



State of Alabama

**Impaired Driving Strategic Plan
2014-2016**

August 22, 2013

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State Of Alabama Impaired Driving Strategic Plan

Executive Summary

This section will present an overall top down view of the Impaired Driving (ID) Strategic Plan. The document was created approved and issued on July 29, 2013 by the Alabama Impaired Driving Prevention Council (AIDPC), which was established to provide ongoing governance to the development of the Plan and its execution.

The plan is organized according to the recommendations of NHTSA Uniform Guidelines for State Highway Safety Programs (No. 8, November 2006), and thus has the major topics of:

- Alabama's Impaired Driving (ID) Challenge
- Program Management
- Prevention
- Criminal Justice Approaches
- Communication Program
- Drug (Including Alcohol) Misuse
- Program Evaluation and Data Collection

This summary will be organized according to these topical areas.

Alabama's Impaired Driving (ID) Challenge

This part of the plan involved discussions of:

- The Magnitude and Classification of Alabama's ID Problem in terms of impaired driving crashes, impaired driving citations and a summary of the problem identification categories that are elaborated upon in the Appendixes. General conclusions drawn include:
 - While the number of ID-caused crashes has been slightly lower in the most recent five years, this trend has not continued; instead it has leveled out and shows signs of possible increase to pre-2008 levels.
 - ID-caused fatality crashes are under-reported by approximately 20%; the under-reporting of ID-involved crashes in general might be as high as 50%.
 - The proportion of ID crashes reportedly caused by drugs other than alcohol has increased from a low point of 12.1% in 2004 to its current value of 30.7%, indicating that close to one-third of all ID-involved crashes involve the driver using some drug (could be in combination with alcohol, and could be prescription).
 - The analysis of eCite data indicates that the number of citations issued dropped off in 2012 by over 6%; the AIDPC law enforcement members attributed this to the great recent reductions in their forces due to attrition (un-replaced retired positions).
 - Analyses of ID-related crashes were performed to show that the typical ID crash occurs in rural areas (county roads), with male drivers between the ages of 21 and

35, during the night-time hours on weekends, and is much more severe than non-ID crashes due to the high impact speeds, lack of proper restraints, late night hours, rural locations and time to obtain EMS assistance.

- These analyses also indicated a dramatic over-representation in ID- not having a valid license and being unemployed.
- The ID strategic mission and goal statements:
 - Mission statement: To maximize the impact of a harmonious collaborative effort to reduce the reduction of ID fatalities, injuries and crashes to the lowest level possible, and ultimately to eliminate them altogether.
 - Goal statement: For calendar year 2014, the goal is a reduction from the 277 baseline to 250 fatalities involving a driver with a BAC.08 and above.
- The guiding Principles in the ID Strategic Plan Development, which recognized the diverse nature of its mission, the need to coordinate activities statewide, the need for data-driven, evidence-based policies, and the fact that the problem is an ingrained cultural one that will require a wide variety of efforts to counteract.
- The relationship to the State Strategic Highway Safety Plan Efforts, which give every indication of being quite cooperative and complementary.

Program Management

This part of the plan involved discussions of:

- The creation and functioning of the Alabama Impaired Driving Prevention Council (AIDPC), including its charge, and the fact that it was not just a planning group, but would have continuing responsibilities in implementing the plans that they would establish.
- The strategic planning organization and how each of the various contributing agencies and service groups would interact to create the plan.
- Program management and the fact that the AIDPC will meet on a regular basis and between meetings serve to review documents and programs within their respective organizational purviews.
- Resources and the fact that plans should not be restricted to those action items that were anticipated to receive funding; instead, sufficient resources were assumed to be available to accomplish the plan, and there was a recognition that the plan was for three years and some required funding might be available in the “out years.”
- Data and Records, including the recognition of the Traffic Records Coordinating Committee and the plan that they have recently submitted. Considerable elaboration on this subject is given in Section 7 and Appendixes A and B.

Prevention

The State’s prevention program have the goal of reducing impaired driving through public health approaches, including altering social norms, changing risky or dangerous behaviors, and creating safer environments. This is the first section of the plan that described current activities that are on-going in the various agencies. These action areas were further subdivided into the following:

- Responsible alcohol service, which includes the prevention of: (1) underage drinking and (2) “over-service” to people age 21 and older. This included discussions of:
 - Alabama’s Dram Shop law
 - The role of the Alabama Alcoholic Beverage Control (ABC)
 - Action item: Work closely with private restaurant and other trade organizations to establish some formal programs for education and training with regard to server responsibilities, including Dram Shop provisions.
- Transportation Alternatives, which considers those activities that either prevent or dissuade driving while impaired by providing alternative means of transportation, such as designated driver and safe ride programs.
 - One example cited was the Operation 40 Proof program in the Mobile area.
 - Action items:
 - Using Operation 40 Proof as a model, extend it to as many municipalities throughout the state as possible.
 - Starting with the most populated areas first to maximize the early coverage and generate momentum for the effort.
- Community based programs, referring to those organizations and agencies that currently exist to fulfill other primary goals, but have a health and safety mission. These involved:
 - Schools; action items:
 - Maintain, coordinate and continue to support the efforts of SADD (see Section 3.3.3).
 - Provide training to those involved with the educational system through the Drug Impairment Training for the Educational Professional (DITEP) courses (see Sections 4.2 and 4.7.4)
 - Employers, the action item of which was to initiate AIDPC interaction with private companies and trade organizations that have a common goal of reducing crashes caused by ID.
 - Community coalitions and programs that provide the opportunity to conduct prevention programs collaboratively with all interested parties at the local level. The major entity contributing to the plan in this area was Students Against Destructive Decisions (SADD), a well-known National advocate movement for promoting safety and health within society, and especially within the student age groups, with the goal of reducing deaths and injuries. Action items included:
 - Continue to provide liaison between the AIDPC and SADD, and further their efforts especially in the areas of reducing underage use of alcohol and drug abuse in general;
 - Support legislation that will help to eliminate all underage drinking and drug use (see Section 4.1);
 - Promote stronger GDL laws and their enforcement;
 - Create greater awareness of the role that negative advertising plays on young people in all areas of unsafe driving.

Criminal Justice Approaches

This set of countermeasure approaches includes the entire criminal justice system, including laws, enforcement, prosecution, adjudication, criminal and administrative sanctions and related communications. The goal is to achieve both specific (individual offenders) and general deterrence (public perception). This very broad and general area was subdivided into the following specific topics

- Laws, which included:
 - General areas of legislation that were recommended within the Strategic Highway Safety Plan (SHSP);
 - Fifteen more specific recommendations put forward by the AIDPC; and
 - Five very detailed (actual mark-ups) of laws that are contained in Appendix C.
- Enforcement, which was detailed in two categories:
 - Drug Recognition Experts (DREs); action items:
 - Increase the number of DREs by at least ten per year over the next four years. See Section 4.7.4.
 - Under the oversight of the AIDPC, establish a special task force to study methods for the better implementation of the DRE program, especially to promote its value so that state and local agencies will take advantage of the DRE training opportunities.
 - Determine if legislation or other state policies might be needed in support of the DRE program.
 - Intensive focused impaired driving enforcement efforts, which are detailed to the specific locations to be covered in Section 4.2.2 and Appendix A.
- Publicizing high visibility enforcement; action items:
 - Promote the concept among law enforcement that their efforts are multiplied at least 100% by the use of effective Public Information and Education (PI&E).
 - Study the current PI&E efforts to determine areas in which they can be improved.
 - Implement improved PI&E efforts as determined by the evaluations.
- Prosecution, which is quite relevant since impaired driving cases are some of the most litigiously complex cases in the judicial system; yet they are routinely handled by the most inexperienced prosecutors. Action items:
 - Continue to maintain a full time Traffic Safety Resource Prosecutor (TSRP) dedicated exclusively to highway traffic safety prosecution and enforcement issues to provide ongoing support to all prosecution cases.
 - Support the TSRP in conducting a number of training courses as specified in Section 4.7.
 - Implement a pilot program called DUI/Drug (DUI/D) days. This will be a new program with the goal of ensuring that the courts and all other relevant persons in the criminal justice system are aware of the services provide by the Alabama Department of Forensic Sciences (ADFS), and that they take advantage of those services. This will also serve to reduce ADFS time out of the laboratory via effective time management and planning. The plan calls for the initiation of DUI/D days within specific courts, where a toxicologist is present to cover DUI/D specific docket for the day. This pilot should start out in some of the larger jurisdictions

that have more DUI/D cases. Consideration will also be given to utilizing video/phone testimony when available.

- Adjudication, which resulted in recommendations for three existing entities within the state:
 - Court Referral Officer (CRO) Program; action items:
 - Continue to implement the CRO program as described by the various planning activities described above.
 - Assure that the CRO program is well publicized throughout the judicial system and take whatever steps are necessary to assure that this program is being used universally.
 - Provide additional liaison between the CRO program and newly developing Drug and DUI (Alcohol) Courts, which are described in Sections 4.5.2 and 4.5.3.
 - Continue to maintain and further modernize Model Impaired Driver Access System (MIDAS) so that it stays current with existing information technology developments.
 - Drug Courts; Action Items:
 - Publicize the benefits of Drug Courts so that they can be extended to every county, with a goal of establishing them in at least two new counties per year.
 - Assure effective liaison between Drug Courts, DUI Courts and the local CRO programs.
 - Alcohol Courts; Action Items:
 - Fully evaluate the costs and benefits both in terms of recidivism and its total impact on the criminal justice system.
 - Modify the current model in any areas where deficiencies are found.
 - Once validated, extend this model to at least five counties per year.
 - Pardons and Paroles (P&P); Action Items:
 - Purchase hand held breath test devices for P&P Officers to use for offenders suspected to have been drinking.
 - Advise probationers and parolees that impaired driving is not exclusive to only alcohol, and that individuals should be aware of their intake of narcotic and other pain medications.
 - Officers should conduct evening and night home visits to help identify those offenders who are still drinking or abusing drugs.
 - Establish a system such that arrest reports (details of offenses) for offenders under supervision from other agencies can be received within 72 hours of arrest for an impaired offense, and that an alert is sent out to the appropriate supervisor if/when there is any change to the offender's record. Have the courts add a special condition of no alcohol for probationers convicted of impaired driving.
 - For those so sentenced, require defendants to be fitted with a Continuous Alcohol Monitoring Device that constantly measures the offender's alcohol content and communicates with P&P remotely, greatly reducing the number of visits and the amount of time the probation officers must spend

meeting with impaired driving probationers. This will be a major savings in time and other resources for P&P in the area of impaired driving offender monitoring.

- Administrative sanctions and driver license programs, which generated recommendations in three areas:
 - Administrative License Revocation -- All administrative License Revocation recommendations were legislative in nature. See Section 4.1 (Laws, above) and Appendix C for these recommendations.
 - Vehicle Sanctions; action items:
 - Investigate (by the AIDPC or a select panel) any issues regarding the full implementation of the Ignition Interlock Device (IID) laws to assure that any bottlenecks are removed and that the law can be fully implemented.
 - Conduct a study of the current IID statute to determine if a wider scope of implementation is justified, and if so, implement that extension.
- Supportive Programs – to reinforce and complement the State’s overall program to deter and prevent impaired driving. Examples include the following types of countermeasures:
 - Graduated driver licensing (GDL) for novice drivers, especially those parts of the GDL that deal with impaired driving;
 - Education programs that explain alcohol’s effects on driving,
 - The State’s zero-tolerance laws for minors, and
 - Efforts to prevent individuals from using a fraudulently obtained or altered driver’s license.
 - Action items included:
 - Evaluate all current supportive programs to determine those that are most effective. Evaluations may be of existing programs within the state or similar programs in other states.
 - Move forward emphasizing those programs that show the greatest promise for success in Alabama.
- Training – a large number of courses were recommended within this section; it was subdivided into the following:
 - Law enforcement training,
 - Prosecutor training
 - Judicial training
 - DRE training
 - Interdisciplinary courses and conferences.

Communication Program

This general topic area was subdivided according to the agencies involved:

- The Alabama Department of Economic and Community Affairs (ADECA) has been involved with the development of Public Service Announcements (PSAs), supporting Public Information and Education (PI&E) in general, and focusing these efforts around particular holiday events. It’s Safe Home Alabama (SHA) web site is the only comprehensive traffic safety web site in the country (i.e., it does not favor any particular agency or

service group and attempts to be totally comprehensive in its approach. Action items include:

- Continue to support these year-round PSA efforts;
- Solicit private sources of funding so that additional spots can be developed and that the existing spots can be given greater exposure.
- Continue to support the ongoing maintenance of the SHA web site with current topics.
- Bring the current web site up to date with a new version that assists users in finding what they are looking for on the site.
- The Alabama Department of Public Safety, Public Information/Education Unit has a wide range of ongoing activities throughout the year, responding to special requests for information and officer participation in news events as well as participating in holiday and other special events. Action items:
 - Continue current communication efforts with strong coordination with ADECA, Alabama Department of Transportation (ALDOT) and local agencies.
 - Continue to leverage current activities to deal with impaired driving; an example is the addition of an impaired driving cause to the weekly news releases being sponsored in part by ALDOT to include the number caused by impaired driving. Currently only the number of fatalities that were not properly restrained is being publicized.
 - Evaluate current PSA and PI&E efforts to establish strengths and weaknesses and move forward accordingly.
- The ALDOT Outreach Team Program is a new effort that currently involves at least ten agencies and service groups, and is growing with each of its monthly meetings. Action items:
 - Involve the ALDOT-hosted Outreach Team in all ID planning activities by establishing a formal liaison between the Outreach Team and the AIDPC.
 - Enlist the support of the Outreach Team in assuring that the ID Plan is integrated into the forthcoming update to the SHSP as an appendix.
- The Traffic Safety Research Prosecutor (TSRP) maintains a web site that provides general ongoing information on courses conducted by the TSRP, and addresses the many issues that prosecutors of ID cases face. Action items:
 - Maintain support for the TSRP and promote and enlarge upon the communication efforts that are being made through the website and the forum.
 - Provide additional publicity to the Alabama Drug Abuse Task Force (ADATF) and their reports so that all members of the AIDPC and the traffic safety community in general are aware of the ongoing findings.

Drug (Including Alcohol) Misuse

This plan recognizes that impaired driving frequently is a symptom of a larger alcohol or other drug problem. This part of the plan has the goal of encouraging employers, educators, and health care professionals to implement systems to identify, intervene, and refer individuals for appropriate substance abuse treatment. This effort will be subdivided into the following components:

- Screening and assessment
 - Within the criminal justice system

- Within medical and health care settings
- Treatment and Rehabilitation
- Monitoring of Identified Past Impaired Drivers

With the exception of this last item, the action items were covered in other parts of the plan, and they are referenced as such. The following additional action item recommendations were made with regard to monitoring of identified past impaired drivers

- Maintain the Court Referral Officer (CRO) Program as described in Section 4.5.1.
- Enlarge the scope of MIDAS to assure that Drug Courts and Alcohol (DUI) Courts are aware of and using it.
- Enhance and modernize MIDAS to take advantage of the many advances in technology that have occurred since its development.
- Put MIDAS data under CARE to obtain the full benefits that can be obtained by analyzing these data.

Program Evaluation and Data Collection

This was discussed in terms of: (1) the problem identification process, which occurs prior to countermeasure implementation and serves to optimize the allocation of resources both for tactical decision within countermeasures and strategic decisions choosing among countermeasures; and (2) the evaluation process, which occurs after the fact in order to determine the effectiveness of a countermeasure and improve its future implementations.

- Problem identification process action items:
 - Continue to support a data-driven evidence-based approach to all countermeasures to which analytical improvement might apply (e.g., locations, PI&E/PSA targeting, etc.).
 - Evaluate the processes being used to identify hot spots and other key indicators for decision-making, and determine if the problem identification process itself might be improved.
 - Continue to improve both the process and the results of the process recognizing value of the Deming approach of “continuous improvement forever.”
- Evaluation process action items:
 - Define those areas that are most critical to the decision-making process for which analytical studies will be cost-beneficial.
 - Provide support for those evaluation efforts determined to be most critical.

Appendixes

In order to keep from interrupting the flow of the planning document, the following were placed in appendixes:

- Appendix A. Specific Location Problem Identification Results
- Appendix B. General Problem Identification Results
- Appendix C. Detailed Legislative Recommendations

State Of Alabama Impaired Driving Strategic Plan

1.0 Alabama's Impaired Driving (ID) Challenge

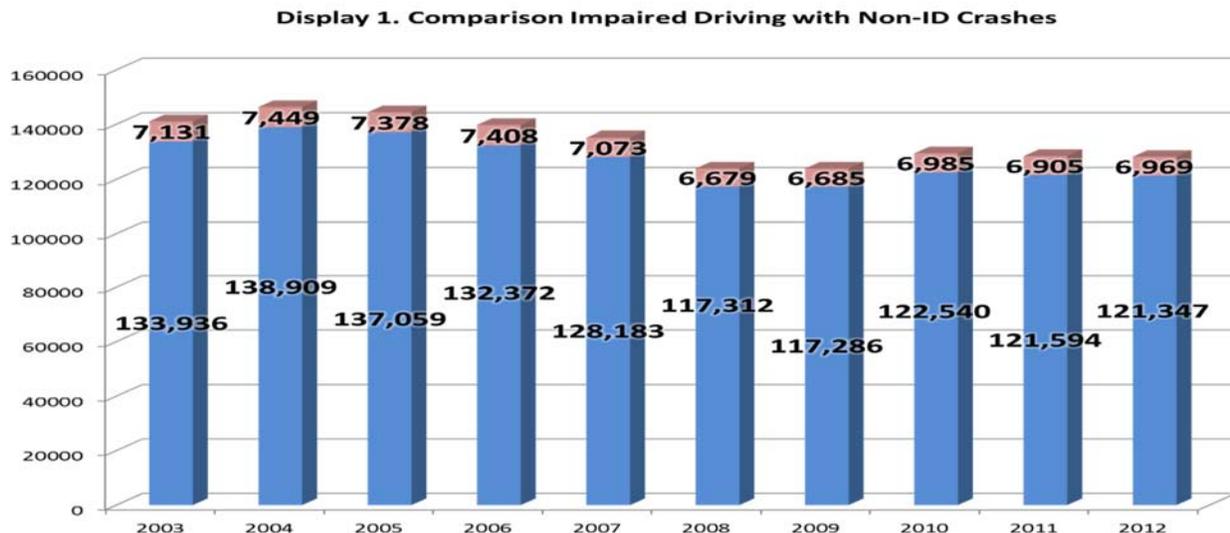
Terminology. Throughout this plan, the term *impaired driving (ID)* will refer to operating a motor vehicle while affected by alcohol and/or other drugs, including prescription drugs, over-the-counter medicines, or illicit substances. ID should be viewed as an over-arching term that will encompass what in the past has been referenced by Driving Under Influence (DUI), Driving While Intoxicated (DWI), substance abuse and other descriptive terms. These alternative descriptive terms will not be used unless they are necessary to focus on some particular aspect of the ID problem. For example, some quotations from legal documents will use DUI, and in those cases there should be no distinction made between ID and DUI. The acronym IDSP will refer to the Impaired Driving Strategic Plan, i.e., the strategic plan for reducing the occurrence of ID, including all preventative, criminal justice, drug misuse and administrative aspects involved with ID issues. Finally, this document was created and approved under the auspices of the Alabama Impaired Driving Prevention Council (AIDPC).

1.1 Magnitude and Classifications of the Impaired Driving Problem

This section presents an overview of the systematic problem identifications that were performed, (unless otherwise specified) using the last three years of Alabama data (CY2010-2012). This is generally a summary of the detailed problem identifications contained in Appendixes A and B. This will be organized below according to crash records analysis, citation records analyses and the general over-represented categories of ID as given by the crash records.

1.1.1 Impaired Driving (Alcohol and/or Drug Involved) Crashes

Display 1 compares the number of reported ID crashes (red) with the number reported that were not recorded as ID (blue) over the calendar years 2003-2012.



The proportion of ID crashes to the total number is essentially constant, varying from a low of 5.1% to a high of 5.4% (a statistically insignificant difference). Thus, it can be concluded that the number of ID crashes is influenced by the same factors that influence overall crash frequency. These factors are primarily economic, and it is reasonable that ID crashes would be influenced by economic factors, e.g., the ability to purchase substances that could be abused, the ability to drive once under these influences, and the use of drugs and alcohol without going to more expensive establishments.

There is no argument that the number of reported ID crashes is less than actual, i.e., the accurate identification of an ID crash in the field is often difficult for the field officer. This disparity can be illustrated by comparing the fatalities indicated by the Fatality Analysis Reporting System (FARS) and that from Alabama crash records. The following table is indicative of this disparity

Year	FARS Fatalities	AL Crash Records	Percent Reported
2008	314	219	69.7%
2009	267	237	88.8%
2010	264	213	80.7%
2011	259	223	85.4%
TOTALS	1104	892	80.7%

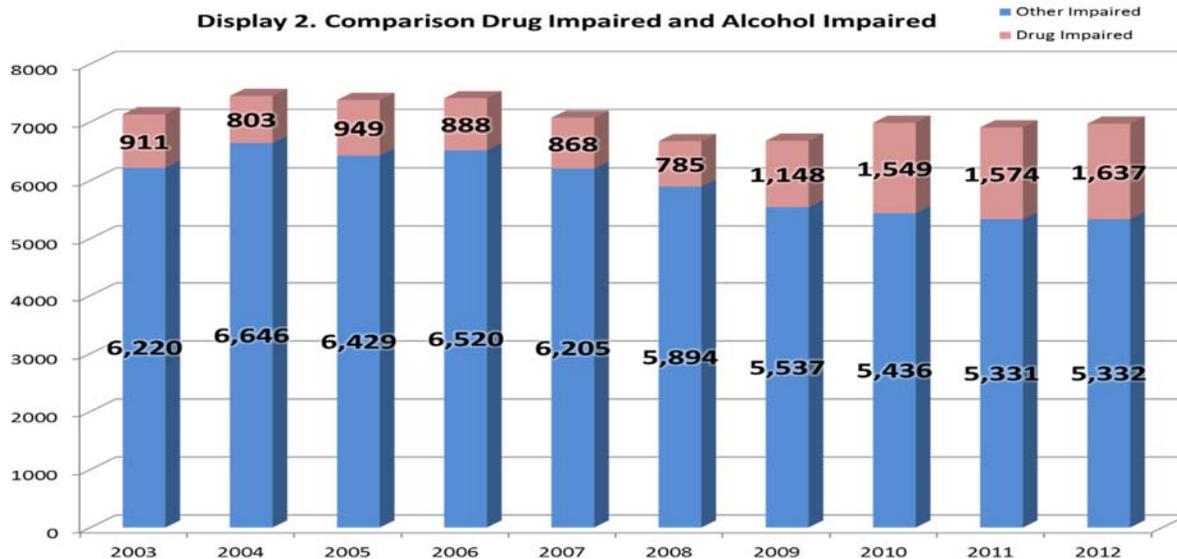
This demonstrates that while the ID crash records are extremely important in providing relative information (e.g., the types of comparisons given in Appendix B), they are not to be considered as accurate in determining the ultimate cost of ID crashes, either in terms of lives or economics. Fatality reporting is by far the most accurate, since it would be expected that the more severe the crash the more investigation will be performed in identifying the basic causes. Seeing the under-reporting factor of about 81% that is given in the table above, the AIDPC estimated that ID crashes (of all severities) are generally under-reported by a factor of 50%. That is, for every one that is reported as such, there is another one that will be reported as a non-ID crash even though impaired driving was involved. One of the major recommendations that will be made in Section 7 will be for improved reporting.

Clearly ID is a major cause of motor vehicle fatalities in the entire country, and Alabama is no exception. Display 2 shows a comparison between the numbers of alcohol ID crashes (blue) against the number of drug related ID crashes (red). The growth in the proportion of ID drug crashes has increased from its low of 12.1% in 2004 to its current high of 30.7%. This is an alarming trend given the perceived lack of social acceptance of drug use and the inability of most law enforcement officers to even identify drug-related ID cases. A number of recommendations given in this plan will address this disturbing trend.

1.1.2 ID Citation Information

Another measure of the impaired driving trends involves the use of citation data from Alabama’s electronic citation system (eCite), which is used by all Department of Public Safety officers and most municipalities, the first full year of use being 2010. The following table indicates the proportions of ID type citations by year.

Year	ID Citations	Non-ID Citations	Percent ID
2010	12,510	977,736	1.26%
2011	12,655	1,000,573	1.25%
2012	11,882	1,014,887	1.16%
Totals	37,047	3,030,243	1.22%



The number of citations obtained from eCite data is well over 90% of the citations written statewide, and it is very representative of what has been occurring over the past three years. The proportion has remained relatively stable and it is a fairly small proportion of the total citations written.

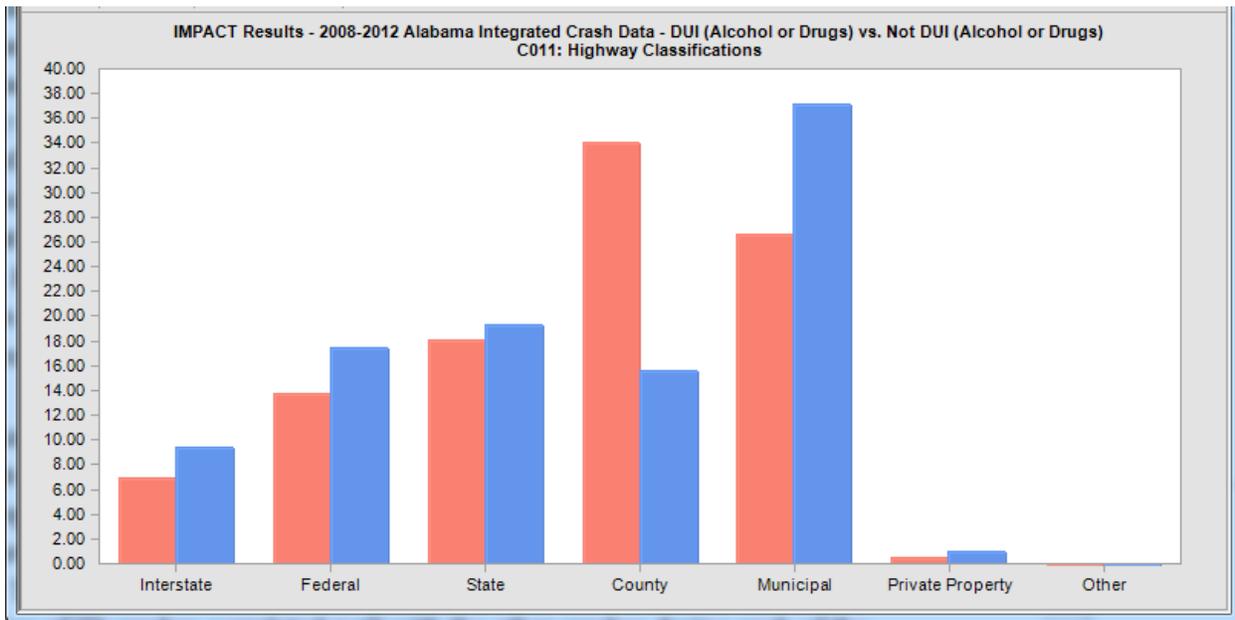
The number of ID citations has declined not because there is a decline in the problem – this can be verified from Display 2. The problem is due to the large number of law enforcement officers who have been retiring and who have not been replaced. There is no way that it can be expected for the smaller force to write the same number of citations, and thus it must be concluded that a larger number (and proportion) of ID violations are going undetected.

1.1.3 General Categories of ID Crashes

In the charts that follow the red bars generally represent ID crashes, while the blue bars represent non-ID crashes. In order to make fair comparisons, the proportion of the total crashes in each category is displayed. See Appendix B for more details. The following summarizes the findings of the problem identification, the details of which are given in Appendix B:

- Geographical Factors
 - County -- Generally, the over-represented counties combine large populations with larger rural areas, as opposed to the highly urbanized counties or the extremely rural counties. See the rural-urban comparison below.

- City –Generally those rural areas that are adjacent to (or contain) significant urban areas, such as Mobile, Madison and Tuscaloosa, are over-represented. Possible factors for relatively fewer severe ID crashes in urban areas include:
 - Less need for motor vehicle travel and shorter distances to the drinking establishments;
 - Larger police presence in the metropolitan areas; and
 - Lower speeds in rural areas.
- Severity of Crash by Rural-Urban – While less than 50% of crashes occur in rural areas, over 70% of the fatal crashes occur there.
- Rural or Urban ID Crash Frequency – Not only are impaired driving crashes more severe in rural areas, but their frequency is about the same as in the urban area, despite the much lower population and traffic volumes. While only about 25% of the crashes are expected in the rural areas, the proportion of crashes in the rural areas is nearly 50%, or double its expected value.
- Highway Classifications – County roads had well over twice their expected proportion of crashes, while all other roadway classifications were under-represented. County roads are known to be less “crashworthy” (i.e., they result in more severe crashes at comparable impact speeds).



- Locale – Reflecting the urban over-representation, open country and residential roadways show a high level of over-representation as compared with the more urbanized roadways.
- Time Factors
 - Year – Analysis of crash data over five years indicates that there has been little change in the total number of crashes reported from year to year, and the changes

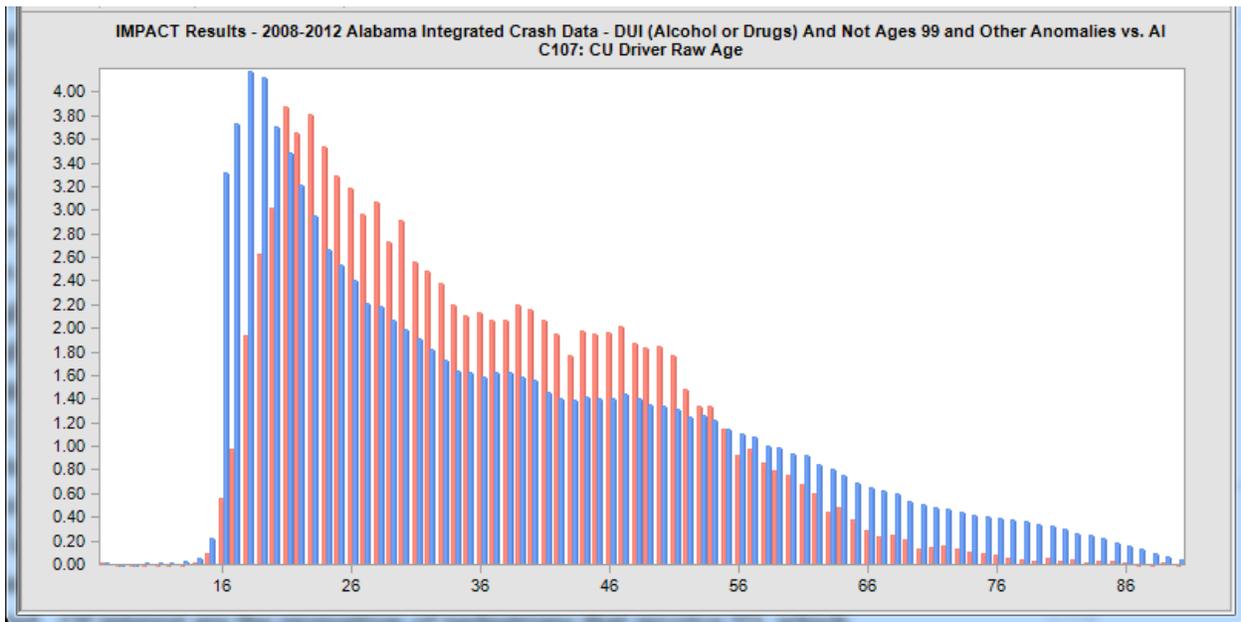
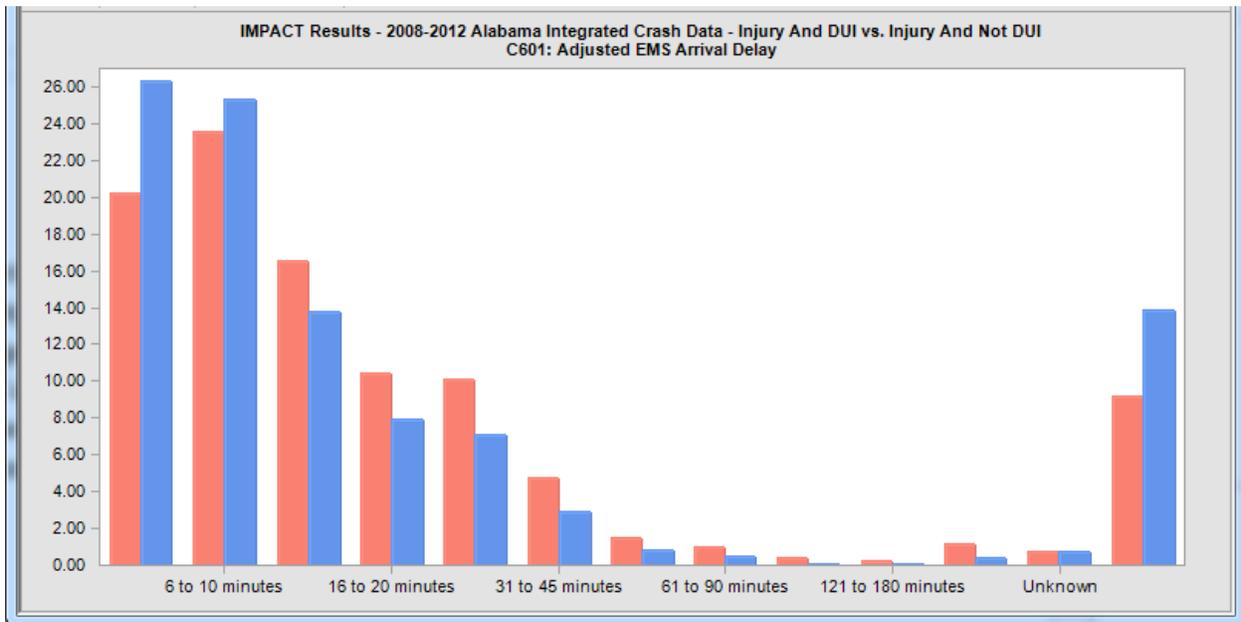
in the proportions are not significant. A more detailed analysis over ten years is given above.

- Month – There were no significant over-representations by month, indicating that the number of ID crashes correlated well with the other crashes during each of the months. It appears, however, that collectively the spring months of March through May, and the last three months of the year having slightly above average ID crashes.
- Day of the Week – This analysis is not only useful for the typical work week, but it also reflects the typical “holiday weekend” patterns. The days can be classified as follows:
 - Typical work weekday (Monday through Thursday) – these days are under-represented in ID crashes due to the need to go to work the following day.
 - Friday – this pattern is also reflected in the day before a weekend (or holiday), i.e., before a day off. The high ID frequency on this day is due those who are getting an early start to the weekend, recognizing that they have no work responsibilities the following day.
 - Saturday – the “Saturday” pattern is the worse for ID crashes in that it has both an early morning component (like Sunday) and a late night component (like Friday). So, it could be viewed as a combination of the typical Friday and Sunday.
 - Sunday – since this is the last day of a holiday sequence or weekend, its over-representation comes strictly from those who start on Saturday night and do not complete their use of alcohol/drugs until after midnight.
- “Holiday Weekends” -- these be viewed as a sequence of a Friday-, Saturday- and Sunday-pattern sequence. The Wednesday before Thanksgiving would follow the Friday pattern assuming that most are at work on Wednesday. The Thursday, Friday and Saturday would follow the Saturday pattern, and the Sunday at the end of the weekend would follow the typical Sunday pattern. This is the reason that long holiday events (i.e., several days off) can be much more prone to ID crashes than the normal weekend.
- Time of Day – The extent to which night-time hours are over-represented is quite striking. Optimal times for ID enforcement would start immediately following any rush hour details, and would continue through at least 3 AM.
- Factors Affecting Severity
 - ID Crash Severity -- The rate of injuries and fatalities are consistently higher in ID crashes than that of non-ID crashes. Fatality crashes are over six times their expected proportion, while the two highest no-fatal injury classifications have over twice their expected values when compared with non-impaired driving

crashes. The other variables analyzed in this section give the reasons for this disparity.

- Speed at Impact – All impact speeds above 45 MPH are dramatically over-represented.
- Severity by Impact Speed –Generally past analyses have found that for every 10 MPH increase in speeds, the probability of the crash being fatal doubles.
- Restraint Use by Impaired Drivers – Impaired driver is over 8 times more likely to be unrestrained as is the non-ID.
- Fatality Crashes by Restraint Use for Impaired Drivers – A comparison of the probability of a fatal crash indicates that a fatality is about seven times more likely if the impaired driver is not using proper restraints. So the combined effect of lower restraint use and higher speed is a devastating combination that accounts for the high lethality of ID crashes.
- Number Injured (Including Fatalities) – Not only are ID crashes more severe to the driver, but also the number of multiple injuries in these ID crashes is over-represented as well.
- Police Arrival Delay – ID crashes generally had longer police arrival delays; in this case all arrival delays over 21 minutes were over-represented. There can be little doubt that this has to do with the rural nature of these crashes and the potential that at night they would not be discovered for some time.
- EMS Arrival Delay – Higher EMS delays were over-represented for impaired driving injury crashes in all categories above ten minutes, and dramatically for the very longer times of 60 minutes and above. This obviously contributes to the severity of crashes and the chances that the crash results in one or more fatalities. As for the very long times, these might be due to the delay in discovering the crash as much as their generally over-represented rural locations.
- Driver and Vehicle Demographics
 - Driver Age – Younger (16-20 year old) drivers have a very serious problem in crash causation even in the absence of impairment. However, these crashes are not generally caused by ID up until ages 19 and 20, and even at these ages they are under-represented. At 21 the first age over-representation takes place and continues on to age 54. There is a bi-modal distribution in the 21-54 year olds; 21 through about 35, and a second group from 36 to 54. Generally the first of these might be classified as largely social drinkers, while it is inescapable that the middle aged caused ID crashes would be largely problem drinkers.
 - Impaired Driver Gender –Males are a far greater issue in ID crashes, and if there are countermeasures that can be directed toward them, doing so would be much more cost-effective, all other things being equal.
 - Causal Vehicle Type – Pick-ups, which up until eCrash went into effect included SUVs, had a very high over-representation. Motorcycles were also highly over-

represented. Of interest are the proportion of pedestrians that involve ID, which is close to three times their expected number.



- Driver License Status – ID crashes are very highly over-represented in causal drivers without legitimate licenses challenging the effectiveness of license suspension and revocations.
- Driver Employment Status –ID driver unemployment rate is about 80% higher than expected. This factor will be watched carefully going forward.

1.2 Strategic Plan Mission and Goal Statements

The Alabama Impaired Driving Strategic Plan (IDSP) was developed and approved with the input and direction provided by the Alabama Impaired Driving Prevention Council (AIDPC), and they based their development efforts on the following mission statement developed by the AIDPC membership.

Mission Statement: *To maximize the impact of a harmonious collaborative effort to reduce the reduction of ID fatalities, injuries and crashes to the lowest level possible, and ultimately to eliminate them altogether.*

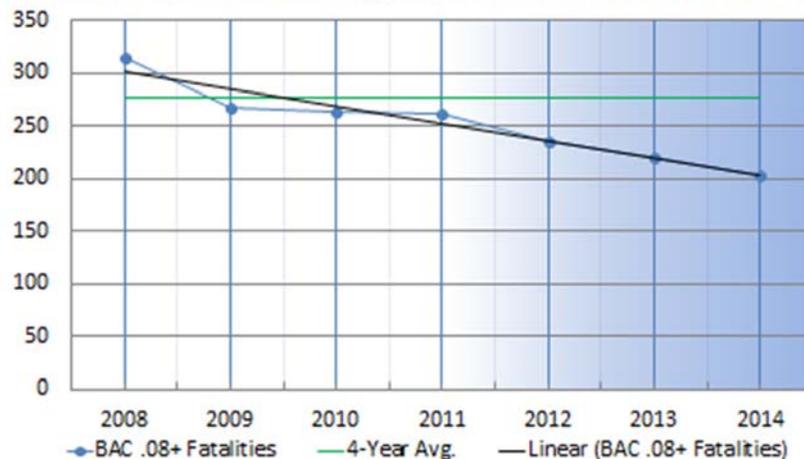
This mission statement recognizes the many efforts developed in the past and those currently ongoing. AIDPC members' experience ranges back to the first ID strategic plan that was developed in the mid-1970s. Over this time Alabama has realized great gains in reducing the frequency and severity of impaired driving crashes. However, the AIDPC recognizes continued vigilance and improvement is needed to further reduce these devastatingly tragic events. As such, it has adopted the theory proposed by Deming called "Continuous Improvement Forever" that mandates an attitude of never being satisfied with the current situation in recognition that improvement is always possible.

Immediate Short-Term Goal: *The goal for calendar year 2014 is a reduction from the 277 baseline to 250 fatalities involving a driver with a BAC .08 and above.*

The goal is from the Alabama 2014 HSP, item C-5: Number of fatalities in crashes involving a motor vehicle driver (including motorcycle operators) with a BAC of .08 and above, as measured by the FARS estimated data given below:

2008	2009	2010	2011	Goal
314	267	264	261	250

Number of Fatalities involving a Driver with a BAC .08 and Above



Based on the above analysis of the FARS crash data from 2008 through 2011 (shaded area is projected), the goal for calendar year 2014 is a reduction from the 277 baseline to 250 fatalities involving a driver with a BAC .08 and above.

It is important to recognize that extrapolations from a limited number of past values can lead to extreme errors, especially since the last value that we have in most cases is 2011, requiring (for example) that the estimates of 2012, 2013 and 2014 all be based on an extrapolation of 2008 through 2011. Rarely if ever does such a linear trend establish an accurate prediction, especially in crash data where regression to the mean usually follows any dramatic departure from the established trend. Nevertheless, these estimates are presented since they do provide valuable information upon which to make and refine the estimates.

The considerations above are particularly true of any metric that is dependent on fatality counts. Consistent with the national trend, Alabama experienced almost a 24% reduction in fatalities between CY 2007 and CY 2009. Because of several economic factors (price of fuel, alcohol, reduction in driving by high-risk groups, reduction in speeds for fuel conservation, and several other well established factors), the expected regression to the mean has not occurred. Any trend line that includes fatality counts prior to 2008 will obviously produce a down trend that is clearly not feasible to maintain by traffic safety countermeasures alone. Thus, the data chosen for the four-year trend and the baseline will go back no further than 2008. Even this generally produces a very optimistic projection, and since the state has been urged to be aggressive but not unrealistic in setting goals, they will generally be somewhere between the projected trend line point for 2014 and the baseline.

1.3 Guiding Principles in the ID Strategic Plan (IDSP) Development

Given the goal mission statements given above, it is important to understand the overall guiding principles that were followed in developing the ITSP. The purpose of the IDSP is to provide overall guidance to all agencies and private groups who are involved with various aspects of reducing the problems caused by ID. Specifically, the Alabama Impaired Driving Prevention Council (AIDPC) was formed not only to develop this plan but to guide its implementation and future enhancements. In this regard they were required to address all of the impaired driving issues, review strategies which have been proven effective in impacting those issues, and develop a strategic plan that will serve to guide all aspects of efforts within the state to deal with the ID problem. The membership and organization of the AIDPC will be detailed below under Program Management (Section 2).

The following are the guiding principles that were approved by the AIDPC at the outset of its deliberations:

- ID is a recognized public safety and health problem that has an enormous impact on our economy and the wellbeing of our citizens.
- While the AIDPC recognizes the many effective efforts made over past decades to address the problems created by ID, the large number of highway fatalities and injuries

caused by ID indicates that these efforts should be reviewed and modified or augmented appropriately to provide for continuous improvement.

- There are a large number of partners in these efforts, all of whom have strong motivation to assist in the solution or mitigation of the ID problem, and as such, there is a critical need to coordinate these efforts so that they are not fragmented or even working at cross purposes.
- The ID problem cannot be addressed by emphasis on one aspect of the solution; in the past a lack of a balanced approach has tended to be counterproductive; thus a guiding principle is the respect that all involved disciplines must have for efforts outside of their direct purview.
- The problem is largely a cultural one and while strong deterrent and punitive measures are an essential part of the solution, they must be consistent with an overall change in the culture that provides the environment in which ID can exist.

1.4 Relationship to the State Strategic Highway Safety Plan (SHSP) Efforts

The Impaired Driving Strategic Plan (IDSP) is closely coordinated with Alabama's Strategic Highway Safety Plan (SHSP). The purpose of the SHSP is to improve highway safety in all areas of traffic safety. Since its goal is to be comprehensive of all traffic safety efforts within the state, it subsumes all planning efforts that are targeted at particular focus issues (e.g., occupant protection, traffic safety information systems, impaired driving, etc.). The SHSP has identified ID as a major continuing priority area because the problem identification analyses demonstrate that this is one of the top three causes of fatal crashes. Thus, the IDSP serves as a complement to the SHSP by describing the ID specific strategies and action steps to improve traffic safety. The last SHSP was published in May 2013. Efforts are being made within the Alabama Department of Transportation to re-activate the SHSP process to update this plan in 2014. Those active in developing the ADECA Highway Safety Plan (HSP) participated in the development of the 2013 SHSP. Since the HSP became appendix of the 2013 SHSP, it is expected the IDSP and other strategic plans being developed for MAP-21 will be appendices of the 2015 SHSP.

The following comes from Page 18 of the Strategic Highway Safety Plan for Alabama, 2nd Edition (May 2013): "Focus efforts on education and awareness programs to improve overall driver behavior and habits, specifically in the areas of speeding, alcohol/drug use while driving and increasing seatbelt/restraint use. The Highway Safety Plan (HSP) developed by the Alabama Department of Economic and Community Affairs (ADECA) Law Enforcement and Traffic Section (LETS) specifically addresses those driver behavior issues. As a result, the SHSP 2nd Ed. embraces the ADECA HSP as the primary resource for focusing state expertise and programs to combat these issues."

A comparable statement is made on Page 22 of the SHSP: "The ADECA HSP specifically addresses the issues of speeding, alcohol/drug use and lack of vehicle restraint use by applying methods that address undesirable driver behavior. As a result, this SHSP 2nd Ed. embraces the ADECA HSP as the primary resource for offering focused state expertise and programs for combating driver behavioral issues. Although the HSP changes annually as pressing issues change, the SHSP steering committee endorses that action and has elected to accept the annual changes

because ADECA LETS is suitably equipped to revise and implement focused programs addressing the new issues.”

Both of these statements were written prior to the release of MAP-21, and its accompanying requirements for specific plans for impaired driving, occupant protection, traffic records information systems, etc. It can be assumed that the SHSP task force would be equally supportive of the ADECA efforts in the development of these plans, and a recent meeting of the ALDOT Outreach Team affirmed that these plans would become part (e.g., appendixes) of any forthcoming SHSP efforts. At the current writing there has not been such a team appointed for the updating of the current SHSP (dated May, 2012).

In addition, the following recommendations regarding ID were made within the SHSP document:

- Plan enforcement activities for locations identified as being over-represented in speeding and alcohol/drug related crashes. (Special Traffic Enforcement Program – STEP).
- Continue to promote the “Drive Sober or Get Pulled Over” Campaign which consists of signs displaying the Campaign slogan, roadblock checks, saturation and line patrols, and placing added emphasis on areas where a high number of alcohol-related crashes have occurred.
- Continue to promote the “Take Back Our Highways Campaign” which uses increased enforcement and awareness to address speeding and alcohol use while driving.
- Crashes related to speeding and alcohol/drug use are important areas for focused crash reduction efforts due to the typical higher level crash severity associated with them.

These statements are listed to demonstrate the complete cooperation that exists between the SHSP planning efforts and those required by MAP-21 under the auspices of NHTSA.

1.5 Organization of the ID Strategic Plan

This strategic plan describes the components that Alabama’s impaired driving program will include. At the beginning of the process, the Alabama Impaired Driving Coalition (AIDPC) determined its strategic plan should have objectives and countermeasures that reflect the various aspects of impaired driving. The first section of the plan deals with program management. Subsequent sections are generally ordered according to the organization of the various impaired driving countermeasures, namely:

- Program Management
- Prevention
- Criminal Justice Approaches
- Communication Program
- Drug (Including Alcohol) Misuse

A final section is dedicated to the subject of impaired driving program evaluation and data collection. Results of the problem identifications are given in the Appendixes.

2.0 Program Management

The State of Alabama, including the Governor and the Legislature, have been very closely involved with strategic planning to address impaired driving issues, dating back to the mid-1970s when Dr. Russ Fine of the University of Alabama at Birmingham organized a task force and developed a strategic plan that has been updated over the years to take into account the many changing aspects of this complex issue. The State recognizes the need for strong leadership and sound policy development in these areas, and it has sought out the best within our traffic safety, law enforcement and medical communities to formulate this plan.

This section of the plan deals with the overall management of the Impaired Driving program in the State. The administrative and management characteristics are organized into the following categories:

- Alabama Impaired Driving Prevention Council (AIDPC)
- Strategic Planning Organization
- Program Management
- Resources
- Data and Records

These will be discussed in the following sections, respectively. In most cases additional references will be given to other sections of this document for added details and to avoid redundancy.

2.1 Alabama Impaired Driving Prevention Council (AIDPC)

The Alabama Impaired Driving Prevention Council (AIDPC) was assembled to develop and approve this plan and to assure that all aspects of the impaired driving problem were considered and that as many alternative countermeasures as possible could be evaluated. To create a strategic plan that would focus on the problem areas with the greatest opportunity for improvement, and establish a successfully functioning Council, it was essential to have representation from agencies and organizations with a working knowledge and deep understanding of the various parts of Alabama's impaired driving prevention system and how the parts interrelate. The individuals who participated in the AIDPC meetings and assisted in drafting the IDSP are identified in Table 2.1. AIDPC organizers are deeply grateful for the time and effort members devoted to development of the strategic plan and for the counsel, advice, and expertise they brought to the plan, and that they continue to bring toward implementing it.

The major charge given by the AIDPC in its commission was to foster leadership, commitment, and coordination among all parties interested in impaired driving issues. Further, they were charged with the responsibility to attend regular meetings as established by the Chair, and to generally manage and provide overall control to the program as described in the ID Strategic Plan.

Table 2.1 Members of the AIDPC

Name	Agency	Title	Function
Hon. Andra Sparks	Judiciary	Presiding Municipal Judge, Birmingham	Adjudication
Angie Hamilton	Prosecutor	Asst. District Attorney, Lauderdale Co.	Prosecution
Bill Babington	ADECA/LETS	Division Chief	SHSO
Brandon Hughes (Chair)	TSRP	TSRP/DRE State Coordinator	Prosecution/Communication
Hon. Carole Medley	Judiciary	District Court Judge, Lauderdale Co.	Adjudication
Cheryl Plato-Bryant	AOC	State Director, Court Referral Program	Treatment & Rehabilitation
Sgt. Chris Brown	DPS	Motor Carriers	Law Enforcement
Dr. Curt Harper	DFS	Toxicology Discipline Chief	Drug Toxicology
Cynthia Dillard	Pardons & Paroles	Executive Director	Probation
Dave Peacock	ABC	Enforcement Attorney	Communication
Dr. David Brown	Univ. of Alabama	Professor	Data/TR
Folashade Ayanwale	SADD (DPH)	State Coordinator	Public Health
Dr. Gregory Turner	DFS	Technical Director, Implied Consent Unit	Breath Testing/Ignition Interlock
Sgt. James Neal	Auburn Police Dept.	DRE	Law Enforcement/DRE
Jay Jones	Lee County	Sheriff, Lee County	Law Enforcement
Cpl. Jay Penton	DPS	State Trooper, DRE Instructor	Driver Licensing/DRE
Michael Robinson	DPS	Chief Counsel	Driver Licensing
Mike Jones	Legislator	State Representative, 92 nd District	Communication
Pamela Morton	MADD	State Victim Services Coordinator	Communication
Richard Minor	President, ADAA	District Attorney, 30 th Circuit	Prosecution
Cpl. Scott Owens	Dothan Police Dept.	DRE	Law Enforcement/DRE
Sgt. Will Wright	DPS	Agency DRE Coordinator	Law Enforcement

The IDSP was very heavily data-driven. In drafting the IDSP, members of the AIDPC relied on data on impaired-driving-related crashes, arrests, suspensions, and convictions data; state-specific studies on youth and adult behavior and attitudes toward alcohol consumption and drug use specifically as they relate to impaired driving.

2.2 Strategic Planning Organization

Programs and activities are guided by problem identification and carefully managed and monitored for effectiveness. The mission of the AIDPC requires the development and implementation of an overall plan for short- and longer-term impaired driving prevention and remediation activities based on careful problem identification. Short-term refers to the projects and activities that will be part of the next Highway Safety Plan (HSP) and other non-supported volunteer efforts that will be implemented during the coming fiscal year. Longer term plans are those expected to be implemented in subsequent fiscal years.

Figure 2.1 presents the overall organization for the impaired driving strategic plan development within the State. The central focus of the effort is the AIDPC and all information from the other organizational entities will go through the AIDPC in order to be evaluated and formulated into the plan.



Figure 2.1 Impaired Driving Strategic Planning Organization

The major entities involved with this include:

- The Alabama Department of Economic and Community Affairs (ADECA), which is the overseer agency for the NHTSA traffic safety grants, the Community Traffic Safety Program Coordinators (CTSPs), and the state Traffic Records Coordinating Committee (TRCC), all of which operate within ADECA oversight.
- The committee which administers and develops the Statewide Highway Safety Plan (SHSP), which represents all agencies in state government that are involved in traffic safety, and thus this would involve all relevant state agencies in this process.
- Medical and Treatment Agencies also provide input to the AIDPC (these groups are typically not included in generally traffic safety planning activities).
- Advocacy Groups, i.e., non-governmental entities that have traffic safety interests, especially in the area of impaired driving.

2.3 Program Management

The plan provides an essential component of the control process, establishing goals and objectives for the total impaired driving efforts in the State both for the total effort and for its individual components. However, it is obvious that a plan alone is not going to solve the problem. The planned projects and programs must be effectively implemented. This requires an effective management control process. Using the plan as a road map, management must determine if adequate progress is being made in all projects toward their goals, and if those projects are effectively meeting the standards set forth for them. When it is detected that such is not the case, then management needs to step in and provide correction, either strategically or tactically, to get things back on track.

To accomplish this regular (monthly, or as needed) meetings of the AIDPC will be conducted with representatives of all of the entities that are performing projects under the plan. This will essentially provide a management by exception process that will assure that proper corrective action is taken in any projects that are not making their expected progress. At the same time it will provide a reporting mechanism to keep all AIDPC members and their respective agencies informed as to current impaired driving activities throughout the state.

2.4 Resources

The AIDPC planning effort is being performed under the assumption that sufficient funding, staffing, and other resources to support impaired driving programs will be forthcoming. MAP-21 has given the assurance of certain funding given that the State meets the planning and other legal requirements. It can be shown that the revenue generated from citations and reinstatement of licenses more than offsets the cost of the planned projects. However, since these monies go into the general fund and are not earmarked for impaired driving programs, they are not necessarily accessible to support the impaired driving countermeasure efforts. One of the major roles of the AIDPC will be to make inroads to assure that the planned programs should achieve self-sufficiency by transferring as much of their costs to impaired drivers.

2.5 Data and Records

This topic is covered in detail in Section 7 and further illustrated in Appendixes A and B. All management and planning functions have been and will continue to be data driven. This process starts with an analysis of historical data in a problem identification that has the broadest possible perspective. That is, the initial research that will be done will cover the past four calendar years (2010-2013), and it will search all Alabama crash data to answer the who, what, where, when, and why, as well as the “how many” in all aspects of impaired driving (all drugs including alcohol) related crashes. Once the general locations for impaired driving crashes are determined, more detailed hot-spot analyses will be performed to direct the enforcement effort to those areas that have the highest concentration of impaired driving crashes. In addition other data sources will be utilized, including the state electronic citation data (eCite), U.S. Census data to establish and compare demographics, Fatality Analysis Reporting System [FARS], Crash Outcome Data Evaluation System [CODES]), and others as they surface.

Alabama has a complete evaluation capability in its crash records system. One module is called the before-after analytical tool, and it can be applied right down to the specific roadway location basis. Numeric goals will be set for all projects and to the extent practical these capabilities will be run to perform evaluations not only to determine past successes but to modify projects and programs to assure that the allocations of resources continue to improve.

Every aspect of this problem identification and evaluation effort will be guided by the statewide Traffic Records Coordinating Committee (TRCC) that represents the interests of all public and private sector stakeholders and the wide range of disciplines that need this information. Details of these studies will be published on-line and will be cited as appendices of this planning document.

3.0 Prevention

The State's prevention program have the goal of reducing impaired driving through public health approaches, including altering social norms, changing risky or dangerous behaviors, and creating safer environments. In order to accomplish the following objectives have been established:

- Apply formal and informal behavioral modification methods that center around the negative effects of alcohol and other drugs;
- Limit the availability of alcohol and other drugs, especially to those who are most apt to abuse them;
- Discourage or prevent those who are impaired by alcohol and other drugs from driving;
- Assure responsible alcohol service practices;
- Create and support transportation alternatives;
- Implement, community-based programs:
 - In schools,
 - At work sites,
 - In conjunction with medical and health care facilities, and
 - By community coalitions.

Prevention efforts will be directed toward populations at greatest risk as determined by the problem identification efforts that were conducted in preparation for the planning effort.

The subsections within the overall Prevention countermeasures address the various prevention projects that are generally organized within the following categories:

- Responsible Alcohol Service
- Transportation Alternatives
- Community Based Programs

3.1 Responsible Alcohol Service

There are two basic prevention approaches that fall under this countermeasure category:

- Prevent underage drinking by people under age 21; and
- Prevent "over-service" to people age 21 and older.

Alabama's Dram Shop Act, § 6-5-71, Ala. Code, 1975, provides:

(a) Every wife, child, parent, or other person who shall be injured in person, property or means of support by any intoxicated person or in consequence of the intoxication of any person shall have a right of action against any person who shall by selling, giving, or otherwise disposing of to another, contrary to the provisions of law, any liquors or beverages cause the intoxication of such person for all damages actually sustained, as well as exemplary damages.

(b) Upon the death of any party, the action or right of action will survive to or against his executor or administrator.

(c) The party injured, or his legal representative may commence a joint or separate action against the person intoxicated or the person who furnished the liquor, and all such claims shall be by civil action in any court having jurisdiction thereof.

This Act was passed into law in 1909 and has been on the books without change since enactment. The Dram Shop Act provides liability for selling, giving, or disposing of liquors or beverages "contrary to the provisions of law."

The Alabama Alcoholic Beverage Control (ABC) Board Enforcement Division employs 133 sworn agents spread out over eleven districts across the state. They are responsible for regulating the sale of alcohol and tobacco products as set forth in Title 28, Code of Alabama, 1975, as amended. This includes the enforcement of the ABC Board's Rules and Regulations, which have the full force and effect of law. They also license all manufactures, importers, wholesalers, and retailers of alcoholic beverages. Working with other city, county, state, and federal governmental agencies, they deal with the issues of under-age sales and service. The training that each of their agents receives each year exceeds the recommended minimum standards required by the State of Alabama's Peace Officers Standards and Training Commission.

Action Items:

- Work closely with private restaurant and other trade organizations like the Century Council (<http://www.centurycouncil.org/>) to establish some formal programs for education and training with regard to server responsibilities, including Dram Shop provisions.

3.2 Transportation Alternatives

This countermeasure type considers those activities that either prevent or dissuade driving while impaired by providing alternative means of transportation, such as designated driver and safe ride programs, especially during high-risk times, which enable drinkers age 21 and older to reach their destinations without driving.

Ongoing programs in Alabama include Operation 40 Proof, a model program that currently is being led by a coalition from Mobile County Commission (Safety Division), the Mobile County Sheriff's Department, Saraland Police Department, and a number of sponsoring private companies. This program features the following:

- Free tow, no-questions-asked hotline
- Free cab rides
- Special holiday campaigns (e.g., Thanksgiving to New Years)
- Lighted toppers on cabs: "Don't Wreck the Holidays; Don't Drink and Drive"
- Heavy emphasis on local publicity.

Action Items:

- Using Operation 40 Proof as a model, extend it to as many municipalities throughout the state as possible.
- Starting with the most populated areas first to maximize the early coverage and generate momentum for the effort.

3.3 Community Based Programs

“Community” here is referring to those organizations and agencies that currently exist to fulfill other primary goals, but have a health and safety mission. The prevention strategies that they would participate in implementing would be primarily directed toward driver attitudes, but might also involve family or social interaction with drivers so as to influence them against taking the wheel when they are in no condition to do so. The ideal settings would include schools, places of employment, medical and health care environments, and other community coalitions and traffic safety programs implemented by advocate groups. Some of these will be detailed below.

3.3.1 Schools

School-based prevention programs must begin in elementary school and continue through college and trade school. If implemented properly, such programs play a critical role in preventing underage drinking and impaired driving, not only when the recipients attain the age of obtaining licenses themselves, but as a collective influence in the family and the community. Every effort in the planning process was made to assure that the proposed programs were developmentally appropriate, culturally relevant and coordinated with other drug prevention and health promotion programs ongoing in the community.

Action Items:

- Maintain, coordinate and continue to support the efforts of SADD (see Section 3.3.3).
- Provide training to those involved with the educational system through the Drug Impairment Training for the Educational Professional (DITEP) courses (see Sections 4.2 and 4.7.4)

3.3.2 Employers

The loss of a key individual to either injury or death, or incarceration, can be devastating to an employer. This countermeasure type requires first the convincing of the employer that it is in the best interests of their company or non-profit agency to conduct programs to show their employees the alternatives to impaired driving, and even to provide alternatives for them (e.g., alternative transportation). Employers also need to be made aware of the responsibility that rests upon them for company sponsored parties, which are often held near or on holidays. These countermeasures provide information and technical assistance to employers and encourage them to offer programs to reduce underage drinking and impaired driving by employees and their families.

Action Items:

Initiate AIDPC interaction with private companies and trade organizations that have a common goal of reducing crashes caused by ID. These might include organizations exemplified by, but not limited to, the following entities:

- The Alabama Trucking Association (ATA; <http://www.alabamatrucking.org/>), which sponsors Infinit-i(tm) training for their membership: (http://lmstrucking.infinit-i.net/articles/Alabama_Trucking_Association.htm); and

- The EDPM Company, which has as its mission is to help society combat the many problems related to substance abuse in the workplace and home by providing personalized, quality employment testing services to our clients in an ethical, cost-effective manner. (<http://www.edpm.com/index.php>)

3.3.3 Community Coalitions and Programs

These countermeasure types support community coalitions and traffic safety programs that provide the opportunity to conduct prevention programs collaboratively with all interested parties at the local level. They may engage in such activities as providing communications toolkits for local media relations, advertising, and other public affairs activities. Coalitions may include representatives of government such as highway safety; enforcement; criminal justice; liquor law enforcement; public health; driver licensing and education; business, including employers and unions; the military; medical, health care and treatment communities; multicultural, faith-based, advocacy and other community groups.

Students Against Destructive Decisions (SADD) is a well-known National advocates movement for promoting safety and health within society, and especially within the student age groups, with the goal of reducing deaths and injuries. The Alabama Chapter of SADD has concentrated on strengthening the State’s policy against the use of alcoholic beverages by underage youth (i.e., “No Use” policy), and, as such, are calling for more responsible marketing and advertising.

SADD Alabama supports passage and enforcement of comprehensive drinking age laws that prohibit the purchase, attempt to purchase, or possession of alcohol by a person under the age of 21. They believe that enforcement efforts should be directed at youth, adult providers, sellers, servers, and others who are in a position to endanger youth. They have taken actions against the use of fraudulent identification encouraging heightened security measures and increased enforcement of the law. They are promoting efforts to join with law enforcement and other members of the traffic safety community in raising awareness among adults as well as teens of the dangers of underage drinking and the consequences of promoting the violation of underage drinking laws.

Teens view large amounts of marketing and advertising materials from the alcohol, tobacco and auto industries. SADD supports efforts to encourage responsible marketing and advertising that does not target teens and is mindful of the impact these materials have on youth attitudes and behaviors. This covers not only the promotion of the use of drugs (including alcohol and tobacco), but also unsafe motor vehicle actions not only in auto ads, but in all phases of the media where driving is portrayed.

SADD is working with ALDOT and the State Farm Insurance to obtain continuous support for its efforts. SADD is a comprehensive program that covers:

- Primary Safety Belt Laws
- Violence
- Graduated Driver’s License (GDL)
- Mental Health
- Alcohol and drugs

Action Items:

- Continue to provide liaison between the AIDPC and SADD, and further their efforts especially in the areas of reducing underage use of alcohol and drug abuse in general;
- Support legislation that will help to eliminate all underage drinking and drug use (see Section 4.1);
- Promote stronger GDL laws and their enforcement;
- Create greater awareness of the role that negative advertising plays on young people in all areas of unsafe driving.

4.0 Criminal Justice Approaches

This set of countermeasure approaches includes the entire criminal justice system, including laws, enforcement, prosecution, adjudication, criminal and administrative sanctions and related communications. The goal is 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, and thereby reduce recidivism;
- *General deterrence* seeks to increase the public perception that impaired drivers will face severe consequences, thus discouraging all individuals from driving impaired.

A multidisciplinary approach and close coordination among all components of the criminal justice system was sought in developing this plan. Special coordination through the Law Enforcement Liaison (LEL) efforts was planned to assure that all law enforcement agencies at the State, county, municipal, and tribal levels would continue to create and sustain both specific and general deterrence.

The plan will be discussed in the following subsections in terms of:

- Laws.
- Enforcement
- Publicizing High Visibility Enforcement
- Prosecution
- Adjudication
- Administrative Sanctions
- Advanced Roadside Impaired Driver Enforcement (ARIDE)

4.1 Laws

The State has enacted many laws that have proven to be sound, rigorous, and easy to enforce and administer. However, it is clear that efforts must continue, both in strengthening existing laws and in passing new laws that address issues that are developing within our society. Every attempt is being made to assure that these laws clearly define offenses, contain provisions that facilitate effective enforcement, and establish effective punitive measures for deterrence. The overall structure for the legislative efforts have been, and will continue to have the goals of defining that include:

- Driving while impaired by alcohol or other drugs (whether illegal, prescription or over-the-counter) and treating both offenses in a comparable matter with similar punitive and remedial programs;
- Driving with a blood alcohol concentration (BAC) limit of .08 grams per deciliter, making it illegal “per se” to operate a vehicle at or above this level without having to prove impairment;
- Driving with a high BAC (i.e., .15 BAC or greater) with enhanced sanctions above the standard impaired driving offense;
- Zero Tolerance for underage drivers, making it illegal “per se” for people under age 21 to drive with any measurable amount of alcohol in their system (i.e., .02 BAC or greater);
- Repeat offender increasing sanctions for each subsequent offense;
- BAC test refusal with sanctions at least as strict or stricter than a high BAC offense;

- Driving with a license suspended or revoked for impaired driving, with vehicular homicide or causing personal injury while driving impaired as separate offenses with additional sanctions;
- Open container laws, prohibiting 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;
- Authorization of law enforcement agencies to conduct sobriety checkpoints, (i.e., stop vehicles on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs);
- Authorization of law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers;
- Authorization of 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; and
- Requiring law enforcement to conduct mandatory BAC testing of drivers involved in fatal crashes.

While most of the above provisions have been implemented in the State, they continue to be listed above since many of them require either strengthening or clarification.

In addition to the above general structure for the laws themselves, the following structure is part of the plan for establishing effective penalties:

- Administrative license suspension or revocation 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-time 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 BAC 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; and
- Driver license suspension for people under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs.

The following is general areas of legislation recommended by the SHSP Legislative Task Team (2012):

- Maximum alcohol violations for serving establishments – Adopt ordinances which close businesses after three violations.
- Underage alcohol violations – Adopt stronger penalties for any underage alcohol conviction.
- Discourage ID – Require color coded tags for violators and those convicted of ID.

- Distinguish Underage Individuals – Require color codes /changes of drivers’ licenses to denote those under age 21 to better enforce both the GDL and the zero tolerance laws.

Action Items:

AIDPC makes special recommendations to consider and promote the following legislative actions in the forthcoming legislative sessions (ordered randomly):

1. Since some drug caused impaired driving (DUI/D) cases are being challenging to correlate findings with impairment (due to a number of factors), legislation is needed to shift to a concept of “internal possession” for both illicit and prescription drug abuse. While the number of drugs makes comprehensive legislation infeasible, there are a number of common drugs that can be identified by fairly simple and reliable tests. These should be codified at this point to initiate the more comprehensive process.
2. There is a need for a preliminary tool to establish probable cause in DUI/D cases. Legislation is needed to enable the use of a roadside drug screen similar to the simple Preliminary Breath Test (PBT) devices now used for alcohol screening. Feasibility studies will need to be performed by Alabama Department of Forensic Sciences.
3. Except in fatality crash cases there is no mandate for blood tests, and even in those cases only about 50% of the samples are captured. Urine is a marker of past use only (could be weeks, months), and cannot be effectively used for evidence since it is not necessarily correlated with impairment. Ideally both blood and urine would be collected in all DUI/D cases; the legal basis for this at least in extreme cases of impairment needs to be strengthened by legislation.
4. There is about a 33% refusal rate on breath tests that in part is caused by advice from attorneys to “not blow the next time” after their first arrest. A higher penalty or other punitive measures are needed to produce greater cooperation at this point in the process, including one or more of the following specifically targeted toward repeat violators of the DUI statute:
 - a. Make refusing to submit to a breath alcohol test and/or blood test after an arrest for a DUI a separate offense under Title 32, and impose a reasonable fine for conviction that will serve as a deterrent.
 - b. Include the driver’s license suspension period could be included under this statute.
 - c. Impose a mandatory jail sentence and highly increased fines for second and subsequent refusals within a specified period.
5. Appendix B shows a tremendous over-representation of impaired drivers in violation of State statute 32-6-19 – driving while license privilege suspended or revoked as a result of a DUI or DUI related offense. To combat this, the following are
 - a. An additional fine be attached to convictions for violations of 32-6-19 (recommended \$50-100).
 - b. Impose an additional ten day mandatory jail sentence, not subject to suspension, attached to violations of 32-6-19 for any fourth violation of the statute when the suspension/revocation is as a result of a DUI charge, and for any fifth or subsequent violation, and any previously suspended jail time given as a result of the DUI conviction, be automatically reinstated for service.

6. This recommendation deals with repeat DUI offenders, calling for alternative sentencing options for third time DUI offenders that would allow for a mandatory treatment requirement upon conviction. Upon a conviction for a third violation of 32-5A-191, the judge may elect any or all of the following:
 - a. Require a mandatory in-patient treatment program of not less than six months (or other time period to be determined), in order to help the defendant recover from their substance addiction.
 - b. Require that any driver, upon conviction for a second violation of 32-5A-191, carry a personal health insurance plan or an automobile coverage plan that would cover the costs of the treatment program.
 - c. Any driver who failed to procure the proper insurance plan would not be eligible to be sentenced to the treatment program, but instead would serve a 6 month mandatory jail sentence upon a third conviction.
 - d. These options would apply to violations of 32-5A-191 that involved special circumstances (e.g., Vehicular Homicide).
7. Add the fee that is now imposed on DUI convictions to also cover convictions for Driving While Suspended and Driving While Revoked when the suspension/revocation is the result of a DUI conviction. This fee goes into is the Alabama Chemical Testing Training and Equipment Trust Fund, which relies heavily upon these fees to remain viable.
8. The following items were suggested as ways in which the Pardons and Paroles (P&P) tasks may not dramatically improved (see Section 4.5.3):
 - a. Enable courts to add a special condition of no alcohol for probationers convicted of impaired driving.
 - b. For those so sentenced, require defendants to be fitted with a Continuous Alcohol Monitoring Device that constantly measures the offender's alcohol content and communicates with P&P remotely, greatly reducing the number of visits and the amount of time the probation officers must spend meeting with impaired driving probationers. This will be a major savings in time and other resources for P&P in the area of impaired driving offender monitoring.
9. The following items are detailed in the indicated section of Appendix C, Detailed Legislative Recommendations. A very brief description will be given of these here for reference purposes.
 - a. C1. Change the way that DUI is charged. This change would remove the guesswork from charging DUI. It would simply address the charging instrument and officers will no longer have to guess what is causing the defendant's impairment at the time of arrest.
 - b. C2. Mandatory blood draws. This will amend the law to remove the right to refuse a chemical test when the individual driver is involved in a crash resulting in death or serious physical injury and an officer has reason to believe they are under the influence of drugs or alcohol.
 - c. C3. Increase refusal penalties. As the law currently reads, the offender not only has no incentive to take a chemical test, but has strong incentive to refuse a chemical test. This aspect of the law needs to be changed to make the penalty for refusing a chemical test the same as that of someone having a BAC of 0.15 or greater.

- d. C4. Create a per se DUI/Drug Offense. This would essentially make DUI/Drugs comparable to DUI/Alcohol as far as the per se aspects are concerned.
 - e. C5. Remove five-year roll off period for prior DUI convictions. This would essentially just strike out the “within a five year period” qualifier for considering prior convictions.
10. Defense lawyers are confusing some juries about what the BrAC/BAC of the defendant was at the time of driving. The law needs to be changed by adding the qualifier that if the offenders BrAC / BAC is 0.080 or above within two hours of the event (driving, accident etc.), this is strong evidence of a violation of the current BAC law. For cases where the test is not administered within this time limit then extrapolation can be used (as it is now).

The following are ID-related recommendations of the Strategic Highway Safety Plan for Alabama, 2nd Edition (SHSP):

- 11. Maximum number of alcohol violations – Adopt ordinances which close businesses after three violations.
- 12. Underage Alcohol Violations – Adopt stronger penalties for any underage alcohol conviction.
- 13. Discourage DUI – Require color coded tags for violators and those convicted of DUI.
- 14. Physician Reporting – Require physicians to report certain impairments for driver’s license renewal.
- 15. Section 410 Impaired Driving – The existing Graduated Drivers’ License law must be modified to include all provisions recommended by NHTSA

While all of the SHSP items above were not necessarily endorsed by all AIDPC members, it was felt best to include them so that they could be considered with all of the other legislative recommendations.

4.2 Enforcement

This is the major effort put forth by the state, and it has been totally data driven to assure that funding is allocated in the best possible way. The details of these analyses are covered in Section 7 and Appendix A. The goal is to conduct frequent, highly visible, well publicized and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, especially in those locations where location data analysis has determined that alcohol related fatalities are most likely to occur. To maximize visibility, the State is maximizing contact between officers and drivers by using sobriety checkpoints and saturation patrols. These efforts are being widely publicized before, during, and after they occur.

Highly visible, highly publicized efforts are scheduled periodically at focus times when impaired driving has been found to be over-represented, and also on a sustained basis throughout the year. To maximize resources, the State is coordinating efforts among State, county, municipal, and tribal law enforcement agencies. The plan involves the use of law enforcement liaisons (LELS) for activities such as promotion of national and local mobilizations and increasing law enforcement participation in such mobilizations, and for collaboration with local chapters of police groups and associations that represent diverse groups to gain support for enforcement efforts. In addition, the state plans to coordinate efforts with liquor law enforcement officials, and to conduct training of all law enforcement officers to increase the probability of detection, arrest, and prosecution, including Standardized Field Sobriety Testing, and selected officers will receive training in media relations and Drug Evaluation and Classification (DEC).

In addition to the deterrent and remediation benefits of ID enforcement, the decline in DUI arrests/ in the last ten years from a high of 31,000 to about 21,000 last year which has exacerbated the issue of funding for the Implied Consent Laboratory (ICL). This lab is essential to the total ID criminal justice effort, since its function is critical to making most DUI cases. The recent decline coupled with the fact that, on average, only 55% of the fine money is collected, has created a crisis situation for the ICL. This problem will be addressed by a planned increased emphasis on DUI detection and arrest. As many officers will be on patrol as the current force will allow. To the extent possible overtime will be used to increase the force. However, reductions over the past few years have made it extremely difficult to obtain officer hours even on an overtime basis. Every effort will be made to address these issues.

4.2.1 Drug Recognition Expert (DRE) Program

Alabama is one of 49 states and the District of Columbia to implement the Drug Evaluation and Classification Program (DECP). At the heart of this program is the Drug Recognition Expert (DRE). A DRE is a law enforcement officer trained in detecting and recognizing impairment caused by substances other than alcohol. The Los Angeles Police Department originated the program in the early 1970s when officers noticed that many of the individuals arrested for driving under the influence had very low or zero alcohol concentrations. The officers reasonably suspected that the arrestees were under the influence of drugs, but lacked the knowledge and skills to support their suspicions. Working with medical doctors, research psychologists, and other medical professionals they developed a simple, standardized procedure for recognizing drug influence and impairment, which led to the first DRE program. In the early 1980s, the Na-

tional Highway Traffic Safety Administration (NHTSA) took notice of the LAPD's DRE program. The two agencies collaborated to develop a standardized DRE protocol which led to the DEC program. During the ensuing years, NHTSA and various other agencies and research groups examined the DEC program. Their studies demonstrated that a properly trained DRE can successfully identify drug impairment and accurately determine the category of drugs causing such impairment. Recent studies conducted by NHTSA have established the value of DRE programs.

The DRE comes into a case at the request of the arresting officer. A typical scenario: An officer initiates a traffic stop and subsequently conducts a DUI investigation. The officer makes a determination that the driver is impaired; however, there is either no evidence of alcohol consumption or a subsequent breath test result is not consistent with the level of impairment. At this point, the officer requests a DRE evaluation. The DRE follows a 12-step systematic and standardized process utilized by all DREs regardless of agency. The DRE uses a drug classification system based on the premise that each drug within a category produces similar signs and symptoms. It is a pattern of effects rather than a specific effect that is unique to the category.

Without proper training and adequate resources, the average law enforcement officer will find that convicting the drug impaired driver is almost infinitely more difficult than convicting the alcohol impaired driver. The presence of DREs in Alabama will impact both the highway and the courtroom.

A continuation and expansion of this program will enable law enforcement officers to better detect, apprehend, assess, document, and subsequently help the prosecutor prove, in court, the defendant was under the influence of a drug while driving (or committing any other improper act, e.g., domestic violence and homicide). There are also community outreach programs in place that utilize certified DREs such as Drug Impairment Training for the Educational Professional (DITEP) in which DREs go into school systems and teach educators observable signs and effects of drug impairment.

AIDPC surfaced the fact that many courts are not familiar with program. Major efforts will be integrated into the training to focus on community outreach and informing judges, lawyers, and law enforcement officers on the structure of the DRE program and its benefits.

Action Items:

- Increase the number of DREs by at least ten per year over the next four years. See Section 4.7.4.
- Under the oversight of the AIDPC, establish a special task force to study methods for the better implementation of the DRE program, especially to promote its value so that state and local agencies will take advantage of the DRE training opportunities.
- Determine if legislation or other state policies might be needed in support of the DRE program.

4.2.2 Intensive Focused Impaired Driving Enforcement Effort

Appendix A demonstrates the data-driven, evidenced-based approach that the State is taking to addressing its Impaired Driving problems. It consists of the following:

- Table of the hotspots listed by ADECA CTSP region and how this distribution has changed over the years since 2008 (criteria for hotspots remaining constant).
- Top 24 Interstate hotspots.
- Top 25 State/Federal route hotspots.
- Top 72 intersection locations
- Top 58 non-mile posted segment locations

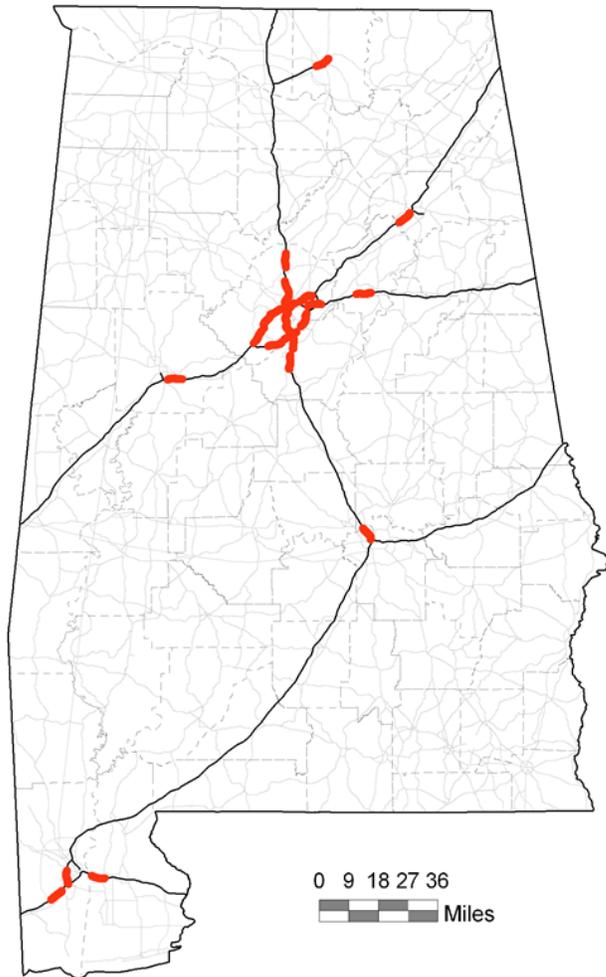
For each of these categories a distribution by region is given and then the specific locations with each of the regions is listed with further detailed data about that location. The breakdown is by CTSP region to facilitate each of the Coordinators efforts in administering this program through law enforcement agencies within their regions. The following table provides the number of hotspots determined within each region for the past six fiscal years, and a projection for FY2014 based on three years of data (CY2010-12).

Impaired Driving Hotspot Listing by Region

Region	Impaired Driving Hotspots for Fiscal Years							% of Total Hotspots (2014)
	2008	2009	2010	2011	2012	2013	2014	
Birmingham	37	32	27	34	41	23	35	19.55%
North East	42	32	27	30	54	36	47	26.25%
North	22	15	17	24	24	15	15	8.38%
Mobile	52	48	47	40	49	25	35	19.55%
East	13	11	14	9	7	3	2	1.12%
Central	23	26	27	25	34	21	26	14.53%
South East	5	2	6	15	17	6	2	1.12%
South West	4	6	5	6	4	2	2	1.12%
West	20	19	21	18	22	13	15	8.38%
TOTAL	218	191	191	201	252	144	179	100.00%

In each case a map is provided for those locations that have adequate GPS coordinates to support mapping. As an example, the map which follows is for the highest ID crash locations (involving an injury or fatality) in the “mileposted Interstate” category. Locations are defined as being segments of roadway no longer than five miles in length. Injury (including fatal) crashes are used in order to surface the more severe crashes.

Top 24 Mileposted Interstate Locations (5 miles in length)
in Alabama with 8 or More Impaired Driving Related Crashes
Resulting in Injury or Fatality



Action Items:

- Conduct the intensive ID enforcement effort as detailed in Appendix A.
- Continue to perform annual problem identifications to keep the focused enforcement efforts totally data driven and evidence based, and based on this information implement these efforts throughout each year.

4.3 Publicizing High Visibility Enforcement

The plan calls for the State to communicate its impaired driving law enforcement efforts and other efforts being put forth by the criminal justice system to increase the public perception of the risks of detection, arrest, prosecution and sentencing for impaired driving. The details given below specify a year-round communications plan that: (1) provides emphasis during periods of heightened enforcement, (2) provides sustained coverage throughout the year, (3) includes both paid and earned media and (4) uses messages consistent with national campaigns. Every effort is

being made to assure that the publicity is culturally relevant, appropriate to the audience, and based on market research.

Action Items:

- Promote the concept among law enforcement that their efforts are multiplied at least 100% by the use of effective PI&E.
- Study the current PI&E efforts to determine areas in which they can be improved.
- Implement improved PI&E efforts as determined by the evaluations.

4.4 Prosecution

Impaired Driving cases are perhaps the most litigiously complex cases in the judicial system; yet they are routinely handled by the most inexperienced prosecutors. In recognition of this, the AIDPC calls for the State to utilize a comprehensive program to visibly, aggressively, and effectively prosecute and publicize impaired-driving-related efforts. It further recommends that the Traffic Safety Resource Prosecutor (TSRP) coordinate and deliver training and technical assistance to prosecutors handling impaired driving cases throughout the State.

Action Items:

- Continue to maintain a dedicated full time TSRP to provide ongoing support to all prosecution cases.
- Support the TSRP in conducting a number of training courses as specified in Section 4.7.
- Implement a pilot program called DUI/Drug (DUI/D) days. This will be a new program with the goal of ensuring that the courts and all other relevant persons in the criminal justice system are aware of the services provided by the Alabama Department of Forensic Sciences (ADFS), and that they taking advantage of those services. This will also serve to reduce ADFS time out of the laboratory via effective time management and planning. The plan calls for the initiation of DUI/D days within specific courts, where a toxicologist is present to cover DUI/D specific docket for the day. This pilot should start out in some of the larger jurisdictions that have more DUI/D cases. Consideration will also be given to utilizing video/phone testimony when available.

4.5 Adjudication

The plan calls for the State to impose effective, appropriate, and research-based sanctions, followed by close supervision and the threat of harsher consequences for continued non-compliance. Drug courts are being used to reduce recidivism among repeat and high-BAC offenders. These special courts involve all criminal justice stakeholders (prosecutors, defense attorneys, probation officers, and judges) along with alcohol and drug treatment professionals, and they use a cooperative approach to systematically change participant behavior. Every effort is used to strengthen the effectiveness of the enforcement and prosecution efforts are strengthened by knowledgeable, impartial, and consistent adjudication. The plan calls for state-of-the-art education to judges, covering Standardized Field Sobriety Test (SFST), Drug Evaluation and Classification (DEC), alternative sanctions, and emerging technologies.

The plan calls for the continued use and expansion of Drug and DUI (alcohol) Courts to improve case management and to provide access to specialized personnel, speeding up disposition and adjudication, recognizing that these courts increase access to testing and assessment to help identify impaired driving offenders (especially those with addiction problems) thus serving to prevent them from reoffending. Recognizing their value in sentence monitoring and enforcement, the plan calls for increased staffing and training for probation programs with the necessary resources, including technological resources, to monitor and guide offender behavior. Drug and DUI Courts currently only cover a limited number of jurisdiction, and their scope is limited due to funding considerations. Alabama supplements its Drug/DUI Courts with its Court Referral Officer (CRO) Program, which is a more comprehensive program that has been in existence for decades.

The AIDPC also considered the application of the *24/7 Sobriety Program* in the context of all of the programs discussed in this section. This program, which was piloted in South Dakota in 2005 and is reportedly a tremendous success to this day, is exactly as its name implies – a twenty-four hour a day and seven day a week sobriety program and has the one main goal of total sobriety for each defendants in the program. The program monitors total abstinence from alcohol and drugs by requiring the participant to submit to the testing of their blood, breath, urine, or other bodily substances in order to determine the presence of alcohol, marijuana, or any controlled substance in their body. Targets of the program would include persons convicted of a second or subsequent DUI as well as persons convicted of a first DUI offense with a blood-alcohol content of 0.15 or greater. Participation in the program might also be a condition of bond for persons arrested for DUI who have previously been convicted of DUI at least once before. While many details would need to be resolved, it was resolved that this program should be given consideration as a treatment option in all existing remediation initiatives.

4.5.1 Court Referral Officer Program

Court Referral Officer (CRO) and court referral education programs have been providing assistance to court officials and defendants in Alabama for over 20 years. The CROs perform evaluations and place the defendant in the appropriate program, and the education programs have been providing Level I, Level II, and Youth & Juvenile Classes as needed. The Mandatory Treatment Act of 1990, as it was signed by the late Governor Guy Hunt, requires that defendants that have been arrested or found guilty of any alcohol and drug offense follow the guidelines laid down in that Act. The goal of the Alabama Court Referral Program is to combat substance abuse by providing monitoring, drug testing, case management, and education. During CY2012, CROs evaluated a total of 25,792 defendants that were court ordered, and performed a total of 137,438 monitoring sessions.

The following is an excerpt from MTA §12-23-2 establishing the CRO Program:

To establish a specialized court referral officer program to promote the evaluation, education and rehabilitation of persons whose use or dependency on alcohol or drugs directly or indirectly contributed to the commission of an offense for which they were convicted in state or municipal courts and to establish mandatory alcohol and drug abuse treatment programs to provide treatment and rehabilitation for these identified offenders.

The Act requires that defendants that are arrested or found guilty should be ordered to an evaluation by the Court Referral Officer (CRO). Once the CRO has completed the evaluation, the defendant will know if (and what type of) education classes or treatments are recommended. The Act recognizes that every person that gets a DUI doesn't necessarily have a drinking or drug problem, and that all substance abuse problems are not remediated by the same treatments or treatment types. Thus educational classes and other treatment options have been made available for those that do not meet the more advanced treatment criteria. The Administrative Office of Courts (AOC) provides Level I and Level II educational classes.

The following provides the authority for courts to refer defendants to authorized education and/or treatment programs (MTA § 12-23-6):

In order to effect the purposes of this chapter, all courts exercising jurisdiction over alcohol and drug related offenses shall be authorized to refer a defendant to a court referral program for evaluation and referral to an appropriate education and/or treatment program. At a minimum, every defendant who is not referred directly to drug or alcohol treatment shall be required to complete an alcohol and drug education program certified by the administrative office of courts.

If the CRO suspects that the defendant has a substance abuse problem, a treatment referral is recommended. CROs must refer defendants to Certified Treatment Programs because state approved programs have certified doctors, nurses, and other medical specialists to ensure the defendant is not having a medical crisis.

The Department of Mental Health and Mental Retardation is charged with the responsibility to develop policies and procedures and provisions for certification (MTA § 12-23-9):

The department of mental health and mental retardation shall develop policies and procedures which shall be followed in the treatment of offenders. These programs shall be certified by the Alabama department of mental health and mental retardation or the Joint Commission on Accreditation of Health-care Organizations (JCAHO). There have been some tragic incidents of defendants attending non-certified programs that died because they did not receive any medical treatment.

The plan calls for a standardized method including the following steps that defendants follow in their legal process:

1. Accept defendant into the program.
2. Refer the defendant to the appropriate CRO.
3. CRO performs an evaluation of the defendant that involves standardized testing, interview, and a review of past history.
4. CRO determines the level of education or treatment required.
5. CRO recommends placement into education/treatment which is validated by the appropriate judge within the jurisdiction.
6. Monitoring (monthly or more frequent, depending on defendant's compliance) to include drug testing, checking on required self-help meetings, assisting with job opportunities, assuring payment of fines and court cost, and checks on compliance with education/treatment or any other requirements of the court.
7. Reports on non-compliance will require additional action by the court.
8. Upon completion, the defendant is presented with a certificate of completion that is evidence to the court that the case can be closed.

The above process is monitored closely and defendants' actions are tracked in the Model Impaired Driver Access System (MIDAS), which was developed as a National Model by NHTSA in the early 2000s. This system assures that a defendant will not be in the CRO program in two different jurisdictions at the same time. It also keeps track of repeat offenders and assures that all defendants are treated uniformly and fairly. It also produces data on defendants that has been used in the past to validate the assignments of defendants by CROs to the appropriate levels. For more details and recommendations regarding MIDAS, see Section 6.3.

Action Items:

- Continue to implement the CRO program as described by the various planning activities described above.
- Assure that the CRO program is well publicized throughout the judicial system and take whatever steps are necessary to assure that this program is being used universally.
- Provide additional liaison between the CRO program and newly developing Drug and DUI (Alcohol) Courts, which are described in Sections 4.5.2 and 4.5.3.
- Continue to maintain and further modernize MIDAS so that it stays current with existing information technology developments.
- Consider ways that the concept of the 24/7 Sobriety Program can be integrated into the CRO program.

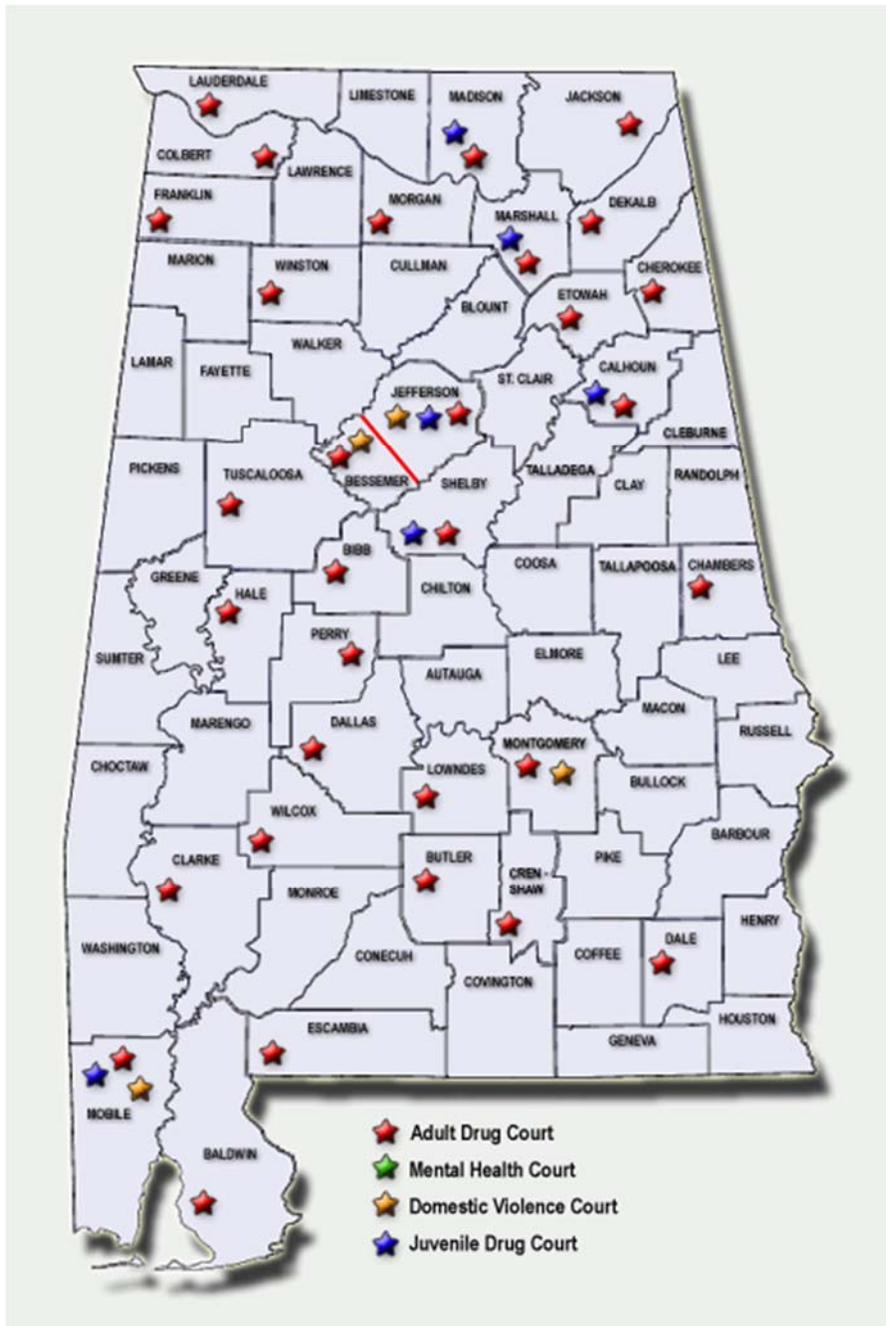
4.5.2 Drug Courts

Drug courts exist in most of the counties in Alabama (see map on next page). The objective of drug courts is to give offenders the tools they need to defeat their addictions and learn to live sober and productive lives. If this goal is achieved, the outcome will be a marked reduction in prison populations, reduced crime and greater cost savings to Alabama tax-payers. The Drug Court section was established within the Alabama Administrative Office of Courts (AOC) to provide support to all existing Drug Courts and to those counties wishing to establish a Drug Court.

Eligible drug-addicted persons may be sent to Drug Court in lieu of traditional justice system case processing. Drug Courts keep individuals in treatment long enough for it to work, while supervising them closely. For a minimum term of one year, participants are:

1. Provided with intensive treatment and other services they require to get and stay clean and sober;
2. Held accountable by the Drug Court judge for meeting their obligations to the court, society, themselves and their families;
3. Regularly and randomly tested for drug use;
4. Required to appear in court frequently so that the judge may review their progress; and
5. Rewarded for doing well or sanctioned when they do not live up to their obligations.

(Source: <http://www.nadcp.org/learn/what-are-drug-courts>)



Action Items:

- Publicize the benefits of Drug Courts so that they can be extended to every county, with a goal of establishing them in at least two new counties per year.
- Assure effective liaison between Drug Courts, DUI Courts and the local CRO programs.
- Consider ways that the concept of the 24/7 Sobriety Program can be integrated into the Drug Court program.

4.5.3 DUI (Alcohol) Courts

Currently Alabama has one DUI (Alcohol) Court (henceforth called *DUI Court*) in Alabama. It is in the Birmingham area, and it is serving as a model for potential future expansion of these courts throughout the state. DUI Courts are analogous to Drug Courts, with the obvious exception that they deal with alcohol as opposed to other drugs. However, DUI Courts operate within a post-conviction model, as described in the excerpt from dwicourts.org which follows:

DUI Court is an accountability court dedicated to changing the behavior of the hardcore DUI offenders. The goal of DUI Court is to protect public safety by using the highly successful Drug Court model that uses accountability and long-term treatment.

A DUI Court is an accountability court dedicated to changing the behavior of the hardcore offenders arrested for DUI.

(Hardcore DUI offenders are defined as individuals who drive with a BAC of 0.15 percent or greater, **or** who are arrested for or convicted of driving while intoxicated after a prior DUI conviction.)

The goal of DUI Court is to protect public safety by using the highly successful Drug Court model that uses accountability and long-term treatment to address the root cause of impaired driving: alcohol and other substance abuse.

Unlike Drug Courts, however, DUI Courts operate within a post-conviction model. (Source: <http://www.dwicourts.org/learn/about-dwi-court/what-dwi-court>)

Action Items:

- Fully evaluate the costs and benefits both in terms of recidivism and its total impact on the criminal justice system.
- Modify the current model in any areas where deficiencies are found.
- Once validated, extent this model to at least five counties per year.
- Consider ways that the concept of the 24/7 Sobriety Program can be integrated into the DUI Court program.

4.5.4 Pardons and Paroles

The role of the Alabama Board of Pardons and Paroles is well established in the Alabama criminal justice system. As of this writing, Pardons and Paroles have approximately 121 offenders on supervision for impaired driving. This agency is committed to providing quality adult probation and parole services for the State. These services are provided to the Board of Pardons and Paroles in matters involving paroles, pardons, restoration of voting rights, and other issues within the Board's authority and responsibility. Pre-sentence, pre-probation, youthful offender and other investigations and reports are provided to the sentencing courts throughout the state. The agency has sixty-one field offices positioned and staffed to provide these services to the courts, and supervision for those offenders placed on parole by the Board or probation by the courts. For more information, see:

<http://www.pardons.state.al.us/ALABPP/Main/ALABPP%20MAIN.htm>

The action items below are recommended to provide better supervision and reduce recidivism for DUI offenders currently being supervised by Pardons and Paroles (P&P).

Action Items:

- Purchase hand held breath test devices for P&P Officers to use for offenders suspected to have been drinking.
- Advise probationers and parolees that impaired driving is not inclusive to only alcohol, and that individuals should be aware of their intake of narcotic and other pain medications.
- Officers should conduct evening and night home visits to help identify those offenders who are still drinking or abusing drugs.
- Establish a system such that arrest reports (details of offenses) for offenders under supervision from other agencies can be received within 72 hours of arrest for an impaired offense, and that an alert is sent out to the appropriate supervisor if/when there is any change to the offender's record. This would greatly expedite the offender being brought back before the court or officer of the board in a timely manner.
- The following may not be policy decisions within P&P, and might require legislation; they have been included in the legislative recommendations of Section 4.1:
 - Have the courts add a special condition of no alcohol for probationers convicted of impaired driving.
 - For those so sentenced, require defendants to be fitted with a Continuous Alcohol Monitoring Device that constantly measures the offender's alcohol content and communicates with P&P remotely, greatly reducing the number of visits and the amount of time the probation officers must spend meeting with impaired driving probationers. This will be a major savings in time and other resources for P&P in the area of impaired driving offender monitoring.

4.6 Administrative Sanctions and Driver License Programs

The States uses 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; and the use of ignition interlock devices. As resources allow, consideration will be given to other licensing activities in preventing, deterring and monitoring impaired driving, particularly among novice drivers. It is recognized that publicizing these and related efforts is part of a comprehensive communications program. Separate consideration and definition will be given to this overall category in the following areas:

- Administrative license revocation,
- Vehicle sanctions, and
- Supportive programs.

4.6.1 Administrative License Revocation

Administrative sanctions in Alabama include the State's Administrative Per Se Suspension (APS), and the use of ignition interlock devices (IIDs). This plan calls for the continued implementation of these laws and their potential modification as areas of the law are determined to need strengthening or further clarification.

The Alabama Department of Public Safety (DPS) has been authorized by the Legislature to impose administrative penalties (generally called Administrative Per Se) including driver's license suspension. The procedure is as follows upon arrest for impaired driving. If a breath test indicates .08% blood-alcohol or more, or the individual refuses to submit to chemical testing, his/her driver's license is immediately confiscated the driver is issued a pink sheet of paper that serves as a formal notice of immediate suspension and a temporary license valid for 30 days (during which the driver can obtain a hearing). After an ID arrest the individual has ten days within which to request an administrative hearing to contest the suspension. This is called the Administrative Per Se Suspension (APS). The APS suspension is based upon Alabama's "implied consent" laws: any person driving in this state is "presumed" to impliedly consent to chemical testing if s/he is suspected of drunk driving.

Action Items:

- All Administrative License Revocation recommendations were legislative in nature. See Section 4.1 and Appendix C for these recommendations.

4.6.2 Vehicle Sanctions

“In 2011, Alabama became the 50th state to enact driving under the influence (DUI) legislation that includes the use of ignition interlock devices (IIDs). Alabama courts are required to order the installation and maintenance of IIDs for first-time offenders, if their blood alcohol levels are .15 percent or higher, and for all repeat DUI offenders. IIDs must be installed on any and all vehicles operated by the offender. The offender is responsible for any and all costs associated with the IID, including installation, monthly lease payments, service fees and removal. If the offender installs IIDs on multiple vehicles, the offender is responsible for the costs of installing and maintaining all of the IIDs. Offenders must obtain IIDs from service providers that are certified by the State of Alabama. The IID is a small device that is connected to the vehicle's ignition system. The driver is required to blow into the device to submit a breath sample. The IID measures the alcohol content of the breath sample and compares it to a pre-set limit. If the breath sample indicates an alcohol level that is above the pre-set limit, the IID prevents the vehicle from starting.

“IIDs require drivers to submit random breath samples while operating vehicles. If a “rolling retest” results in a breath alcohol content that is above a pre-set limit, the IID initiates an alarm sequence that includes sounding the vehicle's horn and flashing the vehicle's lights. The alarm sequence continues until the driver turns off the vehicle or submits a clean breath sample. In some situations, the IID initiates a permanent lockout phase during which the vehicle cannot be started under any circumstances. The vehicle must be towed to the service provider to have the permanent lockout released. The offender is responsible for any and all costs associated with the permanent lockout, including towing and fees imposed by the service provider.

“In Alabama, a first-time DUI offender is subject to a jail sentence of up to one year, a \$600 to \$2,100 fine and a mandatory 90-day suspension of driving privileges. If the first-time DUI conviction involves a blood alcohol content of 0.15 or higher, the court orders the installation and maintenance of an IID.

“A second-time offender is subject to jail time up to one year, 20 days of community service, a \$1,100 to \$5,100 fine, the revocation of driving privileges for a period of one year and an ignition interlock device requirement. A third DUI conviction within five years of the previous conviction results in jail time up to one year, a \$2,100 to \$10,100 fine, the revocation of driving privileges for a period of three years and an IID requirement. A fourth and subsequent DUI conviction within five years of a previous conviction is a Class C felony. The offender serves up to ten years in jail, pays a \$4,100 to \$10,100 fine, has driving privileges revoked for a period of five years and must meet an IID requirement.

In addition to the jail time, fines, suspension or revocation of driving privileges and ignition interlock device requirements, individuals convicted of DUI in Alabama are required to pay a \$100 fee to the Impaired Drivers Trust Fund for each conviction.” Source of quote: <http://www.lifesafer.com/ignition-interlock-alabama-laws/>

Action Items:

- Investigate (by the AIDPC or a select panel) any issues regarding the full implementation of the IID laws to assure that any bottlenecks are removed and that the law can be fully implemented.
- Conduct a study of the current IID statute to determine if a wider scope of implementation is justified, and if so, implement that extension.

4.6.3 Supportive Programs

Programs under this category reinforce and complement the State’s overall program to deter and prevent impaired driving. Examples include the following types of countermeasures:

- Graduated driver licensing (GDL) for novice drivers, especially those parts of the GDL that deal with impaired driving;
- Education programs that explain alcohol’s effects on driving,
- The State’s zero-tolerance laws for minors, and
- Efforts to prevent individuals from using a fraudulently obtained or altered driver’s license.

Action Items:

- Evaluate all current supportive programs to determine those that are most effective. Evaluations may be of existing programs within the state or similar programs in other states.
- Move forward emphasizing those programs that show the greatest promise for success in Alabama.

4.7 Training

The various training activities described in this section will be conducted under the auspices of the Traffic Safety Resource Prosecutor (TSRP). The TSRP provides critical support to Alabama's prosecutors, law enforcement officers, judges and other traffic safety professionals by offering competency and expertise in the area of impaired driving. The continued support for the TSRP is an essential element of this plan. The functions of this office include providing ongoing technical assistance and legal research to prosecutors on a myriad of legal issues pertaining to impaired driving prosecution. In addition to providing the overall supervision for the training described in this section, the TSRP assists and/or leads prosecutions of impaired driving cases upon request. The TSRP also monitors legislative matters that impact impaired driving laws and communicates with other state agencies involved in impaired driving cases to promote uniform enforcement and prosecution of Alabama's impaired driving laws. These activities are further described on the following website maintained by the TSRP: <http://www.alabamaduiprossecution.com/>

The following categories define the following sections:

- Law enforcement training,
- Prosecutor training
- Judicial training
- DRE training
- Interdisciplinary courses and conferences.

4.7.1 Law Enforcement Training

4.7.1.1 Advanced Roadside Impaired Driving Enforcement (ARIDE)

The Advanced Roadside Impaired Driving Enforcement (ARIDE) program was developed by the National Highway Traffic Safety Administration (NHTSA) with input from the International Association of Chiefs of Police (IACP) Technical Advisory Panel (TAP) and the Virginia Association of Chiefs of Police. ARIDE was created to address the gap in training between the Standardized Field Sobriety Testing (SFST) and the Drug Evaluation and Classification (DEC) Program.

The SFST program trains officers to identify and assess drivers suspected of being under the influence of alcohol, while the DEC Program provides more advanced training to evaluate suspected drug impairment. The SFST assessment is typically employed at roadside, while an officer trained as a drug recognition expert (DRE) through the DEC Program conducts a drug evaluation in a more controlled environment such as at a detention facility.

ARIDE is intended to bridge the gap between these two programs by providing officers with general knowledge related to drug impairment and by promoting the use of DREs in states that have the DEC Program. One of the more significant aspects of ARIDE is its review and required student demonstration of the SFST proficiency requirements. The ARIDE program also stresses the importance of securing the most appropriate biological sample in order to identify substances likely causing impairment.

ARIDE is a 16-hour training course and may be taught by DREs, DRE instructors or SFST instructors who are also DREs. The planned training will be conducted under the control and approval of the DEC Program state coordinator. NHTSA and IACP highly recommend that principal instructors for this course be state-qualified and IACP-credentialed DRE instructors. This requires that they (1) hold currently valid certificates as DREs; (2) have completed the NHTSA/IACP DRE Instructor Training Course; and (3) have completed the required delivery of both classroom and certification training, under the supervision of credentialed DRE instructors. At minimum, a qualified DRE with instructor credentials in other fields of occupational competency (not necessarily a DRE instructor) can be utilized to present ARIDE materials if instructor resources are limited and cannot be obtained without undue hardship.

A qualified SFST instructor could instruct the first three segments leading to the preparation and evaluation of participants during the SFST proficiency examination. In addition to their occupational competencies, all instructors must be qualified trainers. They need to understand, and be able to apply, fundamental principles of instruction. Perhaps most importantly, they need to be competent coaches since much of the classroom training is devoted to hands-on practice. The quality of coaching will have a major impact on the success of those practice sessions. Every effort will be made to assure that as many instructors as possible are graduates of the NHTSA IACP DRE Instructor Training Course.

Certain blocks of the instruction may enlist instructors with special credentials. For example, a physician would be well qualified to assist or teach session IV that covers medical aspects of impairment, and a prosecutor might be a good choice for session VIII that deals with legal issues. The training also promotes interaction with representatives from the state's prosecution community. Part of the course is intended to be taught by a local prosecutor or the state's traffic safety resource prosecutor (TSRP).

AIDPC members determined that there is a misconception in many courts and prosecutors that Horizontal Gaze Nystagmus (HGN) is not admissible. (See Section 4.7.7 for a definition and description of HGN testing.) A concerted effort will be made in the ARIDE training to extend the reach (by students as well as trainers and administrators) to educate the courts and other relevant person to have experts available when needed, and to ensure that officers are administering all tests according to standards, thus assuring the admissibility of HGN tests. The ARIDE classes will contain no more than 48 students, and they will be conducted at the Alabama Criminal Justice Training Center in Selma. The exact timing and other details of the courses will be resolved as they are scheduled.

4.7.1.2 "Protecting Lives/Saving Futures" Interactive Participant-Centered Course

This model curriculum is designed to jointly train police and prosecutors in the detection, apprehension and prosecution of alcohol and drug impaired drivers. This training is unique in two ways: (1) experts in the fields of toxicology, optometry, prosecution and law enforcement designed and developed the curriculum; and (2) law enforcement officers and prosecutors are trained together by the experts in their respective disciplines. The training is the first of its kind to be developed nationally and is adaptable to all local jurisdictions.

The joint-training approach allows all the involved disciplines to learn from each other inside a classroom, as opposed to the ad hoc communications outside the courtroom shortly before a trial. Each profession learns firsthand the challenges and difficulties the others face in impaired driving cases. This allows for greater understanding on the part of police officers as to what evidence prosecutors must have in an impaired driving case. Conversely, this training gives prosecutors the opportunity to learn to ask better questions in pretrial preparation, as well as in the courtroom. Both prosecutors and law enforcement officers learn firsthand from toxicologists about breath, blood and urine tests. A nationally recognized optometrist instructs police and prosecutors about the effects of alcohol and other drugs on an individual's eyes, specifically, HGN. In turn, optometrists and toxicologists gain a greater appreciation for the challenges officers face at the scene in gathering forensic evidence and the legal requirements prosecutors must meet in presenting evidence in court. This exchange of information is beneficial to all involved. Some of the key subjects of the training include:

- Initial detection and apprehension of an impaired driver
- Standardized Field Sobriety Tests (SFSTs) and the effective documentation of observations of suspects
- The medical background of the Horizontal Gaze Nystagmus (HGN) test, including the correlation of HGN to alcohol and other drugs
- The scientific background of the breath/blood/urine alcohol and drug tests, and advantages and limitations of forensic testing
- Identification of impairment due to alcohol as well as other drugs
- The effective presentation of evidence in court through trial preparation exercises

AIDPC members determined that there is a misconception in many courts and prosecutors that HGN is not admissible. A concerted effort will be made in the conduct of this course to extend its reach (by students as well as trainers and administrators) to educate the courts and other relevant person to have experts available when needed, and to ensure that officers are administering all tests according to standards, thus assuring the admissibility of HGN tests. The plan is for this course to be conducted every two years at the direction of the TSRP.

4.7.1.3 "Cops in Court" Trial Testimony Skills Course

Designed for law enforcement officers with a wide variety of trial testimony experience, this course includes discussion and instruction on all aspects of trial preparation and courtroom testimony in an impaired driving case. Experts in the fields of law enforcement and prosecution present the curriculum to law enforcement officers, allowing the participants to learn firsthand the challenges and difficulties in impaired driving cases. This course is designed to be taught in one day and includes a mock trial presentation, with optional direct and cross-examination exercises. Additional potential topic discussed throughout the Instructor Manual are used to expand the curriculum according to student needs and interests. Segments of this training include:

- Understanding the Importance of Courtroom Testimony
- Report Writing
- Courtroom Preparation

- Direct Examination
- Cross-Examination
- Mock Trial

This course will be conducted every two years at the direction of the TSRP.

4.7.2 Prosecutor Training

4.7.2.1 Prosecuting the Drugged Driver: A Trial Advocacy Course

The *Prosecuting the Drugged Driver* course uses a curriculum developed by a cooperative effort of NHTSA and the National Traffic Law Center. This course is designed to create a team-building approach between prosecutors and law enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers participate in interactive training classes taught by a multidisciplinary faculty.

The course begins with an overview of the drug-impaired driving problem in the United States and the substantive areas of training that police officers receive to be certified as a drug recognition expert (DRE). Learning about drug categories, signs and symptoms of drug influence, the role of the DRE in establishing impairment, and the role of toxicology in these cases will assist the prosecutor in developing methods for effectively and persuasively presenting this information in court. The course also addresses how to qualify the DRE as an expert witness in court and how to respond to common defense challenges.

Each participant gets the opportunity to prosecute a mock case including the opportunity to conduct a direct examination of a DRE and a toxicologist. Each phase of the trial is videotaped. Participants receive critiques of the live and videotaped presentations from experienced faculty. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose more persuasive arguments and deliver more dynamic presentations.

The plan calls for this course to be conducted at the direction of the Traffic Safety Resource Prosecutor (TSRP) every two years. The class would be made up of both certified DREs and prosecutors with a class size not to exceed 24 persons.

4.7.2.3 “DUI Trial Skills Training” Trial Advocacy Course

This 3-day course is similar to the *Prosecuting the Impaired Driver: DUI Cases* course discussed immediately above. However, it will be limited to only prosecutors. It will allow the prosecutor to concentrate on trial skills by providing them with tips and techniques used by seasoned DUI prosecutors. The emphasis in this training will be less on classroom learning and more on performance with feedback from presenters with proven records of success in DUI trials. The plan is for this course to be conducted annually at the direction of the TSRP.

4.7.2.2 “Prosecuting the Impaired Driver: DUI Cases” Trial Advocacy Course

This course is designed to create a team-building approach between prosecutors and law

enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers participate in interactive training classes taught by a multidisciplinary faculty focusing on building skills in trying an alcohol related impaired driving case. The course includes a discussion of the role of the prosecutor in both alcohol-impaired driving cases and community safety, and it covers standardized field sobriety tests, the pharmacology of alcohol and chemical testing. Each participant prosecutes a “case,” is critiqued on his/her live performance and given an opportunity to view him/herself on videotape. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose more persuasive arguments and deliver more dynamic presentations. The plan is for this course to be conducted every two years at the direction of the TSRP.

4.7.2.4 “Lethal Weapon: DUI Homicide” Advanced Trial Advocacy Course

Vehicular fatality cases are complex, requiring prosecutors to have a working knowledge of crash reconstruction and toxicology, as well as skills to work with expert witnesses and victims. The Lethal Weapon course is focused on assisting prosecutors to develop their knowledge and skills in trying these cases. A substantial portion of this four and a half day course involves presentations on crash reconstruction, technical investigation at the scene, and toxicology. The course also provides an advanced trial advocacy component in which participants receive a case file and participate in mock trial sessions where each of them conducts every stage of the trial. A unique feature of Lethal Weapon is the opportunity for prosecutors to conduct direct and cross-examinations of actual reconstructionists and toxicologists. Specifically, this course teaches prosecutors to:

- Learn how a crash reconstructionist determines speed from skid marks and vehicle damage
- Determine how vehicle and occupant kinematics assist in cases involving driving identification
- Understand the prosecutor’s role at the scene of a traffic fatality
- Calculate BAC by learning alcohol “burn-out” rates and the Widmark formula
- Improve trial advocacy skills, particularly conducting direct and cross-examination of expert witnesses

The primary participants in this training are prosecutors with a preferred experience level of four years of trying impaired driving cases. It is also of interest to prosecutors who currently handle vehicular fatality cases, and to experienced prosecutors who want to increase their understanding of the technical evidence required to prove guilt in cases involving vehicular fatalities, and at the same time improve their trial advocacy skills. The plan is for this course to be conducted every two years at the direction of the TSRP.

4.7.2.5 “Protecting Lives/Saving Futures” Interactive Participant-Centered Course

See Section 4.7.2.2. This course applies to both law enforcement and prosecutors.

4.7.3 Judicial Training

The plan calls for the training of judges at the municipal and state level to ensure that they stay up-to-date on impaired driving issues. This is planned as part of the semi-annual judge training program. It is critical that judges remain current on evolving investigative techniques, trending drugs of abuse and their effects on the body, and other changes in the legal landscape as it pertains to impaired driving.

The following curricula is recommended:

- Introduction to the Drug Recognition Expert (DRE) Program
- Key elements of drug toxicology and pharmacology
- Alabama's breath testing program
- Legal precedence and legislative updates
- The role of Drug and Alcohol (DUI) Courts
- The robustness of horizontal gaze nystagmus (HGN)
- The use of experienced officers in trials where prosecutors might be less experienced; especially in cases where technical forensic science testimony is being considered.

4.7.4 Drug Recognition Expert (DRE) Training

Note that ARIDE training, covered in Section 4.7.1.1 could also logically be classified in this section since it relates heavily to drug recognition.

4.7.4.1 Drug Recognition Expert (DRE) School

Alabama is one of 49 states and the District of Columbia to implement the Drug Evaluation and Classification Program (DECP). At the heart of this program is the Drug Recognition Expert (DRE). A DRE is a law enforcement officer trained in detecting and recognizing impairment caused by substances other than alcohol. The Los Angeles Police Department originated the program in the early 1970s when officers noticed that many of the individuals arrested for driving under the influence had very low or zero alcohol concentrations. The officers reasonably suspected that the arrestees were under the influence of drugs, but lacked the knowledge and skills to support their suspicions. Working with medical doctors, research psychologists, and other medical professionals they developed a simple, standardized procedure for recognizing drug influence and impairment, which led to the first DRE program. In the early 1980s, the National Highway Traffic Safety Administration (NHTSA) took notice of the LAPD's DRE program. The two agencies collaborated to develop a standardized DRE protocol which led to the DEC program. During the ensuing years, NHTSA and various other agencies and research groups examined the DEC program. Their studies demonstrated that a properly trained DRE can successfully identify drug impairment and accurately determine the category of drugs causing such impairment. Recent studies conducted by NHTSA have established the value of DRE programs.

The DRE comes into a case at the request of the arresting officer. A typical scenario: An officer initiates a traffic stop and subsequently conducts a DUI investigation. The officer makes a determination that the driver is impaired; however, there is either no evidence of alcohol consump-

tion or a subsequent breath test result is not consistent with the level of impairment. At this point, the officer requests a DRE evaluation. The DRE follows a 12-step systematic and standardized process utilized by all DREs regardless of agency. The DRE uses a drug classification system based on the premise that each drug within a category produces similar signs and symptoms. It is a pattern of effects rather than a specific effect that is unique to the category.

Without proper training and adequate resources, the average law enforcement officer will find that convicting the drug impaired driver is almost infinitely more difficult than convicting the alcohol impaired driver. The presence of DREs in Alabama will impact both the highway and the courtroom.

A continuation and expansion of this program will enable law enforcement officers to better detect, apprehend, assess, document, and subsequently help the prosecutor prove, in court, the defendant was under the influence of a drug while driving (or committing any other improper act, e.g., domestic violence and homicide). There are also community outreach programs in place that utilize certified DREs such as Drug Impairment Training for the Educational Professional (DITEP) in which DREs go into school systems and teach educators observable signs and effects of drug impairment.

AIDPC surfaced the fact that many courts are not familiar with program. Major efforts will be integrated into the training to focus on community outreach and informing judges, lawyers, and law enforcement officers on the structure of the DRE program and its benefits.

The plan calls for a training selected police officers and other approved public safety officials as drug recognition experts (DREs) through a three-phase training process:

1. Drug Recognition Expert Pre-School (16 hours)
2. Drug Recognition Expert DRE School (56 hours)
3. Drug Recognition Expert Field Certification (Approximately 40 – 60 hours)

The training relies heavily on the Standardized Field Sobriety Tests (SFST's), which provide the foundation for the DEC Program. Once trained and certified, DREs become highly effective officers skilled in the detection and identification of persons impaired by alcohol and/or drugs. Because of the complexity and technical aspects of the DRE training, not all police officers may be suited for the training. Experience has shown that training a well-defined group of officers proficient in impaired driving enforcement works well and can be very effective.

The plan is to conduct at least one DRE School annually choosing from graduates of an approved ARIDE program and will be limited to no more than 24 students and will be conducted at the Alabama Criminal Justice Training Center in Selma.

4.7.4.2 Drug Impairment Training for Educational Professionals (DITEP)

Generally instructors for this course are DREs who are also SFSTs, DRE instructors, or DREs with other verifiable instructor training. At a minimum, the instructor must have attended the Drug Impairment Training for Educational Professionals (DITEP) orientation briefing.

The planned DITEP training lasts for two days. The first day is for all who are interested in this type of training. Day one works well for high-level administrators since it focuses on general drug impairment and policies. Day two is best suited for those who will actually conduct the hands-on evaluations, e.g., school nurses and school resource officers.

Day one of the course program outline includes the following: introduction and overview; drugs in society; policy, procedures, and rules; overview of alcohol drug identification, categories and effects; contacting the parent(s); and other reference materials. Day two includes: the use of eye examinations; vital signs; divided attention tests; poly drugs; assessment process; and conclusions and applications.

The plans call for a DITEP course to be conducted annually utilizing the DRE instructors from Alabama. This course would be conducted at the direction of the DRE Coordinator.

4.7.5 Interdisciplinary Courses and Conferences

4.7.5.1 Train the Trainer Faculty Development Course

This course is designed to train criminal justice professionals to more effectively teach their skills and critique their students. While led by an instructor who is competent in training and motivational techniques, the curriculum is designed to be participant-centered. Each participant will be actively involved in the training process. The program will provide all participants with a foundation in presentation styles, adult learning principles, the art of critiquing, and communication skills. The course teaches participants how to incorporate creative training techniques to deliver interactive presentations using visual aids that reinforce learning.

To provide the opportunity for participants to apply training techniques taught and demonstrated during the course, each participant is required to make a presentation on an element of DUI trial advocacy or related topic. The presentations are videotaped and both the 'live' and videotaped presentation will be critiqued by faculty. Strong emphasis is placed on assisting individual participants to expand and improve their presentation skills, regardless of their level of experience.

This course will also focus on improving the fundamentals of critiquing. Incorporated into the course is the opportunity for local volunteer prosecutors to deliver an opening statement, closing argument, a direct and a cross, which are then critiqued by course participants to give them an opportunity to practice the critiquing skills taught in the course. This course will allow for the development of competent faculty to further the training efforts for the state's prosecutors and law enforcement community. The plan is for this course to be conducted every two years at the direction of the TSRP.

4.7.5.2 DUI/Traffic Safety Conference

The planned conferences emphasize the essentiality of a multi-disciplinary approach toward combating DUI issues, and thus they draw upon expertise throughout the criminal justice system. Each conference is designed to reach 250 law enforcement officers, prosecutors, and other traffic

safety professionals. It involves a series of sessions over a 2 ½ day period that address a broad range of impaired driving issues ranging from investigation to prosecution to prevention to treatment and more. Speakers will include experts in their respective fields from around the country. They will be selected to deal with the most recent issues faced by prosecutors. Special sessions in the conference will be set up to deal with developing issues. For example, defense attorneys hiring expert witnesses to testify about new or technically complex subjects (e.g., the Draeger Breath Testing Instrument, ignition interlock, etc.). Prosecutors are generally not prepared to cross examine such experts without special training. Topics will address anticipated testimony that the defense witness is going present, with information to address this testimony, often involving reasons that such testimony is irrelevant to the programs within the state. This annual conference will be conducted at the direction of the TSRP.

5.0 Communication Program

It is recognized that, in addition to the focused Public Information and Education (PI&E) efforts, every project within the impaired driving program could have some type of a communications and public relations component associated with it. It is important that these be coordinated, and for this reason they will be collectively addressed within this planning document. The goal of the management of this comprehensive PI&E effort will be to assure that there is coordination with regard to all of the efforts being made. Thus, a comprehensive communications program will be developed that supports priority policies and program efforts and is directed at impaired driving; underage drinking; and reducing the risk of injury, death, and resulting medical, legal, social, and other costs. So, while this category will overlap with efforts made in several other categories where public relations or publicity is part of the countermeasure, the purpose of breaking this out separately is to maintain coordination among these various efforts. Thus, this section will heavily reference many of the other sections of this plan.

The plan calls for a comprehensive communication program that supports priority policies and program efforts. Communication programs and material will be developed to be culturally relevant and multilingual as appropriate. These will include:

- Development and implementation of a year-round communication plan that includes
 - Policy and program priorities;
 - comprehensive research;
 - behavioral and communications objectives;
 - core message platforms;
 - campaigns that are audience-relevant and linguistically appropriate;
 - key alliances with private and public partners;
 - specific activities for advertising, media relations, and public affairs;
 - special emphasis periods during high-risk times; and
 - evaluation and survey tools;
- Development and employment of a communications strategy principally focused on increasing knowledge and awareness, changing attitudes, and influencing and sustaining appropriate behavior;
- The use of traffic-related data and market research to identify specific audience segments to maximize resources and effectiveness;
- The adoption of a comprehensive marketing approach that coordinates elements like media relations, advertising, and public affairs/advocacy

5.1 Alabama Department of Economic and Community Affairs (ADECA)

5.1.1 General Public Service Announcements

ADECA has worked with the state's universities over the past few years in an attempt to develop Public Service Announcements (PSAs) that demonstrates creativity that has the maximum impact on Alabama drivers. These PSAs are supported by both paid and earned media. The following illustrate a pair of videos that were designed to be used together (although not necessarily at the same times).

<http://vimeo.com/aumpg/goodbillylastcall>

The idea is to demonstrate the contrast in making the right decision with that of making the wrong decision. The gap between seeing the two is anticipated to increase the effectiveness of the total package.

Action Items:

- Continue to support these year-round PSA efforts;
- Solicit private sources of funding so that additional spots can be developed and that the existing spots can be given greater exposure.

5.1.2 Safe Home Alabama (<http://www.safethomealabama.gov/>)

The SafeHomeAlabama.com traffic safety information portal is dedicated to providing comprehensive information both to the traffic safety community and to the general public, with the primary goal of reducing the number of people killed and the overall suffering and economic loss caused by traffic collisions. Being comprehensive, it has the objective of providing a communication conduit among all of those involved in traffic safety so that these efforts can be better coordinated. While it centers on efforts within Alabama, much of the information that is available has universal applicability.

This site is organized by the tabs on the top of the screen. Each tab contains a drop-down list of page titles that point toward specific subjects within the overall category. The following gives a brief overview of each of the tabs:

- SHA Home – recommended for those new to the site, this tab contains a drop-down of overall information about traffic safety in general and the site itself in particular. It points to several data sources both on this site and others, and gives indexes to all of the pages on this site.
- Service Groups – these are private advocacy groups and charitable institutions that have special interests in traffic safety.
- Government Agencies – this is a long list of the various governmental agencies that are involved in traffic safety in Alabama, as well as some of the multi-agency programs.
- University – university based traffic safety efforts.
- Safety Topics – items under this tab generally refer to information and training materials generally used in public information and education efforts.
- Data/Analysis – This provides information on and access to Alabama and FARS crash data (e.g., CARE and ADANCE) as well as a number of efforts that are largely data intensive, such as IHSDM/HSM, Road Improvements, the SHSP Document and Work Zone efforts. It also contains information about the Alabama electronic crash report (eCrash) and the electronic citation issuance system (eCite).

Updates to SafeHomeAlabama.gov average at least two per day, with the entire traffic safety community of Alabama invited to submit updates. A weekly e-mail is sent out to subscribers informing them of the most recent updates and providing them with direct links to their topics of interest.

Action Items:

- Continue to support the ongoing maintenance of the SHA web site with current topics.

- Bring the current web site up to date with a new version that assists users in finding what they are looking for on the site.

5.2 Alabama Department of Public Safety

The Alabama Department of Public Safety, Public Information/Education Unit is involved in a large number of ongoing communications activities. The following provides some examples of the current efforts:

- Sends out press releases and often holds press conferences prior to major travel holiday periods to promote highway safety and highlight our enforcement efforts.
- Performs enforcement efforts that target the driver behaviors that contribute to crashes with injuries and fatalities and provides PI&E and PSAs in conjunction with these enforcement efforts.
- Often partners in these communication and enforcement efforts with other traffic safety partners in the state, such as ALDOT, ADECA and local law enforcement agencies.
- Participates in NHTSA campaigns such as Click It Or Ticket, Drive Sober or Get Pulled Over, etc.
- Participates in the ADECA funded advertising campaigns, by appearing in TV commercials and billboards, for Alabama as well as holding press conferences (PI/E Unit).
- Involves their Public Information Officers (PIOs) in
 - Conducting safety programs on a daily basis to promote safe driving habits.
 - Participating in traffic safety campaigns alongside private companies. The latest push has been Texting while Driving. Recently, we participated in campaigns with AT&T and TOYOTA to promote the dangers of distracted driving.
 - Being interviewed by local media to discuss/promote ID reduction efforts.
- Involves the PI/E Unit in
 - Participating in the ADECA funded advertising campaigns, by appearing in TV commercials and billboards, for Alabama as well as holding press conferences;
 - Working with FMCSA on PSAs promoting commercial vehicle safety and changes/additions to the Federal Commercial Vehicle rules & regulations.
 - Working with DPS' Driver License Division to educate the public about changes/additions to the driver license laws and issues;
 - Designing and producing "rack cards" posters and other educational type material to educate the public about various safety topics, including impaired driving.

While some of these efforts might focus on areas other than impaired driving, every effort is made to leverage all of these activities to focus on what has been established as the major killers on our highways today, and one of the highest ranking factor is that of impaired driving.

Action Items:

- Continue current communication efforts with strong coordination with ADECA, ALDOT and local agencies.
- Continue to leverage current activities to deal with impaired driving; an example is the addition of an impaired driving cause to the weekly news releases being sponsored in part by ALDOT to include the number caused by impaired driving. Currently only the number of fatalities that were not properly restrained is being publicized.

- Evaluate current PSA and PI&E efforts to establish strengths and weaknesses and move forward accordingly.

5.3 Alabama Department of Transportation (ALDOT) Outreach Team Program

This is a recent effort by ALDOT that emanated from the SHSP effort in 2011 and 2012. It involves participants from the following organizations:

- Alabama Department of Transportation (Chair)
- Alabama Department of Public Safety
- Alabama Department of Economic and Community Affairs
- Federal Highway Administration
- National Highway Traffic Safety Administration
- Alabama Department of Public Health
- Alabama Department of Education
- University of Alabama Center for Advanced Public Safety
- Life Savers
- Students Against Destructive Decisions

While the above are the formal members, there is no limitation on the individuals who can participate, and all of the traffic safety community is invited to the meetings, which are held monthly.

The ID Plan outline was presented at the July 2013 meeting of the Outreach Team with an explanation of the MAP-21 requirement that it was responding to. All members of the Outreach Team were invited to provide input to the plan at that time. It was suggested by the Chair and accepted by general consensus that the plans being developed under MAP-21 would ultimately become part of the SHSP.

Action Items:

- Involve the ALDOT-hosted Outreach Team in all ID planning activities by establishing a formal liaison between the Outreach Team and the AIDPC.
- Enlist the support of the Outreach Team in assuring that the ID Plan is integrated into the forthcoming update to the SHSP as an appendix.

5.4 Traffic Safety Resource Prosecutor (TSRP)

The Traffic Safety Resource Prosecutor (TSRP) is employed by the Office of Prosecution Services, which is a state agency. A website (<http://alabamaduiprossecution.com/>) maintained by the TSRP provides general ongoing information on courses and addressing the many issues that prosecutors of ID cases face. Prosecutors are tasked with making a number of decisions in every case; chief among them involves determining which witnesses to call in order to lay the proper foundation for the admission of evidence. For example, in impaired driving cases involving a blood draw and a subsequent analysis of the blood, it is essential to establish that a qualified person drew the blood. Beyond that, the officer's testimony should be sufficient to establish the chain of custody of the blood evidence from the moment of the blood draw to the point where the officer places it in the evidence locker at the police station or delivers it to the Alabama Department of Forensic Sciences via U.S. mail or hand delivery.

In addition to other information provided, the TSRP-maintained website features a forum designed to improve the ability of Alabama prosecutors and law enforcement to effectively investigate and prosecute impaired drivers. While membership in this group is controlled, the TSRP will authorize any appropriately qualified individual to participate. Members may post e-mail messages, including attachments. Members are encouraged to upload any files that would be of benefit to the membership of the forum. Members can also add website bookmarks, list their conferences in the calendar, and phone book information in the "Database" section.

The TSRP also maintains liaison with the Alabama Drug Abuse Task Force (ADATF), which is a statutorily created multi-agency and private sector entity (Legislative Act 2012-237). Its charter is to comprehensively study the drug abuse problem and to report the findings and recommendations to the Alabama Legislature and to the people of Alabama. Reports of the ADATF are available at <http://www.alabamaprosecutor.com/ADTF.aspx>.

Action Items:

- Maintain support for the TSRP and promote and enlarge upon the communication efforts that are being made through the website and the forum.
- Provide additional publicity to the ADATF and their reports so that all members of the AIDPC and the traffic safety community in general is aware of the ongoing findings.

6.0 Drug (Including Alcohol) Misuse

This plan recognizes that impaired driving frequently is a symptom of a larger alcohol or other drug problem. 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 crimes. In addition, alcohol use leads to other injuries and health care problems. Frequent visits to emergency departments present an opportunity for intervention, which might prevent future arrests or motor vehicle crashes, and result in decreased alcohol consumption and improved health.

This part of the plan has the goal of encouraging employers, educators, and health care professionals to implement systems to identify, intervene, and refer individuals for appropriate substance abuse treatment. This effort will be subdivided into the following components:

- Screening and assessment
 - Within the criminal justice system
 - Within medical and health care settings
- Treatment and Rehabilitation
- Monitoring of Identified Past Impaired Drivers

6.1 Screening and Assessment

This plan calls for 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 other drug) abuse problem and, as appropriate, briefly intervene or refer them for appropriate treatment. A marketing campaign will be developed for each of these to promote year-round screening and brief intervention to medical, health, and business partners and to other pertinent audiences. Special emphasis on screening and assessment will be given to that occurring within the criminal justice system and within medical and health care settings.

6.1.1 Criminal Justice System

The plan calls for the development of a system whereby people convicted of an impaired driving offense will be assessed to determine whether they have an alcohol/drug abuse problem, and to effectively determine what treatment they need. One objective is to make this assessment required by law and completed prior to sentencing or reaching a plea agreement.

Action Items:

- See Sections 4.5.1 (Court Referral Officer Program)

6.1.2 Medical and Health Care Settings

To the extent possible the medical and health care industry will be involved in screening. The plan calls for professionals within medical or health care settings to screen any adults or adolescents who they see to determine whether they may have an alcohol or drug abuse problem. If the person is found to have an alcohol/drug abuse or dependence problem, a brief intervention should be conducted and, if appropriate, the person should be referred for assessment and further

treatment. While this approach is the ideal, it is recognized that issues of privacy and medical record confidentiality may prevent this ideal from being reached.

The Alabama Department of Public Health (ADPH) has established the Prescription Drug Monitoring Program (PDMP) to promote the public health and welfare by detecting diversion, abuse, and misuse of prescription medications classified as controlled substances under the Alabama Uniform Controlled Substances Act. PDMP monitors the distribution of prescription medications classified as controlled substances under the Alabama Uniform Controlled Substances Act. Under the Code of Alabama, 1975, § 20-2-210, which has enabled ADPH to establish, create, and maintain a controlled substances prescription database program. This law requires anyone who dispenses Class II, III, IV, V controlled substances to report the dispensing of these drugs to the database. PDMP goals include:

- To provide a source of information for practitioners and pharmacists regarding the controlled substance usage of a patient;
- To reduce prescription drug abuse by providers and patients;
- To reduce time and effort to explore leads and assess the merits of possible drug diversion cases; and
- To educate physicians, pharmacists, policy makers, law enforcement, and the public regarding the diversion, abuse, and misuse of controlled substances.

Action Items:

- Establish liaison between the AIDPC and the PDMP efforts in order to improve awareness all involved.
- If warranted augment the AIDPC with an appropriate representative from ADPH.

6.2 Treatment and Rehabilitation

Screening is of no value unless it is followed up by effective treatment and rehabilitation. The plan calls for the a coordinated effort among health care professionals, public health departments, and third-party providers to establish and maintain treatment programs for persons referred through the criminal justice system, medical or health care professionals, and other entities. The goal is to ensure that offenders with alcohol or other drug dependencies begin appropriate treatment and complete recommended treatment, if appropriate as a condition for their licenses to be reinstated.

Action Items:

- See Section 4.5.1 (Court Referral Officer Program).

6.3 Monitoring of Identified Past Impaired Drivers

The State established a program called the Model Impaired Driver Access and System (MIDAS) well over a decade ago to facilitate close monitoring of identified impaired drivers. Continued controlled input and access to, and maintenance/enhancements of, this impaired driver tracking system, with appropriate security protections, is essential. Monitoring functions are currently housed in the Administrative Office of the Courts (AOC), and it is recognized that this system

and the information generated by it needs to be made more readily available to driver licensing, judicial, corrections, and treatment agencies. MIDAS can determine the status of all offenders in meeting their sentencing requirements for sanctions and/or rehabilitation and it has the capability to alert courts of noncompliance. Additional efforts may be required to assure that monitoring requirements are established by law to assure compliance with sanctions by offenders and responsiveness of the judicial system so that noncompliant offenders are handled swiftly either judicially or administratively. It is critical that local drug courts also use MIDAS to monitor ID offenders.

Action Items:

- Maintain the Court Referral Officer (CRO) Program as described in Section 4.5.1.
- Enlarge the scope of MIDAS to assure that Drug Courts and Alcohol (DUI) Courts are aware of and using it.
- Enhance and modernize MIDAS to take advantage of the many advances in technology that have occurred since its development.
- Put MIDAS data under CARE to obtain the full benefits that can be obtained by analyzing these data.

7.0 Program Evaluation and Data Collection

The State currently has easy access through the Critical Analysis Reporting Environment (CARE) to reliable data sources (e.g., crash reports and citations) that are being analyzed for problem identification and program planning. Several different types of evaluations are being performed to effectively measure progress, to determine program effectiveness, to plan and implement new program strategies, and to ensure that resources are allocated appropriately. CARE has been set up to process FARS data, and if seen to be essential to problem identification of evaluation, it will be used to process other available data sources (e.g., Census or CODES) to fully support the ID program and planning efforts. A statewide Traffic Records Coordinating Committee has been established to represent the interests of all public and private sector stakeholders and the wide range of disciplines that need the information to guide the development and the use of records system for all phases of traffic safety. CARE is used on a daily basis to satisfy requests from the wide variety of interests in the traffic safety community.

The MIDAS system discussed above is maintain by AOC 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; and (4) provide timely and accurate driver history records to law enforcement and the courts. The plan calls for MIDAS data to be subjected to further analysis by CARE (see Section 6.3).

This section will continue with discussions of the problem identification and evaluation current activities and future plans.

7.1 Problem Identification Process

Table 7.1 provides the context for the problem identification results summarized in this section. This table is sorted so that the crash type category with the highest number of fatal crashes (fatalities in the case of occupant restraints) is listed first, descending to the crash type category with the lowest number of fatal crashes listed last.

The categories given in Table 7.1 are not mutually exclusive (e.g., you could have unrestrained passengers in an alcohol/drug crash that involved speeding). However, they still tend to demonstrate the relative criticality of each of the particular categories. Clearly impaired driving is one of the most critical factors in fatality causation. For this reason the State has put considerable emphasis on impaired driving countermeasures, and extensive analyses (exemplified by Appendixes A and B) have been performed in an effort to determine the best approaches to combatting this problem.

Table 7.1 Summary of Crash Severity by Crash Type – CY 2012 Alabama Data

Crash Type (Causal Driver)	Fatal Number	Fatal %	Injury Number	Injury %	PDO No.	PDO %	Total
1. Restraint Deficient*	366	3.53%	4,075	39.35%	5,916	57.12%	10,357
2. Impaired Driving	186	2.67%	2,661	38.19%	4,120	59.14%	6,967
3. Speeding	176	4.60%	1,779	46.49%	1,872	48.92%	3,827
4. Obstacle Removal	123	2.03%	2,102	34.75%	3,824	63.22%	6,049
5. Mature – Age > 64	103	0.90%	2,477	21.60%	8,887	77.50%	11,467
6. License Status Deficiency	97	1.53%	2,048	32.36%	4,183	66.10%	6,324
7. Youth – Age 16-20	91	0.43%	4,790	22.51%	16,400	77.06%	21,281
8. Motorcycle	89	4.65%	1,289	67.42%	534	27.93%	1,912
9. Ped., Bicycle, School Bus	88	4.36%	1,004	49.70%	928	45.94%	2,020
10. Pedestrian	78	9.01%	647	74.71%	141	16.28%	866
11. Fail to Conform to S/Y Sign	32	0.52%	1,663	26.80%	4,510	72.68%	6,205
12. Utility Pole	30	1.32%	831	36.53%	1,414	62.15%	2,275
13. Non-pickup Truck Involved	30	0.68%	712	16.20%	3,653	83.12%	4,395
14. Construction Zone	23	1.03%	477	21.37%	1,732	77.60%	2,232
15. Roadway Defects – All	21	0.61%	807	23.56%	2,598	75.83%	3,426
16. Vehicle Defects – All	17	1.14%	350	23.46%	1,125	75.40%	1,492
17. Vision Obscured – Env.	13	1.21%	271	25.28%	788	73.51%	1,072
18. Fail to Conform to Signal	12	0.27%	1,306	29.49%	3,110	70.23%	4,428
19. Bicycle	9	1.46%	270	43.76%	338	54.78%	617
20. Child Restraint Deficient*	4	0.18%	347	15.22%	1,929	84.61%	2,280
21. Railroad Trains	1	0.83%	35	28.93%	85	70.25%	121
22. School Bus	1	0.18%	103	18.39%	456	81.43%	560

* The Fatal, Injury and PDO numbers for the “Restraint Deficient” and “Child Restraint Deficient” are the total number of persons killed, injured and uninjured, respectively. This is different from the other categories in that they list the number of crashes in which such an injury severity was incurred.

There is also a very strong argument that impaired driving is under-reported on the crash reports. Even in the category of “officers’ opinion,” which theoretically does not have to be proven in a court of law, many law enforcement officers have indicated their reluctance to indicate this unless they can prove it in court. A comparison of Alabama impaired driving fatality estimates from the 2010 crash reports against the FARS estimate, which is generated based on other dependent variables provided by the State, Alabama had listed only about 81% of the fatalities estimated by FARS. Using this as a scaling factor, the 186 fatal crash (199 fatalities) number would be adjusted up to an estimate of 229 fatal crashes and 246 fatalities (see Section 1.1.1).

Given that reducing impaired driving crashes is so important to fatality and injury reduction in general, the next step in the problem identification process is to determine the who, what, where,

when and why of crashes involving impaired drivers, and thus to determine the best approaches for countermeasure implementation (i.e., the “how”). This starts by determining those types of crashes that are going to be targeted for impaired driver countermeasure implementation.

For the data-driven enforcement program, specific locations were identified where there were concentrations of crashes involving impaired drivers. Once the hotspots were defined and the locations were found using the Critical Analysis Reporting Environment (CARE) software, the Community Traffic Safety Program (CTSP/LEL) Coordinators from across the state were given information on the hotspot locations for the state as a whole. They were also provided detailed hotspot reports specific to their region to assist them in their focused efforts. Using the reports and maps developed for each region, the CTSP/LEL Coordinators will further develop their plans, including the time schedule and work assignments, for their region that focuses on the hotspot locations. The goals set on a regional basis will be in line with the goals and strategies laid out statewide. More details of these processes are given in Section and Appendixes A and B.

Action Items:

- Continue to support a data-driven evidence-based approach to all countermeasures to which analytical improvement might apply (e.g., locations, PI&E/PSA targeting, etc.).
- Evaluate the processes being used to identify hot spots and other key indicators for decision-making, and determine if the problem identification process itself might be improved.
- Continue to improve both the process and the results of the process recognizing value of the Deming approach of “continuous improvement forever.”

7.2 Evaluation Process

Evaluations generally fall into two categories: administrative and effectiveness. *Administrative evaluations* determine if what was planned in a given project was actually performed, independent of what effects it might have had. These types of evaluations will be part of the reporting process that is required of all projects funded through ADECA, with special emphasis upon meeting all of the NHTSA requirements in this regard.

Effectiveness evaluations strive to determine the crash or severity reductions that result from any given countermeasure project. The plan calls for the use of CARE to provide effectiveness evaluations on as many of the countermeasures given in this plan as resources will allow. These will be performed on a prioritized basis depending upon the resources consumed and the criticality of the countermeasure project. CARE has the ability to get down to specific locations on a before and after basis and compare test areas against control areas. However, it must be recognized that to perform a scientific evaluation on many of the proposed projects would cost as much (if not more in some cases) as the projects themselves. Where NHTSA and other federal agencies have supported evaluations in the past, these studies will not be repeated if it is seen that the results are transferable to the State.

In those cases where evaluations are warranted, CARE will be used to hone in on specific subsets of the crash or citation records in order to assure that the evaluations are as precise as possible.

Action Items:

- Define those areas that are most critical to the decision-making process for which analytical studies will be cost-beneficial.
- Provide support for those evaluation efforts determined to be most critical.

APPENDIXES

This document contains the following appendixes:

Appendix A. Specific Location Problem Identification Results

Appendix B. General Problem Identification Results

Appendix C. Detailed Legislative Recommendations

Appendix A. Specific Location Problem Identification Results

This appendix demonstrates the data-driven evidenced-based approach that the State is taking to addressing its Impaired Driving problems. It consists of the following:

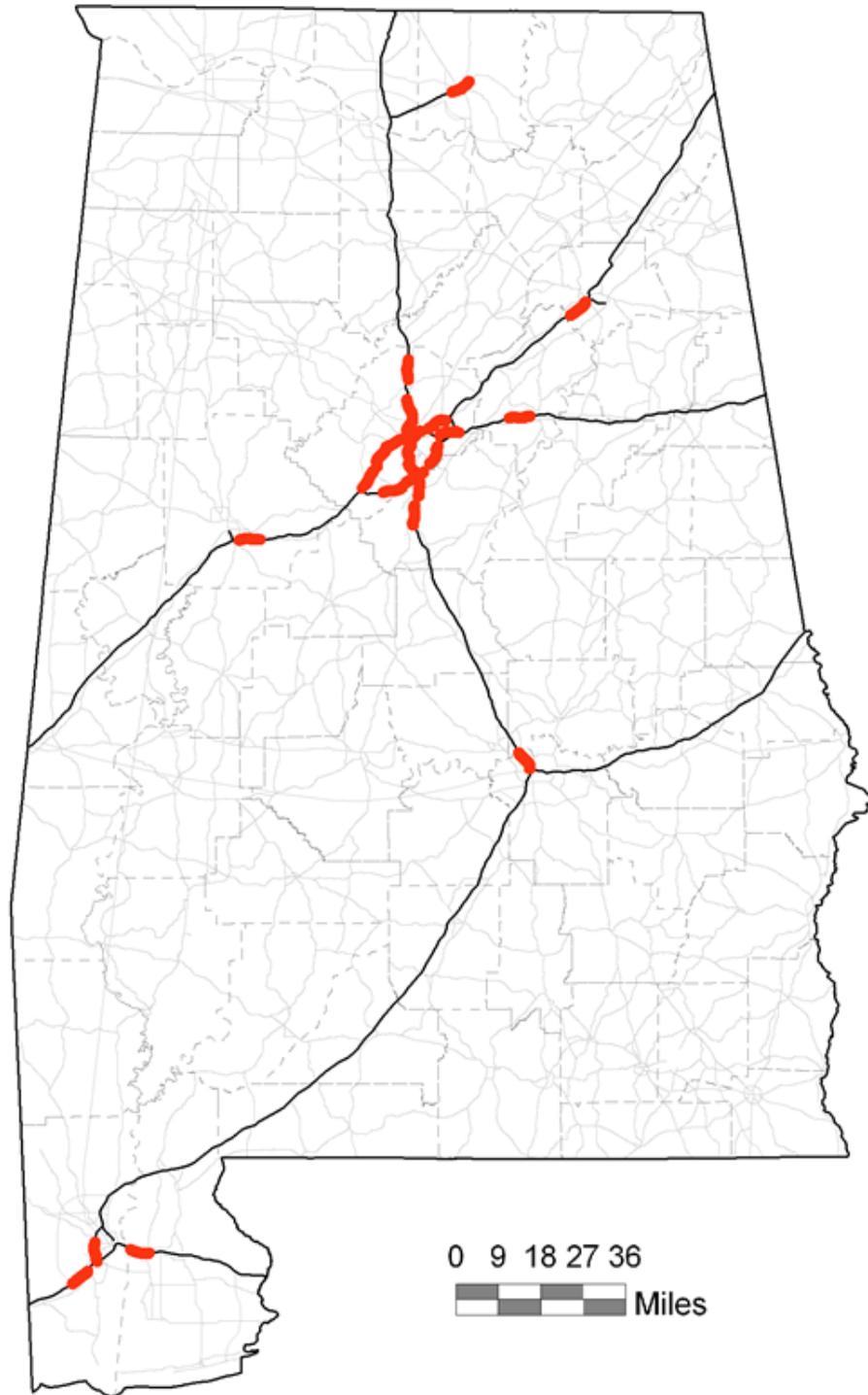
- Table of the hotspots listed by ADECA CTSP region and how this distribution has changed over the years since 2008 (criteria for hotspots remaining constant).
- Top 24 Interstate hotspots.
 - Map
 - Distribution by region
 - Listing of location
- Top 25 State/Federal route hotspots.
 - Map
 - Distribution by region
 - Listing of location
- Top 72 intersection locations
 - Distribution by region
 - Listing of location
- Top 58 non-mile posted segment locations
 - Distribution by region
 - Listing of location

In the following table the hotspots for a given fiscal year's selective enforcement is based on the most recent closed-out data that is available the previous complete calendar years; as an example, FY2014 was estimated based on CY2010-2012 data.

Impaired Driving Hotspot Listing by Region

Region	Impaired Driving Hotspots for Fiscal Years							% of Total Hotspots (2014)
	2008	2009	2010	2011	2012	2013	2014	
Birmingham	37	32	27	34	41	23	35	19.55%
North East	42	32	27	30	54	36	47	26.25%
North	22	15	17	24	24	15	15	8.38%
Mobile	52	48	47	40	49	25	35	19.55%
East	13	11	14	9	7	3	2	1.12%
Central	23	26	27	25	34	21	26	14.53%
South East	5	2	6	15	17	6	2	1.12%
South West	4	6	5	6	4	2	2	1.12%
West	20	19	21	18	22	13	15	8.38%
TOTAL	218	191	191	201	252	144	179	100.00%

Top 24 Mileposted Interstate Locations (5 miles in length)
in Alabama with 8 or More Impaired Driving Related Crashes
Resulting in Injury or Fatality



Top 24 mile posted Interstate Locations (5 miles in length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Regional Breakdown

Birmingham Region	70.83%
Mobile Region	12.50%
North East Region	8.33%
Central Region	4.17%
West Region	4.17%
East Region	0.00%
North Region	0.00%
South East Region	0.00%
South West Region	0.00%

Top 24 Mileposted Interstate Locations (5 miles in length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

The map that corresponds to this data and marks these Hotspots is titled "Top 24 Mileposted Interstate Locations (5 Miles in Length) in Alabama with 8 or More Impaired Driving Related Crashes Resulting in Injury or Fatality"

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal	Injury	S/CRS	C/MVM	MVM	ADT	Agency ORI
1	Jefferson	Birmingham	I-59	131	136	9	2	7	30	0.02	461.14	50536	Birmingham Police Department
2	Jefferson	Hoover	I-459	5.8	10.8	9	3	6	30	0.02	504.17	55252	Hoover Police Department
3	Jefferson	Rural Jefferson	I-20	133.8	138.8	8	1	7	30	0.01	539.06	59075	Alabama DPS - Birmingham Post
4	Jefferson	Birmingham	I-59	123.9	128.9	19	4	15	29.47	0.01	1392.33	152584	Birmingham Police Department
5	Jefferson	Birmingham	I-59	118.5	123.5	14	3	11	27.14	0.01	939.61	102971	Birmingham Police Department
6	Jefferson	Rural Jefferson	I-459	19.5	24.5	10	0	10	27	0.01	722.72	79202	Alabama DPS - Birmingham Post
7	Jefferson	Birmingham	I-65	255.5	260.5	12	0	12	25.83	0.01	1180.71	129393	Birmingham Police Department
8	Etowah	Rural Etowah	I-59	176.2	181.2	12	0	12	25.83	0.06	193.61	21218	Alabama DPS - Gadsden Post
9	Jefferson	Birmingham	I-65	261	266	8	1	7	25	0.01	717.45	78625	Birmingham Police Department
10	Jefferson	Rural Jefferson	I-65	266	271	12	0	12	25	0.02	559.75	61342	Alabama DPS - Birmingham Post
11	Madison	Huntsville	I-565	16	21	10	0	10	25	0.02	616.07	67515	Huntsville Police Department
12	Jefferson	Rural Jefferson	I-59	113.5	118.5	13	1	12	24.62	0.02	526.77	57728	Alabama DPS - Birmingham Post
13	Saint Clair	Rural St. Clair	I-20	151.5	156.5	9	1	8	24.44	0.02	461.08	50529	Alabama DPS - Birmingham Post
14	Shelby	Hoover	I-65	245	250	9	0	9	23.33	0.01	924.14	101276	Hoover Police Department
15	Jefferson	Rural Jefferson	I-65	275.8	280.8	9	0	9	23.33	0.02	456.84	50065	Alabama DPS - Birmingham Post
16	Jefferson	Hoover	I-459	12	17	10	0	10	23	0.01	889.06	97431	Hoover Police Department
17	Jefferson	Bessemer	I-59	107	112	11	0	11	22.73	0.03	411.33	45077	Bessemer Police Department
18	Mobile	Mobile	I-65	0	5	16	1	15	21.88	0.02	801.18	87800	Mobile Police Department
19	Jefferson	Hoover	I-65	250	255	11	0	11	21.82	0.01	1092.54	119730	Hoover Police Department
20	Tuscaloosa	Rural Tuscaloosa	I-59	72.9	77.9	8	0	8	21.25	0.02	445.32	48802	Alabama DPS - Tuscaloosa Post
21	Shelby	Alabaster	I-65	237.7	242.7	8	0	8	20	0.01	665.85	72970	Alabaster Police Department
22	Mobile	Rural Mobile	I-10	12	17	8	0	8	20	0.01	563.78	61784	Alabama DPS - Mobile Post
23	Baldwin	Rural Baldwin	I-10	30.9	35.9	11	0	11	20	0.02	534.43	58568	Alabama DPS - Mobile Post
24	Montgomery	Rural Montgomery	I-65	171.5	176.5	8	0	8	16.25	0.01	587.87	64424	Alabama DPS - Montgomery Post

Top 25 mile posted Locations on State and Federal Routes (5 miles in length) in Alabama with 9 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

Regional Breakdown

North East Region	28.00%
Birmingham Region	20.00%
North Region	12.00%
Central Region	12.00%
Mobile Region	12.00%
West Region	8.00%
South East Region	4.00%
South West Region	4.00%
East Region	0.00%

Top 25 Mileposted State and Federal Route Locations (5 Miles in Length) in Alabama with 9 or More Impaired Driving Related Crashes Resulting in Injury or Fatality

The map that corresponds to this data and marks these Hotspots is titled "Top 25 Mileposted State and Federal Route Locations (5 Miles in Length) in Alabama with 9 or More Impaired Driving Related Crashes Resulting in Injury or Fatality"

Rank	County	City	Route	Beg MP	End MP	Total Crashes	Fatal	Injury	S/CRS	C/MVM	MVM	ADT	Agency ORI
1	Morgan	Decatur	S-67	40	45	9	2	7	31.11	0.04	238.43	26129	Decatur Police Department
2	Mobile	Rural Mobile	S-217	5	10	14	2	12	28.57	0.16	90.26	9892	Alabama DPS - Mobile Post
3	Marshall	Guntersville	S-1	290.3	295.3	14	2	12	27.86	0.05	270.24	29615	Guntersville Police Department
4	Madison	Huntsville	S-53	322.8	327.8	10	2	8	27	0.06	158.41	17360	Huntsville Police Department
5	Russell	Phenix City	S-1	107.5	112.5	9	0	9	26.67	0.04	209.46	22955	Phenix City Police Department
6	Jefferson	Bessemer	S-5	120	125	11	0	11	26.36	0.06	186.09	20393	Bessemer Police Department
7	Morgan	Rural Morgan	S-53	298.2	303.2	9	1	8	25.56	0.06	140.82	15432	Alabama DPS - Decatur Post
8	Walker	Rural Walker	S-5	178	183	9	1	8	25.56	0.26	34.38	3768	Alabama DPS - Birmingham Post
9	Russell	Phenix City	S-1	112.6	117.6	12	0	12	25	0.04	274.74	30108	Phenix City Police Department
10	Mobile	Rural Mobile	S-16	10.4	15.4	10	0	10	25	0.07	144.17	15799	Alabama DPS - Mobile Post
11	Jefferson	Hoover	S-150	7	12	9	1	8	24.44	0.03	283.51	31070	Hoover Police Department
12	Tuscaloosa	Tuscaloosa	S-215	1.5	6.5	17	1	16	24.12	0.13	134.09	14695	Tuscaloosa Police Department
13	Limestone	Rural Limestone	S-2	83	88	15	1	14	24	0.08	189.8	20800	Alabama DPS - Decatur Post
14	Tuscaloosa	Rural Tuscaloosa	S-6	53.1	58.1	9	0	9	22.22	0.08	112.47	12325	Alabama DPS - Tuscaloosa Post
15	Autauga	Prattville	S-14	153.7	158.7	9	1	8	22.22	0.05	186.22	20408	Prattville Police Department
16	Madison	Huntsville	S-2	100.1	105.1	12	1	11	20.83	0.04	298.69	32733	Huntsville Police Department
17	Shelby	Vestavia Hills	S-38	3.2	8.2	11	1	10	20	0.02	656.7	71967	Vestavia Hills Police Department
18	Madison	Rural Madison	S-1	345	350	14	0	14	19.29	0.07	201.11	22039	Alabama DPS - Huntsville Post
19	Baldwin	Gulf Shores	S-59	0.1	5.1	12	0	12	19.17	0.04	321.18	35198	Gulf Shores Police Department
20	Dallas	Rural Dallas	S-8	82.9	87.9	10	1	9	19	0.08	132.58	14529	Alabama DPS - Selma Post
21	Madison	Huntsville	S-53	311.5	316.5	12	0	12	18.33	0.02	650.32	71268	Huntsville Police Department
22	Madison	Huntsville	S-1	336	341	13	0	13	17.69	0.05	279.87	30671	Huntsville Police Department
23	Jefferson	Hoover	S-3	261.4	266.4	10	0	10	17	0.03	359.94	39445	Hoover Police Department
24	Madison	Huntsville	S-53	306	311	9	0	9	15.56	0.03	288.79	31648	Huntsville Police Department
25	Houston	Dothan	S-210	6.6	11.6	10	0	10	15	0.04	223.61	24505	Dothan Police Department

Top 72 Intersection Locations Statewide with 3 or More Total Impaired Driving Related Crashes

Regional Breakdown

North East Region	36.12%
Mobile Region	27.78%
Central Region	13.89%
Birmingham Region	8.33%
West Region	6.94%
North Region	6.94%
South East Region	0%
East Region	0%
South West Region	0%

Top 72 Intersection Locations Statewide with 3 or More Total Impaired Driving Related Crashes

These crashes are those that happened off the state systems and are therefore not mapable at this time.

Total Crashes	Fatal Crashes	Injury Crashes	PDO Crashes	Severity	People Killed	People Injured	County	City	Link	Node 1	Node 2	Location	Agency ORI
3	0	3	0	23.33	0	3	Madison	Huntsville	2455	8121	0	DECATUR HWY SR-20 at GREENBRIER RD	Huntsville Police Department
3	0	3	0	23.33	0	5	Mobile	Rural Mobile	1373	8396	0	MCFARLAND RD CO 354 at THREE NOTCH KRONER RD	Alabama DPS - Mobile Post
3	0	2	1	20	0	7	Mobile	Mobile	8803	6200	0	NO DESCRIPTION AVAILABLE	Mobile Police Department
9	1	5	3	16.67	1	7	Lawrence	Rural Lawrence	1087	8840	8842	NO DESCRIPTION AVAILABLE	Alabama DPS - Decatur Post
3	0	2	1	16.67	0	4	Madison	Huntsville	6017	2313	0	HOLMES AVE at JORDAN AVE ALA 53	Huntsville Police Department
3	1	0	2	16.67	1	0	Madison	Huntsville		3184	3183	12TH ST at GOVERNORS DR	Huntsville Police Department
3	0	2	1	16.67	0	2	Madison	Huntsville	1018	8076	0	NO DESCRIPTION AVAILABLE	Huntsville Police Department
3	0	2	1	16.67	0	3	Mobile	Mobile	8860	9874	9831	PLEASANT AVE at ALA 17 & ST STEPHENS RD	Mobile Police Department
3	1	0	2	16.67	1	2	Lee	Auburn	6078	834	0	SR 147 COLLEGE ST at SR 267 SHUG JORDAN PKWY	Auburn Police Department
5	0	4	1	14	0	5	Madison	Huntsville	7228	2566	0	JORDAN LN (PATTON RD at BOB WALLACE AVE	Huntsville Police Department
3	0	2	1	13.33	0	2	Madison	Madison	8076	42	0	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	2	1	13.33	0	4	Mobile	Mobile	1346	12285	12283	NO DESCRIPTION AVAILABLE	Mobile Police Department
3	0	2	1	10	0	2	Baldwin	Rural Baldwin	1890	14601	0	NO DESCRIPTION AVAILABLE	Alabama DPS - Mobile Post
3	0	2	1	10	0	6	Mobile	Mobile	6200	2519	2518	MCGREGOR AVE at OLD SHELL RD	Mobile Police Department
3	0	1	2	10	0	1	Elmore	Millbrook	1048	8199	609	NO DESCRIPTION AVAILABLE	Millbrook Police Department
4	0	1	3	7.5	0	1	Mobile	Mobile		1298	0	GOVERNMENT BLVD US HWY 90 at ACCESS RD	Mobile Police Department
3	0	1	2	6.67	0	2	Morgan	Decatur	5052	635	3096	AUSTINVILLE RD at CARRIDALE ST	Decatur Police Department
3	0	1	2	6.67	0	1	Morgan	Hartselle	1055	260	213	NO DESCRIPTION AVAILABLE	Hartselle Police Department
3	0	1	2	6.67	0	2	Madison	Huntsville	6298	2707	0	SPARKMAN DR at UNIVERSITY DR	Huntsville Police Department
3	0	1	2	6.67	0	2	Madison	Huntsville	5491	5019	5018	ANDREW JACKSON WAY at OAKWOOD AVE N E	Huntsville Police Department
3	0	1	2	6.67	0	1	Tuscaloosa	Tuscaloosa	5449	1043	1039	5TH AVE E 5736 at BRYANT DR E 5449	Tuscaloosa Police Department
3	0	1	2	6.67	0	1	Tuscaloosa	Tuscaloosa	6299	277	0	15TH ST 5168 at LAKE AVE	Tuscaloosa Police Department
3	0	1	2	6.67	0	1	Jefferson	Rural Jefferson	1229	7811	0	CHALKVILLE MTN RD-CO 10 at MARTIN RD	Jefferson County Sheriff's Office
3	0	1	2	6.67	0	1	Jefferson	Birmingham	3414	1107	0	BEACON PKWY W at VALLEY AVE	Birmingham Police Department
3	0	1	2	6.67	0	3	Escambia	Brewton	5034	5034	5053	NO DESCRIPTION AVAILABLE	Brewton Police Department
3	0	1	2	6.67	0	1	Mobile	Mobile	1842	1595	0	GRELOT RD at HILLCREST RD	Mobile Police Department
3	0	1	2	6.67	0	1	Mobile	Mobile	8860	9795	56742	SHORT at DAVIDSON	Mobile Police Department
3	0	1	2	6.67	0	0	Mobile	Mobile	6051	1196	0	COTTAGE HILL RD at UNIVERSITY BLVD	Mobile Police Department
3	0	1	2	6.67	0	1	Autauga	Prattville	1002	890	1514	MAIN ST E at MCQUEEN SMITH RD	Prattville Police Department
3	0	1	2	6.67	0	1	Montgomery	Rural Montgomery	2046	8074	0	WARES FERRY RD at PRIVATE RD	Alabama DPS - Montgomery Post
7	0	2	5	5.71	0	3	Madison	Huntsville	1028	1363	0	BLEVINS GAP RD at SEQUOYAH TRAIL	Huntsville Police Department
7	0	2	5	5.71	0	2	Lee	Auburn	5047	315	933	MAGNOLIA AVE at SR 147 COLLEGE ST	Auburn Police Department

Top 72 Intersection Locations Statewide with 3 or More Total Impaired Driving Related Crashes

These crashes are those that happened off the state systems and are therefore not mapable at this time.

Total Crashes	Fatal Crashes	Injury Crashes	PDO Crashes	Severity	People Killed	People Injured	County	City	Link	Node 1	Node 2	Location	Agency ORI
4	0	1	3	5	0	1	Madison	Huntsville	7608	41240	0	NO DESCRIPTION AVAILABLE	Huntsville Police Department
6	0	2	4	5	0	4	Madison	Madison	1005	41	0	NO DESCRIPTION AVAILABLE	Madison Police Department
4	0	1	3	5	0	3	Baldwin	Rural Baldwin	1480	8009	8003	NO DESCRIPTION AVAILABLE	Alabama DPS - Mobile Post
7	0	1	6	4.29	0	1	Madison	Huntsville	7228	2004	0	DRAKE AVE at PATTON RD	Huntsville Police Department
3	0	1	2	3.33	0	1	Madison	Huntsville	5626	3300	0	DRAKE AVE at IVY AVE	Huntsville Police Department
3	0	1	2	3.33	0	2	Madison	Huntsville	6298	958	0	BIDEFORD DR at LEICESTER DR	Huntsville Police Department
3	0	1	2	3.33	0	1	Madison	Huntsville	6667	2523	2527	UNIVERSITY DR SR-2 at WYNN DR	Huntsville Police Department
3	0	1	2	3.33	0	2	Madison	Huntsville		1399	4769	MEMORIAL PKWY N SR-1 at UNIVERSITY DR	Huntsville Police Department
3	0	1	2	3.33	0	1	Madison	Madison	1005	200	199	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	1	2	3.33	0	1	Madison	Huntsville	5334	4129	456	MEMORIAL PKWY S SR-53 at WEATHERLY RD	Huntsville Police Department
3	0	1	2	3.33	0	1	Tuscaloosa	Tuscaloosa	5970	34	0	37TH ST 5970 at HIGHLAND OAKS DR	Tuscaloosa Police Department
3	0	1	2	3.33	0	1	Tuscaloosa	Tuscaloosa	5704	323	0	12TH ST 5699 at 10TH AVE	Tuscaloosa Police Department
3	0	1	2	3.33	0	1	Shelby	Hoover	1250	8230	0	INTERSTATE 65 at VALLEYDALE RD	Hoover Police Department
3	0	1	2	3.33	0	2	Shelby	Hoover	1250	93	0	RIVERCHASE PKWY E at VALLEYDALE RD	Hoover Police Department
3	0	1	2	3.33	0	1	Mobile	Rural Mobile	8860	10129	0	MOFFAT RD US HWY 98 at SCHILLINGER RD	Alabama DPS - Mobile Post
3	0	1	2	3.33	0	1	Mobile	Rural Mobile	1145	7922	0	MARCH RD CO 295 at OLD PASCAGOULA RD	Alabama DPS - Mobile Post
3	0	1	2	3.33	0	4	Mobile	Mobile		7593	0	MOFFAT RD US HWY 98 at WOLF RIDGE RD E JCT	Mobile Police Department
3	0	1	2	3.33	0	1	Montgomery	Montgomery	1171	4481	0	NARROW LANE RD at SOUTH BLVD SR-6 US-82	Montgomery Police Department
4	0	1	3	2.5	0	1	Limestone	Rural Limestone	1350	7756	0	NO DESCRIPTION AVAILABLE	Alabama DPS - Decatur Post
4	0	1	3	2.5	0	1	Mobile	Mobile	1346	2005	40756	AIRPORT BLVD at MCGREGOR AVE AT AZALEA RD	Mobile Police Department
6	0	1	5	1.67	0	1	Madison	Huntsville	7219	2065	0	DRAKE AVE at TRIANA BLVD	Huntsville Police Department
7	0	1	6	1.43	0	1	Madison	Huntsville		2356	0	JORDAN LN SR-53 at UNIVERSITY DR	Huntsville Police Department
3	0	0	3	0	0	0	Morgan	Decatur	5193	1404	0	14TH AVE SW at 2ND ST SW	Decatur Police Department
4	0	0	4	0	0	0	Madison	Huntsville	6027	4758	0	MONROE ST at WASHINGTON ST	Huntsville Police Department
3	0	0	3	0	0	0	Madison	Huntsville	1305	209	0	MAIN DR N.E at CAMPUS RD	Huntsville Police Department
3	0	0	3	0	0	0	Madison	Huntsville	5932	5701	0	MEMORIAL PKWY N SR-1 at OAKWOOD AVE	Huntsville Police Department
3	0	0	3	0	0	0	Madison	Huntsville	1016	62485	8826	NO DESCRIPTION AVAILABLE	Huntsville Police Department
4	0	0	4	0	0	0	Madison	Madison	8076	48	449	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	0	3	0	0	0	Madison	Huntsville	6298	897	0	MEMORIAL PKWY N SR-1 at SPARKMAN DR AT US 72 E	Huntsville Police Department
3	0	0	3	0	0	0	Tuscaloosa	Tuscaloosa	5168	269	271	15TH ST 5168 at ALA 6 MCFARLAND & 15 ST E	Tuscaloosa Police Department
3	0	0	3	0	0	0	Jefferson	Homewood	5033	185	0	NO DESCRIPTION AVAILABLE	Homewood Police Department
3	0	0	3	0	0	0	Jefferson	Homewood	2714	35025	0	NO DESCRIPTION AVAILABLE	Homewood Police Department
4	0	0	4	0	0	0	Mobile	Mobile	5568	667	0	COTTAGE HILL RD at HILLCREST RD	Mobile Police Department
4	0	0	4	0	0	0	Mobile	Mobile	5764	1359	0	SALLIE CT at WESLEY LN E	Mobile Police Department
3	0	0	3	0	0	0	Mobile	Mobile	1359	1185	1186	COTTAGE HILL RD at DEMETROPOLIS RD	Mobile Police Department
3	0	0	3	0	0	0	Mobile	Mobile	1346	2139	0	AIRPORT BLVD at UNIVERSITY BLVD	Mobile Police Department
3	0	0	3	0	0	0	Lee	Auburn	5136	316	590	GAY ST S at MAGNOLIA AVE E	Auburn Police Department
3	0	0	3	0	0	0	Lee	Auburn	6078	704	0	DONAHUE DR at SR 147 COLLEGE ST	Auburn Police Department
3	0	0	3	0	0	0	Montgomery	Montgomery		999	0	DECATUR ST N at GRAVES ST	Montgomery Police Department
3	0	0	3	0	0	0	Montgomery	Montgomery	5844	8058	6948	NO DESCRIPTION AVAILABLE	Montgomery Police Department

Top 58 Segment Locations Statewide with 3 or More Total Impaired Driving Related Crashes

These crashes are those that happened off the state systems and are therefore not mapable at this time.

Total Crashes	Fatal Crashes	Injury Crashes	PDO Crashes	Severity	People Killed	People Injured	County	City	Link	Node 1	Node 2	Location	Agency ORI
3	0	3	0	26.67	0	5	Tuscaloosa	Tuscaloosa	1185	5203	5030	NO DESCRIPTION AVAILABLE	Tuscaloosa Police Department
3	0	3	0	26.67	0	4	Jefferson	Rural Jefferson	1231	17258	21102	HAMBY RD at MARSH MTN RD-CO 153	Alabama DPS - Birmingham Post
3	0	3	0	26.67	0	3	Escambia	Rural Escambia	1154	8021	7270	NO DESCRIPTION AVAILABLE	Alabama DPS - Evergreen Post
3	1	1	1	26.67	1	3	Montgomery	Rural Montgomery	1086	7431	7419	DORAL TRACE at SNOWDOUN CHAMBERS RD	Alabama DPS - Montgomery Post
4	0	4	0	25	0	6	Madison	Rural Madison	1154	7311	7313	LOVELESS RD at WEST LIMESTONE RD and BOBO RD	Alabama DPS - Huntsville Post
3	0	3	0	23.33	0	3	Morgan	Rural Morgan	1004	7775	7702	NO DESCRIPTION AVAILABLE	Alabama DPS - Decatur Post
3	0	3	0	23.33	0	5	Tuscaloosa	Tuscaloosa	5970	70	71	37TH ST 5970 at CITY ST 6010 and at HARGROVE RD	Tuscaloosa Police Department
3	0	3	0	23.33	0	4	Talladega	Talladega	1323	737	736	NO DESCRIPTION AVAILABLE	Talladega Police Department
3	0	2	1	20	0	2	Lauderdale	Rural Lauderdale	1032	7306	7304	NO DESCRIPTION AVAILABLE	Alabama DPS - Quad Cities Post
3	0	2	1	20	0	4	Tuscaloosa	Tuscaloosa	1185	846	336	24TH AVE 6138 at RIVER ROAD 1185 and 22ND AVE 5187	Tuscaloosa Police Department
3	0	2	1	20	0	3	Mobile	Rural Mobile	1620	8991	8910	MASON FERRY RD CO 769 at WILMER-GEORGETOWN RD	Alabama DPS - Mobile Post
3	0	2	1	20	0	4	Mobile	Rural Mobile	1524	8730	8906	CUSS FORK RD CO 762 at GLENWOOD RD/NATCHEZ TRACE	Alabama DPS - Mobile Post
3	0	2	1	16.67	0	3	Lauderdale	Rural Lauderdale	1211	7385	9426	NO DESCRIPTION AVAILABLE	Alabama DPS - Quad Cities Post
3	0	2	1	16.67	0	2	Morgan	Rural Morgan	1191	7845	7844	NO DESCRIPTION AVAILABLE	Alabama DPS - Decatur Post
3	0	2	1	16.67	0	3	Lauderdale	Rural Lauderdale	1002	7289	7224	NO DESCRIPTION AVAILABLE	Alabama DPS - Quad Cities Post
3	0	2	1	16.67	0	2	Madison	Madison	1010	520	911	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	2	1	16.67	0	4	Chilton	Rural Chilton	1061	7390	7391	NO DESCRIPTION AVAILABLE	Alabama DPS - Montgomery Post
3	1	0	2	16.67	1	0	Mobile	Rural Mobile	8860	10129	10138	US HWY 98 at SCHILLINGER RD and HIGHWOOD CIR S	Alabama DPS - Mobile Post
3	1	0	2	16.67	1	0	Mobile	Rural Mobile	1634	8731	9415	COLEMAN DAIRY RD at CUSS FORK RD and LEE ROY JORDAN	Alabama DPS - Mobile Post
3	0	2	1	16.67	0	2	Mobile	Rural Mobile	1346	8456	8449	AIRPORT BLVD CO 56 at NEWMAN RD and FERNLAND LN	Alabama DPS - Mobile Post
3	0	2	1	16.67	0	3	Lee	Rural Lee	1072	7230	7218	NO DESCRIPTION AVAILABLE	Alabama DPS - Opelika Post
3	0	2	1	13.33	0	4	Marshall	Rural Marshall	1466	9226	8332	NO DESCRIPTION AVAILABLE	Alabama DPS - Huntsville Post
3	0	2	1	13.33	0	2	Madison	Rural Madison	1263	40215	7394	READY SECTION RD at SHOSHONE TR and OLD RAILROAD	Alabama DPS - Huntsville Post
3	0	2	1	13.33	0	2	Madison	Rural Madison	2120	7327	7340	HENSHAW RD at DAWN DR and FRANK CHURCH RD	Alabama DPS - Huntsville Post
3	0	2	1	13.33	0	4	Madison	Rural Madison	1154	7311	7309	LOVELESS RD at WEST LIMESTONE RD and BANYON RD	Alabama DPS - Huntsville Post
3	0	2	1	13.33	0	4	Chilton	Rural Chilton	1393	8222	8223	NO DESCRIPTION AVAILABLE	Alabama DPS - Montgomery Post
3	0	2	1	13.33	0	3	Mobile	Rural Mobile	8860	9511	9489	LOTT RD at SCHILLINGER AT NEWBURN RD and RENEE RD	Alabama DPS - Mobile Post
3	0	2	1	13.33	0	6	Mobile	Rural Mobile	1275	7318	7537	BELLINGRATH RD CO 59 at DELCHAMPS RD and DEAKLE RD	Alabama DPS - Mobile Post
3	0	2	1	13.33	0	6	Lee	Rural Lee	1379	7602	7553	NO DESCRIPTION AVAILABLE	Alabama DPS - Opelika Post
4	0	2	2	10	0	2	Lauderdale	Rural Lauderdale	1436	7975	7987	NO DESCRIPTION AVAILABLE	Alabama DPS - Quad Cities Post
3	0	1	2	10	0	1	Madison	Rural Madison	1184	7263	7262	MOORES MILL RD at STEGER RD and MCCOLLUM RD	Alabama DPS - Huntsville Post
3	0	1	2	10	0	2	Walker	Rural Walker	1018	7918	7917	NO DESCRIPTION AVAILABLE	Alabama DPS - Birmingham Post

Top 58 Segment Locations Statewide with 3 or More Total Impaired Driving Related Crashes

These crashes are those that happened off the state systems and are therefore not mapable at this time.

Total Crashes	Fatal Crashes	Injury Crashes	PDO Crashes	Severity	People Killed	People Injured	County	City	Link	Node 1	Node 2	Location	Agency ORI
3	0	1	2	10	0	2	Mobile	Rural Mobile	1215	12024	7758	ARGYLE RD CO 71 at BEVERLY RD and HALF MILE RD	Alabama DPS - Mobile Post
3	0	1	2	10	0	1	Lee	Auburn	1083	10	2442	DONAHUE DR at SR 267 COLLEGE ST W	Auburn Police Department
3	0	1	2	10	0	2	Elmore	Coosada	1033	226	189	NO DESCRIPTION AVAILABLE	Coosada Police Department
3	0	1	2	10	0	1	Coffee	Rural Coffee	1086	7303	7296	NO DESCRIPTION AVAILABLE	Alabama DPS - Dothan Post
3	0	1	2	6.67	0	1	Madison	Huntsville	1324	5344	5372	MOORES MILL RD at U. S. HWY 72 E and STANWOOD RD	Huntsville Police Department
3	0	1	2	6.67	0	2	Tuscaloosa	Rural Tuscaloosa	1012	7688	10522	NO DESCRIPTION AVAILABLE	Alabama DPS - Tuscaloosa Post
3	0	1	2	6.67	0	1	Chilton	Rural Chilton	1506	8100	8093	NO DESCRIPTION AVAILABLE	Alabama DPS - Montgomery Post
3	0	1	2	6.67	0	1	Monroe	Rural Monroe	1023	7164	7163	NO DESCRIPTION AVAILABLE	Alabama DPS - Evergreen Post
3	0	1	2	6.67	0	1	Elmore	Rural Elmore	2120	9571	7006	NO DESCRIPTION AVAILABLE	Alabama DPS - Montgomery Post
3	0	1	2	6.67	0	1	Lee	Opelika	5553	1582	1476	NO DESCRIPTION AVAILABLE	Opelika Police Department
3	0	1	2	3.33	0	2	Madison	Rural Madison	1018	8046	8045	BISHOP RD at OLD MONROVIA RD at CAPSHAW RD	Alabama DPS - Huntsville Post
3	0	1	2	3.33	0	1	Madison	Madison	5163	140	1524	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	1	2	3.33	0	1	Madison	Madison	1005	199	200	NO DESCRIPTION AVAILABLE	Madison Police Department
3	0	1	2	3.33	0	1	Tuscaloosa	Rural Tuscaloosa	1224	7197	7196	NO DESCRIPTION AVAILABLE	Alabama DPS - Tuscaloosa Post
4	0	1	3	2.5	0	1	Tuscaloosa	Northport	5299	1317	1318	CITY ST 5299 at CITY ST 5300	Northport Police Department
3	0	0	3	0	0	0	Limestone	Rural Limestone	1423	7304	7302	NO DESCRIPTION AVAILABLE	Alabama DPS - Decatur Post
3	0	0	3	0	0	0	Dekalb	Rural Dekalb	1173	7884	7888	NO DESCRIPTION AVAILABLE	Alabama DPS - Gadsden Post
3	0	0	3	0	0	0	Tuscaloosa	Northport	5299	1319	1321	CITY ST 5299 at CITY ST 5299 END CIR and CITY ST 5301	Northport Police Department
3	0	0	3	0	0	0	Saint Clair	Moody	1016	84	7860	NO DESCRIPTION AVAILABLE	Moody Police Department
4	0	0	4	0	0	0	Jefferson	Birmingham	4238	311	312	2ND AVE N at 9TH ST N SR4-7 US7-11 and 8TH ST N	Birmingham Police Department
3	0	0	3	0	0	0	Tallapoosa	Rural Tallapoosa	1348	8296	8293	NO DESCRIPTION AVAILABLE	Alabama DPS - Alexander City Post
4	0	0	4	0	0	0	Elmore	Rural Elmore	1269	7976	7977	NO DESCRIPTION AVAILABLE	Alabama DPS - Montgomery Post
3	0	0	3	0	0	0	Lee	Rural Lee	1240	7671	7672	NO DESCRIPTION AVAILABLE	Alabama DPS - Opelika Post
3	0	0	3	0	0	0	Lee	Rural Lee	1010	2387	7336	NO DESCRIPTION AVAILABLE	Alabama DPS - Opelika Post
3	0	0	3	0	0	1	Lee	Auburn	5569	1464	2074	NO DESCRIPTION AVAILABLE	Auburn Police Department
4	0	0	4	0	0	0	Montgomery	Montgomery		999	999	DECATUR ST N at GRAVES ST	Montgomery Police Department

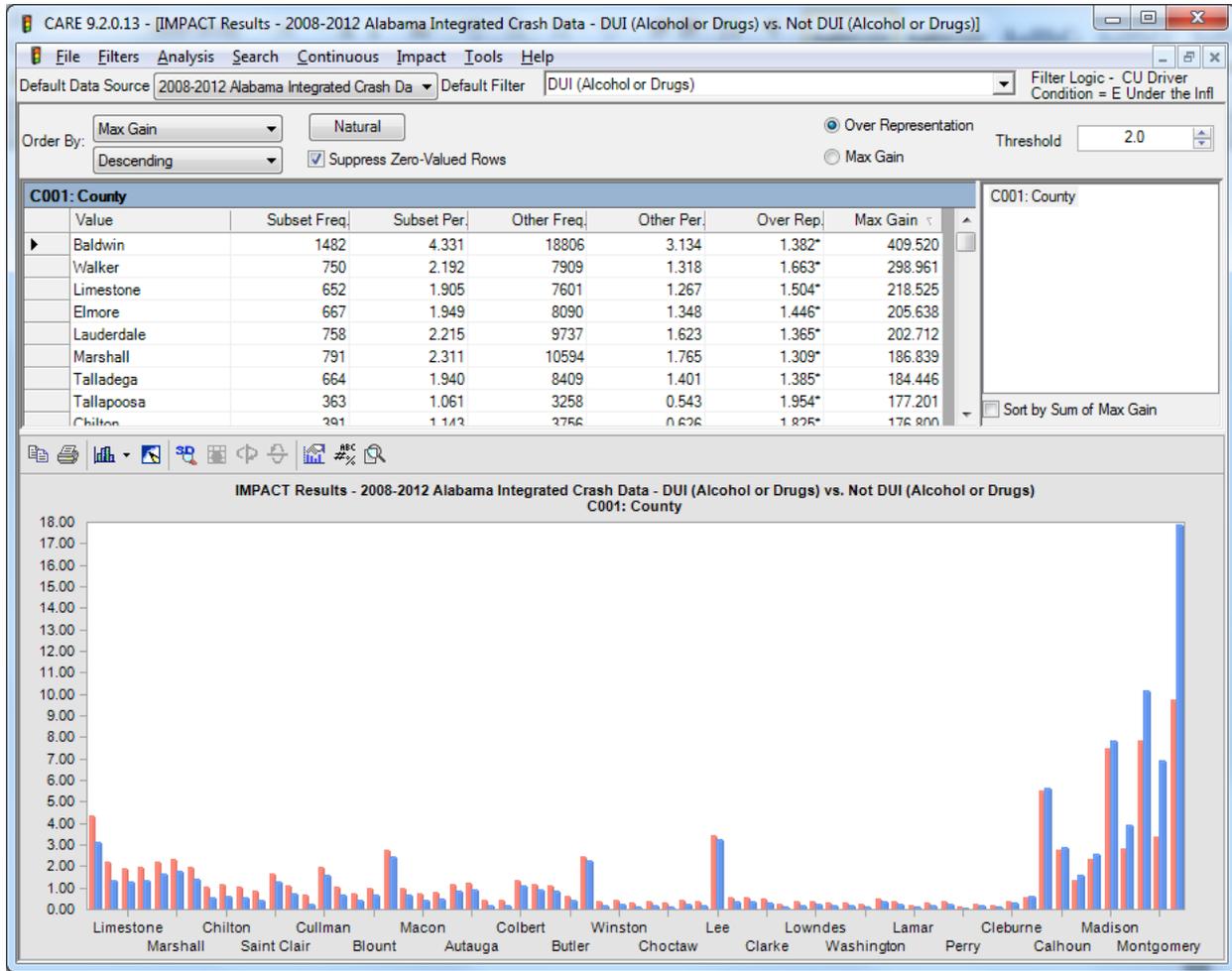
Appendix B. General Problem Identification Results

This appendix presents the results of a comparison of ID crashes compared to non-ID crashes over the most recently five year period (CY2008-20120). An *over-represented* value of an attribute is a situation found where that attribute has a greater share of ID crashes than would be expected if it were the same as that same attribute in non-ID crashes. That is, the non-ID crashes are serving as a control to which the ID crashes are being compared. In this way anything different about ID crashes surfaces and can be subjected to further analyses.

The analytical technique employed on most of the displays below are called Information Mining Performance Analysis Control Technique (IMPACT) outputs. For a detailed description of the meaning of each element of the outputs, see: <http://www.safehomealabama.gov/DataAnalysis/CAREeCrash.aspx>

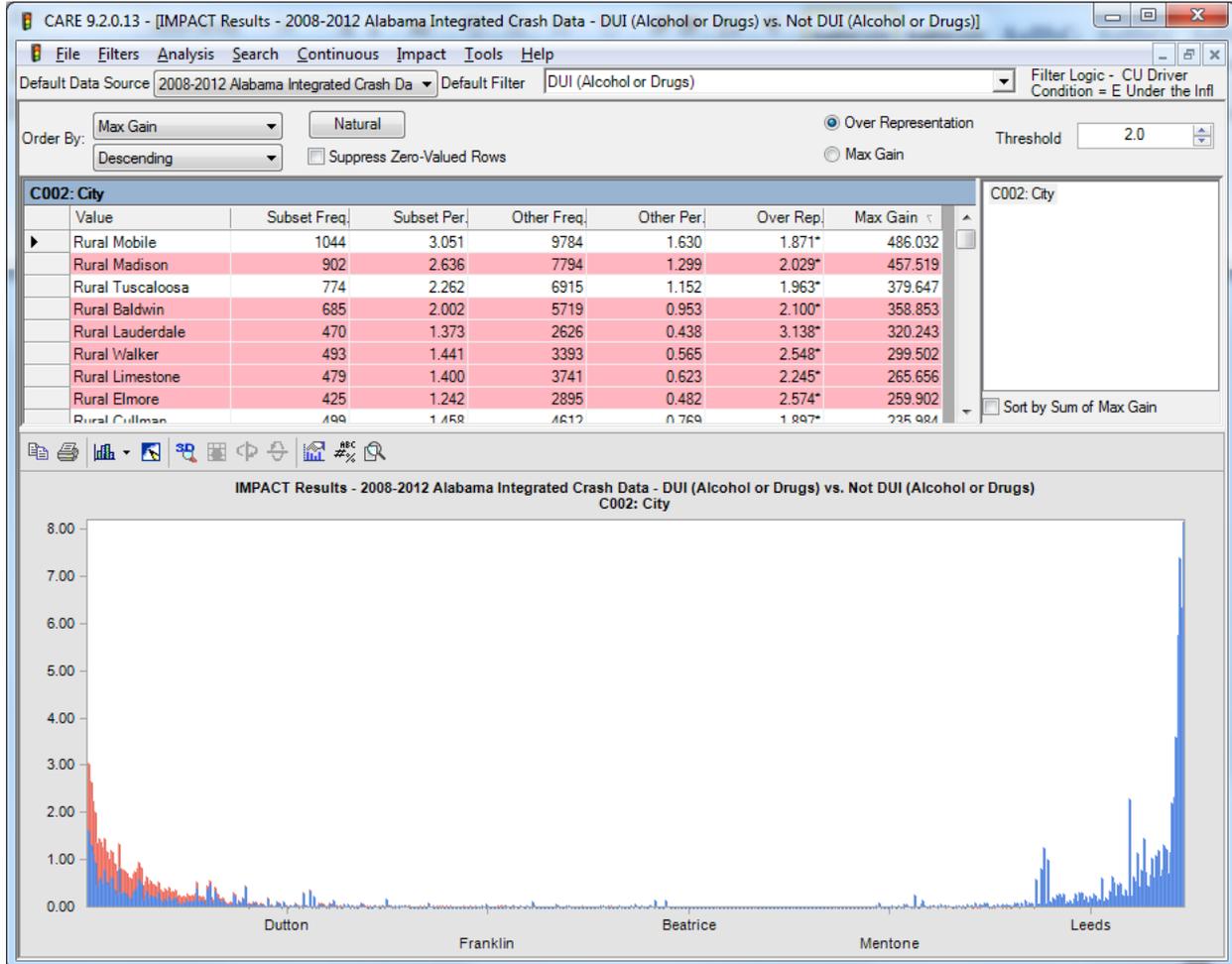
Geographical Factors

County



The analysis of impaired driving crashes by county indicates the greatest over-representations to be in Baldwin, Walker, Limestone, Elmore, and Lauderdale Counties. Montgomery, Jefferson, and Shelby counties were the most under-represented counties for impaired driving crashes. Generally, the over-represented counties contain larger rural areas. See the rural-urban comparison below.

City



For comparison purposes, the rural areas of counties are considered to be “virtual cities” in that crashes that occur there are listed as “Rural County” so that these crashes can be duly accounted for. Generally those rural areas that are adjacent to (or contain) significant urban areas, such as Mobile, Madison and Tuscaloosa, are over-represented. Contrasted with this finding, there was significant under-representation for impaired driving crashes in the largest cities themselves (e.g., Montgomery, Birmingham, and Mobile). This can be attributed to a number of possible factors in urban areas:

- Less need for motor vehicle travel to the drinking establishments;
- Larger police presence in the metropolitan areas; and
- Lower speeds in rural areas result in a lower severity of crashes, which may be less apt to be reported as caused by impaired driving. Urban crashes contain many described as fender-benders or lose speed rear-end bumper crashes.

Severity of Crash by Rural-Urban

CARE 9.2.0.13 - [Crosstab - 2008-2012 Alabama Integrated Crash Data - C024: Crash Severity vs. C010: Rural or Urban - Filter = D...]

File Filters Analysis Locations Search Continuous Crosstab Tools Help

Default Data Source: 2008-2012 Alabama Integrated Crash Da | Default Filter: DUI (Alcohol or Drugs) | Filter Logic -

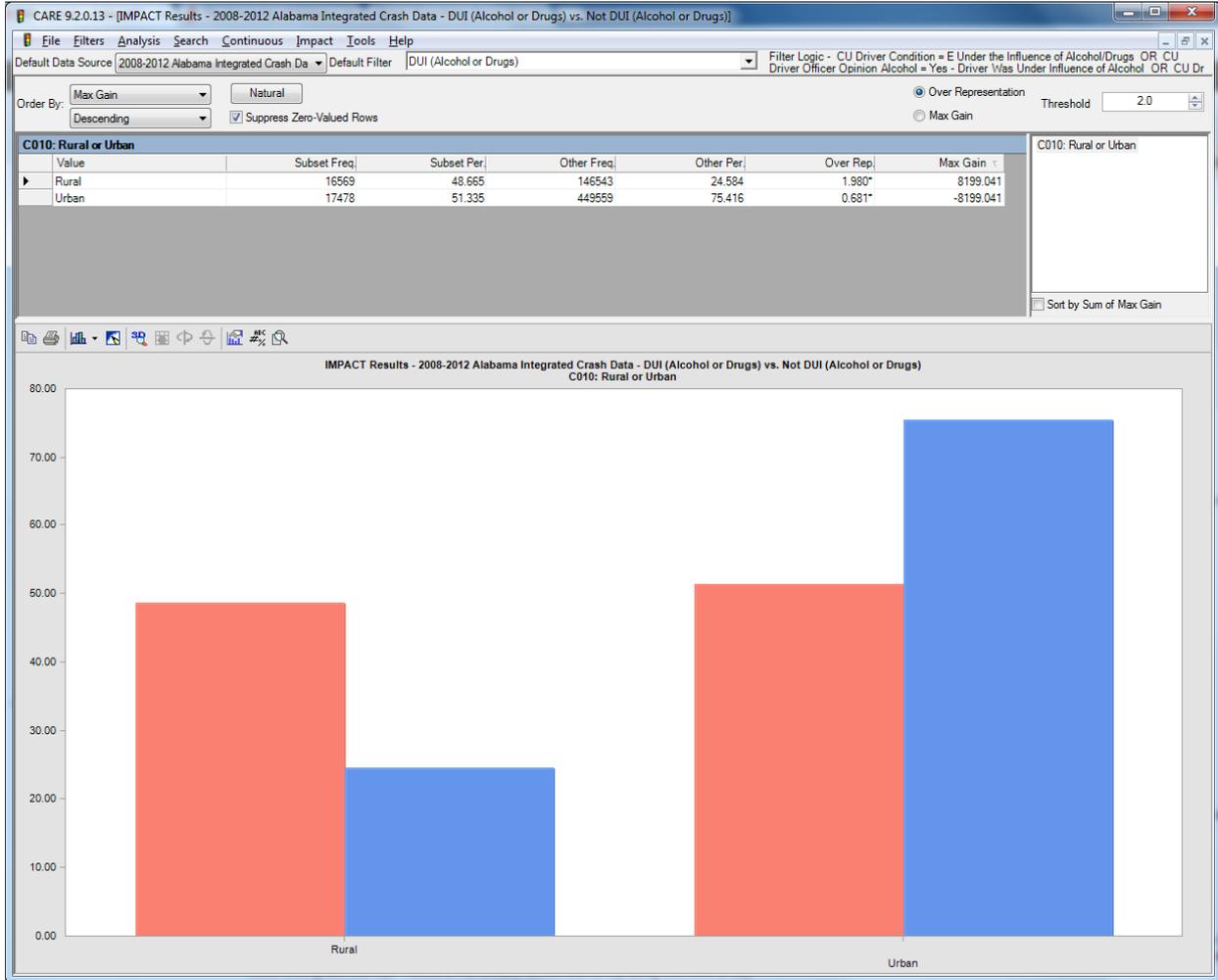
Select Cells: [] | Suppress Zero Values: None | Column: C024: Crash Severity ; Row: C010: Rural or Urban

	Fatal Injury	Incapacitating Injury	Non-Incapacitating Inju	Possible Injury	Property Damage Only	Unknown	TOTAL
Rural	759 70.41%	3807 62.04%	2511 54.66%	679 28.26%	8687 44.77%	146 24.05%	16589 48.48%
Urban	319 29.59%	2329 37.96%	2083 45.34%	1724 71.74%	10716 55.23%	461 75.95%	17632 51.52%
TOTAL	1078 3.15%	6136 17.93%	4594 13.42%	2403 7.02%	19403 56.70%	607 1.77%	34221 100.00%

The red cells in the cross-tabulation above indicate over-representation by more than 10%. For example, while 48% of crashes occur in rural areas, over 70% of the fatal crashes occur there. It is imperative to take into consideration crash severity when making geographical decisions regarding countermeasure implementation.

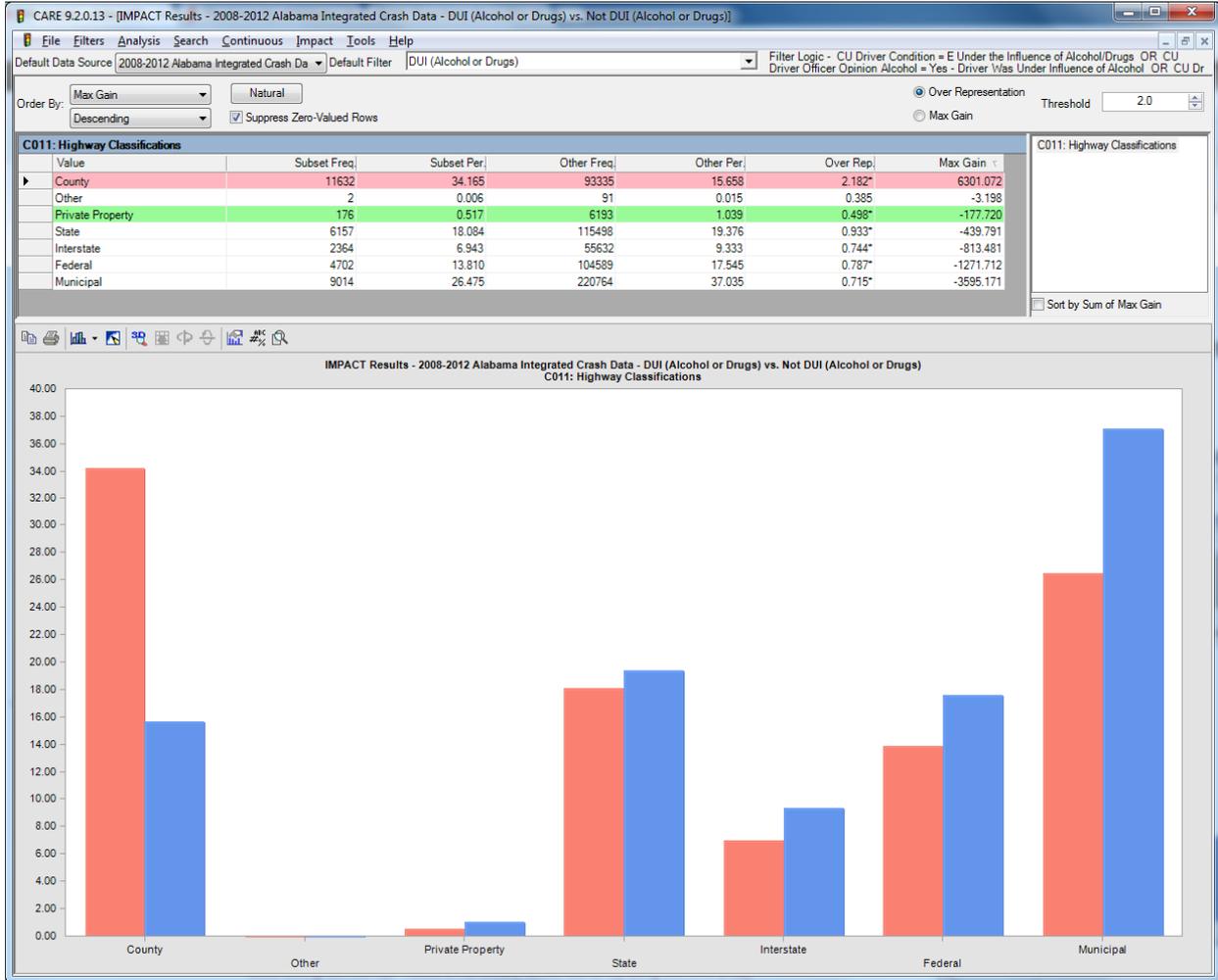
Some recent ads have stated that the urban areas contain the ID hotspots. This is only true if looking at the total frequency of the ID crashes as the criterion and ignoring severity.

Rural or Urban



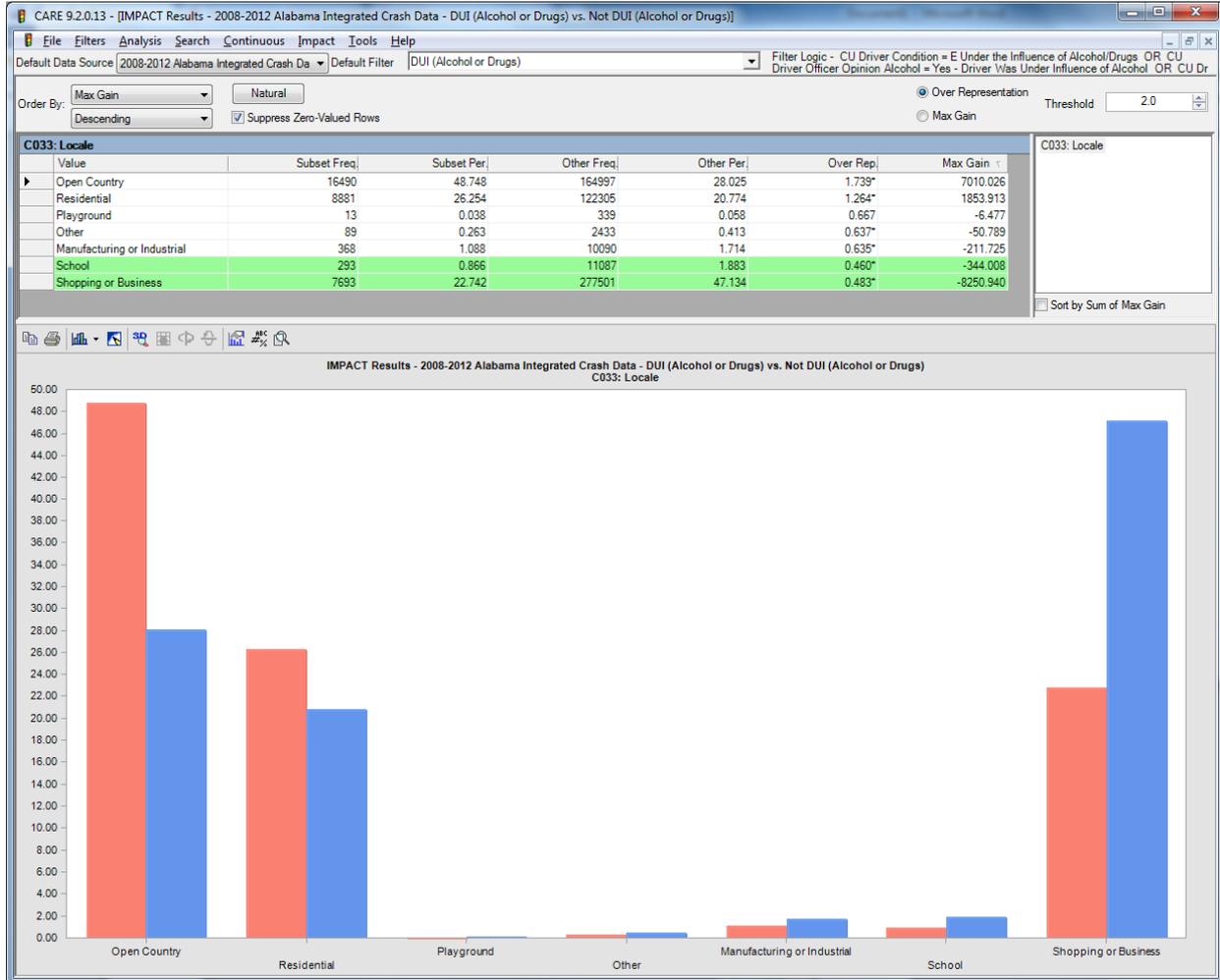
Not only are impaired driving crashes more severe in rural areas, but the chart above shows that their frequency is about the same as in the urban area (compare the height of the red bars). Not only that, but the urban areas have a much higher ratio of ID crashes. While only about 25% of the crashes are expected in the rural areas, the red bar for rural shows it to be nearly 50%, or double its expected value.

Highway Classifications



Analysis of highway classifications indicates that ID crashes were over-represented on county roads. County roads had well over twice their expected proportion of crashes, while all other roadway classifications were under-represented, although they had very close to the same proportion as the non-ID crashes on those roadways. It is very possible that ID locals in the rural areas use the county road system to evade police. Their cunning in this regard does not seem to extend to making it home safely.

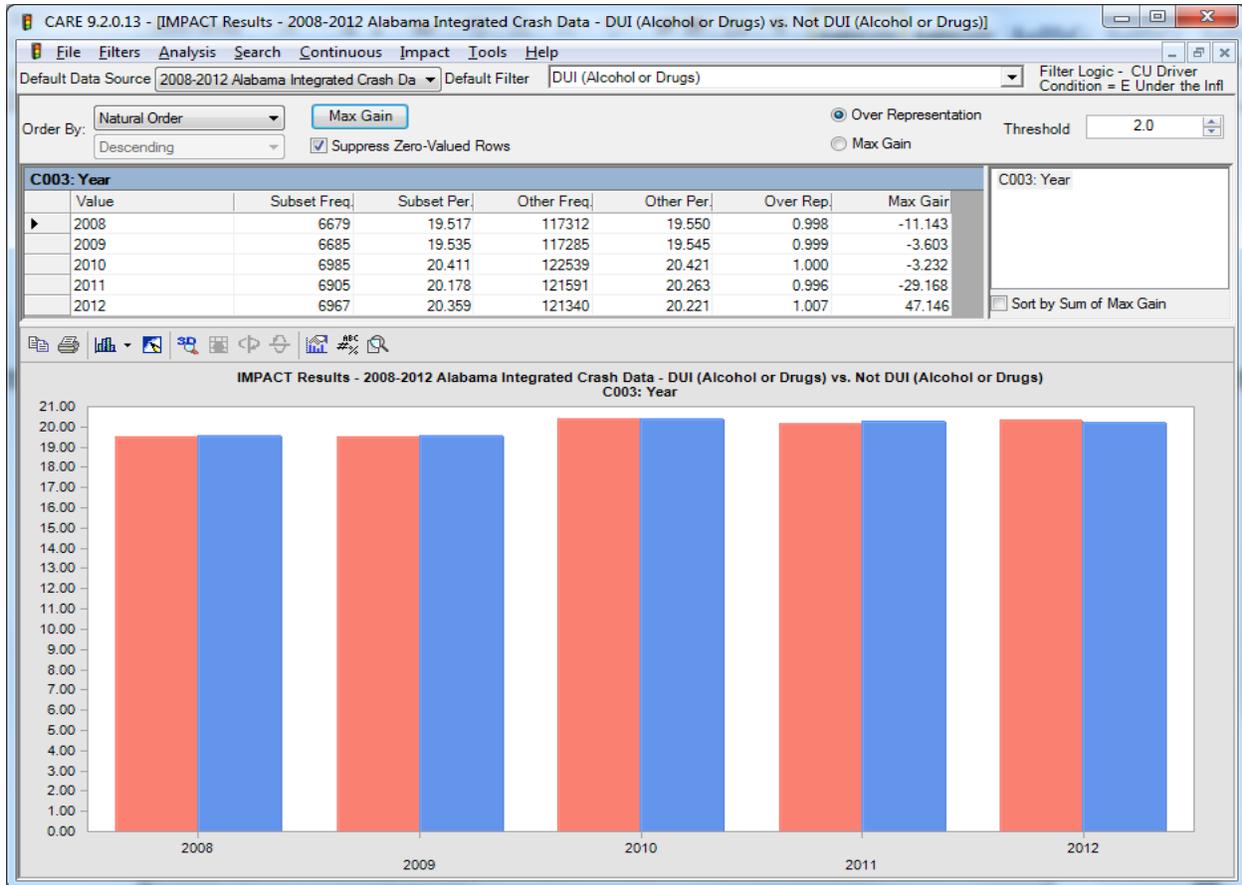
Locale



Reflecting the urban over-representation, open country and residential roadways show a high level of over-representation as compared with the more urbanized roadways.

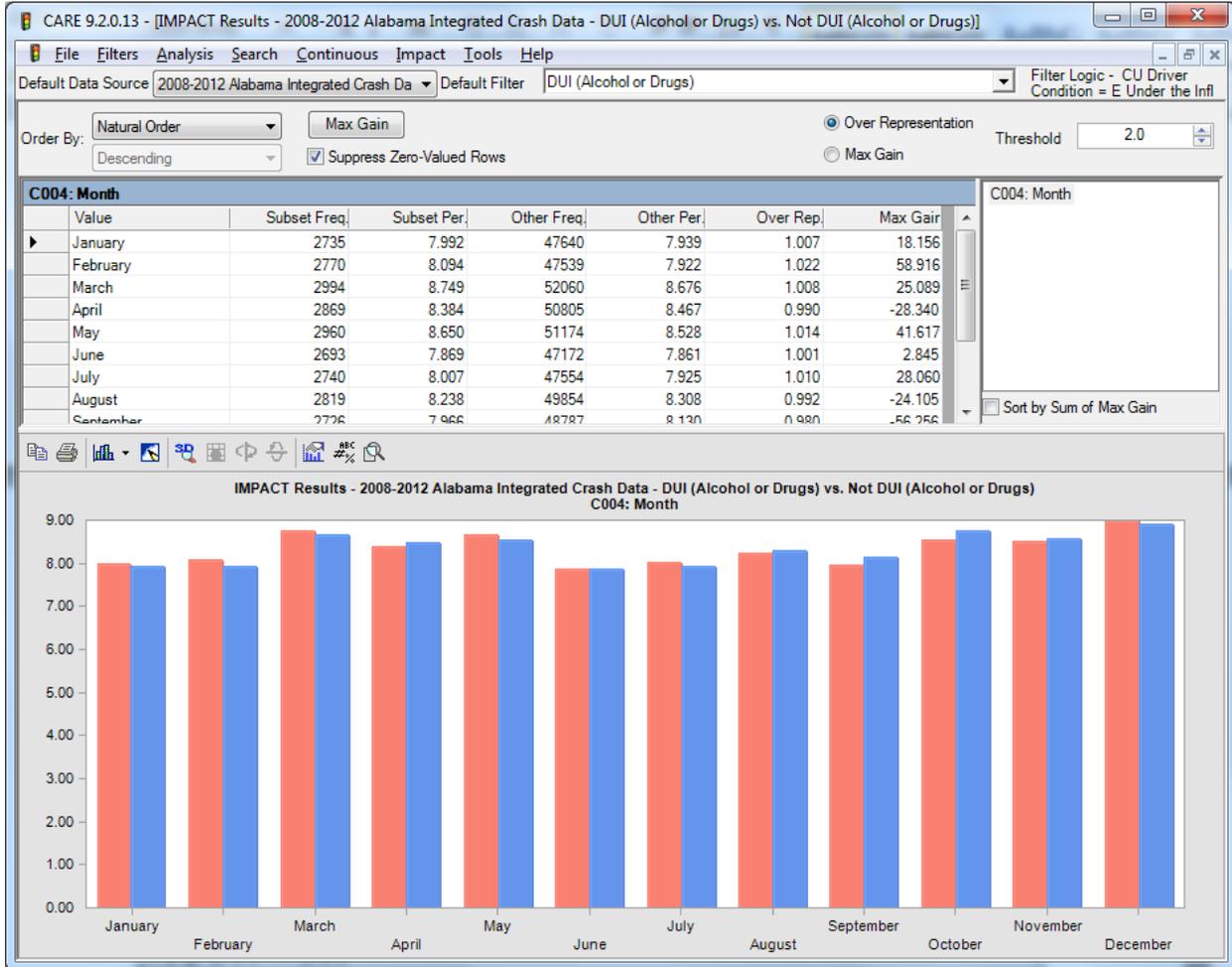
Time Factors

Year



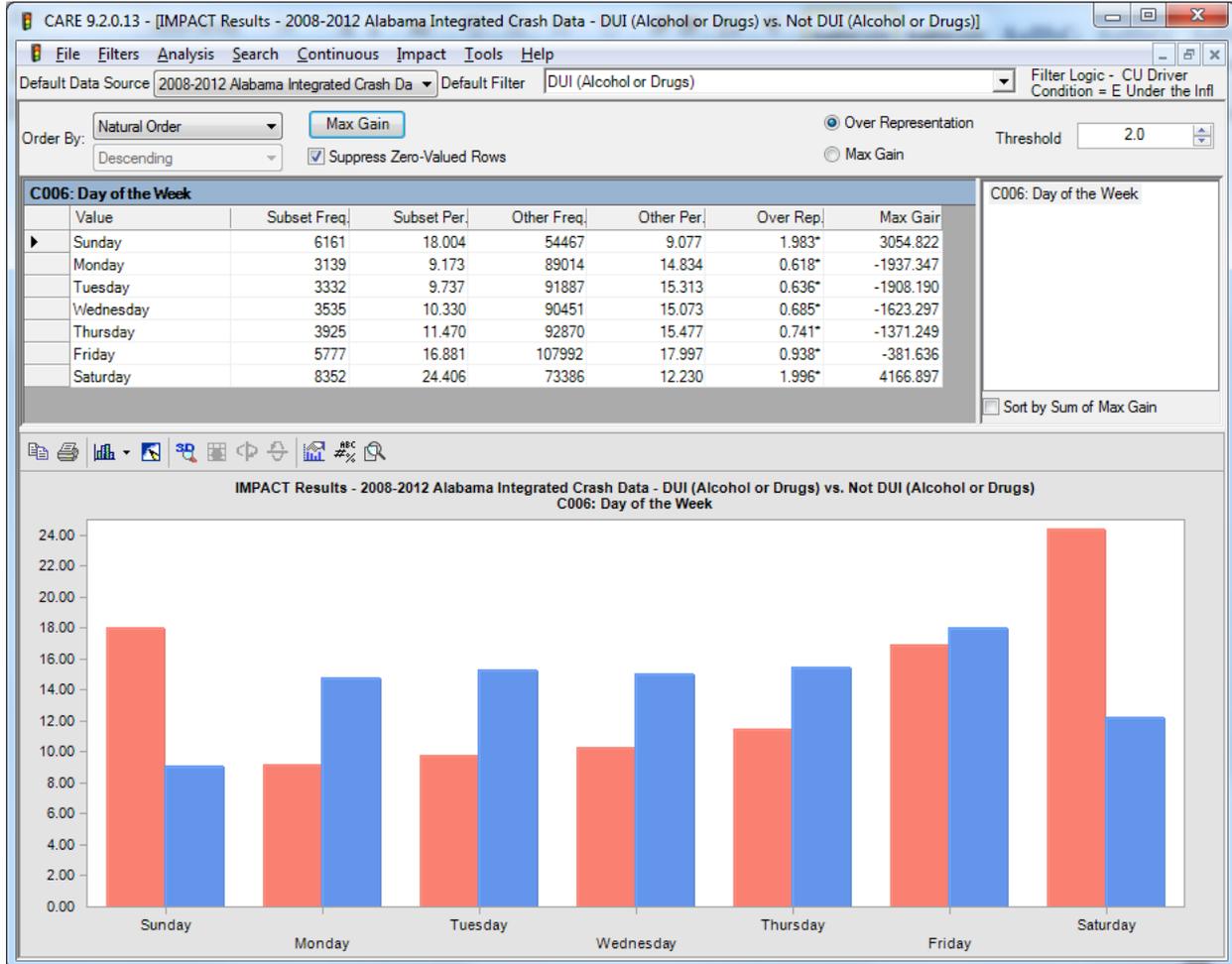
Analysis of crash data indicates that there has been little change in the total number of crashes reported from year to year, and the changes in the proportions are not significant. If there were no changes or over-representations all bars in the chart above would be at exactly 20%, the total number of ID crashes being evenly distributed over the years. This is a good time to emphasize that the total reports being considered here are those reported, which is about 6% of the total reported crashes. While this is an accurate statement of the number reported as such, no one claims that this is the actual number of ID crashes. Many ID caused crashes cannot be verified as such and they are therefore not reported as such. These reports over time provide excellent insight into the nature of ID crashes despite there not being a complete set of ID reports. As the severity of the crashes increases, the completeness of the reports in attributing them to ID also increased dramatically. For example, the amount of effort that goes into investigating a fatal crash is at least 10 to 20 times more effort than goes into reporting and obtaining all of the details of most property damage only crashes.

Month



There were no significant over-representations by month, indicating that the number of ID crashes correlated well with the other crashes during each of the months. The chart above, however, is useful in seeing the spring months of March through May, and the last three months of the year having slightly above average ID crashes. This chart is significant if, for no other reason, than to demonstrate that no single month should be ignored, and that ID problems are sustained and should be addressed throughout the year.

Day of the Week



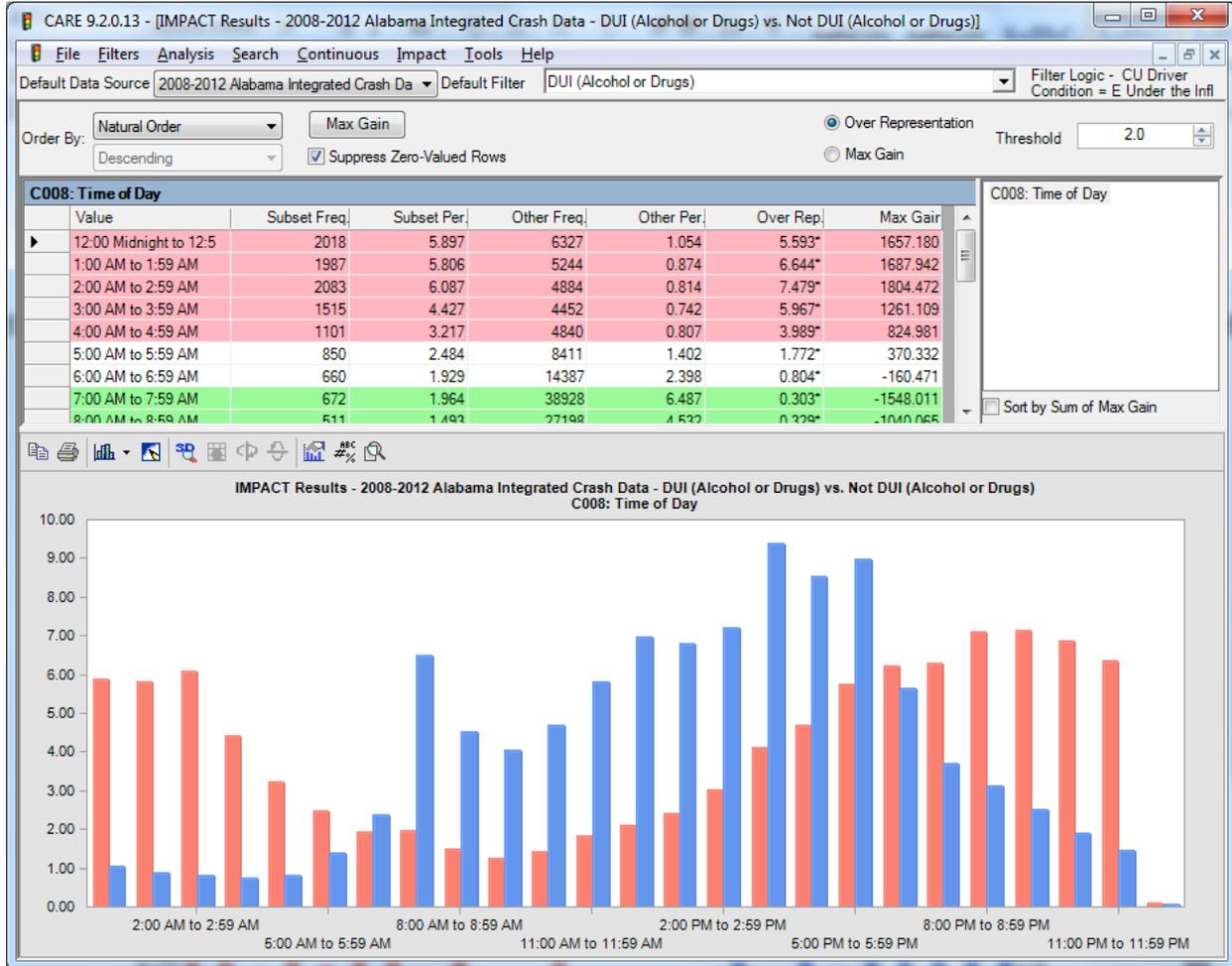
The chart above shows the typical non-holiday week pattern. The days can be classified as follows:

- Weekday (Monday through Thursday) – these days are under-represented in ID crashes we would surmise due to the need to go to work the following day.
- Friday – this pattern is the day before a weekend (or holiday). i.e., before a day off. The Friday pattern is slightly under-represented in ID crashes, not because they do not occur more frequently than weekdays, but because non-ID crashes occur even more. This is due to the increased traffic of combined commuters and vacationers (including short week-end vacations) – a bad traffic mix. It may be only slightly more dense than a typical rush hour, but it is not homogeneous and restricted to commuters as is the case during most weekday rush hours.

- Saturday – the “Saturday” pattern is the worse for ID crashes in that it has both an early morning component (like Sunday) and a late night component (like Friday). So, it could be viewed as a combination of the typical Friday and Sunday, with one exception. It does not have the complexity of the Friday afternoon commuters.
- Sunday – this is the last day of a holiday sequence or as given above, the weekend. Its over-representation comes strictly from those who start on Saturday night and do not complete their use of alcohol/drugs until after midnight.

A holiday “weekend,” such as Thanksgiving, can be viewed as a sequence of a Friday-, Saturday- and Sunday-pattern sequence. The Wednesday before Thanksgiving would follow the Friday pattern assuming that most are at work on Wednesday. The Thursday, Friday and Saturday would follow the Saturday pattern, and the Sunday would follow the Sunday pattern. Holidays that fall mid-week could also be so mapped. This is the reason that long holiday events (i.e., several days off) can be much more prone to ID crashes than the normal weekend.

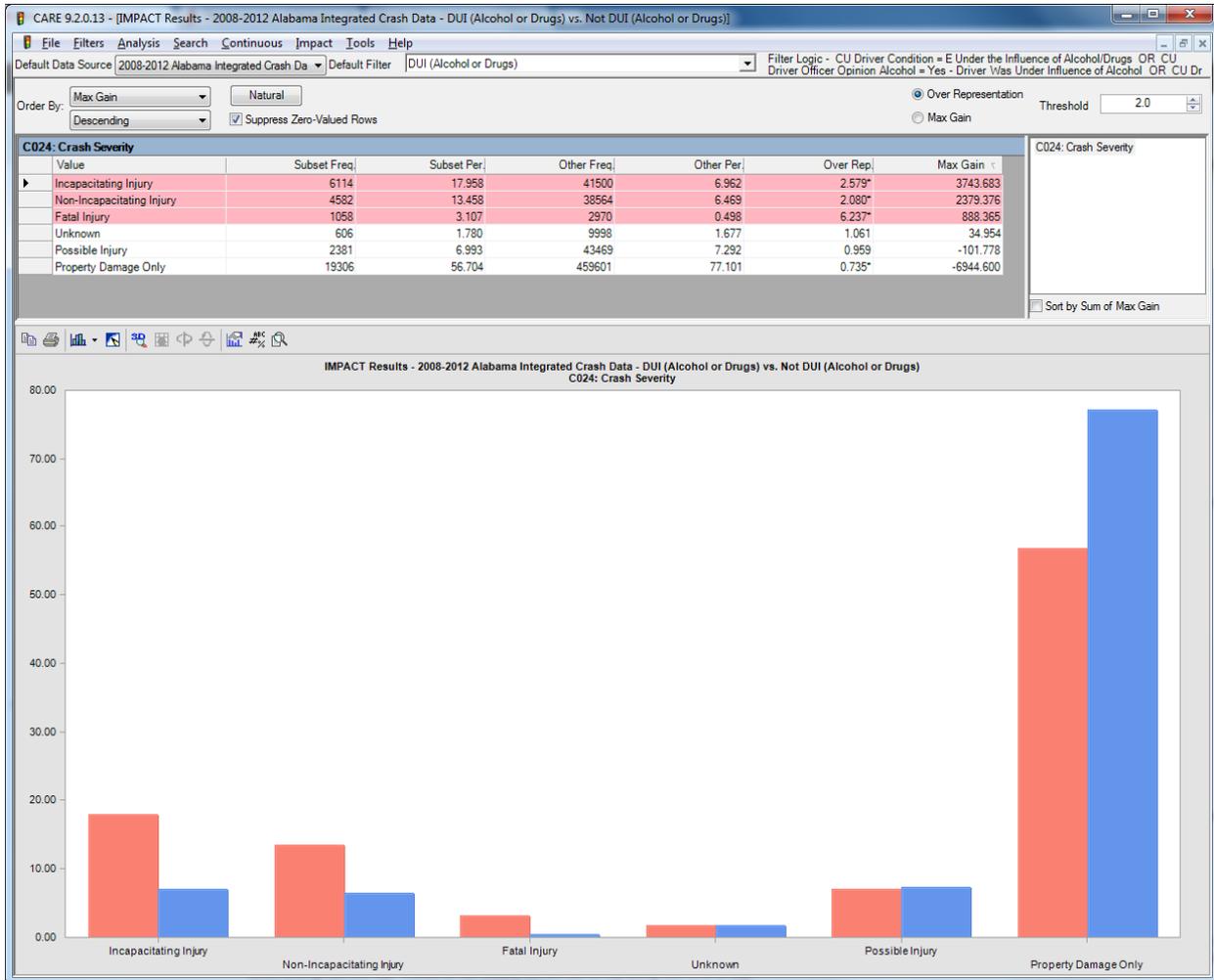
Time of Day



It is no surprise to find ID crashes over-represented during the late night/early morning hours. The extent of these over-representations, however, is quite amazing. The blue bars above follow the typical traffic patterns of high traffic in the morning and afternoon rush hours. ID crashes are just getting started in the afternoon rush hours and they continue to grow through midnight and the early morning hours, not tapering off until about 5:00 AM. It is clear that if selective enforcement is going to have an effect on ID crashes, it would have to be conducted when these crashes are occurring. Optimal times for enforcement would start immediately following any rush hour details, and would continue through at least 3:00 AM.

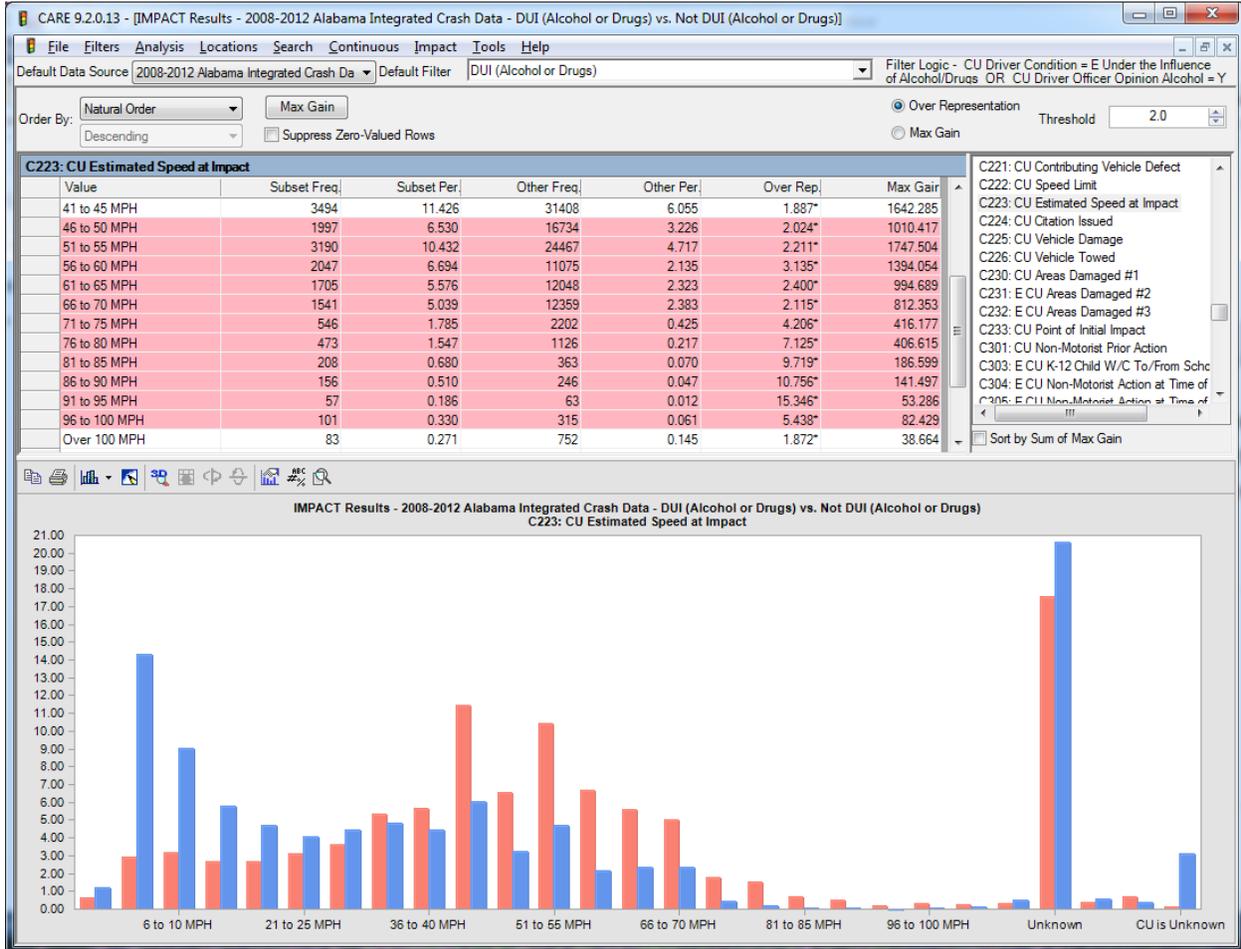
Factors Affecting Severity

ID Crash Severity



The rate of injuries and fatalities are consistently higher in ID crashes than that of non-ID crashes. Fatality crashes were over six times their expected proportion, while the two highest non-fatal injury classifications had over twice their expected values when compared with non-impaired driving crashes. The next variable indicates one of the reasons for this.

Speed at Impact



It should be noted that the speed limit on country roads is generally 45 MPH. All speeds about 45 MPH are dramatically over-represented. The next cross-tabulation indicates how this impacts the severity of the crash for ID crashes.

Severity of Impact Speed

CARE 9.2.0.13 - [Crosstab - 2008-2012 Alabama Integrated Crash Data - C024: Crash Severity vs. C223: CU Estimated Speed at Impact - Filter = DUI (Alcohol or D)]

File Filters Analysis Locations Search Continuous Crosstab Tools Help

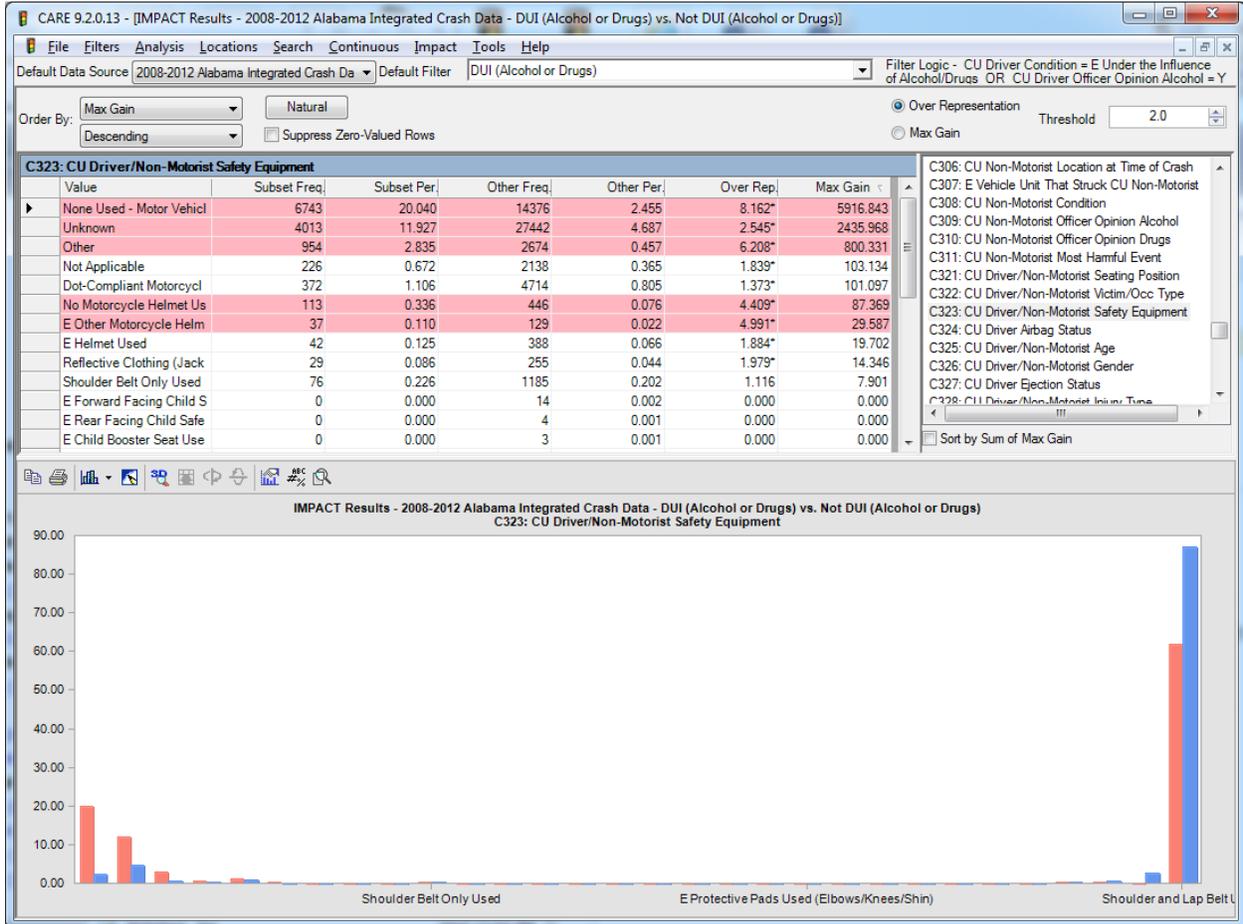
Default Data Source: 2008-2012 Alabama Integrated Crash Da | Default Filter: DUI (Alcohol or Drugs) | Filter Logic: CU Driver Condition = E Under the Influence of Alcohol/Drugs OR CU Driver Officer Opinion Alcohol = Y

Select Cells: [] | Suppress Zero Values: None | Column: C024: Crash Severity ; Row: C223: CU Estimated Speed at Impact

	Fatal Injury	Incapacitating Injury	Non-Incapacitating Inju	Possible Injury	Property Damage Only	Unknown	TOTAL
1 to 5 MPH	8 0.80%	54 0.99%	43 0.97%	61 2.91%	709 4.17%	13 2.14%	888 2.90%
6 to 10 MPH	9 0.90%	95 1.74%	88 1.99%	78 3.72%	702 4.13%	8 1.32%	980 3.20%
11 to 15 MPH	4 0.40%	67 1.23%	74 1.67%	61 2.91%	594 3.50%	16 2.64%	816 2.67%
16 to 20 MPH	6 0.60%	82 1.50%	78 1.76%	76 3.62%	568 3.34%	17 2.80%	827 2.70%
21 to 25 MPH	4 0.40%	79 1.45%	102 2.30%	74 3.53%	687 4.04%	14 2.31%	960 3.14%
26 to 30 MPH	6 0.60%	151 2.76%	107 2.42%	88 4.20%	746 4.39%	10 1.65%	1108 3.62%
31 to 35 MPH	12 1.20%	220 4.03%	184 4.15%	110 5.25%	1079 6.35%	21 3.46%	1626 5.32%
36 to 40 MPH	20 2.00%	284 5.20%	258 5.82%	107 5.10%	1047 6.16%	19 3.13%	1735 5.67%
41 to 45 MPH	58 5.81%	684 12.52%	528 11.92%	202 9.63%	1973 11.62%	49 8.07%	3494 11.43%
46 to 50 MPH	39 3.91%	424 7.76%	352 7.95%	151 7.20%	1001 5.89%	30 4.94%	1997 6.53%
51 to 55 MPH	97 9.72%	743 13.60%	510 11.51%	165 7.87%	1650 9.71%	25 4.12%	3190 10.43%
56 to 60 MPH	109 10.92%	536 9.81%	335 7.56%	112 5.34%	926 5.45%	29 4.78%	2047 6.69%
61 to 65 MPH	109 10.92%	492 9.01%	275 6.21%	90 4.29%	722 4.25%	17 2.80%	1705 5.58%
66 to 70 MPH	109 10.92%	416 7.61%	233 5.26%	70 3.34%	696 4.10%	17 2.80%	1541 5.04%
71 to 75 MPH	54 5.41%	143 2.62%	104 2.35%	23 1.10%	215 1.27%	7 1.15%	546 1.79%
76 to 80 MPH	56 5.61%	153 2.80%	77 1.74%	33 1.57%	152 0.89%	2 0.33%	473 1.55%
81 to 85 MPH	30 3.01%	66 1.21%	36 0.81%	12 0.57%	62 0.37%	2 0.33%	208 0.68%
86 to 90 MPH	20 2.00%	53 0.97%	23 0.52%	8 0.38%	50 0.29%	2 0.33%	156 0.51%
91 to 95 MPH	13 1.30%	17 0.31%	10 0.23%	1 0.05%	16 0.09%	0 0.00%	57 0.19%
96 to 100 MPH	15 1.50%	39 0.71%	19 0.43%	0 0.00%	25 0.15%	3 0.49%	101 0.33%
Over 100 MPH	15 1.50%	22 0.40%	14 0.32%	2 0.10%	28 0.16%	2 0.33%	83 0.27%

Notice the red in the fatality and severe injury cells as speeds increase. What is more enlightening is the probability that the crash results in a fatality as a function of impact speed. In the 41-45 MPH impact speed the probability is only a little over one in every one hundred crashes. As impact speeds climb to the 51-55 MPH, this probability almost doubles to two per hundred. And if the speed is 90 MPH or above, it is about ten times the probability to one in every ten crashes. The rule of thumb is that for every 10 MPH increase in speeds, the probability of the crash being fatal doubles. Conversely, a reduction in impact speeds by 10 MPH would cut the number of fatal crashes in half. This is the reason that selective enforcement is effective. However, there is another major factor in effect as well – the failure of ID drivers to be properly restrained.

Restraint Use by Impaired Drivers



Risk-taking involved in ID does not stop with excess speed; it extends to not being properly restrained. The above analysis demonstrates that the impaired driver is over 8 times more likely to be unrestrained as is the non-ID. The next analysis demonstrates how this contributes to fatality crashes. The table shows that the ID motorcyclist is over four times as likely not to be wearing a helmet.

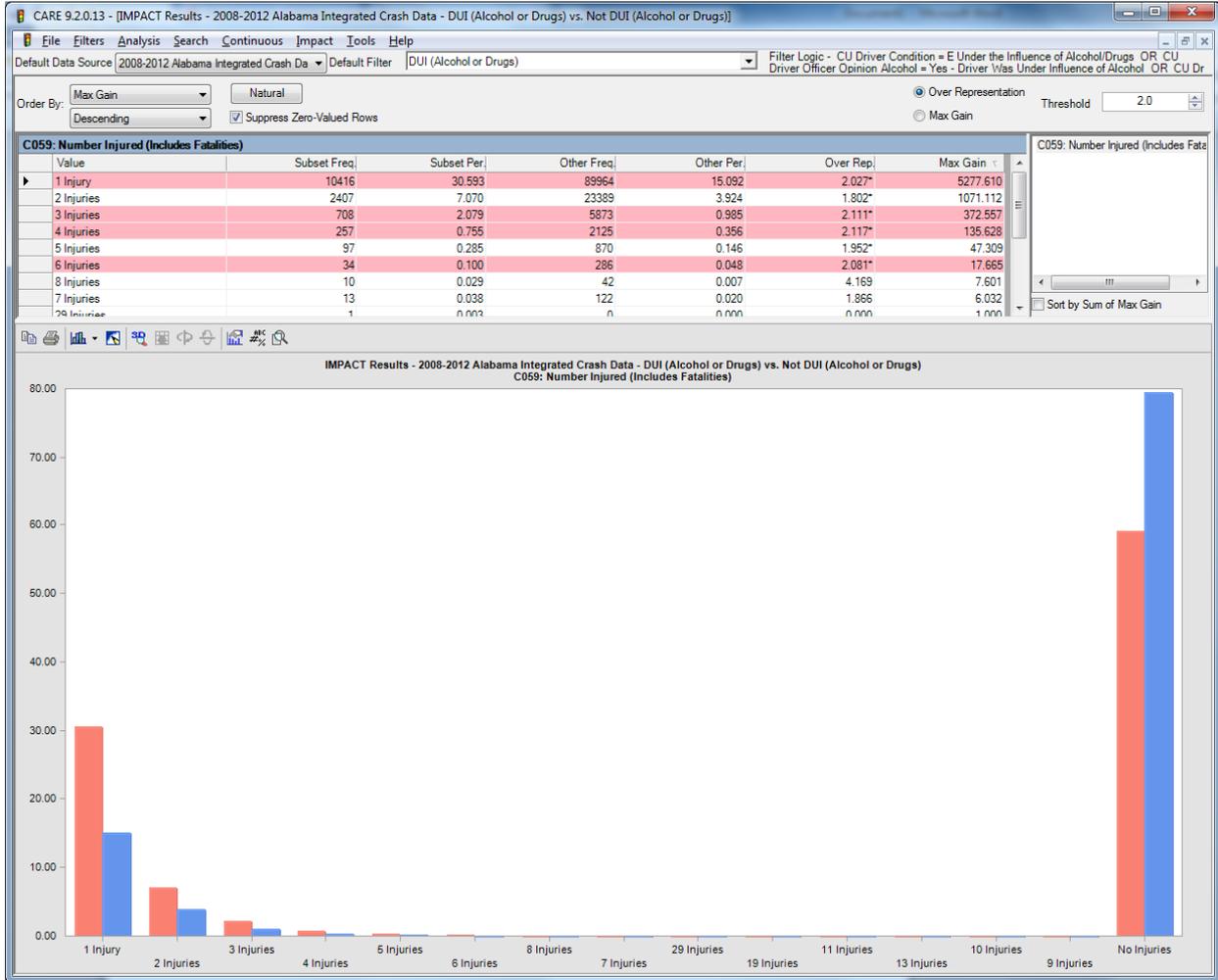
Fatality Crashes by Restraint Use for Impaired Drivers

The screenshot shows a Crosstab window with the following data:

	Fatal Injury	Incapacitating Injury	Non-Incapacitating Inju	Possible Injury	Property Damage Only	Unknown	TOTAL
None Used - Motor Vehicle Oc	545 51.51%	1978 32.51%	1279 27.86%	385 16.12%	2486 13.14%	70 11.53%	6743 20.04%
Shoulder and Lap Belt Used	246 23.25%	2957 48.59%	2531 55.14%	1578 66.08%	13198 69.76%	264 43.49%	20774 61.74%

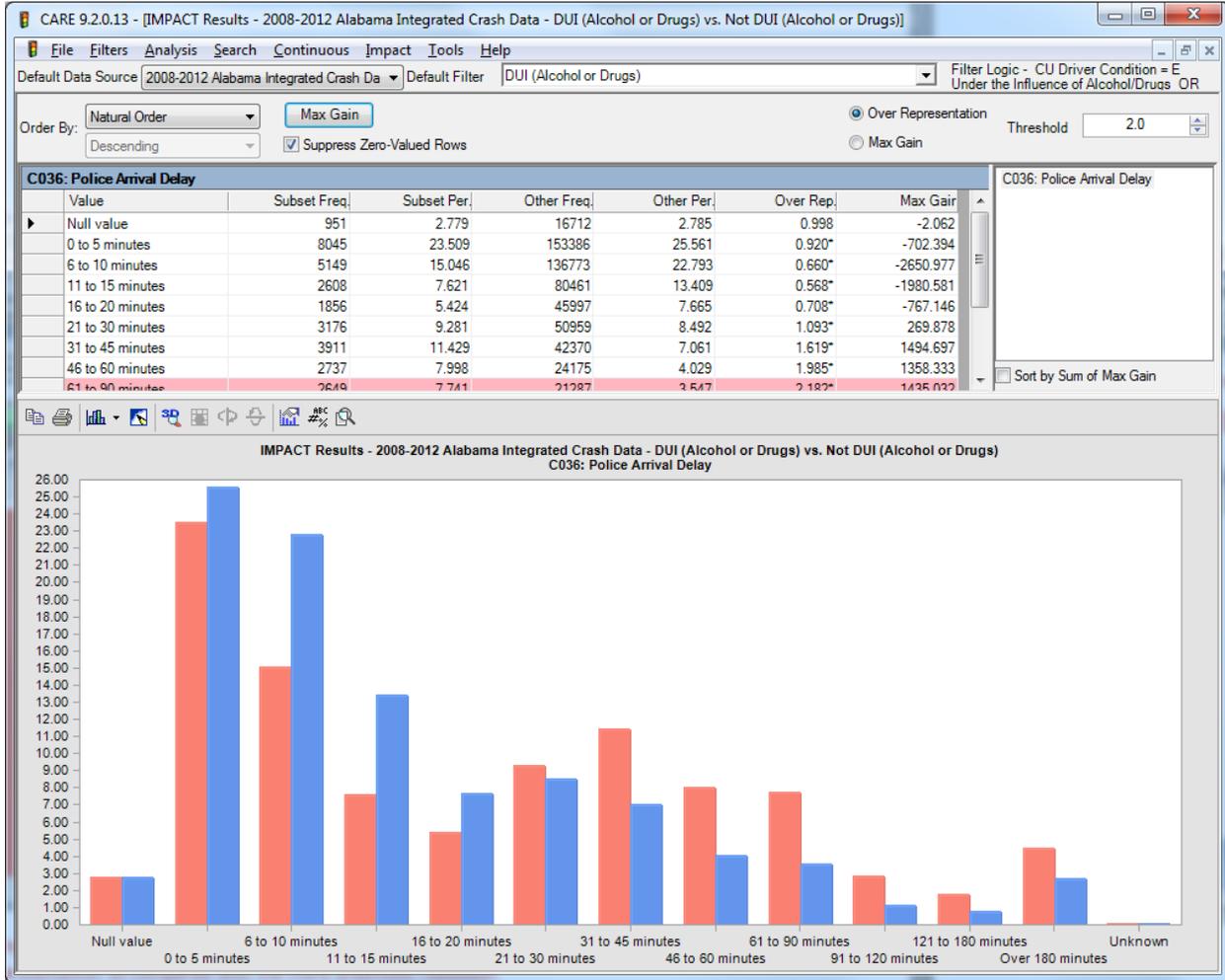
A comparison of the probability of a fatal crash indicates that a fatality is about seven times more likely if the impaired driver is not using proper restraints. The probability is estimated by 545 fatality crashes out of 6,743 when restraints were not used, as opposed to only 246 fatal crashes out of 20,774 crashes when restraints were used. So the combined effect of lower restraint use and higher speed is a devastating combination that accounts for the high lethality of ID crashes. But that is not all; see the following three items.

Number Injured (Including Fatalities)



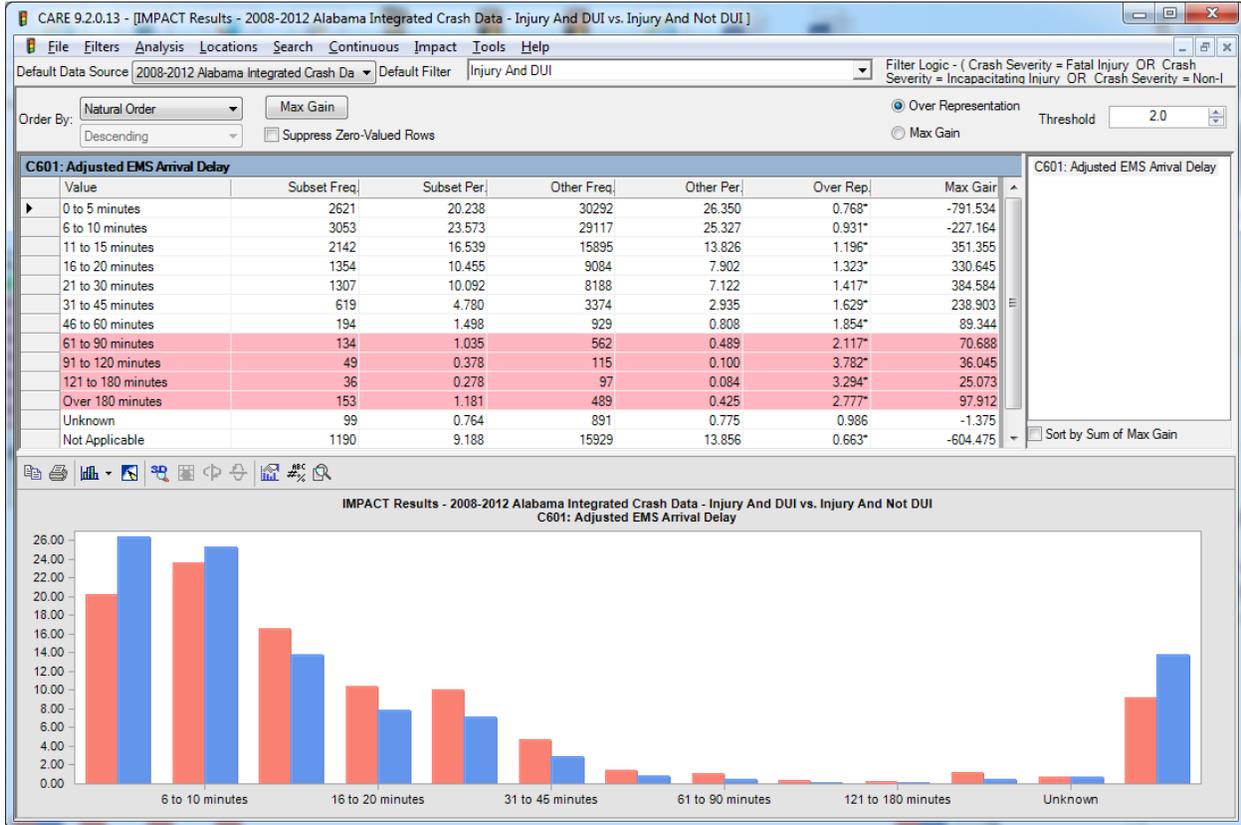
The above shows that not only are ID crashes more severe to the driver, but also the number of multiple injuries in these ID crashes is over-represented as well. Some might suspect that an ID crash might involve just a driver returning home from a night of indulgence. However, rarely is the impaired driver alone, and, of course, if another vehicle is involved, then that would also generally increase the number of injuries.

Police Arrival Delay



ID crashes generally had longer police arrival delays; in this case all arrival delays over 21 minutes were over-represented. There can be little doubt that this has to do with the rural nature of these crashes and the potential that at night they would not be discovered for some time. The analysis below shows how this impacts EMS arrival time, which is a comparison of ID vs. non-ID crashes both of which were reported to include injuries, and thus would generally call for EMS.

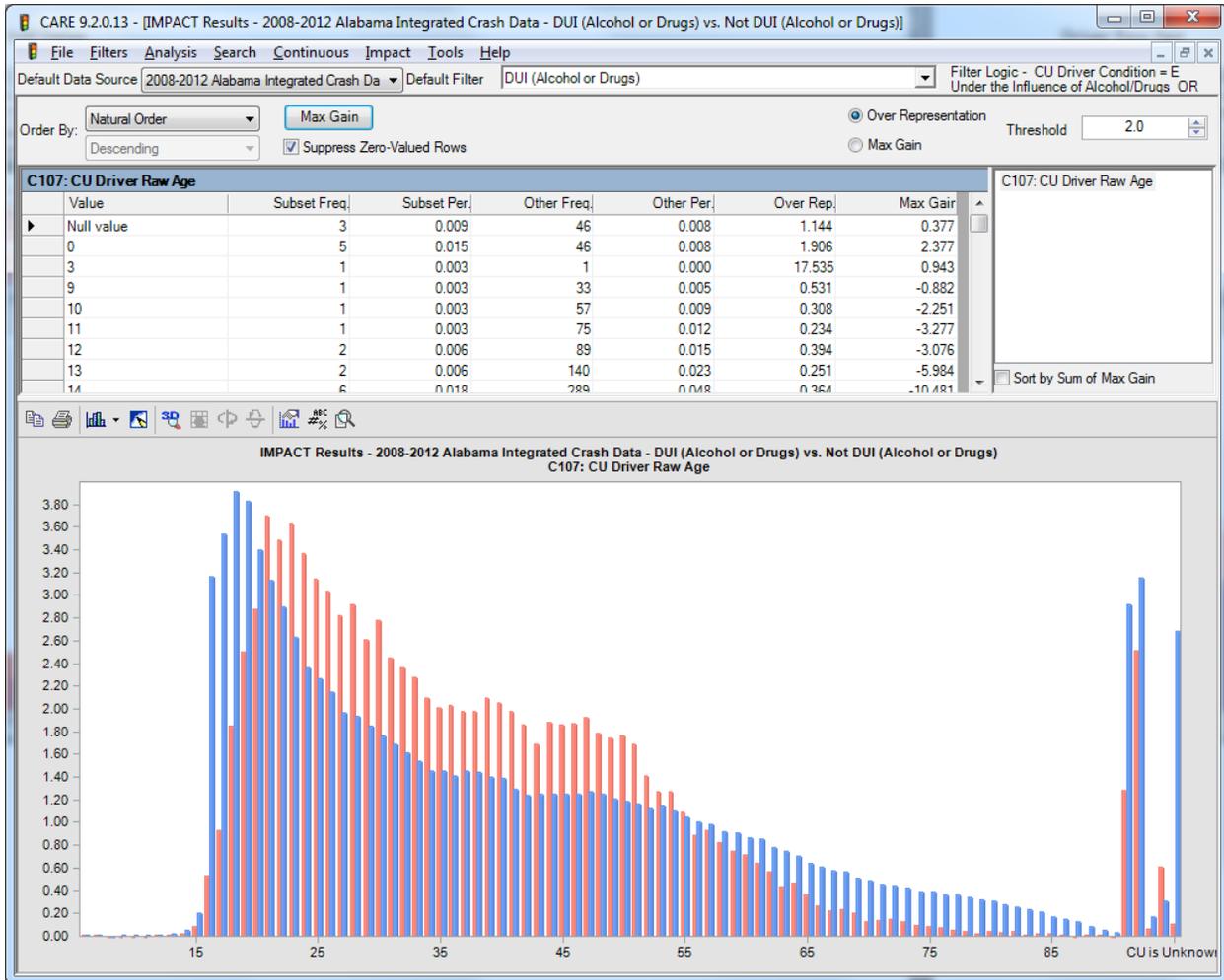
EMS Arrival Delay



For much the same as the longer police arrival delays, EMS delays were over-represented for impaired driving crashes in all categories above ten minutes, and dramatically for the very longer times of 60 minutes and above. This obviously contributes to the severity of crashes and the chances that the crash results in one or more fatalities. As for the very long times, these might be due to the delay in discovering the crash as much as their generally over-represented rural locations.

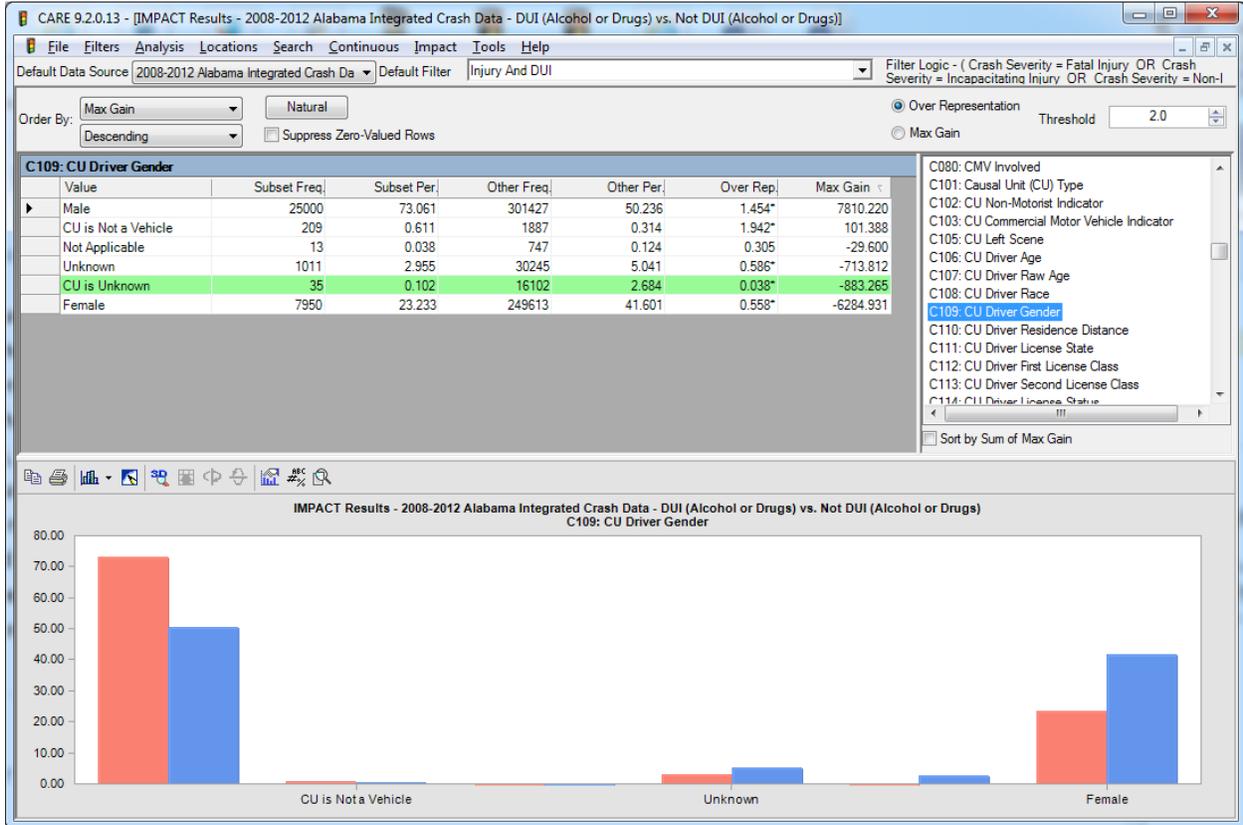
Driver and Vehicle Demographics

Driver Age



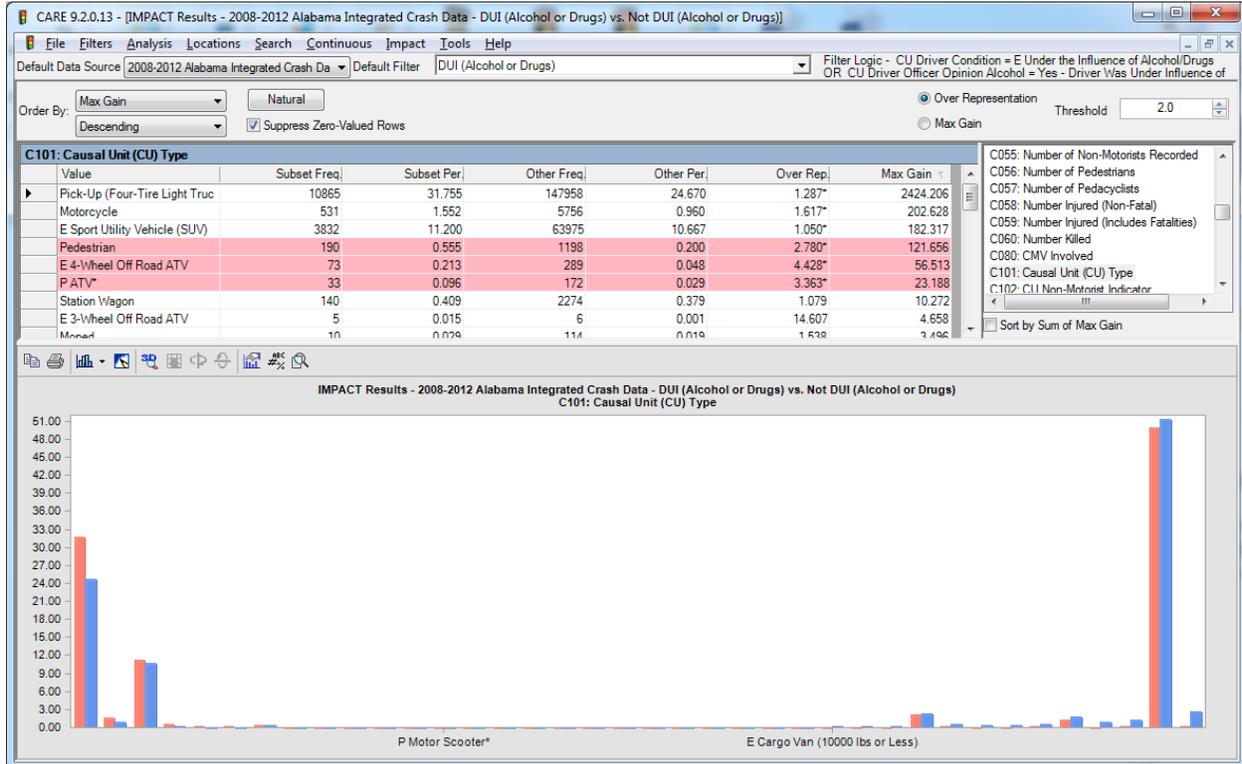
The blue (non-ID) bars illustrate the problems that 16-20 year old drivers have in general. On the bright side, these issues are not generally caused by ID up until ages 19 and 20, and even at these ages they are under-represented. At 21, the first age over-representation takes place and continues on to age 54. It is clear that the legal drinking age is having an effect on keeping the numbers down for the 16-20 year old drivers, and any attempt to decrease this legal age should be fought strenuously by the traffic safety community despite the fact that it might be promoted by some college presidents (although that effort seems now to have waned). There is a bimodal distribution in the 21-54 year olds; 21 through about 35, and a second group from 36 to 54. Generally the first of these might be classified as social drinkers. However, it is hard to escape the fact that those who are in their late 30s up through their middle ages would not be largely problem drinkers. These two groups must be dealt with in different ways.

Impaired Driver Gender



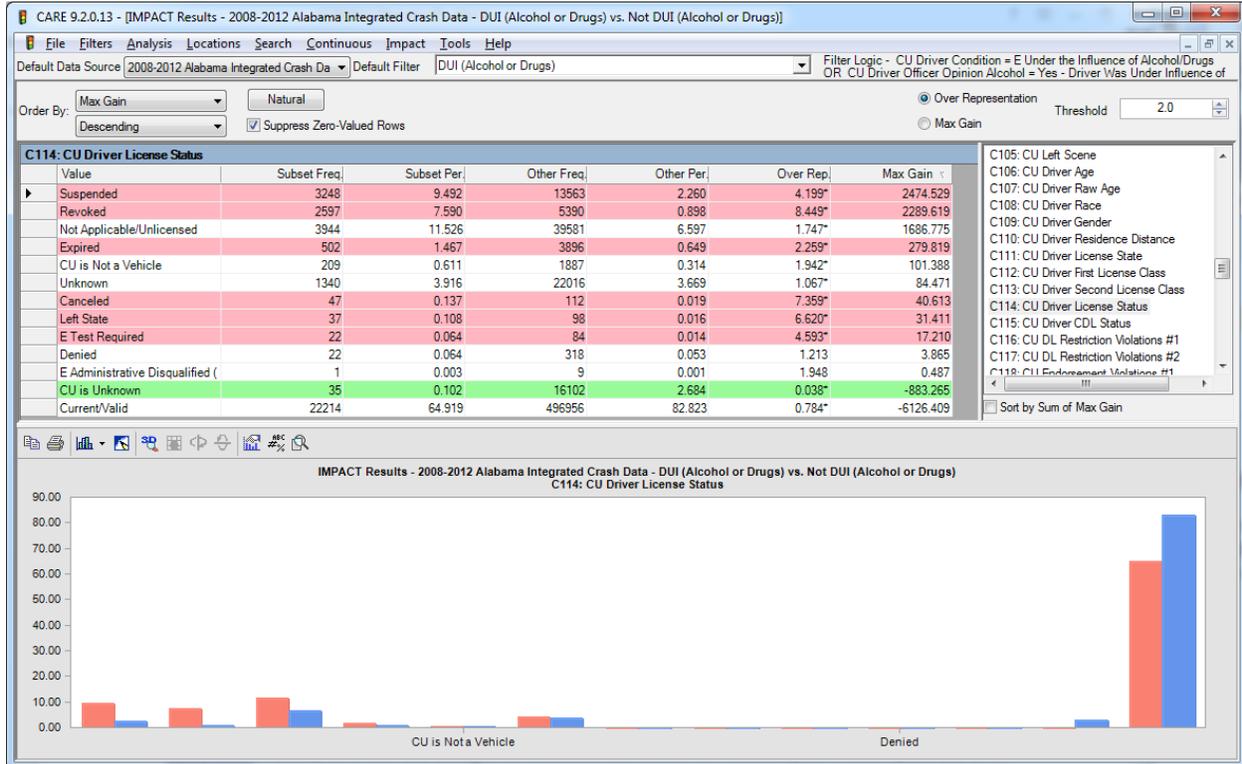
The middle cells in the above chart can be ignored, since they are not relevant to the causal driver in the crash. Looking at the male bars on the left and the female to the very right, the blue bars represent non-ID crashes. There is about a 50% male and 40% female comparison of the blue bars. However, the red bars show about 73% male and 23% female. This would certainly indicate that males are a far greater issue, and if there are countermeasures that can be directed toward them, doing so would be much more cost-effective, all other things being equal.

Causal Vehicle Type



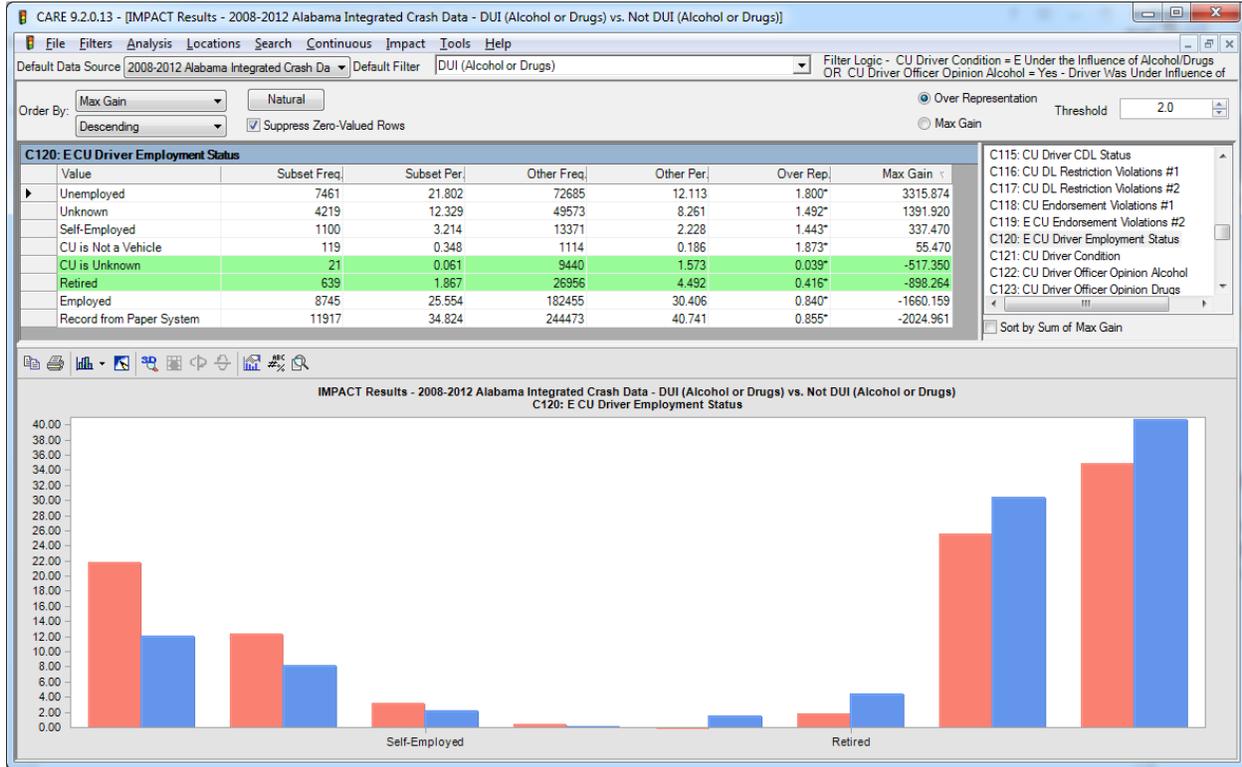
While clearly the pick-up is the vehicle of choice in the rural areas, there was no distinction between this category and SUVs prior to eCrash coding, which began in 2009, but did not become predominant until sometime in 2010, so these two categories should be combined for this analysis. Motorcycles are over-represented more than either of these, although their overall numbers are relatively low. Of interest is the proportion of pedestrians that involve ID, which is close to three times their expected number. So the new major information generated by this analysis is that motorcycle and pedestrian crashes have far more than their share of ID causation. The ATV issues caused by ID are also significantly over-represented, although for the most part they are off road and relatively unregulated.

Driver License Status



Clearly ID crashes are so over-represented in causal drivers without legitimate licenses that the question might be asked: Does suspending or revoking their licenses even make a difference? Some states have gone so far as to make it a mandatory arrest if a driver is found to not have a current license. The results of this analysis need to be given serious consideration by those determining the direction of the legislative process regarding ID.

Driver Employment Status



In our current era when the economy is playing such a big role in traffic safety, the quantification and tracking of the employment proportion of drivers involved in ID crashes will be important. This indicates that their unemployment rate is about 80% higher than expected. This is probably not unexpected, and the correlation between not having a job and being involved in an ID crash should be watched carefully going forward.

Summary of Findings

The following summarizes the findings of the problem identification analyses given above:

- Geographical Factors
 - County -- Generally, the over-represented counties combine large populations with larger rural areas, as opposed to the highly urbanized counties or the extremely rural counties. See the rural-urban comparison below.
 - City –Generally those rural areas that are adjacent to (or contain) significant urban areas, such as Mobile, Madison and Tuscaloosa, are over-represented. Possible factors for relatively fewer severe ID crashes in urban areas include:
 - Less need for motor vehicle travel and shorter distances to the drinking establishments;
 - Larger police presence in the metropolitan areas; and
 - Lower speeds in rural areas.
 - Severity of Crash by Rural-Urban – While less than 50% of crashes occur in rural areas, over 70% of the fatal crashes occur there.
 - Rural or Urban ID Crash Frequency – Not only are impaired driving crashes more severe in rural areas, but their frequency is about the same as in the urban area, despite the much lower population and traffic volumes. While only about 25% of the crashes are expected in the rural areas, the proportion of crashes in the rural areas is nearly 50%, or double its expected value.
 - Highway Classifications – County roads had well over twice their expected proportion of crashes, while all other roadway classifications were under-represented. County roads are known to be less “crashworthy” (i.e., they result in more severe crashes at comparable impact speeds).
 - Locale – Reflecting the urban over-representation, open country and residential roadways show a high level of over-representation as compared with the more urbanized roadways.
- Time Factors
 - Year – Analysis of crash data over five years indicates that there has been little change in the total number of crashes reported from year to year, and the changes in the proportions are not significant.
 - Month – There were no significant over-representations by month, indicating that the number of ID crashes correlated well with the other crashes during each of the months. It appears, however, that collectively the spring months of March through May, and the last three months of the year having slightly above average ID crashes.

- Day of the Week – This analysis is not only useful for the typical work week, but it also reflects the typical “holiday weekend” patterns. The days can be classified as follows:
 - Typical work weekday (Monday through Thursday) – these days are under-represented in ID crashes due to the need to go to work the following day.
 - Friday – this pattern is also reflected in the day before a weekend (or holiday), i.e., before a day off. The high ID frequency on this day is due those who are getting an early start to the weekend, recognizing that they have no work responsibilities the following day.
 - Saturday – the “Saturday” pattern is the worse for ID crashes in that it has both an early morning component (like Sunday) and a late night component (like Friday). So, it could be viewed as a combination of the typical Friday and Sunday.
 - Sunday – since this is the last day of a holiday sequence or weekend, its over-representation comes strictly from those who start on Saturday night and do not complete their use of alcohol/drugs until after midnight.
- “Holiday Weekends” -- these be viewed as a sequence of a Friday-, Saturdays- and Sunday-pattern sequence. The Wednesday before Thanksgiving would follow the Friday pattern assuming that most are at work on Wednesday. The Thursday, Friday and Saturday would follow the Saturday pattern, and the Sunday at the end of the weekend would follow the typical Sunday pattern. This is the reason that long holiday events (i.e., several days off) can be much more prone to ID crashes than the normal weekend.
- Time of Day – The extent to which night-time hours are over-represented is quite striking. Optimal times for ID enforcement would start immediately following any rush hour details, and would continue through at least 3 AM.
- Factors Affecting Severity
 - ID Crash Severity -- The rate of injuries and fatalities are consistently higher in ID crashes than that of non-ID crashes. Fatality crashes are over six times their expected proportion, while the two highest no-fatal injury classifications have over twice their expected values when compared with non-impaired driving crashes. The other variables analyzed in this section give the reasons for this disparity.
 - Speed at Impact – All impact speeds above 45 MPH are dramatically over-represented.
 - Severity by Impact Speed –Generally past analyses have found that for every 10 MPH increase in speeds, the probability of the crash being fatal doubles.

- Restraint Use by Impaired Drivers – Impaired driver is over 8 times more likely to be unrestrained as is the non-ID.
- Fatality Crashes by Restraint Use for Impaired Drivers – A comparison of the probability of a fatal crash indicates that a fatality is about seven times more likely if the impaired driver is not using proper restraints. So the combined effect of lower restraint use and higher speed is a devastating combination that accounts for the high lethality of ID crashes.
- Number Injured (Including Fatalities) – Not only are ID crashes more severe to the driver, but also the number of multiple injuries in these ID crashes is over-represented as well.
- Police Arrival Delay – ID crashes generally had longer police arrival delays; in this case all arrival delays over 21 minutes were over-represented. There can be little doubt that this has to do with the rural nature of these crashes and the potential that at night they would not be discovered for some time.
- EMS Arrival Delay – Higher EMS delays were over-represented for impaired driving injury crashes in all categories above ten minutes, and dramatically for the very longer times of 60 minutes and above. This obviously contributes to the severity of crashes and the chances that the crash results in one or more fatalities. As for the very long times, these might be due to the delay in discovering the crash as much as their generally over-represented rural locations.
- Driver and Vehicle Demographics
 - Driver Age – Younger (16-20 year old) drivers have a very serious problem in crash causation even in the absence of impairment. However, these crashes are not generally caused by ID up until ages 19 and 20, and even at these ages they are under-represented. At 21, the first age over-representation takes place and continues on to age 54. There is a bi-modal distribution in the 21-54 year olds; 21 through about 35, and a second group from 36 to 54. Generally, the first of these might be classified as largely social drinkers; while it is inescapable that the middle aged caused ID crashes would be largely problem drinkers.
 - Impaired Driver Gender – Males are a far greater issue in ID crashes, and if there are countermeasures that can be directed toward them, doing so would be much more cost-effective, all other things being equal.
 - Causal Vehicle Type – Pick-ups, which up until eCrash went into effect included SUVs, had a very high over-representation. Motorcycles were also highly over-represented. Of interest is the proportion of pedestrians that involve ID, which is close to three times their expected number.

- Driver License Status – ID crashes are very highly over-represented in causal drivers without legitimate licenses challenging the effectiveness of license suspension and revocations.
- Driver Employment Status –ID driver unemployment rate is about 80% higher than expected. This factor will be watched carefully going forward.

Appendix C. Detailed Legislative Recommendations

These issues are listed and summarized at a very high level in Section 4.1. All of the legislative actions recommended in this appendix have all been formally filed and introduced in the legislature within the last 2 sessions.

C.1 Change the Way DUI is Charged

Under current law, Ala. Code 32-5A-191 (1975), an officer must elect the method of impairment at the time of a DUI arrest.

If an offender is impaired by a drug or drugs other than alcohol, the officer has no way of knowing if that substance is controlled or not until a toxicology report is issued weeks after the arrest. If the officer guesses incorrectly, the charge is due to be dismissed. The dismissal is solely due to the officer guessing wrong as to the impairing substance not because of the merits of the case. A guess the officer is charged under the law to make without having all the facts.

For example: An officer investigates a driver for DUI and after conducting that investigation makes the decision to arrest the person and charge them with DUI. The officer knows that alcohol is not present, so he opts to charge the offender under 32-5A-191(a)(5) which states that the offender is under the influence of any substance which impairs the mental or physical faculties of such person to a degree which renders him or her incapable of safely driving. The offender submits to a blood test which later shows he was actually impaired by cocaine, a controlled substance. In this example, the case would be dismissed. Not because the defendant was not impaired, but because the officer guessed incorrectly on the side of the road.

This change would remove the guesswork from charging DUI. It would simply address the charging instrument and officers will no longer have to guess what is causing the defendant's impairment at the time of arrest.

The suggested change to the statute reads as follows:

Driving while under influence of alcohol, controlled substances, etc.

(a) A person shall not drive or be in actual physical control of any vehicle while:

(1) There is 0.08 percent or more by weight of alcohol in his or her blood;

~~(2) Under the influence of alcohol;~~

~~(3) Under the influence of a controlled substance to a degree which renders him or her incapable of safely driving;~~

~~(4) Under the combined influence of alcohol and a controlled substance to a degree which renders him or her incapable of safely driving; or~~

~~(5) (2) Under the influence of any substance or substances which impairs the mental or physical faculties of such person to a degree which renders him or her incapable of safely driving.~~

(b) "Under the Influence" is defined as: Not having the normal use of mental or physical facul-

ties by reason of the introduction of alcohol, a controlled substance, a drug, a combination of two or more of those substances, or any other substance into the body.

C. 2 Mandatory Blood Draws

Under current law, Ala. Code 32-5-200 (1975), any person involved in a crash resulting in death or serious physical injury can be asked to submit to a chemical test if the officer has reason to believe that person is under the influence of drugs or alcohol. The statute gives the offender a right to refuse that test.

The law needs to be amended to remove a person's right to refuse a chemical test when they are involved in a crash resulting in death or serious physical injury and an officer has reason to believe they are under the influence of drugs or alcohol.

The suggested change to the statute reads as follows:

Consent to blood test; definitions; incapacity; refusal to submit to test; notice of suspension, etc., of license; hearing; appeal.

Administration of chemical tests without consent.

(a) Any person who operates a motor vehicle on the public highways of this state who is involved in an accident that results in death or a serious physical injury to any person shall, upon direction of a law enforcement officer pursuant to the provisions of this section, ~~be deemed to have given consent to a test~~ submit a sample of his or her blood for the purpose of determining the alcoholic content of his or her blood or the presence of ~~amphetamines, opiates, or cannabis~~ any substance which may cause impairment. The test or tests shall be administered by or at the direction of a law enforcement officer having reasonable grounds to believe that the person, while driving a motor vehicle on the public highways of this state, was under the influence of ~~alcohol or amphetamines, opiates, or cannabis~~ any substance which may cause impairment. ~~The person shall be informed by the law enforcement officer who is investigating the accident that failure to submit to a test will result in the suspension of his or her privilege to operate a motor vehicle for a period of two years.~~

(b) For purposes of this section, the term "serious physical injury" means physical injury which creates a substantial risk of death, or which causes serious and protracted disfigurement, protracted impairment of health, or protracted loss or impairment of the function of any bodily organ.

(c) ~~Any person who is dead, unconscious, or who is otherwise in a condition in which they are incapable of refusal, shall be deemed not to have withdrawn the consent provided by subsection (a).~~ The officer may direct that reasonable steps be used to obtain samples of blood from the person to be tested.

(d) ~~If a person refuses to submit to a test, none shall be given, unless a court order has been obtained ordering the person to submit to a test. If the person is found not to have been at fault in causing the accident, the Director of Public Safety may reduce the period of suspension. A per-~~

son may not refuse to submit to a chemical blood test as required under the provisions of this section. A physician, registered nurse, chemical laboratory technician, phlebotomist, or other health care provider trained and authorized to administer blood tests is under no obligation to administer a blood test when the administration of the blood test would endanger the life or health of the physician, registered nurse, chemical laboratory technician, phlebotomist, other health care provider, or any other person.

~~(e) Upon suspending the license or permit to drive or the privilege of driving a motor vehicle on the highways of this state that is given to a nonresident or any person, or upon determining that the issuance of a license or permit shall be denied to the person, the Director of Public Safety or his or her authorized agent shall within three days of suspension notify the person in writing. Upon a request filed by the person within five days from the date of the notice of suspension or denial, the director shall schedule a hearing with notice of the hearing to be provided by certified mail to the person stating the date, time, place, and scope of the hearing. The scope of the hearing shall pertain to all of the following issues: Absent unreasonable, wanton, willful, or intentional conduct, a physician, registered nurse, duly licensed chemical laboratory technologist or clinical laboratory technician or hospital, as defined in Section 22-21-20, shall not incur any civil or criminal liability as a result of the proper administration of a blood test when requested by a law enforcement officer to administer the test.~~

~~(1) Whether a law enforcement officer had reasonable grounds to believe the person had been driving a motor vehicle on the public highways of this state while under the influence of the substances enumerated in subsection (a).~~

~~(2) Whether the person was at fault in causing the accident.~~

~~(3) Whether the person refused to submit to the test upon request of a law enforcement officer.~~

~~(4) Whether the person was informed that his or her privilege to drive would be suspended or denied if he or she refused to submit to the test shall not be an issue.~~

~~(f) If the suspension or determination that there should be a denial or issuance is sustained by the director or his or her authorized agent, the person whose license or permit to drive or a nonresident operating privilege has been suspended, or to whom a license or permit is denied, shall have the right to file a petition to review the final order, suspension, or denial within 30 days after the entry of the final order of suspension or denial by the director in the appropriate court to review the final order of suspension.~~

~~(g) When it has been finally determined under the procedures of this section that the privilege of a nonresident to operate a motor vehicle in this state has been suspended, the director shall give information in writing of the action taken to the motor vehicle administrator of the state of the residence of the person and to any state in which the person has a license.~~

C.3 Increase refusal penalties

Under current law, Ala. Code 32-5-192 (1975), a person who refuses to submit to a chemical test after they have been arrested for DUI is due to having their driver license suspended for a period of 90 days which is the same penalty administered upon being convicted of a first offense DUI where the offenders breath alcohol content (BrAC) was below 0.15 at the time of the offense. If an offender is convicted of a first offense DUI and has a BrAC of 0.15 or greater

at the time of the offense, then the offender's DL is subject to a one-year suspension.

As the law currently reads, the offender not only has no incentive to take a chemical test, but they have incentive to refuse a chemical test. This aspect of the law needs to be changed.

The penalty for refusing a chemical test needs to be the same as that of someone having a BAC of 0.15 or greater. The offender should not be rewarded for refusing a chemical test after they have been arrested for DUI.

The suggested change to the statute reads as follows:

Implied consent; when tests administered; suspension of license or permit to drive, etc., for refusal to submit to test.

(a) Any person who operates a motor vehicle upon the public highways of this state shall be deemed to have given his consent, subject to the provisions of this division, to a chemical test or tests of his blood, breath or urine for the purpose of determining the alcoholic content of his blood if lawfully arrested for any offense arising out of acts alleged to have been committed while the person was driving a motor vehicle on the public highways of this state while under the influence of intoxicating liquor. The test or tests shall be administered at the direction of a law enforcement officer having reasonable grounds to believe the person to have been driving a motor vehicle upon the public highways of this state while under the influence of intoxicating liquor. The law enforcement agency by which such officer is employed shall designate which of the aforesaid tests shall be administered. Such person shall be told that his failure to submit to such a chemical test will result in the suspension of his privilege to operate a motor vehicle for a period of **90 days one year**; provided if such person objects to a blood test, the law enforcement agency shall designate that one of the other aforesaid tests be administered.

(b) Any person who is dead, unconscious or who is otherwise in a condition rendering him incapable of refusal, shall be deemed not to have withdrawn the consent provided by subsection (a) of this section and the test or tests may be administered, subject to the provisions of this division.

(c) If a person under arrest refuses upon the request of a law enforcement officer to submit to a chemical test designated by the law enforcement agency as provided in subsection (a) of this section, none shall be given, but the Director of Public Safety, upon the receipt of a sworn report of the law enforcement officer that he had reasonable grounds to believe the arrested person had been driving a motor vehicle upon the public highways of this state while under the influence of intoxicating liquor and that the person had refused to submit to the test upon the request of the law enforcement officer, shall, on the first refusal, suspend his license or permit to drive, or the privilege of driving a motor vehicle on the highways of this state given to a nonresident; or if the person is a resident without a license or permit to operate a motor vehicle in this state, the director shall deny to the person the issuance of a license or permit, for a period of **90 days one year**, subject to review as hereinafter provided. For a second or subsequent refusal of such test within a five-year period, the director, upon said receipt of a sworn report, shall suspend his license or

permit to drive, or the privilege of driving a motor vehicle on the highways of this state given to a nonresident for a period of one year; or if the person is a resident without a license or permit to operate a motor vehicle in this state, the director shall deny to the person the issuance of a license or permit, for a period of one year subject to review as hereinafter provided. If such person is acquitted on the charge of driving a motor vehicle upon the highways of this state while under the influence of intoxicating liquor, then in that event the Director of Public Safety may, in his discretion, reduce said period of suspension.

C.4 Create a Per Se DUID Offense

Under the current DUI law, Ala. Code 32-5A-191(a)(1) (1975), the per se limit for alcohol is 0.08. There is no such per se limit for drugs other than alcohol and that needs to be changed.

The suggested change to the statute reads as follows:

- (a) A person shall not drive or be in actual physical control of any vehicle while:
- (1) There is 0.08 percent or more by weight of alcohol in his or her blood; or
 - ~~(2) Under the influence of alcohol;~~
 - ~~— (3) Under the influence of a controlled substance to a degree which renders him or her incapable of safely driving;~~
 - ~~— (4) Under the combined influence of alcohol and a controlled substance to a degree which renders him or her incapable of safely driving; or~~
 - ~~(5) (2) a. Under the influence of any substance which impairs the mental or physical faculties of such person or substances to a degree which renders him or her incapable of safely driving.~~

b. For the purposes of this subdivision, the term “under the influence” means either of the following:

1. Not having the normal use of mental or physical faculties by reason of the introduction into the body of alcohol, a controlled substance, a drug, or any other substance, or combination of two or more of those substances; or

2. There is greater than five nanograms of Delta-9-tetrahydrocannabinol (THC) per milliliter of blood or any measurable amount of any of the following substances in the person's body:

- (i) Alprazolam.
- (ii) Hydrocodone.
- (iii) Amphetamine/methamphetamine.
- (iv) Carisoprodol/meprobamate.
- (v) Diazepam/nordiazepam.
- (vi) Morphine.
- (vii) Cocaine and metabolites.
- (viii) Methadone.

- (ix) Oxycodone.
- (x) Clonazepam.
- (xi) Zolpidem.

It is an affirmative defense to a violation of this subparagraph 2 if the person has a lawful prescription for the substance or is otherwise authorized by law to use the substance.

C.5 Remove five-year roll off period for prior DUI convictions

Under current law, 32-5A-191(q) (1975), a prior DUI conviction can only be used to enhance a defendant's sentence if that conviction occurred within five years of the current conviction.

The problem with having only a five-year "look back" period is that it is the habitual repeat offender who is benefitting from this language and is, in essence, allowed to start over every five years. There have been numerous examples of defendants being convicted of DUI with double-digit prior DUI convictions yet the most serious form of punishment they can receive is the same as someone who is convicted of their first DUI offense.

The suggested change to the statute reads as follows:

32-5A-191(q) A prior conviction ~~within a five-year period~~ for driving under the influence of alcohol or drugs from this state, a municipality within this state, or another state or territory or a municipality of another state or territory shall be considered by a court for imposing a sentence pursuant to this section.