STATE OF MONTANA

Impaired Driving Program Assessment

April 10 – 15, 2016
National Highway Traffic Safety Administration

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This report is based on a review of the State's Impaired Driving Program. It is intended to assist Montana'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 that this report will contribute to the State's efforts to enhance the effectiveness of its impaired driving program in preventing injuries, saving lives, and reducing economic costs of motor vehicle crashes on Montana roadways, and commends all who are involved in the day-to-day efforts to reduce impaired driving in Montana.

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 traffic crashes and subsequent fatalities and injuries, NHTSA offers Highway Safety Program Assessments to the States.

The Highway Safety Program Assessment process is an assistance tool that uses an organized approach, along with well-defined procedures, to provide states with a review of their various 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 note where improvements can be made. The assessment can be used as a management tool for planning purposes and for making decisions about how to best use available resources. The 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 staff 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 that have an average impaired driving fatality rate that is 0.60 or higher are considered high-range states. States are considered mid-range if their average impaired driving fatality rate is lower than 0.60 but higher than 0.30 and low-range state if it is 0.30 or lower. Montana is considered a high-range state and is therefore required to conduct a NHTSA facilitated assessment of the State's impaired driving program. Furthermore, the State is required to convene a statewide impaired driving task force to develop a statewide impaired driving plan. The plan must address recommendations from the required assessment.

The Montana Impaired Driving Program Assessment was conducted at the Wingate by Wyndham in Helena, MT from April 10-15, 2016. Under the direction of Michael Tooley, Director, Montana Department of Transportation, arrangements were made for impaired driving program partners and stakeholders (see Agenda) to deliver briefings and provide support materials to the team on a wide range of topics over a three-day period.

STATE BACKGROUND

Montana is geographically located in the Northwest region of the Nation. According to the yearly census estimates, Montana had a population of 1,023,579 in 2014. Residents are distributed over 56 counties and 130 municipalities. Approximately 89 percent of the population is white, 6.5 percent is Native American, 3.3 percent is Hispanic and two or more races represent approximately 3 percent. The remaining population is spread between Asian, African American, Hawaiian and other, however, this represents only slightly over 1 percent.

Approximately 22 percent of Montana residents are under 18, 62 percent are between the ages of 18 and 65, and 16 percent are over 65.

Native Americans make up 6.5 percent of Montana's population, yet in 2014 accounted for approximately 12 percent of all motor vehicle fatalities. While this is a decrease from 20 percent in 2012, the numbers still show that Native Americans are over-represented in traffic fatalities in Montana.

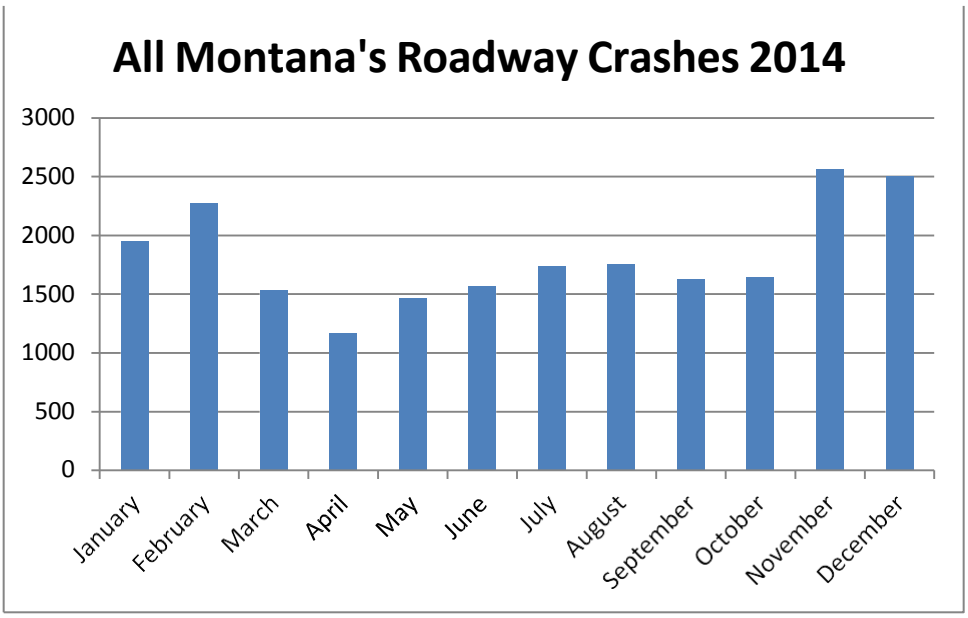
FARS certified data indicates during 2013, 86 percent of Native American motor vehicle fatalities were alcohol and/or drug related while 76 percent of all non-native fatalities were related to alcohol and/or drugs. In addition, 2013 statistics show that 82 percent of all fatalities were also unbelted.

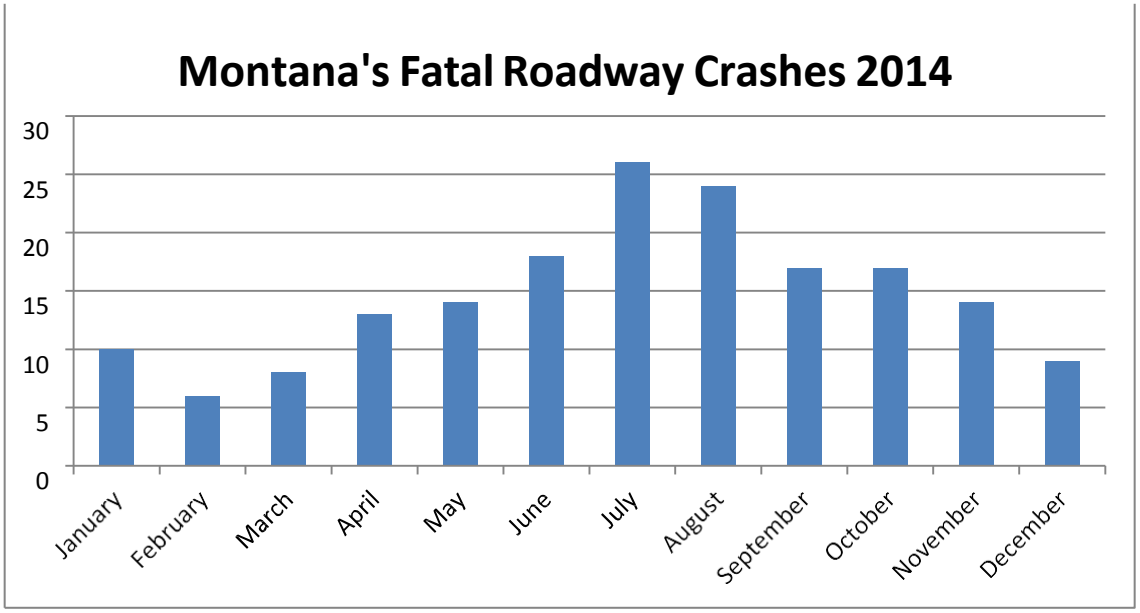
In 2014, there were 1,176,578 registered vehicles and 768,703 licensed drivers. Of those, 1.93 percent are under 18, 78.44 percent are between 18 and 65, and 19.35 percent are over 65.

Residents are accustomed to driving long distances to access jobs, shopping and recreation, which means people drive many miles prolonging the exposure to the risk of a vehicle crash. Driving in rural areas far from medical care means that if a crash occurs, the impacts could be more severe as it may take hours before emergency crews are informed of the crash and can reach the victims and transport them to the appropriate level of trauma care.

Winter weather creates challenges for the driving public, and this is confirmed when reviewing the crash data. The months with the most crashes are November, December and January.

Although more crashes occur during winter months, the months of June through September are when most fatalities occur.





Due to the size and population density of Montana, very few of Montana's vehicle miles travelled occur in an urban environment. A large percentage of traffic is at high speeds and trips tend to involve more time spent on mostly rural roads. NHTSA has recognized the connection between rural roads and speeding, which will increase the likelihood of fatal crashes. Generally

the national urban fatality rate is less than half of the rural fatality rate. Since Montana has the highest percentage of rural vehicles miles travelled in the nation, it would follow that Montana has one of the highest fatality rates. The chart below represents crashes by county for 2014:

		Crash Numbers			Crash Numbers per 100K Population		
County	Population	Total Crashes	Fatal Crashes	Total Injuries	Total	Fatal	Injury
BEAVERHEAD	9346	148	0	50	1584	0	535
BIG HORN	13031	160	8	91	1228	61	698
BLAINE	6683	49	3	27	733	45	404
BROADWATER	5756	132	4	48	2293	69	834
CARBON	10127	223	2	81	2202	20	800
CARTER	1177	8	1	5	680	85	425
CASCADE	81723	2030	15	557	2484	18	682
CHOUTEAU	5904	66	1	24	1118	17	407
CUSTER	11888	287	0	76	2414	0	639
DANIELS	1786	21	1	6	1176	56	336
DAWSON	9249	259	0	78	2800	0	843
DEER LODGE	9227	78	1	32	845	11	347
FALLON	3024	31	0	7	1025	0	231
FERGUS	11435	259	1	75	2265	9	656
FLATHEAD	91633	2093	12	720	2284	13	786
GALLATIN	92614	1694	9	543	1829	10	586
GARFIELD	1261	20	1	7	1586	79	555
GLACIER	13711	124	7	61	904	51	445
GOLDEN VALLEY	839	13	0	3	1549	0	358
GRANITE	3109	129	1	34	4149	32	1094
HILL	16366	285	2	67	1741	12	409
JEFFERSON	11401	396	4	138	3473	35	1210
JUDITH BASIN	2024	53	2	16	2619	99	791
LAKE	28986	486	5	182	1677	17	628
LEWIS & CLARK	64876	1690	6	495	2605	9	763
LIBERTY	2392	12	0	4	502	0	167
LINCOLN	19491	265	3	125	1360	15	641
MADISON	1701	198	3	58	11640	176	3410
MCCONE	7733	23	1	14	297	13	181
MEAGHER	1924	41	1	19	2131	52	988
MINERAL	4167	323	1	108	7751	24	2592
MISSOULA	110977	2585	13	880	2329	12	793
MUSSELSHELL	4665	61	1	27	1308	21	579
PARK	15567	318	4	102	2043	26	655
PETROLEUM	511	22	1	9	4305	196	1761

PHILLIPS	4128	72	2	33	1744	48	799
PONDERA	6165	84	0	35	1363	0	568
POWDER RIVER	1763	51	1	16	2893	57	908
POWELL	7096	212	3	61	2988	42	860
PRAIRIE	1157	47	0	19	4062	0	1642
RAVALLI	40617	646	5	208	1590	12	512
RICHLAND	10810	445	3	97	4117	28	897
ROOSEVELT	10927	117	5	72	1071	46	659
ROSEBUD	9396	137	4	52	1458	43	553
SANDERS	11408	196	5	80	1718	44	701
SHERIDAN	3580	36	3	12	1006	84	335
SILVER BOW	34403	698	6	183	2029	17	532
STILLWATER	9195	247	0	66	2686	0	718
SWEET GRASS	3605	155	1	47	4300	28	1304
TETON	6053	94	3	43	1553	50	710
TOOLE	5220	92	0	28	1762	0	536
TREASURE	736	43	2	15	5842	272	2038
VALLEY	7505	84	3	41	1119	40	546
WHEATLAND	2104	38	0	11	1806	0	523
WIBAUX	1057	38	0	15	3595	0	1419
YELLOWSTONE	151882	3599	16	1538	2370	11	1013

PRIORITY RECOMMENDATIONS

I. Program Management and Strategic Planning

- Identify and track interim impaired driving program measures, such as conviction and recidivism rates, to follow the progress of system achievements and identify those areas that might be in greatest need of improvement.

- Allocate additional resources to on-site monitoring and technical assistance visits to subgrantees and county DUI task forces. Due to Montana Department of Transportation (MDT) staffing limitations, this may entail contracting for services or tapping MDT personnel at the district level.

- Determine the causes for the decline in reinstatement fees and implement a strategy to avoid further severe impacts on DUI task force funding.

- Implement a strategy that would allow some proportion of DUI fines to be used specifically for impaired driving prevention.

II. Prevention

- Conduct a review of the distribution of the Liquor Enterprise Fund and recommend a distribution scheme based on strategic prevention plans.

- Enact a ten cent per drink additional alcohol tax and dedicate revenues to prevention and treatment of alcohol abuse and impaired driving.

III. Criminal Justice System

- Enact legislation establishing a primary seat belt law.

- Ensure training opportunities are available for prosecutors that will assist their knowledge and skills in impaired driving cases including drugged driving cases.

- Fund and reinstitute the Traffic Safety Resource Prosecutor.

- Make the period of driver's license suspension for a test refusal longer than for a test failure.

- Identify and appoint a state agency with oversight of the ignition interlock program. The agency 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
    - administrative rules that guide sanctions for circumvention or other non-compliance with ignition interlock licensure.

- Complete a comprehensive study for the Montana 24/7 Sobriety Program including survival rate analysis and measurement of unanticipated consequences.

IV. Communication Program

- Conduct a comprehensive evaluation of impaired driving communications efforts in the State, including the impact of State and local efforts; incorporate the findings of this evaluation in subsequent media planning, media selection, implementation, and decisions regarding paid media.

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

- Conduct alcohol and substance abuse assessments prior to the start of the PRIME for Life® classes and make referrals to treatment immediately upon determination of need for treatment.

- Create a unified, complete tracking system to track all DUI offenders.

VI. Program Evaluation and Data

- Build a data warehouse (DW) of traffic safety records. Use this system for reporting and data analysis. Make this DW the central repository of integrated data from all sources. Ensure that the DW stores current and historical data and is used for creating analytical reports for end users throughout the State. Create an online statistical analysis tool to access the DW.

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

State Impaired Driving Task Force

In August 2015, in collaboration with the National Highway Traffic Safety Administration (NHTSA), the Montana Department of Transportation (MDT) hosted a two-day Impaired Driving Leadership Summit designed for a select group of state leaders. The MDT Director/Governor's Representative for Highway Safety and the Attorney General kicked off the Summit. This Summit brought together a leadership team representing a varied group of agencies and professions with critical roles in the impaired driving system. Participants represented the Governor's Office, Transportation, the judicial branch, Corrections, Highway

Patrol, Justice, Revenue, Indian Affairs, county attorneys, sheriffs, police, Public Instruction, County DUI Task Forces, and Health and Human Services.

The Executive Leadership Team that grew from this Summit met for the first time in March 2016. This team is composed of those entities that participated in the Leadership Summit with members representing the highest levels in their respective organizations. The MDT Director chairs the Executive Leadership Team (ELT). At this point, membership does not appear to include victims' advocates but advocates directly but ELT organizations do have victim advocates. This is a newly formed group so its full potential has yet to be shown.

A multidisciplinary advisory team for the *Comprehensive Highway Safety Plan* (CHSP) was established in 2015. An emphasis area team specific to impaired driving crashes develops goals and strategies to reduce impaired driving crashes, fatalities, and injuries. The team identifies barriers or problems to implementing strategies, provides regular updates on impaired driving activities, provides guidance on future programs and activities, and coordinates with those working on the overarching highway safety areas of data, emergency medical services (EMS) and safety culture.

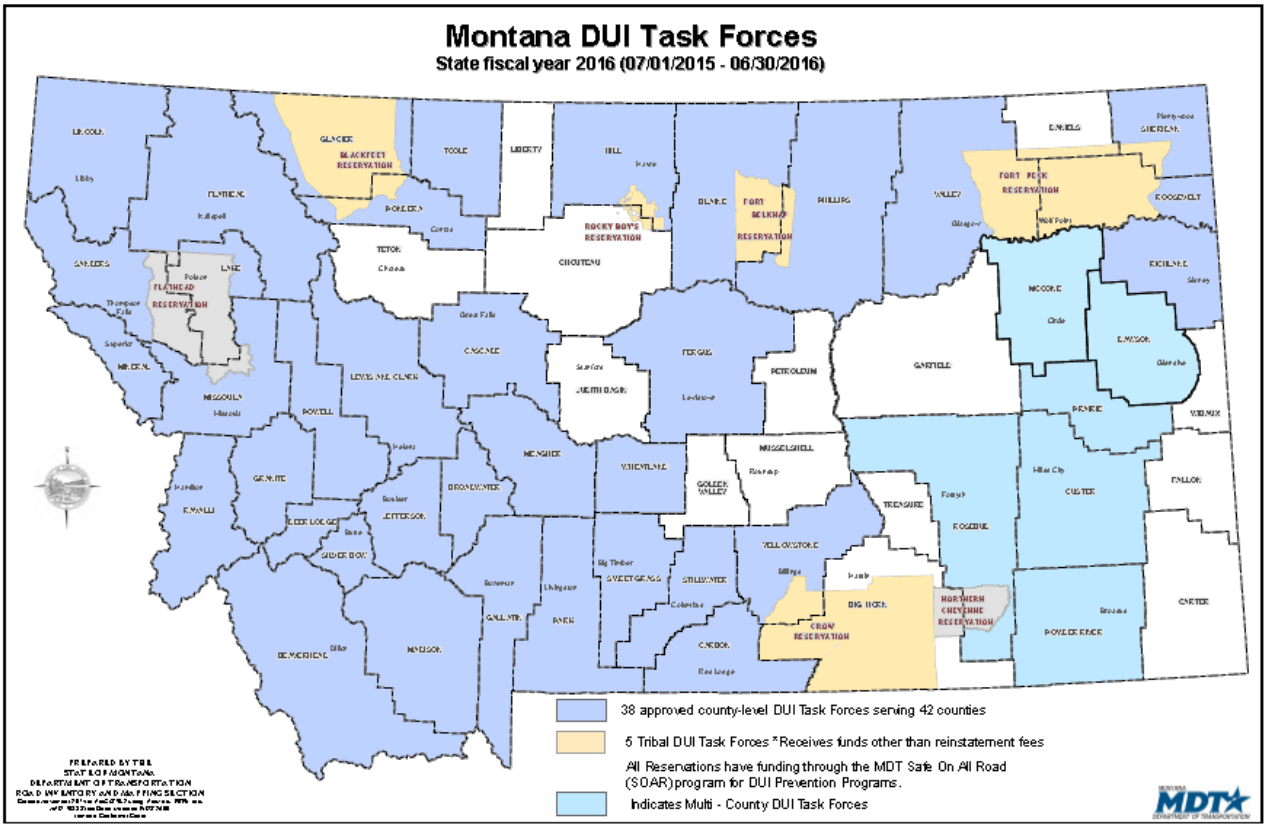
The impaired driving crashes emphasis area team is chaired by the Governor's Highway Safety Representative, Director Tooley who holds the responsibility for oversight of the highway safety program in Montana. This team is composed of over 50 persons who represent the spectrum of impaired driving program elements, including the tribes in Montana. Remote participation via phone or webinar connections is available to assist members from remote areas of the State to participate, including Tribal representatives.

County DUI Task Forces

County DUI task forces are authorized by Montana law (61-2-106, MCA) to:

> …study the problem of alcohol-related traffic accidents and recommend a program designed to:
> (a) prevent driving while under the influence of alcohol;
> (b) reduce alcohol-related traffic accidents; and
> (c) educate the public on the dangers of driving after consuming alcoholic beverages or other chemical substances that impair judgment or motor functions.

In 2015, the Montana Legislature passed HB132 that allows MDT to distribute approximately $500,000 in carry over reinstatement fees to established DUI Task Forces. This has allowed MDT to work with other counties that have not had a DUI Task Force. Since 2013, Montana has increased the number of task forces by six. As of 2016, there are 38 approved county DUI task forces representing 42 counties, providing 75 percent coverage of task forces over Montana's 56 counties.



An MDT staff member provides guidance and assistance to the task forces. This individual reviews and provides assistance to the development of task force plans and organizes a yearly task force meeting during which task force coordinators and members can share best practices.

A DUI Task Force website supported by MDT provides basic information regarding task forces in the State, including the map incorporated above. Also available through the website is a guidebook on how to implement a task force, a contact list of task force coordinators and a checklist entitled "Elements of a Well-rounded DUI Task Force Program." This checklist includes a list of potential participants and suggested program elements: general deterrence, prevention, high visibility enforcement, law enforcement support, consequences for DUI offenders, and other (recruitment and recognition.) This checklist provides an excellent tool with which to conduct a preliminary assessment of the operation and activities of the DUI task forces.

County DUI task forces vary considerably in size and scope of activity, depending on the size of the county, the amount of funds received, and the preferences of the county commissioners. Most task forces are large enough to encompass individuals who represent law enforcement, education, prevention, and the local judiciary. A few task forces are led by a funded coordinator; others are led and composed primarily of volunteers. Activities may include, but are not limited to, additional enforcement, outreach through fairs and other events, media communications including Facebook pages, and school programs. Activities funded with state monies require that a plan and budget be approved by the task force members, county commissioners, and the MDT Director.

Tribal Task Forces

In addition to county DUI Task Forces, there are Tribal DUI Task Forces in Montana that partner with MDT to promote sober driving. During FFY 2015, MDT supported the creation of a Northern Tribes DUI Task Force representing Fort Belknap, Fort Peck, Rocky Boy, and Blackfeet. Membership for this task force is comprised of tribal transportation planning, health, law enforcement, and education. The task force developed a mission statement and has finalized a charter and by-laws. Plans for the future include leveraging this organization to secure other funding.

Other Related Task Forces

Focusing primarily on prevention, the Interagency Coordinating Council (ICC) for State Prevention Programs is comprised of Montana state agencies and organizations that work together to create and sustain a coordinated and comprehensive system of prevention services across the State. MDT is a statutory member of the ICC.

Also statewide, the Montana Prevention Coalition consists of eleven state-approved chemical dependency treatment and prevention programs that provide environmental prevention services within all 56 Montana counties. The Montana Department of Public Health and Human Services (DPHHS) funds Boyd Andrew Community Services to administer and manage the Coalition to help reduce underage drinking to include youth and young adults up to the age of 21.

Montana's multi-disciplinary Traffic Records Coordinating Committee (TRCC) is composed of Montana's Departments of Justice (DOJ), DPHHS, and MDT, as well as NHTSA and the Federal Highway Administration (FHWA). With the support and assistance of the TRCC, Montana completed an in-depth Traffic Records Assessment in 2014. At that time Montana met the criteria outlined in the Traffic Records Program Assessment Advisory 57.9 percent of the time for TRCC Management. Some of the challenges identified for the TRCC included a need for equal and effective representation on the TRCC from stakeholders, inclusion of technology oversight, and the need for regular review of performance measures.

There is strong evidence of participation in the various task forces and work groups and a willingness to increase that participation from those who are already members and from those who are not currently affiliated with a task force.

Recommendations

- Track the progress of the Montana Executive Leadership Team to provide documentation that can assist other states in the implementation and operation of their executive leadership teams.

- Utilize the "Elements of a Well-rounded DUI Task Force Program" to assess the composition and extent of activities of the county DUI task forces.

- Continue to review membership among the various task forces and work groups and encourage additional participation.

- Continue to share best practices, especially on the county DUI task force website, to assist those task forces to implement successful activities.

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

The Montana Department of Transportation (MDT), through an extended process encompassing numerous traffic safety partners, updated the State's *Comprehensive Highway Safety Plan* (CHSP) in 2014. Partners participating include representatives from the State, local communities, and the tribes. At that time, Montana committed to Vision Zero, the goal of zero fatalities and injuries on Montana's roadways.

MDT organized a structured system to develop and implement select highway safety strategies. The Executive Leadership Team, chaired by the Director of MDT, provides focus and oversight for the CHSP. The Advisory Committee reports to the Executive Leadership Team and provides

the support and guidance for implementing CHSP strategies. In reconstituting and updating the CHSP structure, what had been multiple emphasis areas are now focused on those three areas which result in the greatest fatalities and injuries: roadway departure/intersection crashes, impaired driving crashes, and occupant protection. Three emphasis area teams for these issues meet approximately once a month to take action steps to achieve CHSP goals.

For the Impaired Driving Crashes Emphasis Area, the following four strategies were chosen:

- Reduce impaired driving through improved processes and regulations
- Reduce impaired driving through enforcement
- Reduce impaired road users through prevention education
- Continue to support and build collaborative partnerships to reduce impaired driving

Objective Measures for the Impaired Driving Crashes Emphasis Area are defined in the 2015 CHSP as follows:

- Reduction in number of impaired driving fatalities; and
- Reduction in number of impaired driving serious injuries.

The CHSP provides the framework for the State's Annual Transportation Safety Meeting which involves over one hundred safety partners. An important component of the meeting is a data review for each of the emphasis areas to assess the impacts of cumulative efforts plus discussion for each of the emphasis areas. The discussions at the Annual CHSP meeting are used to support the subsequent submission of Montana's *Highway Safety Plan* (HSP) to the National Highway Traffic Safety Administration (NHTSA).

Combining results of CHSP deliberations and decisions, plus results from management reviews and program area assessments (such as this Impaired Driving Program Assessment), MDT's State Highway Traffic Safety Section (SHTSS) develops and implements the HSP. The HSP is a comprehensive document which provides detailed description of the planning process, participating partners, funding levels, and specific projects.

For impaired driving, using Montana-specific data, the primary focus for impaired driving efforts should be males between the ages of 18 – 34. Unfortunately, with fatalities on the rise, the identified goal for the State has been identified to stop an upward trend, rather than to reduce alcohol-related fatalities as shown below:

Core Measure	Description	2010	2011	2012	2013	2014	2016 Target	2020
C-5	Alcohol-Related Fatalities	72	82	89	92	89		
	5-Year Moving Average	***90***	***86***	***83***	***83***	***85***	***89***	***85***

C-5) Alcohol-Impaired Driving Fatalities (FARS)	As trend data indicates a rise in alcohol impaired driving fatalities, MDT hopes to maintain alcohol fatalities at the current base year average of 85 through December 31, 2020. This would be a reduction in the overall trend.

Source: FFY 2016 *Traffic Highway Safety Plan*

The THSP also includes a core performance measure specific to impaired driving:

Core Measure	Description	2010	2011	2012	2013	2014	2016 Target	2020 Goal
A-2	Impaired-Driving Arrests Made During Grant- Funded Activities	873	993	496	368	361	N/A	N/A

Source: FFY 2016 *Traffic Highway Safety Plan*

SHTSS has recognized that identifying and tracking interim measures that reflect process improvements or weaknesses (e.g., arrests and citations, recidivism rates, conviction rates) can be beneficial in identifying those areas in most need of enhancement and subsequent evaluation. Interim measures other than grant-related citations are not tracked within the THSP, however.

For guidance in the choice of strategies and projects, MDT references both NHTSA's *Countermeasures that Work* (CTW) and NCHRP 500, *Guidance for Implementation of the AASHTO Strategic Highway Safety Plan, Volume 16: A Guide for Reducing Alcohol-Related Collisions*. To document the link between projects and CTW, projects in the THSP are specifically identified to a section of CTW. Beyond review of the CTW, there does not appear to be a search of other states' highway safety programs to help identify those projects that might gain traction in Montana.

In addition to the CHSP and THSP processes, MDT developed a program to support Community Transportation Safety Plan development resulting in six community plans (Butte-Silver Bow, Shelby-Toole County, Hamilton, Bozeman, Helena, and Missoula) and assisted in the completion of four and initiation of two tribal transportation safety plans.

Recommendations

- **Identify and track interim impaired driving program measures, such as conviction and recidivism rates, to follow the progress of system achievements and identify those areas that might be in greatest need of improvement.**

- Create a challenging goal for impaired driving that reflects a concerted effort toward improvement by all partners. This may need to be done outside of the *Traffic Highway Safety Plan.*

- Plan and implement innovative projects for impaired driving, particularly to address long-standing cultural issues in the State; search for innovative projects in other states' highway safety programs through the Governor's Highway Safety Association, the American Association of State Highway Traffic Safety Administrators, and/or directly with similar states.

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]

Status

Montana implements a comprehensive impaired driving program that includes extensive efforts in enforcement, education, and adjudication and incorporates tribal safety among its priorities. The success of partnerships across the State have allowed the State to achieve a decline in fatalities from 2007 to 2013 by 17 percent and a decline in serious injuries by 23 percent.

Montana Department of Transportation (MDT) serves as the lead agency for administering highway safety programs. MDT's State Highway Traffic Safety Section (SHTSS), which operates within the Grants Bureau of the Rail, Transit & Planning Division, plans and administers the federally-funded highway safety behavioral program as described in the *Traffic Highway Safety Plan*. (See Section I.B. Strategic Planning for an overview of this plan.)

The Director of MDT serves as the Governor's Highway Safety Representative (GR). The Director is the former Colonel of the State Highway Patrol and has extensive background, interest in, and understanding of highway traffic safety issues.

MDT has made significant progress in implementing program management recommendations from the 2013 Impaired Driving Program Assessment.

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

Project Solicitation and Selection

Solicitation of highway safety projects to be considered for funding is made to existing and potential subgrantees during the annual highway safety meeting for the *Comprehensive Highway Safety Plan* (CHSP) and emphasis area team meetings. Hundreds of attendees receive information during these meetings regarding the highway safety program, its goals and objectives. MDT provides workshops and webinar training regarding grant programs. Instructions and information to apply for a highway safety grant is also posted on the web at www.mdt.mt.gov/safety/grants.shtml.

To reach out to the tribes, Safe on All Roads (SOAR) coordinators with all tribes communicate project solicitation with the tribal governments. SOAR coordinators will also provide technical assistance on completing a grant application. SHTSS receives more applications than it can fund each year.

The following documents are readily available on the MDT website to assist existing and potential subgrantees apply for a traffic safety grant:

- Solicitation of New Project Proposals
- Timelines & Milestones for Funding
- Grant Application | Instructions
- Webgrant Application Process Webinar
- Occupant Protection Mini Grant Program Application
- Comprehensive Highway Safety Plan
- Contract Management Manual
- Project Status Report | Instructions
- NHTSA: Countermeasures that Work

A web-based grant system took effect for FFY2017 applications. The system can be found at: https://fundingmt.org/index.do. The electronic grants (e-grants) system is just beginning to be implemented so the full benefits of using an e-grants system has yet to be determined.

SHTSS implemented a scoring process to help evaluate and rank all project proposals. Using this scoring system, a transportation planner will review each proposal according to content including an executive summary, problem/needs statement, definition of goals, objectives/activities, evaluation, funding plan/sustainability, budget comparison, and past performance (if applicable). Within each of these criteria, a range of points is possible according to pre-defined qualifications.

Administration

Prior to 2014, a highway safety subgrantee could submit a request for reimbursement without a coinciding performance report. This is no longer the case, and SHTSS requires performance reports to support all reimbursement requests.

In conjunction with the Annual CHSP Meeting, SHTSS provides in-person grant management training for all current and potential subgrantees.

The *Contract Management Manual for recipients of federal highway safety grant funding* is easily available online through a link from the MDT website or directly at: http://www.mdt.mt.gov/publications/docs/grants/subgrantee_manual.pdf .
The online version of the manual is dated June 2007. Given that there have been tremendous changes at both federal and state levels in the highway safety program since then, this manual is due to be updated.

One transportation planner within SHTSS serves as the designated impaired driving coordinator. The same staff person also coordinates all the county DUI task forces. It is common to "wear many hats" within a highway safety office, which requires constant prioritization of tasks and responsibilities.

Monitoring and Evaluation

The *Contract Management Manual* indicates that SHTSS staff

> …will conduct periodic reviews of contractor, sub-recipient, and subcontractor records for projects funded by MDT. Reviews may be conducted as both on-site and desk reviews to ensure compliance with the provisions of this manual and any other applicable rules.

Given the size of Montana and the extensive distances between communities, on-site monitoring stretches both staff time and travel funding resources.

County DUI task forces receive no monitoring from the State, but rather rely on county auditors to find and address any financial problems.

Evaluation is a scored element in highway safety grant proposals, capable of earning up to 20 points (17 percent) out of a potential total 115 points for the entire proposal. This is a fairly small proportion given the importance project evaluation deserves.

Each year during the annual Transportation Safety Meeting, crash data is analyzed and progress assessed. In addition, safety partners will review progress on objectives established within each CHSP emphasis area, including impaired driving crashes.

As the CHSP is implemented, emphasis area teams track progress in each of the emphasis areas and analyze the effectiveness of strategies and action steps to ensure they are contributing to reduced fatalities and serious injuries.

Each year, as required by the National Highway Traffic Safety Administration (NHTSA), MDT completes a *Montana Annual Report* that documents progress toward traffic safety goals and achievements of the highway safety program and individual projects. This report provides detailed description of the status of performance measures, legislative accomplishments, project

activities from the previous federal fiscal year, costs expended, and related information. This is an excellent tool to use in assessing program status and assisting in the planning of the next year's program and projects.

Recommendations

- Analyze the allocation of points for highway safety grant proposal review to determine whether criteria are valued appropriately and adjust as needed.

- Update the *Contract Management Manual for recipients of federal highway safety grant funding* to reflect current law and practices.

- **Allocate additional resources to on-site monitoring and technical assistance visits to subgrantees and county DUI task forces. Due to Montana Department of Transportation (MDT) staffing limitations, this may entail contracting for services or tapping MDT personnel at the district level.**

- Review the roles and responsibilities of the impaired driving coordinator to ensure a strong focus on impaired driving program planning and management; determine whether any functions or tasks might be appropriately allocated elsewhere or reassigned.

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

Fees and Fines

Under Montana law (MCA 61-2-107), a portion of the license reinstatement fee ($100 out of a $200 fee) is earmarked to fund county drinking and driving prevention programs. In 2015, the Montana Legislature passed HB132 that allows MDT to distribute approximately $500,000 in carry over reinstatement fees to established DUI Task Forces. This has allowed MDT to work with other counties that have not had a DUI Task Force. Since 2013, Montana has increased the number of task forces by six. As of 2016, there are 38 approved county DUI task forces representing 42 counties, providing 75 percent coverage of task forces over Montana's 56 counties. These funds may be used for any impaired driving activities that are in the task force's plan approved by the DUI task force members, county commissioners, and MDT Director.

Those counties that did not have DUI task forces were not eligible to receive the carry-forward funds. Tribal task forces are also not eligible for any of the state funds. Counties without a DUI task force may join with other counties to create a multi-county task force and share in the reinstatement fees from partner counties. Tribal task forces may do the same and partner with their county's task force and potentially receive resources in this way. For example, Glacier County provides some DUI task force funds to the Blackfeet.

In the past three years, the amount of funds received from reinstatement fees has significantly declined. In one instance, the amount of funds has declined by almost 20 percent from state fiscal year (SFY) 2013 to SFY 2015, and this decline is continuing in SFY 2016. While the reasons for this decline are not completely known, this continuing decline would have a severe impact on the operations of DUI task forces across the State. Discussions regarding the reasons for this decline and steps that need to be taken to address the funding loss have not yet occurred.

Last year, approximately $8.5 million of the alcohol license fees and beer/wine taxes were routed through the Department of Revenue to the Department of Public Health and Human Services. These funds are further distributed throughout the State with the understanding that the funds help to support prevention efforts. It is unclear, however, as to how these funds are being used at the local level.

In 2015, the legislature passed HB488 which doubled the fines for first and subsequent DUIs.

DUI Fines	1st Conviction	2nd Conviction	3rd Conviction
(exclusive of court costs)	$600-$2,000	$1,200-$2,000	$2,500-$5,000

None of the funds received from DUI fines are allocated to reduce impaired driving. Half the fine monies enter the State General Fund. Half is provided to the counties.

Federal Funds

The highway safety program for impaired driving is primarily funded through National Highway Traffic Safety Administration (NHTSA) funds including Section 402, Section 405d (specific to impaired driving) and Section 164 (transfer funds to Section 402), plus state and local match.

Under federal funding legislation, Montana is considered a "high-range state" with an impaired driving fatality rate (fatalities per 100 million vehicle miles travelled) of 0.60 or higher based on three years of Fatality Analysis Reporting System (FARS) data. This designation required Montana to meet certain legislated criteria, including implementing this impaired driving program assessment, to be eligible for 405d funds. For FY 2016, 405d funds available to Montana included $556,931 in carry-forward funds plus $1,100,973 in new obligations for a total of $1,657,904.

An additional 15 percent of base 405d funds allocated to Montana could be available if the State meets the criterion to be designated as an "ignition interlock state." To meet this criterion, the State would need to require all individuals convicted of DUI or DWI to drive only ignition interlock device vehicles for not less than 30 days. Had Montana met this criterion, the State could have been eligible for approximately an additional $165,000 for FY 2016.

MDT transferred $1,448,764 in Section 164 funds to the 402 program for impaired driving projects. However, with no commitment for future Section 164 funds, this is expected to be a one-time transfer.

Congress has passed the Fixing America's Surface Transportation (FAST) Act which provides for five years of highway safety funding. While funding is still dependent on Congressional authorization, passage of the FAST Act provides some level of confidence in a consistent funding stream. MDT is analyzing the FAST Act for funding implications for all transportation programs, including highway safety.

The Bureau of Indian Affairs (BIA) administers its own stream of Section 402 funds dedicated to tribal traffic safety projects. Montana tribes are eligible for these funds which

can be a helpful resource for a tribe. According to the BIA *2016 Indian Nations Highway Safety Plan*, BIA traffic safety assistance is being provided to five of the seven tribes in Montana as shown in the table below.

FY 2016 BIA Traffic Safety Program for Montana Tribes

Montana Reservation / Tribe	402 funding amount	Purpose
Rocky Boy	$ 135,100	One full-time highway safety officer Equipment Mobilizations including "Don't Shatter the Dream" Indian State Holiday mobilization and sobriety checkpoints
Northern Cheyenne	$ 129,000	(same as above)
Crow Nation	$ 133,500	(same as above)
Blackfeet Nation	$ 49,649	Overtime enforcement
Fort Peck	$ 70,180	Overtime enforcement

BIA also continues to support the maintenance of the breath alcohol testing vehicle (BAT-mobile) in BIA Office of Justice Services District V (Billings).

Recommendations

- **Determine the causes for the decline in reinstatement fees and implement a strategy to avoid further severe impacts on DUI task force funding.**

- Identify the use of alcohol license fees and beer/wine taxes and ensure their use is as legislatively intended.

- Determine the funding implications of the Fixing America's Surface Transportation Act for the impaired driving program and projects.

- **Implement a strategy that would allow some proportion of DUI fines to be used specifically for impaired driving prevention.**

- Continue coordination with the county DUI task forces to ensure that different funding streams complement each other.

- Coordinate with the Bureau of Indian Affairs (BIA), Highway Safety Program, to be knowledgeable of and potentially assist with BIA highway safety grant funding to tribes that reside within Montana.

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 exposur1e 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

In the 2013 assessment, a common theme in the assessment presentations as well as in supporting documents described a culture of tolerance, if not promotion of alcohol use in Montana. The *Strategic Prevention Enhancement (SPE) Planning Document 2012* includes the following description:

> The social context within which prevention planning will occur includes an environment where national survey data puts Montana in the spotlight as being #1 in [sic] nation for suicide and #1 for underage drinking. One has to consider the impact of that type of reputation on the will to change the social norms. Montanans would tell you that there's a long-time social norm that alcohol consumption is a rite of passage. Is Montana resigned to this destiny?

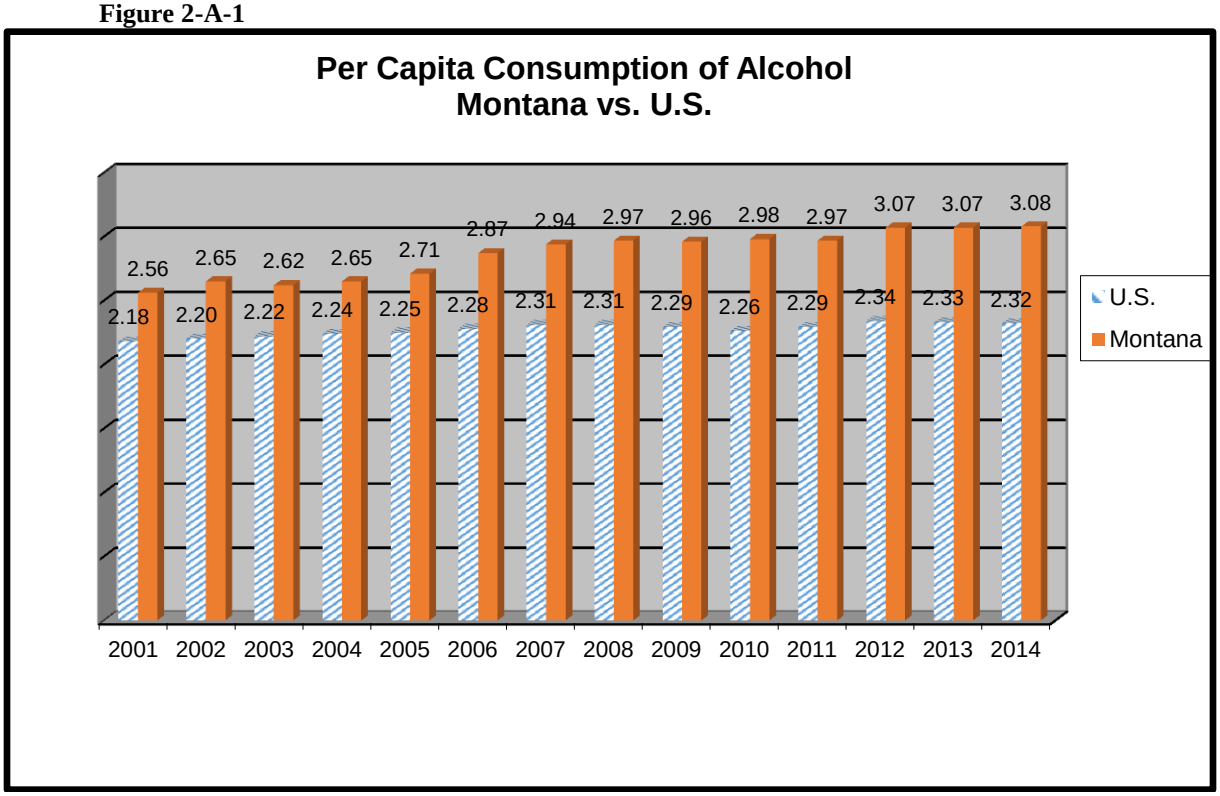
More recent data indicate that the situation has not improved and the theme of alcohol as a part of the fabric of Montana culture appears to continue.

As Table 2-A-1 indicates, in 2014, the last year for which complete data were available, consumption of alcoholic beverages in Montana equaled 3.08 gallons of ethanol per capita, nearly 33 percent greater than the national average of 2.32 gallons per capita. Figure 2-A-1 shows that in recent years, alcohol consumption in Montana has been increasing much faster than the national trend. Per capita consumption estimates are based on taxed sales of alcoholic beverages.

Table 2-A-1 Per Capita Consumption of Alcohol (Ethanol)

Year	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Montana	2.65	2.71	2.87	2.94	2.97	2.96	2.98	2.97	3.07	3.07	3.08
U.S.	2.24	2.25	2.28	2.31	2.31	2.29	2.26	2.29	2.34	2.33	2.32
Diff	18.3%	20.4%	25.9%	27.3%	28.6%	29.3%	31.9%	29.7%	31.2%	31.8%	32.8%

Figure 2-A-1



According to the U.S. Centers for Disease Control and Prevention (CDC), between 2006 and 2010 there were 37.7 alcohol attributable deaths per 100,000 population in Montana, well above the national average of 27.9/100,000 and ranking Montana third among states. Alcohol-attributable deaths include motor vehicle deaths as well as other injuries, liver disease and many types of cancer.

In 2008, Montana formed a State Epidemiological Workgroup which was tasked with identifying and evaluating the substance abuse prevention related data that exists in the state and prioritizing the data to target prevention efforts. The State Epidemiological Online Data System was developed under the Strategic Prevention Framework-State Incentive Grant (SPF-SIG) in the Chemical Dependency Bureau of the Addictive and Mental Disorders Division of the Department of Public Health and Human Services. However, the SPF-SIG grant ended and the online system does not contain data newer than 2010. It also appears that the State Epidemiological Workgroup has become inactive. Given the dramatic rate of alcohol consumption and negative health consequences, a current and detailed epidemiologic analysis of factors related to alcohol use is vital to developing strategic prevention plans.

The State Board of Examiners established the Montana Liquor Control Board in 1933. Patterned after the alcohol beverage distribution system in Alberta, Canada, the Board was charged with the responsibility of purchasing, pricing and vending liquor in the state. By the first quarter of 1935, 115 state-owned retail stores were in operation. In 1937, liquor-by-the-drink became legal. In the mid-1960s, emphasis on customer services brought self-service stores to the state. In 1973,

the state legislature abolished the Liquor Control Board and transferred its responsibilities to the Department of Revenue, Liquor Control Division (LCD). In 1995, the state legislature directed the Department to convert all remaining state liquor stores to agent owned liquor stores. All agency liquor stores now own their liquor inventories that they continue to purchase through the state warehouse, but are permitted to set their own retail prices as long as it is at or above the minimum state established prices. All liquor license holders purchase liquor through the agency liquor stores at a cost no greater than the state's established price.

Department of Revenue, Liquor Control Division Liquor Distribution Bureau manages state wholesale liquor operations, including warehouse shipping and receiving, accounts receivable and payable, inventory management, liquor order processing, agency contract management and customer service. The State maintains agency franchise contracts and supplies liquor to 96 private agency liquor stores. These agency liquor stores are the exclusive retailers of liquor and fortified wine; they sell to the public for off-premise consumption and to Montana's 1,500 all-beverage licensees. The state Liquor Warehouse held bailed and/or state owned inventories for approximately 1,300 regular list products and more than 2,800 special order products.

Fiscal year 2015 generated a combined total income from taxes collected and profits earned of $37.9 million. This is approximately $1.9 million more than the previous year.

Department of Revenue, Liquor Control Division Liquor Licensing Bureau is charged with licensing and regulatory responsibilities for all entities intending to produce, import, distribute or sell alcoholic beverages in Montana. The Bureau processes applications, renewals, transfers and registrations, as applicable, for retail, wholesale and manufacturing alcoholic beverage licenses and permits. The Bureau is responsible for compliance of licenses and permit holders and for providing information and explanation about licensing activity or related law, rule, policy and procedures.

The Bureau issued a total of 5,154 licenses for fiscal year 2015 including license renewals for retail sale of distilled spirits, beer or wine, vendor permits, winery registrations, distributors, breweries and special beer and wine permits.

License fee revenues generated in fiscal year 2015 were $2.4 million which includes revenues collected for registrations, processing, seating fees and late payments on renewals and liquor license violations. Liquor license violations were up 29 percent from 117 in fiscal year 2014 to 151 in fiscal year 2015. Revenues generated in fiscal year 2015 for these fines were $74,766.

During the 2011 legislative session the Responsible Alcohol Sales and Service Act was passed which makes alcohol server training mandatory in the state of Montana. The Liquor Education unit is responsible for educating and informing servers and sellers, license holders, distributors, manufacturers, law enforcement and the general public on topics addressing responsible sales and consumption of alcoholic beverages. This is accomplished through a variety of educational presentations and training materials.

Liquor Education continues to review outside server training programs that could be used in the State, ensuring they meet the state's statute and rule. Liquor Education also provides

presentations at various community events, DUI Task Force meetings, specialized law enforcement trainings and train-the-trainer sessions for the Let's Control It program. Liquor Education periodically sends mailings and resource materials to liquor license holders, trainers and law enforcement providing useful information and outlining the responsible sales and service of alcohol.

The Liquor Education recently earned three Leadership in Alcohol Regulation Awards from the National Center for Alcohol Policy. The leadership award recognizes a program, agency or person that oversees the alcohol industry and promotes public safety. The award highlights effective best practices that may serve as examples to alcohol regulators in other states. The Center for Alcohol Policy is a nonprofit organization that educates policy makers, regulators and the public about alcohol, focusing on its uniqueness and regulation.

Liquor Education has developed a broad network of community partners, brought in more than 240 active volunteer trainers and expanded and updated the state training program Let's Control It. The unit has worked with statewide partners to launch efforts such as the Montana Community Change Project, DUI task forces across the state, the Comprehensive Highway Safety Plan Impaired Driving Crashes Emphasis Area Team, and the Interagency Coordinating Council on State Prevention Programs.

Montana has an open container law that defines an open container as a bottle, can, jar, or other receptacle that contains any amount of an alcoholic beverage that is open or has a broken seal or the contents of which are partially removed or are immediately capable of being consumed. The law prohibits possession of an open alcoholic beverage container by a person in a motor vehicle on a highway. The person in possession of the open container is issued a ticket and can be fined an amount not to exceed $100. Exceptions to the law include open containers stored in a locked glove compartment or open containers in a vehicle in which the operator is a hired driver. It is not clear that there is a requirement that the vehicle or driver must meet other legal requirements such as licensing requirements.

Montana has limited restrictions on happy hours. Though promotions, specials and games are not prohibited, licensed establishments may not sell liquor for less than the posted price (e.g., buy one, get one free). There are no restrictions regarding food and drink combinations. However, every promotional offer must be approved by the LCD prior to actually conducting the promotion.

Montana has statutorily limited dram shop liability. Montana code annotated (27-1-710) addresses civil liability for injuries or damages from an event involving alcohol consumption. The code limits liability for licensees except when a person or entity furnishes an alcoholic beverage to an underage consumer and the furnishing person knew that the consumer was underage or did not make a reasonable attempt to determine the consumer's age; the consumer was visibly intoxicated; or the furnishing person forced or coerced the consumption or told the consumer that the beverage contained no alcohol.

Civil actions are further limited by a provision that says that action may not be commenced against a person who furnished alcohol unless the person bringing the civil action provides notice

of intent to file the action to the person who furnished the alcohol by certified mail within 180 days from the date of sale or service. The civil action must be commenced pursuant to this section within two years after the sale or service. Financial liability is limited to total liability for noneconomic damages not exceeding $250,000 and total liability for punitive damages not exceeding $250,000.

Montana has no statewide social host law though several municipalities have enacted ordinances. An unintended result of localized social host ordinances is that young drinkers plan parties in locations outside the jurisdiction covered by the ordinance. Another potential negative consequence is that local ordinances can decrease the State Legislature's interest in considering statewide legislation.

The Department of Revenue has no enforcement unit or investigation resources. In fact, administrative actions against licensees can be initiated only after law enforcement takes action. The Montana statutes provide authority to contract with the Department of Justice to carry out investigation and enforcement actions. However, most enforcement is conducted by local law enforcement agencies.

Alcohol compliance checks are conducted by law enforcement agencies to help prevent the sale of alcohol to underage patrons. A two-phase approach to compliance checks is encouraged. During the first phase, known as the Remind and Reward phase, a person of legal age attempts to purchase alcohol and determines if the server or clerk properly asks for and checks identification. If proper procedures are followed, the server or clerk is provided a card acknowledging their success. If proper procedures are not followed, even though not technically illegal, the server or clerk is provided a card informing them of the deficiency and reminding them of the proper procedures. The second phase involves an underage person attempting to purchase alcohol. If an infraction is found, appropriate legal action is taken. If four violations are cited within a three-year period, the establishment where the infractions occurred can lose their license to sell alcohol.

Montana Statute provides for allocation of part of the state alcohol excise tax to the Liquor Enterprise Fund for use by the Montana Department of Public Health and Human Services (DPHHS) for prevention and treatment of alcohol abuse. The tax allocation provides approximately $8 million annually for this purpose. The allocation formula is as follows:

- Liquor license fees – 65.5 percent to DPHHS for treatment, rehabilitation and prevention of alcoholism and chemical dependency
- Beer - 23.26 percent to DPHHS
- Wine and hard cider – 31 percent to DPHHS

It is unclear how these funds are being allocated to prevention and/or treatment services or whether funds are being used for impaired driving prevention.

The price of alcohol has been shown to have a direct effect on consumption and alcohol-related health, criminal justice and other societal costs. Alcohol excise taxes are a major component of price. As shown in Figure II-A-2, Montana currently taxes distilled spirits and wine at rates above the national median rate while beer is taxed at a rate lower than the median.

Figure II-A-2
State Alcohol Taxes
As of February 1, 2015

	Spirits Tax (Per Gallon)	Table Wine Tax (Per Gallon)	Beer Tax (Per Gallon)
Montana	$6.75 (1)	$1.06	$0.14
U.S. Median	$3.75	$.72	$0.20

(1) Montana is a control state therefore excise tax rate is estimated.

Figure II-A-3 shows the results of analysis of the impact of adding ten cents to each drink equivalent sold in one year in Montana. Based on 2014 alcohol sales, nearly 579 million drinks were sold in Montana. Even allowing for some decrease in sales due to the increased price, a ten cent tax would generate $53.4 million in new revenues.[2]

Montana defines a keg as a brewery sealed, single container that contains not less than seven gallons of beer. A licensee may not sell a keg of beer unless an identification tag is attached to the keg by the licensee. Keg tags are to be attached to kegs sold in the State for tracking purposes and to assist law enforcement with the enforcement of the Montana Alcoholic Beverage Code. At the time of the sale of the keg, a licensee shall record the purchaser's name, address, date of birth and driver's license number; date of purchase; the name of the clerk making the sale; and the purchaser's signature with the date of purchase.

[2] **For details on the analysis of alcohol tax increases see *Estimated Effects of Dime-a-Drink Added to New York State's Alcohol Excise Tax*. Evalumetrics Research Report 2012-3-1. www.evalumetrics.org**

Figure II-A-3

Montana Alcohol Tax - Estimate of Revenues From "Dime a Drink"

	Rate/Gal(1,6)	Approximate Annual Tax Revenues FY 2014	Gals. Of Bev.	Number of Drinks (2)	New Revenues From Dime a Drink Tax	Increase Unit Costs After Markup (3)	Percent Increase in Price (4)	Decreased Demand Due to Elasticity (5)	Adjusted New Revenues
Beer	$0.14	$4,281,340	30,581,000	326,197,333	$32,619,733	$0.20	14.39%	6.62%	$30,460,729
Wine	$1.06	$3,461,960	3,266,000	83,609,600	$8,360,960	$0.20	12.74%	8.79%	$7,626,048
Dis Sp	$6.75	$13,371,750	1,981,000	169,045,333	$16,904,533	$0.20	11.98%	9.58%	$15,284,937
Total	na	$21,115,050	35,828,000	578,852,267	$57,885,227				**$53,371,714**

(1) Current rate

(2) Based on the following:

Beer @ 12 ozs./drink

Wine @ 5ozs./drink

Spirits @1.5 ozs./drink

(3) Markup = 100%

(4) Current Avg. Retail Price per Drink = Beer: $1.39, Wine: $1.57, Liquor: $1.67 (Based on total on- & off-premise sales divided by total consumption per Adams Beverage Handbooks, 2008).

(5) Elasticity = Beer: -0.46, Wine: -0.69, Liquor: -0.80. Based on Wagenaar (2009).

(6) States where the state government controls all sales. The implied excise tax rate is calculated using methodology designed by the Distilled Spirits Council of the United States (DISCUS).

Recommendations

- Implement an active Epidemiological Workgroup to conduct comprehensive analyses of factors related to alcohol use and negative health consequences in Montana.

- **Conduct a review of the distribution of the Liquor Enterprise Fund and recommend a distribution scheme based on strategic prevention plans.**

- Revise dram shop liability statutes to provide a longer filing period and greater awards.

- Enact a statewide social host statute.

- **Enact a ten cent per drink additional alcohol tax and dedicate revenues to prevention and treatment of alcohol abuse and impaired driving.**

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

Montana conducts the Youth Risk Behavior Survey (YRBS) in high schools throughout the state every two years.

Table II-B-1 shows that in 2015, one in three (34.2%) of students in grades nine through 12 reported using alcohol at least once in the past 30 days while one in five (20.7%) drank five or more drinks at least once in the past month. One in five (19.5%) also reported using marijuana in the past month. Virtually all alcohol use measures indicate decreased use of alcohol over the past 10 years.

Table II-B-2 shows that 23 percent of high school students and nearly one in five (19.6%) seventh and eighth grade students reported riding with a driver who had been drinking alcohol and more than one in 10 (10.9%) high school students reported driving after drinking. More than half of high school students reported texting while driving (54.6%) or talking on the cell phone while driving (58.1%).

Table II-B-1

Alcohol and Other Drug Use	**2005**	**2007**	**2009**	**2011**	**2013**	**2015**
Ever drank **alcohol** during their life	77.8	77.8	75.7	72.8	70.5	69.9
Drank alcohol **before age 13 years**	27.8	25.9	24.0	21.4	19.9	19.6
Currently drank alcohol, during the past 30 days	**48.6**	**46.5**	**42.8**	**38.3**	**37.1**	**34.2**
Drank five or more drinks of alcohol in a row within a couple hours, during the past 30 days	**34.4**	**32.7**	**30.1**	**25.2**	**23.5**	**20.7**
Reported that the largest number of drinks they had in a row was **10 or more**, past 30 days					7.2	6.0
Usually obtained the alcohol they drank by **someone giving** it to them		38.9	37.9	34.1	36.3	34.9
Had a drink of **alcohol on school property**, during the past 30 days	6.4	5.7	5.1	3.5	5.7	5.1
Ever used **marijuana** in their life	41.7	39.1	42.2	39.2	37.6	37.5
Tried marijuana **before age 13 years**	11.2	9.5	9.7	8.0	7.9	8.0
Currently used marijuana, past 30 days	**22.3**	**21.0**	**23.1**	**21.2**	**21.0**	**19.5**

Table II-B-2

Injury and Violence	**High School**	**Grades 7-8**
Percentage of students who:		
Rode with a driver who had been drinking alcohol during the past 30 days	23.0	19.6
Drove when drinking alcohol during the past 30 days	10.9	NA
Texted or e-mailed while driving a car during the past 30 days	54.6	NA
Talked on a cell phone while driving during the past 30 days	58.1	NA

The 2014 Prevention Needs Assessment Student Survey shows similar results (see Table II-B-3). Alcohol remains the overwhelming drug of choice but use has decreased dramatically since 2010. The column labelled MTF refers to the national sample Monitoring the Future Survey. At every grade level, alcohol use rates for Montana youth are well above the national sample.

Table II-B-3

Percentage of Montana Respondents Who Used ATODs During the Past 30 Days by Grade															
Drug Used	Montana Grade 8			MTF Grade 8 2013	Montana Grade 10			MTF Grade 10 2013	Montana Grade 12			MTF Grade 12 2013	Total 30-Day		
	2010	2012	2014		2010	2012	2014		2010	2012	2014		2010	2012	2014
Alcohol	20.0	18.8	15.6	10.2	35.8	36.9	36.2	25.7	49.2	49.5	51.1	39.2	34.6	33.7	32.4
Cigarettes	8.0	7.9	6.2	4.5	14.5	14.6	12.2	9.1	21.9	20.6	18.6	16.3	14.6	13.7	11.7
Smokeless Tobacco	4.8	4.1	3.9	2.8	10.6	10.3	10.5	6.4	17.3	14.5	16.7	8.1	10.7	9.2	9.7
Marijuana	8.0	8.4	6.6	7.0	18.3	20.1	18.7	18.0	22.9	22.9	23.4	22.7	16.2	16.5	15.4
Inhalants	4.5	3.7	2.8	2.3	2.4	1.7	1.4	1.3	1.3	1.0	0.8	1.0	2.8	2.3	1.8
Hallucinogens	0.8	0.8	0.5	0.8	2.1	2.3	1.8	1.1	2.1	2.7	2.6	1.4	1.7	1.9	1.5
Cocaine	0.5	0.5	0.5	0.5	0.7	1.1	0.9	0.8	1.2	1.6	1.2	1.1	0.8	1.0	0.8
Methamphetamines	0.2	0.2	0.2	0.4	0.3	0.4	0.4	0.4	0.3	0.5	0.4	0.4	0.2	0.4	0.3
Stimulants	1.1	1.1	0.6	n/a	2.2	2.3	1.9	n/a	2.2	3.3	2.4	n/a	1.8	2.1	1.6
Sedatives	3.1	3.4	3.0	n/a	4.8	4.3	3.9	n/a	4.2	4.1	3.7	2.2	4.1	3.9	3.5
Ecstasy	0.6	0.7	0.5	0.5	1.1	1.4	0.9	1.2	1.5	1.8	1.1	1.5	1.1	1.3	0.8
Prescription Narcotics	1.9	1.8	0.8	n/a	4.6	3.8	3.4	n/a	5.5	5.0	3.9	2.8	4.0	3.4	2.6
Heroin	0.3	0.3	0.2	0.3	0.5	0.5	0.6	0.3	0.8	0.7	0.6	0.3	0.5	0.5	0.5
Any Drug	13.5	13.3	10.5	n/a	22.2	24.2	21.5	n/a	25.6	25.9	26.0	n/a	20.3	20.7	18.6

n/a - Indicates where MTF data are not available or comparable to data gathered through the 2014 Montana PNA Survey

The Montana Prevention Needs Assessment found that Native American students reported rates of substance use similar to other groups though alcohol use rates are slightly higher. There are several evidence-based prevention programs that have been developed or tested specifically for Native American populations. For example, the Red Cliff Wellness School Curriculum is a substance abuse prevention intervention based in Native American tradition and culture. Designed for grades K-12, the curriculum aims to reduce risk factors and enhance protective factors related to substance use, including school bonding, success in school, increased perception of risk from substances, and identification and internalization of culturally based values and norms.

Montana has 455 school districts that are locally controlled. There is no mandated health or safety curriculum specific to impaired driving or underage drinking. Montana, like most other states, has shifted to learning standards to address Common Core. Montana's learning standards in health include some limited discussion of underage drinking and impaired driving.

Driver education is not required; however, 73 percent of Montana students take the course. Driver Education includes a unit on alcohol and other drugs as well as distracted driving.

Montana has two primary sources of substance abuse prevention funds. The U.S. Substance Abuse Mental Health Services Administration (SAMHSA) block grant and the SAMHSA Partnership for Success (PFS) grant. Both of these programs are administered by the Department of Public Health and Human Services (DPHHS) Chemical Dependency Bureau. PFS funds are distributed to 22 high-need counties through 11 local service providers with 30 Prevention Specialists. Both funding streams are used for capacity building and local grantees cannot use these funds to directly support evidence-based prevention programs. However, local organizations can use these funds to build the capacity to garner grants and other sources of local support for prevention strategies.

As a result, there are few, if any, school-based evidence-based prevention programs in place. Programs, such as Life Skills Training and Too Good for Drugs have been demonstrated to reduce the risk factors that predict underage drinking as well as impaired driving.

Montana faces unique challenges in implementing many proven programs. Many schools are too small to justify the cost-benefit of programs that require expensive training and materials. With the exception of a few population centers, the vast distance between communities makes travel to and from community-based programs such as parenting programs difficult.

Local DUI Task Forces and other prevention organizations conduct traditional impaired driving prevention activities, e.g. mock crashes, beer goggles, in many schools.

Some local DUI Task Forces implement the Alive at 25® program in local schools. The National Safety Council developed the Alive at 25® Defensive Driving Course, a four-hour course to encourage young drivers to take responsibility for their driving behavior. Through interactive media segments, workbook exercises, class discussions and role playing, young drivers develop convictions about safety and practical strategies that will keep them safe on the road.

All colleges that receive federal funding are legally obligated by the Jeanne Clery Act to provide reports about the crimes that occur on and around their campuses. The data, from thousands of institutions across the United States, are collated and released by the Office of Postsecondary Education once a year. According to a recent study by Project Know [3], Montana colleges ranked number one in on-campus drug and alcohol arrests. In interpreting this result, one should consider both the level of substance abuse among Montana college students as well as the vigor of campus law enforcement.

Montana colleges have implemented a variety of alcohol and substance abuse prevention and intervention strategies. Smart Choices, Carroll College's comprehensive plan to address

[3] http://www.projectknow.com/discover/drugs-on-campus-2015/

alcohol and drug abuse prevention, includes:

- The AlcoholEdu online course all incoming freshman take to educate them on alcohol and college related issues
- Prevention workshops and trainings throughout the year
- A one-hour course called "Thriving" for all freshman during the semester
- A six-hour educational seminar for students with alcohol violations
- Campus-wide assessment of campus alcohol use and assessment of policies and practices to address alcohol use
- Collaboration with local law enforcement agencies and school districts to prevent access to alcohol
- Arrive Alive free cab service to reduce drinking and driving
- A social marketing campaign to let students know that choosing to go alcohol-free is a popular choice
- Over 200 alcohol-free events scheduled by the Student Activities Office during the academic year, including the spring junior-senior banquet

The Commissioner of Higher Education has mandated that all public colleges and universities require all incoming freshmen complete the AlcoholEdu online course.

Montana State University has established a task force to address on-campus alcohol and drug use and is participating in the Community Alcohol and Drug Coalitions of America (CADCA) Community of Practice program.

Many states have formed college prevention consortia to share experiences and coordinate prevention strategies and messages. There is no active college prevention consortium in Montana.

The website www.collegedrinkingprevention.gov, created and supported by the National Institute on Alcohol Abuse and Alcoholism (NIAAA), offers a variety of tools and materials for college campuses to use in combating alcohol abuse, binge drinking and underage drinking. The site includes access to material related to campus policies, education and intervention strategies and other resources.

Recommendations

- Provide assistance to local prevention organizations in developing and implementing strategic prevention plans that identify evidence-based strategies to reduce risk factors for impaired driving, underage drinking and substance abuse.

- Create sustainable sources of funding for implementation of prevention programs.

- Provide resources for implementation of strategic prevention plans.

- Coordinate school-based impaired driving activities with evidence-based alcohol and substance abuse prevention programs.

- Establish a college impaired driving and alcohol and substance abuse prevention consortium.

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

Montana does not have a comprehensive coordinated employer traffic safety program. Like most states, such a program has been discontinued for lack of resources and because of the trend away from employment in large companies.

Traffic safety, alcohol abuse, and impaired driving are addressed in other employer services.

Employee Assistance Programs (EAPs) are programs offered by many employers to help employees deal with personal problems that might adversely impact their work performance, health and well-being. EAPs generally include short-term counseling and referral services for employees and their household members. 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 into alcohol or substance abuse.

All companies that provide any goods or services to federal government agencies or are paid with federal funds are required to implement a Drug Free Workplace Program. These programs include drug use policies, employee education and drug testing.

Recommendations

- Integrate impaired driving information into Employee Assistance and other 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

Montana law allows a county with a drinking and driving prevention program, i.e., DUI Task Force, to receive 50 percent of driver license reinstatement fees associated with motor vehicle infractions, such as DUI, collected in that county. DUI Task Forces implement programs that will prevent driving while under the influence of alcohol; reduce alcohol-related traffic crashes; and educate the public on the dangers of driving after consuming alcoholic beverages or other chemical substances that impair judgment or motor functions.

In State Fiscal Year (SFY) 2015, there were 38 DUI Task Forces covering 42 counties. Though not eligible for these funds, there are also tribal task forces.

Many of the task forces address the underage component of DUI with a number of programs. The most common are Responsible Alcohol Sales & Service trainings for retailers and establishments and the companion program, alcohol compliance checks.

Some local DUI Task Forces implement the Alive at 25® program in local schools. The National Safety Council developed the Alive at 25® Defensive Driving Course, a four-hour course to encourage young drivers to take responsibility for their driving behavior. Through interactive media segments, workbook exercises, class discussions and role playing, young drivers develop convictions about safety and practical strategies that will keep them safe on the road.

Most DUI Task Forces have broad representation and include local Prevention Specialists and other representatives from community-based prevention providers and coalitions.

Montana has established the Interagency Coordinating Council (ICC) for State Prevention Programs. The council is charged with developing, through interagency planning and cooperation, comprehensive and coordinated prevention programs that will strengthen the healthy development, well-being, and safety of children, families, individuals, and communities, particularly children and families that are deemed to be at risk.

The Council has identified five specific goals:

- Reducing child abuse and neglect by promoting child safety and healthy family functioning;
- Reducing use by youth of tobacco, alcohol, and other drugs by promoting alternative activities and healthy lifestyles;
- Reducing youth violence and crime by promoting the safety of all citizens;
- Reducing the school dropout rate by increasing the percentage of high school students who successfully transition from school to work, post-secondary education, training, and/or the military; and
- Reducing teen pregnancy and sexually transmitted diseases by promoting the concept that sexual activity, pregnancy, and child rearing are serious responsibilities.

Members of the Council are the:

- Attorney General
- Director of the Department of Public Health and Human Services
- Superintendent of Public Instruction
- Presiding officer of the Montana Children's Trust Fund board
- Administrator of the Board of Crime Control
- Commissioner of Labor and Industry

- Director of the Department of Corrections
- State Coordinator of Indian Affairs
- Director of the Department of Transportation
- Commissioner of Higher Education
- Two people appointed by the governor who have experience with private or nonprofit prevention programs and services
- Designated representative of a state agency who wants to participate and is acceptable to a majority of the other members

The ICC is involved in National Prevention Week by developing and sharing media messages related to underage drinking and other issues. ICC links to community efforts such as mandatory alcohol sales and server training, continued assessment of gaps and challenges in prevention, and prevention opportunities to educate parents.

ICC is sponsoring a community engagement/collaboration conference in September 2016. The conference is intended to bring together DUI Task Force members and substance abuse Prevention Specialists to work on joint planning and implementation of local prevention strategies.

The ICC is currently conducting a pilot project implementing the MADD® Power of Parents curriculum. The MADD® Power of Parents program includes a high school handbook giving parents tools to start the conversation about teen drinking, set family rules and enforce consequences.

Butte teen Mariah McCarthy was killed by an underage driver who had been drinking. Mariah's family formed the Mariah's Challenge Foundation. The Foundation provides educational materials for parents and urges young people to take the challenge to not drink alcohol. The organization has given more than $275,000 in the form of scholarships to Butte-Silver Bow and other high school seniors who have accepted and complied with Mariah's Challenge by not drinking or getting in a car with someone who has been drinking.

Native Americans comprise 6.5 percent of the population in Montana, but represent about approximately 17 percent of the motor vehicle crash deaths in the state each year. In an effort to spread the safety message in tribal communities, Montana Department of Transportation (MDT) developed the Safe On All Roads (SOAR) program. SOAR is a traffic safety education program that provides messages relevant to the individual culture of each community. Coordinators living and working in the community manage their local program and assist in developing appropriate education material. SOAR provides a variety of activities including community events, speakers, media messaging and alternative alcohol-free prom events. SOAR projects also promote occupant restraint use for adults and children.

Recommendations

- Ensure that highway safety professionals participate in all local, regional and state substance abuse, underage drinking and health and wellness task forces.

- Provide assistance to community coalitions in maximizing utilization of the strategic plan and resources of the Interagency Coordinating Council (ICC) for State Prevention Programs.

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

Many local traffic safety organizations promote designated driver and/or safe-ride programs.

The lack of public transportation including cabs has been an impediment to safe-ride programs. Recent legislation in Montana allows alternative transportation services such as Uber to operate in the state. This is seen as a possible aid in increasing transportation alternatives for impaired drivers.

At least one local DUI Task Force provided training on avoiding over-service to local bars that were participating in their safe ride program.

Most colleges provide access to safe-rides for students who need to return to campus from drinking establishments in the community.

Recommendations

- Ensure that all designated driver programs stress “no use” of alcohol messages for the designated driver.

- Ensure alternative transportation programs do not encourage or enable excessive drinking.

- Ensure that both designated driver and safe ride programs prohibit consumption of alcohol by underage individuals or unintentionally promote over- consumption.

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 0.08, making it illegal per se to operate a vehicle at or above this level without having to prove impairment;*
- *Zero Tolerance for underage drivers, making it illegal per se for persons under age 21 to drive with any measurable amount of alcohol;*
- *High BAC (e.g., 0.15 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;[4]

- *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:

- *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

The state of Montana has a variety of laws to address the impaired driving problem. Operating a vehicle while under the influence of alcohol or drugs is generally addressed in a very comprehensive manner. The laws fall into several categories including the following:

- Operating a vehicle under the influence which includes provisions for driving under the influence of either alcohol or drugs;
- Per se alcohol concentration laws;

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

- Mandatory penalties including enhanced penalties for repeat, high blood alcohol concentration (BAC) offenders and those operating under the influence with a minor in the vehicle;
- Offenses where an offender causes the death or injury of another;
- Implied consent to a blood alcohol concentration test;
- Mandatory driver's license revocation for offenders as well as for blood alcohol test refusal;
- Offenses for driving while license suspended or revoked;
- Sentencing options including fines, jail, imprisonment on subsequent offenses and provisions for vehicle ignition interlock devices (IID);
- Specific offenses for underage consumption, possession, purchase, identification misuse and operating at a reduced blood alcohol concentration level;
- Administrative license revocation.

Offenses

The primary offense in the push against impaired driving is Montana Code Annotated 61-8-401. Both driving under the influence by alcohol or other drugs is commonly referred to as Driving Under the Influence (DUI). There is a general provision which makes it an offense to drive under the influence of alcohol or drugs. Driving under the influence is defined as:

It is unlawful and punishable … for a person who is under the influence of:

(a) alcohol to drive or be in actual physical control of a vehicle upon the ways of this state open to the public;

(b) a dangerous drug to drive or be in actual physical control of a vehicle within this state;

(c) any other drug to drive or be in actual physical control of a vehicle within this state; or

(d) alcohol and any dangerous or other drug to drive or be in actual physical control of a vehicle within this state.

Prosecutions may take place under the per se 0.08 BAC standard or without a breath or blood test primarily using observations of an officer or other witnesses.

DUI first, second and third offenses are misdemeanors prosecuted with increasing punishments for subsequent violations.

A first DUI conviction carries a $600 to $1,000 fine, up to six months in jail and a six month driver's license revocation. Fines, incarceration and license revocations increase with each

subsequent conviction as demonstrated by the chart below. All convictions carry some license revocation and subsequent convictions require installation of ignition interlock devices.

MONTANA DUI PENALTY CHART	
	PENALTIES
FIRST DUI CONVICTION misdemeanor	• 1 day to 6 months in jail; • $600 to $1,000 dollars in fines; • loss of license for 6 months
SECOND DUI CONVICTION misdemeanor	• 7 days to one year incarceration; • $1,200 to $2,000 fine; and • loss of license for one year
THIRD DUI CONVICTION misdemeanor	• 30 days to one year incarceration; • $2,500 to $5,000 fine; • loss of license for one year
FOURTH DUI CONVICTION felony	• 13 months to 2 years in residential treatment or up to 5 years in prison • $5,000 to $10,000 fine • loss of license for two years

License revocation is also a mandatory penalty for violating a DUI law in Montana. Convictions of second or subsequent offenses carry longer revocations and interlock installation is required to be ordered on those subsequent offenses. Treatment is also required as a probationary term.

The Montana schedule of punishments for DUI, if applied, is sufficient to provide punishment and deterrence.

The Montana Legislature has also addressed injury and death caused by a motor vehicle operator by carving more serious penalties where an offender causes the death of another or causes bodily injury. Vehicular Homicide carries imprisonment up to thirty years and a fine up to $50,000. Bodily injury DUI offenses are called Negligent Vehicular Assault. Assault with bodily injury carries a penalty of up to one year in jail and a possible fine of $1,000 plus

restitution to the victim. Drivers guilty of Negligent Vehicle Assault with serious bodily injury can be sanctioned by prison for up to two years and a fine of up to $10,000 plus restitution to the victim. Incarceration is not mandatory and can be suspended by the court.

Criminal Endangerment, as well as Criminal Child Endangerment, are also addressed and can be used for prosecutions where a driver places others in peril while operating a vehicle while impaired. Penalties for Criminal Endangerment are felonies and can carry fines up to $50,000 and imprisonment for up to 10 years.

The state of Montana has also enacted an Aggravated DUI statute. Aggravated DUI is defined in several different ways including driving with a BAC of 0.16 or higher, driving impaired while violating an interlock device order, or driving impaired while having a suspended or cancelled license. Aggravated DUI obviously carries more serious sanctions including minimum jail terms beginning at 48 hours and fines beginning at $1,000. Aggravated DUI sanctions also increase if there is evidence that a minor under 16 years of age was in the vehicle at the time of the offense.

Driving Under the Influence by drugs or a combination of drugs and alcohol is addressed generally in Montana by impairment standards. The State does not have laws that define levels of legally prescribed controlled substances or illicit drugs and prosecution is based on testimony under the impairment statute. There is one exception. Montana does have a per se impaired driving law in the case of delta-9-tetrahydrocannabinol. Driving with a presence of 5 ng/ml or more of delta-9-tetrahydrocannabinol is by definition driving under the influence.

Laws involving minors exist in the campaign to fight impaired driving and minors consuming alcohol. These include statutes that prohibit minors from consuming, possessing, or purchasing. It is also illegal for a minor to knowingly provide false information about the minor's age (for example, by using a false ID) to an establishment serving alcohol. Penalties for minors under 18 years of age for possessing alcohol or violating a Montana statute in regards to alcohol are significant. Minors under 18 who are convicted must pay fines, attend a substance abuse course, perform community service and will lose their driver’s license. Subsequent convictions carry stiffer penalties in all categories. Minors 18 and over face slightly different penalties and may be incarcerated.

Minors operating a motor vehicle while impaired at a BAC level in excess of 0.08 are subject to adult sanctions. Minors (under 21 years of age) operating a vehicle at or above a BAC of 0.02 but below 0.08 are subject to a fine of $100 to $500 and their license will be suspended for 90 days. They also must complete substance abuse education. Once again, if the minor has reached 18 years of age, they face slightly differing penalties and can be subject to confinement.

Montana allows parents to provide alcohol to their underage children to a certain level. It becomes unlawful for a parent to provide alcohol when the child's BAC reaches 0.05. Minors are also allowed to enter and remain on licensed premises at age 18.

There are administrative remedies and criminal penalties applicable to businesses holding alcohol licenses and providing to minors or violating other beverage control regulations. The Montana Department of Revenue may suspend or revoke licenses and may levy fines to licensed businesses failing to comply with alcohol regulations. Law enforcement may also file criminal charges for violations of penal statutes covering the sale or control of alcoholic beverages.

Montana has clear laws to criminalize operating a vehicle during a period of suspension, including DUI or refusal revocations. The sanction for a driving under a revoked license because of a DUI case or refusal is two days to six months in jail and a possible $5,000 fine. In addition, their vehicle is to be impounded for thirty days and they can be sentenced to additional community service.

Montana does not have a primary seat belt law nor are sobriety checkpoints specifically allowed. Safety check roadblocks are statutorily approved where drivers may be stopped to check for license, registration and insurance. These sometime snare impaired drivers.

The state of Montana also has license revocation for persons operating commercial motor vehicles with a BAC of 0.04 as well as a DUI offense. Montana does have an open container law and there is keg registration.

Implied Consent

Any person who accepts the privilege of operating a motor vehicle within Montana is deemed to have given his or her consent to submit to an approved breath or blood test for the purpose of determining the alcohol or drug content of his or her blood if the person is lawfully arrested for DUI. Refusing a breath or blood test for alcohol is penalized by a possible administrative license revocation of six months for first offenders up to one year for repeat offenders. There is no penal offense attributed to a breath or blood test refusal.

If a person refuses a breath or blood test, and they have previously been convicted of a Driving Under the Influence offense, Montana law allows officers to seek and secure a warrant to draw blood for evidence from the suspected impaired drivers. A warrant for a blood draw on a first offense is not allowed unless another aggravating factor exists which creates a more serious offense.

Preliminary breath testing (PBT) is allowed in Montana. Numerical results of PBT readings are not admissible in court.

Other

A provision unique to Montana is that municipalities may pass ordinances which mirror State law or work in conjunction with State law. It appears the only effect of this provision is the disposition of some fines and costs. It does not appear to weaken efforts to combat impaired driving. As a positive, the city of Missoula was used as an example of a city with a progressive municipal law. They have passed a local ordinance creating an offense with a possible fine up to $500 for refusing a breath or blood test.

In Montana, a statute limits dram shop liability and there is no statewide social host liability law although some local jurisdictions have passed measures.

There is clear support statutorily for DUI and treatment courts in Montana. Legislative support has also been gained for treatment programs including 24/7 which requires twice a day alcohol testing for offenders in lieu of incarceration. Another law of some note is an administrative penalty of $300 for refusing a breath or blood test. The money collected is earmarked for the Forensic Science Division of the Department of Justice where it is to be used to pay for alcohol and drug tests of persons charged with impaired driving.

Case Administration

Most Driving Under the Influence cases are filed in Justice of the Peace Courts, Municipal Courts or City Courts. Felony DUI cases are filed in the District Courts. Prosecutions in Justice of the Peace Courts are handled by attorneys employed by local County Attorney's Offices. City and Municipal Courts have prosecutors hired by the municipality. The filing and prosecution of DUI cases will be discussed in more detail in the Prosecution and Adjudication sections of this report.

Montana has sufficient laws in place in most areas to be effective in efforts to combat impaired driving. However, there is sufficient reason to believe that many portions of the laws are being ignored (such as vehicle impoundment from drivers operating while having a suspended license) or there is little or no mechanism to enforce provisions (such as the use of interlock devices or probation terms including treatment.) There is also evidence that jail or prison space is limited, which means tougher sentences are rarely imposed or carried out. This can weaken efforts to deter impaired driving behavior.

Recommendations

- **Enact legislation establishing a primary seat belt law**.
- Pass a law specifically sanctioning sobriety checkpoints.
- Pass a statewide penal offense for a driver that refuses a breath or blood test request when probable cause exists to believe the driver is driving while impaired.
- Amend the law allowing for blood draw evidence warrants to include seeking a warrant for first time offenders.
- Eliminate the statute that limits dram shop liability.
- Pass a statewide social host liability statute.
- Create an oversight mechanism to ensure enacted statutes to fight impaired driving are being implemented and enforced.

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

Enforcement of traffic laws in many parts of Montana is a challenge and traffic enforcement, including impaired driving enforcement, is not a priority in a vast majority of the State's 106

non-tribal law enforcement agencies. Seven Native American reservations also each have tribal or Bureau of Indian Affairs (BIA) law enforcement officers. There are many areas where very few law enforcement officers are responsible for a vast geographic area that is sparsely populated (e.g. the Garfield County Sheriff's Office is composed of two deputies who are responsible for 4,848 square miles with 1,290 residents). Of the 56 counties in Montana, seven of them account for almost 70 percent of crashes and traffic enforcement.

Some larger agencies that have traditionally staffed dedicated traffic enforcement units have found it necessary to reallocate those resources to meet daily call for service demands.

The Montana Department of Transportation (MDT) provides funding to law enforcement agencies to enhance enforcement during national enforcement mobilizations. Specific impaired driving enforcement is funded under the National Highway Traffic Safety Administration (NHTSA) moniker *Drive Sober or Get Pulled Over* for the July 4th holiday and for the Labor Day mobilization. Only about 28 of the 106 law enforcement agencies plus the Montana Highway Patrol (MHP) participate in these two mobilization waves. The number of participating agencies is intentionally limited so as to provide more meaningful enforcement efforts in areas where data shows the greatest problems exist. Many other mini-grants are awarded to law enforcement agencies to fund impaired driving enforcement during special community activities involving large numbers of people and alcohol use.

Consistent year-round enforcement is evident in MHP but in few other law enforcement agencies. MDT funds a media campaign preceding the Labor Day mobilization and requires law enforcement agencies receiving MDT funding to engage with the media to provide localized public safety messages. The State Highway Traffic Safety Section (SHTSS) provides news releases before, during and after the mobilization to keep the public informed.

Thirty-eight DUI Task Forces have been organized throughout the State representing 42 of the 56 counties. There are an additional two task forces within the Native American tribes: one for the Blackfeet, Fort Belknap, Rocky Boy and Fort Peck tribes situated along the northern Hi-Line, and one in the Crow reservation along the southern border with Wyoming. The 42 non-tribal task forces are funded primarily from the driver's license reinstatement fees that each offender pays to have their driving privilege reinstated after an impaired driving violation. Tribal DUI task forces are not eligible for funding from reinstatement fees directly but may request funding from a non-tribal task force that adjoins the respective reservation. Task forces are permitted to apply for additional funding from MDT. DUI Task Forces are comprised of law enforcement personnel and various community stakeholders. Membership of each task force is determined by the county or counties the task force covers.

Funding for DUI Task Forces has been decreasing in recent years even though the number of impaired driving arrests has remained relatively consistent. The exact reasons are unknown but it was presented anecdotally that more people are not bothering to reinstate their driver's

license, choosing instead to drive on a suspended license, along with a potential reduction in license suspensions due to plea bargaining.

Each DUI task force must develop its own plan for addressing impaired driving. This plan must be approved by the county government before it is submitted to MDT for review and approval. Only after approval of that plan will funding be allocated to the task force. While MDT provides some guidelines on what a DUI task force should concentrate its efforts on, each task force has a great deal of autonomy to develop a plan that is appropriate for the unique circumstances of its region. Task force activities often include enforcement, education, assessment, and community involvement.

MDT conducts an annual meeting of task force representatives to share information about best practices and provide information and presentations about resources available in the State.

MDT has an effective crash data collection system that is used to record all information reported from motor vehicle crashes throughout the State. The Safety Information Management System (SIMS) has recently been upgraded and provides a more complete traffic records analysis system. This information is used to identify locations in Montana where fatal and serious injury crashes are occurring so law enforcement efforts may be directed to those locations. MHP uses this system to direct the targeted activities of its Safety Enforcement Traffic Team (SETT). The use of data from SIMS by other law enforcement agencies is minimal at this time. Those who direct their personnel often rely on internal record keeping or personal knowledge of problem areas.

The MHP SETT is deployed throughout the State in a data driven manner and to assist local jurisdictions during times when local special events involve large numbers of people and the consumption of alcohol. MHP is also allowed to undertake limited enforcement activities on Native American reservations when other law enforcement agencies are generally restricted from doing so.

The use of sobriety checkpoints is prohibited in Montana. Driver's license and vehicle safety checks are permitted by law but are seldom used to help identify impaired drivers. Seat belt violations are a secondary offense and thus seat belt enforcement efforts are not used to help identify impaired drivers. Saturation patrols are the most commonly employed method of conducting high visibility impaired driving enforcement but even this effort seems to be used only during specific mobilization periods or in locations of large public events.

The use of Preliminary Breath Test Devices (PBTs) is authorized and the results of a PBT test may be used to help establish probable cause for an arrest but may not be introduced as evidence in criminal court. The use of mobile data terminals is limited to MHP and a few of the largest municipal law enforcement agencies. MHP is acquiring in-car and body worn

video recording equipment that can be used to capture evidence of driving impairment. MHP also has a Mobile Impaired Driving Assessment Center (MIDAC), a specially equipped 32-foot vehicle designed to enable law enforcement officers to process impaired drivers at or near the scene of an arrest and to serve as a deterrent by advertising that impaired driving enforcement is being conducted in the area. Variable message signs are also often used to display impaired driving prevention messages.

MDT funds two Traffic Safety Resource Officers within the MHP. In addition to serving as liaisons between MHP and local law enforcement officers, prosecutors, judges, tribal governments and the public, these officers are responsible for conducting Standardized Field Sobriety Testing (SFST), Advanced Roadside Impaired Driving Enforcement (ARIDE) and Drug Recognition Expert (DRE) training to law enforcement officers throughout the State. Annual SFST refresher classes are provided and are mandatory for MHP troopers and officers of some other departments. Numerous ARIDE classes are provided each year and the State has a growing DRE program.

Ignition interlock devices are used in Montana and their use may be ordered by a court. Little training has been provided to law enforcement officers, prosecutors or judges concerning the appearance, use of, or requirements of ignition interlock devices. It appears these devices are not widely used, though, as there are other approved options for monitoring an offender's use of alcohol including SCRAM, Soberlink, and a 24/7 monitoring program. The 24/7 monitoring program was initiated by MHP in 2010 and requires an offender to report to a testing facility twice a day for breath testing. Many of these testing sites are located at detention facilities and if an offender fails a breath test because of having ingested alcohol, that offender can be immediately incarcerated.

The Montana Department of Justice, Forensic Science Division (FSD) tests all evidential and post mortem blood specimens in the State. By acquiring additional staffing, they have been able to reduce the time for specimen analysis to very reasonable limits. Electronic and telephonic search warrants for the blood of DUI suspects are authorized in Montana for drivers with one or more prior DUI convictions. This has resulted in an increase in the number of blood specimens obtained and sent to FSD for analysis. FSD is also responsible for the statewide alcohol breath testing program. Approximately 20,000 breath tests are administered annually. Existing breath test instruments are outdated and downtime is becoming an issue with maintenance costs quickly rising.

There is no standardized alcohol influence report in Montana. Many departments have their own unique form as part of their own CAD/RMS system or in paper format. Counties and municipalities are entitled to adopt their own laws concerning various aspects of impaired driving and chemical testing as long as those laws are no less stringent than state laws. This complicates any attempt toward standardization.

MDT evaluates all grant funded enforcement activity for effectiveness. This evaluates the output of those taking part in enforcement activities but there is no evidence that regular evaluation of outcomes takes place. Some limited surveys are conducted to determine exposure to impaired driving prevention messaging and to determine statewide changes in attitudes and behaviors but these are not related to specific activities, making it difficult to determine what measures are most effective at combating impaired driving.

MDT funds three part-time Law Enforcement Liaisons (LEL). Two are chiefs of police and one is an employee of the Montana Peace Officers Association. They are paid for the time they perform duties as an LEL. They are responsible for promoting programs of MDT and for recruiting more law enforcement agencies to participate in MDT enforcement initiatives. The effectiveness of these three LELs is monitored and will help guide a decision on further expansion of the LEL program.

Underage drinking remains a concern in Montana. Alcohol education and prevention programs are available through several police agencies, DUI task forces, non-profit organizations like the HELP Committee of the Boys and Girls Clubs of the Hi-Line, the Montana Department of Revenue and others. Alcohol compliance checks are conducted by law enforcement agencies to help prevent the sale of alcohol to underage patrons. A two-phase approach to compliance checks is encouraged. During the first phase, known as the Remind and Reward phase, a person of legal age attempts to purchase alcohol and determines if the server or clerk properly asks for and checks identification. If proper procedures are followed, the server or clerk is provided a card acknowledging their success. If proper procedures are not followed, even though not technically illegal, the server or clerk is provided a card informing them of the deficiency and reminding them of the proper procedures. The second phase involves an underage person attempting to purchase alcohol. If an infraction is found, appropriate legal action is taken. If four violations are cited within a three-year period, the establishment where the infractions occurred can lose their license to sell alcohol.

Recommendations:

- **Enact legislation establishing a primary seat belt law.**
- Pass a law specifically sanctioning sobriety checkpoints.
- Encourage law enforcement agencies to expand the use of driver's license and vehicle safety checkpoints and to ensure adequate screening for impaired drivers during those events.

- Identify a funding methodology to provide updated breath and blood testing instrumentation.

- Expand the Law Enforcement Liaison Program to provide better coverage throughout the State.

- Evaluate activities conducted by law enforcement agencies using Selected Traffic Enforcement Program (STEP) grant funding provided to enhance enforcement during large community events to ensure appropriate use of funds.

- Educate law enforcement, prosecutors, judges and legislators on the effectiveness, use, and appearance of ignition interlock devices.

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.[5]

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*

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

- *Encourage prosecutors' participation in DWI Courts as a sentencing alternative for persistent DWI offenders.*

Status

Prosecuting attorneys have a significant responsibility in the prosecution of criminal Driving Under the Influence (DUI) cases in all states including Montana. There are 56 County Attorneys who each represent a county in the State. Each County Attorney is responsible for hiring his or her own prosecutors or serving as the prosecutor himself or herself. Prosecutor's offices vary in size from many attorneys in larger counties with a few to only one attorney in some medium to small jurisdictions. The responsibility of each prosecutor includes the preparation and presentation of criminal cases before the Justice of the Peace and District Courts.

Some municipalities have established Municipal Courts or City Courts which also have jurisdiction to handle misdemeanor DUI cases. In these local courts, the municipalities have also hired prosecutors to prepare and present cases. Some work for the municipalities on a full time basis and others are contract attorneys.

An Assistant Attorney General is also available to assist local prosecution or step in and prosecute where a conflict exists.

First, second and third DUI prosecutions occur in the Justice of the Peace, City or Municipal Courts as misdemeanors. Felony, Aggravated DUI or Vehicular Homicide cases are tried in the District Courts. Defendants may be tried before a judge or a jury in any of the courts. Disposition of DUI cases through a plea bargain is a common occurrence, which means prosecutors may be involved in the determination of many facets of sentencing including incarceration time, probation and fine amounts. Plea bargain terms vary widely throughout the State. Reductions of DUI cases to Reckless Driving and reducing felonies to misdemeanors are also practices in Montana. There was testimony of inconsistent sentencing across the State. Prosecutors are often involved in the decision to reduce and make recommendations of the reduction to trial judges. Reductions to Reckless Driving, along with reducing felonies to misdemeanors, undermine the effectiveness of DUI penal statutes.

The Montana County Attorney's Association provides some training, service and support to the counties' prosecuting attorneys. A similar city attorney's association provides assistance to municipal prosecutors. While training is provided, it appears that education on impaired driving prosecution is being provided at minimal levels. It is questionable whether education for the prosecution of drug impaired driving cases is being offered at all. For effective prosecution of DUI cases, more training in these areas is required.

Montana's DUI prosecutors are also some of the most inexperienced attorneys from County Attorney's and City Attorney's Offices. New attorneys are often assigned to traffic cases including DUI cases. The benefits of having more experienced litigators is obvious. There is also some thought that prosecution of traffic and DUI cases are considered less important than other functions of County and City Attorneys' Offices. Emphasis on the importance of impaired driving prosecutions should be understood and encouraged from County Attorneys and municipal officials.

Previously, Montana had a Traffic Safety Resource Prosecutor (TSRP). This position was funded by the Montana Department of Transportation. The TSRP acted as a liaison between prosecutors, the judiciary, law enforcement and community groups. The TSRP also provided a variety of services, such as training for law enforcement, prosecutors and preparation of publications. The TSRP also supported local prosecutorial efforts. The TSRP in Montana was discontinued due to budgetary reasons. Other states have seen a significant impact on effectiveness of prosecutorial efforts through direct TSRP assistance and training. Montana also saw positive results from a TSRP and it is hoped that the program can be reinstated.

Since the prosecution of DUI cases is done by prosecutors from varying backgrounds, office sizes and training levels, there was some concern regarding the consistency of prosecution statewide. Since there was little training, minimal collaboration of prosecutors from different jurisdictions, and no TSRP, it is probable that inconsistency will continue. This should not be interpreted to say that a significant number of prosecutors are dedicated, hardworking and attempting to make a difference. However, obvious benefits in criminal prosecution, including impaired driving prosecutions, can be gained through efforts to bolster the abilities and cohesiveness of individuals performing this important function.

Recommendations

- **Ensure training opportunities are available for prosecutors that will assist their knowledge and skills in impaired driving cases including drugged driving cases.**

- Execute a thorough examination of statewide practices of reductions and prosecutions and create data driven uniformity of terms, appropriate monitoring of offenders and enforcement of terms so consistency is achieved across the State.

- **Fund and reinstitute the Traffic Safety Resource Prosecutor.**

- Create an education program for County Attorneys and city officials to educate and emphasize the importance of impaired driving prosecution.

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 supervision[6] 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; and*

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

- *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.*[7]

- *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 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

There are two Driving Under the Influence (DUI) trial court levels in Montana: misdemeanor courts represented by Justice of the Peace, Municipal and City Courts and the general jurisdiction District Courts which handle felony impaired driving cases. The District Courts also hear Negligent Homicide, Negligent Vehicular Assault and other felony level crimes. There is also currently one hybrid limited jurisdiction court which is designated as a treatment court which can hear all levels of DUI cases if assigned to it.
Justice of the Peace, Municipal and City Courts are the primary trial court for DUI cases in the State. Justice of the Peace Courts are funded and staffed by the counties in which they sit. Prosecution in Justice of the Peace Courts is provided by respective County Attorneys. Cases filed in those courts may originate from state or local law enforcement agencies. Municipal Courts primarily handle cases filed by municipal employees and police. They hear ordinance and some state penal cases including DUI charges. They are fully funded and staffed by the municipalities where they are located. This includes the Judges and prosecutors.

In addition to the District Courts being responsible for adjudicating felony DUI cases, they also serve as the appellate court for Justice, City and Municipal Courts. The Montana

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

Supreme Court hears appeals, including cases for DUI, from the District Courts. The Montana Supreme Court is the highest appellate court in the State and has no trial responsibility. Terms for Supreme Court Justices are eight years. The Supreme Court is responsible for leadership in the Courts. Little evidence was provided that indicates the Supreme Court has an interest in the efforts to curb impaired driving.

Other Courts in Montana include Worker's Compensation Court and Water Court. These Courts do not have jurisdiction over DUI cases.

There are 61 Justice Courts, 84 City Courts and 6 Municipal Courts. Their criminal jurisdiction is limited to misdemeanors. Although the jurisdiction of these courts differs slightly, collectively they address cases involving misdemeanor offenses, civil cases for amounts up to $12,000, small claims valued up to $7,000, landlord/tenant disputes, local ordinances, forcible entry and detainer, protection orders, certain issues involving juveniles, and other matters. Terms of limited jurisdiction courts are set at four years and Justice of the Peace and Municipal Court Judges are elected. City Court Judges may be elected or appointed depending on the city they serve. Justice of the Peace Judges and some City Court Judges are not required to be attorneys. Most Municipal Court Judges are licensed attorneys. There are approximately 110 limited jurisdiction court judges in Montana. Numerous judges serve as both Justice of the Peace and City Judges.

All Limited Jurisdiction Court Judges must attend two Supreme Court-supervised training conferences each year and pass a Certification Examination each term. No mandatory training is required in the handling of traffic or DUI cases. However, some DUI and traffic case subject matter is made available at education seminars.

There are 56 District Courts in Montana. These courts are administratively structured into 22 judicial districts and are served by 46 District Court Judges. The term of a District Court Judge is six years. They are elected. District Courts process all felony cases, all probate cases, most civil cases at law and in equity, certain special actions and proceedings, all civil actions that may result in a finding against the state for the payment of money, naturalization proceedings, various writs, and some narrowly-defined ballot issues.

District Judges are also required to attend continuing education each year. They also attend two mandated sessions. Due to the vast degree of jurisdictional responsibility, there is no requirement for training on impaired driving cases. In fact, there was testimony that education in handling of DUI cases and DUI evidence has not been offered recently.

Judges in both limited jurisdiction courts and District Courts could benefit from additional training and specialized training in the area of impaired driving. Given the lack of current available education, it has also been suggested that an impaired driving conference be provided for judges. Such conference should cover all aspects of impaired driving

adjudication including impaired driving by drugs, which is an emerging problem. Such conference might also address inconsistent treatment of offenders which is a significant concern in Montana.

As indicated in more detail in the Prosecution section of this report, prosecution in Justice of the Peace Courts are handled by County Attorneys or their assistants. County Attorneys are also responsible for prosecution in District Courts. Municipal and City Courts are provided with prosecutors who are also hired by the municipality.

There are currently specialized problem solving treatment courts in Montana. There are five such courts in Montana designated as DUI Courts. One Court has been named the STEER Court which stands for Sobriety, Treatment, Education, Excellence and Rehabilitation. There are also courts which are referred to as Veterans Courts and Drug Courts. Some of the five DUI Courts also serve these other problem solving court functions. The state of Montana is currently expanding the use of treatment courts and at least one more DUI Court is slated to begin work this year. These courts are based on the drug court model and are heavily weighted in treatment of repeat offenders. The heart of a treatment court is more intensive oversight, substance abuse testing and additional treatment. In return for the additional supervision, offenders may avoid longer periods of incarceration, gain sobriety and become more productive members of society. Of the five DUI Courts in Montana, three primarily handle felons and two courts presided over by limited jurisdiction judges oversee misdemeanor offenders with subsequent charges. Members of the judiciary are supportive of the concept and success has been shown in Montana as well as other parts of the country.

Montana is a large state with a few population centers. This means offenders in rural areas are often unable to participate in DUI Court directed treatment programs which might help them with lifestyle changes. A promising program using teleservice devices is emerging in Montana. These devices allow two-way, face-to-face communication between court participants and court personnel. This allows assessment, access to treatment groups, mentor contact and probation visits for those offenders residing significant distances from treatment courts. The program now being used in Veterans Courts is called CAMO Connect. It appears to merit expansion and shows promise for growth into DUI and Drug Courts.

DUI charge reduction programs are controversial in the area of DUI adjudication nationwide. DUI reduction of cases to Reckless Driving is happening in Montana although it is not considered pervasive. Data and testimony also support the fact that many felony DUI cases are reduced to misdemeanors or second and third offense DUI cases are being plead down to lesser misdemeanors. Prosecutors and Judges often feel these reduction practices are necessary due to the significant numbers of DUI cases, available time, limited jail space and court resources. There was also testimony that consistency in the courts is lacking. There appears to be inconsistency in recommendations from prosecution, disparate sentencing and differing post-sentence monitoring and accountability. A thorough examination of the

practice of reductions, sentencing, and monitoring which would result in data driven uniformity of terms, appropriate monitoring of offenders and enforcement of terms would be a good initial step in ensuring that offenders are being held accountable for crimes and receiving assistance in any necessary lifestyle changes.

Most cases in Montana are filed in limited jurisdiction courts. However, with rare exceptions, these courts do not have probation officers or probation services. The lack of probation services forces court staffs to act in a capacity which may be inconsistent with their neutral position in the criminal justice system. Where concerns about the appearance of impropriety exist or court staff is insufficient to monitor offenders, probationary terms and sentences are often ignored by offenders. This results in the weakening of laws passed to deter offenders or provide help in guiding lifestyle changes of lawbreakers. District Courts have probation officers to assist in monitoring defendants after sentencing.

There was no information provided to indicate trial delays or docket management was a problem in Montana. These areas should always continue to be monitored and resources allocated to ensure effective resolution of all cases, including impaired driving filings.

Currently, Montana has a Judge serving as a Regional Judicial Outreach Liaison. She is currently available to assist the judiciary in the area of impaired driving and is serving in other capacities in regard to education and problem solving courts. Her efforts are showing positive returns for the State. There is no State Judicial Outreach Liaison but one might be advantageous.

While there are many dedicated judges serving in the courts of Montana, they are needing assistance in the areas of judicial and staff training, additional probation services, and available jail space. Steps forward in these areas will show benefits in the more efficient adjudication of driving under the influence cases.

Recommendations

- Provide annual mandatory judicial education to all trial court Judges in the adjudication of impaired driving cases.

- Convene a conference for Judges on Impaired Driving case adjudication.

- Encourage the continued development of Driving Under the Influence treatment courts.

- Expand the teleservices component of Veterans Courts into Driving Under the Influence Courts.

- Execute a thorough examination of the practice of sentence reductions and create data driven uniformity of terms, appropriate monitoring of offenders and enforcement of terms.

- Make probation services available to misdemeanor limited jurisdiction courts to provide post sentencing monitoring of offenders.

- Fund a State Judicial Outreach Liaison to assist in the education and resources of Montana's trial courts.

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.[8]

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:

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

- *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

In Montana, driving under the influence (DUI) of alcohol is defined as driving with a blood alcohol concentration (BAC) of:

- 0.08 percent or more.
- 0.02 percent or more, if you are younger than 21 years old.
- 0.04 percent, if you are driving a commercial vehicle.

Depending on the circumstances of arrest, a person may be charged with a DUI even if they have a BAC that is within the legal limits above.

Also, in Montana it is a crime to drive while under the influence of a drug. No blood testing standard is established in Montana; that is, there is no fixed amount of drugs within the blood system that determines conviction. Whether a driver is impaired is determined on a case-by-case basis and at the discretion of the prosecutor.

DUI administrative penalties in Montana

Along with the court penalties, drivers may also face driver license suspension by the Motor Vehicle Division for BAC over the legal limit for the driver's age or license type.

Failure to test penalties

- A driver's license suspension for six months for a first offense.
- A driver's license suspension for one year for a second offense or subsequent DUI offense within five years. Additionally, for a second offense or subsequent DUI offense, drivers may be required to participate in the Montana 24/7 sobriety program, which requires participants to take BAC/breathalyzer tests twice a day.
- An arrested person who refuses to submit to one or more tests as provided in subsection (4) shall pay the department an administrative fee of $300, which must be deposited in the state special revenue fund established pursuant to subsection (6)(b). There is a blood-draw search warrant processing account in the state special revenue fund established pursuant to 17-2-102(1)(b). Money provided to the Department of Justice pursuant to this subsection (6) must be deposited in the account and may be used only for the purpose of providing forensic analysis of a driver's blood to determine the presence of alcohol or drugs. Unfortunately, it is uncertain how often this administrative penalty is imposed.

Montana 24/7 Program

- In March 2010, the Montana Attorney General's Office proposed the Montana 24/7 Sobriety Program. The program was initially run as a pilot in Lewis and Clark County.
- Under the program, people accused of their second or subsequent drunk driving offense can be ordered by a judge to take twice-daily alcohol breath tests as a condition of their release from jail pending trial, or they may be ordered to wear an alcohol-monitoring bracelet or a drug patch. Some offenders can also be sentenced to the program if they plead or are found guilty of DUI.
- The results out of Lewis and Clark County pilot were very promising: out of thousands of tests administered, more than 99 percent came back clean.
- The program is structured to have the offender pay the cost of the monitoring ($4.00 a day for two tests), so the program is essentially free to counties and taxpayers.
- Buoyed by the success of the pilot program, the Attorney General's Office took the idea to the 2011 Legislature with plans to increase areas of 24/7 implementation. With broad, bi-partisan support, House Bill 106 passed and was signed into law by Gov. Brian Schweitzer in May 2011. Current plans are to seek statewide implementation of the program.

Underage Drinking and Driving

If a driver is younger than 21 years old, he or she may face a driver's license suspension for a BAC of 0.02 percent or over:

- Driver's license suspension for 90 days for a first offense.
- Driver's license suspension for six months for a second offense.
- Driver's license suspension for one year for a third offense.

These persons will also face penalties from the Montana courts**.**

Ignition Interlock

If a driver is convicted of a DUI or an alcohol-related offense with a BAC of 0.08 percent or more, he or she may be required to install an ignition interlock device in the driver's vehicle for a certain period of time. An ignition interlock device requires the driver to take a BAC test before starting the vehicle. For a first offense, a court may restrict an offender to only operate motor vehicles that are equipped with ignition interlock devices. For a second or subsequent offense, a defendant who is issued a probationary license is restricted to operating motor vehicles that are equipped with ignition interlock devices. For fourth or subsequent offenses, if an offender is permitted to operate motor vehicles as a condition of probation, such vehicles must be equipped with ignition interlock devices. However, it was reported that ignition interlock is seldom ordered in the State and there is no state agency with oversight of the program.

It was also reported that some of the State's courts do a good job using the ignition interlock as a DUI deterrent. Other courts reported problems upholding ignition interlock orders due to lack of prosecutorial action for failure to install or test failure.

Reinstating a Montana Driver's License

After completing the requirements of the court sentence and completing the period of driver's license suspension, individuals can reinstate their Montana driver's license with the Montana Department of Motor Vehicles. Reinstatement requirements will vary depending on the severity of the DUI offense. Persons applying for reinstatement may need to:

- Complete an alcohol education and evaluation program
- Pay reinstatement fees
- Take the driver's license knowledge test
- Submit necessary clearance documents
- Provide proof of financially responsibility

Recommendations

- **Make the period of driver's license suspension for a test refusal longer than for a test failure.**

- Pass legislation for 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.

- **Identify and appoint a state agency with oversight of the ignition interlock program. The agency 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**
    - **administrative rules that guide sanctions for circumvention or other non-compliance with ignition interlock licensure.**

- Require all persons ordered by the courts to have ignition interlock devices installed on vehicles have licenses that are easily identifiable by law enforcement officers.

- **Complete a comprehensive study for the Montana 24/7 Sobriety Program including survival rate analysis and measurement of unanticipated consequences.**

- Provide prosecutorial training on upholding court orders on ignition interlock.

E-2. Programs

Advisory

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

(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

Section (1): Graduated Driver Licensing (GDL)

Montana's graduated driver licensing (GDL) law contains a three-step program aimed at reducing the risk while new drivers under age 18 develop and improve their driving skills. Teens still get to drive, with supervision, and gradually work up to driving on their own. Montana also has a drivers' education program in many of their schools. Seventy-three percent of Montana teens complete a driver's education program.

GDL Step 1: Learner License

<u>Teen Drivers Taking Driver Education</u>

Teens enrolled in a state-approved traffic education program in a Montana high school can obtain a traffic education learner license (TELL) at age 14.5 or older once they have passed the driver's license knowledge exam and vision test. The TELL is issued by most traffic education programs in Montana. It is good for one year and allows the teen to drive with a parent or legal guardian, putting in at least 50 hours behind the wheel, with 10 hours at night, during the six month phase.

All teens under the age of 18 must complete the GDL program to obtain a Montana driver's license. Parents and/or guardians can attend a parent meeting as part of the driver's education course to learn about their required role in the GDL process. The GDL six month supervised driving period begins when the driver education instructor starts driving with students.

<u>Teen Drivers Not Taking Driver Education</u>

Teen drivers who are not enrolled in or have not completed driver's education in a state-approved program must wait until they are age 16 to obtain their TELL. They will need to visit their local Motor Vehicle Division exam station to take and pass the written driver exam and vision test and obtain parental consent for their Learner License.

All new drivers under age 18 require a parent/legal guardian to sign the license application. Whoever signs is responsible for any financial liability in the event of a vehicle crash.

Car Insurance

Parents are advised to consult with their auto insurance agent to find out what kind of coverage is needed while their teen is learning to drive and after the teen becomes a licensed driver.

Supervised practice

TEP - Traffic Education Permit: Students may drive only with a driver education teacher during class. This begins the required six months of GDL-supervised practice.

TELL - Traffic Education Learner's License: A licensed parent/legal guardian or driver education teacher must ride with teens who have a TELL permit.

Learner License: If parents/legal guardians want their student to drive with other licensed adults during the GDL permit phase, they must give written permission and students must obtain a Learner License from the Driver Exam Office.

Young drivers must have one of these permits for a minimum of six months or longer if there are any traffic violations or any alcohol/drug offenses. The TELL is valid for one year. These drivers must keep a log to record the time and different skills practiced. They can download an app (Teen Driving Log) for their phone or for their parents' phone. A Teen Driving Log must be in the vehicle during their driving.

Guidelines for practice driving are:

- Teens should practice driving whenever possible.
- complete 50 hours of practice driving, but the State advises that more practice is always better.
- teens should only drive when both the driver and coach are ready, in the mood, and have plenty of time.

GDL Conditions:

- Minimum of 50 hours of supervised driving - 10 hours must be at night.
- Each occupant must wear a seat belt. If the teen is pulled over and is not wearing their seat belt, they can get a ticket and an extended time with GDL restrictions.
- Only a licensed parent or guardian in the front seat can supervise driving. (If a parent/guardian wants a teen to drive with other adults during the GDL permit phase, an exemption may be obtained from the Driver Exam Office.)
- The teen driver must remain free from traffic violations and alcohol/drug offenses.

GDL Step 2 - Restricted License: One Year

The GDL Restricted License allows teens to drive alone after successful completion of Step 1- Learner License, and parent/guardian certification of no alcohol/drug or traffic offenses, and 50 hours of supervised driving including 10 hours at night.

To apply for a GDL Restricted License, the applicant must go to a local driver exam station to take and pass the driving exam. The applicant then follows instructions to apply for a first-year restricted license.

This license is good for one year. During this time teens become familiar with driving solo without an adult. Also during this time, teen drivers should be supervised under high-risk conditions including: darkness, high speeds (within speed limits), passengers, adverse weather, traffic, and road conditions. They should have enough supervision to be sure that they are able to handle these conditions.

Night driving restrictions - Teens may not drive between 11:00 p.m. and 5:00 a.m. Exceptions to night driving restrictions include emergencies, travel to and from school, church or work, and farm-related activities.

Passenger Restrictions:

- One Passenger - For the first six months teens may drive with only one passenger who is not a family member.
- Up to Three Passengers - For the second six months teens may drive with up to three passengers who are not family members.
- Each occupant must wear a seat belt.

GDL Step 3 - Full Privilege Driver License

Upon successful completion of GDL Steps 1 and 2 or reaching age 18, whichever happens first, the teen can receive a full privilege driver license.

Section (2): Responsible Alcohol Sales and Service Training

Alcohol Sales and Service Training is mandatory in Montana. The alcohol seller server course is designed to promote the legal and responsible sale and service of alcoholic beverages in Montana. Alcohol Seller/Server Training is now required for anyone selling alcoholic beverages in a store or serving drinks in a bar or restaurant. Alcohol Seller/Server Training is an important way to learn how to recognize signs of intoxication, how to check IDs, minors and alcohol. Montana state-specific server laws and many other skills help keep customers and establishments safe.

The online training course is an interactive course with full audio narration and real-world scenarios for the best user experience and information retention. The course is an HTML-based course that will work on PCs and mobile devices like the iPhone and iPad.

Once a person creates an account, they can log in from any computer or mobile device and train anytime, anywhere. Persons can log in and out of their training account and their place in the course will be saved. The course will be available to complete for six months from purchase. The course is 1.5 hours long, has a 25 question multiple-choice final exam, and is good for a three year Montana Certification.

The State's online Alcohol Seller/Server Training Course contains five units of instruction, a supplement covering alcohol sales and service laws specific to Montana, and an online final exam. It also includes 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.

Upon successfully completing of the Alcohol Seller/Server Training course and final exam, the certificate of completion can be printed immediately and is also emailed to the course participant.

If the Certificate of Completion is lost and needs replacing, course participants can print additional copies after logging into their account.

<u>Training Requirements</u> - Mandatory Training as of October 1, 2011

- Any new hires must receive this training within 60 days of their hire date.

- The certification is only good for 3 years.
- To re-certify, a seller/server must complete a new course and final exam.
- The Sure Sell Now alcohol server training course has been approved by the Montana Department of Revenue - Liquor Control and complies with the laws of Bill SB29, "Responsible Alcohol Sales and Service Act." The program approval can be viewed on Montana's state website.

Alcohol sales and service training completion is reported to the State within 30 days of completion.

There is no training for license examiners to recognize fraudulent documents and individuals seeking to apply for them, and there are no means by which to ensure that individuals cannot obtain driver licenses using multiple identities.

Recommendations

- Set the minimum age for a learner's permit at no younger than 16 years old.

- Set zero alcohol while driving limits for drivers under the age of 21.

- Provide training for license examiners to recognize fraudulent documents and individuals seeking to apply for them.

- Provide visually distinctive driver licenses for drivers under the age of 21 which expire at the age of 21.

- Require that all parents and/or guardians attend a parent meeting as part of the driver's education course to learn about their required role in the graduated driver license process.

- Limit teenage passengers to one non-family member for drivers in the first 12 months of intermediate licensure. Afterward, limit the number of teenage passengers to two non-family members until age 18.

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:*

    - *Uses messages that are coordinated with National campaigns and messages that are culturally relevant and linguistically appropriate;*

    - *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 overarching theme for all highway safety issues is Vision Zero, which was adopted by the Montana Department of Transportation (MDT) in 2014. The Vision Zero concept is an initiative of the MDT Director and is incorporated in all media messaging as a theme and a logo. At the time of this assessment, different logos were being used, one that read #VisionZeroMT and another which features the western portion of the State. Neither logos match the national theme, Toward Zero Deaths (TZD), as endorsed by the American Association of State Highway Transportation Officials and International Association of Chiefs of Police with support from Federal Highway Administration (FHWA) and the National Highway Traffic Safety Administration (NHTSA).

Prior to launching Vision Zero, a focus group of men and women ages 18 through 34 was conducted. Results from this focus group will help to establish the parameters for subsequent messaging. The focus group's findings were:

- People are motivated making the decision to not make others suffer (if something were to happen to them).
- Planning for a sober ride as a way to avoid consequences was impactful (consequences being shattering lives of family and friends).
- Graphic images of consequences was more compelling then softer images.
- Media placement should include Facebook, cable television, billboards, gas stations, radio, Pandora.

MDT State Highway Traffic Safety Section (SHTSS) coordinates a multi-pronged communications program to support impaired driving initiatives. All highway safety media efforts are coordinated within a communications plan that is approved by the MDT Director

and the MDT communications team which includes the MDT public information officer (PIO) and Rail, Transit & Planning Division PIO.

The communications program is managed by two contracted agencies, one which focuses on supporting local media activities (Banik Communications) and another which provides services for statewide communication efforts (Partners Creative). Both contractors have had long-standing working relationships with SHTSS with extensive experience conducting highway safety media campaigns.

Both media contractors purchase media. Media buyers are required to obtain free bonus media of equal or greater value than purchased media. The value of paid media is determined based upon gross rating points (GRPs), reach, and frequency. Paid media buys are coordinated by MDT. However, multiple media purchases for different campaigns from different companies occasionally create confusion among the media resulting in purchasing errors.

Media supports impaired driving enforcement activities, primarily during the fall impaired driving mobilization. Public service announcements (PSAs) featuring local sheriffs and police chiefs are used. PSA scripts are provided to local law enforcement agencies for public information officers. Other than the use of billboards and highway variable message signs, there is little coverage of the impaired driving message outside the mobilization time-frame.

The most commonly used media include billboards, radio, newspaper, television and social media. Radio, including Pandora, is most often identified as the source for impaired driving messages and is readily available as a medium throughout the State. TV screens on the top of gas pumps are a relatively new medium used for impaired driving ads. Over a million impressions were counted from 33 gas stations in 11 cities. Print media (cards and brochures) are distributed through local DUI task forces but are not used extensively due to their cost.

Even though high school and college sports are very popular in Montana, currently no sports marketing is conducted. Discussions are underway to expand communications to sports and other venues.

Media events receive earned media in Montana. Press conferences to kick-off the impaired driving mobilization and other events will feature the MDT Director with the participation of state and local partners including the Montana Highway Patrol, local law enforcement, and DUI task force members. Crash victims or medical personnel do not appear to be typically included in media events.

Because the media markets in Montana are relatively small with limited reach, consumers in western Montana may receive a significant amount of their media from Spokane, Washington while eastern Montana will receive media from North Dakota and Wyoming.

As yet, there has been no communication with the highway safety offices in those states to coordinate messages that reach Montanans.

Facebook and digital messaging are the primary sources for social media in support of the impaired driving program. There is no longer a specific Facebook page dedicated to impaired driving in Montana, but impaired driving messages, stories, and banners are placed on the MDT Facebook page. There is some paid Facebook messaging through ad placement and "boosting" (paying to expand the reach of) a post.

Partners Creative has implemented "geo-fencing" (focused by time of day, longitude and latitude) to target late night urban messaging to place messages on mobile-friendly platforms. Twitter is not widely used throughout the State so there is currently no use of Twitter. MDT has not had an Instagram page due to the cost of using Instagram. However, now that advertising can be placed on Instagram without having an account, the use of Instagram will be reconsidered.

MDT agency communication and Facebook posts are managed by the public information officer in the Director's Office. The Director's Office must approve department communication budgets and programs. The PIO in the Rail, Transit & Planning Division assists SHTSS staff with all communication outreach. No other Division in MDT includes a PIO nor are there PIOs in the five MDT district offices. MDT maintains a calendar for national and state events. This calendar includes highway safety events such as impaired driving mobilizations.

Impaired driving messages via traditional media tend to be graphic and hard-hitting, emphasizing the impact of shattered lives. Costs of a DUI – financial, social, personal, and emotional – are the focus of both print and broadcast media.

The racial composition of Montana is primarily White (almost 90 percent) with less than seven percent American Indian alone. Therefore, there is little need to develop media materials in a language other than English. However, because the Indian population is over-represented in impaired driving fatalities, there is a significant amount of communication conducted with the Tribes. Most communication is implemented through the Safe on All Roads (SOAR) program, a program designed by and for Native Americans.

SOAR coordinators are funded on all seven Montana reservations. These coordinators conduct a variety of outreach efforts for traffic safety that are specific to their communities. On the Fort Belknap reservation, for example, traffic safety-related interviews are conducted on the tribal radio station, and PSAs will be broadcast in three languages: White Clay, Assiniboine, and English. Impaired driving messages are shared during rodeos, pow-wows, and special events such as Indian Days. On the Blackfeet reservation, the SOAR coordinator is working on a video with high school students to feature Tribe members who have died in

traffic crashes. There is no statewide effort to involve students at the high school or college level in developing impaired driving communications.

A small media campaign was developed and implemented specifically for the initiation of the Northern Tribes DUI Task Force. A logo was designed for the task force, and the campaign included billboards, Facebook, posters, and radio. Several members of the task force are featured on media material. "Learn from those who passed this way" is the tribal theme used for the campaign.

A significant amount of traffic safety funding resources are dedicated to the impaired driving communications program, as shown in the following table:

Funding Summary for FFY 2016 Media Programs

	Funding Source				
Project Title	**164al**	**402**	**405d**	**Local Benefit**	**Total Budget**
Paid Media & Earned Media	$350,000		$420,000	$140,000	$770,00
Education and Program		$25,000		$10,000	$25,000
Total		**$547,500**	**$175,000**	**$219,000**	**$722,500**

However, other than the commitment of federal traffic safety funds, there appears to be little investment by sponsors or evidence of business/corporate partnership in communication efforts.

County DUI task forces and prevention coalitions also conduct some of their own communications activities. Having a presence on Facebook is common.

To evaluate the reach of high visibility enforcement messaging, Banik Communications conducts intercept surveys in driver license offices in three different markets. These surveys have been conducted in 2008, 2009, 2013, and 2015. The media campaign for the 2015 Labor Day Law Enforcement Crackdown was "Drive Sober or Get Pulled Over." Over 400 interviews were conducted after the Crackdown. The survey found that 82 percent of all respondents think drinking and driving laws are enforced somewhat or very strictly. Half of those surveyed said they had seen, heard or read about additional drunk driving enforcement. Recall of specific messages was negligible, though there was high (78 percent) recognition of "Buzzed driving is drunk driving." For the first time, radio outperformed television as the reported source for drinking and driving messages.

In 2015 an online Team Zero Survey was conducted by Partners Creative. This survey was distributed through targeted Facebook advertising. Despite 1,856 website clicks, only 57 responses were received, under the recommended sample size of 97 for the targeted audience. There was no incentive for completing the survey.

A variety of impaired driving media messages are incorporated within Montana communications. In addition to the national "Buzzed driving is drunk driving," the State implements a "Shattered Lives" campaign, while the Labor Day crackdown used a "Drive Sober or Get Pulled Over" message. MDT also continues the "Plan2Live" in a website page. In addition, though local communities will use MDT provided sample news releases, they will also generate many of their own messages. Overarching these are the various versions of Vision Zero. Given the multiplicity of messages, it should be expected that there may not be a particularly high level of recognition for any one of them.

There does not seem to be much emphasis on determining appropriate messaging and the value of different media beyond identifying the extent of reach. Tracking impressions and determining level of message recognition are important. However, evaluating the cost/benefit and effectiveness of the communication program, particularly regarding paid media, is essential in order to make appropriate and best decisions for investments in creative development and purchasing various media.

Recommendations

- Choose one media message for impaired driving and encourage its consistent use among all state and local partners by providing sample logos, banners, and materials that are easily used by everyone.

- Create a consistent and simple Vision Zero logo for use on all materials.

- Create and implement a program through the high schools and colleges that support youth involvement in the development of media messages for the prevention of drinking and impaired driving.

- Use one media buyer to achieve the greatest purchasing power and avoid confusion and errors in purchases.

- Increase the use of media, such as billboards and variable message signs, which can extend the exposure of impaired driving messaging beyond the annual mobilization period.

- Identify and use outlets, such as travel and tourist bureaus and point-of-purchase venues, to reach target audiences when potentially susceptible to a safe driving message.

- Develop and implement a sports marketing campaign to best reach the impaired driving target audience – males between the ages of 18 and 34.

- Create interactive Facebook posts to encourage viewership and engagement with impaired driving efforts.

- **Conduct a comprehensive evaluation of impaired driving communications efforts in the State, including the impact of State and local efforts; incorporate the findings of this evaluation in subsequent media planning, media selection, implementation, and decisions regarding paid media.**

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.[9] *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.*[10]

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*

In addition, alcohol use leads to other injuries and health care problems. Almost one in six vehicular crash victims treated in emergency departments are alcohol positive, and one third or more of crash victims admitted to trauma centers—those with the most serious injuries - test positive for alcohol. In addition, studies report that 24-31percent 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

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

[10] 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.

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

Montana statutes and policies provide for screening, assessment, referral and treatment for convicted impaired drivers.

Section 61-8-732, MCA, defines the program and process for assessment, education, and treatment required for drivers convicted of driving under the influence of alcohol or drugs.

> 61-8-732. Driving under influence of alcohol or drugs -- driving with excessive alcohol concentration -- assessment, education, and treatment required. (1) In addition to the punishments provided in 61-8-465, 61-8-714, 61-8-722, and 61-8-731, regardless of disposition, a defendant convicted of a violation of 61-8-401, 61-8-406, 61-8-411, or 61-8-465 shall complete:
>
> (a) a chemical dependency assessment;
>
> (b) a chemical dependency education course; and

(c) on a second or subsequent conviction for a violation of 61-8-401, 61-8-406, or 61-8-411, except a fourth or subsequent conviction for which the defendant completes a residential alcohol treatment program under 61-8-731(2), or as required by subsection (8) of this section, chemical dependency treatment.

(2) The sentencing judge may, in the judge's discretion, require the defendant to complete the chemical dependency assessment prior to sentencing the defendant. If the assessment is not ordered or completed before sentencing, the judge shall order the chemical dependency assessment as part of the sentence.

(3) The chemical dependency assessment and the chemical dependency education course must be completed at a treatment program approved by the department of public health and human services and must be conducted by a licensed addiction counselor. The defendant may attend a treatment program of the defendant's choice as long as the treatment services are provided by a licensed addiction counselor. The defendant shall pay the cost of the assessment, the education course, and chemical dependency treatment.

(4) The assessment must describe the defendant's level of addiction, if any, and contain a recommendation as to education, treatment, or both. A defendant who disagrees with the initial assessment may, at the defendant's cost, obtain a second assessment provided by a licensed addiction counselor or a program approved by the department of public health and human services.

(5) The treatment provided to the defendant at a treatment program must be at a level appropriate to the defendant's alcohol or drug problem, or both, as determined by a licensed addiction counselor pursuant to diagnosis and patient placement rules adopted by the department of public health and human services. Upon determination, the court shall order the defendant's appropriate level of treatment. If more than one counselor makes a determination as provided in this subsection, the court shall order an appropriate level of treatment based upon the determination of one of the counselors.

(6) Each counselor providing education or treatment shall, at the commencement of the education or treatment, notify the court that the defendant has been enrolled in a chemical dependency education course or treatment program. If the defendant fails to attend the education course or treatment program, the counselor shall notify the court of the failure.

(7) A court or counselor may not require attendance at a self-help program other than at an "open meeting", as that term is defined by the self-help program. A defendant may voluntarily participate in self-help programs.

(8) Chemical dependency treatment must be ordered for a first-time offender convicted of a violation of 61-8-401, 61-8-406, 61-8-411, or 61-8-465 upon a finding of chemical dependency made by a licensed addiction counselor pursuant to diagnosis and patient placement rules adopted by the department of public health and human services.

(9) (a) On a second or subsequent conviction, the treatment program provided for in subsection (5) must be followed by monthly monitoring for a period of at least 1 year from the date of admission to the program.

(b) If a defendant fails to comply with the monitoring program imposed under subsection (9)(a), the court shall revoke the suspended sentence, if any, impose any remaining portion of the suspended sentence, and may include additional monthly monitoring for up to an additional 1 year.

(10) Notwithstanding 46-18-201(2), whenever a judge suspends a sentence imposed under 61-8-714 and orders the person to complete chemical dependency treatment under this section, the judge retains jurisdiction to impose any suspended sentence for up to 1 year.

To address the statutory requirements described above, the Montana Department of Public Health and Human Services (DPHHS) has developed the Assessment Course and Treatment (ACT) program. ACT has three components:

Assessment: The assessment component includes an evaluation to determine if the offender is chemically dependent and must be performed by a licensed addiction counselor (LAC) at a state-approved program. If an offender disagrees with the results of their assessment, they may seek, at their expense, a second opinion from an independent counselor licensed to practice in Montana. The offender must then seek the opinion of the court as to which recommendation is the most appropriate treatment course to follow.

Course: ACT includes 12 hours of education regarding Montana law; consequences for driving impaired; and how alcohol/drugs affect a person's physiology, driving and choices. ACT utilizes the PRIME For Life® evidence-based program. PRIME for Life® is provided by a LAC at a state-approved program.

Treatment: The level of treatment recommended will depend on the level of chemical dependency found in the assessment. Recommendations will vary from out-patient to residential in-patient treatment. An offender may seek the appropriate level of treatment from any competent provider licensed to practice in Montana.

In most cases, assessment does not take place until after the PRIME for Life® curriculum is completed. Many states have found it to be more advantageous to perform assessment prior to any education course or other intervention so that offenders do not have the benefit of information gained in the course to shape responses to assessment questions to avoid referral to treatment. Earlier assessment also allows for faster entry to treatment if needed.

In some jurisdictions, the presiding judge can order an assessment prior to sentencing. This does not appear to be common practice and most courts rely on the system described above to complete assessment and subsequent treatment.

Five localities have dedicated DUI Courts and nine others have "hybrid" Drug Treatment Courts that manage DUI offenders. In these cases, assessment might take place by court staff or in a local provider certified by the DPHHS.

It is not clear whether the assessment procedures or criteria have been adapted for Native American or other cultural considerations.

The State does not mandate specific screening instruments, but certified providers must use one of several approved instruments and use diagnostic criteria based on the Diagnostic and Statistical Manual version five (DSM-V). American Society of Addiction Medicine (ASAM) criteria are used in making treatment placement decisions.

Recommendations

- **Conduct alcohol and substance abuse assessments prior to the start of the PRIME for Life® classes and make referrals to treatment immediately upon determination of need for treatment.**

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;*[11] *and*
- *Designed to result in referral to assessment and treatment when warranted.*

Status

The Montana Department of Transportation and the Department of Public Health and Human Services (DPHHS) are partnering with hospitals and healthcare providers to implement Screening, Brief Intervention Referral and Treatment (SBIRT) to address the high rate of alcohol and drug-related traffic crashes. The goals of this project are to:

- Reduce alcohol & drug-related fatalities
- Reduce the rate of alcohol & drug-related traffic crashes
- Increase the awareness, acceptance, and implementation of SBIRT protocols in Montana's healthcare culture.

The Montana SBIRT Project provides one-on-one technical assistance and support to healthcare providers in the Emergency Department, Trauma Services, Social Services, primary care clinics, and university medical clinic settings to learn about and implement SBIRT. DPHHS is working with the Montana Healthcare Foundation to identify barriers to implementing SBIRT and will be surveying healthcare providers regarding SBIRT implementation issues.

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[11] For a discussion of assessment instruments, see: Allen, John and M. Colombus (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.

Two counties recently received grants from the U.S. Substance Abuse Mental Health Services Administration (SAMHSA) to implement SBIRT.

As a result of recent Medicaid expansion, 42,000 additional Montana residents are eligible for Medicaid. DPHHS is using the Medicaid enrollment process as an opportunity to screen individuals for alcohol and substance abuse problems using SBIRT.

Nationally, SBIRT has been used in several non-hospital settings including family practices, colleges, high schools and local jails at time of booking.

Recommendations

- Continue to expand Screening, Brief Intervention Referral and Treatment (SBIRT) in healthcare and other settings throughout Montana.

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

To address the statutory requirements described in the preceding section, the Department of Public Health and Human Services (DPHHS) has developed the Assessment Course and Treatment (ACT) program. ACT has three components:

> Assessment: The assessment component includes an evaluation to determine if the offender is chemically dependent and must be performed by a licensed addiction counselor (LAC) at a state-approved program. If an offender disagrees with the results of their assessment, they may seek, at their expense, a second opinion from an independent counselor licensed to practice in Montana. The offender must then seek the opinion of the court as to which recommendation is the most appropriate treatment course to follow.
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> Course: ACT includes 12 hours of education regarding Montana law; consequences for driving impaired; and how alcohol/drugs affect a person's physiology, driving, and choices. ACT utilizes the PRIME For Life® evidence-based program. PRIME for Life is provided by a LAC at a state-approved program.
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> Treatment: The level of treatment recommended will depend on the level of chemical dependency found in the assessment. Recommendations will vary from out-patient to residential in-patient treatment. An offender may seek the appropriate level of treatment from any competent provider licensed to practice in Montana.

Montana statute 61-8-732. defines the assessment and treatment requirements as follows:

> Driving under influence of alcohol or drugs -- driving with excessive alcohol concentration -- assessment, education, and treatment required. (1) In addition to the punishments provided in 61-8-465, 61-8-714, 61-8-722, and 61-8-731, regardless of disposition, a defendant convicted of a violation of 61-8-401, 61-8-406, 61-8-411, or 61-8-465 shall complete:
> (a) a chemical dependency assessment;
> (b) a chemical dependency education course; and
> (c) on a second or subsequent conviction for a violation of 61-8-401, 61-8-406, or 61-8-411, except a fourth or subsequent conviction for which the defendant completes

a residential alcohol treatment program under 61-8-731(2), or as required by subsection (8) of this section, chemical dependency treatment.

(2) The sentencing judge may, in the judge's discretion, require the defendant to complete the chemical dependency assessment prior to sentencing the defendant. If the assessment is not ordered or completed before sentencing, the judge shall order the chemical dependency assessment as part of the sentence.

(3) The chemical dependency assessment and the chemical dependency education course must be completed at a treatment program approved by the department of public health and human services and must be conducted by a licensed addiction counselor. The defendant may attend a treatment program of the defendant's choice as long as the treatment services are provided by a licensed addiction counselor. The defendant shall pay the cost of the assessment, the education course, and chemical dependency treatment.

(4) The assessment must describe the defendant's level of addiction, if any, and contain a recommendation as to education, treatment, or both. A defendant who disagrees with the initial assessment may, at the defendant's cost, obtain a second assessment provided by a licensed addiction counselor or a program approved by the department of public health and human services.

(5) The treatment provided to the defendant at a treatment program must be at a level appropriate to the defendant's alcohol or drug problem, or both, as determined by a licensed addiction counselor pursuant to diagnosis and patient placement rules adopted by the department of public health and human services. Upon determination, the court shall order the defendant's appropriate level of treatment. If more than one counselor makes a determination as provided in this subsection, the court shall order an appropriate level of treatment based upon the determination of one of the counselors.

(6) Each counselor providing education or treatment shall, at the commencement of the education or treatment, notify the court that the defendant has been enrolled in a chemical dependency education course or treatment program. If the defendant fails to attend the education course or treatment program, the counselor shall notify the court of the failure.

(7) A court or counselor may not require attendance at a self-help program other than at an "open meeting", as that term is defined by the self-help program. A defendant may voluntarily participate in self-help programs.

(8) Chemical dependency treatment must be ordered for a first-time offender convicted of a violation of 61-8-401, 61-8-406, 61-8-411, or 61-8-465 upon a finding of chemical dependency made by a licensed addiction counselor pursuant to diagnosis and patient placement rules adopted by the department of public health and human services.

(9) (a) On a second or subsequent conviction, the treatment program provided for in subsection (5) must be followed by monthly monitoring for a period of at least 1 year from the date of admission to the program.

(b) If a defendant fails to comply with the monitoring program imposed under subsection (9)(a), the court shall revoke the suspended sentence, if any, impose any remaining portion of the suspended sentence, and may include additional monthly monitoring for up to an additional 1 year.

(10) Notwithstanding 46-18-201(2), whenever a judge suspends a sentence imposed under 61-8-714 and orders the person to complete chemical dependency treatment under this section, the judge retains jurisdiction to impose any suspended sentence for up to 1 year.

Despite the comprehensive system designed in law and policy, it is not clear how many DUI offenders actually complete appropriate treatment. Procedures for reporting progress of convicted drivers through the assessment, education and treatment process appear to be poorly defined and inconsistent in application. It is unclear how many offenders completed each step in the countermeasure process.

The implementation of an assessment, education and treatment program that is ordered and potentially enforced by the court has more potential consequences than systems that have only driver license consequences. In Montana, treatment is a condition of sentence and offenders who fail to comply can be subject to harsher penalties. It is not clear how often this happens.

Montana also uses license reinstatement as an incentive for repeat offenders to complete ACT requirements. However, license reinstatement for first offenders does not require completion of ACT. Reinstatement is automatic at the end of the mandatory six-month suspension period unless the court orders additional sanctions for non-compliance.

Five localities have dedicated DUI Courts and nine others have “hybrid” Drug Treatment Courts that manage DUI offenders. In addition, at least one Veterans Treatment Court reported having a client population that consists of over 60 percent DUI offenders. Under 61-8-741, MCA, if a person participates in a DUI court, the court may, at the court's discretion, suspend all or a portion of an imprisonment sentence except for the mandatory minimum imprisonment term. If a person participating in a DUI court fails to comply with the conditions imposed by the DUI court, the court shall revoke the suspended imprisonment sentence and any sentence subsequently imposed must commence from the effective date of the revocation. Montana code 61-8-741, MCA, defines a DUI court as any court that has established a special docket for handling cases involving persons convicted under 61-8-401, MCA, or 61-8-406, MCA, and that implements a program of incentives and sanctions intended to assist a participant to complete treatment ordered pursuant to 61-8-732, MCA, and to end the participant's criminal behavior associated with driving under the influence of drugs or alcohol or with excessive blood alcohol concentration.

Section 44-4-1203, MCA, establishes a program for monitoring the sobriety of DUI offenders. The code designates the 24/7 program as the sobriety program to be housed in the Department of Justice (DOJ) and to be administered by the Attorney General. The 24/7 program includes intensive monitoring of sobriety through breath testing all enrolled offenders twice every day. Under 44-4-1205, MCA, if an individual convicted of a second or subsequent offense of driving under the influence in violation of 61-8-401, MCA, or second or subsequent offense of driving with excessive alcohol concentration in violation of 61-8-406, MCA, can be sentenced to 24/7.

Drivers participating in the sobriety program and who successfully complete a court-approved chemical dependency treatment program and have proof of insurance pursuant to 61-6-30, MCA, are eligible for a restricted probationary driver license pursuant to 61-2-302, MCA, notwithstanding the requirements of 61-5-208, MCA, that an individual must complete a certain portion of a suspension period before a probationary license may be issued.

A 2011 enhancement bill expands the eligibility for 24/7 to offenders convicted of any charge in which the use of alcohol or other drugs was involved and for which the offender can be sentenced to six months or more imprisonment, e.g. domestic violence, assault.

Currently, there are 42 counties utilizing the 24/7 program. These programs are user supported in that offenders pay for their mandatory testing. However, at this time testing is limited to breath-testing for alcohol. Breath-testing provides instant results without the need or expense of lab testing. The law also allows for 24/7 monitoring of other drugs. However, other drug testing can require samples of saliva, urine or blood that must be tested in a lab with considerable delays and expense. With increasing prevalence of drug-impaired drivers, efficient procedures and additional resources for drug testing need to be developed. A drug patch is being used to test for some substances.

Since the program began in 2011, approximately 680,000 breath tests have been administered with a failure rate of less than three percent for those who submitted to the test.

One concern related to 24/7 is that as a sobriety monitoring program it does not require treatment. Some offenders will maintain sobriety without any consideration for or amelioration of the underlying causes of their alcohol or other substance abuse. Traditional self-help groups such as Alcoholics Anonymous (AA) often refer to some participants as "dry drunks." These are individuals who, though they are not drinking and might be attending AA, still display other alcoholic personality traits including anger, unhappiness, impulsivity and immaturity. These traits ultimately can lead to other antisocial or problematic behaviors. However, most 24/7 participants will also participate in treatment as part of ACT and/or as part of Drug Treatment or DUI Court.

The Montana Highway Patrol (MHP) has assigned a 24/7 Coordinator to provide coordination, oversight or evaluation of program implementation and effectiveness. Offenders pay the cost of their breath testing but there is no dedicated source of support for program administration.

Evaluations of 24/7 in South Dakota showed promising results. MHP is developing an evaluation project to assess the impact of 24/7 in Montana.

Operational since 2002, Montana's Warm Springs Addiction Treatment and Change (WATCh) program is a six-month (180 days) residential treatment program for those with a history of multiple DUI convictions. The program is housed at the Montana State Hospital and is the result of a partnership between the Montana Department of Corrections (MDOC) and Community, Counseling and Correctional Services Inc. Individuals who have four or more DUI convictions are mandated to serve 13 months in MDOC or a residential treatment program operated or approved by the Department. The 13-month sentence cannot be suspended, nor can the offender be paroled. Virtually all individuals who meet these criteria are admitted to the program. Offenders with a sexual crime history, violent crime history or a high-security risk classification are excluded from the program. Offenders with medical or cognitive impairments that would prevent full participation in treatment are also excluded. Participation is voluntary. At the conclusion of the six-month program, graduates spend the remainder of their sentences (seven months) on probation.

The overarching goals of the treatment program are to assist offenders in developing the skills necessary to make lasting positive life changes, reduce criminal thinking and behavior, and succeed when released. The program has three phases:

- Phase 1- "Challenge to Change:" The initial phase of the program is devoted to introspection. Goals during this phase are self-disclosure, self-awareness and developing an ability to receive feedback from family members and program staff;
- Phase 2- "Action Phase:" This portion of the program is devoted to identifying the life situations that contributed to the current circumstance and developing behavioral change and improvement goals; and
- Phase 3- "Ownership of Change:" Here, the goal is stabilization and maintenance with an eye toward strengthening the commitment to behavioral change.

One evaluation of WATCh indicated that the program was implemented with fidelity to design but the results were not conclusive. An evaluation using a better defined comparison group and more sensitive outcome measures, e.g., survival rate analysis, might provide a better picture of the effectiveness of WATCh.

Recommendations

- **Create a unified, complete tracking system to track all DUI offenders.**

- Complete a comprehensive study for the Montana 24/7 Sobriety Program including survival rate analysis and measurement of unanticipated consequences.

- Conduct a comprehensive evaluation of the WATCh program in Montana, identifying a valid comparison group and sensitive outcome measures.

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

Annually, at the Transportation Safety Meeting, crash and other data are analyzed and progress toward the State's four overarching safety targets and interim safety goals are assessed. On an ongoing basis, safety partners will review progress on objectives established for each Emphasis Area. Each year the State will review fatalities on high-risk rural roads and fatalities and serious injuries per capita among older drivers and pedestrians to assess if action is needed to comply with the Fixing America's Surface Transportation (FAST) Act.

The 2015 update process for the *Montana Comprehensive Highway Safety Plan* (CHSP) provided an opportunity to analyze the most current 10 years of crash data and to identify Montana's transportation safety issues. The process defined new priorities based on crash data trends and defined new strategies needed to keep Montana on track to reduce fatalities and severe injuries on Montana's public roads. The CHSP includes detailed strategies and potential safety partners and provides a roadmap for effective implementation to reach the vision of zero fatalities and zero serious injuries on Montana roadways. To effectively implement this plan, reach targets, and continue to institutionalize VisionZeroMT (Montana's program to eliminate deaths and injuries on Montana roads), the State realized it was important to engage people at all levels of leadership from a wide range of safety partner agencies and organizations to continue to collaborate, communicate, and coordinate efforts.

The State's implementation structure involved engagement of an Executive Leadership Team comprised of agency directors with a role in increasing safety. The Executive Leadership Team members prioritize and institutionalize safety and Vision Zero within their own agencies. They commit revenue, personnel and technical resources to implement statewide initiatives. Through their leadership they identify and remove barriers within and between agencies to achieve Vision Zero. As they develop their own agency plans and policies, Executive Leadership Team members can incorporate common safety strategies and initiatives to support statewide collaboration.

In addition to the safety targets, objectives have been defined at the emphasis area level. Emphasis areas are tracked by emphasis area team leaders on an ongoing basis. State data can be used at this phase to view trends and identify areas of concern.

The CHSP Program Coordinator will work closely with Emphasis Area Team leaders to evaluate whether strategies are being implemented as planned. Each year the extent to which implementation steps have been fully completed will be documented. Progress on implementation and evaluation are reported at the annual Transportation Safety Meeting as well as at Executive Leadership Team and Advisory Committee meetings.

Annually, overall tracking of statewide fatality and serious injury data is documented and assessed at the annual Transportation Safety Meeting. This presentation of crash data and

progress toward targets at the annual Transportation Safety Meeting serves as the primary effort to evaluate whether implementation of the CHSP is generating the desired results in terms of reductions in fatalities, fatality rate, serious injuries and serious injury rate and progress toward targets. Progress toward reduction of fatalities and serious injuries by Emphasis Area will also be reviewed to determine whether the strategies implemented are generating the desired results.

The Montana Department of Transportation (MDT) will continue to track current fatalities in correlation to the safety target via the dashboard on the MDT website. Dashboard is a software product that shows all data combined, and gives users the ability to analyze and visualize growing data sets from multiple sources. Future coordinated reporting may be useful to track fatalities and serious injuries by Emphasis Area on the dashboard.

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

Recommendations

- Continue implementation of the *Montana Comprehensive Highway Safety Plan* (CHSP) to ensure improvement in the accuracy, completeness, integration, timeliness, uniformity, and accessibility of data used in traffic safety in the State.

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

Montana is proud of its state of the art Safety Information Management System (SIMS). This database and analysis system went into use in the fall of 2014. The system included many of the tools that have been developed as part of the Road Departure Study. This allows the Montana Department of Transportation (MDT) safety personnel to screen the roadway network and complete reviews of specific locations using Highway Safety Manual (HSM) tools and methodologies. Another factor that enables the State to get quality, accurate, and timely data is that the Montana Highway Patrol investigates all fatal crashes in the State.

SIMS has also provided additional benefits to MDT, including:

- Increased access to crash data by other MDT personnel;
- Advanced, easy to use ad-hoc crash data query capabilities;
- Incorporation of many roadway elements into the database allowing for comparison of crashes versus roadway characteristics; and
- Allows tracking of safety projects for future before/after evaluation.

All Montana Highway Patrol (MHP) crash data is electronically transferred to headquarters for download to the State Crash File. Other crashes that come to MHP electronically are hand coded and entered into the State Crash Data base. The State reported that 90 percent of all crashes come to the State electronically and 100 percent are entered into the MHP Crash Database.

Unfortunately, law enforcement reported that timely, complete, and accurate data is a significant problem in the State. Some other problems identified were: lack of interest by policy makers to fund improved record systems, inability to get timely disposition data, posting of driver license actions can be slow getting onto driver record, ignition interlock devices not properly used in the State, no uniform crash report used statewide, and lack of communication between agencies on new data technologies.

The *Montana Comprehensive Highway Safety Plan* (CHSP) identified data-driven problem identification as a key to achieving the State's long-term vision of zero fatalities and zero serious injuries by focusing resources on the most significant problems. The State plans to advance a culture of traffic safety where death on the roadway is not tolerable. This new culture includes each individual making good choices and safe travel a daily part of life. Montana is committed to pursuing three key overarching strategy areas that will benefit all safety activities:

- improve the accuracy, completeness, integration, timeliness, uniformity, and accessibility of data used in traffic safety analysis;
- support the essential role of EMS in reducing the severity of injury outcomes and the technologies and systems necessary to advance collaboration with all safety partners; and
- collaborate across agencies, organizations, and with the public to improve the safety culture and promote the institutionalization of Vision Zero.

Montana has identified crash factors contributing to the largest number of severe crashes. How these factors overlap was carefully considered to identify Emphasis Areas. This process helps identify the critical crash factors or crash trends that may have the biggest influence on reducing crash frequency or severity. The three Montana Emphasis Areas are:

- Roadway Departure and Intersection Crashes
- Impaired Driving Crashes
- Occupant Protection

The State realizes that the foundation of the CHSP is high-quality data. Montana has made a dramatic improvement in its data through two recent advances that will pay off in future years. The updated SIMS will enable consistent and accurate data queries; allow for integration of crash data with roadway infrastructure, courts, driver licensing, and medical outcomes agencies; and enable local jurisdictions to complete their own safety data queries. Additionally, significant progress has been made in rolling out technology to enable inputting of electronic crash reports by law enforcement, thus making data more timely and more accurate (through edit checks). Some state courts have the ability to track offenders from arrest through disposition and compliance with sanctions. Montana plans to continue to leverage the analysis capabilities available in SIMS to evaluate progress. Ongoing efforts

will work to link additional datasets to crash data to enable more precise analysis of the relationship between crashes and infrastructure characteristics as well as more accurate medical outcomes. The courts have the ability to track offenders from arrest through disposition and compliance with sanctions.

Montana has a Traffic Records Coordinating Committee (TRCC) that provides oversight and seeks to advance the accuracy, timeliness and completeness of traffic and safety data. Several members of the CHSP Advisory Committee also sit on the TRCC and will provide ongoing coordination and progress reporting of data needs and updates. The TRCC has a traffic records coordinator and chair. The TRCC Coordinating Committee is comprised wholly of state employees. Membership of the TRCC does not include local law enforcement, city or county roadway engineers, higher education, elected officials, tribal representation or other safety program stakeholders.

Statistics & data available for state use are listed below. They are also available to conduct the States Traffic Safety Problem Identification. The most current trend data available at this time is from 2005-2014. The documents below are available in Microsoft Excel spreadsheets. Data is also available in other formats, if needed, and the State provides help to users to access this data.

- All Montana Crashes
- Age Ranges of Drivers Involved in Crashes
- Age Ranges of Drivers Involved in Crashes 2
- Animal Involved Crash
- Dry Road Crashes
- Impaired Drivers Involved in Crashes
- Montana FARS Data 2004-2013
- Motorcycle Crashes
- Nighttime Crashes
- Older Driver - 55 and Older
- Pedestrian and Bicycle Crashes
- Rural Crashes
- Summer Crashes
- Teen Drivers
- Unrestrained Vehicle Occupants (Occupant Protection)
- Winter Crashes

The Montana Department of Public Health and Human Services (DPHHS) has a wealth of data within the State. The Behavioral Risk Factor Surveillance System (BRFSS) is the primary source of state-based information on health risk behaviors among the adult population 18 years of age and older living in households.

In addition to information on health status and behavioral risks, information on a variety of demographic factors is gathered to make prevalence estimates for specific population groups possible. Thus, interventions can be directed to people at the greatest risk.

The information collected is used to improve health care for citizens on a national and statewide basis. More specifically, BRFSS data are used to:

- identify demographic differences and trends in health-related behaviors;
- monitor the effectiveness of health intervention and services;
- address critical and emerging health issues;
- educate the public, health practitioners, and policy makers about health risk behaviors and conditions through data dissemination;
- formulate policy and public health initiatives; and
- measure progress toward achieving state and national health objectives.

It was also reported that trauma is the State's leading cause of death for 1-44 year olds. This is the second highest fatal injury rate in the nation and the rate is 40 percent higher than the national average. It was reported that the lack of prompt emergency medical service in the rural areas of the State is one reason for the State's high rate of trauma deaths.

Unfortunately, the State does not have a unified, complete tracking system to track all DUI offenders from arrest through final adjudication and completion of sanctions or a single uniform crash report. A single uniform crash report is needed in the State to ensure all data collected is uniform, complete and accurate.

There are other data resources in the State but many of them are in silos and are not shared. Data silos are repositories of data controlled by one agency or department and are unavailable to other users with a need for the data. It is isolated from the rest of the State.

Recommendations

- Increase usage of the Montana Safety Information Management System (SIMS) by offering the data to other traffic safety partners.

- Increase representation on the Traffic Records Coordinating Committee to include local law enforcement, city and county roadway engineers, higher education, elected officials, tribal representation, and other safety program stakeholders.

- Increase legislative knowledge of and support for traffic records initiatives in the State.

- **Build a data warehouse (DW) of traffic safety records. Use this system for reporting and data analysis. Make this DW the central repository of integrated data from all sources. Ensure that the DW stores current and historical data and is used for creating analytical reports for end users throughout the State. Create an online statistical analysis tool to access the DW.**

- Eliminate barriers to data sharing.

- Develop and implement a uniform Traffic Crash Report and mandate its use statewide.

- **Create a unified, complete tracking system to track all DUI offenders.**

C. Driver Records Systems

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 Montana driving record is a collection of information maintained by the Motor Vehicle Division. A record consists of information compiled in five major categories:

- personal history information
- licensing information
- conviction/accident history
- motor vehicle accident history
- driver license sanctions

The driving record maintains important details about:

- application for a driver license;
- examination process;
- the subsequent issuance, denial, revocation, suspension or cancellation of a license;
- driver performance; and
- other actions taken in response to unsafe driver performance or other legal requirements.

Montana driving records are data compiled throughout the lifetime of a driver. Changes in legislation, computer systems, data sources, court cases and judicial rulings all affect the appearance and information included in the driver's record. Sections 33-18-210(9) and 61-5-208 of the Montana Code Annotated restrict how some aspects of a driving record may be used.

- While convictions older than three years may not affect insurance rates, convictions for second or subsequent DUIs will affect a person's record for five years between the date of the prior offense and the most recent offense.
- Conviction points remain on a driving record for three years from the conviction date. While the points are removed after three years, the convictions become a permanent part of a driving record.
- Completing a defensive driving class does not remove points from a driving record.
- If Montana drivers are convicted of a driving offense in another state, those convictions appear on their Montana driving records.
- If a driver with an out-of-state license is convicted of a driving offense in Montana, the conviction record is sent to the state in which the driver is licensed.
- All of the information on a driver's motor vehicle record remains part of that permanent driver record.

- From year to year and from state to state, a driving record stays with that individual.

The Montana Driver License System

Montana has communication protocols that permit real-time linkage and exchange of data between law enforcement, the courts, the State driver licensing and vehicle registration authorities, and other parties with a need for this information. This system provides driving records for use by the courts when adjudicating and sentencing drivers convicted of impaired driving. It was reported that some of these records may not be up to date due to slow reporting by some of the courts. This slow reporting can create problems for other data users.

The Criminal Justice Information Network (CJIN) Services Section manages Montana's Criminal Justice Information Network by:

- authorizing agency and user access,
- developing system advancements, and
- providing web-based and instructor-led training and certification programs for over 3,000 users.

This section also protects the accuracy and timeliness of the information provided by the network and, on a three-year cycle, performs compliance audits of all system users to ensure that they meet all of the security and policy requirements for obtaining and using the information. The CJIN Services Section staff write and update the CJIN Users Guide, the Mobile Users Guide to CJIN, online CJIN help files, and training broadcasts.

Recommendations

- Mandate court licensing sanctions be reported completely and timely to the Motor Vehicle Division.

- Provide timely and accurate driving records for use by the courts when adjudicating and sentencing drivers convicted of impaired driving.

APPENDIX

Montana Impaired Driving Assessment Agenda
Wingate Hotel
2007 N. Oakes
Helena, Montana 59601
April 11 – 15, 2016

Monday, April 11, 2016	
8:00 am – 8:15 am	**Welcome and Introduction to Assessment Team** Michael Tooley, Director, Montana Department of Transportation (MDT) Governor's Highway Safety Representative Judge Robin Smith, Impaired Driving Assessment Team Lead
8:15 am - 9:15 am	**State Highway Safety Section Overview; financial administration of highway safety grants; Comprehensive Highway Safety Plan** Lynn Zanto, Administrator - Rail, Transit and Planning Division, MDT Audrey Allums, Bureau Chief, Grants Bureau, MDT Janet Kenny, Supervisor, State Highway Traffic Safety Section, MDT Bill Tuck, Grants Accountant, State Highway Traffic Section, MDT Pam Langve-Davis, Comprehensive Highway Safety Plan Coordinator, Statewide & Urban Planning, MDT
9:15 am - 9:30 am	**Break**
9:30 am – 10:30 am	**Impaired Driving Data** Mark Keeffe, Safety Operations Research Analyst, State Highway Traffic Safety Section, MDT Kraig McLeod, Traffic Safety Engineer, Traffic Safety Bureau, MDT Lisa Mader, Information Technology Director, Montana Judicial Branch Kathy Wilkins, Statistical Analysis Director, Montana Board of Crime Control Kathy Ruppert, Program Manager, Montana Board of Crime Control

10:30 am – 11:00 am	**Infrastructure; Roadway Departure; Highway Safety Improvement Plan** Roy Peterson, Traffic and Safety Bureau Chief, MDT Kraig McLeod, Traffic Safety Engineer, Traffic Safety Bureau, MDT
11:00 am – 12:00 pm	**Current Laws** Judge Knisely, 13th Judicial District, Regional Judicial Outreach Liaison Chad G. Parker, Assistant Attorney General, Montana Department of Justice Erin T. Inman Pllc , Consultant, Trainer (previous TSRP) Scott Larson, Toxicology Section Supervisor, Forensic Science Division, Department of Justice
12:00 pm – 1:00 pm	**Lunch on your Own**
1:00 pm – 2:15 pm	**Law Enforcement: Administration and Training** ▪ **Standard Field Sobriety Training (SFST);** ▪ **Advanced Roadside Impaired Driving Enforcement (ARIDE)** ▪ **Drug Recognition Expert (DRE)** ▪ **Law Enforcement Liaisons(LEL)** Colonel Tom Butler, Montana Highway Patrol, Department of Justice Glen Stinar, Administrator, Montana Law Enforcement Academy Sergeant Kurt Sager, Traffic Safety Resource Officer, Montana Highway Patrol Trooper Douglas Samuelson, Montana Highway Patrol Sergeant Greg Amundsen, Missoula Police Department, Law Enforcement Liaison
2:15 pm – 2:30 pm	**Break**

2:30 pm – 3:45 pm	**Law Enforcement: High Visibility Enforcement** ▪ **Selective Enforcement Traffic Team (SETT)** ▪ **Selective Traffic Enforcement Program (STEP)** Sergeant Philip Freed, Montana Highway Patrol Captain Cory Klumb, Bozeman Police Department Undersheriff George Skuletich, Butte-Silver Bow Law Enforcement Chief Hawkan Haakanson, Fort Belknap Chad Newman, Transportation Planner, MDT
3:45 pm – 4:15 pm	**Toxicology** Scott Larson, Toxicology Section Supervisor, Forensic Science Division, Department of Justice
4:15 pm – 5:00 pm	**Prosecution** Nicholas Owens, Deputy County Attorney, Yellowstone County Emily von Jentzen, Assistant Kalispell City Attorney

Tuesday April 12, 2016

8:00 am – 9:00 am	**Adjudication; Treatment Court** Judge Knisely, 13th District Court, Regional Judicial Outreach Liaison (telephone) Judge Barger, Hill County Court of Limited Jurisdiction Judge Jolley, Cascade County Justice of the Peace Jeff Kushner, Statewide Drug Court Coordinator, Office of the Court Administrator (telephone) Joan Johnson, Fort Belknap Tribal Courts

9:00 am – 10:00 am	**Assessment, Prime For Life, Community Based Treatment Options, Brief Intervention and Screening** Bobbi Perkins, Bureau Chief, Chemical Dependency Bureau, Department of Health and Human Services Isaac Coy, Program Manager, Chemical Dependency Bureau, Department of Health and Human Services Tressie White, Acting Executive Director, Helena Indian Alliance Ben Horn, Chemical Dependency Supervisor, Helena Indian Alliance Dan Krause, Chief Operations Officer, Boyd Andrew Community Services
10:00 am – 10:15 am	**Break**
10:15 am – 11:00 am	**Administrative Sanctions, Drivers Licensing Programs** Michele Snowberger, Driver Services Bureau Chief, Motor Vehicles Division, Department of Justice Patrick McJannet, Deputy Bureau Chief, Driver Services Bureau, Motor Vehicles Division, Department of Justice
11:00 am – 12:00 pm	**24/7 Treatment Program and Interlock** Sergeant Lacie Wickum, 24/7 State Coordinator, Montana Highway Patrol Undersheriff Kevin Evans, Yellowstone County Sheriff's Office Jodine Tarbert, CEO, Compliance Monitoring Systems, LLC Ken Lang, Clean Start of Montana Colonel Tom Butler, Montana Highway Patrol, Department of Justice
12:00pm – 1:00 pm	**Lunch**

1:00 pm – 2:00 pm	**Felony Offense Treatment, Reentry Services and Probation** Ed Foley, Probation and Parole Officer II, Department of Corrections Sarah Evans, Probation and Parole Officer, Department of Corrections Alex Vukovich, Program Administrator, WATCH Program Michael Boston, Clinical Treatment Supervisor, WATCH Program
2:00 pm – 2:45 pm	**Communications Programs** Charity Watt, Public Information Officer, Rail, Transit, Planning Division, MDT Randi Szabo, Public Relations/Market Research Director, Banik Communications Suzanne Elfstrom, Director of Media and Public Relations, Partners Creative
2:45 pm – 3:00 pm	**Break**
3:00 pm – 4:00 pm	**Responsible Alcohol Sales and Service Training, Over service** Lisa Scates, Alcohol Education Coordinator, Montana Department of Revenue Tracie Kiesel, DUI Task Force Member, Responsible Alcohol Sales and Service Trainer Captain Jim Veltkamp, Bozeman Police Department Jim Johnson, President, Montana Tavern's Association
4:00 pm – 5:00 pm	**Safe on all Roads** Sheila Cozzie, Cultural Liaison, State Highway Traffic Safety Section, MDT Avis Spencer, SOAR Coordinator, Fort Belknap Juanita Wagner, SOAR Coordinator, Blackfeet

Wednesday April 13, 2016	
8:00 am – 9:00 am	**Underage Drinking, Driver's Education** Billy Reamer, Chemical Dependency Bureau, Department of Health and Human Services Rich Jespersen, HELP Committee and Boys & Girls Clubs of the Hi-Line Fran Penner-Ray, Traffic Education, Office of Public Instruction Vicki Turner, Interagency Coordinating Council, Department of Health and Human Services
9:00 am – 10:00 am	**Community Coalitions and Emergency Services** Coleen Smith, Director Youth Connections Brandee Tyree, Missoula Forum for Children and Youth, Missoula Underage Substance Abuse Prevention Coordinator Jim DeTiene, EMS, Department of Health and Human Services Sgt. Jimm Kilmer, Butte-Silver Bow Law Enforcement, Mariah's Challenge
10:00 am – 10:15 am	**Break**
10:15 am – 11:30 am	**County DUI Task Forces** Kevin Dusko, Transportation Planner, MDT Lonie Hutchison, DUI Task Force Coordinator, Missoula County Jay M. Nelson, Lewis and Clark DUITF, Montana Highway Patrol Christopher Adair, Blaine County DUITF and Deputy Kevin Corner, Havre Police Department

11:30 am – 12:30 pm	**Moving Forward: Legislative and Policy Considerations** Lynn Zanto, Administrator - Rail, Transit and Planning Division, MDT Representative Frank Garner
12:30 pm	**Questions/Wrap-up**

Wednesday April 13, 2016 continued	
12:30 pm -	**Lunch and Assessment Team Report Development**
Thursday April 14, 2016	
8:00 am- Completion	**Assessment Team Report Development**
Friday April 15, 2016	
8:00 am- 10:00 am	**Assessment Team Report Presentation**

TEAM CREDENTIALS

SUSAN N. BRYANT, M.A., M.B.A.

Susan (Sue) Bryant is currently a consultant with her own company based in Iowa after almost thirty years of employment with the state of Texas. She retired as the director of the public transportation division of the Texas Department of Transportation (TxDOT). As division director, she managed 180 employees and an approximately $150 million budget of federal and state grant programs for rural and small urban transportation systems, the state's medical transportation program, and public transportation planning. Prior to public transportation division director, she served for over ten years as the director of the Texas traffic safety program.

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

She facilitated the strategic planning process for the Governors Highway Safety Association (GHSA) and completed a "How to Manual" for occupant protection for children for GHSA. She headed a project in Texas to conduct community assessments and develop local strategic plans for underage drinking prevention. In addition, she served as community liaison for the Texas Travis County Alliance for a Safe Community, an underage drinking prevention coalition based in Austin.

She has served on 43 highway safety program assessment teams for 28 states and territories. These have included assessments for impaired driving, occupant protection, and pedestrian/bike safety. She served on the team to update the impaired driving assessment tool and on the team to develop assessment team training. In 2014, she was responsible for the development of the Impaired Driving Leadership Summit, a planning workshop conducted by the States.

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

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

LARRY HOLESTINE

Experience

- Consultant – Transportation Safety and Criminal Justice – 2009-Present
- Data Nexus Inc., Director of Public Safety Services 2003 – November 2009
- National Highway Traffic Safety Administration Region VIII, Law Enforcement Liaison 2002 -2003
- Colorado State Patrol Major 1990 – June 2002
- Colorado State Patrol Lieutenant and Captain 1984 – 1990
- Colorado State Patrol Sergeant 1981- 1984

- Instructor Coordinator, Colorado Law Enforcement Training Academy 1979-1981
- Colorado State Patrol Trooper 1973-1979

Education and Credentials

- Bachelor of Science – Adult Technical Education specializing in Criminal Justice – Colorado State University 1990
- Certificate - School of Police Staff and Command - Northwestern University 1985
- Certificate - Management in State Government - State of Colorado 1987
- Coordinator/Instructor for the Colorado Law Enforcement Training Academy and Colorado State Patrol Academy
- Instructor, Colorado Institute of Law Enforcement Training at Colorado State University
- Colorado Police Officer Standards and Training (POST), Certified Trainer
- Technical Crash Investigation – Northwestern University 1979

Professional Activities

- Executive Board, Association of Transportation Safety Information Professionals, National Safety Council, 1987- 2003
    - 2001 Program Chair, 2002 1st Vice Chair, 2003 Chair
- Member, ANSI D-16 Committee on Motor Vehicle Accident Classification
- Chair, Steering Committee, Law Enforcement Section, Colorado Safety Management System
- Co-Chair and Member, Colorado State Traffic Records Advisory Committee
- Member, National Agenda for Traffic Records Committee, National Safety Council
- Representative for National Highway Transportation Safety Administration (NHTSA) and the National Safety Council (NSC) to promote the Association of Transportation Safety Information Professionals (ATSIP)
- Member, Intelligent Transportation Systems, Archived Data User Program Committee, Federal Highway Administration
- Co-Chair, Highway Safety Program Advisory for Traffic Records Panel, Data Nexus, Inc. for National Safety Council
- Member, Project Panel/Advisory Group, Project #NCHRP 17-12 (Improved Safety Information to Support Highway Design) Northwestern University Traffic Institute
- Member, Project Panel/Advisory Group, National Center for Highway Research Projects
    - Reducing Crashes in Construction Zones
    - Developing Basic Training for Transportation Safety Information Users
    - Data needs for Transportation Information Professionals
- Member, Colorado Department of Transportation RFP Review committee for

Intelligent Transportation Systems

- Member, NHTSA Traffic Records Assessment Team (Number Denotes Number of Assessments for the State); Kansas(5), South Carolina(2), Nebraska, Louisiana(3), Arizona, Iowa (2), New Mexico(3), Wisconsin(4), North Dakota(3), South Dakota(4), Connecticut (2), Idaho, Oregon(4), Tennessee(3), , Mississippi(3), Missouri(3), New Jersey (2), Montana, Idaho, Nevada (2), Delaware(2), Kentucky Ohio(2), Illinois, Massachusetts(2), Wyoming(3), Virginia, Vermont, Maryland (3), San Carlos Reservation, White River Reservation, Menominee Reservation
- State Traffic Records Assessment Program; Wyoming, West Virginia, Pennsylvania, Louisiana, New Mexico, North Dakota, Illinois
- Co-Chair, National Safety Council, Association of Highway Safety Information Professionals, Marketing and Honest Broker Committee
- Member, Transportation Research Board – Law Enforcement Committee and Traffic Record Committee
- Member, Colorado State Patrol Diversity Committee
- Member of NHTSA Impaired Driving Assessment Team: Vermont, Nevada, Massachusetts, California, Indiana, Oregon, Tennessee, Delaware, Louisiana, Alaska, Florida, Maine, Missouri, North Carolina, Delaware, Idaho, West Virginia, Wyoming, New Mexico
- President and Member, Northern Colorado Peace Officers Association
- Member, Committee on Guidelines for Transportation Safety Information Management Systems and files, National Safety Council and National Highway Traffic Safety Administration
- Member National Academy of the Sciences (NAS), National Center for Highway Research Projects (NCHRP) Committee: Project 17-40 Model Curriculum for Highway
  Safety Core Competencies, Project 03-80 Traffic Enforcement Strategies for Work Zones
- Member of NHTSA Occupant Protection Assessment Team; South Dakota, Ohio, Utah (2), Idaho(2), Maine, North Carolina, Vermont, Pennsylvania, Virgin Islands,

Robert P. Lillis

Rob Lillis is President of Evalumetrics Research and has been providing planning, research and evaluation services to youth development, traffic safety, substance abuse, criminal justice, education, health and mental health programs at the state and local level for over 35 years. He provides evaluation services for school districts for a variety of special programs including 21st Century Learning Center programs, after-school mentoring programs and environmental education programs. He also provides planning, research and evaluation services for Drug Free Community Grant programs and serves as evaluation consultant to the Allegany Council on Alcoholism and Substance Abuse (ACASA) and numerous other local substance abuse prevention and youth development programs. Mr. Lillis has served as

the evaluator for the Ontario County Juvenile Drug Treatment Court, the Finger Lakes Drug Court, Ontario County Youth Court, the Finger Lakes Child Abuse Response Team-Child Advocacy Center and the Ontario County Family Support Center. He also has conducted outcome studies for the Yes Pa Foundation, character education program.

Mr. Lillis was the primary source of research support to the governor and Legislature during the debate on the 21 year old minimum drinking age law in New York. He also served on the consultant panel for the U.S. General Accounting Office Special review of Minimum Drinking Age Laws.

Since 1991 Mr. Lillis has served as a member of the Impaired Driver Assessment Consultant Team for the National Highway Traffic Safety Administration (NHTSA) and has conducted over 65 assessments of prevention and treatment programs in 38 states, Puerto Rico and for the Indian Nations. He was the 2011 recipient of the NHTSA Public Service Award.

Judge Robin D. Smith

Judge Robin D. Smith was the Presiding Judge of the City of Midland, Texas Municipal Court. He served in that position from 1984 until his retirement in 2015. He continues to serve the Court and hear cases as required. Prior to the 1984 appointment, he practiced law as a prosecutor for the City of Midland in 1982-83 and operated as a solo practitioner in 1983-84.

Judge Smith's educational accomplishments include a Bachelor's Degree in Economics and Psychology from Oklahoma State University and his Juris Doctorate from Texas

Tech University. He has also received a *Professional Certificate in Judicial Development* for Special Court Trial Skills from the National Judicial College.

His professional Association work includes serving as Chair of the American Bar Association's National Conference of Specialized Court Judges in 1996-97. Also in 1997, Judge Smith was appointed by Chief Justice Tom Phillips to serve on the Texas Judicial Council where he served until 2001. He has been President of the Texas Municipal Courts Association (TMCA) twice in 1991-92 and 2008-09. He was Chair of the State Bar of Texas Municipal Judges Section in 1989-90 and 2013-2014. He also served on the Section's Council for many years. He served on the TMCA Board of Directors from 1986-1997 and again in 2001 to 2005 and 2006 to 2010. Most notably, Judge Smith served as the United States Department of Transportation National Highway Traffic Safety Administration Judicial Fellow from 2002-2004.

Among honors, the Texas Municipal Courts Association named Judge Smith *Judge of the Year* in June 1998 and the State Bar of Texas Municipal Judges Section presented Judge Smith with the *Michael J. O'Neal Outstanding Jurist Gavel Award* in 2002. In 2001, Judge Smith was presented the American Bar Association's National Conference of Specialized Court Judges' *Education Award*. Judge Smith also was recognized by the Texas Junior Chamber of Commerce as one of *Five Outstanding Young Texans* in 1994 and is a five-time winner of the *City of Midland Management Awards*. In 2007, he was selected to be a *Fellow of the Texas Bar Foundation.*

He is a frequent speaker for several groups including the National Judicial College and the Texas Municipal Courts Education Center. In addition, he has spoken at judicial training seminars in numerous states. He is considered to have expertise in the areas of search and seizure, constitutional criminal procedure, traffic safety and juvenile law.

In addition to his activities and position at the Midland Municipal Court, he edits and publishes the *Texas Municipal Court - Justice Court News* which has more than 700 monthly subscribers.

THOMAS H. WOODWARD

PROFESSIONAL BACKGROUND

Thomas Woodward retired as a Lieutenant from the Maryland State Police on July 1, 2013 after a 36 year law enforcement career. He served with the Maryland State Police for 28 years. He was rehired in a civilian capacity by the Maryland State Police in January 2014 and appointed by the Governor's Highway Safety Representative as the Maryland Drug Recognition Expert (DRE) Coordinator.

At the time of his retirement Mr. Woodward was the Commander of the Maryland State Police, Hagerstown Barrack. He previously served as the Commander of the Chemical Test for Alcohol Unit, a staff officer for the Chief of the Field Operations Bureau, and as the Executive Officer for the Commander of the Transportation Safety Division.

Mr. Woodward has been a Standardized Field Sobriety Testing (SFST) Instructor, certified through the National Highway Traffic Safety Administration (NHTSA), since August 1989. He also instructs the NHTSA SFST Instructor Development Course.

Mr. Woodward was certified as a Drug Recognition Expert (DRE) in July, 1991. He was then certified as a DRE Instructor in April, 1992 and received instruction as a DRE Course Manager in June, 1995. He has served as the DRE Coordinator for the state of Maryland for 9 years.

Mr. Woodward's emphasis on occupant protection enforcement helped the Hagerstown Barrack lead the State in barracks of similar size. He was recognized by the Maryland Highway Safety Office for innovative program development for a nighttime seat belt enforcement program he implemented.

Mr. Woodward has served as a member on 10 NHTSA Highway Safety Program Assessment Teams.

EDUCATIONAL BACKGROUND

Mr. Woodward received a Bachelor's Degree in Organizational Leadership and Development from Wheeling Jesuit University in May 2005. He is also a graduate of the Northwestern University School of Police Staff and Command.

ORGANIZATIONAL AFFILIATION

International Association of Chiefs of Police (IACP)
IACP Drug Recognition Expert Section
    Officer - 2006-2009
    Chair - 2009
Mothers Against Drunk Driving (MADD) – Maryland Advisory Board