee to be considered for funding and project administration (concept paper instructions, concept paper form, and reimbursement forms) are available online, but are not easily found on this site and are not currently available for online submission.

Overall, the HSPP development process and the current strategies for communicating that process do not provide existing or potential sub-grantees an open, easily understood, and easy to use mechanism to participate in the Traffic Safety Program. The absence of projects in the initial FY 2008 HSPP to make use of \$5.9 million in Section 410 funds may be one of the significant results of the current approach to HSPP development. These funds are a tremendous resource to the state and need to be planned and allocated to projects to meet the numerous unmet needs throughout the DUI system. The current development process and means of communication may also be the sources of some of the confusion, frustration, and misunderstanding of how the Program operates as expressed by various presenters during the course of this assessment.

Information within the draft “Traffic Safety Program Manual” addresses a portion of this problem by defining criteria and a scoring system with which program managers are to evaluate project concept papers, describing steps in the development of a traffic safety project, and defining eligible costs. This manual is currently in development.

The draft “Traffic Safety Program Manual” lists several potential data sources to be considered in program development, including but not limited to:

- Florida Traffic Crash Information;
- Florida DWI Report;
- Occupant Protection Reports;
- Community profiles, including crash and DWI arrest statistics;
- Annual Planning Reports;
- Statewide assessments, including NHTSA sponsored assessments;
- FARS Reports; and
- CDC Reports and data.

Florida uses a data matrix system whereby cities and counties are ranked according to crash fatalities and injuries within program areas. This ranking then helps determine priorities areas for grant funding. The matrix system tends to be limited in two significant ways:

1. For impaired driving projects, matrices from total fatalities and injuries and DUI fatalities and injuries only are largely used; no other DUI data sources are provided in this system; and
2. Numbers rather than rates are used, resulting in the largest population areas within their groupings consistently given priority for funding.

For impaired driving programs, it is not completely clear as to how data other than crash fatalities and injuries are to be considered in problem identification, project development or project selection.

To detect and correct problems quickly, draft procedures include specific information on project monitoring. These procedures require that program managers will monitor the grantee’s performance. Monitoring can be accomplished by on-site visits, telephone contact, or written reports.

Chapter 6 of the draft manual defines in detail the types, frequency, personnel involved, and other requirements of grant monitoring. For example, the following table describes the frequency and type of monitoring to perform on a particular project during the grant year:

Dollar Thresholds	Informal Monitoring	Periodic Review Meetings	Required Formal Site Visit
Up to \$19,999	As necessary	1 or more as needed	1 Formal On-Site Visit Annually
Over \$20,000 Up to \$99,999	Monthly	2 or more as needed	2 Formal On-Site Visits Annually
Over \$100,000	Bi-Monthly	2 or more as needed	3 Formal On-Site Visit Per Quarter

Evaluation and the measurement of program process will be discussed in the “Evaluation” section of this report.

Recommendations

- Use all available means, such as training, conferences, and project visits, to bring new Traffic Safety Program staff “up to speed” on program operations, and impaired driving issues and programs as quickly as possible.

- **Develop and implement a plan of projects to make best use of available Section 410 funds**
- **Fill open positions, particularly the Law Enforcement Liaisons, as quickly as possible.**
- **Complete and market the “Traffic Safety Program Manual.”**
- **Increase understanding of and participation in the Traffic Safety Program through widespread communication of the program, including its goals and objectives, funding available, results, and opportunities.**
- Enhance the existing State Safety Office web site to better meet the needs of users to include, but not be limited to,
 - Posting of important Traffic Safety Program documents (e.g., “The Highway Safety Performance Plan” and the Traffic Safety Program “Annual Report,” and Strategic Plans.)
 - Creation of program forms such as proposals that can be submitted online; and
 - Easy access to resources (e.g., personnel, data, legislation, position papers, concept papers, etc.) on impaired driving issues.
- Develop and issue a call for proposals for impaired driving projects that communicates clear goals and objectives, priorities for types of activities to be funded, specific deadlines and requirements for completion, and criteria for selection.
- Use data sources and analysis procedures in addition to crash data in problem identification, project development, and project selection for impaired driving.

1-D: Resources

Advisory

States should allocate sufficient funding, staffing and other resources to support their impaired driving programs. Programs should aim for self-sufficiency and, to the extent possible, costs should be borne by impaired drivers. The ultimate goal is for State impaired driving programs to be fully supported by impaired drivers and to avoid dependence on other funding sources. States should allocated funding, staffing and other resources to impaired driving programs that are:

- *Adequate to meet program needs and proportional to the impaired driving problem.*
- *Steady and derived from dedicated sources, which may include public or private funds.*
- *Financially self-sufficient, and to the extent possible paid by the impaired drivers themselves. Some States achieve financial self-sufficiency using fines, fees, assessments, surcharges or taxes. Revenue collected from these sources should be used for impaired driving programs rather than returned to the State Treasury or General Fund.*

Status

According to the “FY2008 Highway Safety Performance Plan,” (HSPP) the Florida Department of Transportation (FDOT) Traffic Safety Program (TSP) operates a program including federally-funded budget of approximately \$32.8 million. For alcohol program efforts, this total includes approximately \$1.9 million in federal Section 402 funds, \$8.4 million in federal section 410 (K8) funds, and \$766 thousand in federal 410 (J8) funds. Of all federal funds available, these amounts total over \$11.1 million and represent 33.8 percent of all federal funds planned. This proportion does not take into account those activities and projects which also support impaired driving efforts, but are funded from other accounting categories, such as planning and administration, community traffic safety program projects, paid media, and police traffic services. The alcohol-specific (AL) amounts also represent only federal funds and do not represent the considerable dedication of state funds to fight impaired driving. Therefore, the overall financial commitment of the TSP to alcohol programs is significant and considerably greater than is evident at first glance.

\$5.9 million of Section 410 (K8) was dedicated in the FY2008 HSPP to “New DUI Programs/To be determined.” Since the initial development of the HSPP, the TSP has been working on committing these funds to impaired driving projects. This amount represents a significant source of money that has gone untapped.

At the time of this assessment, it was unknown whether the State would be able to qualify for additional Section 410 funds for FY 2008. The State must meet five criteria in order to qualify. One criterion calls for the State to legislatively redefine “high risk” driver from a 0.20 BAC to a 0.15 BAC for purposes of enhanced penalties. Recently passed legislation may not meet this criterion, to be determined by the National Highway Traffic Safety Administration. One other criterion requires a comprehensive underage drinking prevention program. Discussion of the

existing program being conducted by the Division of Alcoholic Beverages and Tobacco indicates that, with the addition of an education component, the State might be able to meet this criterion.

In addition to dedicated federal funds, state funds provide ample support to impaired driving projects. Almost \$2.0 million in state funds was planned for FY 2008 to match federal Section 410 (J8) funds, and almost \$2.8 million in state funds was planned for FY 2008 to match federal Section 410 (K8) funds. Though these funds represent Florida Highway Patrol DUI enforcement and therefore are not available to TSP-funded projects, they represent a significant commitment by the State to reducing impaired driving.

On the state level, another positive example of dedicated resources is the Division of Alcoholic Beverages and Tobacco (ABT) in the Department of Business and Professional Regulation. Programs conducted by this Division, including taxation and regulation of the alcoholic beverage and tobacco industries, are fully-funded by a state trust fund; ABT is independent of and actually contributes to the State's General Revenue Fund.

The above funds also do not represent the largely undocumented commitment of State, local and non-profit funds to impaired driving program efforts. Extensive commitment of various organizations, such as MADD, State and local agencies, to enforcement, prosecution, adjudication, prevention, emergency medical services, and education provide untold amounts to the overall effort in the State to reduce impaired driving and its effects.

Unfortunately, there are not many examples of programs or projects that can be considered financially self-sufficient, i.e., they are independent of federal traffic safety funds or general revenue and preferably supported by taxes, fines, or user fees.

The DUI Court in Polk County is an example of a self-sufficient program. This program includes fines and fees assessed to the clients who go through the DUI Court, including the probation and treatment required by the program.

To help achieve self-sufficiency, the Office of Drug Control is working with local underage coalitions and alcohol coalitions to develop and implement strategies for revenue development.

The TSP is strictly prohibited from accepting anything from any entity or anyone who is doing or might do business with FDOT. This prohibition effectively prohibits TSP from accepting any direct contributions for any impaired driving efforts. This prohibition does not preclude business or organizations from contributing, however. Local coalitions and community traffic safety teams can and do work with local businesses and other organizations to generate contributions which may include such items as a room and coffee for coalition meetings, food for officers conducting sobriety checkpoints, and handout items for safety fairs. The full extent of these contributions is unknown.

According to several presenters during the assessment, state funding has reached a critical level. Significant budget reductions were variously described as a major crisis and a huge issue. The current political environment is strongly opposed to any tax increases. For those programs which are fee-based, budget cuts have been compounded by fee structures which have remained

the same for ten or more years. Several presenters anticipate staff cutbacks, stressing personnel who are already over-loaded. Buying, upgrading or replacing existing equipment will be difficult for many agencies.

Recommendations

- Complete the planning and implementation of projects to make use of available Section 410 funds.
- **Complete the necessary components to meet the criteria to continue to qualify for Section 410 funds.**
- Adopt methods to achieve a level of self-sufficiency for impaired driving programs which have proven successful in other states, such as the New York “Stop DWI” program and New Mexico’s fine system.
- Share Office of Drug Control and underage coalition-developed self-sufficiency strategies with other coalitions, groups, and programs.
- Replicate the DUI Court model for self-sufficiency.
- Encourage corporate/business sponsorships and support of events, programs, and campaigns.

1-E. Data and Records

Advisory

States should establish and maintain records system that uses data from other sources (e.g., U.S. Census, Fatality Analysis Reporting System (FARS), Crash Outcome Data Evaluation System [CODE]) to fully support the impaired driving program, and that is guided by a statewide traffic records coordinating committee that represents the interests of all public and private sector stakeholders and the wide range of disciplines that need the information.

Status

Florida does not have a functional comprehensive statewide Injury Surveillance System although there are several key components with varying degrees of maturity and functionality within the state. These key components are:

- a. The Florida Department of Health (FDOH), Division of Emergency Medical Operations DEMO) which provides regulatory oversight for EMS and Trauma Systems;
- b. The FDOH Office of Vital Records which maintains mortality data, and
- c. The Florida Agency for Health Care Administration (FAHCA), State Center for Health Care Statistics (SCHCS) which is the hospital discharge and Emergency Department data repository.

The Traffic Records Assessment completed in June, 2006 and Traffic Safety Information System Strategic Plan completed May 2008 provides an excellent framework to identify data gaps and areas that can be improved to fully support data needs for an effective impaired driving program.

Recommendations

- Identify additional public and private sector stakeholders who can more effectively use the data to identify driving under influence problems.
- Continue the implementation of Traffic Safety Information Strategic Plan components related to impaired driving.

1-F: Communication Program (see Section IV)

Advisory

States should develop and implement a comprehensive communication program that supports priority policies and program efforts.

Further details regarding the Communications Program can be found in Section IV.

II. PREVENTION

Prevention programs should aim to reduce impaired driving through approaches commonly associated with public health – altering social norms, changing risky or dangerous behaviors, and creating safe environments. Prevention programs should promote communication strategies that highlight and support specific policies and program activities, and promote activities that educate the public on the effects of alcohol and other drugs, limit the availability of alcohol and other drugs, and discourage those impaired by alcohol and other drugs from driving.

Prevention programs may include responsible alcohol services practices, transportation alternatives, and community-based programs carried out in schools, at work sites, in medical and health care facilities and by community coalitions. Programs should prevent underage drinking and drinking and driving for persons under 21 years of age, and should prevent over-service and impaired driving by persons 21 or older.

Prevention efforts should be directed toward populations at greatest risk. Programs and activities should be science-based, determined to be effective, and include a communication component.

2-A: Responsible Alcohol Service

Advisory

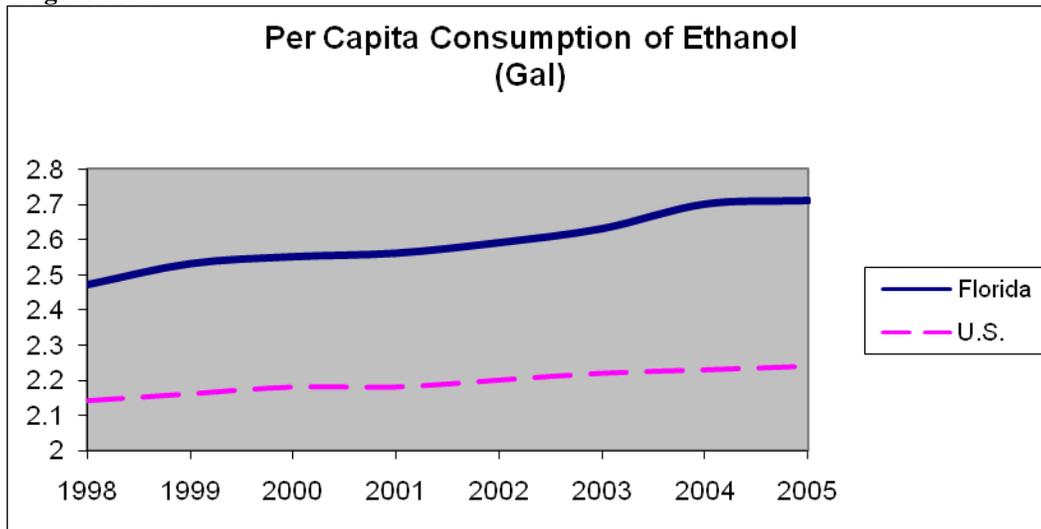
States should promote policies and practices that prevent underage drinking by persons under 21 years of age and over-service to persons 21 and older. States should:

- *Adopt and enforce programs to prevent sales or service of alcoholic beverages to persons under the age of 21. Conduct compliance checks and “shoulder tap” activities and support the proper use of technology in alcohol retail establishments, particularly those catering to youth, to verify proper and recognize false identification.*
- *Adopt and enforce alcohol beverage control regulations to prevent over-service. Prohibit service to visibly intoxicated patrons, restrict alcohol sales promotions (such as “happy hours”), limit hours of sale, establish conditions on the locations of establishments to limit impaired driving (e.g., zoning restrictions) and require beer keg registration.*
- *Provide adequate resources (including funds, staff, and training) to enforce alcohol beverage control regulations. Coordinate with traditional State, county, municipal and tribal law enforcement agencies to determine where impaired drivers had their last drink and use this information to monitor compliance with regulations.*
- *Promote responsible alcohol service programs, written policies, and training.*
- *Encourage alcohol sales and service establishments to display educational information to discourage impaired driving and to actively promote designated driver and alternative transportation programs.*
- *Provide that commercial establishments and social hosts may be held responsible for damages caused by a patron or guest who was served alcohol when underage or visibly intoxicated.*

Status

According to the National Institute on Alcohol Abuse and Alcoholism (NIAAAA) per capita consumption of alcohol in Florida (2005) was well above the national average. Alcohol consumption in Florida was the equivalent of 2.71 gallons of ethanol per capita compared to the national average of 2.24 gallons. Nationally, and in Florida, alcohol consumption has been increasing steadily for several years. However, alcohol consumption in Florida (see fig. 2-a-1) has outpaced the national trend. Per capita consumption estimates are based on taxed sales of alcoholic beverages¹.

Figure 2-a-1



Florida is a license state, that is, retail outlets for on- and off-premise sales of alcohol are licensed by the State. Florida state excise taxes on beer and wine are significantly below the national average while distilled spirits are taxed at a rate higher than the national average (see table 2-a-1). No part of the alcohol tax is dedicated to impaired driving or other alcohol abuse prevention or treatment.

Table 2-a-1 Beverage Tax/Gallon

Beverage	U.S.	Florida
Beer	\$.581	\$.480
Wine	\$1.70	\$1.07
Distilled Spirits*	\$3.50	\$4.28

* Based on license states only

¹ Per capita consumption estimates for Florida must be used with caution because Florida is the largest tourist destination in the world with an estimated 78 million visitors each year. Consumption rates are based on resident population.

The Division of Alcoholic Beverages and Tobacco (ABT) licenses the alcoholic beverage and tobacco industries, collects and audits taxes and fees paid by the licensees, and enforces the laws and regulation of the alcoholic beverage and tobacco industries, pursuant to Chapter 210, Chapters 561-565 and Chapters 567-569 of Florida Statutes. Florida has approximately 72,000 active alcoholic beverage and tobacco license holders. In Fiscal Year 04-05, the division generated over \$1.13 billion in license fees, taxes, fines, etc. With over 372 employees, these responsibilities are carried out through three bureaus within the division: Licensing, Auditing, and Enforcement.

Florida's three-tier system provides that licensees may only hold licenses within one tier of the system, either as a manufacturer, distributor, or vendor; although Florida law permits Florida wineries to hold a license in more than one tier. Section 561.14, Florida Statutes, provides that manufacturers of alcoholic beverages must be licensed as manufacturers. Distributors must be licensed and may purchase alcoholic beverages from manufacturers to sell to retail vendors only. A retail vendor must be licensed and may sell alcoholic beverages to consumers 21 years of age or older.

Florida's Beverage Law prohibits any person from holding a license at any tier if he or she "has been convicted within the last past 5 years of any offense against the beverage laws of this state, the United States, or any other state; who has been convicted within the last past five years in this state or any other state or the United States of soliciting for prostitution, pandering, letting premises for prostitution, or keeping a disorderly place or of any criminal violation of chapter 893 or the controlled substance act of any other state or the Federal Government; or who has been convicted in the last past 15 years of any felony in this state or any other state or the United States" Section 561.15, Fla. Stat. That same prohibition applies to a corporation where any of its officers have been convicted of any of the offenses listed above.

Florida's legal drinking age is 21, and Florida's Beverage Law makes it "unlawful for any person to sell, give, serve, or permit to be served alcoholic beverages to a person under 21 years of age" Section 562.11, Fla. Stat.

It is illegal to sell alcoholic beverages without a license or, in the case of licensees, to sell alcoholic beverages except as permitted by his or her license. Section 562.12, Fla. Stat. It is also illegal to sell any intoxicating liquors, wines, or beer in any county that has voted against the sale of such beverages. Section 568.02, Fla. Stat.

The Bureau of Law Enforcement within ABT is responsible for the management of ABT's law enforcement and investigation programs. These responsibilities include:

- Conducting license discipline investigations;
- Providing guidance, direction and leadership to licensees;
- Conducting criminal investigations pursuant to beverage and cigarette laws and statutes;
- Completing the Responsible Vendor Qualification Checklist; and
- Determining the need for using extraordinary emergency suspension powers when a business licensed by ABT has become an immediate danger to the health, safety, and welfare of Florida's citizens.

One of the core missions of the Division of Alcoholic Beverages and Tobacco is to keep alcohol and tobacco out of the hands of underage people. In keeping with this mission, the Division is devoting more resources to the prevention of alcohol and drug abuse, especially among the underaged. ABT works with local substance abuse coalitions to implement prevention programs. A significant underage drinking issue for Florida is the annual influx of thousands of college students, most of whom are younger than 21 years old, for Spring Break. ABT issues citations for underage possession, but the scope of the problem is beyond the resources of ABT and local law enforcement.

The ABT has created a resource center to help people find useful and educational information on how to prevent, cope with, and eliminate drug and alcohol abuse. It is the ABT's hope that in viewing this material, people will join in the ABT mission to prevent alcohol and drug abuse. The ABT, Bureau of Law Enforcement, offers training and services to vendors. Persons can contact the local ABT office to request training regarding Identification Fraud Training, Identifying Contributors to Alcohol Related Events Training, or education and training on sales of alcohol and tobacco to underage person.

Server training is not mandatory in Florida. However, Responsible Vendor Training is a program offered to servers at bars and restaurants. Private vendors who present course materials and encourage good management policy formation provide instruction. Vendors learn the laws and policies regarding serving underage patrons and serving intoxicated patrons. The effects of the training include fewer underage sales of alcohol, fewer DUI fatalities, and more increased compliance with state statutes on the part of servers, who are more professional and knowledgeable when serving alcohol to patrons. Vendors who successfully complete training and maintain compliance may receive a reduction in their liability insurance premiums. Licensed alcohol retailers who are cited for violations of beverage control laws may use completion of Responsible Vendor Training as a mitigating factor in sanctions.

The Florida Statutes that pertain to Responsible Vendor Training are Sections 561.701, 561.702, 561.703, 561.705, and 561.706. ABT personnel use a Responsible Vendor Qualifications Checklist to determine the degree to which a licensed vendor meets the qualifications described in Section 561.705, Florida Statutes.

There are several designated driver programs in the State including:

- Florida Doctors,
- Florida Marlins,
- South Florida Fairgrounds' Budweiser Designated Driver Program, and
- Florida Gulf Coast University students' Eagles Rise for Sober Rides.

Florida has Dram Shop and Social Host Liability laws which hold the bars or restaurants responsible for property damage, injuries, and/or death caused by the impaired or underage drivers if the bar or restaurant knowingly serves an underage or any alcohol impaired driver and that driver later causes a serious injury. Social hosts are held liable by the same law in the same way. If a private party makes alcohol available to minors or the habitually addicted, the host can be held responsible for any injuries that result.

Florida does not restrict alcohol promotions such as Happy Hours, two-for-one or ladies nights.

Florida does not have a keg registration program; although one county has enacted a local ordinance for such a program which is currently being challenged.

Recommendations

- Enact legislation for statewide keg registration.
- Enact restrictions on alcohol promotions such as Happy Hours, two-for-one and ladies nights.

2-B: Transportation Alternatives

Advisory

States should promote alternative transportation programs that enable drinkers 21 and older to reach their destinations without driving. States should:

- *Actively promote the use of designate driver and safe ride programs, especially during high-risk times, such as holidays or special events.*
- *Encourage the formation of public and private partnerships to financially support these programs.*

Status

Pedi-cab or Pedalcab is a two or three-wheeled bicycle-drawn articulated cab hitched either at the seatpost or near the bike's rear axle. The bike cabs shuttle passengers to and from their cars, to their home or hotel after drinking, between shops, restaurants, attractions or clubs and give tours or "cruises." The cost: whatever it's worth to the passengers. Tips are frequently negotiated before embarking on long rides. These are found in the Orlando, West Palm Beach, Delray, Gainesville, Ft. Lauderdale, Jacksonville, Key West and other high tourist areas.

Throughout Florida a number of programs offer free rides to individuals who have had too much to drink. Various taxi services, wrecker companies, and other businesses may offer such services to keep impaired drivers from getting behind the wheel.

The Florida Highway Patrol supports the "Tow To Go" Program. AAA and Budweiser partner to provide free rides to guests who have had too much to drink. "Tow To Go" provides private party goers and licensed establishments a way to get people home safely. Adults in need of a ride can call 1-800-AAA-HELP. AAA will dispatch a tow truck and will take both the driver and the vehicle home, free of charge. This service is available throughout Florida to both AAA members and non-members. "Tow to Go" removes the number one excuse for drunk driving - the intoxicated motorist not wanting to leave their car - by not only taking the driver home safely, but also their vehicle home safely too.

BACCHUS, SADD, and MADD espouse a "no use" policy for those who are underage. However it is understood that some college campuses offer free-ride home programs for students, including those under age 21. These programs create a problematic contradiction of potentially enabling underage students to drink while aiming to increase the safety of those students who choose to do so.

The use of a designated driver has become warped into choosing the individual considered to be the least drunk as the designated driver versus selecting an individual who chooses not to drink as the group's designated driver. Use of a designated driver may also unintentionally encourage passengers to drink more than they might otherwise.

There are 27 local transit systems operating within the State, including one of the largest in the country -- Miami-Dade County Transit with more than 100 bus routes and 22 miles of rapid transit. Metrorail operates from 5 a.m. to midnight, seven days a week. Service may be extended one hour after the end of downtown Miami special events. This service provides a reasonable and low cost alternative to individual driving within the Miami metro area. Unfortunately, this accessibility to rail transportation is extremely limited; most public transit systems are most readily available during the workday, discontinuing service much earlier in the day and offering only limited service on weekends.

The Florida Department of Transportation (FDOT) Transit Office provides planning, grants administration, and operations assistance to the various transit systems within the State. The mission of this office is to "identify, support, advance and manage cost effective, efficient and safe transportation systems and alternatives to maximize the passenger carrying capacity of surface transportation facilities." The accessibility of the Transit Office to the Safety Office, both within FDOT, may create an opportunity for partnering.

Recommendations

- Assure that designated driver programs stress no alcohol for the designated driver.
- Assure that both designated driver and safe ride programs avoid any consumption by underage individuals or unintentional enabling of over-consumption.
- Continue to support "no use" messages, over consumption messages, and programs for those who are underage.
- Establish a partnership between public transportation and traffic safety to identify and implement opportunities where transit can assist with safe rides home.

2-C: Community-Based Programs

Community-based programs implement prevention strategies at the local level through a variety of settings, including in partnerships involving traffic safety, schools, employers, medical and health care professionals and community coalitions and traffic safety programs.

2-C-1: School

Advisory

School-based prevention programs, beginning in elementary school and continuing through college and trade school, can play a critical role in preventing underage drinking and impaired driving. These programs should be developmentally appropriate, culturally relevant and coordinated with drug prevention and health promotion programs. States should:

- *Implement K-12 traffic safety education, with appropriate emphasis on underage drinking and impaired driving, as part of a comprehensive health education program.*
- *Promote alcohol-and drug-free events throughout the year, with particular emphasis on high-risk times, such as homecoming, spring break, prom and graduation.*
- *Establish and support student organizations that promote traffic safety and responsible decisions; encourage statewide coordination among these groups.*
- *Provide training to school personnel (such as resource officers, health care providers, counselors, health educators and coaches) to enable them to provide information to students about traffic safety and responsible decisions, and identify students who may have used alcohol or other drugs (Drug Impairment Training for Education Professionals).*
- *Encourage colleges, universities and trade schools to establish and enforce policies to reduce alcohol, other drug, and traffic safety problems on campus, and to work with local businesses and law enforcement agencies to reduce such problems in neighboring communities.*

Status

According to the Florida Youth Substance Abuse Survey (2006), alcohol is the most commonly used drug among Florida students. Across all seven surveyed grades, 56.1 percent reported lifetime use and 32.0 percent reported past-30-day use. Nearly one in four (23.0 percent) Florida high school students reported consuming five or more drinks on one or more occasion in the last two weeks.

Florida does not have a universal K-12 impaired driving, traffic safety or substance abuse curriculum. However, the Florida Department of Education is currently revising academic standards and will address this. Proposed Health Literacy Concept and Responsible Behavior Standards include benchmarks related to alcohol and injury prevention, but do not specifically address impaired driving.

Florida has a variety of school-based prevention programs. One of these programs is Students Against Destructive Decisions (SADD). The purpose of FLORIDA SADD is to encourage middle school and high school students to make positive decisions for safe, healthy, and substance-free lifestyles. They do this by supporting and providing materials to over 350 SADD chapters in middle and high schools in Florida.

SADD promotes a No-Use message -- no alcohol, no tobacco, and no illegal substances -- through positive peer pressure, support, and activism. Peer pressure is known to have a significant influence on the decisions made by teens today. Establishing and maintaining a FLORIDA SADD chapter is one way of providing a group environment that encourages a healthy lifestyle through positive peer pressure and support.

FLORIDA SADD chapters sponsor awareness campaigns at sporting events, theatrical productions, and other sponsored activities at their schools. These campaigns make students, faculty, parents, and the community-at-large aware of the problems associated with underage drinking, drinking and driving, and many other issues relevant to teens today.

FLORIDA SADD works in cooperation with state agencies, local school districts, law enforcement agencies, and many other state and community-based organizations. The State Safety Office has supported SADD with grant resources for over 20 years. The collaboration and cooperation between the many state and community-based organizations enhances the "Triangle of Caring," which is comprised of school, home, and community.

The FLORIDA SADD Student Advisory Board (SAB) was created in 1996 to assist the FLORIDA SADD State Coordinator in maintaining an open line of communication between the over 350 SADD chapters in Florida and the FLORIDA SADD office.

Florida's Mother's Against Drunk Driving MADD, another community-based partnership with concerned youth, adults, and law enforcement to combat underage drinking, is strong in Florida and is continuing to grow. MADD Florida has four Youth in Action (YIA) teams and several more in the development and training phases. Since 2004, MADD Alcohol Education for High School, an online prevention program for high school students, new drivers and youth alcohol offenders has been available.

The BACCHUS Network is a university and community-based network focusing on comprehensive health and safety initiatives. Founded at the University of Florida, the first group organized as a response to the need for alcohol awareness and abuse prevention. They chose to call themselves "BACCHUS," originally an acronym for Boosting Alcohol Consciousness Concerning the Health of University Students. The mission of BACCHUS is to actively promote student and young adult-based, campus and community-wide leadership on healthy and safe lifestyle decisions concerning alcohol abuse, tobacco use, illegal drug use, unhealthy sexual practices, and other high-risk behaviors. There are 51 BACCHUS affiliates on 43 campuses in Florida. There were 920 awareness campaigns conducted during the 2007-2008 school year and 33 affiliates conducted formal impaired driving prevention campaigns.

Mother's Against Drunk Drivers, MADDs' college initiatives, is active in Florida. MADD Florida has three UMADD programs located at the University of Western Florida (UWF), University of Florida (UF), and University of Central Florida (UCF); with two other universities in development. UMADD is a campus-based student organization comprised of student leaders concerned about underage and high-risk drinking, impaired driving, and dedicated to finding solutions.

The goals of UMADD are to:

- Prevent alcohol use for those under the legal drinking age of 21;
- Reduce and eliminate illegal and high-risk drinking behaviors for those of legal drinking age;
- Activate students to engage in effective strategies by partnering them with campus and community leaders and;
- Provide resources and assistance to campus and community law enforcement, community members, faculty and staff, and parents.

Law enforcement also reported that they conduct alcohol and drug prevention programs throughout the State as community outreach requests and through their community resource officers.

Many schools in Florida have Drug Abuse Resistance Education (D.A.R.E.) programs. Some educators have received Drug Impairment Training for Education Professionals (DITEP) through the Institute for Police Technology and Management.

There are nearly 70 Youth Courts in Florida. Youth Courts are coordinated efforts between community groups, the criminal justice system, and schools. Youth Courts provide an alternative method of providing sanctions and educational experiences for young people who commit non-violent offenses, including underage possession of alcohol. Youth Courts in some states have implemented impaired driving education as a sentencing option.

Recommendations

- Include specific impaired driving benchmarks in the revised Florida Academic Standards.
- Include impaired driving education programs in Youth Courts.
- Expand Impaired Driving Programs to all colleges and universities in Florida campuses including community colleges.
- Provide Drug Impairment Training for Education Professionals (DITEP) training to educational professionals throughout the state.

2-C-2: Employers

Advisory

States should provide information and technical assistance to employers and encourage them to offer programs to reduce underage drinking and impaired driving by their employees and their families. These programs should include:

- *Model policies to address underage drinking, impaired driving and other traffic safety issues, including safety belt use and speeding.*
- *Employee awareness and education programs.*
- *Management training to recognize alcohol and drug use and abuse, and appropriate responses*
- *Screening and brief intervention, assessment and treatment programs for employees, as appropriate, such as through an employee assistance program.*
- *Underage drinking and impaired driving prevention programs for youthful employees and programs that address use of prescription or over-the-counter drugs that cause impairment.*

Status

Florida has no employer programs specifically addressing traffic safety and impaired driving issues. However, Community Traffic Safety Teams have community-wide participation, extensive knowledge of their communities, including major employers, and offer impaired driving prevention.

Many employers in Florida utilize employee assistance programs (EAP). EAP provides education, assessment, and intervention services for a variety of problems, including alcohol and substance abuse. EAP generally does not specifically address prevention of impaired driving, but does intervene with employees with substance abuse problems, including impaired driving arrests.

Recommendations

- Implement impaired driving prevention programs for employers through Community Traffic Safety Teams.
- Provide current and accurate information to EAPs, employers, and those who provide employee safety programs.

2-C-3: Community Coalitions and Traffic Safety Programs

Advisory

Community coalitions and traffic safety programs provide the opportunity to conduct prevention programs collaboratively with other interested parties at the local level and provide communications toolkits for local media relations, advertising and public affairs activities, and may include representatives of government - highway safety, enforcement, criminal justice, liquor law enforcement, public health, driver licensing and education; business – employers and unions; the military; medical, health care and treatment communities; multi-cultural, faith-based, advocacy and other community groups; and as appropriate neighboring countries.

States should:

- *Encourage communities to establish community coalitions or traffic safety programs, comprised of a wide variety of community members and leaders.*
- *Provide information and technical information to these groups, including data concerning the problem in the community and information identifying science-based underage drinking and impaired driving programs.*
- *Encourage these groups to provide support for local law enforcement and prevention efforts aimed at reducing underage drinking and impaired driving, including designated driver and alternative transportation programs for persons 21 or older.*
- *Encourage professionals, such as prosecutors, judges, nurses, doctors, emergency medical personnel, law enforcement officers and treatment professionals, to serve as community spokespeople to educate the public about the consequences of underage drinking and impaired driving.*

Status

Florida's Community Traffic Safety Teams (CTSTs) are locally based groups of highway safety advocates who are committed to solving traffic safety problems through a comprehensive, multi-jurisdictional, multi-disciplinary approach. Members include city, county, state, and occasionally federal agencies, as well as private industry representatives and local citizens. The community boundaries are determined by the individuals comprising the team, and can be a city, an entire county, a portion of a county, multiple counties, or any other jurisdictional arrangement.

Multi-jurisdictional means several agencies (cities, county, and state) plus other groups and organizations working together toward a common goal of improving traffic safety in their community. Multi-disciplinary means integrating the efforts of the 4 "E" disciplines that work in highway safety, including Engineering, Enforcement, Education/public information, and Emergency Services. By working together with interested citizens and other traffic safety advocates within their communities, the CTSTs help to solve local traffic safety problems related to the driver, the vehicle, and the roadway.

One common goal of each Community Traffic Safety Team is to reduce the number and severity of traffic crashes within their community.

Due to the common goals, objectives, and interests of the statewide Community Traffic Safety Teams, the teams decided to form their own unique coalition. The CTST Coalition holds quarterly meetings to share successes, safety materials, and programs to facilitate technology transfer among the CTSTs.

The Florida Department of Transportation (FDOT) has been active in the support of Community Traffic Safety Teams. Each FDOT District has a CTST Coordinator who works closely with the CTSTs in their geographic area, and the Central FDOT Safety Office acts as a liaison to the District Coordinators.

The Florida Drug Control Strategy defines prevention as the linchpin to bringing down drug abuse in Florida. Florida institutionalized its prevention approach with the publication of the Florida Prevention System, a science-based approach to formulating and directing substance abuse prevention efforts throughout the State. This system delineates the risk and protective factors that can be affected to decrease the incidence of substance abuse and recognizes the six crucial areas that can be influenced to prevent the use of substances:

- The individual,
- The family,
- Peers,
- Schools,
- Communities, and
- Society as a whole.

The core principals for all state-level prevention efforts in Florida include:

- Collaboration of key stakeholders and agencies;
- Supportive community anti-drug coalitions,
- Braiding of funding resources from multiple sources, and
- The use of the SAMHSA, Strategic Prevention Framework model whose steps include:
 - Profiling community needs,
 - Resources, and readiness;
 - Mobilizing community resources and building capacity;
 - Develop strategic plans; supporting evidence-based prevention and;
 - Monitoring local activity performance.

Florida's Initiative to Lower Youth Drinking is focused on empowering communities to make efforts to reduce underage alcohol use. Alcohol-specific prevention coalitions have been created in twenty-eight (28) counties in Florida. Each of the 28 counties was selected based on high incidences of underage alcohol use as identified by the Florida Youth Substance Abuse Survey. Each coalition is charged with collaborating with local law enforcement, community leaders, and educators to reduce underage drinking sales, marketing, and use within the county.

The Changing Alcohol Norms Workgroup (CAN), established in June 2003, focuses on public information efforts, education, law enforcement, collaboration, legislation, and treatment to develop a comprehensive strategy to reduce underage drinking. This multi-agency collaboration represents unified leadership in promoting model programs and initiatives that are aggressively aimed at curtailing, and progressively eliminating alcohol use by underage youth. CAN prepared the *White Paper on Changing Alcohol Norms* that includes numerous recommendations for prevention strategies for schools, colleges, parents, business, the community, and law enforcement.

One of the recommendations in the White Paper was that local coalitions should serve as the information source for members of the media to contact for information on local underage drinking efforts and to provide feedback to the state campaign.

Eight communities have received grants from the Florida Office of Drug Control under the Drug-Free Community program to implement evidence-based programs or prevention strategies that prevent youth drug use and violence; involve parents and communities; and are coordinated with related state, school and community efforts and resources to foster a safe and drug-free learning environment that promotes student academic achievement.

There are also more than 25 community coalitions receiving Drug Free Community Grants directly from the U.S. Substance Abuse Mental Health Services Administration (SAMHSA). Drug Free Community coalitions develop strategic prevention plans and implement and sustain evidence-based prevention strategies.

Under the Strategic Prevention Framework- State Incentive Grant (SPF-SIG) grant project, Florida established “coaches” who have been experienced coalition coordinators to assist communities in establishing new coalitions.

Florida is the world’s largest tourist destination with over 78 million visitors annually, including thousands of college students who come to beach communities during Spring Break. Spring Break is synonymous with drinking parties. The Florida Division of Alcoholic Beverages and Tobacco (ABT) issues numerous citations for underage possession of alcohol, but the number of young people is far more than can be monitored with existing law enforcement resources.

A major predictor of alcohol and substance use and abuse is the perceptions of peer and community norms related to use of substances. In the 2006 Florida Student Substance Abuse Survey, the percentage of Florida students who believe it would be either “wrong” or “very wrong” to use illicit drugs (“LSD, cocaine, amphetamines or another illegal drug”) was 95.0 percent compared to 80.4 percent for marijuana followed by cigarettes (78.8 percent). However, only 63.6 percent disapproved of “drinking alcohol regularly.” The proportion of high school students who said they would be seen as “cool” if they drank alcohol regularly was 16.4 percent in 2006. The acceptance and promotion of Spring Break are highly visible reflections of social norms in Florida.

Working with the American Medical Association, the Panama City Beach Convention & Visitors Bureau placed inserts in college newspapers around the country to promote the resort as a Spring

Break destination, but missing from those inserts in recent years is any mention of bargains related to alcohol.

Instead, this year's inserts urged responsible drinking and offered safety tips for students partying on the beach. The Bureau advises students "If you came with a friend, leave with that friend. ... Call a cab. ... Refuse a drink of any kind from a stranger. ... Realize that drinking laws will be enforced."

Recommendations

- Coordinate the efforts of Community Traffic Safety Teams and Drug Free Community coalitions.
- Implement strategies to change norms related to drinking and driving during Spring Break.

III. CRIMINAL JUSTICE SYSTEM

Each State should use the various components of its criminal justice system – laws, enforcement, prosecution, adjudication, criminal and administrative sanctions and communications, to achieve both specific and general deterrence.

Specific deterrence focuses on individual offenders and seeks to ensure that impaired drivers will be detected, arrested, prosecuted and subject to swift, sure and appropriate sanctions. Using these measures, the criminal justice system seeks to reduce recidivism. General deterrence seeks to increase the perception that impaired drivers will face severe consequences, discouraging individuals from driving impaired.

A multidisciplinary approach and close coordination among all components of the criminal justice system are needed to make the system work effectively. In addition, coordination is needed among law enforcement agencies, on the State, county, municipal and tribal levels to create and sustain both specific and general deterrence.

3-A: Laws

Advisory

Each State should enact impaired driving laws that are sound, rigorous and easy to enforce and administer. The laws should clearly: define the offenses; contain provisions that facilitate effective enforcement; and establish effective consequences. The offenses should include:

- *Driving while impaired by alcohol or other drugs (whether illegal, prescription, or over-the-counter), and treating both offenses with similar consequences.*
- *A Blood Alcohol Concentration (BAC) limit of 0.08, making it illegal “per se” to operate a vehicle at or above this level without having to prove impairment.*
- *Zero Tolerance for underage drivers, making it illegal “per se” for persons under age 21 to drive with any measurable amount of alcohol (e.g., 0.02 or greater).*
- *High BAC (e.g., 0.15 or greater), with enhanced sanctions above the standard impaired driving offense.*
- *Repeat offender, with increasing sanctions for each subsequent offense.*
- *BAC Test refusal, with sanctions at least as strict as the state’s highest BAC offense.*
- *Driving with a license suspended or revoked for impaired driving (DWS), vehicular homicide or causing personal injury while driving impaired as separate offenses, with additional sanctions.*
- *Open container, which prohibits possession or consumption of any open alcoholic beverage in the passenger area of a motor vehicle located on a public highway or right-of-way.²*
- *Primary seat belt provisions that do not require that officers observe or cite a driver for a separate offense other than a safety belt violation.*

² Limited exceptions are permitted under Federal statute and regulation, 23 U.S.C. 154 and 23 CFR Part 1270.

Laws should include provisions to facilitate effective enforcement that:

- *Authorize law enforcement to conduct sobriety checkpoints, in which vehicles are stopped on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs.*
- *Authorize law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers.*
- *Authorize law enforcement to obtain more than one chemical test from an operator suspected of impaired driving, including preliminary breath tests, evidential breath tests and screening and confirmatory tests for alcohol or other impairing drugs.*
- *Require mandatory BAC testing of drivers involved in fatal and serious injury producing crashes.*

Effective penalties should include:

- *Administrative license suspension or revocation (ALR), for failing or refusing to submit to a BAC or other drug test.*
- *Prompt and certain administrative license suspension of at least 90 days for first offenders determined by chemical test(s) to have a BAC at or above the State's "per se" level or of at least 15 days followed immediately by a restricted, provisional or conditional license for at least 75 days, if such license restricts the offender to operating only vehicles equipped with an ignition interlock.*
- *Enhanced penalties for test refusals, high BAC, repeat offenders, driving with a suspended or revoked license, driving impaired with a minor in the vehicle, vehicular homicide or causing personal injury while driving impaired, including: Longer license suspension or revocation; installation of ignition interlock devices; license plate confiscation; vehicle impoundment, immobilization or forfeiture; intensive supervision and electronic monitoring; and threat of imprisonment.*
- *Assessment for alcohol or other drug abuse problems for all impaired driving offenders and, as appropriate, treatment, abstention from use of alcohol and other drugs, and frequent monitoring.*
- *Driver license suspension for persons under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs.*

Status

The State of Florida has a variety of laws to address the impaired driving problem although some of the provisions fail to provide significant strength to fully address the issue. The laws fall into several categories as follows:

- Driving Under the Influence of Alcoholic Beverages (DUI), a defined chemical substance or a controlled substance;
- Per se alcohol concentration laws;
- Mandatory penalties including enhanced penalties for repeat offenders;

- DUI causing damage to the property of another;
- DUI causing serious bodily injury to another;
- DUI manslaughter where an offender causes the death of any human or unborn child;
- Standards for breath test equipment and certification for operators;
- Youthful licensing;
- Commercial Motor Vehicle licensing;
- Implied consent to a blood alcohol concentration test;
- License suspension for blood alcohol test refusal or failure;
- Offenses for driving while license suspended;
- Alcohol screening and assessment;
- Specific DUI evidentiary court rules; and
- Sentencing guidelines which include mandatory community service (or additional fine), probation, DUI school (for license reinstatement), imprisonment on subsequent offenses, and vehicle impoundment/immobilization.

Offenses

The primary offense in the push against impaired driving is:

Driving under the influence of alcoholic beverages, a defined chemical substance or a controlled substance when that person is affected to the extent that the person's normal faculties are impaired.

Both driving under the influence of alcohol or other drugs is commonly referred to as driving under the influence (DUI).

A person is per se “under the influence” if they have a blood alcohol level of 0.08 or more grams of alcohol per milliliters of blood or has a breath alcohol level of 0.08 or more of alcohol per 210 liters of breath. The per se law is alcohol specific. No separate offense exists for minors under the age of 21 although license suspension takes place at a standard of 0.02.

DUI first, second, and third offense, as well as DUI with damage to property, are misdemeanors with increasing punishments for subsequent violations. DUI with serious bodily injury and DUI manslaughter are felonies of third and second degree respectively. DUI manslaughter may be enhanced to a first degree felony if the offender is shown to have failed to stop and render aid.

The DUI charge for driving under the influence of a controlled substance requires the substance to be a listed substance under Florida law. Drugs not controlled by the State make prosecution for DUI for driving after ingesting those substances impossible. In addition, Florida does not have laws that define levels of controlled substances, at or above which operation of a motor vehicle is prohibited. This complicates proof of impaired driving in cases involving controlled substances. Some states' laws provide that it is unlawful for any person to drive or be in actual physical control of a vehicle with an amount of a prohibited substance in his or her blood or urine that is equal to or greater than certain established levels. Alternatively prohibiting operation with any detectable amount of an ingested controlled substance would simplify DUI prosecution of those persons under the influence of controlled substances to an even greater extent.

Other laws exist in the campaign to fight impaired driving and include:

- Alcohol education requirement for driver's license applicants;
- Open container of alcohol in a vehicle;
- Minors in possession of alcohol;
- Minors purchasing or attempting to purchase alcohol;
- Tampering with an interlock device;
- Possessing an identification card with an altered date of birth; and
- Transferring identification.

There are no separate penal laws regarding minors driving while impaired, minors who have consumed alcohol, or breath test refusal. There is no statewide keg registration law. An operator of a commercial vehicle is subject to a standard of 0.04 for license suspension, but no lower standard is used for charging a commercial vehicle operator with an offense of DUI. Florida also does not have a primary seat belt law. A primary seat belt law will assist in enforcement of other laws, including driving while under the influence.

Minors under the age of 18 are adjudicated by criminal system but may be handled administratively at the discretion of law enforcement.

It is noteworthy that there is no penal offense attributed to a first breath, blood or urine test refusal. Refusals on subsequent occasions may be prosecuted as a first degree misdemeanor. Refusals are admissible in prosecution and usually result in driver license suspension.

Penalties and Sentencing Tools

The penalties for DUI offenses graduate as the number of convictions increase. Commission of a DUI while transporting a minor, causing damage to property, or causing serious bodily injury are

enhancements. It is also an enhancement to commit a DUI while your blood alcohol level equals or exceeds 0.20. (A legislative change may reduce this level to 0.15 but it has not gained final approval at the time of this assessment). After four DUIs, the penalties remain the same. A penalty chart is included below.

Unlike many other states, Florida does not require mandatory incarceration for first-time DUI offenders. Mandatory incarceration begins only with second offense convictions. Florida does require 50 hours of community service to be performed by first-time DUI defendants and some impoundment or immobilization of the offender's vehicle is to be ordered.

While Florida law permits probation periods of up to one-year for misdemeanor DUI violations (first and second offenses), it is a common practice for defense attorneys and prosecutors to stipulate to early termination of probation for defendants who have completed conditions that would ordinarily have to be completed during the probationary period. This effectively enables many defendants to substantially or even totally avoid probation supervision by completing community service, payment of fines, evaluation and treatment, and other statutory requirements prior to entry of a guilty plea.

There is not a sanctioned pre-trial diversion program; although there was some testimony that it may exist in one jurisdiction. Existence of such a program could possibly be a violation of the federal prohibition on such programs.

Mandatory imprisonment only occurs in second or more offenses. Without enhancements, second offenses carry a minimum of ten days and thirty days confinement is the minimum for a third conviction. Time is generally served in local correctional facilities. At the court's discretion, sentences may be served in a residential alcoholism or drug abuse treatment program. Generally, a habitual offender cannot be sentenced to a period in excess of five years in prison. The only exception is if the offender falls under the provisions of the Violent Career Criminal/Habitual Offender Act.

Offenders are to be ordered to complete a substance abuse course conducted by a DUI program licensed by the Department of Highway Safety and Motor Vehicles. It must include a psychosocial evaluation of the offender. The DUI program may refer the offender to an authorized substance abuse treatment provider for substance abuse treatment. The completion of all such education, evaluation, and treatment is a condition of reporting probation. The offender shall assume reasonable costs for such education, evaluation, and treatment. Failure to attend such course or complete any requirements generally results in the loss of the offender's privilege to drive. No other sanctions are normally used; although it appears the threat of incarceration is possible.

Florida provides for installation of ignition interlock devices (IIDs) in the cases of second and subsequent offenders. It is optional for first-time offenders. IID requirements are not required as a condition of probation, although judges have the discretion to require IID use as a condition. Defendants, who are required to install and utilize IIDs, are monitored by the Department of Highway Safety and Motor Vehicles. Violations result in loss of driving privileges. Tampering is a non-criminal infraction. A recommendation to be considered is to require IID installation

and use as a condition of supervised probation and that the term of such probation shall be at least one-year.

Pre-trial detention is rarely implemented or justified in DUI cases. It is available and may be appropriate in the felony offense of DUI manslaughter where threat of harm to the community may be shown. It must be requested by the State's Attorney who has the burden of proving the necessity. In all alcohol related driving cases, an offender may not be released from jail upon an arrest until his or her blood alcohol level is below 0.05, eight hours have elapsed or they are no longer under the influence of alcohol or other drugs.

Penalties

Offense Category	Fine**	Imprisonment	Community Service	Probation	Impoundment/ Immobilization	Ignition Interlock
1st Offense	\$ 500 - \$1,000	Not more than 6 months	Mandatory 50 hours or \$500	May not exceed one year	10 days	Discretionary
1 st Offense Elevated BAC*	\$1,000 - \$2,000	Not more than 9 months			10 days	Mandatory up to 6 months
2nd Offense	\$1,000 - \$2,000	10 days to no more than 9 months			30 days	Mandatory up to 1 year
2 nd Offense Elevated BAC	\$2,000- \$4,000	10 days to no more than 12 months			30 days	Mandatory up to 2 years
3rd Offense more than 10 years of 2 nd	\$2,000 - \$5,000	30 days to no more than 12 months				Mandatory for at least 2 years

	Fine**	Imprisonment	Community Service	Probation	Impoundment/ Immobilization	Ignition Interlock
3 rd Offense more than 10 years of 2 nd & Elevated BAC	\$4,000 - \$5,000	Not more than 12 months				Mandatory for at least 2 years
3 rd Offense less than 10 years of 2nd	Not more than \$5,000	Not more than 12 months			90 days	Mandatory for at least 2 years
3 rd Offense less than 10 years & elevated BAC	\$4,000- \$5,000	Not more than 12 months			90 days	Mandatory for at least 2 years
4 th Offense	\$2,000 -	Not more than				

	\$4,000	5 years				
DUI Felony	Not more than \$5,000	Not more than 5 years				
DUI Manslaughter	Not more than \$10,000	Not less than 4 years and no more than 15 years				

*Elevated BAC currently 0.20 but may be legislatively changed to 0.15 by publication date of this document

** As of July 1, 2008

Case Administration and Evidence

Any person who accepts the privilege of operating a motor vehicle within Florida is deemed to have given his or her consent to submit to an approved chemical test or physical test for the purpose of determining the alcoholic content of his or her blood if the person is lawfully arrested for DUI. The chemical or physical breath test must be incidental to a lawful arrest and administered at the request of a law enforcement officer who has reasonable cause to believe such person was in actual physical control of the motor vehicle while under the influence of alcoholic beverages. The administration of a breath test does not preclude the administration of another type of test. The person shall be told that his or her failure to submit to any lawful test of his or her breath will result in the suspension of the person's privilege to drive and that he or she commits a misdemeanor if they have previously refused to submit to a test. The refusal to submit to a chemical or physical breath test upon the request of a law enforcement officer is admissible into evidence in any criminal proceeding.

A person may refuse such test. They can only be compelled to take a blood test if serious bodily injury or death has occurred as a result of their driving under the influence. Established appellate case law of Florida's implied consent statutes have been construed to impose higher standards on police conduct in obtaining breath, urine, and blood samples from a defendant in a DUI case, than those required by the Fourth Amendment. A warrant based upon probable cause must be obtained for a blood test in circumstances where the person refuses. In order to permit forcible extraction without a warrant, in non-serious injury cases, the implied consent law would have to be amended.

All tests, (blood, urine or breath), must be administered under the rules promulgated by the Florida Department of Law Enforcement. All blood tests must be performed by licensed individuals who enjoy protection from liability for assisting law enforcement in the gathering of a specimen.

A result of the test of 0.08 or more grams of alcohol per milliliters of blood or a breath alcohol level of 0.08 or more of alcohol per 210 liters of breath results in evidence the person was under the influence of alcohol per se.

Refusal of a test for alcohol or other drugs is only penalized by a license suspension unless the refusal is preceded by a prior refusal. Even then, the refusal is only punishable by a misdemeanor with a penalty less than the penalty for DUI. This is reported to result in a Florida

refusal rate of 40 percent. To combat such high rate of refusals, some states have enacted a penalty for refusing that is equal to the potential DUI charge.

There is currently no relief for a toxicologist or for medical blood draw personnel when subpoenaed for court. They must appear to testify about the medical procedure or test instrument standards.

Admissibility of Horizontal Gaze Nystagmus (HGN) test results have been greatly hampered by case decisions; although they appear to be allowed in some limited jurisdictions. Decisions have also limited the testimony about roadside sobriety testing. Disallowance of these evidentiary factors limit the effectiveness of prosecution.

Another impediment to prosecution appears to be when evidence is gathered at the scene of a crash. The Florida "Accident Privilege" requires a person operating a motor vehicle to cooperate in the investigation of a motor vehicle crash, but gives them a privilege in criminal court which does not allow testimony about what is said to the investigating officer. This is a privilege unique to Florida and often works to the detriment of prosecution in proving operation of a motor vehicle or facts necessary to insure a guilty finding in a DUI case.

Florida does allow sobriety checkpoints. In many jurisdictions, it is a vital portion of DUI enforcement. There is some question whether passive alcohol sensors are allowed for use in checkpoints.

Appeals on DUI cases are appealed "on the merits" or the record made at the trial court. This is generally an efficient appellate process. There are no "de novo" appeals allowed where an offender may "start over" with a new trial.

Recommendations

- **Enact a zero tolerance minor operating a motor vehicle under the influence of alcohol offense (any detectable amount).**
- Enact a minor consuming alcohol offense.
- Enact a DUI provision making operating a commercial motor vehicle at a level of 0.04 an offense per se.
- **Enact a primary seat belt law.**
- **Enact legislation providing for enhanced criminal penalties, including minimum mandatory jail sentences for convictions of any DUI offenders with blood alcohol levels of 0.15 or higher.**
- Enact a law making the penalty for refusing a breath, blood or urine test the same as the possible punishment for the offense being investigated.

- Enact legislation increasing the maximum term of probation for non-felony DUI offenders to two years.
- Enact legislation requiring that all DUI offenders serve at least 6 months of supervised probation.
- Abolish Florida’s “Accident Privilege” law.
- Amend Florida’s Implied Consent law to allow testimony and evidence of Standardized Field Sobriety Tests and other impaired driving detection methods.
- Enact legislation that prohibits motor vehicle operation by persons with ingested amounts of controlled substances at or above certain specified levels or, alternatively, that criminalizes operation with any detectable amount of an ingested controlled substance.
- Enact legislation that changes the definition of drug intoxication away from controlled substance and replaces it with “any substance taken into the human body that can impair the ability to operate a motor vehicle.”
- Enact legislation to protect medical and scientific personnel from having to testify to routine or established tests or legal practices.
- Educate legal practitioners on the reliability of Horizontal Gaze Nystagmus as an indicator of impairment.
- Clarify the law to allow the use of passive alcohol sensors at checkpoints.
- **Utilize search warrants for a blood sample when the offender refuses a breath or blood test.**

3-B: Enforcement

Advisory

States should conduct frequent, highly visible, well publicized and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, especially in locations where alcohol related fatalities most often occur. To maximize visibility, the State should conduct periodic heightened efforts and also sustained efforts throughout the year. Both periodic and sustained efforts should be supported by publicity. To maximize resources, the State should coordinate efforts among State, county, municipal and tribal law enforcement agencies. To increase the probability of detection, arrest and prosecution, participating officers should receive training in the latest law enforcement techniques. States should:

- *Ensure that executive levels of law enforcement and State and local government make impaired driving enforcement a priority and provide adequate resources.*
- *Develop and implement a year round impaired driving law enforcement plan (coordinated with a complimentary communication plan), which includes:*
 1. *periods of heightened enforcement (e.g., three consecutive weekends over a period of 16 days) and frequent (e.g., monthly), sustained coverage throughout the year*
 2. *high level of participation and coordination among State, county, municipal and tribal law enforcement agencies, such as through law enforcement task forces*

Use law enforcement professionals to serve as law enforcement liaisons in the State and help enhance coordination and the level of participation, and improve collaboration with local chapters of police groups and associations that represent diverse groups to gain support for enforcement efforts.

- *Deploy enforcement resources based on problem identification, particularly at locations where alcohol related fatal or other serious crashes most often occur.*
- *Conduct highly visible enforcement that maximizes contact between officers and drivers, including sobriety checkpoints and saturation patrols, and widely publicize these efforts - before, during and after they occur.*
- *Coordinate efforts with liquor law enforcement officials (see section II.A. Responsible Alcohol Service).*
- *Use technology (e.g., video equipment, portable evidentiary breath tests, passive alcohol sensors and mobile data terminals) to enhance law enforcement efforts.*
- *Require that law enforcement officers involved in traffic enforcement receive state-of-the-art training in the latest law enforcement techniques such as Standardized Field Sobriety Testing (SFST), emerging technologies for the detection of alcohol and other drugs; selected officers should receive training in media relations and Drug Evaluation and Classification (DEC).*
- *Expedite the arrest process (e.g., by reducing paperwork and processing time, from the time of arrest to booking and/or release).*
- *Measure success, emphasizing quantitative data, including the level of effort (e.g.,*

number of participating agencies, checkpoints conducted, arrests made), public awareness (e.g., of message and actual enforcement), reported change in behavior (e.g., reported number of drinking driving trips) and outcomes (e.g., alcohol-related fatalities, injuries and crashes).

Status

The Traffic Safety Program (TSP) supports frequent, highly visible and publicized impaired driving law enforcement efforts including checkpoints and saturation patrols throughout the State, in locations where alcohol-related crashes and fatalities most often occur.

A recent change in the TSP time-line for supporting law enforcement equipment grants was met with negative reactions by some presenters. This reaction was the result of the TSP making the change without notice to, input from, or follow-up with law enforcement. Communication with law enforcement prior to this change may have avoided hard feelings and withdrawal from the program by some enforcement agencies.

The impaired driving program is a priority for state and local law enforcement. The Florida Sustained Enforcement Initiative was implemented in 2003 in 10 Florida counties and increased to 21 counties in 2007. These 21 counties accounted for approximately 78 percent of all alcohol-related crashes during 2003-2004. Law enforcement conducts periodic heightened efforts (two mobilizations) and sustained efforts (sobriety checkpoints and “wolf packs”) throughout the year and coordinate efforts with other law enforcement agencies. Due to personnel shortages caused by an extreme hurricane season, enforcement mobilizations in FY 2006 were conducted at a reduced level.

Approximately 109 agencies have been reporting their enforcement activity on a monthly basis since FY 2006 and program coordinators are working to get additional agencies to participate. Local task forces have been created to attain a high level of enforcement participation. They also work with local media to obtain support through donated publicity.

It was reported more than once that the State is not following through with promised DUI enforcement equipment incentive awards and this is hurting the program. The State Safety Office reported that the change was only in the timeline, but that is not the perception of law enforcement. Improved communications between TSP and local law enforcement could correct this problem.

It was also reported that the change to Tallahassee Community College (TCC) from the Institute of Police Technology and Management (IPTM) for the administration of the program has created significant difficulties in implementing the Sustained Enforcement Initiative. Regardless of the change, communication was necessary to prepare law enforcement for new procedures. This communication could have explained that the change to TCC was a precursor to a new and improved electronic reporting process.

The TSP has seven field Law Enforcement Liaison (LEL) positions (only four are currently filled) and one LEL supervisor position (currently unfilled). LELs meet regularly with law

enforcement agencies, tribal nations, and other traffic safety personnel to discuss traffic safety issues and FDOT campaigns. LELs attendance at FDOT District Community Traffic Team meetings were reported to be sporadic.

Listed below are other enforcement areas of interest and their status.

- Sustained enforcement equipment and overtime assistance is granted to law enforcement agencies in 21 Florida counties that experience the highest percentages of alcohol-related crashes. TSP may fund overtime enforcement in other counties that can demonstrate high incidence of alcohol-related crashes in their area of responsibility.
- Some agencies indicated that the grant process was difficult. Review of the State Safety Office website showed that the grant application process was buried in the website. Once located, the concept paper form was easy to complete. Also, the website reads “may include: in-car video systems, enforcement vehicles, public awareness materials, and DUI checkpoint equipment, including trailers, light towers, traffic cones, arrow boards, and generator.” This statement gives the impression that “DUI Overtime” is an area not included for grant request. The State Safety Office plans to make the entire grant application process electronic next year.
- One concern is that most funding considerations are based mainly on countywide data. Short segments of roads can have serious problems concerning alcohol-related crashes and should not be eliminated from grant consideration. These roads frequently provide the biggest “bang for the buck” concerning alcohol-related crash reduction.
- It was reported that the only law enforcement training academy that meets the NHTSA/International Association of Chiefs of Police (IACP) standards for the Standardized Field Sobriety Testing (SFST) training was the Florida Highway Patrol (FHP). However, this training is available from IPTM. Law enforcement reported that they were pleased with SFST and DRE training and support for the programs.
- One law enforcement agency developed a plan to expedite the DUI arrest process, however, could not find funding to initiate the process.
- There is a concern that current grant measurements may not always reflect a reduction in fatalities, injuries, and crashes, but simply the number of operations conducted.

Recommendations

- Make the grant application process user friendly.
- Continue support of law enforcement impaired driving grant requests including providing DUI enforcement equipment and/or DUI operation overtime compensation.

- **Require that the Standardized Field Sobriety Testing training meets or exceeds standards set by the International Association of Chiefs of Police and the National Highway Traffic Safety Administration.**
- Ensure that all DUI grants are outcome-based.
- Ensure that all grant applications are considered equally, including any request that can identify a problem that can be impacted by the proposed countermeasures.
- Implement innovative methods to improve the DUI arrest process.
- **Ensure that Law Enforcement Liaisons participate in Florida Department of Transportation District Community Traffic Safety Team meetings.**
- **Communicate to all affected agencies future changes to the DUI grant process, procedure, or funding prior to the change.**
- Fill all Law Enforcement Liaison positions.
- Continue program support for Standardized Field Sobriety Testing and Drug Recognition Expert training.

3-C: Publicizing High Visibility Enforcement Advisory

States should communicate their impaired driving law enforcement efforts and other elements of the criminal justice system to increase the public perception of the risks of detection, arrest, prosecution and sentencing for impaired driving. Publicity should be culturally relevant, appropriate to the audience, and based on market research. States should:

- *Focus their publicity efforts on creating a perception of risk of detection, arrest, prosecution and punishment for impaired driving.*

- *Develop and implement a year round communication plan that includes:*
 - *messages that are coordinated with National campaigns*
 - *special emphasis during periods of heightened enforcement and high risk holiday periods (including coverage before and reports of results after)*
 - *regular (e.g., monthly), sustained coverage throughout the year, using messages (or” media hooks”) that are law enforcement related*
 - *paid, earned and donated advertising³*

- *Use clear, concise enforcement messages to increase public awareness of enforcement activities and criminal justice messages (e.g., that focus on penalties and direct costs to offenders such as loss of license, towing, fines, court costs, lawyer fees, insurance, etc.).*
- *Monitor and evaluate the media efforts to measure public awareness and changes in attitudes and behavior.*

Status

The State Safety Office does not have a formal publicity program that communicates the State’s impaired driving law enforcement efforts. Public awareness activities consist of a combination of purchased and donated media. The State depends on state/national media buys and local earned and donated media to publicize local law enforcement efforts that increase the public perception of the risks of detection, arrest, prosecution, and sentencing for impaired driving. In the past, the Traffic Safety Program (TSP) has asked “champions” (local law enforcement officers) to coordinate local press conferences.

TSP’s Law Enforcement Liaisons (LEL), one in each Florida Department of Transportation District, are asked to build area networks to communicate the State’s safety message to the public. These networks will contain a combined force that consists of:

- 16 Local Area Network Coordinators (LANCs);
- 67 county coordinators; and
- An unknown number of agency “champions” (there are over 380 law enforcement agencies in the State).

It was reported that in 2006 the State purchased time for Public Service Announcements (PSAs) produced by a contractor for some of the larger cable broadcast outlets and spent \$467,000 for

³ NHTSA Research Note, March 2004, DOT HS 809 708.

television and radio spots for the 2006 Labor Day National Enforcement Crackdown and a similar amount in 2007. Law enforcement from the southern part of the State reported viewing these media messages and only observed paid media in English and Spanish appearing on national network channels late at night or early in the morning. They suggested that this type of media might be more successful if released through the cable channels closer to prime time. Florida is a culturally diverse state, with numerous cultures not being reached.

At this time law enforcement feels that the most successful media was donated media created to report local law enforcement operations in local areas.

All media contractors are required to do an evaluation component for each contract. These evaluations give basic data on the size of the community reached by the media. The State Safety Office has also used intercept surveys at driver licensing offices to determine if the target audience is being reached by media efforts, but these are small sample surveys.

Recommendations

- **Develop and implement an impaired driving media campaign that is coordinated, sustained, emphasizes heightened enforcement, and uses all cost effective media (paid, earned and donated).**
- Work with law enforcement to develop media campaigns that will be culturally relevant and appropriate for the community it is intended.
- Monitor and evaluate the media efforts to measure public awareness and changes in attitudes and behavior.

3-D: Prosecution

Advisory

States should implement a comprehensive program to visibly, aggressively and effectively prosecute and publicize impaired driving-related efforts, including use of experienced prosecutors, to help coordinate and deliver training and technical assistance to those prosecutors handling impaired driving cases throughout the State. Prosecutors who handle impaired driving cases often have little experience, handle hundreds of cases at a time, and receive insufficient training⁴ States should:

- 1. Make impaired driving cases a high priority for prosecution and assign these cases to knowledgeable and experienced prosecutors.*
- 2. Encourage vigorous and consistent prosecution of impaired driving (including youthful offender) cases, particularly when they result in a fatality or injury, under both impaired driving and general criminal statutes.*
- 3. Provide sufficient resources to prosecute impaired driving cases and develop programs to retain qualified prosecutors.*
- 4. Employ experienced prosecutors, such as State Traffic Safety Resource Prosecutors, to help coordinate and deliver training and technical assistance to prosecutors handling impaired driving cases throughout the State.*
- 5. Ensure that prosecutors who handle impaired driving cases receive state-of-the-art training, such as in SFST, DEC, emerging technologies for the detection of alcohol and other drugs; prosecutors should learn about sentencing strategies for offenders who abuse these substances and participate in multi-disciplinary training with law enforcement personnel.*
- 6. In Driving While Impaired by Drugs (DWID) cases, encourage close cooperation between prosecutors, state toxicologists and arresting law enforcement officers (including Drug Recognition Experts). Their combined expertise is needed to successfully prosecute these cases.*
- 7. Establish and adhere to strict policies on plea negotiations and deferrals in impaired driving cases and require that plea negotiations to a lesser offense be made part of the record and count as a prior impaired driving offense.*

Status

The prosecution of criminal cases in Florida is conducted by the Offices of the Florida State's Attorneys. State's Attorneys serve in 20 circuits and are each elected every four years. Each office is independent and has no centralized State oversight. Each State's Attorney is funded by the State of Florida and hires his or her own staff and Assistants States Attorney's to perform duties required.

Prosecution of Driving Under the Influence (DUI) cases occurs primarily in the County Courts. Trials in County Court can occur before the bench or before a jury. About 98 percent of the

⁴ *Robertson, Robyn D. and Herb M. Simpson "DWI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution. Ottawa, Traffic Injury Foundation 2002.*

trials are jury trials and DUI cases comprise about 75 percent of all trials. Felony DUIs, as well as DUI manslaughter, are tried in Circuit Court where jury trials are almost certain.

In addition to trial work, State's Attorneys perform other functions in the criminal justice system related to DUI enforcement. Among those duties are liaison activities, DUI checkpoint assistance, "ride-alongs" and interagency meetings.

Pretrial diversion programs are prohibited by law. Disposition of DUI cases through a plea bargain is a common occurrence. Most agreements result in a DUI conviction but some may be recharged as Reckless Driving. The frequency of changing the charge varies in the 20 circuits. State's Attorneys are not involved in the administrative driver's license hearings.

It is commonplace for attorneys with less experience (or fresh out of law school) to be assigned to the prosecution of DUI cases as well as other traffic cases. It is also normal practice for these attorneys to gain experience and quickly move to other aspects of prosecution including felonies. This leaves a re-occurring problem of the newer, less skilled attorneys left trying DUI cases. To compound the problem, a defense attorney is almost always much more experienced in DUI law and trial techniques. This "revolving door" is often frustrating to law enforcement officers who cannot establish a relationship with a prosecutor and must seek advice from, and participate in trials with, a "novice" attorney.

DUI adjudication is complex litigation requiring significant educational opportunities. Florida has a Traffic Safety Resource Prosecutor (TSRP) who currently provides several training opportunities each year. Those include sessions on advocacy, pre-trial motions, advanced DUI, and vehicular manslaughter. Eleven sessions have been held or are scheduled for the current year. In addition, the TSRP assists with other education on a local level and serves as an expert for prosecutors needing assistance. Some progressive offices provide in-house training sessions as well as day-to-day supervision. Other educational opportunities are available, such as programs slated by the National District Attorney's Association or Institute of Police Technology and Management. However, time and money are significant impediments to attendance by DUI prosecutors. Even with educational opportunities available, prosecutors often do not get needed instruction.

The TSRP may also be sworn and serve as a Deputy State's Attorney for special cases. A second TSRP is anticipated in the near future.

State's Attorneys are also spending significant amounts of time in motion or deposition practice. Some courts are granting significant time to defense attorneys to file motions and take depositions of witnesses. Prosecutors feel these motions are often frivolous and consider time spent on these endeavors is often "wasted." They concurrently feel motions and depositions can or should be limited. As expected, State's Attorneys are forced to hire additional attorneys to cover these activities.

Prosecutors are limited in their plea negotiations by jail overcrowding and available alternative sentencing. They also are frustrated by judicial efforts to move cases rapidly.

State's Attorneys' Offices are also suffering from high turnover. A significant reason for this occurrence is low pay. Some offices are currently in "crisis" due to the turnover and budget cutbacks dictated by recent State of Florida funding shortages. Some offices cannot fill open positions. The lack of funds will continue to thwart or decelerate effective DUI prosecution since DUI cases are often prosecuted by attorneys who fill entry level positions affected by turnover and unfilled positions.

Recommendations

- Assign experienced prosecutors to DUI prosecutions.
- Require annual education for DUI prosecutors.
- Increase utilization of the Traffic Safety Resource Prosecutor project.
- Institute programs such as "loan forgiveness" to attract and maintain experienced prosecutors.
- Enact legislation to limit motions and depositions in DUI cases.
- **Adequately fund State's Attorneys' Offices or seek alternative sources of funding such as court fees.**

3-E: Adjudication

Advisory

States should impose effective, appropriate and research-based sanctions, followed by close supervision, and the threat of harsher consequences for non-compliance when adjudicating cases. Specifically, DWI Courts should be used to reduce recidivism among repeat and high BAC offenders. DWI Courts involve all criminal justice stakeholders (prosecutors, defense attorneys, probation officers and judges) along with alcohol and drug treatment professionals and use a cooperative approach to systematically change participant behavior. The effectiveness of enforcement and prosecution efforts is strengthened by knowledgeable, impartial and effective adjudication. Each State should provide the latest state-of-the-art education to judges, covering SFST, DEC, alternative sanctions and emerging technologies.

Each State should utilize DWI courts to help improve case management and to provide access to specialized personnel, speeding up disposition and adjudication. DWI courts also increase access to testing and assessment to help identify DWI offenders and addiction problems and to help prevent them from re-offending, DWI courts additionally help with sentence monitoring and enforcement. Each State should provide adequate staffing and training for probation programs with the necessary resources, including technological resources, to monitor and guide offender behavior.

States should:

- *Involve the State’s highest court in taking a leadership role and engaging judges in effectively adjudicating impaired driving cases and ensuring that these cases are assigned to knowledgeable and experienced judges.*
- *Encourage consistency in the adjudication of impaired driving (including youthful offender) cases, and the imposition of effective and appropriate sanctions, particularly when impaired driving resulted in a fatality or injury.*
- *Provide sufficient resources to adjudicate impaired driving cases in a timely manner and effectively manage dockets brought before judges.*
- *Ensure that judges who handle criminal or administrative impaired driving cases receive state-of-the-art education, such as in technical evidence presented in impaired driving cases, including SFST and DEC testimony, emerging technologies for the detection of alcohol and other drugs, and sentencing strategies for offenders who abuse these substances.*
- *Use court strategies to reduce recidivism through effective sentencing and close monitoring, by either establishing DWI courts, encouraging drug courts to hear impaired driving cases, or encouraging other courts to adopt DWI/Drug court practices; these courts increase the use of drug or alcohol assessments, identify offenders with alcohol or drug use problems, apply effective and appropriate sentences to these offenders, including abstinence from alcohol and other drugs and closely monitor compliance, leading to a reduction in recidivism⁵*
- *Provide adequate staffing and training for probation programs with the necessary*

⁵ Freeman-Wilson, Karen and Michael P. Wikosz, “Drug Court Publications Resource Guide, Fourth Edition.” Alexandria, VA: National Drug Court Institute, 2002.

resources, including technological resources, to monitor and guide offender behavior.

Status

There are two tiers of trial courts in Florida: County Courts and Circuit Courts. Except for felony level offenses, the vast majority of Driving Under the Influence (DUI) cases are adjudicated in Florida's County Courts. The Constitution establishes a County Court in each of Florida's 67 counties. County Courts vary with the population and caseload. To be eligible for the office of County Judge, a person must be an elector of the county and must have been a member of The Florida Bar for five years; in counties with a population of less than 40,000, a person must be member of The Florida Bar. DUI cases account for 75 percent of all cases filed in County Courts. Cases going to actual trial are generally held before a jury.

County Court judges are eligible for assignment to Circuit Court, and they are frequently assigned as such within the judicial circuit that embraces their counties. They are subject to the same disciplinary standards as all other judicial officers. Appeals from County as well as from Circuit Courts are "on the merits," there being no entitlement to a "trial de novo" upon appeal to a higher court.

In 1974, Florida abolished all local, municipal, and justice of the peace courts, replacing them with the County Courts that are part of the State Trial Court System.

Appeals in County and Circuit Courts are taken to the District Courts of Appeal. There are five District Courts of Appeal in Florida, each covering a geographic district. Judges sit in panels of three and decide appeals from Circuit Courts. They also have jurisdiction to decide appeals from County Courts when a state statute or provision of the state constitution is held to be invalid or for orders or judgments certified to be of great public importance. The District Courts of Appeal are normally the final appellate review of DUI cases. A party dissatisfied with a District Court's decision may seek review in the Florida Supreme Court or in the U.S. Supreme Court, but the clear majority of such requests for relief are denied.

The Florida Supreme Court is the highest court in the State. It is located in Tallahassee. The Supreme Court is composed of seven justices.

The State of Florida pays the salaries of all judges. The State and counties share most other expenses. Facilities for the appellate courts are provided by the State and the counties provide facilities for the trial courts. Support for the courts is provided by The Office of the State Courts Administrator (OSCA). OSCA was created with initial emphasis on the development of a uniform case reporting system to provide information on activity in the judiciary in the preparation of its operating budget and in projecting the need for judges and specialized court divisions. The State Courts Administrator serves under the direction of the Chief Justice of the Florida Supreme Court and the other six justices. OSCA oversees the operation of numerous court programs and initiatives. Additionally, the State Courts Administrator serves as the liaison between the court system and the legislative branch, the executive branch, the auxiliary agencies of the Court, and national court research and planning agencies. The OSCA's legislative and

communication functions are handled directly by the State Courts Administrator and her executive staff.

Florida judges are fortunate in having copies of DUI defendants' driving records that are current and easy to read. Such records are easily obtained electronically by clerks of court who routinely insert copies in files available to judges at arraignment and plea taking time. A small number of jurisdictions have also implemented "paperless" court systems for traffic offenses that include DUI. These systems are enhanced where citations are electronically produced and transmitted to the local courts. Other documents that are not electronically produced are scanned by the clerk of court and made available for viewing upon demand.

The Bureau of Administrative Reviews in the Department of Highway Safety and Motor Vehicles (DHSMV) is another component of adjudication. The Bureau provides hearings to determine a driver's eligibility to restore their driving privilege. There is some dissatisfaction among law enforcement and prosecution that the license review process is abused by defense attorneys for discovery in DUI cases. Some suggestion has been forwarded that the process be returned to the courts. However, that view is not widely shared. Training and support of hearing officers may assist in resolving issues.

In the 2007 calendar year, 64,410 DUI violations were originally filed according to the DHSMV. Of those cases filed, courts disposed of 43,491 cases. This left 20,919 pending during the reporting period. It was further reported that 35,372 cases resulted in guilty findings with a conviction rate of 81.3 percent of the cases that were *disposed*. [This is consistent with 81.7 percent (2006), 82.9 percent (2005) and 83.7 (2004) reported in the previous three years.] However, when convictions are compared to all cases filed in 2007, a conviction rate of only 54.9 percent is computed. This is due to the 20,919 cases which show no disposition. The nature or outcome of these non-disposed cases is unclear, but some may be related to juvenile court dispositions, cases where adult defendants were allowed to plead to alcohol-related reckless driving (wet reckless) with DUI-like sanctions, and reporting lag time. Even given these possible explanations, the low rate of convictions when compared to total cases filed is difficult to understand without more information. Prior years' statistics also show consistently high numbers of non-disposed cases. With these substantial numbers of non-disposed cases, it is misleading to claim conviction rates in the 80 percentile range. More consistent and frank reporting of case dispositions could be engaged to produce accurate numbers for the State's use.

Of the Trial Courts, two County Courts currently run "problem solving" DUI Courts. One is located in Polk County and one in Marion County. Another DUI Court in Sarasota County is expected to begin in the very near future. A DUI Court is structured to provide repeat DUI offenders with intense out-patient treatment while on supervised probation. The offender's compliance and progress is monitored by the court through regular court appearances before the presiding judge. After entering a plea to the DUI charge, the offender is placed on probation for a period of one year. While on probation, the offender is required to comply with all the statutory requirements and complete all three phases of DUI Court. All phase requirements include: weekly court appearances, group therapy, random alcohol/drug screens and other conditions as recommended by a treatment provider. Treatment providers are required to enforce

a strict attendance policy for all group therapy sessions and Alcoholic Anonymous (AA) meetings. Violations of any of the terms of probation or noncompliance with any of the above requirements may result in sanctions including jail or the offender's probation being violated and the offender becoming ineligible for further participation in DUI Court. DUI Courts have gained accolades in recent years and provide an effective tool to combat alcohol-related cases. Educational opportunities are critical for trial judges handling the complex litigation of DUI cases. County judges are eligible to attend two, expenses paid, education and training programs annually. They are conducted under the auspices of the OSCA. These programs cover a variety of jurisdiction-related topics. Additionally they are eligible to attend the annual "DUI Adjudication Lab" which consists of a four and one-half day intensive DUI adjudication program. The program covers topics including plea taking, jury selection and management, sentencing, probation violations, motion practice, discovery issues, commercial motor vehicles, and interpretation of driver history transcripts. All judges new to the bench are required to complete the Florida Judicial College program during their first year of judicial service following selection to the bench. The Florida Judicial College is taught by a faculty drawn from among the State's most experienced trial and appellate court judges. Other local and national opportunities for judicial DUI education exist, but funding is often limited for attendance.

While education of trial judges appears to be available, there is some thought that trial and appellate judges are not sufficiently trained or exposed in the technical or scientific issues which are involved in the adjudication of DUI cases. More exposure in the area of Horizontal Gaze Nystagmus, Standardized Field Sobriety Tests, and breath and blood testing might assist both trial and appellate judges in the adjudication process and issues involved.

Post conviction services are important for judges to monitor and ensure sentences given are effective. Florida law requires that courts "shall" place all offenders, convicted of violating Florida's DUI laws, on monthly reporting probation. Florida only provides state-funded probation services for DUI offenders who have been adjudicated of felony offenses. Fortunately, however, all of Florida's County Court judges also have access to probation supervision services in their counties. These services are either provided through county agency providers or through private probation providers, which are self-sustaining. DUI defendants are assigned and monitored by probation officers who regularly report violations to the courts and obtain warrants for the arrest of defendants who have violated probation conditions. Florida law permits probation periods of up to one-year for misdemeanor DUI violations (first and second offenses). However, it is a common practice for defense attorneys and prosecutors to stipulate to early termination of probation for defendants who have completed conditions that would ordinarily have to be completed during the probationary period. This effectively enables many defendants to substantially or even totally avoid probation supervision by completing community service, payment of fines, evaluation and treatment, and other statutory requirements prior to entry of a guilty plea. This thwarts the effective use of probation. Probation can be utilized to a greater extent to modify behavior of DUI offenders. A recommendation to be considered is that all DUI defendants shall complete at least six months of supervised probation, whether they have completed all conditions of probation or not. It might also be beneficial to extend the possible probation term to two years so behavior modification programs and problem solving courts could be utilized more

effectively. This change might also be coupled with expanded probation services or funding from the State since greater utilization may tax current county probation offices.

Florida provides for installation of ignition interlock devices (IIDs) in the cases of second and subsequent offenders. It is optional for first-time offenders. IID requirements are not required as a condition of probation, although judges have the discretion to require IID use as a condition. Defendants, who are required to install and utilize IIDs, are monitored by the DHSMV. Violations result only in the loss of driving privileges. Tampering is a non-criminal infraction.

The use of license suspension is a common penalty for violating a term, condition or penalty in Florida. It is used primarily administratively. Persons arrested for DUI lose license privileges. Persons who fail to complete DUI School or assessment also lose licensing. There appears to be great reliance on an individual's desire to maintain a license. Many offenders do not possess a license or have lost the ability to gain one for some other reason. Research shows they continue to drive making the deterrent effect of license loss ineffective. Time may dictate a more rigorous punishment or toughening of driving while license suspended laws.

Recommendations

- Provide education, support, and possible regulatory rule to limit any abuse of the administrative license hearing process.
- Expand the use of paperless courts.
- **Expand use and implementation of problem solving courts, including DUI Courts.**
- Given the percentage of DUI cases in County Courts, annual training should be required for County Trial Courts in DUI adjudication. Circuit Courts often trying DUI courts should be required as well.
- Continue to fund the "DUI Adjudication Lab" and expand educational opportunities for judges.
- Require new judges to attend the "DUI Adjudication Lab" within two years of taking the bench.
- Provide instruction or education to all judges (trial and appellate) regarding Horizontal Gaze Nystagmus, Standardized Field Sobriety Tests, and breath and blood testing instruments.
- Require a minimum of six months supervised probation for DUI cases.
- Increase the possible probationary period to two years to better utilize behavior modification programs.

- Provide additional funding for probation to allow judges to better utilize probationary terms.
- Increase the use of ignition interlock devices either as a term of supervised probation or a mandatory penalty in all levels of conviction.
- Enact tougher penalties for ignition interlock devices failures or tampering.
- Enact new and stronger penalties for those offences and violations currently being enforced by license suspension.

3-F. Administrative Sanctions and Driver Licensing Programs

States should use administrative sanctions, including the suspension or revocation of an offender's driver's license; the impoundment, immobilization, or forfeiture of a vehicle; the impoundment of a license plate; or the use of ignition interlock devices. These measures are among the most effective actions that can be taken to prevent repeat impaired driving offenses.⁶ In addition, other driver licensing activities can prove effective in preventing, deterring, and monitoring impaired driving, particularly among novice drivers. Publicizing related efforts is a part of a comprehensive communications program.

3-F-1. Administrative License Revocation and Vehicle Sanctions:

Advisory

Each state's Motor Vehicle Code should authorize the imposition of administrative penalties by the driver licensing agency upon arrest for violation of the state's impaired driving laws.

The code should provide for:

- *Administrative suspension of the driver's license for alcohol and/or drug test failure or refusal.*
- *The period of suspension for a test refusal should be longer than for a test failure.*
- *Prompt suspension of the driver's license (within 30 days of arrest), which should not be delayed, except when necessary, upon request of the State.*
- *Vehicle sanctions, including impoundment of or markings on the license plate, or impoundment, immobilization or forfeiture of the vehicle(s), of repeat offenders and individuals who have driven with a license suspended or revoked for impaired driving.*
- *Installation of ignition interlocks on the offender's vehicle(s) until a qualified professional has determined that the licensee's alcohol and/or drug use problem will not interfere with their safe operation of a motor vehicle.*

Status

Florida can suspend driver license if a driver refuses to take a test to show if the driver is driving under the influence of alcohol, drugs or other controlled substances. Under implied consent law, if an officer thinks that a driver is driving under the influence of alcohol or drugs while driving, the driver must submit to either a blood, urine or a breath test. If the driver refuses to take the test, the driver can be suspended automatically for one year. A second refusal will result in an 18 month suspension and a second degree misdemeanor. The law enforcement officer issuing the citation takes the person's driver's license and issues a 10-day temporary permit if the person is otherwise eligible for the driving privileges and issues the person a notice of suspension. Florida has shifted the implied consent hearings from the courts that handled DUI cases to hearing officers that work for the Department of Highway Safety and Motor Vehicles (DHSMV). There

⁶ Robertson, Robyn D. and Herb M. Simpson "DUI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution. Ottawa, Traffic Injury Foundation 2002.

have been many complaints by law enforcement officers that the administrative law hearings have turned into discovery sessions in which officers are grilled, in minute detail on the record, concerning their involvement in the case. They are then subjected to later cross examinations concerning inconsistencies between their in-court testimony and that given at the administrative hearing. For this reason many officers simply do not appear at the implied consent hearings, allowing the reinstatement of driving privileges to go by default. The processing of the implied consent hearing needs to be reviewed to determine what course of action should be taken to resolve the issue.

No information was provided regarding telephonic or video hearings. These technologies are possible effective methods to conduct administrative hearings as well as reduce cost for law enforcement officers.

Florida has law (s. 316.193(6), F.S.) which allows impoundment or immobilization of a vehicle as follows unless the family of the defendant has no other transportation:

- First conviction = 10 days,
- Second conviction within 5 years = 30 days;
- Third conviction within 10 years = 90 days.

Impoundment or immobilization must not occur concurrently with incarceration. The court may dismiss the order of impoundment of any vehicles that are owned by the defendant if they are operated solely by the employees of the defendant or any business owned by the defendant. The number of criminal citations issued for driving with a suspended or revoked driver's license has steadily increasing, reaching 227,000 by 2006 (latest available data). For the year 2006, 959 people were killed in 0.08 or more BAL related crashes. Florida had over 108,000 drivers driving with 3 or more DUI convictions, over 13,000 with 5 or more DUI convictions and 360 with 10 plus DUI convictions.

Florida has a very effective program dealing with certification, installation, servicing and monitoring of ignition interlock devices (IID) for second and third subsequent offenders. It is optional for first-time offenders. Currently, there are over 6,000 active participants in the program and has had more than 24,000 participants since the program's inception in February, 2004. The program is monitored by DHSMV. Violations result in loss of driving privileges and tampering with an IID is a non-criminal offense.

Recommendations

- **Audit the operation of Florida's administrative driver license review process to determine if the process can be improved by providing additional training; providing resources such as access to Traffic Safety Resource Prosecutor; or mandating minimum educational requirements for the Administrative Hearing Officers.**
- **Conduct a pilot project to evaluate the effective of impoundment or immobilization of vehicles of repeat offenders with 3 or more DUI convictions.**

3-F-2. Programs

Advisory

Each state's driver licensing agency should conduct programs that reinforce and complement the state's overall program to deter and prevent impaired driving, including:

- *Graduated Driver Licensing (GDL) for novice drivers that includes three distinct licensing phases for young novice drivers (learner's permit, restricted license and unrestricted license) and provides that:*
 1. *Requires a learner's permit for a minimum of 6 months and a total combined period of one year prior to being eligible for an unrestricted license.*
 2. *Requires that drivers practice driving with parental or adult supervision for a minimum number of hours and demonstrate safe driving practices before they may drive unaccompanied by a parent or adult.*
 3. *Requires a nighttime driving restriction and limits on the number of young passengers who may be in the vehicle during phase two.*
 4. *Provides that the permit, the restricted and the unrestricted license, as well as licenses to drivers under and over the age of 21, are easily distinguishable.*
 5. *Provides for license suspension for drivers under age 21 that drive with a BAC exceeding the limit set by the State's zero tolerance law.*
 6. *Provides for primary enforcement of safety belt use laws for young novice drivers.*
- *A public information program that describes alcohol's effects on driving and the consequences of being caught driving impaired or above the State's zero tolerance limit.*
- *A program to prevent individuals from obtaining and using a fraudulently obtained or altered driver's license including:*
 8. *Training for alcoholic beverage sellers to recognize fraudulent or altered licenses and IDs and what to do with these documents and the individuals attempting to use them.*
 9. *Training for license examiners to recognize fraudulent documents and individuals seeking to fraudulently apply for them.*

Status

Since October, 2000, Florida requires the following to obtain a driver's license:

- Must hold the learner's license for 12 or until the 18th birthday;
- Must have no moving violations for 12 months;
- May have one moving traffic violation conviction within 12 months from the issue date of the Learner's license, if adjudication is withheld; and

⁷ Robertson, Robyn D. and Herb M. Simpson "DWI System Improvements for Dealing with Hard Core Drinking Drivers: Prosecution. Ottawa, Traffic Injury Research Foundation, 2002.

- A parent, legal guardian or responsible adult over 21 years old, must certify that the driver has 50 hours of driving experience, of which 10 hours must be at night.

Those who have a Learner's Driver License must be accompanied by a licensed driver, 21 years or older, who occupies the front passenger seat closest to the right side of the driver. Drivers can only drive during daylight hours the first three months from the original issue date and must be accompanied by a licensed driver 21 years or older, who occupies the front passenger seat. After the first three months, driver may operate a vehicle from 6 a.m. to 10 p.m. with a licensed driver, 21 years of age or older, occupying the front passenger seat. Additional requirements are as follows:

- Be at least 15 years old;
- Pass vision, road signs and road rules tests;
- Have the signature of one parent (or guardian) on the parent consent form, if under age 18;
- Completion of Traffic Law and Substance Abuse Education Course;
- Two forms of identification;
- Social Security Number; and
- Must be in compliance with school attendance, if under 18.

Florida has issued new driver licenses and identification cards beginning June 16, 2004. Technological advancements make this the most secure card Florida has ever issued. This technology includes a 2-D barcode, magnetic stripe, digitized portrait image, signature, and various security features. Florida's image is depicted with a beach scene and the State seal.

The "under 21" driver licenses and identification cards reflect major changes. The new vertical format is immediately recognizable. The card holder's 21st birthday is indicated in the photo image area.

The cards are created using a new, updated digital imaging process. This process stores all the information from the front of the card in a 2-D barcode and magnetic stripe located on the back. Driver license class, restrictions, conditions, and endorsements specific to the driver are printed on the back. Previously issued Florida driver licenses and identification cards remain valid until their expiration dates.

Any driver under 21 years of age who is stopped by law enforcement and has a breath or alcohol level of 0.02 or higher will automatically have their driving privilege suspended for 6 months. Any driver under the age of 21 years with a breath or alcohol level of 0.05 or higher is required to attend a substance abuse course. An evaluation will be completed and parents or legal guardian will be notified of the results for all drivers under the age of 19 years. Any driver who

has a breath or blood alcohol level of 0.08 or higher can be convicted for driving under the influence (DUI). If the driver refuses to take a test, his or her driving privilege is automatically suspended for one year.

The driver and front seat passengers must wear seat belts. The seat belt law applies to passenger cars manufactured beginning with the 1968 model year, and trucks beginning with the 1972 model year.

Florida Department of Transportation does extensive public information program that describes alcohol's effects on driving and the consequences of being caught driving impaired at or above the State's zero tolerance limit through FLORIDA SADD, and BACCUS Network. The FLORIDA SADD consists of over 300 chapters at elementary, middle and high schools. The Florida BACCUS Network consists of 51 affiliates on 43 campuses.

Florida Business and Professional Regulation's Division of Alcoholic Beverages and Tobacco (ABT) regulate some 72,000 businesses selling alcohol. They have developed a program to train alcohol beverage sellers to recognize fraudulent or altered licenses and IDs and what to do with these documents and the individuals attempting to use them. However, the training is not mandatory. Noncompliance, especially of selling alcohol to minors, may result in temporary suspension of license but administrative relief may be provided to those who have voluntarily trained their managers and clerks. However, the ABT has identified the prevalence of fraudulent documents as a growing problem.

Recommendations

- Include the Division of Alcoholic Beverages and Tobacco in the Technical Advisory Committee as well as State's Traffic Records Coordinating Committee.
- Investigate technological solutions to on line, real time check of driver's licenses by alcohol beverage sellers.
- Involve Division of Alcoholic Beverages and Tobacco's sworn officer complement to participate in underage drinking coalitions and task forces.
- Require mandatory standardized server training.

IV. COMMUNICATION PROGRAM

States should develop and implement a comprehensive communication program that supports priority policies and program efforts. Communication strategies should be directed at underage drinking, impaired driving, and reducing the risk of injury, death and the resulting medical, legal, social and other costs. Communications should highlight and support specific program activities underway in the community and be culturally relevant and appropriate to the audience. States should:

Advisory

- *Employ a communications strategy that principally focuses on increasing knowledge and awareness, changing attitudes and influencing and sustaining appropriate behavior;*
- *Adopt a comprehensive marketing approach that coordinates elements like media relations, advertising and public affairs/advocacy;
Use traffic-related data and market research to identify specific audiences segments to maximize resources and effectiveness;*
- *Develop and implement a year round communication plan that includes:*
 - *Policy and program priorities*
 - *Messages that are coordinated with National campaigns*
 - *Special emphasis during holiday periods and other high risk times throughout the year, such as New Year's, 4th of July, Labor Day, Halloween, Prom Season and Graduation*
 - *Appropriate use of core message platforms that emphasize underage drinking, impaired driving enforcement and personal responsibility, including use of designated drivers and alternative transportation*
 - *Messages that are culturally relevant and linguistically appropriate*
 - *Paid, earned and donated media*
 - *Key alliances with private and public partners*
 - *Evaluation and survey tools*
- *Direct communication efforts at populations and geographic areas at highest risk or with emerging problems (such as youth, young adults, repeat and high BAC offenders and drivers who use prescription or over-the-counter drugs that cause impairment).*
- *Use creativity to encourage earned media coverage, using a variety of messages or "hooks" (such as inviting reporters to "ride-along" with law enforcement officers, conducting "happy hour" checkpoints or observing under-cover liquor law enforcement operations).*
- *Encourage communities, businesses and others to financially support and participate in communication efforts to extend their reach, particularly to populations and in geographic areas at highest risk.*

Status

In response to a recommendation from the “Special Management Review” of the Impaired Driving Program (June 4 – 8, 2007), the Florida Department of Transportation (FDOT) commented that it was working with the Florida Highway Patrol to develop a statewide impaired driving enforcement campaign, including a media component. For FY 2008, \$1,250,000 was planned in the Highway Safety Performance Plan (HSPP) for the “Operation Nighthawk Campaign” to develop campaign materials and public service announcements to support statewide impaired driving enforcement efforts.

At the time of this assessment, the Traffic Safety Program (TSP) had issued a contract for earned and paid media with expectations that something would be available by the end of September. A communication plan is currently a work in progress.

Sports marketing campaigns were also planned in the HSPP for Florida State University, the University of Florida, and the University of Miami with \$140,000 allocated to each. These are major universities within the State covering the prime, young target audience.

Working with the Governor’s Office of Drug Policy, FDOT also planned to implement a statewide underage drinking program, including a media component. Unfortunately, this program has been delayed until a relationship can be established with this Office that would be conducive to creating this program.

\$1,500,000 was also planned for FY 2008 to conduct a media campaign at professional sports events. Florida is home to numerous major and minor league sports teams which provide a significant opportunity to reach a young male target audience with impaired driving and prevention messages. However, this campaign was planned to focus on safety belt messages, not for impaired driving.

FDOT maintains a website for the Florida DUI Sustained Enforcement Program at www.fl-duc.com. This site is not designed for non-enforcement project or general public use. Key components of this site are to provide information to law enforcement and to provide a means to submit enforcement reports. This site is posted as currently under construction.

The FDOT State Safety Office (SSO) website at <http://www.dot.state.fl.us/Safety/> appears to focus primarily on the business of the section for general information purposes. In-depth impaired driving information is not readily available from this site. Materials are also not available through this site; a notice has been posted to the site to that effect:

Traffic safety materials are no longer available directly from the Florida DOT Safety Office. When available, we will provide a list of links to various resources that are either funded by the Safety Office to provide such items, or other sources where you may obtain traffic safety brochures and materials.

As discussed in Section 3. C, Publicizing High Visibility Enforcement, the SSO does not have a formal publicity program that communicates the State’s impaired driving law enforcement

efforts. Paid media is provided for the Labor Day National Crackdown. The media campaign for the 2007 Crackdown used the slogan: *Drunk Driving: Over the Limit. Under Arrest.* Radio spots were broadcast for the “3D Month Enforcement Wave” and included broadcasts on five Spanish radio stations in the Miami, Ft. Myers, Orlando, and Tampa markets.

A “Drunken Driving Campaign Final Survey Report” was completed by the Institute of Police Technology and Management (IPTM) in September 2006. This survey reported general support for enforcement of drunk driving, a majority of respondents acknowledging seeing or hearing something about a checkpoint, and 41 percent of respondents reporting that checkpoints are most effective. These results can be used in support of subsequent law enforcement campaigns. The survey could also be replicated to determine whether public knowledge and support for enforcing DUI laws has changed over time.

SSO has established a helpful relationship with FDOT’s Public Information Office. This office operates at a high level within FDOT, reporting directly to the Secretary of Transportation. This office assists with development and distribution of media releases when needed. A Public Information Officer (PIO) from this office has been assigned specifically to assist SSO and also work with the FDOT districts. Every Friday, SSO participates in a teleconference with this office and FDOT District PIOs to discuss current issues, upcoming campaigns, and public information activities.

Media materials are produced by sub grantees. These are reviewed and approved by the Traffic Safety Administrator or approved by the Chief Safety Officer as warranted. The Traffic Safety Program also sends out “boilerplate” materials and press releases for use by local entities.

A Florida Student Traffic Safety Grant, administered by the Florida Peer Education Office at Tallahassee Community College, supports FLORIDA SADD, with over 300 chapters at the elementary, middle, and high school levels, and the BACCHUS Network with 51 affiliates at 43 campuses in Florida. Extensive activities and materials are provided throughout the State through these programs. FLORIDA SADD provides at least two program kits to all SADD chapters in the State. These kits include program ideas, posters, brochures, and promotional items. For example, the spring campaign, "It's Your Turn...", is designed to promote responsible driving by helping to keep impaired drivers off the road. Statistics show more teens are injured or killed during the months of March, April, and May than any other time of the year. Included in this campaign kit are:

- 1 - 2008 Spring/Summer Activity Guide;
- 10 - It’s Your Turn Spring campaign posters;
- 3 - It’s Your Turn Spring campaign slicks (Spring Break, Prom, & Graduation);
- 25 - Frisbees; and
- 50 - Parent’s Guide to Helping Your Teen Get & Keep a 1st Driver’s License brochure.

FLORIDA SADD also maintains a website at www.floridasadd.org for students, advisors, parents, and all others interested in positive decision making for students.

The BACCHUS Network helped conduct 920 awareness campaigns on college campuses during the 2007-08 academic year. Thirty-three affiliates conducted impaired driving prevention campaigns. All 51 affiliates in Florida conducted National Collegiate Awareness Week activities and Safe Spring Break activities, including impaired driving prevention information targeted specifically at college-age students.

Recommendations

- **Develop, fund, and implement a comprehensive, data-based marketing plan in support of impaired driving which identifies target audiences, includes diverse populations as indicated in the traffic safety data, includes approaches and materials which are culturally sensitive and target audience appropriate, incorporates resources from business and other partners, and evaluates for effectiveness.**
- Provide impaired driving materials (media kits, posters, flyers, etc.) to the public and all traffic safety partners, including downloadable files on the internet.
- **Support mobilizations, crackdowns, sobriety checkpoints, and other law enforcement efforts with a strong, comprehensive media program.**
- Conduct periodic public surveys to track changes in public knowledge and attitudes regarding impaired driving programs and issues.
- Implement a statewide underage drinking prevention program, including a media component.
- Continue support of underage activities among elementary, middle, high school, and college students.

V. ALCOHOL AND OTHER DRUG MISUSE: SCREENING, ASSESSMENT, TREATMENT AND REHABILITATION

Impaired driving frequently is a symptom of the larger problem of alcohol or other drug misuse. Many first-time impaired driving offenders and most repeat offenders have alcohol or other drug abuse or dependency problems. Without appropriate assessment and treatment, these offenders are more likely to repeat their crime. One-third of impaired driving arrests each year involve repeat offenders.⁷ Moreover, individuals with alcohol or other drug abuse or on average, such individuals drive several hundred times within two hours of drinking before they are arrested for driving while impaired.⁸

In addition, alcohol use leads to other injuries and health care problems. Almost one in six vehicular crash victims treated in emergency departments are alcohol positive, and one third or more of crash victims admitted to trauma centers - those with the most serious injuries - test positive for alcohol. In addition, studies report that 24-31% of all ED patients screen positive for alcohol use problems. Frequent visits to emergency departments present an opportunity for intervention, which might prevent these individuals from being arrested or involved in a motor vehicle crash, and result in decreased alcohol consumption and improved health.

Each State should encourage its employers, educators, and health care professionals to implement a system to identify, intervene, and refer individuals for appropriate substance abuse treatment.

5-A: Screening and Assessment

Each State should encourage its employers, educators, and health care professionals to have a systematic program to screen and/or assess drivers to determine whether they have an alcohol or drug abuse problem and, as appropriate, briefly intervene or refer them for appropriate treatment. A marketing campaign should promote year-round screening and brief intervention to medical, health, and business partners and to identified audiences.

5-A-1: Criminal Justice System

Advisory

Within the criminal justice system, people who have been convicted of an impaired driving offense should be assessed to determine whether they have an alcohol or drug abuse problem and their need for treatment. The assessment should be required by law and completed prior to sentencing or reaching a plea agreement. The assessment should be:

- *Conducted by a licensed counselor or other professional holding a special certification in alcohol or other drug treatment.*

⁷ "Repeat DWI Offenders in the United States." Washington, DC: NHTSA Technology Transfer Series, Traffic Tech No. 85, February 1995.

⁸ On average, 772 such episodes, according to Paul Zador, Sheila Krawchuck .and Brent Moore "Drinking and Driving Trips, Stops by Police, and Arrests: Analyses of the 1995 National Survey of Drinking and Driving Attitudes and Behavior" Washington DC: U.S. Department of Transportation, HHTSA Technical Report o. DOT HS 809 184, December 2000..

- *Used to decide whether a treatment and rehabilitation program should be part of the sanctions imposed and what type of treatment would be most appropriate.*
- *Based on standardized assessment criteria, including standard psychometric instruments, historical information (e.g., prior alcohol or drug-related arrests or convictions), and structured clinical interviews.*
- *Appropriate for the offender's age and culture (e.g., use specialized assessment instruments tailored to and validated for youth or multi-cultural groups).*

Status

All drivers convicted of DUI are required to enroll in a DUI program. DUI programs are private and professional non-profit organizations that provide education, a psychosocial evaluation, and treatment referral services to DUI offenders to satisfy judicial and driver licensing requirements. Two educational services are offered - Level I for first-time offenders and Level II for multiple offenders. The Level I course is to be a minimum of 12 hours of classroom instruction and incorporates didactic and interactive educational techniques. The Level II course is a minimum of 21 hours of classroom time using primarily interactive educational techniques in a group setting. The average class size is not to exceed 15 students for Level II. This course focuses on the problems of the repeat offender and treatment readiness as the majority of students are referred to treatment. In no case is placement in Level II used in lieu of treatment.

Certified DUI evaluators conduct evaluations to determine the existence of an alcohol or other drug problem. It is not the responsibility of the evaluator to develop a formal diagnostic impression. Evidence of addiction is not required for referral. Clients with evidence of alcohol or drug abuse are referred to treatment facilities certified by the Department of Children and Families (DCF).

Florida Administrative Rule 15A-10.027 addresses DUI Program client evaluation. It states:

1. Each DUI program shall provide client evaluation services. The program shall utilize an evaluation manual. An evaluation shall be conducted on all persons enrolled in the DUI program. The component shall include a psychosocial evaluation to determine the existence of a possible alcohol or other drug abuse problem. If a client is enrolled in the program for more than one arrest or conviction, only one evaluation shall be conducted.
2. The evaluation shall include the administration of the Driver Risk Inventory. A testing environment shall be free of distractions by persons or objects which would influence or interfere with the testing process.
3. A client face-to-face interview shall be conducted. The DUI program shall complete the Client Data Information and Interview, HSMV Form 77004 in all cases to document the face-to-face interview.
4. The psychosocial evaluation shall be conducted prior to attendance at the class where feasible. The Driver Risk Inventory shall be administered and scored prior to the evaluation.
5. The results of the clinical interview, objective testing, documented blood alcohol reading, arrest record, and official driver record shall be integrated in reaching a decision about the need for treatment according to the Evaluator Guide. A summary of the client's classroom participation may also be considered. When the evaluation results in a deviation from the Evaluator Guide, the Client Data Information and Interview, HSMV Form 77004, must be reviewed, signed by the clinical supervisor, and shall be retained for two (2) years.
6. The need for treatment shall be documented in the file and discussed with the client. Where treatment is deemed appropriate, the program shall refer the client to a DCF licensed treatment provider or a provider that is exempt from licensure. The DUI program shall forward a copy of the Client Data Information and Interview, HSMV Form 77004, to the treatment provider prior to the client's intake appointment. The program shall ensure that appropriate confidentiality safeguards are followed and that the referral is made on the Treatment Referral and/or Documentation, HSMV Form 77005.
7. Any client wishing to contest a referral to treatment shall be required to comply with the procedure outlined in s. 316.193(5), F.S. The DUI program shall ensure that the agency approved by the court to conduct the second psychosocial evaluation shall have access to the original evaluation, that is, shall provide a copy of the evaluation upon request.
8. The client evaluation shall be conducted by a person certified as an evaluator by the Department. Certified evaluators shall be under the supervision of a certified clinical supervisor. The clinical supervisor shall be certified as an evaluator, Special Supervision Services Evaluator, and clinical supervisor. The clinical supervisor shall:

- a. Provide a minimum of two hours of face-to-face individual clinical supervision per month to evaluators who provide a minimum of 80 hours per month of evaluator time.
- b. Provide a minimum of one hour of face-to-face individual clinical supervision per month to evaluators who provide less than 80 hours per month of evaluator time.
- c. Observe an interview or review a recording of such, at least once every six months.
- d. Review a minimum of three client case records at least monthly.
- e. Monthly case staffings with all involved staff. Clinical supervisors, who routinely conduct a minimum of ten (10) evaluations per week, shall present a minimum of one evaluation at each monthly case staffing. Documentation of all required clinical supervision case reviews, case staffings, and observations shall be retained by the program for a minimum of two years.

The Department of Highway Safety and Motor Vehicles, Bureau of Driver Education and DUI Programs provide oversight for 26 licensed programs. The Bureau administers Rule 15A-10, F.A.C., including instructor certification and training, investigating complaints, processing client appeals, conducting site visits, maintaining quality assurance, and evaluating programs' effectiveness. In addition, there is DUI Program Review Board that conducts site visits and program reviews of DUI programs. The Board includes treatment professionals and representatives of the judiciary.

The culturally diverse driving population in Florida requires periodic updates of DUI programs.

Recommendations

- Evaluate screening and evaluation procedures to assure effectiveness for all genders, races, ages, and cultures.

5-A-2: Medical or Health Care Settings

Advisory

Within medical or health care settings, any adults or adolescents seen by medical or health care professionals should be screened to determine whether they may have an alcohol or drug abuse problem. A person may have a problem with alcohol abuse or dependence, a brief intervention should be conducted and, if appropriate, the person should be referred for assessment and further treatment. The screening and brief intervention should be:

- *Conducted by trained professionals in hospitals, emergency departments, ambulatory care facilities, physician's offices, health clinics, employee assistance programs and other medical and health care settings.*
- *Used to decide whether an assessment and further treatment is warranted.*
- *Based on standardized screening tools (e.g., CAGE, AUDIT or the AUDIT-C) and brief intervention strategies.⁹*

Status

Screening and Brief Intervention is beginning to see more widespread use in Florida. However, little information on the current level of use was available for this assessment.

In 2007, Shands Healthcare at the University of Florida (UF) hosted the Brief Intervention of Alcohol Use Disorders Colloquium, to teach attendees how to intervene with trauma patients who were inebriated when injured and those who were inebriated when they caused injury to others. The Shands at UF team annually treats about 980 such patients or 30 to 40 percent of their total trauma patients.

The four-hour training session involved 53 Florida healthcare professionals from Shands HealthCare, Tampa General Hospital, Orlando Regional Hospitals, North Broward Medical Center (Deerfield Beach), Memorial Regional Hospital (Hollywood), Jackson Memorial Hospital (Miami) and St. Joseph's Hospital (Tampa). It outlined the methods and implementation of brief intervention.

Florida is one of many states with an insurance Alcohol Exclusion Law. The law allows health insurance companies to deny coverage to individuals who are injured as a result of being under the influence of alcohol or any narcotic not prescribed by a physician. The Alcohol Exclusion

⁹ For a discussion of assessment instruments, see: Allen, John and M. Columbus (Eds.) *NIAAA Handbook on Assessment Instruments for Alcohol Researchers* (2nd) edition). Rockville, MD: National Institute on Alcohol Abuse and Alcoholism, 2003.

For an overview of alcohol screening, see: "Screening for Alcohol Problems: An Update," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, Alcohol Alert No. 56, April 2002. For a primer on helping patients with alcohol problems, see: "Helping Patients with Alcohol Problems: A Health Practitioner's Guide," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, NIH Publication No. 04-3769, Revised February 2004.

Law can be used to deny payment to doctors and hospitals that render care to these patients which discourages alcohol screening in trauma centers and emergency departments.

The Florida Department for Children and Families received a \$2,800,000 grant from the U.S. Substance Abuse Mental Health Services Administration (SAMHSA) to implement a substance abuse screening and intervention program for older adults by partnering with primary care and emergency physicians who come into contact with older adults who are at risk for or are experiencing substance abuse problems. Older adults will be screened and provided brief interventions in such non-specialty sites as primary and emergency health care settings, senior nutrition programs, and public health clinics, thereby broadening the base of an existing, evidence-based pilot program of brief interventions that specifically targets older adults.

Recommendations

- Train emergency room physicians, nurses, and other treatment staff in the methods of Screening and Brief Intervention.
- Implement Screening and Brief Intervention techniques in emergency rooms and other settings throughout Florida.
- Repeal the alcohol exclusion law and prohibit insurance companies from denying coverage to individuals injured as a result of impairment.

5-B: Treatment and Rehabilitation

Advisory

Each State should work with health care professionals, public health departments, and third party payers, to establish and maintain programs for persons referred through the criminal justice system, medical or health care professionals, and other entities. This will help ensure that offenders with alcohol or other drug dependencies begin appropriate treatment and complete recommended treatment before their licenses are reinstated. These programs should:

- *Match treatment and rehabilitation to the diagnosis for each person based on a standardized assessment tool, such as the American Society on Addiction Medicine (ASAM) patient placement criteria.*
- *Provide assessment, treatment and rehabilitation services designed specifically for youth.*
- *Provide treatment and rehabilitation services for non-English speaking offenders and culturally relevant treatment for special populations (e.g., Native Americans or newly arrived immigrant groups).*
- *Facilitate health insurance parity treatment for alcohol and other drug abuse disorders, to permit access for persons regardless of ability to pay and encourage States to pursue legislative changes to support health insurance parity payment for alcohol and other drug abuse disorders, particularly in rural and underserved areas.*
- *Ensure that offenders that have been determined to have an alcohol or other drug dependence or abuse problem begin appropriate treatment immediately after conviction, based on an assessment. Educational programs alone are inadequate and ineffective for these offenders.*
- *Provide treatment and rehabilitation services in addition to, and not as a substitute for, license restrictions and other sanctions.*
- *Require that drivers, who either refused or failed a BAC test, and/or whose driver's license was revoked or suspended, complete recommended treatment, and that a qualified professional has determined that their alcohol or drug use problem is under control before their license is reinstated.*

Status

All drivers convicted of DUI are required to enroll in a DUI Program. DUI Programs are private and professional non-profit organizations that provide education, a psychosocial evaluation, and treatment referral services to DUI offenders to satisfy judicial and driver licensing requirements. Two educational services are offered - Level I for first-time offenders and Level II for multiple offenders. The Level I course is to be a minimum of 12 hours of classroom instruction and incorporates didactic and interactive educational techniques. The Level II course is a minimum of 21 hours of classroom time using primarily interactive educational techniques in a group setting. The average class size is not to exceed 15 students for Level II. This course focuses on the problems of the repeat offender and treatment readiness as the majority of students are referred to treatment. In no case is placement in Level II used in lieu of treatment.

Following evaluation by DUI Evaluators in DUI Programs, clients with evidence of alcohol or drug abuse are referred to treatment facilities certified by the Department of Children and Families (DCF). Approximately 64 percent of first offenders and over 90 percent of second offenders are referred to treatment.

Convicted impaired drivers receive treatment services from local agencies certified by the DCF under chapter 65D-30 of Florida Administrative Rules. Clients are responsible for all costs of treatment, including the DUI education program.

It is not clear whether treatment resources are adequate to meet the specific needs of DUI offenders. Florida has a publicly funded treatment system that is intended to provide treatment for which clients are charged based on ability to pay. Many DUI offenders have health insurance coverage; however, it is uncertain how many plans provide adequate coverage for substance abuse treatment. Parity requires insurance carriers to provide the same level of coverage for substance abuse treatment as is provided for all other medical care. However, Florida is one of 13 states that have not enacted parity legislation.

Drivers referred to treatment are monitored by the treatment agency. The treatment agency notifies the DUI Program of completion or non-compliance with the prescribed treatment. Completion of treatment under the DUI Program is required for driver license reinstatement.

A study conducted by the Pacific Institute for Research and Evaluation (PIRE)¹⁰ compared the Florida DUI Program education curriculum to the Preventing Alcohol-Related Convictions (PARC) Program. PARC differs from traditional DUI education programs in that it is intended to control offenders' driving without asking them to change their drinking or deal with their alcohol abuse. While the study found short-term impact on recidivism, the program's failure to address addiction or abuse is highly questionable. DUI Program experience indicates that 64 percent of first offenders had sufficient indication of alcohol abuse to be referred to treatment. An education program that implies, let alone specifically teaches, problem drinking drivers that they only need to avoid driving ignores the very nature of addiction in which denial and rationalization are central problems. Even if the PARC curriculum results in offenders avoiding driving situations, it might interfere with treatment of alcohol abuse leading to a variety of medical, social, and legal problems. For over a decade, professionals in the highway safety field have recognized that narrowly focused countermeasures that are intended to simply keep problem drinking drivers off the road can enable alcohol abuse and related serious medical, social, and legal consequences.

Currently, approximately 60 percent of the convicted impaired drivers have their licenses reinstated. Other than the studies completed on the PARC curricula, no comprehensive studies of the DUI Program were provided for this assessment. A comprehensive study should address the impact of the program on driving behavior including license reinstatement. The study should also determine the impact of the DUI Program on alcohol and substance abuse problems.

¹⁰ Rider, R., Kelley-Baker, T., Voas, R. B., Murphy, B., McKnight, A. J. and Levings, C. *The Impact of A Novel Educational Curriculum for First-time DUI offenders on Intermediate Outcomes Relevant to DUI Recidivism*. Accident Analysis and Prevention 38 (2006) 482-493.

Currently there are two DUI Treatment Courts in Florida and a third county is developing one. These courts are based on the Drug Treatment Court model and provide post-conviction treatment with intensive supervision. Offenders avoid jail by complying with DUI Court requirements. DUI Court is a three-phase program. Phase I is 14 weeks during which offenders participate in treatment, attend a DUI education program, and submit to urine screens at least three times per week. During Phase II clients attend at least one group treatment session each week for 22 weeks. Phase III lasts 16 weeks and includes a status meeting at least once each week and requires the client to develop a sobriety plan.

The Polk County DUI Treatment Court reported a 98 percent graduation rate. The program is financially self-sufficient.

DUI Treatment Courts are based on the incentive of avoiding jail. In Florida, first offender DUI drivers are subject to a maximum sentence of six months in jail (nine months if Blood Alcohol Level (BAL) was 0.20 or higher). Second offenders are subject to a maximum nine months (12 months if BAL was 0.20 or higher.). Offenders facing more than the minimum jail sentence often demand trials increasing the case-load in already burdened courts. The need to accept pleas and the current jail overcrowding often result in the imposition of minimum incarceration sentences. Maximum utilization of DUI Treatment Courts requires significant sentences to incarceration.

Recommendations

- **Implement only DUI education programs that address alcohol and other substance use, abuse, and addiction as causal factors in impaired driving and other serious medical, social, and legal problems.**
- Conduct a comprehensive evaluation of the DUI Program.
- Implement DUI Treatment Courts throughout Florida.
- Increase minimum sentences for DUI.
- Enact health insurance parity legislation.

5-C: Monitoring Impaired Drivers Advisory

Each State should establish a program to facilitate close monitoring of impaired drivers. Controlled input and access to an impaired driver tracking system, with appropriate security protections, is essential. Monitoring functions should be housed in the driver licensing, judicial, corrections, and treatment systems. Monitoring systems should be able to determine the status of all offenders in meeting their sentencing requirements for sanctions and/or rehabilitation and must be able to alert courts to noncompliance. Monitoring requirements should be established by law to assure compliance with sanctions by offenders and responsiveness of judicial system. Noncompliant offenders should be handled swiftly either judicially or administratively. Many localities are successfully utilizing DWI courts or drug courts to monitor DWI offenders. States should:

- *Have an effective monitoring system for all impaired driving offenders (including out-of-state offenders).*
- *Use effective technology (e.g., ignition interlock mechanisms, electronic confinement and monitoring) and its capability to produce reports on compliance.*
- *Include driver license tracking systems as an essential component of monitoring.*
- *Generate periodic reports on offender compliance with administrative or judicially imposed sanctions.*

Status

Florida law requires that courts “shall” place all offenders, convicted of violating Florida’s DUI laws, on monthly reporting probation and shall require completion of a substance abuse course conducted by a DUI Program licensed by the Department of Highway Safety and Motor Vehicles (DHSMV) which must include a psychosocial evaluation of the offender. If the DUI Program refers the offender to an authorized substance abuse treatment provider for substance abuse treatment, in addition to any sentence or fine imposed, completion of all such education, evaluation, and treatment is a condition of reporting probation. The offender shall assume reasonable costs for such education, evaluation, and treatment. The referral to treatment resulting from a psychosocial evaluation shall not be waived without a supporting independent psychosocial evaluation conducted by an authorized substance abuse treatment provider appointed by the court, which shall have access to the DUI Program's psychosocial evaluation before the independent psychosocial evaluation is conducted.

The DUI Program monitors the progress of convicted impaired drivers through education, screening, referral, and treatment. The DUI Program has primary monitoring responsibility, although treatment providers monitor treatment progress and report compliance to the DUI Program. However, monitoring and compliance in the DUI Program is primarily for purposes of driver licensing and consequences of non-compliance are limited to restrictions on license reinstatement.

Florida only provides state-funded probation services for DUI offenders who have been adjudicated of felony offenses. County Court judges also have access to probation supervision services in their counties. These services are either provided through county agency providers or

through private probation providers, which are self-sustaining. DUI defendants are assigned and monitored by probation officers who regularly report violations to the courts and obtain warrants for the arrest of defendants who have violated probation conditions.

While Florida law permits probation periods of up to one-year for misdemeanor DUI violations (first and second offenses), it is a common practice for defense attorneys and prosecutors to stipulate to early termination of probation for defendants who have completed conditions that would ordinarily have to be completed during the probationary period. This effectively enables many defendants to substantially or even totally avoid probation supervision by completing community service, payment of fines, evaluation and treatment, and other statutory requirements prior to entry of a guilty plea.

Florida provides for installation of ignition interlock devices (IIDs) in the cases of second and subsequent offenders. It is optional for first-time offenders. IID requirements are not included as a normal condition of probation, although judges have the discretion to require IID use as a condition. Defendants, who are required to install and utilize IIDs, are monitored by the DHSMV. Violations result in loss of driving privileges. Tampering is a non-criminal infraction.

Florida law allows individuals with five and 10-year revocations to apply for DUI Special Supervision Services Program (SSSP). The DHSMV, Division of Driver Licenses, is responsible for granting a restricted driver license to the applicant. An applicant with a revocation of five years or less must wait until the expiration of twelve (12) months after the date the revocation was imposed as a prerequisite to admission into the program and must not have driven within the twelve (12) months prior to reinstatement. An applicant with a revocation of five (5) years or less must have not used any drugs for at least the past twelve (12) months. Drugs include alcohol and those non-alcoholic beers or wines which contain less than 0.5 percent of alcohol.

An applicant with a revocation of more than five (5) years, except those currently under revocation, must wait at least twenty-four (24) months as a prerequisite to admission into the program and must not have driven within the twelve (12) months prior to reinstatement. An applicant with a revocation of more than five (5) years, except those under permanent revocation, must have not used any drugs or alcohol for at least the past twelve (12) months.

Drivers under permanent license revocation for four or more DUI convictions, for DUI Manslaughter with a prior DUI conviction or for murder resulting from the operation of a motor vehicle are not eligible for this program. Applicants under a permanent license revocation for DUI Manslaughter with no prior DUI related convictions: 1) must not have been arrested for a drug related offense during the five (5) years preceding the filing of the petition; 2) must not have driven a motor vehicle without a license for at least five (5) years prior to the hearing, or for five years after the termination of any term of incarceration under s. 316.193 or former s. 316.1931 whichever date is later; 3) must not have used any drugs for at least five (5) years prior to the hearing; and 4) must have completed a DUI program licensed by the DHSMV.

Recommendations

- Mandate that all DUI defendants complete at least six months of supervised probation regardless of completion of all education and/or treatment conditions.
- Mandate ignition interlock device (IID) installation and use as a condition of supervised probation for at least one-year.
- Increase the possible probation period to two years to enable monitoring for behavior modification programs needing a longer probation period.

VI. PROGRAM EVALUATION AND DATA

6-A. Evaluation

Each State should routinely evaluate impaired driving programs and activities to determine their effectiveness, and have access to and analyze reliable data sources for problem identification and program planning. Each State should conduct several different types of evaluations to effectively measure progress, to determine effectiveness, to plan and implement new program strategies and to ensure that resources are allocated appropriately. The evaluation should be:

- *Planned before programs are initiated to ensure that appropriate data are available and adequate resources are allocated.*
- *Designed to use available traffic records and other injury data.*
- *Used to determine whether goals and objectives have been met and to guide future programs and activities.*
- *Organized and completed at the State and local level.*
- *Reported regularly to project and program managers and policy makers.*

Status

Projects funded by the Traffic Safety Program (TSP) are required from their inception to consider and describe project evaluation. This requirement is defined within the instructions of the concept paper that is the document which must be submitted to receive consideration for funding. Submitters are instructed to provide the evaluation component(s) they will use to examine the achievement of program objectives. The concept form specifically includes a space in which the submitter is to describe the evaluation to be completed on the proposed project.

The importance of project evaluation is further emphasized in the “Florida Traffic Safety Manual” that dedicates a chapter to the need for and procedures to evaluate all traffic safety projects. Chapter 7 of the manual describes the administrative evaluation of projects plus the requirements for the “Annual Report” required by the National Traffic Safety Administration (NHTSA).

The State Safety Office submits this “Annual Report” to NHTSA. It consists of a brief overview of Program accomplishments and challenges, graphs illustrating the status of performance goals and trends, and highlights of the various program areas. For the FY 2007 Impaired Driving Program, highlights included 384 checkpoints conducted in the Sustained Enforcement Program and Labor Day National Crackdown, 3,500 DUI saturation patrols, and over 24,000 arrests. In support of these enforcement efforts, 9,532 television spots were aired on cable outlets in six geographic areas.

While there does appear to be sufficient effort aimed toward administratively evaluating TSP projects, there seems to be little effort to conduct impact evaluations of the projects or the program. For example, the TSP could compare changes in DUI fatalities, injuries, and crashes

between those jurisdictions that participate in the Sustained Enforcement Program and those jurisdictions that do not to determine how effective this program may be.

Additionally, though it may be initially difficult to plan an impact evaluation, this can be better accomplished by involving others who are not directly vested in the program/project level activities. A DUI Strategic Safety Impact Evaluation Plan which includes all available datasets (crash, DUI arrest reports, vehicle miles of travel, demographic, driver, vehicle, citation, and EMS, hospital discharge, Medical Examiner, attitude and health survey and media contact data) may help identify data elements that need to be captured and analyzed. Academic/University level research institutions may also be available to plan, design and conduct impact evaluations. The Florida Department of Highway Safety and Motor Vehicles makes use of Pacific Research Institute for evaluation purposes.

Evaluations that rely on raw numbers without normalizing the data may lead to misleading conclusions. While the impact evaluation may use spatial as well as temporal distributions, it is also necessary to look at target populations, both in terms of socio-economic as well as demographic distributions. Additionally, since Florida is a tourist destination, it may also be critical to analyze the data and evaluate the impact on both in-states as well as out-of-state residents, in particular, the impact on the older population.

Towards this end, it is noteworthy and a very commendable effort that Florida Department of Transportation has initiated creation of the Traffic Safety Program Manual which is currently available as a draft working document and is being refined and fine tuned to meet the needs of DUI safety advocates and the community at large. This document includes a chapter on the evaluation component.

Recommendations

- **Identify and market to all stakeholders (data collectors, managers and users) Florida Highway Safety Strategic Plan and Traffic Safety Information Strategic Plan.**
- Actively involve Technical Advisory Committee in identifying data gaps/issues/concerns in the program evaluation steps.
- **Develop a DUI Strategic Safety Impact Evaluation Plan.**

6-B. Data and Records

Advisory

States should establish and maintain records systems to fully support their impaired driving program. Each system should use data from other sources, such as the U.S. Census, the Fatality Analysis Reporting System (FARS) and the Crash Outcome Data Evaluation System (CODES), to fully support the impaired driving program. The State records systems should:

- *Permit the State to quantify:*
 - *the extent of the problem (e.g. alcohol-related crashes and fatalities)*
 - *the impact on various populations (e.g. by age, gender, race and ethnicity)*
 - *the level of effort dedicated to address the problem (e.g. level of enforcement activities, training, paid and earned media)*
 - *the impact of the effort (e.g. public attitudes, awareness and behavior change).*
- *Contain electronic records of crashes, arrests, dispositions, driver licensing actions and other sanctions of DWI offenders.*
- *Permit offenders to be tracked from arrest through disposition and compliance with sanctions.*
- *Be accurate, timely, linked and readily accessible to persons authorized to receive the information, such as law enforcement, courts, licensing officials and treatment providers.*
- *Be guided by a State-wide traffic records coordinating committee (TRCC) that represents the interests of all public and private sector stakeholders, and the wide range of disciplines that need the information.*

Status

Florida completed a Traffic Records Assessment in June 2006 followed by a Traffic Safety Information Strategic Plan in May, 2008. Together, these two documents provide an excellent framework to make Florida's traffic records a model for the nation to follow. While the data owners are the key players, to make effective use of the data, additional stakeholders need to be involved in identifying additional data sources, analyzers and users.

Though safety data is being used very effectively to identify problems and target resources to identified problems, exposure measures such as population demographics, licensed drivers, registered vehicles and driver history file on multiple DUI convictions, attitude and health survey data, media exposure data, DUI arrest reports data, citation adjudicated and non-adjudicated files provide additional opportunities to address DUI issues/concerns in more creative ways.

While it may not provide immediate benefits, state Traffic Records Coordinating Committee (TRCC) needs to identify additional stakeholders who can provide critical input to the next update of the Traffic Safety Information Strategic Plan. Among the players who could benefit are the academic community, Department of Business and Professional Regulations' Division of Alcoholic Beverages and Tobacco, Bureau of Driver Education & DUI Programs of Division of

Driver Services, Florida Office of Drug Control, Florida Department of Children and Families, insurance companies, driver training schools, Technical Advisory Committee (TAC) and Statewide DUI Taskforce or Governor's Traffic Safety Council for Impaired Driving, if one is created.

Recommendations

- Market the Strategic Highway Safety Plan and Traffic Safety Information Strategic Plan to all stakeholders involved in reducing driving under influence crashes.
- **Develop and present a course in safety data availability and its use in problem identification and impact evaluation to members of Traffic Records Coordinating Committee (TRCC), Technical Advisory Committee (TAC) and the academic community.**
- Identify additional stakeholders for the next update of Traffic Safety Information Strategic Plan.

6-C. Information and Records Systems (including Licensing)

Advisory

Each State's driver licensing agency should maintain a system of records that enables the State to: (1) identify impaired drivers; (2) maintain a complete driving history of impaired drivers; (3) receive timely and accurate arrest and conviction data from law enforcement agencies and the courts, including data on operators as prescribed by the commercial driver licensing (CDL) regulations; and (4) provide timely and accurate driver history records to law enforcement and the courts. The record system should:

- *Include communication protocols that permit real-time linkage and exchange of data between law enforcement, the courts, the State driver licensing and vehicle registration authorities, liquor law enforcement and other parties with a need for this information.*
- *Provide enforcement officers with immediate on-the-road access to an individual's licensing status and driving record.
Provide immediate and up-to-date driving records for use by the courts when adjudicating and sentencing drivers convicted of impaired driving.*
- *Provide for the timely entry of any administrative or judicially imposed license action and the electronic retrieval of conviction records from the courts.*
- *Provide for the effective exchange of data with State, local, tribal and military agencies, and with other governmental or sovereign entities.*

Status

The Department of Highway Safety & Motor Vehicles (DHSMV) Division of Driver Licenses (DDL) maintains the driver file which contains records on some 20 million drivers, of which, over 75 percent are active. The driver records include commercial driver licenses (CDL) too. The DDL also maintains the vehicle registration and title file. This file contains records on some 18 million registered vehicles of which 75 percent are automobiles and trucks. Commercial vehicle registrations are also maintained in the same file and are identified as commercial vehicles.

Courts and law enforcement have immediate access to driver data in conjunction with the Criminal Justice Network (CJNET). The network provides access to Driver And Vehicle Information Database (DAVID). The information search can be initiated using a name, driver license number, license plate number, VIN, or other personal details. The return includes the following elements:

- Digital Images and Signatures – including current and previously stored photographs.
- Driver License Information – descriptors, restrictions, status, and complete driver history.
- Vehicle Information – registration and title and the history of them back to 1999.
- Crash Reports – including information about alcohol and drug involvement
- Citizenship – information on non-Citizens known to the Department.

Convictions are submitted electronically by virtually all county courts through the Traffic Citation Accounting and Transmission System (TCATS). Crash involvement is posted automatically in the driver file if a conviction is associated with the crash. If the driver was deemed by enforcement officer to be at fault and a notice is received from the court; that crash involvement is posted manually. Blood alcohol level (BAL) data are recorded in the driver file if present on a crash report or citation.

The information in the driver file supports the functions of driver control. In addition, this file is used to support the Problem Driver Pointer System (PDPS) and the Commercial Driver License Information System (CDLIS). Driver histories from previous states are included in the driver file for commercial vehicle operators and non-commercial drivers. Criminal offenses are recorded in the Florida driver record as reported by a previous state. Florida is Driver License Compact Agreement participant. Within the constraints of Florida's motor vehicle code and Driver Privacy Protection Act (DPPA), the driver file serves a variety of users.

During 2007, some 5,300,000 citations were issued and some 4,100,000 adjudicated by March 1, 2008. However, this still left some 1,200,000 citations still pending adjudication. Of these, some 21,000 citations were pending driving under influence (DUI) violations.

Recommendations

- **Ensure timely adjudication of all pending citations.**
- Determine the root causes and possible resolution or process improvement for the pending driving under influence violations so that they are adjudicated in a timely manner and posted on the driver history files for immediate access by law enforcement.

TEAM CREDENTIALS

SUSAN N. BRYANT

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Susan (Sue) Bryant is currently a transportation consultant for a small firm based in Austin, Texas. After almost thirty years of state employment, she retired as the director of the public transportation division of the Texas Department of Transportation (TxDOT). The public transportation division had 180 employees and an approximately \$150 million budget of federal and state grant programs to rural and small urban transportation systems, the state's medical transportation program, and public transportation planning. Prior to becoming division director, she served for over ten years as the director of the Texas traffic safety program.

During her career with TxDOT, she held the position of state traffic safety director, assistant to the deputy director for field operations, and highway safety planner and program manager. She served as secretary and member of the board of the National Association of Governors' Highway Safety Representatives (now the Governors Highway Safety Association) and member of the law enforcement committee for the Transportation Research Board.

She has also served as member and ultimately as chair of the City of Rollingwood's Planning and Zoning Commission.

She has taught high school and adults, has consulted for the media in major television markets, and also teaches management to state and local officials. She has been named to "Who's Who of American Women," has received the national Award for Public Service from the U.S. Department of Transportation, and is a two-time recipient of the American Association of State Highway and Transportation Officials (AASHTO) President's Modal Award for highway safety. She is also a graduate of Leadership Texas.

A Phi Beta Kappa graduate in English from the University of Iowa, she holds a master's degree in communications from Iowa and a master's degree in business administration from the University of Texas at Austin.

LARRY C. HOLESTINE

Director of Public Safety Services
Data Nexus, Inc.

Experience

- Served as a law enforcement liaison for the National Highway Traffic Safety Administration (NHTSA) -- Region 8
- Director of Public Safety Services, Data Nexus Inc.
- Patrol Major, Colorado State Patrol
- Over 29 years in professional law enforcement.
- Represented NHTSA and the National Safety Council (NSC) to promote the Association of Transportation Safety Information Professionals (ATSIP)
- Coordinator/Instructor for the Colorado Law Enforcement Training Academy and the Colorado State Patrol Academy
- Instructor, Colorado Institute of Law Enforcement Training at Colorado State University.

Affiliations/Professional Associations

2003 Chair of the Association of Transportation Information Professionals.

- Executive Board, Association of Transportation Safety Information Professionals, National Safety Council – 2001 Program Chair, 2002 1st Vice Chair, 2003 Chair
- Member, ANSI D-16 Committee on Motor Vehicle Accident Classification
- Chair, Steering Committee, Law Enforcement Section, CO Safety Management System
- Member, Colorado State Traffic Records Advisory Committee
- Member, National Agenda for Traffic Records Committee, National Safety Council
- Member, Intelligent Transportation Systems, Archived Data User Program Committee, Federal Highway Administration
- Member, Highway Safety Program Advisory for Traffic Records Panel, Data Nexus, Inc. for National Safety Council

- Member, Project Panel/Advisory Group, Project #NCHRP 17-12 (Improved Safety Information to Support Highway Design) Northwestern University Traffic Institute
- Member, Colorado Department of Transportation RFP Review committee for Intelligent Transportation Systems
- Member, NHTSA Traffic Records Assessment Team: (* Denotes team leader status) Kansas, South Carolina, Nebraska, Louisiana, Arizona, Iowa, New Mexico, *Wisconsin, North Dakota, *Connecticut, *Idaho, *Oregon, *Tennessee, *Delaware, *San Carlos Reservation, *New Jersey, *White River Reservation, *Menominee Reservation, *Kentucky, *Mississippi, Missouri
- Member, National Safety Council, Association of Highway Safety Information Professionals, Marketing and Honest Broker Committee
- Member, Transportation Research Board – Law Enforcement Committee
- Member, Colorado State Patrol Diversity Committee
- Member of NHTSA Impaired Driving Assessment team: Vermont, Nevada, Massachusetts, California, Indiana, Oregon
- Member and President, Northern Colorado Peace Officers Association
- Member, Committee on Guidelines for Transportation Safety Information Management Systems and files, NSC and NHTSA
- Member NCHRP Committee: Project 17-40 Model Curriculum for Highway Safety Core Competencies, Project 03-80 Traffic Enforcement Strategies for Work Zones

Education

- Bachelor of Science, Colorado State University (Specializing in Criminal Justice)
- Certificate, School of Police Staff and Command, Northwestern University
- Certificate, Management in State Government, State of Colorado

Significant Accomplishments

As District Commander of the Colorado State Patrol (CSP), he was responsible for the creation and continued success of the Colorado State Patrol Accident Reconstruction Team, which is recognized as one of the best in the nation. In addition, he played an instrumental role in moving the CSP towards a "paperless" record-keeping environment.

ROBERT P. LILLIS

Experience

- President, Evalumetrics Research
- Research Consultant and Chair of the Research Data and Evaluation Committee of the Partnership for Ontario County
- Research and Evaluation Consultant to the Finger Lakes Drug Court and the Ontario County Juvenile Drug Court
- Director of the Research for the Department of Emergency Medicine, University of Rochester School of Medicine and Dentistry (2000 – 2001)
- Director of the Accident Investigation Team, University of Rochester School of Medicine and Dentistry (1996 - 2001)
- Manager of Highway Safety Programs in the Injury Control Program, Division of Epidemiology, New York State Department of Health (1988 – 1991)
- Project Director of the Comprehensive Community Traffic Injury Prevention Project, Division of Epidemiology, New York State Department of Health
- Project Director on numerous research projects at the New York State Division of Alcoholism and Alcohol Abuse (1978 – 1988)
- Member, Impaired Driving Assessment, National Highway Traffic Safety Administration (NHTSA). Maryland, California (2), Arizona (2), Texas, Connecticut, West Virginia, Wisconsin(2), Oregon, New Mexico, North Carolina, Minnesota, Tennessee, Missouri, Delaware, North Dakota, Montana (2), Utah, Ohio, South Carolina, Illinois, Rhode Island, Georgia, Massachusetts, Kansas, Indiana, Puerto Rico and the Indian Nations.
- Special Consultant to the U. S. General Accounting Office (GAO) (1985 – present)

Organizations/Appointments

- Member, MADD Cultural Diversity Taskforce
- Membership Chair, American Public Health Association – Alcohol and Drug Abuse Section

Significant Awards

- Monroe County Public Health Service Award

- John Q Award for Service to Addictions

Education

- Bachelor of Science in Psychology, John Carroll University
- Certificate, Rutgers University – School of Alcohol Studies
- Graduated Studies in Social Psychology, University of Rochester

MANU G. SHAH, P.E.

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PROFESSIONAL EXPERIENCE

- Manu Shah has over thirty years of experience in transportation and highway safety field. He has extensive working knowledge of traffic safety programs, annual highway safety plans, business plans, and performance-based measures in highway safety. He was a Fellow of the Institute of Transportation Engineers and a Registered Professional Engineer in Maryland.
- Assistant Professor, Mathematics Department, Anne Arundel Community College, Arnold, Maryland.

EDUCATION

- Postgraduate – Transportation Policy (Highway Safety), University of Maryland (1982 – 1986)
- MS – Civil Engineering (Traffic and Transportation), University of Maryland (1980)
- MA – Urban Planning and Policy Analysis, Morgan State University (1979)
- MBA – Finance & Accounting, Morgan State University (1975)
- BS – Engineering, University of London – Queen Mary College (1971)

PROFESSIONAL AFFILIATIONS AND TECHNICAL ACTIVITIES

- Fellow, Institute of Transportation Engineers
- Member, American Society of Civil Engineers
- Member, Expert Panel, which developed the Model Minimum Uniform Crash Criteria (MMUCC) Guidelines
- Member, National Safety Council’s Traffic Records Committee
- Member, ANSI D16.1 Committee on Motor Vehicle Accident Classification
- Member, ANSI D20.1 Committee on Data Element Dictionary for Traffic Records Systems

- Past Chair, Maryland Traffic Records Coordinating Committee
- Member, NCHRP Project 17-15, Accident Mitigation Guide for Congested Rural Two-Lane Highways (NCHRP Report 440)
- Chair, NCHRP Project 03-59, Assessment of Variable Speed Limit Implementation Issues
- Member, NCHRP Project 17-22, Identification of Vehicular Impact Conditions Associated with Serious Run-Off-the-Road Accidents
- Member – Technical Advisory Group – AASHTO’s Transportation Safety Information Management System Project
- Member, Traffic Records Assessment Team: New Mexico, Oregon
- Member, Impaired driving Assessment Team: Washington, Arizona, Kansas, Colorado, Georgia
- Member, NAGHSR – Curriculum Development for Traffic Safety Information Systems for Governor’s Highway Safety Representatives and Highway Safety Professional
- Member, US DOT, NHTSA, Curriculum Development for Quantitative Methods for Highway Safety Professionals
- Workshop Member – NCHRP Project 17-18 (3) – Implementation of the AASHTO Strategic Highway Safety Plan – Strategies for Head On and Run-Off-Road Crashes
- Member, NCHRP Project 17-28, Pavement Markings and Markers: Safety Impact & Cost Effectiveness
- Member, NCHRP Project 05-19, Guidelines for Roadway Safety Lighting Based on Safety Benefits & Costs
- Member, NCHRP Synthesis: Reversible Lanes, Centerline Rumble Strips, and Technologies to Improve Highway Safety Data
- Member, Technical Working Group, representing Maryland State Highway Administration in the multi-state effort to develop SafetyAnalyst (Comprehensive Highway Safety Improvement Model)
- Highway Safety Manual – Friend of the Task Force

JUDGE ROBIN D. SMITH

Experience

- Presiding Judge of the City of Midland Municipal Court since November of 1984
- He is a frequent speaker for several groups including the *National Judicial College* and the *Texas Municipal Courts Education Center*. In addition, he has spoken at judicial training seminars in several states. He is considered to have expertise in the areas of search and seizure, constitutional criminal procedure, traffic safety and juvenile law.
- Edits and publishes the *Texas Municipal Court - Justice Court News* which has more than 800 monthly subscribers.
 - Served a prosecutor for the City of Midland in 1982-83
 - Operated as a solo practitioner in 1983-84.

Organizations/Appointments

- Served as the United States Department of Transportation National Highway Traffic Safety Administration Judicial Fellow from 2002-2004
-
- Chair of the State Bar of Texas Municipal Judges Section in 1989-90
- President of the Texas Municipal Courts Association in 1991-92
- Served on the TMCA Board of directors from 1986-1997, again in 2001 to 2005 and 2006 to present.
- In August 1997, he completed a term as the Chair of the American Bar Association's National Conference of Specialized Court Judges
- In 1997, appointed by Chief Justice Tom Phillips to serve on the Texas Judicial Council where he served until 2001
- Recently elected again to be President-Elect of the Texas Municipal Courts Association. He will serve as President in 2008-2009

Honors

- Named *Judge of the Year* by the Texas Municipal Courts Association in June 1998
- Presented with the *Michael J. O'Neal Outstanding Jurist Gavel Award* by State Bar of Texas Municipal Judges Section, 2002

- Presented the American Bar Association's National Conference of Specialized Court Judges' *Education Award*, 2001
- Recognized by the Texas Junior Chamber of Commerce as one of *Five Outstanding Young Texans* in 1994
- Four -time winner of the *City of Midland Management Awards*
- Selected to be a *Fellow of the Texas Bar Foundation*, 2007

Education

- Bachelor's degree in Economics and Psychology from Oklahoma State University
- Juris Doctorate from Texas Tech University

AGENDA

Florida Impaired Driving Assessment (June 15 – June 20, 2008) Agenda

Sunday – June 15, 2008 @ Harry's Restaurant

6:30 – 8:00 p.m. Welcome and Dinner

- Marianne Trussell, DOT, Chief Safety Officer
- Randall Smith, DOT, Safety Office Administrator
- Shelia McKinnon, DOT, Safety Office Alcohol Coordinator

Monday – June 16, 2008 @ DoubleTree Hotel, 101 S. Adams Street, Tallahassee, FL

8:00 – 9:00 State Leadership Panel/Introduction

- Marianne Trussell, DOT, Chief Safety Officer
- Randall Smith, DOT, Safety Office Administrator
- Shelia McKinnon, DOT, Safety Office Alcohol Coordinator

9:00 – 10:00 Driver License Hearing Proceeding

- Danny Watford, Bureau of Admin Review, DHSMV, Chief
- Eileen Bishop, Bureau of Admin Review, DHSMV, Program Manager

10:00 – 10:15 BREAK

10:15 – 12:00 Legislation

- Captain David Folsom, Tallahassee Police Department
- Pete Stoumbelis, HSMV, Deputy General Counsel
- Lee Cohen, Broward County State Attorney Office

12:00 – 1:00 LUNCH

1:00 – 2:30 Impaired Driving Training

- Linda Cason, Institute of Police Technology & Management
- Kyle Clark, Institute of Police Technology & Management
- Corporal James Strickland, Florida Highway Patrol Academy
- Barbara Lauer, DHSMV, Driver Education & DUI Programs

2:30 – 3:30 Law Enforcement Executives

- Col. John Czernis, Florida Highway Patrol
- Chief Gerald Monahan, President of Florida Police Chief Assoc.
- Corporal Randy Ream, Pinellas County Sheriff's Office

3:30 – 5:30 DUI Enforcement

- Sgt. Luis Taborda, Miami Police Department
- Sgt. Joe Giangrosso, Tallahassee Police Department
- Lt. Greg Melvin, Orange City Police Department
- Sgt. Michael Peasley, Pinellas County Sheriff's Office
- Lt. Kelly Hildreth, Florida Highway Patrol

Tuesday, June 17, 2008

8:00 – 9:30 Screening, Intervention, Treatment, Rehabilitation

- Barbara Lauer, DHSMV, Driver Education & DUI Programs
- Judge Jim Hornsby, Polk County DUI Courts
- Judge William H. Overton, Pinellas County Courts

9:30 – 10:30 Prevention /Community Programs

- Robin Peters, FL Office of Drug Control, Prevention Director
- Verl Todd, Florida SADD State Coordinator
- Chris Osborne, DCF, Alcohol Prevention Coordinator

10:30 – 10:45 BREAK

10:45 – 12:00 Advocacy, Victims Issues

- Kristen Allen, MADD Florida
- Laura Dean-Mooney, National President of MADD
- Jan Hanson, 211 Big Bend, Inc.

12:00 – 1:00 LUNCH

1:00 – 2:15 DUI Testing (Blood/Urine/Breath)

- Laura Barfield, FDLE Alcohol Testing Program
- H. Chip Walls, University of Miami Laboratory
- Sgt. Jimmy Branch, Florida Assn. of Chemical Testers
- Corporal James Strickland, Florida Highway Patrol Academy

2:15 – 3:30 Prosecution Panel

- Matthew Olszewski, Traffic Safety Resource Prosecutor, TCC
- Rich Mantei, Assistant State Attorney Office
- Lee Cohen, Broward County State Attorney's Office

3:30 – 3:45 BREAK

3:45 – 5:00 Judicial Panel

- Judge Karl Grube, Pinellas County Courts
- Judge Bill Overton, Pinellas County Courts
- Barbara Lauer, DHSMV, Driver Education & DUI Programs

Wednesday, June 18, 2008

9:00 – 10:00 Traffic Records Data Overview

- Roger Doherty, DOT Traffic Records Coordinator
- Rod McQueen, DHSMV, Program Manager
- Felecia Ford, DHSMV, OMC Manager

10:00 – 10:45 Liquor Control/Licensing

- Cynthia Hill, Director, Division of Alcohol Beverage & Tobacco
- Lt. Jeff Younce, Division of Alcohol Beverage & Tobacco, Responsible Vendor Training

10:45 – 11:00 BREAK

11:00 – 12:00 State Overview Panel Returns (Questions/Answers)

- Marianne Trussell, DOT, Chief Safety Officer
- Randall Smith, DOT, Safety Office Administrator
- Shelia McKinnon, DOT, Safety Office Alcohol Coordinator

12:00 – 1:00 LUNCH

1:00 – 5:00 Assessment Team Report Development

Thursday, June 19, 2008

8:00 – 5:00 Assessment Team Report Development

Friday, June 20, 2008

8:00 – 12:00 Assessment Team Presents DRAFT