

Impaired Driving: Data Gaps

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March 6, 2019

Presented to the Impaired Driving Task Force:
Technology, Research, & Data Subcommittee

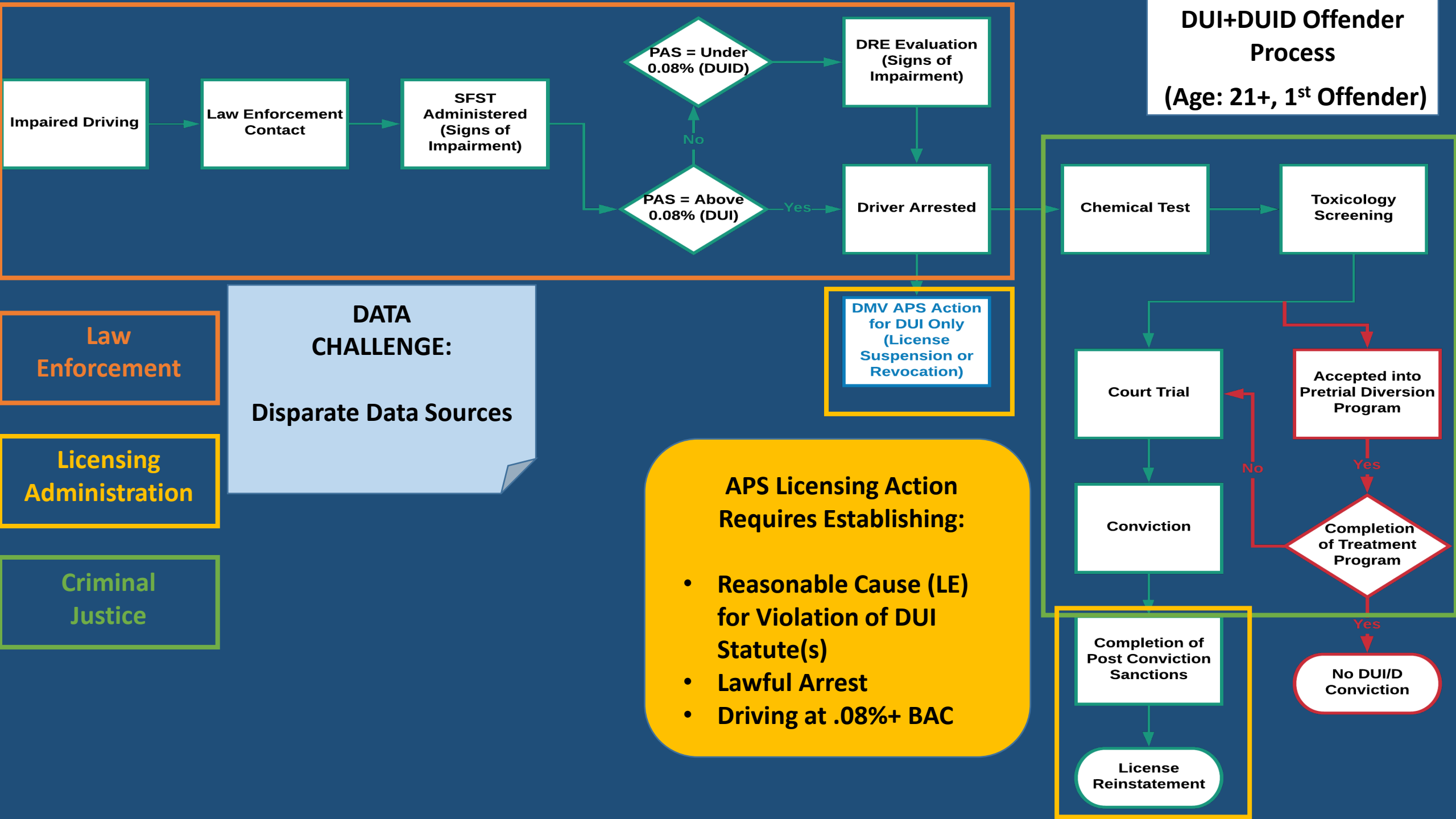


Impaired Driving: Data Gaps

Overview



- DUI+DUID Offender Process
- Common Impaired Driving Outcome Metrics:
 - DUI+DUID Arrests
 - Alcohol- & Drug-Involved Crashes
- Impaired Driving Research: The Road Ahead





AGE 21 AND OLDER OFFICER'S STATEMENT

California Vehicle Code (CVC) §§13353, 13353.1, 13353.2 & 13359

Page 1

LAW ENFORCEMENT AGENCY CASE NUMBER		DETENTION/ARREST DATE		FOR DMV USE ONLY	
DRIVER NAME (LAST, FIRST, M.I.)		DRIVER LICENSE NUMBER		COMMERCIAL? <input type="checkbox"/> Yes <input type="checkbox"/> No	STATE
MAILING ADDRESS		STATE		ZIP CODE	
DATE OF BIRTH	SEX	HAIR	EYES	HEIGHT	WEIGHT
LICENSE: <input type="checkbox"/> Suspended/Revoked <input type="checkbox"/> Surrendered (Attached) <input type="checkbox"/> Not in Possession <input type="checkbox"/> Unlicensed					
VIOLATION: <input type="checkbox"/> 0.08% or more BAC Chemical Test Results <input type="checkbox"/> 0.01% or more BAC (DUI Probation) <input type="checkbox"/> 0.04% or more BAC (Commercial Vehicle) <input type="checkbox"/> Chemical Test Refusal (Complete Reverse) <input type="checkbox"/> PAS or other Chemical Test Refusal (DUI Probation) (Complete Reverse)					
VEHICLE: License Number or VIN: <input type="checkbox"/> Commercial Vehicle: Vehicle requires a commercial driver license (CVC §15210). <input type="checkbox"/> Hazardous Materials: Transporting materials requiring placards (markings (CVC §27903).					
NARRATIVE: Describe in detail the facts, observations, and circumstances that led to the stop or contact with the driver in Narrative section on Page 2 of this form.					
Contact: On date: / / at / / AM PM in City/County CA, the above driver was contacted.					
DRIVING: <input type="checkbox"/> Driving observed by this officer or <input type="checkbox"/> Driving observed by another observer (complete Observation/Arrest section on Page 2)					
Admission of Driving: <input type="checkbox"/> Driver admitted to driving the vehicle Collision: <input type="checkbox"/> Driver involved in a collision					
(If driving not observed by an officer.)					
TIME: What time did you stop driving or how long after driving/collision did you wait for law enforcement to arrive? Driver Response: / / AM PM					
ARREST OR DETENTION STATEMENT: I had reasonable cause to believe the driver was driving a motor vehicle with alcohol and/or drugs present in the blood or while under the influence. The driver was lawfully arrested, or lawfully detained while on DUI probation, by this officer, or by the person shown in the Observation/Arrest section on Page 2 , on date / / at / / AM PM for violation of CVC §§23152, 23153, or 23154.					
OBJECTIVE SYMPTOMS OF INTOXICATION: <input type="checkbox"/> Bloodshot/watery eyes <input type="checkbox"/> Odor of alcoholic beverage <input type="checkbox"/> Unsteady gait <input type="checkbox"/> Slurred speech <input type="checkbox"/> PAS results (complete below)					
<input type="checkbox"/> Other: Observed by: <input type="checkbox"/> This officer <input type="checkbox"/> Another observer:					
PRELIMINARY ALCOHOL SCREENING TEST (PAS)					
Driver submitted to and completed a PAS test with the results of: DUI Probation: Required. Non-DUI Probation: Optional. Always complete section if PAS results available.					
Test 1 % BAC on / / at / / AM PM Test 2 % BAC on / / at / / AM PM					
OFFICER CERTIFICATION: I certify under penalty of perjury under the laws of the State of California that: (1) I obtained the above PAS test results in the regular course of my duties, (2) I used PAS Model (Name/Number) Serial# Manufactured by (3) I administered this PAS test properly in accordance with the manufacturer's guidelines and instructions, (4) I have received training on the proper operation of this device and administration of the PAS test and am competent and qualified to operate the device, and (5) the device was functioning properly at the time of the test.					
Date / / Signature X Badge/ID Number Agcy/Div					
Breath Test Results: CHEMICAL TEST Attach copy of the results, if available.					
Test 1 % BAC on / / at / / AM PM Test 2 % BAC on / / at / / AM PM Test 3 % BAC on / / at / / AM PM (WHEN APPLICABLE)					
BREATH TEST MACHINE OPERATOR CERTIFICATION: I certify under penalty of perjury under the laws of the State of California, that the above breath test sample results were obtained in the regular course of my duties. I further certify that I am qualified to operate this equipment and that the test was administered pursuant to the requirements of Title 17 of the California Code of Regulations.					
Date / / Signature X Badge/ID Number Agcy/Div					
BLOOD TEST RESULTS: Blood test on date: / / at / / AM PM					
URINE TEST RESULTS: First void on date: / / at / / AM PM Test on date: / / at / / AM PM					
I certify under penalty of perjury, under the laws of the State of California, that the information contained on all pages of this Officer's Statement is true and correct.					
EXECUTED ON: Date / / in City County					
OFFICER'S PRINTED NAME		BADGE/ID NUMBER		TELEPHONE NUMBER ()	
AGENCY		AREA		COURT CODE (IF UNKNOWN, COURT NAME)	
I <input type="checkbox"/> did <input type="checkbox"/> did not personally serve a copy of the Order of Suspension/Revocation to the driver.					
Date / / Signature of Arresting Officer X					
ORDER SERVED BY ANOTHER OFFICER: If order was served on driver by another Officer have that officer complete this section.					
I personally served a copy of the order to the driver on the date shown below:					
Date		Serving Officer's Printed Name		Signature Of Serving Officer X	

g: Data Gaps



Revised DS-367 Form

Arrest Type

For statistical purposes only.
Check all that apply.☐ Alcohol Use☐ Cannabis Use☐ Other Drug Use



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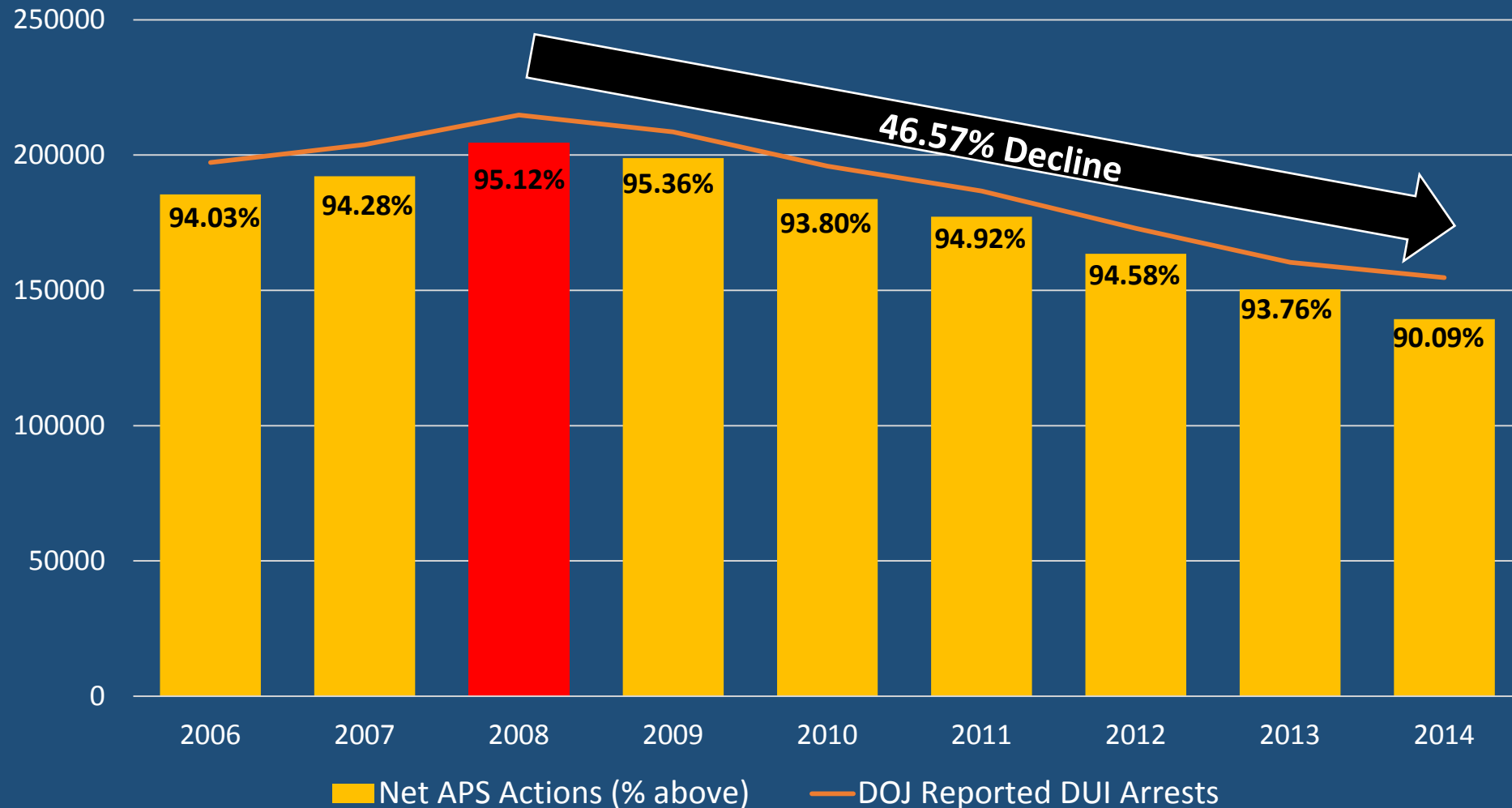


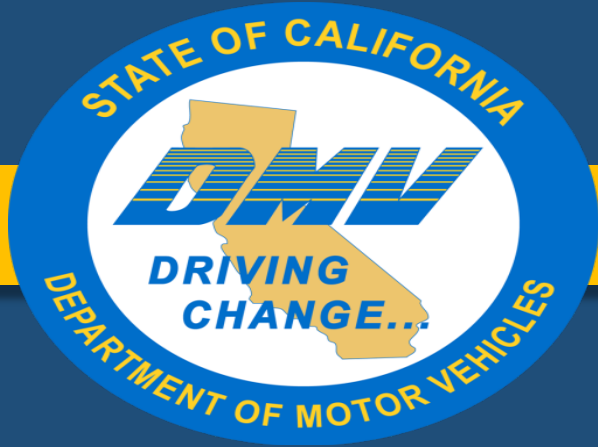
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DUI+DUID Arrests

**DATA
CHALLENGE:**
Outcome
Measure
Definition(s)





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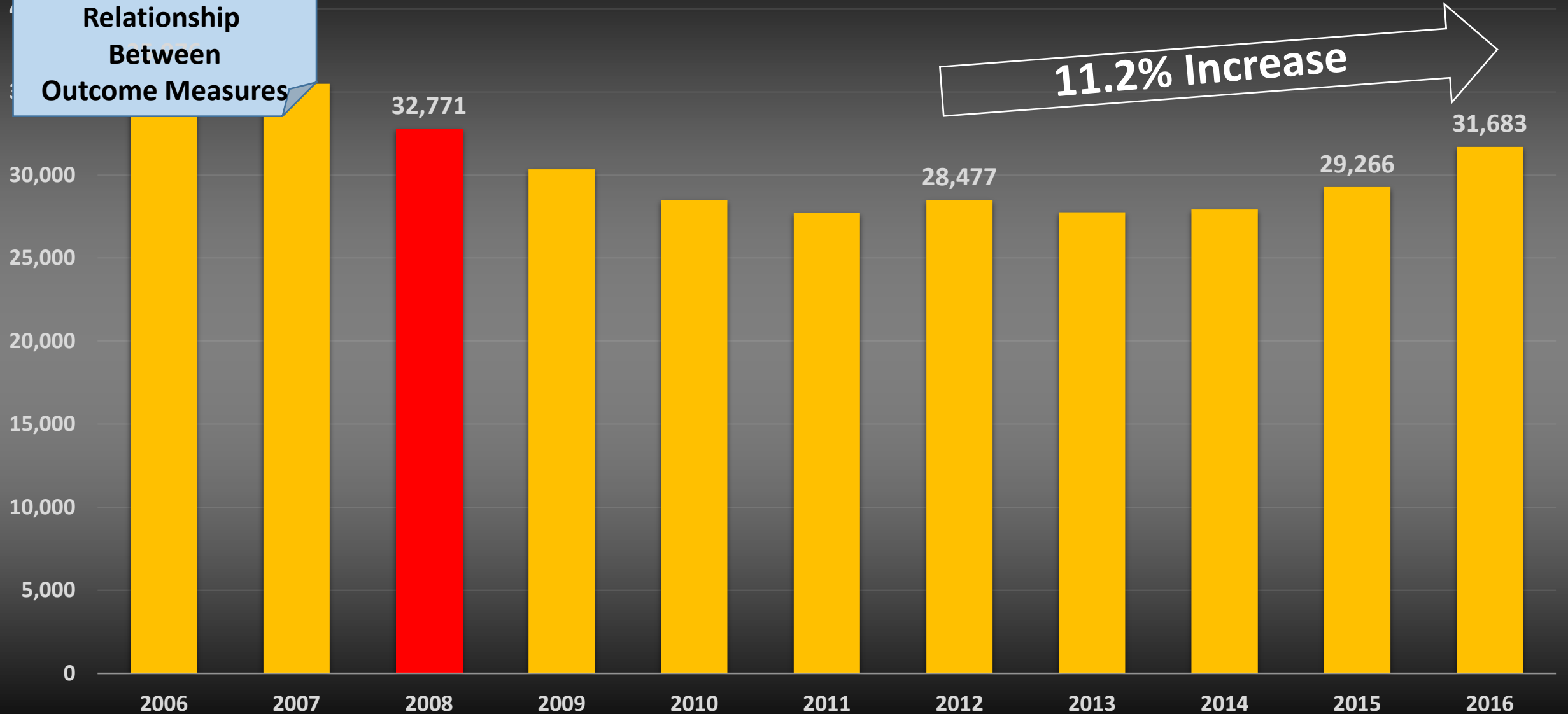
Overview

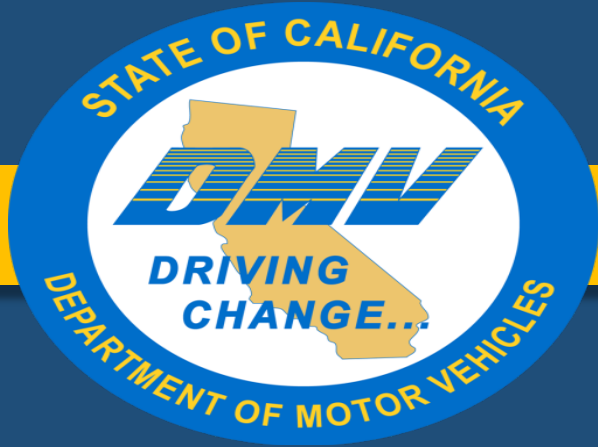


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**DATA
CHALLENGE:**
Relationship
Between
Outcome Measures

DUI+DUID Fatal & Injury Crashes



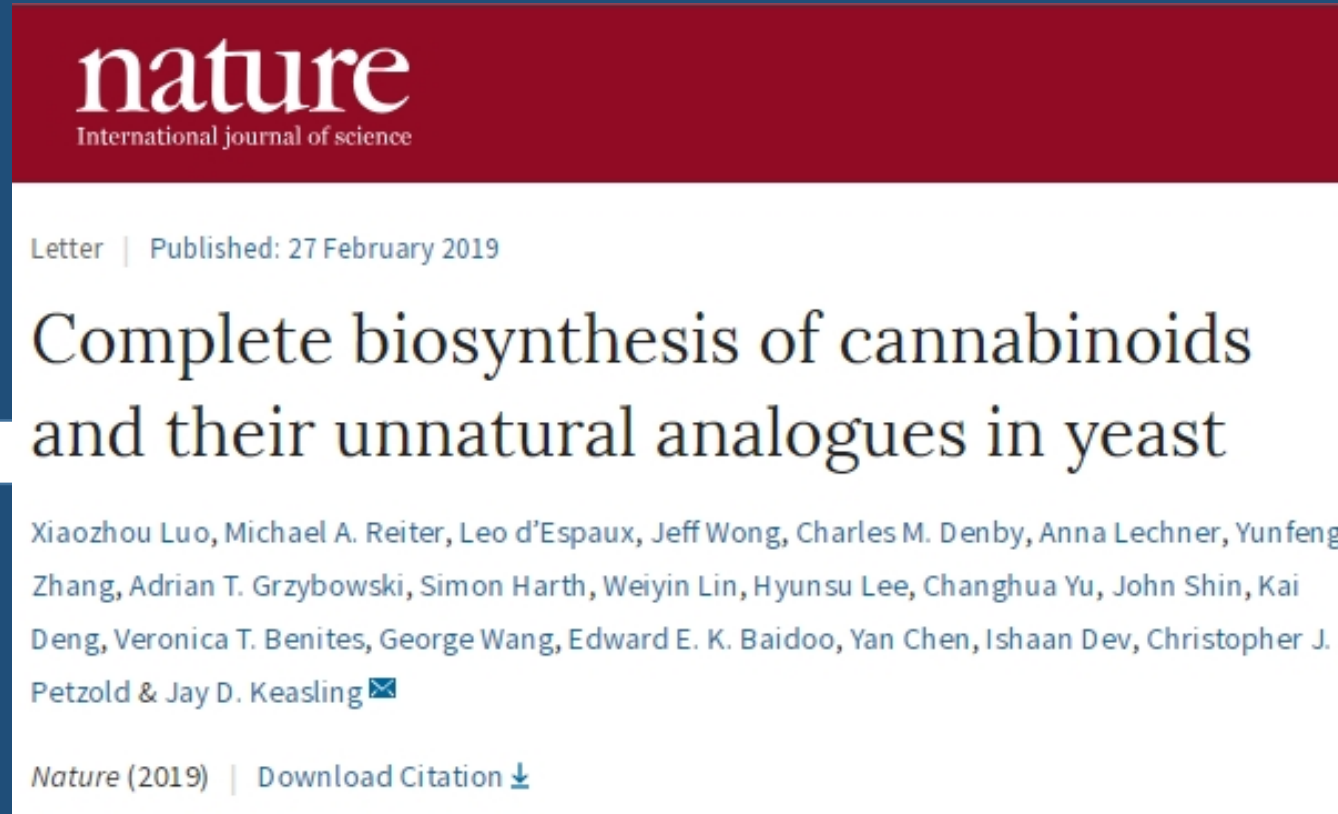


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Impaired Driving Research: The Road Ahead



Increases in
Data
Quality



Insights

ory
forms



Impaired Driving: Data Gaps

Questions

Data Challenges Summary:

- Disparate Data Sources
- Outcome Measure Definition(s)
- Relationship Between Outcome Measures

