

**California Highway Patrol**  
**Impaired Driving Task Force**  
**Best Practice Protocols Meeting Minutes**

July 25, 2019

601 North 7<sup>th</sup> Street

Sacramento, CA 95811

**MEMBERS PRESENT**

California Narcotic Officers' Association – Vaughn Gates

California National Organization for the Reform of Marijuana Laws – Ellen Komp

Kern County Deputy District Attorney – Michael Yraceburn

California State Sheriffs' Association – Marcus James

Pharmacist – Dr. Phillip Drum

California Department of Justice – Harinder Kapur

Alcohol Beverage Control – Joseph McCullough

Office of Traffic Safety – Nicole Osuna

National Highway Traffic Safety Administration – Chris Murphy

Department of Veterans Affairs – Dr. Anthony Albanese

**MEMBERS ABSENT**

International Association Chiefs of Police – Chuck Hayes

Medical Examiner, San Francisco – Dr. Luke Rodda

California District Attorneys Association – Amanda Martin

Drug Policy Alliance – Jeannette Zanipatin

**GUESTS**

California Highway Patrol – Sergeant Oscar Chavez, Sergeant Glen Glaser, Mallory Khamchanh, Officer Spencer Smith

National Highway Traffic Safety Administration – Scott McGregor

**OPENING COMMENTS**

Dr. Anthony Albanese called the meeting to order and welcomed the members present. Ms. Nicole Osuna made a motion to approve the June 5<sup>th</sup>, 2019, subcommittee meeting minutes, the motion was seconded by Ms. Ellen Komp. Members in attendance voted to approve the meeting

minutes without change while Dr. Albanese abstained from the vote due to his absence from the previous meeting.

#### Public Comment

No member of the public was present.

#### **OPEN DISCUSSION**

Sergeant Oscar Chavez read an email from International Association of Chiefs of Police Chuck Hayes concerning the subcommittee's recommendation to increase the percentage of Drug Recognition Experts (DRE) and Advanced Roadside Impaired Driving Enforcement (ARIDE) trained officers in California. He questioned what the 25 percent increase would encompass and how that percentage equated to absolute numbers.

Dr. Phillip Drum suggested the group return to this topic when recommendation #3 is being discussed.

Dr. Albanese questioned the recommendations chosen to present to the task force. A discussion of whether reasonable, achievable recommendations are being set forth or best practice recommendations. Mr. Michael Yraceburn stated best practices should be recommended because they are attainable goals with time. The time constraints on achieving these goals should be noted but should not factor in while making a recommendation.

Two members arrived – Chris Murphy and Scott McGregor – and the discussion continued regarding achievable goals.

Dr. Phillip Drum pointed out the timeline is important and there should not be an outside source limiting the ability to make best practice recommendations.

Dr. Albanese restated the goal of the subcommittee meeting was to review past and current recommendations and solidifying the wording of the recommendations to encompass the subcommittee's principles.

Dr. Albanese then gave Dr. Drum the floor during the open discussion to discuss the studies he sent to the chair. Dr. Drum referenced a study in Colorado from 2016 which monitored health concerns from the consumption of marijuana. Dr. Drum recommended wait times following consumption of cannabis be added to recommendation #1. The wait time should be six hours following inhalation and eight hours following oral consumption of 18 mg or more of cannabis, specifically for infrequent users. Another study referenced from Canada's Department of Defense which analyzed chronic marijuana users and recommended a 24 hour wait time.

With the availability of cannabis lounges, there was a discussion of how long lounges would be accountable for cannabis consumers in their establishments. Dr. Albanese stated the time frames may be added to recommendation #1. Mr. Vaughn Gates questioned the ability to control cannabis lounges. The dangers of the combination of drugs and alcohol became a subject discussed. Mr. Joseph McCollough clarified that alcohol and cannabis cannot be consumed and/or sold at the same place based on the current statute. Ms. Ellen Komp questioned if there were studies concerning the effects of consuming alcohol and appropriate wait times. She disputed the studies Dr. Drum referenced based on her personal experiences with smoking cannabis and the duration of the effects she experienced and based on other studies she has read.

There was a discussion on the lasting effects of cannabis consumption on a person’s cognitive and driving abilities after smoking cannabis. California provides tables for metabolism of alcohol based on an individual’s weigh in their drivers license and registration renewal material. None exist for cannabis.

Mr. Yraceburn questioned the depth of supervision the subcommittee will have over the enforcement of these recommendations. Dr. Albanese stated there was a consent amongst committee members but there were disagreements regarding specific time frames for these recommendations.

Ms. Komp voiced her concerns over the consumption of edibles in public rather than smoking cannabis due to its lasting effects on people. Dr. Albanese suggested to excluded specific time frames in these recommendations. Dr. Drum disputed this suggestion based on the information contained in the studies he presented regarding wait times.

Mr. Marcus James asked the committee if there were conversations with other states that have cannabis laws in place already. Mr. Murphy stated the scientific advances do not support requiring Tetrahydrocannabinol (THC) limits which creates a problem. The group then discussed warning labels for other products, including prescribed medication.

#### Public Comment

No member of the public was present.

### **DISCUSSION OF RECOMMENDATION #1**

Recommendation #1: Requiring warning labels, signs, and posters on cannabis containers at point-of-sale describing cannabis specific driving risks along with the risks of mixing cannabis with alcohol and other psychoactive substances.

Dr. Albanese opened the discussion by suggesting the addition of safe transportation and time frames after the consumption of cannabis to these postings. Ms. Harinder Kapur clarified that these warning labels were not going to be put on the containers but there would be signs and posters at point-of-sale locations for cannabis with specific driving risks. There was a discussion regarding where signs would be posted due to the operation of mobile cannabis shops, including party buses.

Mr. Murphy clarified warning labels on prescription drugs were changed to include “operating a vehicle”. After discussion, Dr. Albanese reread a revised recommendation which stated, “Requiring warning labels on containers, signs and posters at point-of-sale or legal use sites describing cannabis specific driving risks along with the risks of mixing cannabis, alcohol and other psychoactive substances.” Ms. Kapur stated California already requires warning labels on cannabis products which encompass driving and operating machinery. There was a discussion on removing the requirement of warning labels in the recommendation.

Ms. Komp stated cannabis dispensaries in San Francisco give out child proof exit bags with cannabis purchases which include handbooks and warnings from the San Francisco Department of Health regarding impairment after consuming cannabis. Ms. Kapur suggested the committee would not directly decide what content would be presented on posters. There was a discussion of what requirements, if any, would be on posters and other signs. The group discussed adding wait times to this recommendation.

Ms. Kapur suggested restating the recommendation to add, “Describing cannabis specific driving risks, the risks of mixing cannabis with alcohol and other psychoactive substances, the time to wait after consuming cannabis before driving, needing a designated driver or alternative transportation option.”

There was a discussion to add warning inserts in exit bags, signs and posters at point-of-sale at consumption sites describing cannabis specific driving risks along with mixing cannabis and alcohol and other psychoactive substances. Alternate transportation options and safe wait time periods prior to driving were discussed. Additionally, “dram shop” statues were discussed where, like alcohol, the alcohol server has an element of responsibility if someone is intoxicated.

Ms. Komp suggested adding methods of measuring impairment before getting on the roadways. The option or availability of electronic applications to assess individuals’ performance would benefit those unsure if they are impaired before leaving a facility and potentially drive impaired.

The members voted on the addition of the suggestions put out to the committee. The majority of subcommittee members declined the addition of alternate transportation to recommendation #1. The addition of appropriate wait time periods after consuming cannabis was declined by the majority of members. The addition of performance assessing products was also declined by the majority of members.

Dr. Albanese restated the group agreed to remove “warning labels”, add warning inserts in exit bags, and add consumption sites to locations where signs and poster were required.

Recommendation #1: Requiring warning inserts in exit bags and signs and posters at point-of-sale or legal-use cannabis consumption sites describing cannabis specific driving risks along with the risks of mixing cannabis with alcohol and other psychoactive substances.

## **DISCUSSION OF RECOMMENDATION #2**

Recommendation #2: All traffic law enforcement officers (including Police & Sheriff Department Deputies) must receive training in ARIDE and annual continuing education on impaired driving.

Mr. James suggested the word “must” be changed to “should” on the recommendation. There was a discussion amongst the members on who should be included in this recommendation. Mr. James also recommended the term traffic dedicated officers. Mr. Gates stated the courses should not be added to the police academies since these classes are advanced and designed for experienced officers.

Mr. Murphy suggested recommendation #2 be reworded to be more like recommendation #3. It would steadily increase the amount of ARIDE trained traffic dedicated officers. There was a discussion on what the ARIDE curriculum includes.

There was discussion on requiring Standardized Field Sobriety Testing (SFST) courses for all officers. Mr. McCollough suggested having one recommendation encompass all law enforcement training. All SFST training should be completed in the academies and ARIDE training required for law enforcement personnel whose primary responsibility is traffic enforcement. Mr. James stressed the importance of training all officers in recognizing the signs of impaired driving.

There was a vote on using the word “must” or “should” for the recommendation. The majority of members present voted to use “must”. The members also voted on a bi-annual continuing education course.

Recommendation #2: All traffic dedicated officers (including Police and Sheriff Department Deputies) must receive training in ARIDE and complete bi-annual continuing education on impaired driving.

### **DISCUSSION OF RECOMMENDATION #3**

Recommendation #3: Increase the statewide percentage of DRE trained traffic enforcement officers to 25 percent over the next five years.

There was continued discussion on adding recommendation #3 to recommendation #2. Mr. Murphy recommended using absolute numbers rather than percentages. Dr. Albanese disagreed to this due to the increase in population of California and the fear that the increase of DRE trained officers would stop once the initial goal was reached. There was also a discussion on incentivizing DRE certifications for officers due to the challenge of retaining active DREs.

Mr. McCollough questioned which entity would be accountable to obtain the goals of the recommendation.

Sergeant Glen Glaser, Statewide DRE Coordinator, called on to answer questions related to the DRE program. According to the California Strategic Highway Safety Plan, a tactic to reduce fatalities and severe injuries to motorists, pedestrians, and bicyclists on all public roads, there would be 100 percent Standardized Field Sobriety Testing (SFST) trained, 50 percent ARIDE trained, and 10 percent DRE trained officers within the CHP. The biggest challenges of increasing DRE trained officers within the state would be the retention of active DREs. On average, 400 DREs are trained each year, and 300 DREs decertify each year. There was a discussion amongst the members on how to increase DREs and retain active DREs within the state.

Ms. Komp suggested increasing the statewide percentage of active DRE trained traffic enforcement officers over the next five years by incentivizing DRE trained officers. There was a discussion of the incentive program occurring in California. The members agreed on a four percent increase in DRE trained officers every year for the next five years and having CHP and OTS accountable for enforcing the recommendation.

Recommendation #3: Increase the statewide percentage of DRE trained traffic enforcement officers four percent every year over the next five years.

### **DISCUSSION OF RECOMMENDATION #4**

Recommendation #4: Law enforcement must use the best available roadside presumptive screening device in the most expedient manner possible for impaired driving investigations. There should be a standardized, comprehensive testing procedure throughout the state to obtain accurate data concerning impaired driving.

There was a discussion on the wording of the recommendation. Mr. Murphy suggested adding “drugs” before impaired driving. Mr. Yraceburn noted “drugs” was not added to the recommendation to encompass drugs and alcohol. Mr. Yraceburn suggested adding “drug and alcohol” in front of impaired driving investigation. There was agreement amongst the members.

Dr. Albanese brought up the recommendation to use recording devices during field sobriety tests. Mr. Yraceburn noted that recommendation was taken off due to the committee's priority list.

There was a discussion of the limitations performing field sobriety tests due to unforeseen circumstances on the roadways.

Dr. Drum had questions regarding where the data would go once it was collected from these investigations. Mr. Murphy was unsure of what type of data would be collected and what would need to be maintained. A discussion of data ensued.

Mr. Murphy noted that the oral fluid devices are screening tools used on the roadside that would assist non-DREs. There would be confirmatory blood tests after positive screening tests. Mr. Murphy also noted the challenges of mandating roadside and lab test results within the state.

Dr. Albanese rephrased the first sentence of the recommendation to state, "Law enforcement must use the best available roadside presumptive screening devices and confirmatory tests in the most expedient manner for possible drug and alcohol impaired driving investigations."

Dr. Albanese rephrased the last end of the recommendation to state, "There should be a standardize, comprehensive testing procedure throughout the state to report accurate data concerning impaired driving."

There was further discussion on the requirements for test procedures and results done by screening and confirmatory tests.

Dr. Albanese stated he would reword the recommendations. The recommendation would include the presumptive screening devices and confirmatory tests in the most expedient manner for drug and alcohol impaired driving investigations.

Recommendation #4: Law enforcement must use the best available roadside presumptive screening devices and confirmatory tests in the most expedient manner possible for drug and alcohol impaired driving investigations. There should be a standardized, comprehensive testing procedure throughout the state to report accurate data concerning impaired driving.

### **FINAL THOUGHTS**

Mr. Murphy stated a toxicologist should be consulted regarding recommendation #4 to make sure the wording is accurate. Dr. Albanese stated Dr. Luke Rodda would be able to assist with the wording of the recommendation.

Dr. Albanese concluded the meeting after thanking the members of the subcommittee.

### **MEETING INFORMATION**

The next subcommittee meeting will be scheduled at a future date. Public posting will be uploaded to the CHP public website.