



STATE OF FLORIDA
Impaired Driving Program Assessment

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National Highway Traffic Safety Administration

Technical Assessment Team

**Cynthia Burch
Troy E. Costales
Rob K. Levy
Retired Lt. Don Marose
Honorable G. Michael Witte**

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The team also thanks each of the interviewees for taking the time to share their knowledge and experiences; their candor and preparedness to discuss their activities to target impaired driving in Florida greatly assisted the team in conducting a thorough review.

This report presents a review of Florida's Impaired Driving Program. It is intended to assist in the State's efforts to enhance the effectiveness of its impaired driving program by equipping the criminal justice community and law enforcement officials with the knowledge and skills to detect, arrest, and prosecute impaired drivers. The team believes this report will contribute to Florida's efforts to enhance the effectiveness of its impaired driving program in preventing injuries, saving lives, and reducing economic costs of motor vehicle crashes on Florida's roadways, and commends all who are involved in the day-to-day efforts to reduce impaired driving in Florida.

INTRODUCTION

The mission of the National Highway Traffic Safety Administration (NHTSA) is to reduce deaths, injuries, and economic and property losses resulting from motor vehicle crashes. In its ongoing pursuit to reduce alcohol-related traffic crashes and subsequent fatalities and injuries, NHTSA offers Highway Safety Program Assessments to States and territories.

The Highway Safety Program Assessment is an assistance tool that uses an organized approach, along with well-defined procedures, to provide States and territories with a review of their highway safety and emergency medical services (EMS) programs. Program assessments are provided for impaired driving, occupant protection, traffic records, motorcycle safety, standardized field sobriety testing, driver education, pedestrian and bicycle safety, and EMS.

The purpose of an assessment is to review all components of a given highway safety or EMS program, note the program's strengths and accomplishments, and recommend where improvements can be made. An assessment can be used as a management tool for planning purposes and for making decisions about how to best use available resources. Assessments are cooperative efforts among state highway safety offices, state EMS offices and NHTSA. In some instances, the private sector is also a partner in the effort. NHTSA facilitates the assessment process by assembling a team composed of experts who have demonstrated competence in highway safety or EMS program development and evaluation to complete the assessment.

Program assessments are based on the "Uniform Guidelines for State Highway Safety Programs," which are required by Congress and periodically updated through a public rulemaking process. For each highway safety program area, the criteria against which each state program is assessed have been developed through use of the uniform guidelines, augmented by current best practices.

Under the Fixing America's Surface Transportation Act (FAST ACT), States and territories that have an average impaired driving fatality rate that is 0.60 fatalities per 100 million vehicle miles travelled or higher are considered high range states. States and territories are considered mid-range if their average impaired driving fatality rate is lower than 0.60 but higher than 0.30 and low range if it is 0.30 or lower. Florida is considered a low-range State and therefore is not required to conduct a NHTSA-facilitated assessment of its impaired driving program. Florida takes a proactive and strategic approach to review its impaired driving program and countermeasures.

The Florida Impaired Driving Program Assessment was conducted at the Tru by Hilton Orlando Convention Center area hotel from July 25-29, 2022. Under the direction of Chris Craig, Traffic Safety Administrator, Florida Department of Transportation State Safety Office, arrangements were made for program experts (see Agenda) to deliver briefings and provide support materials to the team on a wide range of topics over a three-day period.

BACKGROUND

Florida is the third largest State in the United States. According to the U.S. Census Bureau in July of 2021, Florida's population was 21,781,128 and continues to grow rapidly. Florida's population grew more than 32 percent between 2000 and 2019 and projections suggest Florida could continue to welcome 600 to 900 new residents per day for the next 25 years.

Of Florida's 67 counties, Palm Beach is the largest spanning 2,578 square miles and Union is the smallest covering just 245 square miles. The largest county is Miami Dade with a population of 2,662,777. The capital city of Florida is Tallahassee.

The median age in Florida is 42.2 years. Approximately 21.1 percent of the State's population is 65 years and over and 19.7 percent are under age 18. The population is predominately white (76.9%) and Hispanic or Latino (26.8%) followed by Black or African American (17%), Asian (3%) and American Indian (0.5%).

The median income in Florida is \$57,703 and the percent of persons below the poverty level from 2016-2020 was 12.4 percent. From 2016-2020, the veteran population was 1,416,472.

Florida's total area is 58,560 square miles (total land area of 54,136 square miles and total water area of 4,424 square miles). The distance from Pensacola to Key West is 792 miles. Florida's highest natural point is 345 feet above sea level. The coastline is 1,197 statute miles, the tidal shoreline is 2,276 statute miles, and Florida has 663 miles of beaches. The longest river, the St. Johns, totals 273 miles. The number of lakes (greater than 10 acres) is about 7,700 with Lake Okeechobee being the largest lake at 700 square miles. Florida also has about 4,500 islands greater than 10 acres. The transportation system includes 275,376 miles of roadway and more than 15.7 million licensed drivers. The mean travel time and commute to work is 27.9 minutes.

Fatality Analysis Reporting System (FARS) data indicate that from 2016-2020, there were 15,943 motor vehicle-related fatalities in Florida, or an average of about 3,189 traffic fatalities per year over the five-year period (see Table 1). Annual traffic fatalities fluctuated, starting at 3,176 in 2016 and ending with 3,331 in 2020. The 2020 total represents a 4.88% increase when compared to the total in 2016. Florida's average population-based fatality rate from 2016-2020 was 15.03 fatalities per 100,000 population, which was more than the national rate of 11.47.

Table 1. Florida Data

	2016	2017	2018	2019	2020	% Change 2016 vs. 2020	% Change 2020 vs. 4-year Avg.
Total Fatalities	3,176	3,116	3,135	3,185	3,331	4.88	5.65
VMT*	215,551	218,826	221,816	226,514	208,076	-3.47	-5.71
VMT Rate**	1.47	1.42	1.41	1.41	1.60	8.84	40
Population	20,627,237	20,977,089	21,254,926	21,492,056	21,733,312	5.36	3.06
Fatality Rate***	15.40	14.85	14.75	14.82	15.33	-0.45	2.47

Data Source: 2016-2020 FARS: <https://cdan.nhtsa.gov>

* Vehicle Miles of Travel (millions)

** Rate per 100 million miles of travel

*** Fatality rate per 100,000 population

Table 2 presents Florida’s motor vehicle-related fatality data as compared to national data. Florida saw a 4.88 percent increase in traffic fatalities from 2016 to 2020 as compared to an increase of 2.69 percent during the same time nationally. Florida’s impaired driving fatalities increased by 3.33 percent from 2016 to 2020 during a time when the national impaired driving percent increase was 6.26 percent.

Table 2. Florida vs. U.S. Fatality Comparison

	2016	2017	2018	2019	2020	Total 2016-2020	% Change 2020 vs. 2016
Total Fatalities	3,176	3,116	3,135	3,185	3,331	15,943	4.88
	37,806	37,473	36,835	36,355	38,824	187,293	2.69
Impaired Driving Fatalities	901	834	822	775	871	4,203	3.33
	10,967	10,880	10,710	10,196	11,654	54,407	6.26

The Florida Department of Transportation State Safety Office and its partners have taken proactive and innovative steps forward in combatting impaired driving. The recommendations included in this assessment report are designed to assist Florida as it furthers its efforts to prevent injuries, save lives, and reduce economic costs related to motor vehicle crashes in the State.

PRIORITY RECOMMENDATIONS

I. PROGRAM MANAGEMENT AND STRATEGIC PLANNING

A. State and Tribal DWI Task Forces or Commissions

- Look for ways to educate the Florida Impaired Driving Coalition on the Florida Department of Transportation State Safety Office impaired driving program area subgrant selection process and/or criteria for activities under consideration in the upcoming Highway Safety Plan.
- Remind the Florida Impaired Driving Coalition that if an immediate need, process improvement, or training opportunity, is identified there is a process to work with the Florida Department of Transportation State Safety Office to see if highway safety subgrant funding is available during the grant year to advance the initiative.
- Invite a treatment provider to join the Florida Impaired Driving Coalition.

B. Strategic Planning

- Consider updating the Impaired Driving Strategic Plan relying on the upcoming three-year Highway Safety Plan requirement, the 2022 Impaired Driving Assessment, and the Strategic Highway Safety Plan.
- Explore the feasibility of creating a visual representation of the entire driving while impaired countermeasures system, including independent pages for specific areas such as the ignition interlock process or administrative license suspension.
- Consider adding data to the system map for each stage in the impaired driving countermeasures system.

C. Program Management

- Continue exploring the creation of a Judicial Outreach Liaison position to enhance training opportunities for the judicial branch.

D. Resources

- None.

II. PREVENTION

A. Responsible Alcohol Service

- Consider enhancing Dram Shop legislation to hold licensed establishments liable for damages resulting from over-serving or for serving anyone under age 21.
- Consider enacting social host legislation that holds individuals liable for damages resulting from over-serving, serving anyone under age 21, or allowing underage drinking in their home.
- Consider developing and disseminating a best practice guide for alcohol service at special events.

- Continue to provide signage to establishments that discourages impaired driving.
- Promote responsible alcohol service training.

B. Community-Based Programs

B-1. Schools

- Coordinate school-based impaired driving prevention activities with evidence-based alcohol and substance-abuse prevention programs.
- Encourage schools to set aside time for Drug Impairment Training for Education Professionals.
- Consider establishing a consortium of college alcohol and substance abuse prevention programs.

B-2. Employers

- Consider integrating impaired driving prevention information into Employee Assistance Programs.
- Provide impaired driving educational materials to employers for inclusion in company newsletters, posting in facilities and employee work areas, and for use in employee safety training.

B-3. Community Coalitions and Traffic Safety Programs

- Continue to provide support to Florida communities that apply for federal Drug-Free Communities and Partnership for Success grants.

B-4. Transportation Alternatives

- Continue to use the term “impaired driving” not “drunk driving,” as a way of raising awareness that drugged or “buzzed” driving is impaired driving.

III. CRIMINAL JUSTICE SYSTEM

A. Laws

- Consider enacting a per se impaired driving drug offense for the presence of impairing substances or their metabolites.
- Consider amending Dram Shop liability to include alcoholic beverage service to an obviously intoxicated person.
- Work to improve statewide uniformity of prosecutor impaired driving diversion program eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.

- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.
- Consider expanding the mandatory use of ignition interlock devices to include all first-time offenders.

B. Enforcement

- Consider expanding the mandatory use of ignition interlock devices to include all first-time offenders.
- Consider developing roll-call videos and/or tip cards for ignition interlock circumvention detection and enforcement.
- Utilize consistent on-site messaging with variable message signs at saturation patrols and High Visibility Enforcement events to increase prevention and deterrence.
- Increase the frequency of High Visibility Enforcement events.
- Consider providing funding for all Standardized Field Sobriety Testing, Advanced Roadside Impaired Driving Enforcement, Standardized Field Sobriety Testing Refresher, and Drug Evaluation and Classification class course materials.
- Boost the number of breath testing instruments deployed in law enforcement officer vehicles to reduce impaired driver processing time.
- Explore legislative language changes to support the development of a robust law enforcement phlebotomy program to reduce processing time.
- Consider a centralized data collection point for subrecipients to submit activity from saturation patrols and sobriety checkpoints increasing the quality, timeliness, and consistency of the information.
- Attempt to refine statutory language in reference to drugged driving to include “or any other impairing substance, or any combination thereof.”
- Explore legislative language changes to allow for the use of search warrants to obtain blood sample evidence when a sample of the blood of a person constitutes evidence relevant to proving that a violation of s.316.193 or s.327.35 has been committed.

C. Prosecution

- Identify funding sources for the creation of and in support of more problem-solving Driving Under the Influence Courts.
- Work to improve statewide uniformity of prosecutor Driving Under the Influence diversion eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.

- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.
- Explore the creation of a centralized Driving Under the Influence data repository project to include Driving Under the Influence diversion data.

D. Adjudication

- Strategize funding sources for the creation of and in support of more problem-solving Driving Under the Influence Courts.
- Work to improve statewide uniformity of prosecutor Driving Under the Influence diversion eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.
- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.

E. Administrative Sanctions and Driver Licensing Programs

E-1. Administrative License Revocation and Vehicle Sanctions

- Conduct a comprehensive review of the Ignition Interlock Device program to identify any trends, successes, or points for improvement.

F. Programs

- Explore the feasibility of enhancing the Graduated Driver License law to meet National Highway Traffic Safety Administration best practices.
- Continue to pursue the use of facial recognition software prior to issuance of identification cards and driver licenses.

IV. COMMUNICATION PROGRAM

- Consider expanding the Impaired Driving Marketing and Communications Plan to report on all work done in the communications and outreach effort.
- Enhance the management and implementation of the communications and outreach programs through Census Tract data that includes race, ethnicity, and languages of the communities across Florida.
- Consider the perception of risk of detection, arrest, prosecution, and punishment for impaired driving when creating the State-initiated impaired driving media messages.
- Expand the “impairment” portion of the media campaigns to also emphasize drug-impaired driving.
- Evaluate if the time is right to bring back messages around designated drivers, particularly aimed at locations frequented by tourists and guests to the State.

- Explore saving room in the media contract and calendar to place messages around new laws, rules, or judicial cases that are related to the detection, arrest, prosecution, or punishment for impaired driving.

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

A. Screening and Assessment

A-1. Criminal Justice System

- Consider pursuing access to criminal background checks for the benefit of impaired driving offender evaluation.

A-2. Medical and Other Settings

- Promote the provision of Screening and Brief Intervention at all primary healthcare facilities and through Employee Assistance Programs.
- Consider repealing the Alcohol Exclusion Law.

B. Treatment and Rehabilitation

- Consider implementing additional Driving Under the Influence Courts in Florida.

VI. PROGRAM EVALUATION AND DATA

A. Evaluation

- Expand evaluations of the outreach programs to include geographical outcome analyses. An example would be to review crash trends in areas after focused outreach to identify any behavioral changes seen in crash and citation data.
- Consider conducting an independent, comprehensive, and scientific evaluation of the Impaired Driving Program that combines process and outcome measures for outreach and enforcement projects; utilize all expertise on the Florida Impaired Driving Coalition to ensure consideration of all disciplines.

B. Data and Records

- Continue to pursue options for accessing and incorporating any information from diversion programs.
- Continue to pursue the merging of crash reporting data systems in the Florida Department of Transportation Crash Analysis Reporting system and the Signal 4 Analytics project.

C. Driver Records System

- Support the implementation of the State-to-State Verification Service.

I. Program Management and Strategic Planning

Effective impaired driving programs begin with strong leadership, sound policy development, effective and efficient program management, and coordinated planning, including strategic planning. Program efforts should be data-driven, focusing on populations and geographic areas that are most at risk; are evidence-based; and determined through independent evaluation as likely to achieve success. Programs and activities should be guided by problem identification, carefully managed and monitored for effectiveness, and have clear measurable outcomes. Adequate resources should be devoted to the problem, and the costs should be borne, to the extent possible, by impaired drivers. Strategic planning should provide policy guidance; include recommended goals and objectives; and identify clear measurable outcomes, resources, and ways to overcome barriers.

A. State and Tribal DWI Task Forces or Commissions

Advisory

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

State-level and tribal task forces and commissions should:

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

Status

Florida has an Impaired Driving Coalition (FIDC) that was established in 2009 under the authority of the Florida Department of Transportation (FDOT). The FIDC works to identify, call attention to, and prioritize the State's most pressing impaired driving issues. The FIDC is charged to develop and approve an impaired driving strategic plan.

The FIDC is recognized by the highway safety community as a leading voice for impaired driving efforts. Membership consists of individuals with expertise and familiarity of Florida-specific impaired driving related programs, activities, processes, concerns, and needs. National, state, tribal,

and local level government, law enforcement, judiciary, highway safety advocacy groups, alcohol and drug treatment, educators, and public health officials are engaged and attend. The vast network of partners works collaboratively to review strategies which have been proven effective in reducing the occurrence of Driving Under the Influence (DUI).

FIDC membership is on a voluntary basis and members receive no compensation for services. Travel and meeting expenses, meeting support, and website maintenance are covered through a subgrant. All coalition members must be approved by the FDOT State Safety Office and the agencies supporting the coalition subgrant. Currently the area of treatment is not represented on the FIDC.

Current FIDC work items include the development and publication of model legislative language and best practices, analysis of Florida crash and citation data, recognition of statewide systemic issues, and the efforts on the objectives established by the Florida Strategic Highway Safety Plan. The FIDC does have a stand-alone website (<https://www.flimpaireddriving.com/index.html>). If the FIDC identifies an immediate need, process improvement, or training opportunity, there is a process to work with the FDOT State Safety Office to see if highway safety grant funding is available to advance the initiative.

The FIDC is engaged in the initial Highway Safety Plan (HSP) creation steps to help encourage potential agencies to apply for highway safety subgrants. The FIDC is not engaged in the project selection process for highway safety subgrants issued by the FDOT State Safety Office or the Annual Report content. During FIDC meetings and after the formal meeting sessions, conversations between agency representatives assist with coordination of programs and activities across the various state, local, and non-profit agencies that have a role in the impaired driving countermeasure system. The FIDC does not have access to any FDOT State Safety Office subgrant funding to assist in moving initiatives forward, research, or coordinating programmatic priorities.

Recommendations

- Look for ways to educate the Florida Impaired Driving Coalition in the Florida Department of Transportation State Safety Office impaired driving program area subgrant selection process and/or criteria for activities under consideration in the upcoming Highway Safety Plan.
- Remind the Florida Impaired Driving Coalition that if an immediate need, process improvement, or training opportunity, is identified there is a process to work with the Florida Department of Transportation State Safety Office to see if highway safety subgrant funding is available during the subgrant year to advance the initiative.
- Invite a treatment provider to join the Florida Impaired Driving Coalition.

B. Strategic Planning

Advisory

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

- *Define a vision for the state that is easily understood and supported by all partners.*
- *Utilize best practices in strategic planning.*

- *Be based on thorough problem identification that uses crash, arrest, conviction, driver record, and other available data to identify the populations and geographic areas most at risk.*
- *Allocate resources for countermeasures determined to be effective that will impact the populations and geographic areas most at risk.*
- *Include short-term objectives and long-range goals. Have clear measurable outcomes.*
- *Be an integral part of or coordinate with and support other state plans, including the Highway Safety Plan and Strategic Highway Safety Plan.*
- *Establish or adjust priorities based on recommendations provided to the state as a result of reviews and assessments, including this impaired driving assessment.*
- *Assign responsibility and accountability among the state's partners for the implementation of priority recommendations.*

Status

Florida is committed to decreasing fatalities and adopted a zero fatalities goal in its Strategic Highway Safety Plan (SHSP), last updated in 2021. The Florida Transportation Plan Steering Committee and its Safety Subcommittee engaged multiple partners which included federal and state agencies, Metropolitan Planning Organizations, regional planning councils, local governments, and law enforcement in the creation of the SHSP. Input leading up to the 2021-2025 SHSP was gathered through surveys, workshops, safety coalition meetings, and partner briefings.

The five-year, data-driven plan includes action-oriented strategies addressing the four Es of traffic safety – engineering, education, enforcement, and emergency response. The SHSP identifies key strategies that are organized into four additional approaches, which we refer to as the four Is: Information Intelligence, Innovation, Insight into Communities, and Investment and Policies categories. Impaired driving is part of the User Behavior emphasis area. Florida's Highway Safety Plan (HSP) and Highway Safety Improvement Program (HSIP) are data-driven and align with the SHSP.

The HSP, which is developed and implemented by the Florida Department of Transportation (FDOT) State Safety Office, outlines how federal highway safety subgrant funds will be used to address national, state, and local priority program areas, including impaired driving. Projects in the HSP are expected to improve traffic safety to reduce crashes, injuries, and fatalities on the State's roadways. An open-competitive process is used to gather potential activities for the upcoming year. Typically, the applications for subgrants are due in January or February for an October start date. These requests are evaluated, and grant funds are awarded based on how well a proposed project meets the goals of the SHSP and HSP data analysis results.

Year over year expectations and activities in the HSP are adjusted based on recent legislation, data, and funding requirements.

The Florida Impaired Driving Coalition (FIDC) is not engaged in the project selection process for highway safety impaired driving subgrants issued by the FDOT State Safety Office or the Annual Report content. The HSP will soon be a three-year document per federal statute.

There is a 2019-2021 Impaired Driving Strategic Plan which was sponsored by the FDOT and the FIDC. The discussion and content of the Strategic Plan are based on NHTSA's Uniform Guidelines for State Highway Safety Programs for Impaired Driving No. 8 (2006) and the most recent Impaired Driving Program Assessment (2015).

The overall and individual subsets of the Driving Under the Influence process are not written out in a visual map, process map, or flowchart. There is no easy way to follow along for the steps and counts of offenders in each stage of the criminal justice system related to impaired driving, from arrest to disposition to conclusion. There are hand-offs between different State agencies or local programs as well as decision points to continue forward or discontinue a case which can be displayed in a visual manner to help with process issues and improvements. The impaired driving countermeasure system is complex. With the uptick of retirements and new staff stepping into highway safety-related positions, a visual reference would be a very helpful tool for succession planning, education, and orientation.

Recommendations

- Consider updating the Impaired Driving Strategic Plan relying on the upcoming three-year Highway Safety Plan requirement, the 2022 Impaired Driving Assessment, and the Strategic Highway Safety Plan.
- Explore the feasibility of creating a visual representation of the entire driving while impaired countermeasures system, including independent pages for specific areas such as the ignition interlock process or administrative license suspension.
- Consider adding data to the system map for each stage in the impaired driving countermeasures system.

C. Program Management

Advisory

States should establish procedures and provide sufficient oversight to ensure that program activities are implemented as intended. The procedures should:

- *Designate a lead agency that is responsible for overall program management and operations;*
- *Ensure that appropriate data are collected to assess program impact and conduct evaluations;*
- *Measure progress in achieving established goals and objectives;*
- *Detect and correct problems quickly;*
- *Identify the authority, roles, and responsibilities of the agencies and personnel for management of the impaired driving program and activities; and*
- *Ensure that the programs that are implemented follow evidence-based best practices.¹*

¹ See "Countermeasures That Work: A Highway Safety Countermeasure Guide for State Highway Offices," Sixth Edition, 2011.

Status

The Florida Department of Transportation (FDOT) State Safety Office serves as the lead agency for impaired driving in the State. The FDOT State Safety Office has a dedicated Impaired Driving Program Manager who oversees all impaired driving subgrants and participates in the statewide Florida Impaired Driving Coalition (FIDC). The FIDC, while working on statewide impaired driving issues such as model legislation, is also recognized as a leading voice on impaired driving for the State.

The FDOT State Safety Office works in partnership with the Florida Highway Patrol (FHP), county and local law enforcement agencies to address impaired driving enforcement. The FHP participates even though they are currently not using FDOT State Safety Office subgrants. The FDOT State Safety Office relies on their Law Enforcement Liaisons to provide a law enforcement perspective into the oversight and program management activity.

Throughout the impaired driving countermeasures system, crash, laboratory, citation, and adjudication data are used for program evaluations and systemic analysis. These data are also used to assess progress made in achieving the impaired driving goals and performance measures outlined in the Strategic Highway Safety Plan and Highway Safety Plan. Most data sources are available online and are timely to complete the program evaluations for highway safety programs as required by state and federal law or rule.

All subgrant funded projects are required to have a data reporting component that allows for the evaluation of the project's impact in reducing fatalities and injuries. Once the subgrant is underway, these programs are monitored as an on-site or desktop action by the Impaired Driving Program Manager for performance and compliance with subgrant requirements.

There is no State level Judicial Outreach Liaison. This position would be an important enhancement to the overall impaired driving countermeasures program management. The technology and substances that are abused while driving is ever-changing. Expanding the judicial training opportunities will help with consistency, timeliness, and accuracy for all parties involved in impaired driving cases.

Recommendation

- Continue exploring the creation of a Judicial Outreach Liaison position to enhance training opportunities for the judicial branch.

D. Resources

Advisory

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

- *Allocate funding, staffing, and other resources to impaired driving programs that are:*
 - *Adequate to meet program needs and proportional to the impaired driving problem;*

- *Steady and derived from dedicated sources, which may include public or private funds; and*
- *Financially self-sufficient, and to the extent possible paid by the impaired drivers themselves. Some States achieve financial self-sufficiency using fines, fees, assessments, surcharges, or taxes. Revenue collected from these sources should be used for impaired driving programs rather than returned to the State Treasury or General Fund.*
- *Meet criteria to enable access to additional funding through various incentive programs.*
- *Identify opportunities and leverage resources on behalf of impaired driving efforts.*
- *Determine the extent and types of resources available from all sources (local, state, and federal; public and private) that are dedicated to impaired driving efforts.*
- *Designate a position and support the individual in that position with sufficient resources to adequately serve as a focal point for impaired driving programs and issues.*

Status

The Florida Department of Transportation (FDOT) State Safety Office serves as the lead agency for impaired driving in the State. The FDOT State Safety Office has a dedicated Impaired Driving Program Manager who oversees all impaired driving subgrants, including the routine reporting and monitoring oversight.

The State qualifies to receive the Section 405d impaired driving incentive grant. The FDOT State Safety Office has received and allocated an increasing amount of subgrant funding toward impaired driving. The subgrant expenditure rates have stayed relatively steady, over 75 percent expended, for the past three years despite COVID restrictions and civil unrest. The largest proportion of these funds is used for enforcement, education, and paid media efforts. The funds are provided for the development and implementation of programs that address traffic safety needs or to expand ongoing safety program activities in high priority areas of the State.

The FDOT State Safety Office subgrant funds are seed money to initiate a new local program or for program enhancement. A subgrant expectation is for eventual self-sufficiency when the subgrant funding ends. Impaired driving fine money is not allocated back to law enforcement, prosecution, treatment, or outreach activities specifically. These funds are part of the community's or State Assembly's General Fund. General Funds are then allocated to the various activities through the normal budgeting processes.

Recommendations

- None.

II. Prevention

Prevention programs are most effective when they utilize evidence-based strategies, that is, they implement programs and activities that have been evaluated and found to be effective or are at least rooted in evidence-based principles. Effective prevention programs are based on the interaction between the elements of the public health model: 1) using strategies to develop resilient hosts, e.g., increase knowledge and awareness or altering social norms; 2) reducing exposure to the dangerous agent (alcohol), e.g., alcohol control policies and; 3) creating safe environments,

e.g., reducing access to alcohol at times and places that result in impaired driving. Prevention programs should employ communication strategies that emphasize and support specific policies and program activities.

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

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

A. Responsible Alcohol Service

Advisory

States should promote policies and practices that prevent underage drinking and over-service by anyone.

States should:

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

Status

The Florida Department of Business and Professional Regulation’s Division of Alcoholic Beverages and Tobacco (DABT) licenses the alcoholic beverage and tobacco industries, collects and audits taxes and fees paid by the licensees, and enforces the laws and regulation of the

alcoholic beverage and tobacco industries, pursuant to Chapter 210, Chapters 561-565, and Chapters 567-569 of Florida Statutes.

In 2021, the last year for which data are available, a total of 4,959 compliance checks were completed by the DABT. Of these, 720 resulted in positive buys. Florida statute 562.11 provides criminal penalties for the sale of alcohol to underage persons. The DABT may take administrative action against the alcoholic beverage licensee. The DABT assists county and local agencies across the state with similar programs.

The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) has developed a digital driver's license, Florida Smart ID, as well as verification apps. When used in conjunction, the proof of age verifier will allow retailers to securely verify proof of age for age-restricted products and venues. The verification process occurs through the app and is authenticated by FLHSMV, so there is no way for the customer to "fake" a Florida Smart ID. The proof of age verifier will display boldly whether a customer is over the age of 21, 18, or under 18. FLHSMV's credential was established according to American Association of Motor Vehicle Administrators (AAMVA) best practices, and features a barcode, which can be scanned to validate the credential. Florida SMART ID also features Radio Frequency Identification (RFID) technology, which connects directly to the State's database and can be used at roadside traffic stops as well as at retail locations, to obtain data such as license suspension. As of June 2022, Florida has 75,364 enrollments with 28,798 activations of the Florida Smart ID.

A new software called Age-ID can spot fraudulent out-of-state IDs and is rolling out as retailers and servers receive server training. There are currently no statutory provisions specifically mandating the use of technology for verifying age.

Florida's Dram Shop liability statute is very limited. According to Florida Statute 768.125, "A person who sells or furnishes alcoholic beverages to a person of lawful drinking age shall not thereby become liable for injury or damage caused by or resulting from the intoxication of such person, except that a person who wilfully and unlawfully sells or furnishes alcoholic beverages to a person who is not of lawful drinking age or who knowingly serves a person habitually addicted to the use of any or all alcoholic beverages." However, knowledge of a person's addiction only applies when that individual's family has provided the establishment with a letter stating that the individual has an alcohol abuse problem. There is no criminal action or license consequence for over-serving, and the statute language hinders successful civil suits against servers.

Florida has no explicit social host statute, though individuals can be held liable for serving minors. Florida Statute 856.015 states that a person having control of any residence may not allow an open house party to take place at the residence if any alcoholic beverage or drug is possessed or consumed at the residence by any minor where the person knows that an alcoholic beverage or drug is in the possession of or being consumed by a minor at the residence, and where the person fails to take reasonable steps to prevent the possession or consumption of the alcoholic beverage or drug. In addition, Florida Statute 562 outlines additional penalties for selling alcohol to persons under 21 years old.

Mothers Against Drunk Driving (MADD) promotes social host statutes and provides outreach and assistance to any municipality interested in pursuing one. Holding parents liable for their underage children's alcohol use is another strategy. In 2015, the Florida Sheriffs Association came together

to promote restrictions on drinking alcohol on northwest Florida's beaches. Underaged persons caught drinking were taken to a facility in DeFuniak Springs, where parents had to pick them up. This is reported to have reduced arrests.

Laws imposing liability on social hosts for alcohol-related deaths and injuries vary from state to state, while some states have passed statutes that explicitly give immunity to social hosts. As of 2018, eighteen states had general social host laws, while nine states had laws specific to minors. Most ordinances are implemented at a community level. To see the language of one such ordinance see attachment: Social Host Ordinance, Monroe County NY.

Florida has no restrictions on happy hours or other alcohol sales promotions. However, Florida statutes do prohibit serving to visibly intoxicated persons, limit hours of sale, and require 500-foot setbacks from K-12 schools. Florida counties and incorporated municipalities may also enact their own hours of sale and regulate outlet location and density through local zoning regulations. For an alcoholic beverage license to be issued, the applicant must have local zoning approval.

A significant underage drinking issue for Florida is Spring Break. The DABT issues citations for underage possession, but the problem is beyond the resources of the DABT and local law enforcement. The DABT does conduct joint operations with campus and local law enforcement, especially at football games and other large events.

Regarding alcohol service at special events, the State of Florida allows a bona fide non-profit civic organization to sell alcoholic beverages for consumption for a period not to exceed three days for a single event. Best practices for special event alcohol service include: banning personal alcohol possession, setting a policy for handling people who have had enough to drink, limiting alcohol sponsorship of the event, setting up an enclosed, monitored setting for alcohol consumption, posting signs about liquor laws and liability (including underage and excessive drinking), establishing procedures for checking IDs, identifying legal drinkers with a non-transferable wristband, requiring servers be of legal age (preferably Responsible Beverage Server trained), having a clear chain of command, requiring liability insurance, limiting size of drinks to 12 ounces of beer, five ounces of wine and one ounce of liquor, providing food to slow alcohol absorption, offering alternative beverages, and having adequate staffing with properly trained persons at entrances to the alcohol concession area.

The DABT's Bureau of Law Enforcement promotes and enforces the safe and responsible operation of environments where alcoholic beverages are sold, by conducting routine inspections and investigating alleged license or permit violations and related criminal activity.

There is no statewide coordination among State, county, municipal, and tribal law enforcement agencies to determine where impaired drivers had their last drink. This information could be useful in monitoring compliance with regulations. Hillsborough/Tampa law enforcement have been doing some work on this issue by going back to establishments where many impaired drivers are coming from, to offer Responsible Vendor Training.

Responsible Vendor Training is a voluntary program offered to licensees and servers at bars and restaurants. Participants learn about the laws and policies regarding serving underage patrons and serving intoxicated patrons. Private vendors, the DABT, and some law enforcement agencies

provide this training, which encourages the formation and implementation of good management policy.

Licensed alcohol retailers who are cited for violations of beverage control laws may use completion of Responsible Vendor Training as a mitigating factor in sanctions. The DABT also provides licensees with the opportunity to qualify as a Responsible Vendor. The designation allows licensees to avoid sanctions for a first violation of alcohol sales rules. Some insurance vendors offer a discount to Responsible Vendors.

States that have established voluntary Responsible Server Training programs usually, but not always, provide incentives for retailers to participate, but do not impose penalties for those who decline involvement. Incentives vary by State and include: (1) a defense in dram shop liability lawsuits (cases in which a third party sues the retailer for damages resulting from the retailer providing alcohol to a minor or intoxicated person); (2) discounts in dram shop liability insurance; (3) mitigation of fines or other administrative penalties for sales to minors or sales to intoxicated persons; and (4) protection against license revocation for sales to minors or sales to intoxicated persons.

There is no requirement that alcohol sales and service establishments display educational information to discourage impaired driving or to promote designated driver or alternative transportation. However, National Highway Traffic Safety Administration and Florida Department of Transportation signage is reported to be ubiquitous. NHTSA's guidelines for a comprehensive impaired driving prevention program include a public information program designed to make the public aware of the problem of impaired driving through paid and earned media and of the State's efforts to address it. [Jennifer: "Specifically, can NHTSA grant funding pay for signage beyond paper materials (i.e., metal/vinyl, etc.)"]

Recommendations

- Consider enhancing Dram Shop legislation to hold licensed establishments liable for damages resulting from over-serving or for serving anyone under age 21.
- Consider enacting social host legislation that holds individuals liable for damages resulting from over-serving, serving anyone under age 21, or allowing underage drinking in their home.
- Consider developing and disseminating a best practices guide for alcohol service at special events.
- Continue to provide signage to establishments that discourages impaired driving.
- Promote responsible alcohol service training.

B. Community-Based Programs

B-1. Schools

Advisory

School-based prevention programs, beginning in elementary school and continuing through college and trade school, can play a critical role in preventing underage drinking and impaired driving.

These programs should be developmentally appropriate, culturally relevant, and coordinated with drug prevention and health promotion programs.

States should:

- *Implement K-12 traffic safety education, with appropriate emphasis on underage drinking and impaired driving, as part of state learning standards and comprehensive health education programs;*
- *Promote alcohol-and drug-free events throughout the year, with particular emphasis on high-risk times, such as homecoming, spring break, prom, and graduation;*
- *Establish and enforce clear student alcohol and substance use policies including procedures for intervention with students identified as using alcohol or other substances, sanctions for students using at school, and additional sanctions for alcohol and substance use by students involved in athletics and other extra-curricular activities;*
- *Provide training for alcohol and drug impaired driving, and Screening and Brief Intervention (SBI) to school personnel such as resource officers, health care providers, counselors, health educators, and coaches to enable them to provide information to students about traffic safety and responsible decisions, and identify students who may have used alcohol or other drugs;*
- *Encourage colleges, universities, and trade schools to establish and enforce policies to reduce alcohol, other drug, and traffic safety problems on campus, and to work with local businesses and law enforcement agencies to reduce such problems in neighboring communities;*
- *Provide training for alcohol and drug impaired driving, and Screening and Brief Intervention (SBI), to college personnel such as student affairs, student housing, health care providers, counselors, health educators, and coaches to enable them to provide information to students about traffic safety and responsible decisions, and identify students who may have used alcohol or other drugs; and*
- *Establish and support student organizations that promote traffic safety and responsible decisions; encourage statewide coordination among these groups.*

Status

The 2021 Florida Youth Substance Abuse Survey (FYSAS) was a collaborative effort between the Florida Departments of Health, Education, Children and Families, Juvenile Justice, and the Governor's Office of Drug Control. It is based on the "Communities That Care" survey, assessing risk and protective factors for substance abuse, in addition to substance abuse prevalence.

While the 2021 FYSAS generated a range of valuable prevention planning data – including the “strengths to build on” and “opportunities for improvement”– four sets of findings are especially noteworthy:

- Florida students reported dramatic reductions in alcohol and cigarette use. Between 2010 and 2021, the prevalence of past 30-day alcohol use declined by nearly 15 percentage points, binge drinking declined by nearly seven percentage points, and past-30-day cigarette use declined by nearly eight percentage points.
- Among high school students, binge drinking declined by 10 percentage points. Still, one in eight high school students reported blacking out from alcohol use. Also, about one in seven high school students reported riding in a car driven by someone who had been drinking.
- Despite strong reductions in use for nearly all substance categories, marijuana use among Florida students has declined only slightly, to about nine percent overall and 14 percent among high school students. Of greater significance is a decrease in the perception of risk for using marijuana. Students who perceive great risk of harm dropped from 29 percent in 2010 to 21 percent in 2021. Among high school students, the rate dropped to 16 percent. By contrast, perception of risk for using alcohol remained at around 65 percent. Accompanying this trend, nearly one out of five high school students reported riding in a car driven by someone who had been using marijuana and about one in 12 reported driving after marijuana use.
- Past 30-day rates of use for substances other than alcohol, cigarettes, and marijuana are very low, ranging from 2.1 percent for inhalants to 0.3 percent for heroin and steroid use.

Over the last several years, Florida has implemented the Next Generation Sunshine Standards that include academic content standards, creating new expectations for what students need to know and be able to do. The Florida Standards for Health Education include strands in health literacy that address the role of alcohol in injury and other health consequences. Death or injury from car crashes and underage drinking and distracted driving is covered in the 8th grade, but it appears that the courses intended to meet these standards do not include specific impaired driving information at the high school level.

Mothers Against Drunk Driving (MADD) provides a variety of prevention programs in Florida. MADD also conducts victim impact panels in 29 localities. MADD provides the *Power of Parents* program in schools and reached over 12,000 parents last year. The program includes both middle and high school handbooks that give parents tools to start the conversation about teen drinking, set family rules, and enforce consequences.

MADD also offers the *Power of You(th)* program that includes the *Power of You(th) Toolkit for Student Leaders*, *Toolkit for Community Partners*, *Toolkit for Educators*, and information about the

National Teen Influencer Group. Florida MADD estimates having reached thirty to fifty-thousand youth last year.

Florida MADD also made a series of videos for parents with safety messages and mocktail recipes. These videos were so popular that they have been shared across the US and Canada.

The Florida Sheriffs Association's (FSA) *Teen Driver Challenge* (TDC) program was developed at the request of Florida sheriffs to combat the high crash and fatality rate of teen drivers on Florida highways. The TDC program is a 12-hour course, including four hours of classroom (including a pre- and post-test) and eight hours of hands-on instruction on a driving course. The program is presented to 15- to 19-year-old students over a two-day period, ideally with a five-to-one student-to-instructor ratio.

The classroom portion of the TDC program covers the workbook and deals with crash-related issues such as vehicle dynamics, braking, steering, and traffic laws. Specific chapters of the workbook deal with aggressive driving, distracted driving (texting, cell phone use, etc.), driving under the influence (DUI), and seat belt use.

The Florida Teen Safe Driving Coalition (FTSDC) was instrumental in working with the Florida Department of Education to update its Driver Education and mandatory Health and Physical Education programs to include relevant teen traffic safety updates. The revisions include the effects of alcohol and other drugs on driving performance.

The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) provides in-person training to high schools throughout the State on the awareness and dangers associated with impaired driving. In addition, all first-time drivers under age 18 in the State must complete a four-hour Traffic Law Substance Abuse Education course prior to driver license issuance. This course educates the first-time driver on the dangers associated with impaired driving, the laws and consequences of the behavior, and the long-term complications with excessive alcohol and other drug use.

The FLHSMV supports and utilizes the NHTSA "Drive Sober or Get Pulled Over" campaign annually. In addition, many of the impaired driving programs that are licensed by FLHSMV perform "Prom Promise" and "Project Graduation" events to reduce impaired driving during these high-risk times throughout the year.

Florida Students Against Destructive Decisions (SADD) and the FTSDC host events throughout the year, permitting engagement of area partners. They host teen traffic safety presentations during Prom, Spring Break, Homecoming, Graduation, the "100 Deadliest Days", and other times. Safe driving and prevention of alcohol and drug use is a part of Teen Driver Safety Week and Red Ribbon Week. AAA partners with SADD and FTSDC to offer "Prom Promise" outreach kits.

The Florida Department of Transportation (FDOT) provides subgrant funding to support the FTSDC as well as Florida SADD which encourages safe decisions among teens and their caregivers. The FTSDC has over 65 formal members and over 75 "friends" of the Coalition. SADD encourages a no-use lifestyle among youth and has over 78 registered chapters and advisors throughout the State of Florida.

Law enforcement provides presentations to high school Driver Education classes, as well as impaired driving crash simulations, in partnership with the FDOT and AAA.

Drug Impairment Training for Education Professionals (DITEP) is a nationally recognized course offered to school personnel, including administrators, teachers, counsellors, and staff, to aid in their knowledge and ability to recognize substance use in students. DITEP is reportedly offered by some police departments and MADD, but is not widely known or implemented in Florida. Time constraints are the reason most often given. One means of increasing engagement in DITEP trainings is to offer it during the Summer, with attendees receiving a stipend for their time. In some localities, non-profits such as substance misuse prevention and treatment programs provide DITEP free of charge.

The FDOT works with MADD personnel to provide messaging on underage drinking and impaired driving prevention from K-12 into college. MADD works directly with post-secondary institutions via university police or student unions to promote impaired driving prevention in the age 21 and over demographic and underage drinking to the under-21 demographic. Classroom engagement with campus health departments takes place throughout Florida with MADD staff, volunteers, and student liaisons.

Florida’s Community Traffic Safety Teams (CTST) include partners from communities that house colleges and universities. State University Police Departments also have representatives on CTSTs. These teams enhance campus-community connections and cooperation in dealing with issues including substance misuse and related behaviors.

Some Florida colleges have gained reputations for students’ heavy drinking, with several receiving high rankings on various “best party schools” lists. The extent to which these rankings reflect actual risk behaviors of students is questionable. For example, results from the Florida State University (FSU) 2017 National College Health Assessment survey indicated that more than three out of four FSU students drank alcohol in the 30 days prior to the survey.

	Male	Female	Total
Never used	11.1	10.1	10.3
Used, but not in the last 30 days	9.8	11.9	11.3
Used 1-9 days	55.6	61.9	60.4
Used 10-29 days	20.9	15.7	16.9
Used all 30 days	2.6	0.5	1.1
<i>Any use within the last 30 days</i>	79.1	78.1	78.4

Table 3

Survey results also indicated that 1.8 percent of students reported driving after having five or more drinks in the last 30 days, and 25.5 percent of students reported driving after having any alcohol in the last 30 days. Students responding “N/A, don’t drive” and “N/A don’t drink” were excluded from this analysis.

Florida State University and some other Florida colleges and universities require all incoming freshman to complete *Alcohol Edu*, a web-based alcohol education program. Several Florida colleges and universities have an amnesty or *Good Samaritan Policy* that encourages students to

make responsible decisions in seeking medical attention during serious or life-threatening situations that result from alcohol and/or other drug use or abuse and in any situation where medical treatment is reasonably believed to be appropriate. This policy seeks to diminish fear of disciplinary and conduct sanctions in such situations.

While the State does not provide training in Screening and Brief Intervention (SBI) to college personnel, many colleges and universities have these services, as part of their substance misuse prevention and/or 26 counselling programs. No coordinated efforts among the colleges and universities appear to be in place to implement prevention strategies and there is no consortium of college alcohol and substance abuse programs. Collegiate consortia have been implemented in some parts of the country. These groups can be organized statewide, regionally, or locally. Often initiated under a state incentive grant, some continue to work together for many years. Generally, they are simply an informal means by which college and university prevention and/or treatment personnel meet periodically to share best practices and support around their services and initiatives and build college-community collaboration. A sample of a successful collegiate task force is attached.

Recommendations

- Coordinate school-based impaired driving prevention activities with evidence-based alcohol and substance-abuse prevention programs.
- Encourage schools to set aside time for Drug Impairment Training for Education Professionals.
- Consider establishing a consortium of college alcohol and substance abuse prevention programs.

B-2. Employers

Advisory

States should provide information and technical assistance to employers and encourage them to offer programs to reduce underage drinking and impaired driving by employees and their families. These programs can be provided through Employee Assistance Programs (EAP) or Drug Free Workplace programs.

These programs should include:

- *Model policies to address underage drinking, impaired driving, and other traffic safety issues, including seat belt use and speeding;*
- *Employee awareness and education programs;*
- *Management training to recognize alcohol and drug use and abuse, and appropriate responses;*
- *Screening and Brief Intervention, assessment and treatment programs for employees identified with alcohol or substance use problems (These services can be provided by internal or outside sources such as through an EAP with participation required by company policy);*
- *Underage drinking and impaired driving prevention strategies for young employees and programs that address use of prescription or over-the-counter drugs that cause impairment.*

Status

The Florida Impaired Driving Coalition (FIDC) brings together officials from relevant state agencies, law enforcement, and others concerned with combating impaired driving. Several community coalitions also work with the FIDC to encourage cross-collaboration and get the overarching message of the dangers of impaired driving throughout all groups in Florida.

There is currently no coordinated program to provide employer-based impaired driving prevention activities. Some employers in Florida utilize the services of Employee Assistance Programs (EAP) provided by a variety of private organizations. By addressing alcohol and substance abuse, EAPs have an indirect effect on impaired driving. In addition, on-the-job driving incidents can serve as the event that leads to an intervention to address alcohol or substance abuse. To address such issues, EAPs usually offer services such as employee education, individual assessments, organizational assessments, management consultation, referrals to treatment, and short-term counseling. Various types of EAPs exist in different kinds of workplaces. Larger organizations may have in-house services, while others may refer out to contracted service providers.

An EAP or Human Resources department or director may provide educational materials that can be posted in an employee lunchroom or office, or included in company communications. Local or state organizations such as MADD or the National Council on Alcohol and Drug Dependence (NCADD), as well as NHTSA and other state and federal agencies are also excellent sources of messaging and materials for employees.

Recommendations

- Consider integrating impaired driving prevention information into Employee Assistance Programs.
- Provide impaired driving educational materials to employers for inclusion in company newsletters, posting in facilities and employee work areas, and for use in employee safety training.

B-3. Community Coalitions and Traffic Safety Programs

Advisory

Community coalitions and traffic safety programs provide the opportunity to conduct prevention programs collaboratively with other interested parties at the local level. Coalitions should include representatives of: government; highway safety; enforcement; criminal justice; liquor law enforcement; public health; education; driver licensing and education; employers and unions; the military; medical, health care and treatment communities; multi-cultural, faith-based, advocacy and other community groups.

States should:

- *Encourage communities to establish community coalitions or traffic safety programs, comprised of a wide variety of community members and leaders;*

- *Ensure that representatives of local traffic safety programs participate in existing alcohol, substance abuse, injury control, and other related coalitions, (e.g., Drug Free Communities, SPF-SIG), to assure that impaired driving is a priority issue;*
- *Provide information and technical assistance to these groups, including data concerning the problem in the community and information identifying evidence-based underage drinking and impaired driving programs;*
- *Encourage these groups to provide support for local law enforcement and prevention efforts aimed at reducing underage drinking and impaired driving; and*
- *Encourage professionals, such as prosecutors, judges, nurses, doctors, emergency medical personnel, law enforcement officers, and treatment professionals, to serve as community spokespeople to educate the public about the consequences of underage drinking and impaired driving.*

Status

In addition to the Florida Impaired Driving Coalition, the Florida Department of Transportation (FDOT) sponsors seven district Community Traffic Safety Teams (CTSTs). These teams are locally based, data-driven groups of highway safety advocates that are committed to a common goal of improving traffic safety in their communities. CTSTs are multi-jurisdictional, with members from city, county, State, and occasionally federal agencies, as well as private industry representatives and local citizens. CTST boundaries are determined by the organizations comprising the team and can be a city, a portion of a county, an entire county, multiple counties, or any other logical arrangement.

Integrating the efforts of the four E disciplines that work in highway safety, (Engineering, Enforcement, Education/Public Information, and Emergency Response) is also encouraged. By working together with interested citizens and other traffic safety advocates within their communities, the CTSTs help to solve local traffic safety problems and promote public awareness of traffic safety best practices through campaigns that educate drivers, motorcyclists, pedestrians, and bicyclists about the rules of the road.

Each FDOT District has a full-time CTST Coordinator who works closely with the CTSTs in their geographic area. In addition, the FDOT State Safety Office has a Traffic Safety Program Manager who serves as a Central Office resource to the District Coordinators. CTST meetings are open to the public, and the team solicits information and participation from anyone present. The FDOT provides subgrant funding assistance to support the CTSTs, a network of organizations working to reduce and eliminate traffic fatalities and serious injury crashes.

For example, the FDOT has been active in the Tampa Alcohol Coalition (TAC) and Hillsborough County Anti-Drug Alliance (HCADA), as well as Mothers Against Drunk Driving (MADD). In Hillsborough, the FDOT started an innovative University CTST. HCADA and TAC received grants (STOP underage drinking, Drug Free Communities, Partners for Success, and Lightning Foundation Hero Grants) that helped fund underage drinking and impaired driving operations near universities, as well as training opportunities for law enforcement officers.

The Drug-Free Communities Support Program (DFC) is a federal grant program that provides funding to community-based coalitions that organize to prevent youth substance abuse. There are

currently 23 DFC-funded coalitions in Florida. Coalitions that receive an initial five-year DFC grant are eligible to apply for a five-year continuance. Coalitions that have had grants may apply for a DFC Mentorship grant, to work with another community coalition in preparing to apply for a DFC grant.

Administered by the Florida Department of Children and Families (DCF), the Florida Partnership for Success (PFS) is a grant program funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). PFS helps targeted communities reduce underage drinking and substance abuse-related problems through a public health approach to creating community-wide change. The program enables substance abuse prevention systems to work with community partners and prevention-related resources to set and achieve measurable goals to reduce substance abuse among youth. Florida has obtained a total of \$84 million in SAMHSA Substance Abuse Prevention and Treatment Block Grant dollars in FY2022.

Upcoming DFC, PFS, STOP (Sober Truth On Preventing Underage Drinking) and other grant information can be found on SAMHSA's website: <https://www.samhsa.gov/grants/grant-announcements-2022/fy-2023-nofo-forecasts>.

Statewide Driving Under the Influence (DUI) enforcement campaigns encourage coalitions to collaborate with law enforcement. For example, the Tampa Alcohol Coalition (TAC) and MADD support sobriety checkpoints and saturations as well as underage drinking operations. Sometimes a MADD victim will accompany officers when they present responsible vendor educational campaigns to restaurants, bars, and clubs. Hillsborough County Alcohol and Drug-Abuse Coalition and TAC provide funding to the Tampa Police Department each year to support underage drinking education prior to the Gasparilla Parade. FDOT has funded DUI and underage drinking public service announcements, collaborating with MADD and Students Against Destructive Decisions.

Recommendation

- Continue to provide support to Florida communities that apply for federal Drug-Free Communities and Partnership for Success grants.

B-4. Transportation Alternatives

Advisory

Alternative transportation describes methods by which people can get to and from places where they drink without having to drive. Alternative transportation includes normal public transportation provided by subways, buses, taxis, and other means. Designated driver programs are one example of these alternatives.

States should:

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

- *Establish policies and procedures that ensure designated driver and alternative transportation programs do not enable over consumption by passengers or any consumption by drivers or anyone under 21 years old; and*
- *Evaluate alternative transportation programs to determine effectiveness.*

Status

The Florida Department of Transportation (FDOT) promotes the national “Drive Sober or Get Pulled Over” campaign around all major holidays. The message is promoted through traditional media and social media. The state has worked with partners such as AAA, law enforcement, Mothers Against Drunk Driving (MADD) and others to amplify the reach of this campaign. Florida also promoted a “Never Drive Impaired” campaign in March of 2022, to raise awareness among motorists that impaired goes beyond alcohol use and can occur with the use of marijuana and other drugs. This was promoted through both traditional media and social media channels. Safety partners were included in the traditional news release.

AAA offers the *Tow to Go* program in Florida around all major holidays. This is promoted to safety stakeholders and vendors as a last resort alternative for those who are unable to get home while impaired. MADD’s *Decide to Ride* campaign, which promotes the use of taxis and rideshares, is currently running in Florida and at professional sports venues during games. AAA and Anheuser-Busch partner in the *Tow to Go* program. Adults in need of a ride can call 1-800-AAA-HELP, and AAA will dispatch a tow truck that will take both the driver and their vehicle home, free of charge. This service is available throughout Florida to both AAA members and non-members. *Tow to Go* removes one excuse for impaired driving: not wanting to leave their car. It is reported that the program has resulted in 75,000 tows. *Decide Before You Drive*, co-sponsored by MADD and Anheuser-Busch, encourages people to make a plan *before* leaving for a bar.

Recommendation

- Continue to use the term “impaired driving,” not “drunk driving,” as a way of raising awareness that drugged or “buzzed” driving is impaired driving.

III. Criminal Justice System

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

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

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

A. Laws

Advisory

Each State should enact impaired driving laws that are sound, rigorous, and easy to enforce and administer. The laws should clearly: define the offenses; contain provisions that facilitate effective enforcement; and establish effective consequences. Monitoring requirements should be established by law to assure compliance with sanctions by offenders and responsiveness of the judicial system. Noncompliant offenders should be adjudicated swiftly.

The offenses should include:

- *Driving while impaired by alcohol or other drugs (whether illegal, prescription, or over-the-counter), and treating both offenses with similar consequences;*
- *A Blood Alcohol Concentration (BAC) limit of .08, making it illegal per se to operate a vehicle at or above this level without having to prove impairment;*
- *Zero Tolerance for underage drivers, making it illegal per se for persons under age 21 to drive with any measurable amount of alcohol;*
- *High BAC (e.g., .15 or greater), with enhanced penalties above the standard impaired driving offense;*
- *Repeat offender, with increasing penalties for each subsequent offense;*
- *BAC test refusal, with administrative sanctions at least as strict as the state’s highest BAC offense;*

- *Driving with a license suspended or revoked for impaired driving (DWS), vehicular homicide or causing personal injury while driving impaired as separate offenses, with additional penalties;*
- *Open container, which prohibits possession or consumption of any open alcoholic beverage in the passenger area of a motor vehicle located on a public highway or right-of-way; and*
- *Primary seat belt provisions that do not require that officers observe or cite a driver for a separate offense other than a seat belt violation.*

Facilitate effective enforcement by enacting laws that:

- *Authorize law enforcement to conduct sobriety checkpoints, in which vehicles are stopped on a nondiscriminatory basis to determine whether operators are driving while impaired by alcohol or other drugs;*
- *Authorize law enforcement to use passive alcohol sensors to improve the detection of alcohol in drivers;*
- *Authorize law enforcement to obtain more than one chemical test from an operator suspected of impaired driving, including preliminary breath tests, evidentiary breath tests and screening and confirmatory tests for alcohol or other impairing drugs;*
- *Authorize law enforcement to collect blood sample by search warrant in any chemical test refusal situation, consistent with other provisions of criminal jurisprudence which allows body fluids to be collected as evidence of a crime; and*
- *Require mandatory BAC testing of drivers involved in fatal and serious injury producing crashes.*

Effective criminal penalties and administrative sanctions should include:

- *Administrative license suspension or revocation (ALR), for failing or refusing to submit to a BAC or other drug test;*
- *Prompt and certain administrative license suspension of at least 90 days for first offenders determined by chemical test(s) to have a BAC at or above the State's per se level or of at least 15 days followed immediately by a restricted, provisional or conditional license for at least 75 days, if such license restricts the offender to operating only vehicles equipped with an ignition interlock;*
- *Enhanced penalties for test refusals, high BAC, repeat offenders, driving with a suspended or revoked license, driving impaired with a minor in the vehicle, vehicular homicide, or causing personal injury while driving impaired, including: longer license suspension or revocation; installation of ignition interlock devices; license plate confiscation; vehicle impoundment, immobilization or forfeiture; intensive supervision and electronic monitoring; and imprisonment;²*
- *Separate and distinct criminal penalties for alcohol- and drug-impaired driving to be applied individually or in combination to a single case;*
- *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.*

Effective monitoring should include:

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

- *supervision of out-of-state offenders;*
- *proven technology (e.g., ignition interlock device, electronic confinement and monitoring) and its capability to produce reports on compliance;*
- *impaired driver tracking systems; and*
- *periodic reports on offender compliance with administrative or judicially imposed sanctions;*
- *Driver license suspension for persons under age 21 for any violation of law involving the use or possession of alcohol or illicit drugs; and*
- *Statutory and rule support for DWI Courts as a sentencing alternative for persistent DWI offenders.*

Status

Florida has a comprehensive set of laws to address the impaired driving problem. The laws fall into several categories as follows:

- Offenses and other laws,
- Mandatory penalties,
- Enhanced charges and penalties for certain statuses,
- Driving while suspended or revoked,
- Youthful offenders,
- Implied consent to alcohol concentration test and other evidence,
- Administrative license revocation,
- Special evidentiary qualifications,
- Alcoholic beverage control; and
- Sentencing tools, including breath alcohol ignition interlock device (IID), vehicle impoundment and immobilization, and mandatory alcohol evaluation, education, and treatment.

Offenses and Other Laws

The primary offense in Florida's campaign against impaired driving is driving under the influence of alcohol, or any chemical substance, or any controlled substance (DUI). The crime applies to a person who is driving or in actual physical control of a vehicle within Florida. It can be charged under one of four elemental burdens of proof:

- Under the influence of an alcoholic beverage (DUI/alcohol),
- Under the influence of a chemical substance set forth in [Florida Code 877.111](#) (DUI/drugs),
- Under the influence of a controlled substance under chapter 893 (DUI/drugs); and
- With an alcohol concentration of 0.08 of one's blood or breath (alcohol per se).

"Under the influence" is defined as when a person is affected by alcohol, or a chemical substance, or a controlled substance to the extent that the person's normal faculties are impaired. Each DUI offense carries this element of proof. The per se offense is distinguished from the DUI offenses by the absence of a proof element that the offender was under the influence.

The alcohol per se violation is independent from DUI. It carries a burden of proof element that the concentration is based upon grams of alcohol in one hundred milliliters of blood (blood alcohol), or

in two hundred ten liters of breath (breath alcohol). Breath or blood alcohol concentration (BAC) standards for commercial motor vehicles (0.04) and minors (0.02) exist, but only trigger administrative license revocation sanctions. There is no criminal offense for commercial motor vehicle drivers or minor drivers based on the lower BAC thresholds.

The intoxicating agents for DUI/drugs are statutorily restricted to chemical substances defined in Section 877.111 or controlled substances defined in Chapter 893 of the Florida Code. Impairing substances that are not chemical or controlled substances, such as certain synthetic cannabinoids, cannot serve as a basis for DUI/drugs even though the driver is impaired. Medicinal marijuana is legal in Florida, but its use is prohibited while driving a vehicle. Florida does not have a per se drugged driving offense.

There are two paths to enhance DUI severity. The charge can be enhanced based on aggravating elements of proof to the offense, or the sentence can be enhanced due to escalating facts. DUI begins as a misdemeanor offense. The charge can be elevated to a felony upon a third offense within 10 years of a prior DUI conviction, or upon a fourth offense regardless of the elapsed time from a prior conviction. Additional elements of the DUI crime which elevate the DUI charge include causing or contributing to causing:

- Damage to the property or person of another,
- Serious bodily injury,
- Death to another person or an unborn child; or
- Death to another person or an unborn child and leaving the scene of the crash without rendering aid to the injured persons.

Sanctions grow incrementally with each subsequent offense. Sanction enhancements include:

- Increased fine,
- Increased mandatory minimum jail sentence,
- Temporary restricted license ineligibility,
- Mandatory IID; or
- Vehicle impoundment and immobilization.

There is no separate offense for an elevated BAC (0.15 or greater) or committing DUI while accompanied by a person under 18 years of age. Both of these factual situations only serve to enhance the sanction but not the level of the offense. Additionally, a court is statutorily prohibited from accepting a guilty plea to a lesser offense where the DUI offender's BAC was 0.15 or greater.

License suspension as a DUI conviction sanction is imposed by the Florida Department of Highway Safety and Motor Vehicles (FLHSMV) upon notice from the sentencing court. The discretion of issuing a restricted license rests with the FLHSMV. Mandatory evaluation for alcoholism or alcohol abuse can be tied to the restricted license. This allows the treatment prong of a DUI sanction to be removed from the control of the sentencing court. However, evaluation and appropriate treatment are also mandatory upon conviction.

Post-DUI conviction criminal offenses include:

- Operating a vehicle in violation of a DUI-related suspension,
 - Operating a vehicle in violation of an IID or an immobilization or impoundment order,
 - Tampering with an IID,
 - Improperly assisting a DUI offender to bypass an IID; or
-
- Refusing a breath, blood, or urine test after having a prior DUI license suspension or having been fined for a prior test refusal.

Youthful DUI offenders, including juveniles, are prosecuted in adult court. Driver suspension penalties are enhanced for DUI youthful offenders. The court has additional sentencing options for youthful DUI offenders such as curfew, public service, traffic school, and a youthful driver monitoring service. Sentence non-compliance by a youthful offender is addressed as contempt of court rather than a probation violation.

Other laws aimed at youthful offenders include:

- Graduated driver license,
- Minor possessing or consuming alcohol,
- False age information,
- Unlawful sale to a minor,
- Unlawful purchase on behalf of a minor; and
- Beer keg registration.

Conviction for minor possessing or consuming alcohol does not result in a driver license suspension. However, conviction for use of another's driver license as a false identification does result in a license suspension for both the unlawful user and the licensee.

Judges are permitted by statute to confiscate a driver license from a convicted defendant for any crime even if there is no nexus to driving a motor vehicle. It is believed that this judicial authority is not regularly employed although it could be utilized in youthful offender alcohol-related offenses that do not call for a license suspension.

Florida has an open container law which applies to all occupants of the passenger compartment of the motor vehicle. It prohibits an open container of, or the drinking of alcohol in the passenger compartment of the motor vehicle. The law also applies to persons seated in or on a motor vehicle stopped or parked on a roadway. A violation is a non-criminal moving traffic violation for the driver and a non-moving traffic violation for any non-driving occupant.

Dram Shop liability (applicable to alcohol licensee or permittee) exists in Florida in a very limited fashion. A person who sells or furnishes alcoholic beverages to a person of lawful drinking age shall not be liable for injury or damage caused by or resulting from the intoxication of such person. Excepted from the exclusion of liability are:

- The wilful and unlawful selling or furnishing of alcoholic beverages to a person who is not of lawful drinking age, or

- The knowing service of alcoholic beverages to a person habitually addicted to the use of any or all alcoholic beverages.

Knowing that a person is habitually addicted to alcohol is a far greater burden of proof than knowingly serving an obviously intoxicated person. Social host liability (applicable to non-licensee or non-permittee) exists in Florida under similar restrictions and hurdles as the Dram Shop law.

Florida DUI offenses extend to watercraft, golf carts, husbandry vehicles, all-terrain vehicles, and utility task vehicles.

Florida does have a primary safety belt law. All front seat occupants, and only back seat occupants under age 18 are required to be restrained.

Florida does not have a motorcycle helmet law.

Penalties and Sentencing Tools

Per statute, the court shall order all convicted DUI offenders to:

- Be placed on monthly reporting probation,
- Complete a substance abuse course conducted by a DUI program licensed by the department which must include a psychosocial evaluation of the offender,
- Comply with evaluation referral to an authorized substance abuse treatment provider,
- Complete all education, evaluation, and treatment as a condition of reporting probation,
- Have their vehicles impounded or immobilized, subject to certain conditions of ownership, family usage, and special exclusions from this requirement,
- Install an ignition interlock on their motor vehicles for a second or subsequent DUI; and
- Install an ignition interlock on their motor vehicles for a first offense DUI with an underage passenger or a BAC of 0.15 or greater.

A restricted driver license is permitted for most DUI offenses subject to limitations such as business or employment purposes. Participation in alcohol and drug education, evaluation, or treatment are precedent conditions to the issuance of a restricted driver license. Failure to complete education, evaluation, or treatment can result in driver license suspension.

Courts may not suspend, defer, or withhold adjudication of guilt or imposition of sentence for any DUI violation. This statutory restriction is imposed on courts at the case disposition stage. However, it is not imposed on prosecutors at the pre-adjudication charging stage. Many prosecutors across the State avoid this restriction by creating a pre-adjudication diversion program at the charging stage. There is no enabling statute for the diversion programs. The results are:

- No statewide uniformity in diversion eligibility,
- No statewide purpose for diversion implementation,
- No statewide standards for operation of diversion programs,
- No statewide oversight or accounting of diversion user fees,
- No reliable data for measuring diversion results; and

- No notice to FLHSMV of IID non-compliance to trigger a driver license suspension.
- The IID is utilized in multiple settings within the full range of DUI adjudication and administration, including:
- Discretionary sentencing option for first offense DUI with excessive BAC or underage passenger in vehicle,
- Mandatory sentencing tool for second or subsequent DUI offenses,
- Utilized at administrative license revocation stage as a condition for granting a restricted driver license,
- Utilized at license reinstatement where suspension occurred for certain crimes other than DUI,
- Utilized as a condition of participation and completion of mandatory alcohol or drug treatment; and
- Utilized as an alternative to avoid vehicle impoundment or immobilization.

Notwithstanding statutes requiring IID for second or subsequent offenders, the court may order that a person participate in a qualified sobriety and drug monitoring program, such as random or transdermal testing, in addition to the IID requirement.

A license suspension resulting from a DUI conviction triggers mandatory alcohol or drug education, evaluation, or treatment program participation. Completion of any prescribed program is a condition precedent to license reinstatement.

Vehicle immobilization or impoundment is a mandatory sanction for all DUI offenses. The minimum period of impoundment or immobilization is 10 days for a first offense, 30 days for a second offense, and 90 days for a third or subsequent offense within 10 years of the last DUI offense. Exceptions to the mandatory impoundment or immobilization include family hardship, employer or employee operation of the vehicle, and installation of an IID.

FLHSMV is the hub for compliance supervision of license suspension, ignition interlock, restricted driver license, impoundment and immobilization, and their respective links to alcohol and drug education, evaluation, and treatment.

Administration and Evidence

(a) Implied Consent and Administrative License Revocation

A person who accepts the privilege to operate a motor vehicle in Florida is deemed to have given consent to submit to the chemical or physical test for determining blood or breath alcohol content under circumstances which give reasonable cause to believe that the person has been driving or in physical control of a motor vehicle while under the influence of alcohol and is incidental to a lawful arrest. It further serves as the person's consent to a blood or urine test for the purpose of detecting the presence of chemical or controlled substances. Additionally, a person who applies for, accepts, and uses a Florida driver license is deemed to have given consent to these chemical or physical tests. Lastly, a non-resident is deemed to have given consent by the act of driving a vehicle in Florida. A person who is incapable of refusal by reason of mental or physical condition is deemed not to have withdrawn their consent to such test.

A person shall be told by a law enforcement officer that their refusal to submit to any blood, breath, or urine test will result in the suspension of the person's privilege to operate a motor vehicle for a period of one year for a first refusal, or for a period of 18 months if the driving privilege of such person has been previously suspended for a test refusal. Additionally, they shall be told that a test refusal after having previously been suspended or fined for a test refusal is a misdemeanor offense. A warning of the consent provision is printed on each new or renewed driver license.

A chemical test shall be administered at the request of a law enforcement officer who has reasonable grounds to believe that the person was driving under the influence of alcohol, chemical substance, or controlled substance; and one of the following elements exists:

- The person was placed under arrest; or
- A preliminary breath test device showed an alcohol concentration of 0.04 or greater if a commercial motor vehicle, or 0.02 or greater if person is underage.

Statutory implied consent advisements which a law enforcement officer is required to inform a person suspected of DUI include:

- Sanctions if the person refuses a chemical test; and
- Sanctions if the person's chemical test result is more than legal limits or show the presence of a chemical substance or controlled substance.

The refusal to submit to a chemical or physical breath or urine test is admissible into evidence in any criminal proceeding.

Upon a chemical test failure or refusal, a law enforcement or correctional officer shall initiate the administrative suspension of an offender's license on behalf of FLHSMV. The officer shall confiscate the license, issue a 10-day temporary driving permit, and transmit the license and test results, or affidavit of test refusal, to FLHSMV. The officer may also submit a crash report and video recording of field sobriety tests. FLHSMV shall decide if suspension should be imposed according to statutory mandates.

A DUI offender may seek either informal or formal review of an administrative suspension before an FLHSMV administrative hearing officer. Informal review is restricted to the documents submitted by the parties. Formal review may rely upon both documents and subpoenaed sworn witnesses.

Administrative review is restricted to determining whether:

- The officer had probable cause to believe the person was driving or in actual physical control of a motor vehicle while under the influence of alcoholic beverages or chemical or controlled substances,
- The person had an unlawful BAC of 0.08 or higher,
- The person refused to submit to any chemical test after being requested to do so by a law enforcement officer or correctional officer; or
- The person was told that a chemical test refusal would result in a license suspension of one year or, in the case of a second or subsequent refusal, for a period of 18 months.

A final level of review is appeal of the FLHSMV decision to the circuit court. This is not a de novo review. The circuit court conducts appellate review for error.

A person who has been tested may seek a subsequent independent chemical test at their own cost and arrangement. The arresting officer may not interfere with the person's attempt to secure the independent test and shall provide the person with telephone access to accomplish the task. The person's failure or inability to obtain an additional test shall not preclude the admission of evidence derived from the test administered by the officer.

Florida law allows an involuntary blood draw pursuant to a search warrant in felony DUI investigations. Nevertheless, appellate court rulings are interpreted to:

- Create an individual's right to refuse a blood draw even when a search warrant has approved the procedure; and
- Interpret a statute to exclude misdemeanor DUI from search warrant eligibility.

An involuntary blood draw pursuant to a search warrant is prohibited in misdemeanor DUI investigations despite its constitutional validity upheld in *Schmerber vs. California*, 384 U.S. 757 (1966).

Withdrawal of blood or notice of blood test results during medical treatment can be released to law enforcement. Only certain designated medical professionals or personnel acting at the request of a law enforcement officer, may withdraw blood.

(b) Other Evidentiary Standards

Health care providers and personnel have immunity from civil or criminal liability, professional disciplinary action, or other administrative action arising from their role in assisting law enforcement in disclosing blood draw results. It shall not be a breach of any ethical, moral, or legal duty for a health care provider to provide notice or fail to provide notice.

Notwithstanding any law extending confidentiality to patient medical records, results of blood or breath testing shall be released to a court, prosecuting attorney, defense attorney, or law enforcement officer in an impaired driving investigation.

Full discoverable evidence related to chemical testing for blood or breath alcohol is strictly limited by statute. Manuals, schematics, or software of the analyzing instruments, and information in the possession of the instrument manufacturer are excluded from discovery.

It is presumed that a BAC of less than 0.05 is not under the influence. A BAC which is at least 0.05 but less than 0.08, may be considered with other competent evidence to determine whether the person was under the influence of alcohol. A level of 0.08 or higher is prima facie evidence of being under the influence of alcohol.

The results of a chemical test shall be admissible in a civil or criminal action or proceeding arising

from an arrest for an impaired driving offense conditioned upon proper foundation protocols. Additionally, a person's refusal to submit to a chemical test is admissible as evidence in any civil or criminal proceeding arising out of the person's act of driving under the influence.

The portable breath test (PBT) device is prohibited as a DUI investigation tool in any setting. Usage of all passive alcohol detection devices is discouraged by prosecutors due to concern of it being deemed inadmissible evidence leading to suppression of a certified chemical test result ("fruit of the poisonous tree" legal doctrine). A person's refusal to submit to an approved chemical test is admissible evidence in a DUI proceeding.

Sobriety checkpoints are permissible but the tasks of administration, set up, protocol compliance, and audits diminish the desirability to implement in some jurisdictions. However, other jurisdictions find them beneficial.

Standardized Field Sobriety Tests (SFST) are judicially accepted as intoxication evidence in Florida. A witness may not testify whether a person passed or failed any SFST. The witness may testify as to the observations made during the SFST administration including the clues of intoxication exhibited by the vehicle driver.

Recommendations

- Consider enacting a per se impaired driving drug offense for the presence of impairing substances or their metabolites.
- Consider amending Dram Shop liability to include alcoholic beverage service to an obviously intoxicated person.
- Work to improve statewide uniformity of prosecutor impaired driving diversion program eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.
- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.
- Consider expanding the mandatory use of ignition interlock devices to include all first-time offenders.

B. Enforcement

Advisory

States should conduct frequent, highly visible, well publicized, and fully coordinated impaired driving (including zero tolerance) law enforcement efforts throughout the State, utilizing data to focus on locations where alcohol-related fatalities most often occur. To maximize visibility, the State should conduct frequent sobriety checkpoints, periodic saturation patrols, and sustained efforts throughout the year. Both periodic and sustained efforts should be supported by a combination of paid and earned media. To maximize resources, the State should coordinate highly visible, multi-jurisdictional efforts among State, county, municipal, and tribal law enforcement agencies to include liquor control enforcement officers. To increase the probability of detection,

arrest, and prosecution, participating officers should receive training in the latest law enforcement techniques.

States should:

- *Ensure that executive levels of law enforcement and State and local government make impaired driving enforcement a priority and provide adequate resources;*
- *Develop and implement a year-round impaired driving law enforcement plan supported by a strategic communication plan which includes:*
 - *periods of heightened enforcement, e.g., three consecutive weekends over a period of 16 days, and frequent sustained coverage throughout the year; and*
 - *high levels of participation and coordination among State, liquor enforcement, county, municipal, and tribal law enforcement agencies, such as through law enforcement task forces.*
- *Deploy enforcement resources based on problem identification, particularly at locations where alcohol-related fatal or other serious crashes most often occur;*
- *Conduct highly visible enforcement that maximizes contact between officers and drivers, including frequent, ongoing sobriety checkpoints and saturation patrols, and widely publicize these efforts – before, during, and after they occur;*
- *Use technology (e.g., video equipment, portable evidentiary breath tests, passive alcohol sensors, and mobile data terminals) to enhance law enforcement efforts;*
- *Require that law enforcement officers involved in traffic enforcement receive standardized state-of-the-art training in the latest law enforcement techniques such as Standardized Field Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE), emerging technologies for the detection of alcohol and other drugs; selected officers should receive training in media relations and Drug Evaluation and Classification (DEC);*
- *Ensure that officers involved in traffic enforcement receive ongoing refresher training in SFST;*
- *Evaluate the effectiveness of advanced training in the identification and apprehension of drug impaired drivers;*
- *Provide training to enhance law enforcement officers understanding of ignition interlock devices;*
- *Expedite the arrest process, e.g., by reducing paperwork and processing time from the time of arrest to booking and/or release;*
- *Evaluate program effectiveness and efficiency through the use of both output and outcome based performance measures including:*
 - *the level of effort, e.g., number of participating agencies, checkpoints conducted, arrests made;*
 - *public awareness;*
 - *reported changes in behavior, e.g., reported number of drinking driving trips; and*
 - *consequences including alcohol-related fatalities, injuries, and crashes.*
- *Use law enforcement professionals to serve as law enforcement liaisons within the State.*

Their activities would include:

- *Serving as a communication bridge between the highway safety office and law enforcement agencies;*
- *Enhancing law enforcement agencies coordination in support of traffic safety activities;*

- *Encouraging participation in high visibility enforcement of impaired driving, occupant protection, and other traffic safety enforcement mobilizations; and*
- *Improving collaboration with local chapters of police groups and associations that represent state, county, municipal, and tribal law enforcement.*

Status

The Florida Department of Transportation (FDOT) is a cabinet level agency in Florida's governmental structure. As such, it is chaired by a commissioner who reports directly to Florida's governor. Within FDOT, the State Safety Office is tasked with maintaining and increasing safety on Florida's roadways through federally funded subgrants, engineering and crash data, and bicycle and pedestrian safety programs (non-inclusive list). The State Safety Office compiles and publishes Florida's annual Strategic Highway Safety Plan with the goal of *Driving Down Fatalities*. Law enforcement plays a considerable role in the goal.

According to the Florida Department of Law Enforcement (FDLE), in 2021 Florida had approximately 46,237 full-time certified law enforcement officers (including police officers, sheriff's deputies, and State agencies [excluding Universities and Colleges]) from 316 State, county, and municipal law enforcement agencies (excluding tribal, university, and college agencies). These certified officers comprise a ratio of 2.2 officers per 1,000 population. In addition to Florida's population of approximately 22 million, the Department of Tourism estimates 122 million people visited Florida in 2021. This lowers the officer to population ratio significantly.

Like many states, law enforcement agency staffing is far below desired levels. This situation has become crucial for Florida and directly affects the time and staffing that can be dedicated to the issue of impaired driving. This is a concern for law enforcement executives, legislators, government leaders, community partners, current and future certified officers, and the public. This issue, while it does not deter the desire to address the problem of impaired driving effectively and assertively, it does affect law enforcement agencies' abilities.

Data from the Florida Traffic Safety Dashboard from Signal 4 Analytics (signal4analytics.com) show that from 2017 through 2021, impaired driving crashes remained at a fairly steady number (with respect to the anomaly that was 2020). During this five-year period, serious injuries from impaired driving crashes trended down one percentage point. However, fatalities from impaired driving crashes trended up one full percentage point.

Examples from Signal 4 Analytics (signal4analytics.com) include different graphical representation of the data for law enforcement agencies to identify annual and temporal trends such as:

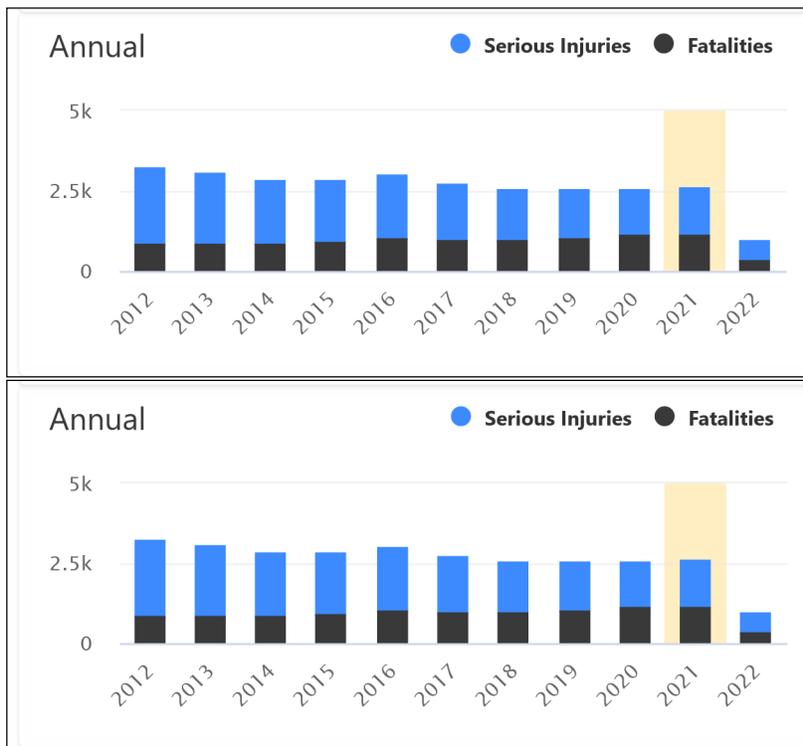


Table 4

Impaired driving crashes were most likely to occur in the late afternoon/early evening hours through the late night/early morning hours with increases beginning on Thursdays and carrying through the early morning hours of Sundays.

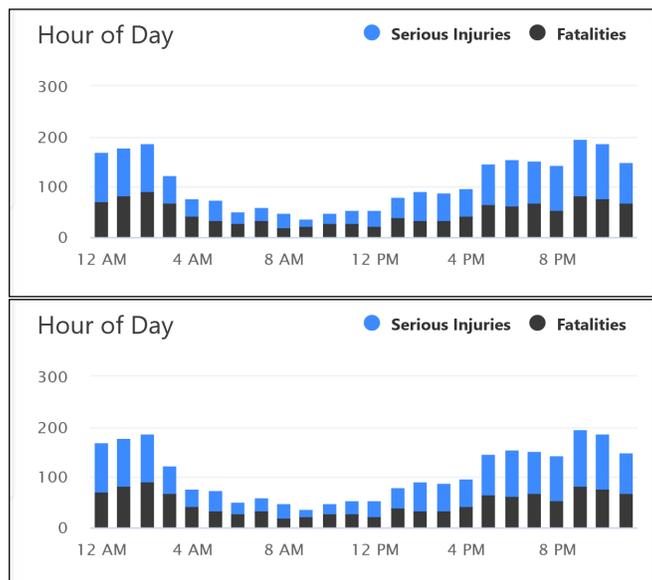


Table 5

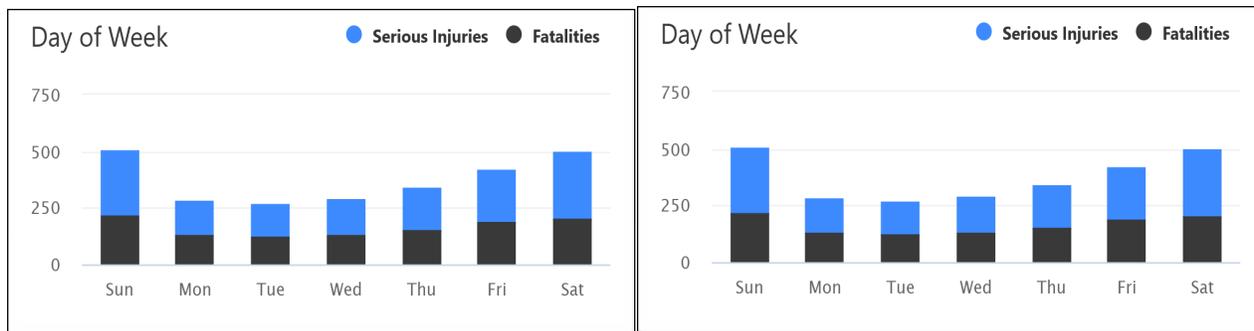


Table 6

Incidents of drug impaired driving have been increasing throughout the United States over the past decade. The focus on “drunk driving” has been steadily shifting toward a more inclusive term of impaired driving across statutes, law enforcement, criminal justice system, and other traffic safety disciplines. Florida impaired driving laws do not specify impairing substances separately. It states: *The person is under the influence of alcoholic beverages, any chemical substance set forth in s. 877.111 (harmful chemical substances), or any substance controlled under chapter 893 (controlled substances), when affected to the extent that the person’s normal faculties are impaired.* The definitions of impairing substances beyond alcohol are limiting and do not encompass drivers who may be under the influence of over-the-counter medications, prescription medications, some plants, or other chemicals.

This language places the State in a group of only six states with limited language defining the substances that would lead to an impaired driving charge. Attempts have been made to narrow the definition and close the language gap. A refinement of the language would increase enforcement’s ability to remove additional impaired drivers from Florida’s roadways.

Because of this, specific drugged driving data are difficult to collect. Based on the information provided during the on-line portion of information gathering, from 2016 to 2020, the number of impaired driving arrests have decreased from over 35,000 to less than 29,000. This represents a 17.27 percent decrease in arrests. Despite the decrease in impaired driving arrests overall, both drug-confirmed crashes and drug-confirmed fatalities (according to data provided) showed some fluctuation year-to-year, with a general overall increase.

	2016	2017	2018	2019	2020
Arrests*	35,042	32,684	32,179	33,873	28,980
Drug-confirmed crash*	617	668	673	730	708
Drug-confirmed fatal*	322	338	348	381	384

Table 7

The best tools to combat incidents of drugged driving are Advanced Roadside Impaired Driving Enforcement (ARIDE) training and Drug Recognition Experts (DRE). DREs are trained in their skills through the Drug Evaluation and Classification Program (DECP) coordinated and managed through the Institute of Police Technology and Management (IPTM). The Florida DECP has increased the number of certified DREs from 2017 to 2021. Law enforcement agencies with certified DREs has likewise increased.

	2017	2018	2019	2020	2021
Number of DRE	318	317	341	317	383
Agencies with DREs	87	87	155	98	103
Enforcement Evaluations	578	516	822	736	915
Evaluations with Polydrug or Poly-Category Opinion	411	328	604	647	748

* International Association of Chiefs of Police DECP annual reports

Table 8

The FDOT State Safety Office funds DRE call-out subcontracts for any DRE agency that applies. This progressive program insures that DREs are available to assist law enforcement officers (LEO) with drug-impaired driving arrests.

Leadership and Support

The Florida Impaired Driving Coalition (FIDC) consists of sixty-three members representing the disciplines of enforcement, legislation, transportation, public education, chief law enforcement officers (CLEO), public health, toxicology, alcohol vendors, restaurants and bars, corrections, criminal justice education, prosecution, and adjudication.

This is an organized group with a diverse membership instrumental in recognizing and addressing all issues contributing to the challenge of impaired driving. The FIDC assists FDOT with the preparation of the Strategic Highway Safety Plan and the Impaired Driving Strategic Plan. It also provides impaired driving resources focusing on issues from all of its member agencies and disciplines and provides model legislative language and program best practices (www.flimpaireddriving.com).

Attitudes about traffic law enforcement is individual specific. Each CLEO and LEO has their personal feeling on the most vital component of law enforcement. In most jurisdictions, traffic law enforcement generally does not rise to the top of individuals' lists of most valuable law enforcement duties. While those attitudes are largely unchangeable, in Florida it is not due to the lack of efforts from the State. The FDOT State Safety Office is extremely active in providing enforcement funding to agencies, public education resources, and promotional materials. The State's Law Enforcement Liaison (LEL) program is exceedingly instrumental in distribution and support of the FDOT State Safety Office materials and programs.

Data collection from the most recent LEL *Florida Law Enforcement Challenge* illustrates the depth of the positive attitudes toward traffic law enforcement.

- Agencies with policies/guidelines for impaired driving enforcement – 91 percent,
- Agencies reporting an Exemplary Officer for Impaired Driving – 48 percent,
- Agencies reporting an Exemplary Officer for Overall Traffic Safety – 46 percent; and
- Agencies reporting greater than 50 percent of officers trained – 164.

Ignition Interlock

Florida's law requiring ignition interlock device installation prior to the reinstatement of driving privileges is applied in the following situations:

- First offense if court ordered,
- First offense if alcohol concentration over 0.15 percent,

- First offence if minor in vehicle at time of incident; and
- All second and subsequent offenses.

These offenders are required to certify to the State that an ignition interlock device has been installed on a vehicle they regularly drive. Once that has been completed, offenders will have a 'P' restriction added to their driver license indicating that an ignition interlock device is required. The ignition interlock device alcohol concentration threshold to initiate a vehicle's starter is less than 0.025 percent. The State allows for the use of ignition interlock device in lieu of vehicle impoundment or immobilization.

It appears that consistent and regular training for LEOs to detect tampering, disabling, or circumvention does not exist.

Impaired Driving Arrestee Processing

Efforts to shorten the time to process a person for impaired driving has been a discussion across law enforcement throughout the United States for decades. Some states and agencies have made advances toward efficiency of this inherently lengthy process. Streamlining the process without reducing the quantity and quality of the evidence gathered has the ability to increase impaired driving enforcement thereby reducing crashes, deaths, and injuries.

Reducing the length of time needed to obtain an evidentiary test is one example where time savings can be beneficial. Efforts have been made to increase the number of mobile breath testing instruments deployed to the field. These efforts should continue. Transportation of impaired driving suspects to testing and/or booking facilities generally composes the greatest block of time spent by law enforcement officers during the processing portion of an impaired driving arrest. Increasing the number of breath testing instruments deployed in law enforcement vehicles would exponentially decrease the time to process an impaired driver and allow the officer to return to active-duty status sooner. Some jurisdictions utilize non-sworn law enforcement reserves and/or community service officers for transportation duties. Including these individuals into saturation patrols and events could decrease the transportation time spent by sworn law enforcement officers allowing expedited return to active-duty.

Current case law in Florida (*Florida vs Geiss - Fla. 5th DCA May 27, 2011*) prohibits LEOs from acquiring a search warrant to obtain a blood sample from misdemeanor impaired driving suspects. This prohibition makes the prosecution of these cases extremely problematic. The collection of evidence by LEOs is an integral part of the case file used to prove impairment and without it, impaired driving cases are weakened.

Saturation Patrols, High-Visibility Enforcement (HVE), and Sobriety Checkpoints

According to the responses received, saturation patrols appear to be the preferred method used during subgrant funded enhanced impaired driving enforcement efforts. Subgrant funded agencies are encouraged to participate in the National Highway Traffic Safety Administration (NHTSA) mobilization periods for the following holidays and events: New Year's Day, Super Bowl, St. Patrick's Day, Cinco de Mayo, Independence Day, Labor Day, Halloween, and the end of year holiday season. Saturation patrols are conducted in no fewer than three consecutive hours.

High Visibility Enforcement (HVE) is exceptionally effective in creating deterrence and changing unsafe and unlawful driving behaviors. According to Florida's *Subgrant for Highway Safety Funds* (Item 77.c. High Visibility Enforcement), High Visibility Enforcement is defined as:

Intense: Enforcement activities are over and above what normally takes place.

Frequent: Enforcement occurs often enough to create general deterrence.

Visible: A majority of the public sees or hears about the enforcement.

Strategic: Enforcement targets high-risk locations during high-risk times.

The subrecipient terms and conditions for HVE state that "law enforcement agencies shall conduct High Visibility Enforcement while conducting enforcement". While subrecipients are required to include HVE as part of their enforcement strategy, there is no requirement for the number of HVE saturations annually. HVE events that occur frequently have a greater success in changing behaviors and preventing crashes, deaths, and injuries.

For saturation patrols and HVE events to be successful, they must be visible. Visibility can be achieved in many ways. Agencies and jurisdictions should strive to include as many components of visibility as possible to increase prevention and deterrence.

Paid and Earned Media: Use of paid and earned media will begin to educate the public about upcoming enforcement events. They also serve to help prevent impaired driving by fostering positive attitudes. The use of media both before and after every saturation patrol and HVE event helps to maintain a perpetuation of the change in behaviors.

Social Media: Young adults typically are over-represented in traffic crashes, deaths, and injuries. They should therefore be the target audience for traffic safety messaging. The use of social media will reach the target audience quicker and through platforms that they frequent.

Variable Message Signs: The utilization of variable message signs in the specific area of the saturation patrol or HVE event can increase the awareness and visibility of enforcement. This direct and localized messaging will help increase deterrence when enforcement is otherwise engaged.

Sobriety checkpoints are allowed in Florida. Sobriety checkpoints are very labor intensive. With many agencies struggling for staffing, the popularity of checkpoints in some areas of the State has begun to wane. Anecdotally, the use of high-visibility saturations (wolfpacks) has replaced checkpoints in certain areas as the preferred method of intensive impaired driving enforcement. Data from subgrant funded sobriety checkpoints and saturation patrols are submitted by each agency. That data may not be timely. Data are an integral part of the planning process and assist in judicious deployment of resources. Data should be submitted as soon as the enforcement event has concluded.

Data

Enforcement data are collected by each agency with no common method across all subrecipients. Each agency is required to report certain data points resulting from saturation patrols, sobriety checkpoints, and HVE events. These data are not overlaid with crash data to determine if areas of enforcement are addressing the problem where it is occurring. While enforcement data are not currently overlaid with crash data, efforts are being made to include this on the Signal 4 Analytics. Real-time reporting of data can aid the State and agencies in addressing current impaired driving matters as they occur.

Automated collection of crash data is robust with 98 percent of traffic crashes being submitted through a central web portal. Crash data are available to all CLEOs in near real-time, aiding in optimal deployment of resources and staffing to address changing issues. The LELs monitor data from the Florida Department of Highway Safety and Motor Vehicles (FLHSMV) Dashboard and Signal 4 Analytics databases and discuss trends and findings with CLEOs throughout the State to assist them with better deployment of resources and staffing. LELs assist some CLEOs with the data report generation.

Training

SFST training is the cornerstone of a law enforcement officer's and agency's enforcement goals toward reducing crashes, deaths, and injuries resulting from impaired drivers. Use of the NHTSA SFST training curriculum is key in the successful advancement of officers and their abilities to detect and remove impaired drivers from Florida's roadways. SFST training is included in all academy curricula required for all prospective LEOs during the FDLE Basic Recruit training. While some academies do not utilize wet workshops as part of SFST training, they all meet the NHTSA guidelines.

Currently, there is no designated SFST coordinator in the State. Some of the coordination duties have fallen to the DECP coordinator at IPTM. While these are not specified duties for the DECP coordinator, the work is still being done even though it is not a formal assignment. SFST course attendees and instructors are not fully tracked or documented by any entity or organization within the State. Since SFST is the cornerstone of impaired driving training for LEOs, it is critical that the State have a sound coordination and management plan. Lack of coordination and management could lead to poor arrests and adverse case law. The FIDC has made efforts to establish a coordination and management plan, but these endeavors have been met with limited success. Due to this lack of coordinated management and the Automated Training Management System (ATMS) not authorizing SFST as an elective training course to satisfy officer re-certification, no comprehensive and reliable training data exists.

While SFST is the foundation for impaired driving enforcement training, the ARIDE course takes LEOs one step farther in recognizing the signs and symptoms of impairing substances beyond alcohol. It also helps promote the use of DREs in drug-impaired driving cases and encourages officers to expand their training and become certified DREs. There is no designated ARIDE coordinator in the State. Some of the coordination duties have fallen to the DECP coordinator. As a result, there is better data and documentation of ARIDE attendees and instructors as compared to SFST. Attendees who wish to continue on to DECP training are required to have completed ARIDE, so there is a better collection of attendee data. ARIDE courses must be taught by DECP instructors. The DECP coordinator has a firm knowledge of the cadre of instructors, so this helps improve ARIDE coordination.

DECP is the pinnacle in impaired driving enforcement training. Officers completing DECP training become State certified and IACP credentialed DREs with biannual requirements for maintaining their certification.

LEOs interested in attending DECP training must submit an application to the DECP State Coordinator and meet these minimum requirements:

- Have a minimum of three years of service,
- Have completed agency probation period,
- Currently work in patrol and/or traffic enforcement,
- Attend SFST and ARIDE training,
- Proficient in SFST,
- Have a reasonable background and experience level of making DUI arrests,
- Submit a written endorsement/recommendation from a local prosecutor,
- Agree to an interview with the State and/or Regional Coordinators (if requested); and
- Provide two DUI reports where they have been the arresting officer.

The State has adopted enhanced standards beyond those set forth by the IACP, the oversight body for DECP. Florida DRE Instructors must actively instruct courses in order to retain their skills, stay current on program updates and enhancements, and maintain professionalism.

Data from the IACP’s annual DECP report indicated the following information for Florida DECP and ARIDE training from 2017-2021.

	2017	2018	2019	2020	2021
DRE Schools	4	4	3	3	5
Number of Students	54	42	56	50	43
ARIDE Classes	19	7	13	14	18
Number of Students	388	137	154	292	332

Table 9

LEOs participating in subgrant funded enforcement events are required to be trained in impaired driving enforcement, detection, and deterrence. The FDOT State Safety Office’s *Subgrant for Highway Safety Funds* (Item 77.d.iii) outlines required credentials for impaired driving enforcement:

Any law enforcement officer who takes enforcement action and receives compensation under an impaired driving subgrant must have successfully completed at least one of the following within the last five years:

- NHTSA/IACP 24-hour DWI Detection and SFST course,
- NHTSA/IACP 4-hour DWI Detection and SFST refresher course,
- NHTSA/IACP DWI Detection and SFST Instructor Development course,
- NHTSA/IACP 8-hour DWI Detection and SFST Instructor Update course,
- NHTSA/IACP ARIDE course; or
- Be an active certified DRE.

Impaired driving training courses are not routinely attended by other members of the criminal justice system (prosecutors, judges, etc.) Attendance at all IPTM SFST, ARIDE, and DECP classes are on a tuition basis. Tuition is used to cover course material and instructor costs. Tuition is covered by an FDOT State Safety Office subgrant. The amount authorized in the subgrant can limit the number of attendees in any given fiscal year. No funding is available to cover costs for courses not taught at or in conjunction with IPTM.

Additional advanced impaired driving training beyond SFST, ARIDE, and DECP is offered by IPTM. These advanced courses are funded and tracked as part of the FDOT State Safety Office subgrant.

Law Enforcement Liaisons (LEL)

IPTM is funded to manage the LEL Program along with their work to promote the Highway Safety Plan and FDOT State Safety Office priorities through networking, communication, and involvement at the local level.

The State is divided into seven districts, each staffed by an LEL. All LELs have completed the National Law Enforcement Liaison Professional Development course. Additionally, the program has one supervisor overseeing the district LELs.

The LELs presence is ubiquitous. They are active and engaged members of district traffic enforcement networks. They meet face-to-face with CLEOs, DUI squad members, and agency supervisors. The LEL supervisor is a member of the FIDC. The LELs are the main conduit between the FDOT State Safety Office and law enforcement agencies in the State. LELs are responsible for disseminating subgrant information, educational materials, and assisting agencies with enforcement efforts during the NHTSA mobilization periods.

The LEL program maintains a robust website (www.floridalel.info). Stakeholders can find valuable resources including a bimonthly newsletter, FDOT State Safety Office subgrant information, training videos, and a list of training opportunities.

The LEL program administers and manages the Florida Law Enforcement Traffic Safety Challenge to increase awareness and participation in traffic safety-related efforts.

Legislation

The State's statutory language in 316.193 delineates impaired driving as *under the influence of alcoholic beverages, any chemical substance set forth in s. 877.111, or any substance controlled under chapter 893, when affected to the extent that the person's normal faculties are impaired*. The definition of 'chemical substance' in 877.111 specifies certain and particular substances. The definition of 'any substance controlled' in chapter 893 specifies substances that are listed in statute and defined as a controlled substance. These definitions are limiting and do not encompass drivers who may be under the influence of over-the-counter medications, prescription medications, some plants, or other chemicals.

This language places the State in a group of only six states with limited language defining the substances that would lead to an impaired driving charge. Attempts have been made to narrow the definition and close the language gap. A refinement of the language would increase enforcement's ability to remove additional impaired drivers from Florida's roadways.

Underage consumption of alcohol while driving is only civil in nature (suspension of driving privileges). If the underage driver has consumed alcohol, is not under the influence, and has an alcohol concentration of 0.02 or greater, their driving privileges will be suspended for six months. A second or subsequent incident with a test of 0.02 alcohol concentration or greater results in a one-year suspension. An additional requirement of attending DUI School occurs with an alcohol

concentration of 0.05 or greater. LELs provide LEOs with materials to assist them with enforcing underage consumption and driving rules.

In 2016, the United States Supreme Court ruled in *Birchfield vs. North Dakota* that LEOs must obtain a search warrant in order to obtain a blood sample from impaired driving suspects. In *Florida vs. Geiss*, the State has more restrictive case law prohibiting the obtaining of a search warrant in misdemeanor cases. This case law extends to impaired driving investigations. This becomes increasingly problematic in drug-impaired driving situations. LEOs can ask an impaired driving subject to provide a urine sample under the State implied consent law since there is no warrant requirement for urine samples. An LEO may request for consent to search and obtain a blood sample without a warrant. Impaired driving subjects who do not provide a consent sample are subject to longer suspensions of driving privileges.

Recommendations

- Consider expanding the mandatory use of ignition interlock devices to include all first-time offenders.
- Consider developing roll-call videos and/or tip cards for ignition interlock circumvention detection and enforcement.
- Utilize consistent on-site messaging with variable message signs at saturation patrols and High Visibility Enforcement events to increase prevention and deterrence.
- Increase the frequency of High Visibility Enforcement events.
- Consider providing funding for all Standardized Field Sobriety Testing, Advanced Roadside Impaired Driving Enforcement, Standardized Field Sobriety Testing Refresher, and Drug Evaluation and Classification class course materials.
- Boost the number of breath testing instruments deployed in law enforcement officer vehicles to reduce impaired driver processing time.
- Explore legislative language changes to support the development of a robust law enforcement phlebotomy program to reduce processing time.
- Consider a centralized data collection point for subrecipients to submit activity from saturation patrols and sobriety checkpoints increasing the quality, timeliness, and consistency of the information.
- Attempt to refine statutory language in reference to drugged driving to include or any other impairing substance, or any combination thereof.
- Explore legislative language changes to allow for the use of search warrants to obtain blood sample evidence when a sample of the blood of a person constitutes evidence relevant to proving that a violation of s.316.193 or s.327.35 has been committed.

C. Prosecution

Advisory

States should implement a comprehensive program to visibly, aggressively and effectively prosecute, and publicize impaired driving-related efforts, including use of experienced prosecutors, to help coordinate and deliver training and technical assistance to those prosecutors handling impaired driving cases throughout the State. Effective prosecution can include participation in a DWI Court program.

Prosecutors who handle impaired driving cases often have little experience, are responsible for hundreds of cases at a time, and receive insufficient training.³ States should:

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

Status

The prosecution of criminal cases in Florida is the role of the 20 elected state attorneys and the more than 2,000 appointed assistant state attorneys. Prosecution of misdemeanor Driving Under the Influence (DUI) is primarily in the county courts. Felony DUI prosecution occurs in the circuit courts of each county.

It is generally believed that DUI has a high priority within the state attorneys' offices which co-exists with their dedication to prosecution of all other crimes. Felony DUI, including serious bodily injury and death crashes, are most likely to retain dedicated and veteran prosecutors. However, it is common for a less experienced assistant state attorney to be assigned to the misdemeanor DUI docket in county court. Traffic court is where new assistant state attorneys learn to be litigation lawyers for advancement to felony court. Turnover of misdemeanor docket assistant state attorneys is a common occurrence. Despite pay raises from the legislature, the pay scale still does not compete with the overall legal market. Innovative incentives must be utilized to keep experienced prosecutors working the misdemeanor DUI caseload.

³ Robertson, Robyn D. and Herb M. Simpson "DWI System Improvement for Dealing with Hard Core Drinking Drivers: Prosecution." Ottawa, Traffic Injury Research Foundation, 2002.

Statewide prosecutor training is conducted primarily by the Florida Prosecuting Attorneys Association and the Traffic Safety Resource Prosecutor (TSRP) program. Continuing education is regularly provided with DUI, and traffic law prosecution frequently included in the curriculum. The key components of Advanced Roadside Impaired Driving Enforcement (ARIDE) training are included in the TSRP curriculum.

The Florida Department of Transportation State Safety Office provides funding for the TSRP program housed at Tallahassee Community College. The TSRP program actively presents DUI training statewide and is easily accessible to state prosecutors for consultation and advice on DUI legal matters and policy making. The current TSRP is a veteran prosecutor with extensive DUI trial experience and a keen understanding of the nuances of the complex Florida DUI statutory structure. The TSRP can assist with DUI litigation support and assist with legislative agendas. This resource enhances litigation preparedness but does not correlate to serving a role to retain qualified misdemeanor prosecutors.

In addition to statewide in-person seminars, the TSRP program provides weekly webinars on traffic safety enforcement. In the past fiscal year, the TSRP has presented at least 67 prosecutor DUI training opportunities, accounting for 194 hours of continuing education, serving at least 2,637 law enforcement officers and 1,212 prosecutors.

Although the law enforcement liaisons (LEL) do not regularly serve as a trainer for prosecutors, the LELs actively maintain interaction with the TSRP program to keep informed of each constituency group's concerns.

The act of DUI plea negotiations is private and not regulated by statute. The boundaries of negotiation are the statutory range of a sentence upon conviction. Another statutory balustrade prohibits courts from suspending, deferring, or withholding adjudication of guilt or imposition of sentence for any DUI violation. However, this deferral prohibition does not extend to prosecutors at the pre-adjudication stage. Many Florida state attorneys have created DUI diversion programs to bypass the prohibition placed on the courts. There is no enabling statute for the impaired driving pre-charging diversion programs. The results are:

- No statewide uniformity in diversion eligibility,
- No statewide purpose for diversion implementation,
- No statewide standards for operation of diversion programs,
- No statewide oversight or accounting of diversion user fees,
- No reliable data for measuring diversion results; and
- No notice to the Florida Department of Highway Safety and Motor Vehicles (FLHSMV) of breath alcohol ignition interlock device (IID) non-compliance to trigger a driver license suspension.

There is no statewide DUI tracking system. The lack of information tracking deferrals and the expected expansion of deferral to other jurisdictions also are cause for creating some type of statewide repository for DUI data.

Florida law allows an involuntary blood draw pursuant to a search warrant in felony DUI investigations. Nevertheless, appellate court rulings are interpreted to:

- Create an individual’s right to refuse a blood draw even when a search warrant has approved the procedure; and
- Interpret a statute to exclude misdemeanor DUI from search warrant eligibility.

An involuntary blood draw pursuant to a search warrant is prohibited in misdemeanor DUI investigations, despite its constitutional validity upheld in *Schmerber vs. California*, 384 U.S. 757 (1966).

Portable breath test and passive alcohol sensor devices are not utilized in Florida as a roadside tool for the detection of breath alcohol in DUI investigations. Law enforcement and prosecution strategies have evolved to rely on keen observations, standardized field sobriety tests, and video recordings to establish reasonable suspicion for a traffic stop and probable cause to believe an impaired driving crime has occurred.

DUI courts have not taken hold in Florida as an effective disposition method to reduce impaired driving incidents and address the problem of chronic DUI offenders. Only four DUI courts exist in Florida. There is no initiative underway to promote the expansion of DUI courts in Florida.

In at least two jurisdictions, crimes occurring on sovereign tribal lands, including DUI, are prosecuted in State courts and the offenders are processed and housed in State jails. The offenders are subject to all criminal and civil sanctions as well as rehabilitation conditions. A tribal representative serves on the Florida Impaired Driving Coalition. Tribal police are known to have participated at police chiefs’ meetings and other police DUI training events.

Recommendations

- Identify funding sources for the creation of and in support of more problem-solving Driving Under the Influence Courts.
- Work to improve statewide uniformity of prosecutor Driving Under the Influence diversion eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.
- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.
- Explore the creation of a centralized Driving Under the Influence data repository project to include Driving Under the Influence diversion data.

D. Adjudication

Advisory

States should impose effective, appropriate, and research-based sanctions, followed by close supervision, and the threat of harsher consequences for non-compliance when adjudicating cases. Specifically, DWI Courts should be used to reduce recidivism among repeat and high BAC offenders. DWI Courts involve all criminal justice stakeholders (prosecutors, defense attorneys, probation officers, and judges) along with alcohol and drug treatment professionals and use a

cooperative approach to systematically change participant behavior. Where offender supervision⁴ is housed within the judicial branch, the guidelines of Section V(A)(1) should be utilized by the judiciary.

The effectiveness of enforcement and prosecution efforts is strengthened by knowledgeable, impartial, and effective adjudication. Each State should provide the latest state-of-the-art education to judges, covering Standardized Field Sobriety Testing (SFST), Drug Recognition Expert (DRE), alternative sanctions, and emerging technologies, such as ignition interlock devices (IID).

Each State should utilize DWI Courts to help improve case management and to provide access to specialized personnel, speeding up disposition and adjudication. DWI Courts also improve access to assessment, treatment, and sentence monitoring. Each State should provide adequate staffing and training for community supervision programs with the necessary resources, including technology, such as IID, to monitor and guide offender behavior.

States should:

- *Involve the State's highest court in taking a leadership role and engaging judges in effectively adjudicating impaired driving cases and ensuring that these cases are assigned to knowledgeable and experienced judges;*
- *Encourage consistency in the adjudication of impaired driving (including youthful offender) cases, and the imposition of effective and appropriate sanctions, particularly when impaired driving resulted in a fatality or injury;*
- *Provide sufficient resources to adjudicate impaired driving cases in a timely manner and effectively manage dockets brought before judges;*
- *Ensure that judges who handle criminal or administrative impaired driving cases receive state-of-the-art education, such as in technical evidence presented in impaired driving cases, including SFST and DRE testimony, emerging technologies, such as IID, for the detection of alcohol and other drugs, and sentencing strategies for this class of offenders;*
- *Use court strategies to reduce recidivism through effective sentencing and close monitoring by either establishing DWI Courts, encouraging drug courts to hear impaired driving cases, or encouraging other courts to adopt DWI/Drug Court practice. These courts increase the use of drug or alcohol assessments; identify offenders with alcohol or drug use problems; apply effective and appropriate sentences to these offenders, including abstinence from alcohol and other drugs; and closely monitor compliance, leading to a reduction in recidivism;⁵*
- *Eliminate ethical obstacles, such as ex parte or commitment communications, by adopting the current Model Code of Judicial Conduct so that judges can participate more freely in DWI Court administration;*
- *Provide adequate staffing and training for community supervision programs with the necessary resources, including technology such as IID and electronic confinement, to*

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

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

monitor and guide offender behavior and produce periodic reports on offender compliance; and

- *Incorporate into judicial education and outreach administration the position of Judicial Outreach Liaison as a judicial educator and resource on highway traffic safety issues including impaired driving, and as an agent to create more DWI Courts.*

Status

The Florida court system consists of the Supreme Court of seven justices, an intermediate appellate court with 64 judges divided among five districts, general jurisdiction trial courts known as circuit courts, and limited jurisdiction trial courts known as county courts. The State's 67 counties are divided into 20 circuits with each circuit having a presiding judge. There are 599 circuit court judges. Additionally, there are 322 county court judges who have a limited jurisdiction for serious and aggravated misdemeanors, traffic and ordinance violations, landlord-tenant, and small claims.

Most Driving Under the Influence (DUI) offenses are adjudicated before the county court judges. Circuit court judges preside over felony level DUI offenses.

Pre-conviction administrative license revocation (ALR) is imposed upon a failure or refusal of a chemical test for intoxication. ALR is administered by the Florida Department of Highway Safety and Motor Vehicles (FLHSMV). Challenges to ALR are adjudicated by administrative law hearing officers of the executive branch.

Alcohol evaluation and treatment are mandatory for all DUI offenders in four different stages of case administration:

- As a sentence criterion and condition of probation after conviction,
- As a condition of receiving a restricted driver license,
- As a condition of reinstatement of a revoked or suspended driver license; and
- As a condition of breath alcohol ignition interlock device (IID) eligibility.

The FLHSMV is the hub for insuring offender compliance of the education, evaluation and treatment, and monitoring requirements through its oversight of driver licensing. Reinstatement of driving privileges cannot occur until the treatment provider and IID provider certify to the FLHSMV that the offender has complied with court sentence conditions related to education, evaluation, treatment, and monitoring. Additionally, the courts retain compliance authority through probation supervision and its contempt of court authority.

Delivery of evaluation and treatment services is conducted by a variety of providers across the State. The providers must be licensed by the Department of Health and approved by the local DUI program entity. Treatment processes are fairly uniform, but personnel are instructed to be sensitive to cultural differences, gender differences, language, client's age, and offense severity.

DUI courts have not taken hold in Florida as an effective disposition method to reduce impaired driving incidents and address the problem of chronic DUI offenders. Only four DUI specific courts exist in Florida. There is no initiative underway to promote the expansion of DUI courts in Florida. The Florida judiciary has embraced the problem-solving court model with multiple drug, mental health, and veterans' courts operating across the State. Twenty counties do not have any type of

problem-solving court, with 15 of those being in the rural panhandle region. It is believed that some chronic DUI offenders are being rehabilitated in these other problem-solving courts, especially the veterans' courts.

Monthly reporting probation supervision is mandatory for all DUI offenders. The offender must attend a substance abuse course conducted by a DUI program licensed by the Department of Health. A psychosocial evaluation of the offender is a component of the course and can result in referral to an authorized substance abuse treatment provider. Completion of education, evaluation, and treatment is a statutory probation condition. Both the sentencing court and FLHSMV must receive notice of the non-compliant act. Both a probation violation and a prohibition of driver license reinstatement are sanctions for this probation condition. Other statutory probation conditions include public service and community work, and vehicle impoundment or immobilization.

In addition to education, evaluation, and treatment, a court may require sobriety and drug monitoring through a program approved by FLHSMV. Monitoring may include breath testing twice a day, continuous transdermal alcohol monitoring, random blood, breath, urine, or oral fluid testing, or an IID. A court may also require a DUI offender to serve all or a portion of imprisonment in a residential alcohol or drug treatment program.

Misdemeanor DUI probation supervision encompasses a jumble of service providers. They can be private contractors, court administered, or sheriff administered. The Salvation Army has provided probation supervision in a few jurisdictions. Felony DUI probation is administered by the Florida Department of Corrections. Probation agencies work closely with alcohol and drug service providers to insure accountability of notice of non-compliance to the FLHSMV.

IID is both an ALR and sentencing tool. Its installation is mandatory as a condition of receiving a restricted driver license. Similar to education, evaluation, and treatment supervision, IID compliance primarily rests with FLHSMV. They will not issue a restricted driver license until it receives notice of compliance from the IID installer.

The Florida Office of State Court Administration conducts approximately 900 hours of judicial training each year. DUI and traffic law training is provided on a periodic rotation. Florida judges are known to attend and instruct traffic safety and faculty development courses at The National Judicial College and other national training programs. Florida is fortunate to be well-represented nationally in the judicial academic field of highway traffic safety.

Florida does not have a Judicial Outreach Liaison (JOL) despite having a stable of highly competent retired judges. Although already robust, judicial education for impaired driving and traffic safety would be enhanced with the creation of a JOL. Other states that have created a JOL program, such as Tennessee and South Carolina, can serve as a model.

Courts may not suspend, defer, or withhold adjudication of guilt or imposition of sentence for any DUI violation. This statutory restriction is imposed on courts at the case disposition stage. However, it is not imposed on prosecutors at the pre-adjudication charging stage. Many prosecutors across the State avoid this restriction by creating a pre-adjudication diversion program at the charging stage. There is no enabling statute for the impaired driving pre-charging diversion programs. The results are:

- No statewide uniformity in diversion eligibility,
- No statewide purpose for diversion implementation,
- No statewide standards for operation of diversion programs,
- No statewide oversight or accounting of diversion user fees,
- No reliable data for measuring diversion results; and
- No notice to FLHSMV of IID non-compliance to trigger a driver license suspension.

Florida law allows an involuntary blood draw pursuant to a search warrant in felony DUI investigations. Nevertheless, appellate court rulings are interpreted to:

- Create an individual's right to refuse a blood draw even when a search warrant has approved the procedure, and
- Interpret a statute to exclude misdemeanor DUI from search warrant eligibility.

An involuntary blood draw pursuant to a search warrant is prohibited in misdemeanor DUI investigations, despite its constitutional validity upheld in *Schmerber vs. California*, 384 U.S. 757 (1966).

Standardized field sobriety tests (SFST) are judicially accepted as intoxication evidence in Florida; however, a witness may not testify whether a person passed or failed any SFST. The witness may testify as to the observations made during the SFST administration including the test clues of intoxication exhibited by the vehicle driver.

Judges are permitted by statute to confiscate a driver license from a convicted defendant for any crime even if there is no nexus to driving a motor vehicle. It is believed that this judicial authority is not regularly employed although it could be utilized in youthful offender alcohol-related offenses that do not call for a license suspension.

Recommendations

- Strategize funding sources for the creation of and in support of more problem-solving Driving Under the Influence Courts.
- Work to improve statewide uniformity of prosecutor Driving Under the Influence diversion eligibility, conditions, and administration, including non-compliance notification to the Florida Department of Highway Safety and Motor Vehicles.
- Consider expanding the blood draw search warrant eligibility to include misdemeanor impaired driving offenses.

E. Administrative Sanctions and Driver Licensing Programs

Advisory

States should use administrative sanctions, including the suspension or revocation of an offender's driver's license; the impoundment, immobilization or forfeiture of a vehicle; the impoundment of a license plate or suspension of a vehicle registration; or the use of ignition interlock devices. These measures are among the most effective actions that can be taken to prevent repeat impaired driving offenses.⁶

In addition, other driver licensing activities can prove effective in preventing, deterring and monitoring impaired driving, particularly among novice drivers.

E-1. Administrative License Revocation and Vehicle Sanctions

Advisory

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

Administrative sanctions allow the licensing agency to maintain its authority to determine the safety and competence of the driver to whom it has issued a license, and to determine whether, at any time, continued provision of driving privileges is warranted. Administrative sanctions provide for consistency and uniformity of both sanction and treatment of offenders, apart from the political or social viewpoints of the various judicial jurisdictions within a state.

The code should provide for:

- *Administrative suspension of the driver's license for alcohol and/or drug test failure or refusal;*
- *The period of suspension for a test refusal should be longer than for a test failure;*
- *Prompt suspension of the driver's license within 30 days of arrest, which should not be delayed, except when necessary, upon request of the State;*
- *Vehicle sanctions, including suspension of the vehicle registration, or impoundment, immobilization, or forfeiture of the vehicle(s), of repeat offenders and individuals who have driven with a license suspended or revoked for impaired driving; and*
- *Installation of ignition interlock device(s) on the offender's vehicle(s) until a qualified professional has determined that the licensee's alcohol and/or drug use problem will not interfere with their safe operation of a motor vehicle. Specific agencies within a State should be given responsibility and authority for oversight of the interlock program, including vendor selection, certification, and monitoring; review of data downloaded from the individual devices; and responsibility for administrative rules that guide sanctions for circumvention or other non-compliance with ignition interlock licensure. Licenses for drivers required to have ignition interlock devices installed on vehicles that they operate should be easily identifiable by law enforcement officers, either by virtue of a different colored background on the license or large print indicating that an ignition interlock device is required.*

Status

The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) is responsible for all processes related to driver licenses from issuance to suspension or revocation. The data system has been migrated to a cloud platform, which enhances the ability of partners to interface with the system for real-time information. Recent and planned data projects will continue to advance the State's ability to evaluate programs and determine the effectiveness of licensing laws and policies.

Florida statutes include an implied consent statute and provisions for comprehensive administrative licensing sanctions related to impaired driving offenses. These offenses include operating a motor

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

vehicle as an adult with a blood alcohol concentration (BAC) of 0.08 or higher. Both license and vehicle-related penalties are included in the statute and apply to all drivers arrested for impaired driving. This administrative process runs independently of, but parallel to, the judicial process and associated penalties for impaired driving. Conducting mutually exclusive processes allows for uniform administrative consequences to be enacted separate from any court proceedings.

In Florida, impairment is defined as a BAC of 0.08 for adults age 21 and older and 0.02 under age 21. In the case of an alcohol test refusal or failure and administrative conviction, the following sanctions will be imposed:

Offense	Alcohol Concentration	Suspension Duration
<u>Under age 21</u>		
1 st conviction	0.02+	6 months
2 nd or subsequent conviction	0.02+	1 year
<u>Age 21 and over</u>		
1 st conviction	0.08+	6 months
2 nd or subsequent conviction	0.08+	1 year
1 st refusal		1 year
2 nd or subsequent refusal		18 months
<u>Commercial Driver</u>		
1 st conviction	0.04+	1 year
1 st refusal		1 year
2 nd of subsequent refusal		Permanent

At the point of arrest, the offender’s driver license is confiscated, and a temporary permit for 10 days is issued. The offender may request a review hearing by the FLHSMV. For a first conviction, the offender’s vehicle may be impounded for 10 days, with 30 days impoundment for the second conviction within five years, and 90 days for a third conviction within 10 years.

To determine the number of previous impaired driving offenses on a driver’s history record, the official files at the FLHSMV are queried, which include all administrative and judicial outcomes, and efforts are made to receive out-of-state violations. Any arrests made while awaiting a review will be considered for the progressive sanctions for the original offense.

Ignition Interlock Device (IID) programs were approved by State law in Florida in 2002. IID may be ordered by the court for a first conviction with a BAC lower than 0.15. If the offender has a high BAC (0.15+) or a minor in the vehicle, an IID is required for at least six months. Second convictions require an IID for at least one year or in the case of a high BAC or a minor in the vehicle it is required for at least two years. Third convictions require at least two years with an IID and four or more convictions requires at least five years with a device. The FLHSMV will issue a ‘P’ restriction on an existing license or a new license that clearly identifies the driver as being in the IID program. The time period for the IID will not begin until the device is installed, and the license restriction is issued. There are seven vendor companies operating in the State and one more is close

to approval. Information related to IID violations are shared with the sentencing court and FLHSMV.

Recommendation

- Conduct a comprehensive review of the Ignition Interlock Device program to identify any trends, successes, or points for improvement.

F. Programs

Advisory

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

- (1) Graduated Driver Licensing (GDL) for novice drivers. GDL programs have been widely evaluated and all studies, although results vary significantly, have shown a reduction in crash and fatality rates.*

States' GDL program should involve a three-stage licensing system for beginning drivers (stage 1 = learner's permit; stage 2 = provisional license; and stage 3 = full license) that slowly introduces the young, novice driver to the driving task by controlling exposure to high risk driving situations (e.g., nighttime driving, driving with passengers, and driving after drinking any amount of alcohol). The three stages of the GDL system include specific components and restrictions to introduce driving privileges gradually to beginning drivers. Novice drivers are required to demonstrate responsible driving behavior during each stage of licensing before advancing to the next level.

Each stage includes recommended components and restrictions for States to consider when implementing a GDL system.

Stage 1: Learner's Permit

- *State sets minimum age for a learner's permit at no younger than 16 years of age;*
- *Pass vision and knowledge tests, including rules of the road, signs, and signals;*
- *Completion of basic driver training;*
- *Licensed adult (who is at least 21 years old) required in the vehicle at all times;*
- *All occupants must wear seat belts;*
- *Zero alcohol while driving;*
- *Learners permit is visually distinctive from other driver licenses;*
- *Must remain crash and conviction free, including violations of the seat belt, zero tolerance, speed and other GDL provisions, for at least 6 consecutive months to advance to the next level;*
- *Parental certification of 30 to 50 practice hours; and*
- *No use of portable electronic communication and entertainment devices while driving.*

Stage 2: Intermediate (Provisional) License

- *Completion of Stage 1;*
- *State sets minimum age of 16.5 years of age;*
- *Completion of intermediate driver education training (e.g., safe driving decision-making, risk education);*
- *All occupants must wear seat belts;*
- *Licensed adult required in the vehicle from 10 p.m. until 5 a.m. (e.g., nighttime driving restriction) with limited exceptions (i.e., religious, school, medical, or employment related driving);*
- *Zero alcohol while driving;*
- *Driver improvement actions are initiated at lower point level than for regular drivers;*
- *Provisional license is visually distinctive from a regular license;*
- *Teenage passenger restrictions – not more than 1 teenage passenger for the first 12 months of Intermediate License. Afterward, limit the number of teenage passengers to 2 until age 18;*
- *Must remain crash and conviction free, including violations of the seat belt, zero tolerance, speed and other GDL provisions, for at least 6 consecutive months to advance to the next level; and*
- *No use of portable electronic communication and entertainment devices while driving.*

Stage 3: Full Licensure

- *Completion of Stage 2;*
- *State sets minimum age of 18 for lifting of passenger and nighttime restrictions;*
- *Zero alcohol while driving; and*
- *Visually distinctive license for drivers under the age of 21.*

(2) A program to prevent individuals from obtaining and using a fraudulently obtained, counterfeit, or altered driver's license including:

- *Training for alcoholic beverage sellers to recognize fraudulent or altered licenses and IDs and what to do with these documents and the individuals attempting to use them;*
- *Training for license examiners to recognize fraudulent documents and individuals seeking to apply for them; and*
- *A means by which to ensure that individuals cannot obtain driver licenses using multiple identities.*

Status

Florida instituted a Graduated Driver License (GDL) program with three stages of licensure in 2005. The Learner's License stage of the GDL process includes a visually distinctive driver license and all drivers under age 21 have a vertically oriented license. Adults age 21 and over have a horizontally oriented card. A Learner's License can be obtained as early as 15 years of age. The requirements and restrictions associated with each stage are below:

1-Learner's License

- At least age 15,
- Completion of Traffic Law and Substance Abuse Education (TLSAE) course,
- Pass vision and knowledge tests,
- Parent/guardian signature required on license application if under age 18,
- Holding period is one year or until 18th birthday,
- Restricted to daylight hours only for first three months, after which drivers may not drive after 10pm,
- Must always be accompanied by a licensed driver age 21 or older,
- Must complete 50 hours of supervised driving (10 during nighttime hours),
- Cell phone use prohibited; and
- License has an orange header that says Learner's License.

2-Intermediate Driver License

- At least age 16,
- Must hold Learner's License for at least one year or age 18, whichever comes first,
- No moving violations for one year of Learner's License date of issue (may have one moving violation if adjudication was withheld),
- Those age 16 are restricted between 11pm and 6am, unless driving to or from work OR accompanied by a licensed driver age 21+,
- Those age 17 are restricted between 1am and 5am, unless driving to or from work OR accompanied by a licensed driver age 21+; and
- Cell phone use prohibited.

3-Full Driver License

- At least age 18.

Moving violations during the Learner's License phase may result in restarting the 12 month no-violation requirement unless an adjudication is withheld. An impaired driving violation incurred during the Learner's License will result in withholding license issuance or privilege for 6-12 months for the first violation and two years for a subsequent violation.

Several characteristics of the GDL process do not meet best practices recommendations, including setting the minimum age to obtain a Learner's License at 16, minimum age of 16.5 to obtain an Intermediate License, and passenger restrictions throughout the Learner's and Intermediate License phases. Full Driver Licenses may be obtained at age 18 without completing the GDL process.

Alcohol server training is not mandatory in Florida but is available upon request. Those establishments that participate in the Responsible Vendor Program are required to have all employees that sell and serve alcohol complete an approved training course.

Within the FLHSMV, there are several mechanisms in place to prevent the issuance of fraudulent identification cards or licenses, including staff training and database identity confirmation. The driver system utilizes facial recognition software to identify and deter identity fraud, such as an individual obtaining multiple licenses using different identities. As the facial recognition is used

after issuance, efforts are underway to utilize the technology at the point of service before issuance of the physical driver license card.

Recommendations

- Explore the feasibility of enhancing the Graduated Driver License law to meet National Highway Traffic Safety Administration best practices.
- Continue to pursue the use of facial recognition software prior to issuance of identification cards and driver licenses.

IV. Communication Program

States should develop and implement a comprehensive communication program that supports priority policies and program efforts, including high visibility enforcement (HVE). Communication strategies should specifically support efforts to increase the public perception of the risks of detection, arrest, prosecution, and sentencing for impaired driving. Additional communication strategies should address underage drinking, impaired driving, and reducing the risk of injury, death, and the resulting medical, legal, social, and other costs if there are specific programs underway in the community. Communications should highlight and support specific program activities underway in the community and be culturally relevant and appropriate to the audience.

Advisory

States should:

- *Focus their publicity efforts on creating a perception of risk of detection, arrest, prosecution, and punishment for impaired driving;*
- *Use clear, concise enforcement messages to increase public awareness of enforcement activities and criminal justice messages that focus on penalties and direct costs to offenders such as loss of license, towing, fines, court costs, lawyer fees, and insurance;*
- *Employ a communications strategy that principally focuses on increasing knowledge and awareness, changing attitudes, and influencing and sustaining appropriate behavior;*
- *Develop a year-round, data-driven, strategic, and tactical communication plan that supports the state's priority policies and programs such as alcohol's effects on driving and consequences of being caught driving impaired or above the state's zero tolerance limit;*
- *Implement a communication program that:*
 - *Considers special emphasis during holiday periods and other high risk times throughout the year, such as New Year's, 4th of July, Labor Day, Halloween, prom season, and graduation;*
 - *Uses paid, earned, and donated media coordinated with advertising, public affairs, news, and advocacy; and*
 - *Encourages communities, businesses, and others to financially support and participate in communication efforts.*

- *Direct communication efforts at populations and geographic areas at highest risk or with emerging problems such as youth, young adults, repeat and high BAC offenders, and drivers who use prescription or over-the-counter drugs that cause impairment;*
- *Use creativity to encourage earned media coverage, use of a variety of messages or “hooks” such as inviting reporters to “ride-along” with law enforcement officers, conducting “happy hour” checkpoints or observing under-cover liquor law enforcement operations, and use of social media;*
- *Monitor and evaluate the media efforts to measure public awareness and changes in attitudes and behavior; and*
- *Ensure that personnel who are responsible for communications management and media liaison are adequately trained in communication techniques that support impaired driving activities.*

Status

The Florida Department of Transportation (FDOT) State Safety Office is tasked with planning, implementing, evaluating, and funding the impaired driving and riding communication programs (paid, earned, and social media). Florida uses an *Impaired Driving Marketing and Communications Plan (Plan)* to capture the structure, audiences, market areas, and general outline of how the impaired driving and riding communication program’s strategies and tactics will be completed for the year. The August 2020 *Plan* does not cover the very comprehensive media programs that are in place.

Messaging in the specified campaign windows is completed by relying on national campaign ads and some creative messages crafted by the FDOT State Safety Office. The *Plan* is based on the National Highway Traffic Safety Administration’s (NHTSA) year-long marketing communications calendar. This topic-specific outline includes paid, earned, and social media strategies to educate the public about the dangers of impaired driving and the potential for arrest during key times of the year such as during Winter Holidays, St. Patrick’s Day, Cinco de Mayo, Labor Day, and more. The messages around the dangers of drug impaired driving have not increased even though crash and toxicology data indicate the number of drug-related and polysubstance-related crashes are on the rise. Census data are not used to help identify communities or geographic regions where culturally relevant messages could be used to reach the diverse populations in the State.

FDOT State Safety Office program partners, including Students Against Destructive Decisions (SADD), Mothers Against Drunk Driving (MADD), Sheriff’s offices, colleges and universities, and AAA, leverage their media channels and networks to bolster campaign outreach. In particular, MADD is present in the media much more than in years past. There are multiple partnerships with MADD and between other organizations that increase the presence of impaired driving messages in the media.

State-specific impaired driving messages have been created to reach the target audience, males under 34 years of age, based on their perception of being stopped by police if they drove after thinking their alcohol level might be at or above the legal limit. Messaging aimed at motorcyclists operating their vehicles while impaired is a strong secondary media target. *Drive Sober or Get*

Pulled Over is the core enforcement message for the High Visibility Enforcement efforts that are held throughout the year. Florida is experiencing a resurgence of visitors and a media effort is in place with impaired driving and other highway safety messages in areas most frequented by guests and their families.

A Public Information Officer (PIO) assigned to the FDOT State Safety Office is currently vacant. The PIO is expected to distribute press releases, proclamations, talking points, and other materials; handle media inquiries and press events; and post and monitor social media messaging in cooperation with the agency's partners and programs such as the Law Enforcement Liaison (LEL) network.

To monitor the impact of the State's HVE paid and earned media campaigns, the FDOT State Safety Office conducts driver awareness, message recall, and behavioral measure surveys. Reports of activities by local law enforcement agencies is funnelled through the seven LELs. The FDOT State Safety Office reviews the survey data and shares the analysis with the mass media contractor to determine changes in the media campaign messages as well as to assess the best channels for reaching target audiences. Additionally, the FDOT State Safety Office shares the survey findings and law enforcement agency reports with the advertising agency tasked with purchasing paid media for the statewide impaired driving campaigns to help determine if changes are needed for the volume of effort in the 10 major media outlet markets.

The seven LELs are a key to the earned and social media outreach efforts around impaired driving and other highway safety priority programs. They use FDOT developed communications materials as well as create their own in support of the State and national campaigns. These resources are housed on the LEL website (www.floridalel.info) for use by law enforcement agencies statewide.

All law enforcement agencies receiving HVE overtime enforcement subgrants from the FDOT State Safety Office are required to disseminate earned media in support of that effort. Reports on the efforts in 2021 show a marked increase in the outreach activity and contacts through social media accounts after a dramatic downward impact due to COVID restrictions. There is still a long way to go in order to reach pre-pandemic levels of public interaction and media contacts.

A major component of the impaired driving media effort is through sports marketing. With a plethora of professional, university, minor league, and local level sports teams and complexes, the use of purchased advertisement space for in-venue messaging/branding (posters, signage, game announcements, audio/video Public Service Announcements [PSAs]) and alcohol-free activities runs year-round. The FDOT State Safety Office Traffic Safety Administrator works directly with the advertising agency to handle all media buys, including sports marketing. A common marketing feature is to offer free items such as tickets, discounts, inside access to personnel, and more as part of the sports marketing profession sales tactics. Due to strict State and federal rules, the FDOT State Safety Office Traffic Safety Administrator has taken the lead on these negotiations and eventual purchases in order to ensure the regulations are followed and to reduce the risk of a FDOT State Safety Office employee unknowingly finding themselves in a bad situation or a compromised position due to the efforts of the sales and marketing staff from the teams and venues.

Recommendations

- Consider expanding the *Impaired Driving Marketing and Communications Plan* to report on all of the work in the communications and outreach effort.
- Enhance the management and implementation of the communications and outreach programs through Census Tract data that includes race, ethnicity, and languages of the communities across Florida.
- Consider the perception of risk of detection, arrest, prosecution, and punishment for impaired driving when creating the State-initiated impaired driving media messages.
- Expand the “impairment” portion of the media campaigns to emphasize drug-impaired driving.
- Evaluate if the time is right to bring back messages around designated drivers, particularly aimed at locations frequented by tourists and guests to the State.
- Save room in the media contract and calendar to place messages around new laws, rules, or judicial cases that are related to the detection, arrest, prosecution, or punishment for impaired driving.

V. Alcohol and Other Drug Misuse: Screening, Assessment, Treatment, and Rehabilitation

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

States should have a system for identifying, referring, and monitoring convicted impaired drivers who are high risk for recidivism for impaired driving.

Nationally, the number and diversity of problem solving courts has grown dramatically. One such problem solving model is the DWI Court. These courts provide a dedicated docket, screening, referral, and treatment and intensive monitoring of impaired driving offenders. States and localities that implement DWI Courts should ensure that they are established and operated consistent with the Guiding Principles recommended by the National Center for DWI Courts. www.dwicourts.org/sites/default/files/ncdc/Guiding_Principles_of_DWI_Court_0.pdf

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

⁸ On average, 772 such episodes, according to Zador, Paul, Sheila Krawchuck, and Brent Moore, “Drinking and Driving Trips, Stops by Police, and Arrests: Analyses of the 1995 National Survey of Drinking and Driving Attitudes and Behavior.” Washington, DC: U.S. Department of Transportation, NHTSA Technical Report No. DOT HS 809 184, December 2000.

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

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

A. Screening and Assessment

Each State should ensure that all convicted impaired drivers are screened for alcohol or other substance abuse and dependency. The most immediate screening should take place in the criminal justice system. However, states should also encourage its health care professionals, employers, and educators to have a systematic program to screen and/or assess drivers to determine whether they have an alcohol or drug abuse problem and, as appropriate, briefly intervene or refer them for appropriate treatment. Many individuals who are drivers and who have alcohol or other drug abuse problems present themselves in a variety of settings, e.g., emergency departments, in which Screening and Brief Intervention (SBI) and referral are appropriate and serve to prevent the individual from being involved in a future impaired driving crash or arrest.

A-1. Criminal Justice System

Advisory

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

- Conducted by a licensed counselor or other alcohol or other drug treatment professional or by a probation officer who has completed training in risk assessment and referral procedures;
- Used to decide whether a treatment and rehabilitation program should be part of the sanctions imposed and what type of treatment would be most appropriate;
- Based on standardized assessment criteria, including validated psychometric instruments, historical information (e.g., prior alcohol or drug-related arrests or convictions), and structured clinical interviews; and
- Appropriate for the offender's age and culture using specialized assessment instruments tailored to and validated for youth or multi-cultural groups.

Status

Every Driving Under the Influence (DUI) offender is required by statute 15A-10.027 to complete a DUI course prior to license reinstatement. The DUI course varies from 12 to 21 hours, depending on the level of offense, and includes an in-person evaluation conducted by a licensed DUI evaluator. All DUI evaluators, Special Supervision Services Evaluators and Clinical Supervisors are certified by the Florida Department of Highway Safety and Motor Vehicles (FLHSMV) to conduct alcohol and other drug assessments. In addition, all treatment providers are licensed by the Department of Children and Families (DCF), pursuant to Chapter 397.F.S. or exempt from such licensure.

The Driver Risk Inventory-II, or DRI-II, required under Administrative Code 15A-10.027, was designed specifically for DUI offender assessment. The DRI-II assesses offender truthfulness, quantifies substance abuse or dependency according to DSM-IV criteria, measures stress handling abilities, and determines driver risk. The screening instrument does not vary based on demographics, such as age or cultural considerations. All offenders receive the same evaluation, as required by 15A-10.027. Evaluators receive training in cultural competency and may make some accommodations for persons of different cultural backgrounds, including language and how they score or discuss criminogenic risk factors with the client.

The results of the interview, objective testing, documented blood alcohol reading, and official driver record are all part of the decision whether a referral to treatment is warranted. The DUI evaluator decides to: 1) make no referral, 2) recommend treatment, or 3) require treatment. If substance abuse counseling is required, the client has 20 days to select a treatment provider from an approved list and begin treatment. If the individual does not complete treatment as required, the driver license will be suspended until they do so. Agencies report that they must give 90 days before reporting a client as non-compliant. The client then receives a notification of license suspension from the FLHSMV, which often encourages the client to engage in treatment.

Substance-related offenses that are not reported to the individual's driving record are not reliably captured, as there is no criminal background check provided for in FAC 15A-10. There is one for Special Supervision Services, but not the DUI assessment. Consequently, DUI programs must rely primarily on the client's self-report. It is not financially feasible to obtain criminal background checks on all DUI clients without compensation for the same. Responsibility.org has identified other substance-related arrests to be correlated to polysubstance involved impaired driving and has implications for recidivism.

A court may order a second or subsequent DUI offender to participate in a qualified sobriety and drug monitoring program. Participation shall be at the person's sole expense. "Qualified sobriety and drug monitoring program" means an evidence-based program, approved by the department, in which participants are regularly tested for alcohol and drug use. The program may monitor alcohol or drugs through one or more of the following modalities: breath testing twice a day; continuous transdermal alcohol monitoring; random blood, breath, urine, or oral fluid testing, and ignition interlock device.

The sentencing court may require a DUI offender to serve all or any portion of a term of imprisonment in a residential alcoholism treatment program or a residential drug abuse treatment program.

Recommendation

- Consider pursuing access to criminal background checks for the benefit of impaired driving offender evaluation.

A-2. Medical and Other Settings

Advisory

Within medical or health care settings, any adults or adolescents seen by health care professionals should be screened to determine whether they have an alcohol or drug abuse problem. The American College of Surgeons mandates that all Level I trauma centers, and recommends that all Level II trauma centers, have the capacity to use Screening and Brief Intervention (SBI). SBI is based on the public health model which recognizes a continuum of alcohol use from low risk, to high risk, to addiction. Research from the Centers for Disease Control and Prevention indicates that an estimated 25 percent of drinkers are at risk for some harm from alcohol including impaired driving crashes. These individuals' drinking can be significantly influenced by a brief intervention. An estimated four percent of the population has a serious problem with alcohol abuse or dependence. A brief intervention should be conducted and, if appropriate, the person should be referred for assessment and further treatment.

SBI can also be implemented in other settings including: Employee Assistance Programs (EAP), schools, correctional facilities, at underage drinking party dispersals, and any setting in which at-risk drinkers are likely to make contact with SBI providers. Screening and brief intervention should be:

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

Status

⁹ For a discussion of assessment instruments, see: Allen, John and M. Columbus (Eds.), NIAAA Handbook on Assessment Instruments for Alcohol Researchers (2nd edition). Rockville, MD: National Institute on Alcohol Abuse and Alcoholism, 2003. For an overview of alcohol screening, see: "Screening for Alcohol Problems – An Update," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, Alcohol Alert No. 56, April 2002. For a primer on helping patients with alcohol problems, see: "Helping Patients with Alcohol Problems: A Health Practitioner's Guide," Bethesda, MD: National Institute on Alcohol Abuse and Alcoholism, NIH Publication No. 04-3769, Revised February 2004.

Florida Administrative Code provides for consideration of ongoing treatment at the time of the impaired driving assessment. It takes into consideration any client-reported screening and/or assessment by other authorities involved in the client's case. In that regard it clearly supports the provision of Screening and Brief Intervention (SBI) by trained professionals at locations such as hospitals, physicians' offices, employee assistance programs, college health centers, and other settings. Many colleges have their own programs that provide SBI. It is unclear how widely SBI is implemented in healthcare facilities in Florida.

The Florida Department for Children and Families (DCF) implements a substance abuse screening and intervention program for older adults by partnering with primary care and emergency physicians who work with older adults who are at risk for or experiencing substance abuse problems. Older adults are screened and provided brief interventions in such non-specialty sites as primary and emergency healthcare settings, senior nutrition programs, and public health clinics, thereby broadening the base of an existing, evidence-based pilot program of brief interventions that specifically targets older adults.

Opinions vary on the availability of SBI as a benefit to employment. In many cases the state entity that regulates professional licensure requires monitoring programs, which may include SBI. Most of the entities that regulate and monitor these programs are State agencies, including the Department of Health, and the Department of Education. However, there is no formal system to coordinate these services into impaired driving services. Offering SBI through confidential Employee Assistance Programs would be useful as well.

Florida is one of many states with an insurance Alcohol Exclusion Law. The law allows health insurance companies to deny coverage to individuals who are injured as a result of being under the influence of alcohol or any narcotic not prescribed by a physician. The Alcohol Exclusion law can be used to deny payment to doctors and hospitals that render care to these patients which discourage alcohol screening in trauma centers and emergency departments. The exclusion law might be creating a disincentive for healthcare facilities to identify alcohol involvement in injured drivers being treated in their facility. Efforts to do away with the Alcohol Exclusion law are likely to encounter opposition from the insurance lobby.

Recommendations

- Promote the provision of Screening and Brief Intervention at all primary healthcare facilities and through Employee Assistance Programs.
- Consider repealing the Alcohol Exclusion Law.

B. Treatment and Rehabilitation

Advisory

Each State should work with health care professionals, public health departments, and third party payers, to establish and maintain programs for persons referred through the criminal justice

system, medical or health care professionals, and other sources. This will help ensure that offenders with alcohol or other drug dependencies begin appropriate treatment and complete recommended treatment before their licenses are reinstated. These programs should:

- *Match treatment and rehabilitation to the diagnosis for each person based on a standardized assessment tool, such as the American Society on Addiction Medicine (ASAM) patient placement criteria;*
- *Provide assessment, treatment, and rehabilitation services designed specifically for youth;*
- *Provide culturally appropriate treatment and rehabilitation services;*
- *Ensure that offenders that have been determined to have an alcohol or other drug dependence or abuse problem begin appropriate treatment immediately after conviction, based on an assessment. Educational programs alone are inadequate and ineffective for these offenders;*
- *Provide treatment and rehabilitation services in addition to, and not as a substitute for, license restrictions and other sanctions; and*
- *Require that offenders, who either refused or failed a BAC test, and/or whose driver's license was revoked or suspended, complete recommended treatment, and that a qualified professional has determined the offender has met treatment goals before license reinstatement.*

Status

The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) ensures that all Driving Under the Influence (DUI) programs in the State maintain a list of approved, licensed treatment providers that are available for each offender. These providers are licensed by the Department of Health and/or the Department of Children and Families (DCF). When referred to treatment an offender must complete the level of treatment assigned by the provider. The cost of treatment is the responsibility of the offender. Offenders may choose their treatment provider, in consideration of cost, proximity and other factors. It is unclear to what extent inability to pay inhibits offenders from accessing appropriate treatment.

The American Society on Addiction Medicine (ASAM) criteria are the most comprehensive guidelines set for placement, continued stay, and transfer/discharge of clients with addiction and co-occurring conditions. Agencies licensed by the DCF are required to use ASAM criteria. The Florida Safety Council's (FSC) Memorandum of Agreement with its approved treatment providers requires ASAM criteria be utilized when developing a diagnosis and level of care. Treatment providers are regulated by either the DCF and/or the Department of Health.

The Florida statutes providing the citation of persons who are under the age of 21 specifically excludes a provision to require treatment. Assessment is provided for in some cases, based on the BAC, but treatment and/or rehabilitation can only be a recommendation. Many persons assessed within the provision of the under 21 laws do not accept those recommendations, regardless of the level of risk. Often the level of risk is very high.

If a person under the age of 21 is arrested for DUI or refusal under the DUI law, they typically go through the same program as adult offenders. It is not fiscally possible to have separate programs

for youth. Most treatment providers address the DUI offender with similar treatment modalities, with an emphasis on youth where practicable. Those under the age of 21 with a Breath or Blood Alcohol Concentration (BAC) of 0.05 or greater will have to attend the education component of the program as well as the evaluation. The program is also required to notify the parent or legal guardian of clients under the age of 19 years with the results of the evaluation.

The DCF has Managing Entities (ME) in each jurisdiction responsible for ensuring that adults and youth have access to mental health and substance abuse services. Probation entities and DUI schools should have agreements or knowledge on how to make referrals and access these services for youth.

The State requires that all licensed treatment providers are accredited to provide treatment services. Accreditation standards require cultural competency/appropriateness standards of care. Page 29 of State Rule 65D-30 requires that assessment include information on cultural influences and spiritual values or orientation. Page 31 of the rule requires that each individual has an orientation at the time of admission to an outpatient substance abuse program in a language that the individual understands. Page 34 requires notification of client rights including compliance with state and federal regulations on disability rights and accommodations.

The Florida Safety Council encourages its treatment providers to address culturally appropriate treatment. While at least some DUI Programs offer courses in Spanish, it is unclear if courses have been enculturated for other groups. Florida code 15A-10.028 states that a person referred to treatment may apply for a treatment waiver, based upon the availability of services to minorities and special needs clients.

Florida's provision to require treatment is not tied to convictions, as in many counties a large percentage of persons arrested for DUI and/or refusals go through diversion programs. DUI programs (in which an individual can enroll prior to conviction) conduct the assessment determining the outcome of a referral to treatment. If treatment is required, a list of approved providers with identifying information on location, fees, intake procedures and criteria for admission is given to the person. An appointment with the agency must be scheduled within 20 days following the evaluation, not necessarily immediately after conviction. The treatment provider confers regularly with the DUI program for the purpose of staffing, tracking, and coordinating. The provider must notify the DUI program when there is a change in a client's level of participation in treatment.

Numerous studies have confirmed that drug courts significantly reduce crime, provide better treatment outcomes, and produce better cost benefits than other criminal justice strategies. In Hillsborough County, the drug court is called Drug Pretrial Intervention (DPTI). If an offender is accepted in the program, their case is removed from prosecution, with program requirements. If the program is successfully completed, the State will drop the charges against the person.

Sarasota County has a DUI Court that began in 2008. The program was started with the support of subgrant funds from the FDOT State Safety Office. This program is designed to change behavior of

offenders who are alcohol or drug dependent and are currently charged with a DUI and have one or more prior arrest(s) for AOD-related offenses. The offender is required to comply with mandatory statutory requirements of FS 316.193, 322.28, and complete all phases of DUI Court.

As of July 2021, Florida has 93 drug courts in operation, including 55 adult, 19 juvenile, 13 drug dependency, and four DUI courts. In 2009, the Florida Legislature appropriated Edward J. Byrne Justice Assistance Grant stimulus funds to expand adult post-adjudicatory drug courts to divert prison-bound offenders who are appropriate for participation in drug court. The funding expired in June 2013 and the State is now providing recurring funding to continue the program.

Recommendation

- Consider implementing additional Driving Under the Influence Courts in Florida.

VI. Program Evaluation and Data

A. Evaluation

Advisory

Each State should have access to and analyze reliable data sources for problem identification and program planning as well as to routinely evaluate impaired driving programs and activities in order to determine effectiveness. Development of a Strategic Highway Safety Plan and a Highway Safety Plan, are starting points for problem identification and evaluation efforts.

Problem identification requires quantifying the problem, determining the causes, and identifying available solutions. Strategies should be evaluated for their cost effectiveness and potential for reducing crash risk. Evaluations should include measurement of activities and outputs (process evaluation) as well as the impact of these activities (outcome evaluation). Evaluations are central to the State's traffic safety endeavors and provide a guide to future projects and evaluations.

Evaluations should:

- *Be planned before programs are initiated to ensure that appropriate data are available and adequate resources are allocated to the programs;*
- *Identify the appropriate indicators to answer the question: What is to be accomplished by this project or program?*
- *Be used to determine whether goals and objectives have been met and to guide future programs and activities;*
- *Be organized and completed at the State and local level; and*
- *Be reported regularly to project and program managers and policy makers.*

The process for identifying problems to be addressed should be carefully outlined. A means for determining program/project priority should be agreed upon, and a list of proven methodologies and countermeasures should be compiled. Careful analysis of baseline data is necessary and should include historical information from the crash system. Other data that are useful for evaluation include data from other records systems as well as primary data sources such as surveys. Record systems data include state and driver demographics, driver histories, vehicle miles

traveled, urban versus rural settings, weather, and seatbelt use. Survey data can include attitudes knowledge and exposure to risk factors.

The Traffic Records Coordinating Committee can serve as a valuable resource to evaluators by providing information about and access to data that are available from various sources.

Status

The Florida Department of Transportation (FDOT) State Safety Office is responsible for administering federal traffic safety funds and has developed problem identification and program evaluation processes. These processes inform the State's Strategic Highway Safety Plan (SHSP), Highway Safety Plan (HSP), and other guiding documents for traffic safety in the State. The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) has management responsibilities for the police crash reporting system and shares the data with the FDOT State Safety Office Crash Records Section, which has an engineering and statistical section to review and improve any crash location information. Also, the FDOT State Safety Office evaluates or requires an evaluation of programs funded through that office using process or outcome methods.

Staff members at the FDOT State Safety Office coordinate the Traffic Records Coordinating Committee and SHSP Emphasis Area Coalitions, including the Florida Impaired Driving Coalition (FIDC). Each year, the FDOT State Safety Office releases Highway Safety Matrices to drive the problem identification process. That information is used in the prioritization of program areas and counties/cities, goal setting and tracking, and location-based analyses. The matrices utilize averages of the most recent five years of crash data and are focused on fatalities and serious injuries to direct efforts to areas of greatest need. Other data sources are also incorporated, such as population estimates and growth from the United States Census and the Bureau of Economic and Business Research.

Process evaluations include documentation and tracking of milestones and deliverables for each project. Subgrant funded impaired driving-related law enforcement subrecipients are required to report the number of contacts, warnings, and citations issued during those funded hours, in addition to other metrics. Performance measures and targets are identified in each subgrant against which the agency and its efforts may be evaluated. Current evaluations also incorporate a subjective component to enhance the FDOT State Safety Office's ability to review the Impaired Driving Program in whole.

Outcome evaluations often rely on data gathered within the conduct of the program and others rely on statewide traffic records datasets. Behavioral outreach programs may conduct outcome evaluations in the form of media impressions, pre- and post-surveys, or other methods for collecting feedback (e.g., anecdotal observations). Projects include such metrics in the FDOT State Safety Office subgrant requirements.

A strong outreach partner is the Florida Mothers Against Drunk Driving (MADD) organization. This agency conducts numerous outreach events and collects survey and program evaluation data that is shared with the FDOT State Safety Office. That information is critical to monitoring and identifying areas for improvement in the program; however, it does not incorporate many questions about student knowledge of laws or retention of the educational material.

Many law enforcement agencies conduct rolling problem identification and program evaluation efforts. Through ongoing review of crashes and fatalities in conjunction with enforcement plans and activities, the agencies are able to supplement the FDOT State Safety Office-provided data throughout the year. As problem areas, situations, or progress are identified, the agencies redirect efforts for maximum impact.

Recommendations

- Expand evaluations of the outreach programs to include geographical outcome analyses. An example would be to review crash trends in areas after focused outreach to identify any behavioral changes seen in crash and citation data.
- Consider conducting an independent, comprehensive, and scientific evaluation of the Impaired Driving Program that combines process and outcome measures for outreach and enforcement projects; utilize all expertise on the Florida Impaired Driving Coalition to ensure consideration of all disciplines.

B. Data and Records

Advisory

The impaired driving program should be supported by the State's traffic records system and use data from other sources, such as the U.S. Census, the Fatality Analysis Reporting System (FARS) and the Crash Outcome Data Evaluation System (CODES). The traffic records system should be guided by a statewide traffic records coordinating committee that represents the interests of all public and private sector stakeholders.

The state traffic records system should:

- *Permit the State to quantify:*
 - *the extent of the problem, e.g., alcohol-related crashes and fatalities;*
 - *the impact on various populations;*
 - *the level of effort dedicated to address the problem, e.g., level of enforcement activities, training, paid and earned media; and*
 - *the impact of the effort, e.g., crash reduction, public attitudes, awareness and behavior change.*
- *Contain electronic records of crashes, arrests, dispositions, driver licensing actions and other sanctions of DWI offenders;*
- *Permit offenders to be tracked from arrest through disposition and compliance with sanctions; and*
- *Be accurate, timely, linked and readily accessible to persons authorized to receive the information, such as law enforcement, courts, licensing officials and treatment providers.*

Status

As evidenced in the last Traffic Records Assessment, the Florida Traffic Records Coordinating Committee (TRCC) is a comprehensive, functional body of data system managers and stakeholders. The TRCC includes representation from all six core systems (crash, citation/adjudication, driver, vehicle, roadway, injury surveillance system) which allows for access to and analysis of a range of

data. The Florida Department of Transportation (FDOT) State Safety Office relies primarily on crash, fatality, and arrest data for problem identification and program evaluation.

Close to one-half of law enforcement agencies in the State utilize the Traffic and Criminal Software (TrACS), while the Florida Highway Patrol (FHP) uses the SmartCOP program, to collect data on crashes and citations/warnings and submit reports to the Florida Department of Highway Safety and Motor Vehicles (FLHSMV). Approximately two percent of crash reports in the State are submitted on paper to FLHSMV and entered into the State system by data entry personnel. Those software systems are often used for capture of traffic citations as well, with approximately 94 percent of citations captured and transmitted electronically.

There are advances in data collection and quality planned in other systems that affect the impaired driving analyses in the State. Florida has a unified court case management system and citations are transmitted between law enforcement, court clerks, and FLHSMV for processing. Law enforcement submits citations to the Traffic Citation Accounting Transmission System (TCATS) upon completion. TCATS transmits citation and adjudication information to FLHSMV nightly and driver records are updated with administrative findings immediately. At the point of adjudication, judges may access driver information through the National Crime Information Center (NCIC) and the Driver and Vehicle Information Database (DAVID). Information on all citations written and submitted to the courts, regardless of final adjudication, is valuable for evaluating which charges are most likely disposed as guilty, not guilty, reduced, or dismissed, or identifying trends in adjudication by location (geographical, court type, etc.).

The FLHSMV maintains the driver history file, which includes impaired driving convictions. The FLHSMV has established real-time interfaces with law enforcement agencies and the TCATS system. These connections allow officers to access up-to-date driver histories at the roadside using NCIC and DAVID. Subsequently, sanctions to the driver and vehicle files are transmitted electronically from the courts.

The Florida Department of Law Enforcement (FDLE) is responsible for the majority of toxicology testing for law enforcement purposes. There are three independent labs used by Pinellas, Miami-Dade, Palm Beach, and Broward Counties. Time needed to process samples and produce results is workable for processing impaired driving offenses but could be improved. It was estimated that alcohol results average close to 45 days, while drug test results may take 2-3 months for blood samples and 3-4 months for urine samples. Those timelines allow for more accurate research and analytical efforts, including the State's submission to the Fatality Analysis Reporting System (FARS). All fatally injured drivers will have breath and blood alcohol concentration results available to FARS; however, that level of completeness is lower among surviving drivers.

In addition to the law enforcement data, Florida is working within the TRCC to integrate emergency medical services data. Incorporating health data systems and partners will enhance analytical efforts and broaden outreach efforts. Although challenging due to the Health Insurance Portability and Accountability Act (HIPAA) and Code of Federal Regulations (CFR) confidentiality rules, access to injury and treatment outcomes would bolster current analyses.

With regards to treatment outcomes, data are not regularly transmitted from programs to the FDOT State Safety Office or FLHSMV for incorporation into analyses. The Ignition Interlock Device (IID) Program is managed by FLHSMV, and the associated violations are received monthly as

compliance checks are conducted. The different diversion programs used throughout the State do not share information with traffic safety partners. Doing so would create a robust treatment data warehouse with the IID and judicial outcomes. Coordinating violation issuance/arrest, administrative law and judicial review processes, and treatment data would constitute an impaired driving tracking system beginning at the point of offense and moving through to treatment completion, judicial disposition, and any potential subsequent violations.

Recommendations

- Continue to pursue options for accessing and incorporating any information from diversion programs.
- Continue to pursue the merging of crash reporting data systems in the Florida Department of Transportation Crash Analysis Reporting system and the Signal 4 Analytics project.

C. Driver Records System

Advisory

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

The driver license system should:

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

Status

The Florida Department of Highway Safety and Motor Vehicles (FLHSMV) is responsible for maintaining all driver license and history information for State residents. All citations issued and dispositions are transmitted electronically from the Traffic Citation Accounting Transmission (TCATS) system to the FLHSMV nightly and applicable convictions are posted on the driver record. The FLHSMV is also responsible for enforcing driver license suspension and revocation orders.

The FLHSMV has developed interfaces with the law enforcement and court clerk data systems for exchange of information in near real-time. These protocols allow for accurate evaluation of drivers on the roadside and in the courtroom. The driver data system also complies with national standards and systems are in place to reduce identity fraud and track commercial drivers. Facial recognition software is used to prevent fraud, but after a driver license is issued.

Driver license and history data are maintained on a cloud data system, which is impressive because many states remain on Legacy systems. The nature of the cloud network supports the real-time interfaces described above. The State is working to enhance the data systems to become a participant in the State-to-State (S2S) Verification Service.

The driver system data are complete, accurate, and reliable as shown in the 2021 Traffic Records Assessment. As administrative sanctions are handled during reviews, those data are also included in the driver record.

Recommendation

- Support the implementation of the State-to-State Verification Service.

2022 Florida Impaired Driving Assessment Agenda

DAY 1 - Tuesday July 26, 2022

8:00 a.m. – 8:45 a.m.

STATE LEADERSHIP PANEL INTRODUCTION

- Chris Craig, Traffic Safety Administrator, FL Dept. of Transportation State Safety Office (FDOT SSO)
- Danny Shopf, Transportation Analyst, Cambridge Systematics
- Dr. Chanyoung Lee, Program Director, Center for Urban Transportation Research (CUTR)
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FL Dept. of Transportation State Safety Office (FDOT SSO)
- Kyle Clark, National Project Manager – Drug Evaluation and Classification Program (DECP), International Association of Chiefs of Police (IACP) / Florida Impaired Driving Coalition (FIDC) Chair
- Ray Graves, Chief, Bureau of Motorist Compliance, FL Dept. of Highway Safety and Motor Vehicles (FL HSMV) / Florida Impaired Driving Coalition (FIDC) Vice-Chair

8:45 a.m. – 9:30 a.m.

INTERVIEW 1 – DUI Enforcement/Law Enforcement Executives

- Art Bodenheimer, Chief of Police, Lake Alfred Police Department
- Sgt. Hugh Gross, Hillsborough County Sheriff's Office
- Sgt. Mark Eastty, DUI Supervisor, Pinellas County Sheriff's Office

9:30 a.m. – 10:15 a.m.

INTERVIEW 2 – DUI Enforcement

- Art Bodenheimer, Chief of Police, Lake Alfred Police Department
- Sgt. Hugh Gross, Hillsborough County Sheriff's Office
- Sgt. Mark Eastty, DUI Supervisor, Pinellas County Sheriff's Office
- Tim Cornelius, Florida Drug Recognition Expert (DRE) Coordinator, Institute of Police Technology and Management (IPTM)
- Tim Roberts, Law Enforcement Liaison (LEL) District Coordinator, IPTM

----- **BREAK** -----

10:15 a.m. – 10:30 p.m.

10:30 a.m. – 11:15 a.m.

INTERVIEW 3 – Traffic Records Data

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Dennis Siewert, Crime Laboratory Analyst Supervisor Florida Dept. of Law Enforcement (FDLE: Toxicology)
- Dr. Chanyoung Lee, Program Director, CUTR
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Melissa Gonzalez, Program Manager, FL HSMV
- Richie Fredrick, Deputy Director, Division of Motorist Services, FL HSMV
- TJ Graham, Senior Management Analyst Supervisor, Florida Dept. of Law Enforcement (FDLE: Alcohol Testing Program) (*Virtual Interviewee*)

11:15 a.m. – 12:00 p.m.

INTERVIEW 4 – BAC Reporting

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Dennis Siewert, Crime Laboratory Analyst Supervisor FDLE: Toxicology
- Dr. Chanyoung Lee, Program Director, CUTR
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Melissa Gonzalez, Program Manager, FL HSMV
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Char
- Richie Fredrick, Deputy Director, Division of Motorist Services, FL HSMV
- TJ Graham, Senior Management Analyst Supervisor, FDLE: Alcohol Testing Program (*Virtual Interviewee*)

----- LUNCH -----

12:00 p.m. – 1:00 p.m.

1:00 p.m. – 1:45 p.m.

INTERVIEW 5 – Driver Licensing/Program Issues/Adjudication Issues

- Melissa Gonzalez, Program Manager, FL HSMV
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Char
- Richie Fredrick, Deputy Director, Division of Motorist Services, FL HSMV

1:45 p.m. – 2:30 p.m.

INTERVIEW 6 – DUI Prosecution

- Elvia Marcus, County Court Chief, Miami-Dade County State Attorney's Office (SAO) (*Virtual Interviewee*)
- Sgt. Hugh Gross, Hillsborough County Sheriff's Office
- Sgt. Mark Easty, DUI Supervisor, Pinellas County Sheriff's Office

2:30 p.m. – 3:00 p.m.

INTERVIEW 7 - Tribal)

- Chris Craig, Traffic Safety Administrator, FDOT SSO

----- **BREAK** -----

3:00 p.m. – 3:15 p.m.

3:15 p.m. – 4:00 p.m.

INTERVIEW 8 – Impaired Driving Legislation

- Capt. William Jarvis, Bureau of Criminal Justice System, Florida Dept. of Business and Professional Regulation, Division of Alcoholic Beverages and Tobacco, Bureau of Law Enforcement
- Elvia Marcus, County Court Chief, Miami-Dade County SAO (*Virtual Interviewee*)
- Larry Coggins, Regional Executive Director (Florida & Puerto Rico), Mothers Against Drunk Driving (MADD)
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair

4:00 p.m. – 4:45 p.m.

DEBRIEF – State Leadership Panel Questions/Answers

- Chris Craig, Traffic Safety Administrator, FL Dept. of Transportation State Safety Office (FDOT SSO)
- Danny Shopf, Transportation Analyst, Cambridge Systematics
- Dr. Chanyoung Lee, Program Director, Center for Urban Transportation Research (CUTR)
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FL Dept. of Transportation State Safety Office (FDOT SSO)
- Kyle Clark, National Project Manager – Drug Evaluation and Classification Program (DECP), International Association of Chiefs of Police (IACP) / Florida Impaired Driving Coalition (FIDC) Chair
- Ray Graves, Chief, Bureau of Motorist Compliance, FL Dept. of Highway Safety and Motor Vehicles (FL HSMV) / Florida Impaired Driving Coalition (FIDC) Vice-Chair

4:45 P.M. – 5:00 P.M.

DEBRIEF – Assessment Team Questions/Answers and Independent Writing

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8:30 a.m. – 9:15 a.m.

INTERVIEW 9 – Prevention/Treatment

- Anne Rollyson, Director of DUI and Behavior Management Programs, Florida Safety Council
- Brandy Howard, Director, SunCoast Safety Council (*Virtual Interviewee*)
- Isabel Perez-Morina, Chief Executive Officer/President, Advocate Program, Inc./Florida Association of Community Corrections (*Virtual Interviewee*)
- Helen Justice, Executive Director, DUI Counterattack, Hillsborough, Inc. (*Virtual Interviewee*)
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair

9:15 a.m. – 10:15 a.m.

INTERVIEW 11 – Screening, Intervention, Treatment and Rehabilitation

- Anne Rollyson, Director of DUI and Behavior Management Programs, Florida Safety Council
- Brandy Howard, Director, SunCoast Safety Council (*Virtual Interviewee*)
- Isabel Perez-Morina, Chief Executive Officer/President, Advocate Program, Inc./Florida Association of Community Corrections (*Virtual Interviewee*)
- Helen Justice, Executive Director, DUI Counterattack, Hillsborough, Inc. (*Virtual Interviewee*)
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair

----- **BREAK** -----

10:15 a.m. – 10:30 a.m.

10:30 a.m. – 11:15 a.m.

INTERVIEW 10 - Underage Drinking Prevention

- Larry Coggins, Regional Executive Director (Florida & Puerto Rico), MADD
- Tim Roberts, LEL District Coordinator, IPTM

11:30 a.m. – 12:15 p.m.

INTERVIEW 12 – Adjudication of DUI Cases

- Hon. Judge William Overton (*Virtual Interviewee*)
- Vin Petty, Traffic Safety Resource Prosecutor, Florida Public Safety Institute

----- **LUNCH** -----

12:15 p.m. – 1:15 p.m.

1:15 p.m. – 2:00 p.m.

INTERVIEW 13 – Advocacy/Prevention Programs

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Larry Coggins, Regional Executive Director (Florida & Puerto Rico), MADD

2:00 p.m. – 2:45 p.m.

INTERVIEW 14 – Impaired Driving Countermeasures Advocacy Groups

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Kyle Clark, National Project Manager – DECP, IACP / FIDC Chair
- Larry Coggins, Regional Executive Director (Florida & Puerto Rico), MADD
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair

2:45 p.m. – 3:30 p.m.

INTERVIEW 15 – Impaired Driving Law Enforcement Training

- Chris Craig, Traffic Safety Administrator, State Safety Office, FDOT SSO
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Kyle Clark, National Project Manager – DECP, IACP / FIDC Chair
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair
- Tim Cornelius, Florida DRE Coordinator, IPTM
- Tim Roberts, LEL District Coordinator, IPTM

----- **BREAK** -----

3:30 p.m. – 3:45 p.m.

3:45 p.m. – 4:30 p.m.

INTERVIEW 16 – Media/Outreach Efforts

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Danny Shopf, Transportation Analyst, Cambridge Systematics
- Dr. Chanyoung Lee, Program Director, CUTR
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair
- Tim Roberts, LEL District Coordinator, IPTM

4:30 p.m. – 5:15 p.m.

DEBRIEF – State Leadership Panel Questions/Answers

- Chris Craig, Traffic Safety Administrator, FDOT SSO
- Danny Shopf, Transportation Analyst, Cambridge Systematics
- Dr. Chanyoung Lee, Program Director, CUTR
- Ernie Bradley, Traffic Safety Program Manager-Impaired Driving, FDOT SSO
- Kyle Clark, National Project Manager – DECP, IACP / FIDC Chair
- Ray Graves, Chief, Bureau of Motorist Compliance, FL HSMV / FIDC Vice-Chair

DAY 2 - Wednesday July 27, 2022 (cont.)

5:15 p.m. – 5:30 p.m.

DEBRIEF – Assessment Team Questions/Answers and Independent Writing

8:00 p.m.

INDEPENDENT WRITING

Deadline to submit sections of consensus report(s) to Admin

DAY 3 - Thursday July 28, 2022

8:00 a.m. – 8:00 p.m.

Consensus Report

Assessment Team Reviews Draft Final Report

DAY 4 - Friday July 29, 2022

9:30 a.m. – 11:00 a.m.

REPORT TO STATE

Assessment Team presents Report to State

State Responders

Alan Mai, Florida Department of Health

Anne Rollyson, Florida Safety Council

Chief Art Bodenheimer, Lake Alfred Police Department

Benjamin Jacobs, Florida Department of Transportation

Brandy Howard, SunCoast Safety Council

Lt. Channing Taylor, Florida Highway Patrol

Dr. Chanyoung Lee, Center for Urban Transportation Research

Chris Craig, Florida Department of Transportation

Cpl. Daniel Darren, Collier County Sheriff's Office

Dennis Siewert, Florida Department of Law Enforcement

Ellen Snelling, Tampa Alcohol Coalition

Ernie Bradley, Florida Department of Transportation

Geoff Luebke, The Florida Restaurant & Lodging Association Regulatory Compliance Services, Inc.

Helen Justice, DUI Counterattack, Hillsborough, Inc.

Sgt. Hugh Gross, Hillsborough County Sheriff's Office

Isabel Perez-Morina, Advocate Program, Inc./Florida Association of Community Corrections

Karen Morgan, AAA

Kyle Clark, International Association of Chiefs of Police

Larry Coggins, Mothers Against Drunk Driving (MADD)

Dr. Lisa Reidy, University of Miami

Melissa Valido, Florida Teen Safe Driving Coalition

Murray Brooks, SCRAM Systems

Nick Tiscione, Palm Beach County Sheriff's Office

Ray Graves, Florida Department of Highway Safety and Motor Vehicles

TJ Graham, Florida Department of Law Enforcement

Tim Cornelius, Institute of Police Technology and Management

Tim Roberts, Institute of Police Technology and Management

Ty Carhart, Florida Department of Health

Vernon Howell, Florida Department of Highway Safety and Motor Vehicles

Vin Petty, Traffic Safety Resource Prosecutor Program

Capt. William Jarvis, Florida Dept. of Business and Professional Regulation

Hon William Overton

ASSESSMENT TEAM CREDENTIALS

SENIOR JUDGE G. MICHAEL WITTE (RETIRED)

gmwitte@hotmail.com

G. Michael Witte is the Executive Director of the Indiana Supreme Court Disciplinary Commission and 2017 recipient of the Sen. Daniel Inouye Trailblazer Award, the highest award given by the Nat'l Asian Pacific American Bar Assn. Additionally, the Indiana Asian Pacific American Bar Assn. bestowed Witte with its first Trailblazer Award and named the award in his honour.

Witte was the first Asian American to serve as judge in the State of IN. His 25-year judicial career included service as Judge of the Dearborn County Court, Lawrenceburg, IN (1985 – 2000); Judge of the Dearborn Superior Court No. 1 (2000-2008); and Judge of the Wayne Superior Court No. 1, Richmond, IN (2009). He received both his B.A. and J.D. degrees from Indiana Univ., served as President of the IU McKinney Law School's Alumni Board in 2009, and was honoured in 2008 by the I.U. Alumni Association as its Distinguished Asian Alumni. In 2011 he received the IUPUI Marynard K. Hine medal for significant contributions to campus and alumni programs. He also received from Equal Justice Works the law school's 2012 Public Interest Recognition.

He is a 1991 graduate of the IN Judicial College, the 2002 class of the Graduate Program for IN Judges, and a former member of the IN Commission on Courts. Witte served as Chair of the ABA Judicial Division in 2011 and as Chair of the ABA Nat'l Conference of Specialized Court Judges in 2006. He currently serves on the ABA Standing Committee on Public Education.

From 2006-09, Witte served as Co-chair of the ABA Judicial Division's Standing Committee on Minorities in the Judiciary. He received his community's Dr. Martin Luther King, Jr. Memorial Award in 2009. In addition, IN Minority Business Magazine named Witte a 2010 Champion of Diversity. Witte has been a panellist at many national programs on diversifying the judiciary and improving diversity pipelines to a judicial career, including a 2009 program at the Harvard Law School.

Witte served as the Nat'l Highway Traffic Safety Administration (NHTSA) Region 5 Judicial Outreach Liaison in 2009-10, the NHTSA Judicial Fellow from 1995-98, and on the U.S. Congressional Advisory Committee for Commercial Driver's License, 2007-08. Judge Witte has performed NHTSA impaired driving compliance audits for HI, MO, MT, SC, RI, KS, MD, WA, VT, ID, and NM.

Witte joined The Nat'l Judicial College faculty in 1994. In addition, he has served as faculty for programs presented by the American Bar Association, NHTSA, the Nat' Center for State Courts, the Nat'l Criminal Justice Assn., the IN Judicial Center, the IN State Bar Assn. and the IN Continuing Legal Education Forum, and IN University. Witte's teaching experience is primarily in the field of impaired driving, traffic court administration, and professional responsibility. His legal teaching assignments have occurred in more than 20 states.

LT. DONALD MAROSE (RETIRED)

don@cdtraining.org

Don Marose is President and CEO of CD Training Consultants, Inc. with a goal to deliver professional training in the signs and symptoms of alcohol and drug use and abuse and safe driving initiatives, and complete facility security reviews.

Since 2005, thousands of individuals have attended Marose's training sessions, representing disciplines including management, labor, teachers, school administrators, students from middle school through college, emergency responders, doctors, nurses, airline industry, probation, law enforcement, prosecution, defense, judiciary, and concerned citizens. He is often requested by name to make presentations and hold training sessions. Don has presented throughout MN as well as at conferences and training sessions around the country and in Canada.

Marose served as a MN State Trooper from 1998-2020. He was promoted to Sergeant in 2002 and Lieutenant in 2011. He was assigned as the MN State Patrol Impaired Driving Specialist where he directed and supervised training programs throughout MN. He was responsible for the training, certification, and continuing education of MN's Drug Recognition Evaluators (DREs) and law enforcement phlebotomists. He administered a budget in excess of \$550,000 to accomplish those duties.

Marose served as program support for the Federal and State grants awarded to the MN State Patrol. Those grants exceed \$10 million annually. He worked in conjunction with a number of State and Federal agencies to deliver those programs. The projects incorporated cooperative enforcement endeavors with numerous city and county law enforcement agencies.

From 2011-2013 Marose was assigned as the Deputy Director of the MN State Patrol's Executive Protection and Capitol Complex Security Division. He managed a staff of 70 State Troopers, Capitol Security Officers, Legislative Security Officers, support staff, and dispatchers. Marose coordinated the safety and security of Minnesota's Governmental leaders. He insured a safe and secure environment on the Capitol Complex preserving the integrity of MN's governmental process. Marose coordinated with numerous State, Local, and Federal Governmental agencies to provide for safe venues and movements of visiting dignitaries, United States Governmental leaders, and foreign heads of state.

Marose has an Associate of Arts degree in Law Enforcement. Marose has been recognized as an expert in Horizontal Gaze Nystagmus and DECP procedures in Hennepin County and Scott County District Courts as well as U.S. Federal Court.

Marose was a a Field Training Officer and instructed at the MN State Patrol Training Academy. He is an International Association of Chiefs of Police (IACP) and National Highway Traffic Safety Administration (NHTSA) credentialed instructor in SFST, ARIDE, and DECP. He actively instructs city, county, state, and federal officers as well as the public in these skills.

Marose is a member of the MN Legislative DWI Task Force. He served as the General Chair (2011) and the Region II Representative (2017-2020) of IACP's DRE Section of the Technical Advisory Panel to the Highway Safety Committee.

Marose is an adjunct instructor and program assistant at the Hennepin Technical College Law Enforcement Education Center and the Century College continuing law enforcement education programs.

Marose is an active community volunteer. He is an Eagle Scout, was a Scoutmaster in the Boy Scouts of America (1982-2009) and continues his Boy Scouting activities as the North Star District Committee Member. He currently serves as the State Advisory Board Chair and volunteer for MADD's MN Chapter.

ROB K. LEVY, MS

rlmeadowood@gmail.com

Rob Levy recently retired from the State University of New York College at Geneseo, as Community and Campus Substance Abuse Prevention Coordinator. There, he supervised peer-led opiate overdose prevention and harm-reduction strategies for students, chaired a campus-community coalition, and provided Responsible Server Training for area alcohol retail establishments. Prior to that position, he worked as a community and school substance abuse prevention consultant in rural communities across upstate New York and Vermont, and as a consultant to community drug-prevention coalitions in the 12-county Finger Lakes region of New York, providing technical assistance in implementing SAMHSA's Strategic Prevention Framework. Rob has served as a national trainer and developer of school-based substance abuse prevention and health education programs. As an educator, he worked with under-performing schools in New York City and Rochester, New York, and while teaching high school Social Studies in the Rochester NY City Schools, he developed and ran a program to support at-risk students in completing their education and coordinated a drug prevention and intervention program. Rob has served on the NHTSA impaired driving assessment for the states of Montana and Iowa.

Rob received a Bachelor of Arts at the University of Rochester in Interdisciplinary Studies: Education and Health in American Society, and a Master of Science in Community Health from the University of Rochester School of Medicine and Dentistry. He holds a Credentialed Prevention Provider certificate from the New York State Office of Addiction Services and Supports.

TROY E. COSTALES
troy.costales@comcast.net

Troy Costales was the state of Oregon's Transportation Safety Division Administrator and Governor's Highway Safety Representative from September of 1997 until May 2021. During his time as the Governor's Representative, he worked for three different Governors. Troy has over 34 years of experience in Transportation Safety, including 24 years as the Administrator of the Division. He was a member of the executive management team for the Oregon Department of Transportation for 23 years.

Mr. Costales was the 2011-2012 Chairman of the Governor's Highway Safety Association. He also served on the: American Association of State Highway and Transportation Officials (AASHTO) – Standing Committee on Highway Safety, AASHTO's Strategic Highway Safety Plan initiative, NHTSA's Impaired Driving program management course writing team, Transportation Research Board's Transportation Safety Management Committee and the Naturalistic Driving Data project, International Association of Chiefs of Police - Drug Evaluation and Classification Program Technical Advisory Panel, plus many others. He was part of the faculty for the GHSA Executive Training Seminar for fifteen years.

Under Mr. Costales' leadership, Oregon experienced a dramatic decline in traffic fatalities and injuries, to the lowest levels since 1944. The number of individuals injured in traffic crashes at one point declined more than 30 percent since its peak of 39,000 in 1996. In addition, Oregon started a strong graduated driver license program that includes an incentive for driver education. Over a ten-year span the number of 16-year-old drivers involved in fatal and injury crashes declined over 60 percent. Oregon continues to post one of the highest safety belt use rates in the nation peaking at 98.2 percent in 2013. With the decline in the overall fatality toll, the number of alcohol-involved fatalities had also decreased by double-digit percentages during that decade.

Troy was the primary resource for the Oregon Legislature on the previously mentioned laws and also for the distracted driving, racial profiling data and training for law enforcement, pedestrian safety, ignition interlock oversight, mandatory motorcycle safety training, and child passenger safety laws. For more than 20 years, multiple legislative committee leaders tagged Troy as "Mr. Safety" and sought his counsel in informal and formal settings alike.

Mr. Costales was a member and team lead for several driver education, bicycle/pedestrian, motorcycle safety, occupant protection and impaired driving program assessments over the past twenty years. He has also helped multiple states with technical assistance in various areas of highway safety programs and management.

George Fox University
Bachelor of Science in Human Resource Management

Portland State University
Master of Arts in Public Administration

CYNTHIA BURCH
cburch@som.umaryland.edu

Cynthia (Cindy) Burch, MS MPH CAISS RSP2B began her career as a research analyst at the National Study Center for Trauma & EMS (NSC) in 2001 and went on to serve as epidemiologist/traffic records coordinator for the Georgia Governor's Office of Highway Safety in 2004. There she continued working with traffic records and statewide data projects. In late 2005, she returned to the NSC and served as a senior epidemiologist and project manager. In July 2018, Cindy moved to the Baltimore Metropolitan Council, the Baltimore region metropolitan planning organization, to support the development and implementation of Local Strategic Highway Safety Plans in the region's seven jurisdictions.

At the NSC, she worked closely with the Maryland Department of Transportation Motor Vehicle Administration's Highway Safety Office (MHSO) on data analyses and traffic records, facilitated the State Traffic Records Coordinating Committee (TRCC), served as the data coordinator for the Maryland Strategic Highway Safety Plan, conducted and analyzed the observational seat belt studies, and answered data requests from state and local agencies as well as the public at large. She continues to work closely with the MHSO now from the BMC to support all local efforts in planning, data analysis, and evaluation. She is also an assessor, module leader, and facilitator for Traffic Records Assessments; team member for impaired driving, occupant protection, and pedestrian/bicycle safety assessments; and at-large member of the Abbreviated Injury Scale Certification Board for the Association for the Advancement of Automotive Medicine (AAAM).