

# Florida Impaired Driving Coalition Meeting Report

December 1-2, 2021

Prepared For:

Florida Department of Transportation Prepared By:

**Cambridge Systematics, Inc.** 

# 1.0 Attendees

# Members:

Name	Agency Represented	Attendance
Anne Rollyson	Florida Safety Council	$\boxtimes$
Sgt. Anthony Palese	Florida Highway Patrol	
Chief Art Bodenheimer	Lake Alfred Police Department	
Sgt. Tim Cornelius	University of North Florida, Institute of Police Technology and Management (IPTM)	
Sgt. Ben Kenney	Hillsborough County Sheriff's Office	
Brandy Howard	SunCoast Safety Council	$\boxtimes$
Dr. Brett Kirkland	Florida Dept. of Law Enforcement (FDLE), Alcohol Testing Program (ATP)	
Chief Brett Railey	Florida Police Chiefs Association (FPCA)	
Brittany Fox	Second Judicial Circuit, Felony Division C	
Lt. Channing Taylor	Florida Highway Patrol (FHP)	
Chris Craig	Florida Dept. of Transportation (FDOT), State Safety Office	
Chris Earl	Florida Safety Council	
Christy Crump	Florida Restaurant & Lodging Association	
Crystal Stephens	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	$\boxtimes$
Crystal Williams	Florida Dept. of Health (FDOH), Office of Medical Marijuana Use (OMMU)	
Daniel Darren	Collier County Sheriff's Office	
Dennis Siewert	Florida Dept. of Law Enforcement (FDLE), Toxicology	
Elvia Medina Marcus	Miami-Dade State Attorney's Office	
Ernie Bradley	Florida Dept. of Transportation (FDOT), State Safety Office	$\boxtimes$
Helen Justice	DUI Counterattack, Hillsborough, Inc.	
Hugh Gross	Hillsborough County Sheriff's Office	$\boxtimes$
Isabel Perez-Morina	Advocate Program, Inc./Florida Association of Community Corrections	
Jon Askins	Florida Law Enforcement Liaison (LEL) Program, FDOT District Five	$\boxtimes$
Deputy John Howard	St. Johns County Sheriff's Office	
Juan Cardona	University of North Florida, Institute of Police Technology and Management (IPTM)	

Kathy Jimenez-Morales	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	
Det. Kevin Millan	Miami Beach Police Department	
Kyle Clark	International Association of Chiefs of Police (IACP)	$\boxtimes$
Larry Coggins	Mothers Against Drunk Driving (MADD)	$\boxtimes$
Dr. Lisa Reidy	University of Miami (UM), Division of Toxicology	
Lora Hollingsworth	Florida Dept. of Transportation (FDOT), State Safety Office	
Malcom Osteen	United States Probation/United States Coast Guard (Reserve)	
Marcie Padron	Orange County Sheriff's Office	
Chief Mark Brown	Florida Highway Patrol (FHP)	
Sgt. Mark Eastly	Pinellas County Sheriff's Office	$\boxtimes$
Sgt. Matthew Rosenbloom	Pasco County Sheriff's Office	
Melissa Valido	Students Against Destructive Decisions (SADD)	
Lt. Michael Marden	Lake County Sheriff's Office	
Nicholas Tiscione	Palm Beach County Sheriff's Office	
Nick Trovato	Florida Association of State Prosecutors	
Capt. Rachel Bryant	Florida Fish and Wildlife Conservation Commission (FWC), Division of Law Enforcement, Boating and Waterways Section, Statewide Boating Safety Unit	$\boxtimes$
Ray Graves	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	$\boxtimes$
Richie Frederick	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	
Sgt. Robert Hager	Broward County Sheriff's Office	
Cpl. Scott Parker	University of South Florida (USF) Police Department	
Shayla Platt	Florida Dept. of Criminal Justice System, Alcohol Testing Program	
Spencer Hathaway	7th Judicial Circuit State Attorney's Office	
Stephen Talpins	Miami-Dade County State Attorney's Office	
Tim Roberts	Florida Law Enforcement Liaison (LEL) Program	$\boxtimes$
Todd Schimpf	Florida Dept. of Health (FDOH), Office of Medical Marijuana Use (OMMU)	$\bowtie$
Ofc. Tom Apsey	Seminole Police Department (Seminole Tribe of Florida)	
Tom Moffett	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	$\boxtimes$
Vernon Howell	Florida Dept. of Highway Safety and Motor Vehicles (FLHSMV)	

Vincent Petty	Traffic Safety Resource Prosecutor Program	
Capt. William Jarvis	Florida Dept. of Business and Professional Regulation	
Hon. William Overton	Trial Court Judge	$\boxtimes$
Sgt. William Weaver	Orlando Police Department	
Traffic Safety Partners		
Name	Agency Represented	Attendance
Chanyoung Lee	USF, Center for Urban Transportation Research (CUTR)	$\boxtimes$
Joe Pecchio	AAA	
Julissa Sarmiento	University of Miami Miller School of Medicine / Department of Surgery	
Karen Morgan	AAA	
Matt Nasworthy	AAA	
Megan Cott	USF, Center for Urban Transportation Research (CUTR)	
Murray Brooks	SCRAM Systems	$\boxtimes$
Olimpia Jackson	United States Navy	
Dr. Patricia Byers	University of Miami Miller School of Medicine / Department of Surgery	
Ryan Huff	USF, Center for Urban Transportation Research (CUTR)	$\boxtimes$
Sandy Ho	Great Bay Distributors	
Coalition Support		
Name	Agency Represented	Attendance
Danny Shopf	Cambridge Systematics	$\boxtimes$
Nusrat Sharmin	Cambridge Systematics	
Alan Amidon	Cambridge Systematics	$\boxtimes$

# Others in Attendance

- Carmen Dixon, Florida Dept. of Health (FDOH), Office of Medical Marijuana Use (OMMU)
- Issac Brown, Florida Dept. of Health (FDOH), Office of Medical Marijuana Use (OMMU)

# 2.0 Meeting Notes - December 1

# **Welcome & Introductions**

Kyle Clark, IACP, introduced himself and welcomed everyone to the Florid Impaired Driving Coalition (FIDC) meeting. He provided an update on the International Association of Police Chiefs, (IACP), annual report on Drug Evaluation and Classification program. He said curricula revisions are ongoing including dry lab videos. A curricular workshop was held in October 2021, and another is scheduled for January 2022. The videos were published on November 30, 2021. The curricular revisions will be piloted after the January 2021 DRE, DRSTDE meetings. The National Highway Traffic Administration (NHTSA) is developing a three-to-four-hour ARIDE refresher class for officers who have already attended DRE training.

The IACP and DREs around the country are following the New Jersey Supreme Court Case, State v. Olenowksi. The case currently on remand to a special master is anticipated to be resolved by February 2021 with implications for DREs testimonial admissibility in court.

Kyle said Tim Cornelius, IPTM, has scheduled the technical advisory panel's next meeting for April 29, 2022, in Orlando. The charge of the advisory panel is to identify best practices, post incident review for DREs, and codify ongoing practices.

He said NHTSA is conducting a feasibility study on marijuana field sobriety tests. Additionally, NHTSA is conducting a separate study to identify the common driving cues associated with marijuana use. Lastly, Kyle noted that there is discussion concerning Delta-8 and Delta-10 marijuana strains throughout the country.

Participants had the following questions and comments:

- Carmen Dixon, FDOH, asked what tests are used by DREs for marijuana impairment testing.
  - Standardized field sobriety test, with emphasis on the finger-to-nose test, but additional tests are being evaluated.

Kyle elaborated that in the case of a crash where an officer suspects the driver is drugged, but a DRE is not available, DREs are able to obtain information from hospital records and the on-scene officer's observations to determine if the behaviors and vital signs are consistent with drug use. If the DRE's conclusion aligns with a toxicology report, those elements build a good case for prosecution. However, he said the process can be challenging if the police report is lacking information the DRE needs. He noted it is difficult to reconstruct a suspected drugged driving incident and IPTM is working to recreate fatal crash scenarios where a DRE was brought in to establish baseline information needed and potential best practices. He said an ad-hoc committee was examining the reconstruction process and will present its findings in April 2022.

Participants had the following questions and comments:

 Danny, Cambridge Systematics, asked if the process is consistent enough to train officers to input the right information to aid in reconstruction and if there were driving cues for other impairing substances beyond alcohol and marijuana. For now, it is just alcohol. However, as cannabis increases in popularity it is becoming an increasingly common reason for stops. Officers are seeing such an increase in use that NHTSA is looking into other driving cues. The biggest cues for driving under the influence of marijuana are speeding and failure to maintain a single lane. Cannabis is the number one impairing substance after alcohol in traffic stops where driving under the influence is suspected. So far there has not been discussion of identifying cues for other impairing substances as they are not as prevalent.

# FIDC Strategic Action Plan - Goal 1

Danny identified the first action of the FIDC Strategic Action Plan – expand the Florida Impaired Driving Coalition Membership – and asked Coalition members to provide updates.

(Potential membership is listed below in bold. <u>Action items to be addressed at the next meeting are in</u> italics and underlined).

## **Outreach Efforts About Membership**

**Military Representation** – Ray Graves, FLHSMV, said Malcolm Osteen is transitioning into a new role in Gainesville, but plans to attend the next coalition meeting.

**Department of Education** – The coalition is actively looking for membership representation from the Department of Education (DOE). It was noted that other traffic safety coalitions have had success with DOE representation, but the representative either moved on or was promoted.

**Multi-cultural representation** – Ernie Bradley, FDOT, said he has not heard back from the Seminole Tribe Police Department representative, but noted that when they last spoke the representative was interested and ready to attend coalition meetings. The coalition is making progress towards this membership goal, but Ernie emphasized potential coalition members do not have to be from a law enforcement background. He said potential members should have a vested interest in the same avenues as the coalition.

**Toxicology Lab Representation** – Members agreed the current representation of toxicology labs is appropriate to support the needs of the FIDC.

**Judicial Representation** – This membership goal is complete as Judge Overton is present.

Law Enforcement Representation – This membership goal is complete as 15-18 of the coalition members are tied to Law Enforcement in some way. The coalition discussed increasing the geographic representation with emphasis on the Panhandle region in Northwest Florida. Chris said LELs were reaching out, but with no results yet. Brett said he will reach out to Chief Robert Bage with City of Fort Walton Beach. It was noted that Chief Bodenheimer, although not present, represents a small law enforcement agency, but one located in Central Florida rather than the Panhandle. Chris said the Panhandle lacks DUI qualified officers and DRE trained officers.

**Prosecution Representation** – The coalition agreed that current prosecution representation is appropriate.

**Defense Representation** – Although NHTSA mentioned defense representation, the coalition is not currently seeking a representative.

**Vendor Representation** – The coalition is not actively pursuing vendor representation but does collaborate with vendors for meeting presentations. It was noted that NHTSA funding is strict concerning the expenditure of funds in relation to vendor partnerships.

**Public Health** – Three representatives from the Florida Department of Health, Office of Medical Marijuana use attended the meeting and provided an overview presentation of their office's role and mission.

Participants had the following questions and comments:

- Chief Railey, FPCA, asked if the vendor issue was brought up by the assessment team or was it discussed in a roundtable format.
  - Chris emphasized that the coalition is not opposed to vendor partnerships, and they are suggested by NHTSA, but vendors need to understand coalition membership will not lead to business opportunities.

# FIDC Strategic Action Plan - Goal 2

**Educate Local Vendors and Distributors on Over-Service** – Ernie said William Jarvis will provide a presentation on drinks-to-go at the February 2022 coalition meeting.

**Community Traffic Safety Teams (CTSTs)** – Chris said the agency is working with CTSTs in pushing impaired driving messages, developing impaired driving tip cards and other educational materials. He asked that members share materials or any content they find helpful for FDOT to adapt for the coalition and other safety partners.

Participants had the following questions and comments:

- Chris asked if law enforcement was seeing or hearing anything regarding drinks-to-go.
  - Chief Railey said it is luckily not creating new drunk drivers or changing the judgement of sober drivers.
- Carmen, FDOH, asked which cards were best or preferred for educational materials.
  - o 3 x 5 cards are preferred over 4 x 6, but the priority is having something pocket sized.
- Kyle said the Governors Highway Safety Administration (GHSA) is partnering with shared ride services in Arizona and asked if the coalition had looked into doing something similar.
  - Ohris said a past partnership with GHSA in administering grants for DREs was labor intensive. More and more states are offering rideshare credits, but it can be a challenge to communicate its availability in expensive media markets. It would be worth considering implementing in a single media market, but the process is not currently at that stage. AAA Tow to Go was provided as an example of a successful private sector partnership.
  - Kyle recommended following how Arizona uses the money to determine if a similar effort would be worthwhile.

# **Impaired Driving Dara Presentation and Discussion**

Chanyoung Lee, CUTR, gave a presentation on trends in Florida's impaired driving data. Traffic deaths continue to increase in Florida, with 2021 preliminary numbers being significantly higher than other years. He showed the data trend dating back to 2004. Although there was a big drop in the number of fatalities concurrent with the economic recession in 2008, there was an increase every year until 2014, when there was a decrease in crashes contrasted with an increase in fatalities. He then compared Florida's traffic data trends to the nation as a whole. Overall, the trend was similar. A national study concluded that the 75 percent reduction could be explained by people not traveling. However, from 2014-2021 Florida's increase in traffic fatalities (36%) was twice as high as the US (18%). He then discussed the proportion of impaired driving fatalities. He displayed the total number of fatalities in Florida from 2019-2021 by month, noting that March is typically high. He said approximately one third of traffic fatalities involve impaired driving. The 2021 data suggests there will be a decline in fatalities, but this is likely due to a delay in reporting. He emphasized that in cases where a field sobriety test was given, 2021 had a higher percentage of test results and that officers need to make sure the paperwork is completed in all cases.

Chanyoung then compared the data trend with the FDOT impaired driving media plan. He discussed the different methods of focusing media resources: should resources be focused in the months with the highest raw numbers or in the months with a higher proportion of fatalities from impaired driving? In comparing the media plan to the NHTSA schedule, he suggested that the high times and months are not always in sync; tourist travel to Florida is high in March, for example.

Miami-Dade County has a low proportion of impaired driving fatalities at 14 percent, but due to the county's high population it has a higher total number of impaired driving fatalities. He contrasted the proportion of impaired driving fatalities of Miami-Dade with those of Duval County at 43 percent, Orange County at 30 percent, and Palm Beach County at 18 percent. He noted that these counties have similar numbers of impaired driving fatalities, but significantly different proportions from 2015-2021. In fact, the proportion of impaired driving fatalities in Miami-Dade, Broward, and Palm Beach counties have been declining since 2018. This is contrasted with the increase of the proportion of impaired driving fatalities in Duval, Hillsborough, and Orange counties. Palm Beach County was one of the counties with the highest proportion of impaired driving fatalities but has decreased significantly. He suggested Palm Beach County should be further examined to see what actions or factors are influencing the decline.

Chanyoung speculated that perhaps there is a decline in impaired driving among target age groups. He suggested that ridesharing may play a role, but it would not explain the decline in Southeast Florida and the increase in Duval, Hillsborough, and Orange counties.

# In summary:

- There was an increase in traffic fatalities in 2020 and 2021, 30 percent of which were from impaired driving.
- There are delays in the timeliness of traffic crash data due to delays in agency reporting.
- Miami-Dade, Broward, and Palm Beach Counties reduced the proportion of impaired driving fatalities over the past several years while the opposite has occurred in Duval, Hillsborough, and Orange counties.

Participants had the following questions and comments:

- Lt. Taylor, (FHP), asked if the reduction in the proportion of impaired driving fatalities correlated with areas with hit and run cases as hit-and-runs have reached unprecedented levels in Orange County with more repeat offenders, but those cases are not reported as DUIs.
- Kyle focused on Duval County's highest data point in the proportion of impaired driving fatalities which was 70 percent in 2017.
  - o Chris said he is actively reaching out to partners in Duval County.
  - Chanyoung verified that the 70 percent data point was accurate and posed the question of why Duval County's proportion of impaired driving fatalities is so high.
  - Danny suggested ride sharing use rates and transit coverage areas may play a role.

# **FIDC Communications Plan-Goal 4**

Danny reviewed the action plan items in the strategic plan and provided background on the purpose and intent of the communications plan. He said it will be important to monitor the data in Chanyoung's presentation to ensure the coalition is aware of shifting target audiences and is refocusing resources to the correct audience. The complete communications plan can be found on the FIDC website (Florida Impaired Driving Communication Plan 2020 (flimpaireddriving.com)).

# Winter Holiday Paid Media Campaign Overview

Chris Craig gave a presentation on the paid media campaign occurring over the 2021 holiday season. FDOT contracted with advertising firm St. John and Partners to buy ads in all Designated Market Areas (DMAs) throughout the state. Chris said the FDOT State Safety Office coordinates with St. John and Partners by providing information about the ads' target audience. The ads are focused on young men ages 18-34. With a budget of \$750,000 ads will be run on radio, television, and on social media. There will be ads run on YouTube and music streaming services. Chris said significant focus testing was conducted and influenced the approach of the messaging. Instead of discouraging drinking, the ads discourage driving while impaired. Ads will also be displayed on Facebook, Instagram, as well as digital billboards across the state. Almost every digital billboard willing to work with FDOT was bought by the media buyers.

Chris next provided a media summary by market. In addition to the targeted ads, FDOT is deploying dynamic message signs through the traffic messaging center. Approximately 230 law enforcement agencies are participating in the holiday campaign as well.

Attendees had the following questions and comments

- Murray Brooks, SCRAM Systems, said he hears the ads all the time and wondered if the ads are
  updated and asked if they do media buys for Florida specific spikes in impaired driving.
  - The national campaign buys their own ads for all the states. FDOT works with the media buyer to analyze last year's NHTSA plan to avoid purchasing the same ad buys.
- Danny mentioned that the Occupant Protection Assessment recommended focusing ad buys in larger DMAs and asked if the Impaired Driving Coalition anticipates a similar recommendation.

- Chris said it is challenging to decide where to spend the money. He said it is hard to know if putting money in a limited number of places is the right approach to take. It is likely that the Safety Office may focus paid media resources in fewer regions, considering that is where the spikes in impaired driving are occurring. He said sports teams are willing and able partners that post on social media encouraging fans to designate a sober driver. The teams post before the games and are part of the paid advertising during the games. The teams also post for the super bowl and new year's emphasizing to enjoy the game by planning ahead. Chris noted that the ads target audience largely follow sports teams and said that is an effective way to reach them.
- Kyle asked if the same number of ads are going to be run in each DMA and is it more expensive to run the same number of ads in some areas as compared to others?
  - Chris said, a little bit of both. The more populous an area the higher the costs of the media buys.
- Kyle asked if there is any new highway safety money from the recently passed infrastructure bill.
  - The bill, H.R.3684 Infrastructure Investment and Jobs Act, may do away with some programs. As an example, no states meet the requirements to get Teen Driver related funding. Because of this the program will likely be deleted and the funds may be distributed to the states. Every year the State Safety Office receives approximately \$25 million in different areas. Impaired driving is one of the largest areas in terms of the portion of funding received for education, training, and overtime grants.

#### **FIDC Action Plan- Goal 5**

## 24/7 Program Best Practices

Ray Graves, FLSHMV, said he is working within Leon County and has made some progress with the local sheriff but not the judge. He will reach out to Walton County and continue working on this item.

Danny reviewed the re-education 24/7 program alternative of going to jail. The program requires enrollees to take a breathalyzer test twice a day. If they fail the breathalyzer test, they go straight to jail. The 24/7 program has been very successful in some states. There was a pilot program in Jacksonville but didn't get enough buy in from the judiciary. There is funding available for willing partners.

It was suggested that to have a successful 24/7 program there needs to be sufficient support from the judiciary and law enforcement to champion the program. Attempts were made to work with Seminole County on a similar pilot, but the county was not ready to prioritize it.

The DUI Diversion best practices white paper is available on the FIDC website: (<a href="http://www.flimpaireddriving.com/practices.html">http://www.flimpaireddriving.com/practices.html</a>)

#### **Traffic Safety Resource Center**

Chris asked Danny to display the FDOT Traffic Safety Resource Center website currently under development. It is anticipated to be completed before the coalition's next meeting in February 2022.

Chris said the impetus for the website was the recurring partner feedback of having difficulty locating traffic safety materials. Law enforcement in particular was looking for more community outreach materials.

The site is designed to be a one stop option for traffic safety resources with no cost to the partner ordering materials from the resource center. The website design is ongoing. The public interface is working, but the software behind the site is still being worked on.

The site is organized across four different areas:

- Topics
- Campaigns
- Target groups
- Language

As an example, Danny displayed the existing Impaired Driving tip cards. The tip cards are downloadable as PDFs and can be ordered in hard copy format. The shopping cart function tracks the login information. The site also cross populates across program areas. Materials for riding a bicycle under the influence was provided as an example of a resource available under multiple categories. Once ordered, the materials are shipped free of charge. The site contains numerous topic areas. The different safety coalitions will assist in identifying gaps. Once complete, the Traffic Safety Resource Center will be significantly promoted. The Traffic Safety Resource Center is intended to provide community partner materials. A valuable piece of this model will be the ability for each coalition to view what the others have produced, and potentially blend what is effective. On average it is anticipated that materials will ship to an agency within two weeks. These materials are spread out across multiple sites currently. The completion of this site will coincide with the closing of the other sites.

Participants had the following questions and comments:

- Danny asked what the accessibility was like for the site.
  - There will be a register and approval process for partners. If it is not obvious, the University of Florida will follow up.
  - The site will also house child safety seats for Child Passenger Safety Technicians (CPSTs) to distribute to the economically disadvantaged. In ordering child safety seats, credentials will be verified as part of the registration process, which may take a couple of days.
    - If the site is tracking and reporting CPST registration is anyone following up?
      - Yes. Federal rules require CPSTs to provide documentation.
- Chanyoung suggested there be a two-tiered account system, one for the public and the other for agency partners who will have the ability to order materials in higher quantities.
  - The order limit is set high. The materials are available to the public in downloadable PDF. The Resource Center will be geared towards large shipments but may change if necessary to meet the variable quantities ordered.

- Chris said he wants all the coalitions to think about the materials available and identify potential gaps.
- Is there anything specifically related to motorcycle impairment?
  - Instead of Don't Drink and Drive it is Don't Drink and Ride. Once the site is online and the coalitions identify gaps, what is missing will be targeted. For Impaired Driving, impaired motorcycle and bicycle riding materials could be developed. Additionally, a significant portion of wrong way driving in Tampa, for example, is due to impaired driving. The one stop shop nature of the site will identify potential cross over areas and opportunities for collaboration. Other coalitions have done breakout groups to identify lists of subjects.
- Is pedestrian safety separate from bicycle safety?
  - o Yes
- Are there materials for Boating Under the Influence (BUI)?
  - FWC has graphics for BUI. A large percentage of impaired boaters park at ramps and then drive under the influence. Chris will ask NHTSA if we can make it about driving.
     "Don't let BUI turn into DUI" was provided as a potential slogan.
- Chief Railey asked what is the plan for getting information out about the resource center?
  - Once the resource center is live, the FDOT State Safety Office will do a mass campaign
    partnering with the Law Enforcement Liaisons to distribute to police chiefs, sheriffs, and
    the Florida Highway Patrol. Likewise, all the traffic safety coalitions will receive an email
    asking to distribute.
  - Ernie said the impaired driving materials were designed for most situations including the basic law, different vehicle laws, and noted that biking under the influence is the same as driving under the influence. Materials can have general as well as specific content such as the updated cost of DUI compared to the cost of attending sporting events.
- Danny asked if the resource center could provide links to other resources if it cannot print them.
  - o Chris said it is always an option, especially if there is another dedicated funding source.
- Murray, SCRAM, asked if agency partners can pull materials off the website and print under time constraints?
  - Chris said all the materials are available in a high-quality PDF format. Because some agencies want their logo on the materials a space for logos is purposefully left.
  - Ernie said the Drive Sober website will still be available, but the goal is to have the Traffic Safety Resource Center be the place for printing materials, but still be linked to the Drive Sober website.

#### **FDLE Toxicology update**

Dennis Siewert, FDLE Toxicology, provided an update on the FDLE toxicological labs' status. The lab was hit hard by the pandemic losing two analysts and are operating at 60 percent staffing level in both labs in Orlando and Tallahassee. FDLE handles most of the state besides Miami-Dade, Broward,

Palm Beach, and Pinellas Counties.

Dennis said the new blood alcohol analyst should be ready by August 2022 and the new drug analyst should be ready by October 2022. In terms of staffing, they are at 8.25 full time equivalents (FTEs) through next year but need to be at 10 FTEs. FDLE is going to bring a new screening procedure online soon. The new screening procedure will be utilized in a hospital setting where different drug classes need to be identified. It will be good for most drugs including opiates assay. They do not have one for fentanyl. The amino assay has not been retired, but a new instrument is being utilized to detect every drug possible. The case goes from confirmation to extraction. The new screening procedure is anticipated to pick up fentanyl and benzodiazepines. It is anticipated to pick up fentanyl which would only necessitate one confirmation extraction instead of two which would reduce turnaround times. The staffing goal is to be back to pre-2020 levels by the end of 2022 with 20-30 days for alcohol results and 30-60 days for drugs as opposed to the current turnaround times of 60 days for alcohol and six or seven months for drugs.

- Kyle asked about designer drugs or when drugs cannot be identified.
  - FDLE recommends sending to private lab. However, FDLE would send it back to agency if it is a substance they do not test for.
- Chris asked if there is anything that could be grant funded that would help with the turnaround delays, besides staffing levels. Potentially items to reduce extraction time.
  - o Instrumentation is very difficult to secure funding for, but the turnaround times necessitate a conversation around the concept paper submittal period.

Dennis provided the context that it takes 2.5 years to train and complete background checks to replace analysts. Instrumentation devices are made outside of the country, but sometimes one component is manufactured or assembled in the US.

Chris said Palm Beach County is receiving the same machine to speed up results. He said FDOT subgrant money cannot be used to purchase property only. Since the toxicology labs need it, they must work on other items such as onsite training where vendors go with analysts to do one on one training with the instruments and software.

# **Public Comment Period**

There were no comments from the public.

# Day 1 Recap and Wrap Up

Kyle thanked participants for their engagement throughout the meeting and reminded participants to return at 9:00 am.

# Adjourn

Day 1 Meeting adjourned at 4:30pm.

# 3.0 Meeting Notes - December 2

# **Review of Day One**

Kyle Clark provided a review of Day 1 of the December 2021 FIDC Meeting.

## **FIDC Action Plan-Goal 3**

# 3.1 Model language for Chemical Test Refusal law

Ernie referred to an Academy of Sciences web conference on drug impaired driving. The webinar discussed how Michigan refusal rates were very low. It was suggested this was attributable to using a different term. Instead of calling it a test it was called an evaluation. This change in terminology correlated with a decrease in the number of refusals. Ernie said it was worth looking into further. He will coordinate with Vincent Petty, Tim Cornelius, and Michigan law enforcement officers involved in the terminology change. He emphasized that the law did not change, but the way officers talked to individuals about it did.

- The implication of this necessitates having to adjust the language used on the implied consent cards, if effective.
- Ernie said that is why it is worth looking further through coordination with the Michigan Impaired Driving Coalition program manager.

#### **3.2 Diversion Programs**

Danny noted the DUI Diversion Program Best Practices are included on the FIDC website. He said the coalition has discussed the potential for repeat offenders to take multiple diversion courses and be treated as a first-time offender and will coordinate with Ray Graves to identify the number of potential repeat offenders being treated as first-time offenders.

#### Model language

Danny noted the model language on ignition interlock is on hold for the moment as MADD and other partners follow relevant legislation related to impairment evaluation technology requirements and standards for all new vehicles. Larry Coggins, MADD, provided an overview of the pending legislation and its potential implications.

Danny said the process to link citation to the impaired driving court case has been completed and confirmed with Vin Petty that the prosecutors are aware of the change, and it continues to work without complaint.

#### Florida Department of Health, Office of Medical Marijuana Use Overview Presentation

Carmen Dixon, Nurse Educator and Training liaison, with the Florida Department of Health's Office of Medical Marijuana Use (OMMU), gave a presentation providing an overview of the OMMU Program. The goal of the program is to inform and educate about the responsible use of medical marijuana. Carmen provided a brief legislative history of legal medical marijuana use in the state of Florida.

The presentation was organized around reviewing the qualifications required for physicians and patients, how to identify medical marijuana cards, and providing a crash course introduction what OMMU does.

In 2014 medical marijuana was approved for patients with cancer and seizure disorders in Florida. In 2017 Amendment 2 was passed expanding the list of treatable conditions, statewide. The most recent legislative language was expanded to include edible forms of medical marijuana as treatment options.

OMMU is organized around two groups: Operations, and Compliance and Licensing. Operations refers to the Office itself and their management of the medical marijuana registry. The registry is an information hub for patients, doctors, and law enforcement. Operations also includes contract management, fleet maintenance, facility management, and staffing tools. Within Operations, the Communications Office provides call center support, email support for doctors and patients, conducts outreach, and creates educational materials for distribution to patients and doctors. The educational materials provide information on cancer, multiple sclerosis, and other certain conditions. Changes in the registry, information from inspections, testing labs, Medical Marijuana Treatment Centers (MMTCs), public records, rules for fulfilling requests from lawmakers, and patients are within the purview of Operations.

Compliance and licensing both manage and conduct the inspections of all licensed MMTCs statewide. Inspections fall under F.S. 381.986. There are 380 dispensaries in Florida, each of which are inspected twice a year. There are approximately 34 growers, all of whom are inspected four times a year. This adds up to close to 1,000 unannounced inspections. Complaints and variances also require inspections. Licensing covers variance requests and provides authorization to MMTC facilities quarterly and twice a year. All employees, patients and caregivers must pass background checks to encourage responsible use.

Compliance covers MMTC product and website audits. 157 products are submitted, approved, and permitted to be sold. There is not one product that has not gone through compliance and licensing. Compliance reviews deficiencies and submits reports to Tallahassee. Facilities identified to have deficiencies must produce a corrective action plan demonstrating proof of correction. There are eight state laboratories that ensure final products pass all state regulations regarding potency, microbes, and herbicides. Every product runs through one of the labs.

Florida's Medical Marijuana Program allows for the safe and responsible use of medical marijuana for the treatment of qualifying medical conditions. A variety of conditions qualify. Some qualifying medical conditions are broad such as chronic pain and Post Traumatic Stress Disorder (PTSD), while others are specific such as Crohn's Disease or Multiple Sclerosis.

- Anne Rollyson, Florida Safety Council, asked if the qualifying medical conditions have parameters determined by the Department of Health or is the determination of a patient having a qualifying medical condition up to doctors.
  - Carmen responded that each patient's definition of pain may vary. The state of Florida and medical boards cannot determine a patient's definition of pain. Whether a patient has a qualifying condition is up to doctors. Doctors are the liaison for what condition a patient falls under. The actual guidelines for quantity and frequency of use are based on the doctor's judgement.

- Anne said that she is seeing a lot of people with mental health and PTSD symptoms, but are not diagnosed with any condition, who are then prescribed medical marijuana without a precedent.
- Carmen said that any medical condition of the kind or class listed in statute can be treated by medical marijuana, but that it is ultimately the doctor's determination. The physician must submit documentation that algins with medical assurance review. The prescribing doctor must do their due diligence, but the kind and class of qualifying condition is loosely interpreted.
- Brandy Howard, SunCoast Safety Council, asked if it ever rises to the level of further review if a physician is always prescribing based on the broadest criteria?
  - Carmen responded that OMMU covers every aspect related to medical marijuana, except the certification of physicians. Medical boards oversee and regulate physicians. If the OMMU comes across loose definitions those instances are forwarded to FDOH's Office of Medical Quality Assurance, who follow up on the OMMU's recommendations. However, the relationship between patient and physician is privileged and must be respected. If patients do not have a diagnosis of a qualifying medical condition, documentation of recent medical history proving the need must be provided. Although PTSD is often focused on, most patients are 50 years and older with chronic diseases such as cancer, Crohn's, or Parkinson's. The main benefit is education for the responsible use for the treatment of major diseases.

The OMMU Program process starts with a doctor's examination for a qualifying condition. The patient's information is then entered into the MMU registry. The physician determines a treatment plan and certification into registry. An ID application is then submitted. OMMU then reviews and approves that application in approximately 10 days. Once an ID is issued, patients must visit their physician every 210 days after their initial visit and be given a new recommendation for a treatment plan. Likewise, the card must be renewed annually.

- Danny asked why 210 days?
  - Todd, OMMU, replied that it was written into statute originally based on what other states were doing.

Every qualified physician must have an active license and take a course every two years to stay qualified. The registry contains everything patients, doctors, and treatment centers would need. It is a one stop show for information to be entered and reviewed.

Caregivers are allowed to buy, store, and dispense medical marijuana to a patient. Caregiver and patient are denoted on the cards. Each patient is allowed only one caregiver, but there are exceptions such as cases involving multiple epileptic children or a developmentally disabled adult. The caregiver system was put into place for those who cannot travel to a dispensary. Some dispensaries have deliveries, but the same rules still apply, those receiving the product would have to provide ID and be able to be identified by law enforcement in the registry. Caregivers must pass a background check if not a close relative. Applicants with previous drug violations are disqualified from being caregivers.

 Chief Railey asked if there is regulation concerning the strength of Tetrahydrocannabinol (THC) coming out of dispensaries.

- Todd responded that every product is tested for levels of potency, but physicians decide how much THC the patient needs.
- Chief Railey asked if in the case of Cannabidiol (CBD) where the THC is a small percentage is it tested for.
  - Todd said CBD products not sold at an MMTC is derived from hemp which falls under the jurisdiction of the Florida Department of Agriculture and Consumer Services (FDACS). Doctors are hesitant to prescribe CBD because to his knowledge there is not as much testing compared to medical marijuana.
- Kyle asked if the status of caregivers is contingent on the patient's qualifying conditions?
  - Todd said that a caregiver possessing product when a patient is disqualified is illegal and that product must be transported in the packaging from the MMTC. The OMMU has a presentation on packaging specifically geared towards a law enforcement audience.
  - Carmen said their goal is to put the "medical" back in medical marijuana in terms of packaging, so it looks plain and displays the patient number in a way similar to a prescription at a pharmacy.
- Anne asked since caregivers must do background check, do patients go through background check in the case an applicant has a history of DUI?
  - Todd said there is no system in place set up to receive 316 violations. To do so would require a statutory change. The OMMU does not cover F.S 316, only 396.

The coalition suggested that working on 316 violations should become an action item.

- Anne said people with a history of addiction or DUI should be ineligible to get a medical card.
  - Carmen responded that it is not OMMU's place to make that call. Unless they have violated 893, the OMMU cannot revoke their card. However, she agreed that if a person has a card and a history of DUI it should be reviewed. If they were a prior or repeat offender, hopefully it will catch up with them. In this case OMMU would refer for medical review.
- Brandy asked if suspension and revocation are the same?
  - Todd said suspension happens initially pending adjudication. Conviction results in permanent revocation. The registry is the focal point; it is not legally sufficient for patients to show a card in a law enforcement interaction. The registry is the safeguard against abuse.

Carmen discussed the inspection process. Based on statute, MMTCs must have 24/7 recordings going back 45 days. She will pull random sections of surveillance. The inspection team reviews hours of footage, if marked as having a deficiency, a report is forwarded to Tallahassee. The MMTCs consist of three different stages: cultivation, processing, and dispensing, constituting a seed to sale system. The system is vertically integrated in that for each MMTC there is one company growing, processing, and dispensing product. This allows the tracking of complaints. The seed to sale system is similar to how prescriptions or food items are flagged. Once the source is identified, the product is either retested or

destroyed to ensure the final product is safe for consumption. Each MMTC must receive authorization at each stage. OMMU is always inspecting and reviewing any and all changes.

 Murray, SCRAM, said that is a big mission and charge for not being under the jurisdiction of FDACS.

Carmen said there are 34 cultivation facilities, 26 processing facilities, 13 fulfillment and storage centers, and 385 dispensaries.

During cultivation inspections closets are inspected for the herbicides used. Processing is where medical marijuana is changed into oils, gummies, and other edible products. These facilities are inspected quarterly in an unannounced fashion and must have 45 days' worth of 24/7 recordings on hand. Inspection teams are strict in identifying violations. Every violation is sent up the chain and puts violators on notice.

There are 20 MMTC companies. Each MMTC has cultivation, processing, fulfillment and storage, and dispensing facilities. Each company cannot share facilities.

- Anne asked if there were parameters on advertising medical marijuana?
  - Todd said there are no limits on physicians advertising, but MMTCs are regulated in statute and are not allowed to advertise.
  - Danny said some are advertising job openings.
  - Carmen said she is conducting outreach to good doctors to counter advertising and is making a point to encourage more credible doctors to get certified.

There are 8 testing labs through which all final product of all MMTCs go through. MMTCs often build their own labs to test their products before sending to the state. The state labs test for potency, microbes, salmonella, heavy metals, herbicides, among other things.

Participants had the following questions and comments:

- Can law enforcement cite people without a card?
  - Carmen said it is important for OMMU to maintain a healthy relationship with law enforcement. She shares law enforcement's aggravation towards someone abusing privilege and not using responsibly. She has presentations on packaging and how to utilize the registry. Law enforcement has access to registry and can run information in real time similarly to how driver's licenses can be run at traffic stops. Patients and caregivers are required to always carry their cards. Statute states that if an individual is in position of product, they must have their card, however, sometimes there is a delay in printing the cards.
- How do can officers access registry if they are not aware of registry?
  - Todd said OMMU gives access to law enforcement agencies as master users. The agency then decides how many users have access.
- Danny asked if the Traffic Records Coordinating Committee should discuss having TraCS (Traffic and Criminal Software) Florida incorporate the OMMU registry?
  - o Todd and Chris said personal information poses similar challenges as emergency data.

The registry allows officers to see the exact amounts patients are supposed to have as well as the type of product. It verifies patients, caregivers, orders, and dispensations. Valid transporters must be in the registry and have a manifest that includes information detailed in statute such as a driver's license number as well as pick up and drop off times.

Law enforcement users are given access as a master user that then create and manage additional accounts desired for their organization. In terms of reporting abuse, OMMU relies on LEAs to identify repeat violators. FS 893 is the standard for suspension and revocation. Violations are based on statutes. Carmen looks forward to partnering on quick reference materials.

It was noted that FDLE provides training on CJNET for medical marijuana pursuant to s 381.986. Carmen provided the following link for more information (<a href="https://knowthefactsmmj.com/">https://knowthefactsmmj.com/</a>)

## In Summary:

OMMU's charge is to educate and inform.

Florida's Medical Marijuana program has 2,802 qualified physicians, 20 MMTCS currently operating with 384 distribution locations.

OMMU is reaching out to oncology offices and specialties that are covered under qualifying conditions but are focused on the number of patients per year. As of November 2021, there are 644,173 patients in the registry.

Participants had the following questions and comments:

- Murray asked if there were reciprocity agreements with other states.
  - o Todd said Florida does not have reciprocity agreements with other states.
- Does OMMU get asked for best practices?
  - Todd said it rarely happens but that the office would be willing to work on best practices that could be readily available if a legislator asked for it.
- Chanyoung asked if the website had information related to driving.
  - Carmen said the website provides in depth information for responsible use that stresses medical marijuana should be treated like alcohol, i.e., do not drive or operate heavy machinery. OMMU is in the process of developing new materials related to pregnancy, legal use, amongst other topics. The process for developing materials is OMMU generates the content, and the surgeon general approves it. The website says to not operate a car or boat when using medical marijuana.
- Is medical marijuana dispensed in bags?
  - Carmen said yes, if it is called medical marijuana, it should be treated as a medical product with clear and legible text per Florida Statute.
- Is it multi-lingual?
  - Yes, similar to pharmaceutical disclaimers.
- Chris asked if there was room to have a visually appealing graphic that catches the eye.
  - Todd said It would be an ask to do something visual.

- Does OMMU make the information sheet that is always given whenever medical marijuana is dispensed to a person?
  - No, the dispensaries make them within the parameters listed in state statute.
- Maybe best practices during conversation of sale could be treated as a teachable opportunity to talk about not driving as well as encourage these facilities to maintain the medical part of medical marijuana.
- Chris said it is worth exploring visually appealing tip cards about the dangers of driving.
- Anne said she would like to see someone convicted on DUI to be disqualified.
- Kyle asked do we prevent the possession of alcohol due to DUI convictions.
  - No, so we cannot treat it differently in this case, as DREs would have to be only looking at medical marijuana. It could only work in a post adjudication supervision scenario.
- Danny asked where additional information on the website is coming from?
  - All information is tied to statute. OMMU does use best practices recommendations.
     Although they have been thoroughly vetted, they are only recommendations.
- Murray asked if OMMU had talked to people in similar roles in other states? Is there a consortium that meets?
  - Carmen said she reaches out and has conversations with other people in similar roles and only uses credible sources such as the National Institutes of Health and the New England Journal of Medicine.
  - Todd said states are trying to pull medical and adult use together. However, most are full legalization states facing different challenges than Florida.
- Chris said at the next meeting the coalition would be interested in the law enforcement education presentation.
  - Todd said the one they usually give is generally 2 hours.

Todd then shared examples of patient and caregiver ID card examples.

- Judge Overton commented that the Prosecutors Association and the judiciary need to be looped into what OMMU is doing.
  - Todd said the director is often called to testify, but access to registry would have to go
    through the public records request process. He noted that the registry is technically still
    in infancy and is set to change significantly.

# **FIDC Action Plan- Goal 6**

The DRE Face Sheets are currently being reviewed by TraCS. Tracking law enforcement training is difficult to do since it is not statutorily required. The coalition has looked at FDLE's training materials, but they are required to track law enforcement training via statute.

The coalition agrees that it should not be creating another database.

 Chris said he has had conversations with Ray that indicated FLHSMV is going to have a DUI tracking system from start to finish. Anne said that it would be interesting to look at Orange County's DUI Diversion Program.
 Started approximately 20 years ago, the program was the first in the state. Could there be a longitudinal study to see what percentage of enrollees have reoffended over time. Orange County could be a good subject due to the longevity of its program and large population.

Follow up with Ray to pull numbers from FLHSMV side and talk about them next meeting.

We found small percentage of people were multiple offenders.

- Brandy asked if DUI school is a component of diversion programs,
  - o Anne said it is a best practice, but not a requirement.
- Anne asked how does Ray know who went through diversion program?
  - Chris said that is the intent behind the idea of DUI database.
- Chanyoung asked how long has orange had a diversion program?
  - Anne said she is confident that it has existed since at least early 2000 stating that Judge Miller claims he started it in his presentations. The Program has not changed a whole lot. Initial focus on college students, got bigger quicky.

## **Legislative Updates**

Ernie passed out a Mothers Against Drunk Driving (MADD) legislative fact sheet that details the HALT Act and Senate Companion RIDE Act.

The Bipartisan HALT Act/RIDE Act will require auto manufacturers to adopt technology detecting impaired driving in all vehicles within 48 months.

- Anne asked if the technology considers drugged driving.
  - Larry Coggins, MADD, said the technology looks for impaired driving. It detects not only impaired, but also distracted and drowsy driving.
- In terms of legislation the detection technology must be there, but will it disable the vehicle or force the driver to pull over?
  - Larry said that will be figured out in the rule making process.

# **Approval of Revised Definition of DUI Model Language**

Update SB 436/HB271 Definition of DUI is likely to continue as it progresses out of the Transportation Committee. Florida Sheriff's Association was not sure about the changes but asked for someone to talk to groups about impaired driving.

Brandy said it was presented to the Association of DUI Programs and the Alliance for Traffic Safety, both of which fully support the model language.

Chris said Nick and Ernie are working to update the model language online. The updated model language has not officially been published but is up for discussion.

Kyle said the model language looks good from the DRE perspective.

Chris said he has no issues with model language, especially since Florida is one of six states in the country without this adopted language. The coalition agreed on the adjustments and will have it posted to the FIDC website.

#### **Assessment Update and FDOT Updates**

The FIDC assessment is scheduled for July 25-29<sup>th</sup> 2022. Upon completion the FIDC will have new goals and objectives. Chris said to be prepared to participate in the assessment, especially as members with unique areas of expertise and experience. He said whether the assessment will take place in person is still to be determined by NHTSA. The coalition grant will cover travel for the assessment. He said Ernie and him will depend on coalition members to go into depth about the coalition's activities. CUTR is starting to provide NHTSA with a briefing book. The assessment will result in an entirely new task list. Chris said there is luckily a lot of room in between meetings and the NHTSA assessment.

Ernie discussed the Wrong Way Driving Initiative. FDOT District Seven has documented a significant number of wrong ways driving incidents. One of the primary factors in wrong way driving is impaired driving. Florida is 42nd out of all states for wrong way fatalities, 45 percent are alcohol and or drug related. 75 percent take place in urban areas and largely occur at night. He said FDOT is working on earned media campaign starting on December 15th. A social media plan has been developed and will be sent out by FDOT. The media campaign will include posters as well as tip cards at rest areas and service plazas where wrong way driving is occurring. The materials are being deployed in Polk, Alachua, St. Johns, Okaloosa, and Brevard counties. He said he wants to keep the coalition informed of what FDOT is doing related to Impaired Driving. Going forward, the coalition will be included in marketing and public engagement opportunities, especially if it is related to impaired driving. He said to reach out to him or Trenda McPherson for more information.

Participants had the following questions and comments:

- Carmen asked if wrong way driving is related to construction in the Tampa metropolitan area.
  - Ernie said that wrong way driving is mainly occurring at highway on-ramps. Several
    wrong way signals light up and automatically notify FHP. He said there are resources on
    the Traffic Safety Resource Center and the Safe Mobility for Life websites concerning
    wrong way driving.

# **Next Steps**

Participants requested the following presentations:

- OMMU law enforcement focused presentation.
- FLHSMV DUI database.
- Impaired Driving Assessment.

Future meeting dates are derived from survey Ernie sent out, but the only potential conflict is with the IACP meeting in August 2022. Ernie will send out a doodle poll after the February 2022 meeting to adjust the next meeting dates appropriately.

Kyle reminded coalition members to check locally and with their counterparts to come back with ideas for tip cards that can be produced and distributed.

The next FIDC meetings are scheduled as follows:

- FY 2022 Q2 Meeting (February 23-24), Location: Orlando
- FY 2022 Q3 Meeting (April 27-28), Location: Orlando
- FY 2022 Q4 Meeting (August 18-192), Location: Orlando

# Adjourn

Day 2 Meeting adjourned at 12:00 PM.

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