



**IACP Technical Advisory Panel Meeting Minutes**  
**Omni Hotel, San Diego, California**  
**October 14, 2016**

**TAP members in attendance:**

Jonlee Anderle, Wyoming HSO/WY DRE State Coordinator; Brent Carter, California Highway Patrol; Kyle Clark, Institute of Police Technology and Management/FL DRE State Coordinator; Karl Citek, Pacific University, Oregon; Don Decker, Massachusetts DRE State Coordinator; Darrin Grondel, Washington Traffic Safety Commission; Chuck Hayes, IACP; Michael Iwai, Oregon State Police; Ken Lebrato, Middlesex County, NJ, Prosecutors Office (Retired); Jim Maisano, Norman, OK PD; John Marshall, NHTSA; Cecelia Marquart, Sam Houston State University/TX DRE State Coordinator; Amy Miles, Wisconsin State Laboratory; Matt Myers, Peachtree, GA PD; D'Arcy Smith, RCMP; Robert Ticer, Loveland, CO PD; Joe Turner, Region II DRE Coordinator; Dan Zivkovich, IADLEST/Massachusetts POST.

Not in attendance: Don Alves, Maryland State Police and Joe Abrusci, Morris County, NJ Park Police.

**Guests:**

Mark Brunet, California Highway Patrol; Glenn Glaser, California Highway Patrol/CA DRE State Coordinator; Joey Koher, Huntington, WV PD/WV DRE State Coordinator; Kim Kohlhepp, IACP; Edmund Hedge, Connecticut HSO/CT DRE State Coordinator; Rachel Huggins, Public Safety Canada; Madeleine Levy, Hamilton Police, CN; Steve Johnson, Washington State Liquor & Cannabis Enforcement; Chuck Matson, South Dakota DEC Program; Don Marose, Minnesota State Patrol/MN DRE State Coordinator; Bill O'Leary, NHTSA; Marilyn Powers, Massachusetts Police Training Commission; Keith Williams, NHTSA; Tom Woodward, Maryland State Police/MD DRE State Coordinator.

Chair Robert Ticer called the meeting to order at 9:00 am. He asked that each TAP member, and the guests in attendance introduce themselves. An attendance roster was distributed.

**Review/Approval of Minutes, Chicago, IL:** Chair Ticer directed the member's attention to the 2015 Chicago meeting minutes that were included in their e-mailed meeting materials. He asked if the members had any questions or concerns regarding the minutes. Having none, a motion was made, seconded, and approved to accept the minutes from the 2015 Chicago meeting.

**IACP Updates:** Chuck Hayes provided an update on the following IACP matters:

- **2016 IACP Annual Training Conference on Drugs, Alcohol and Impaired Driving.**  
Over 1,000 people attended the conference held in Denver making it the most attended conference in the 22-year history of the event. On behalf of the IACP, Chuck thanked the Colorado conference committee, the Colorado Department of Transportation, and NHTSA for their support in helping make the event a success. The IACP provided an increased role in the planning, organization and operation of the event. The expanded IACP role, which will continue in the future, will assist the future hosting states. Both Glenn Davis and Carol Gould from Colorado mentioned the support they received from the IACP in helping make their host role much easier. John Marshall from NHTSA also expressed NHTSA's appreciation to the IACP and the State of Colorado for their efforts in making the conference one of the most successful ever. With some new conference incentives, over 80 new DRE Section members were signed-up during the event.

- 2017 IACP Annual Training Conference on Drugs, Alcohol and Impaired Driving.**  
 The location and dates for the 2017 conference were confirmed. The conference will be held at the Gaylord Hotel and Resort in National Harbor, Maryland. The dates will be August 12-14<sup>th</sup> with the annual State Coordinators meeting held on August 11<sup>th</sup>. Maryland DRE State Coordinator Tom Woodward reported that work has already begun on possible after-hour activities and events. Some initial ideas include a dinner cruise and a Washington Nationals baseball game. Tom reported that due to the close proximity to Washington DC, there will be many options available in the area which includes an amusement park and new casino.
- Annual Training Conference speakers and presenters.**  
 The IACP is considering a “Call for Presenters” process for the annual training conference. It would be a similar process used for the Annual IACP Conference workshops and other IACP conferences. Tom Woodward reported that he is hoping to include some new training topics and new presenters for the conference. The goal is to bring in some new presenters and training topics to avoid having the same presenter’s year after year.
- DEC Program Website Upgrade and Launch.**  
 The IACP DEC Program and DRE Section websites are being upgraded. Both will have a new look and will follow the IACP main website design and format. The upgrades should make them easier to navigate and will include new DRE related information and resources. The DRE State Coordinator password protected link is also being upgraded and each state coordinator will be provided with a new password to access the site. It is anticipated that the new website launch will occur in November. Some state coordinators, TAP members, and DRE Section members will be asked to test the sites and provide feedback prior to the final launch.
- DRE Conference App.**  
 A mobile app is being used for the San Diego Annual IACP Conference and Chuck provided instructions on how to download it for those interested. Many meeting attendees had already downloaded the app and had positive comments. A similar app is being considered for the 2017 Annual Training Conference on Drugs, Alcohol and Impaired Driving to be held in Maryland.
- DRE Credentialing Update.**  
 Shirley Mackey continues to process new DRE certification and recertification credentialing requests. However, due to some additional work for the annual IACP Conference, the credentialing and accompanying paperwork is running a little behind normal. As of October 1st, there were 7,882 IACP credentialed DREs.

## Old Business

- IACP International Standards for DEC Program.**  
 Jim Maisano lead a discussion on the most recent proposed revisions and additions to the IACP International Standards for the DEC Program. Each of the proposals had been reviewed and approved prior to the meeting by the TAP Standards Committee. The proposals, which were included in the e-mailed meeting materials included:

**1.1** Eligibility for DRE Certification. The proposal included adding language to clarify who is eligible for certification as a DRE. The proposed language change approved by the Standards Committee was; *In order to be considered for certification as a DRE, a person shall be in the employ, including part-time and unpaid positions, and under the direct control of (1) a public criminal justice agency involved in the enforcement of criminal or traffic safety laws as a credentialed law enforcement officer/employee or (2) an institution involved in providing training services to officers of law enforcement agencies.* A motion was made and passed to approve the new language.

**1.10 and 1.11** Quebec, Canada Field Certifications. Chuck reported that Canada had assisted with travel expenses for two TAP members to attend DRE field certification training held in Quebec that uses professional actors to replicate drug-impaired individuals. Quebec had made this request of TAP several years prior and the final decision was still pending. The Quebec request was based mainly on the costs associated with sending officers to out-of-country field certification training, having the availability of drug-impaired subjects to evaluate locally, and language barriers when sending officers out of the country. With the approval of Chair Ticer, Joe Abrusci and Joe Turner represented TAP and attended the Quebec field certification training. Both provided detailed reports of their observations. Joe Turner provided an overview of his observations which were very favorable to the Quebec operations. He, as did Joe Abrusci in his report, emphasized that Quebec used professional actors highly skilled in their portrayal of a drug-impaired subject. He also emphasized that the Quebec training conducted at their academy was some of the best he has ever observed. After some discussion, the proposed language to the International Standards was voted on and approved. The approved language for Standard 1.10 and 1.11 reads as follows:

**1.10** *To be considered for certification as a DRE, the candidate DRE must satisfactorily complete a minimum of 12 drug influence evaluations, during which the candidate must encounter and identify subjects under the influence of at least three of the drug categories as described in the DRE training. Of the evaluations required for certification, the candidate shall administer a minimum of six evaluations. The candidate may observe the remaining evaluations. The opinion of the candidate regarding drug categories must be supported by forensic testing and/or toxicology. In the case of influence from some drug categories, such as inhalants, it may not be possible to acquire confirming toxicology. In these situations, the concurrence from a certified DRE instructor regarding the drug category will be required. Certification training evaluations will be conducted in accordance with the current procedures and guidelines established in the DEC Program training curricula. All evaluations, administered or observed, and documented for certification purposes, shall be observed, supervised, and reviewed by at least one certified DRE instructor, and shall be performed on subjects suspected of drug impairment.*

**Commentary:** *For a candidate DRE to receive credit for an administered or observed evaluation, the candidate shall independently write his own narrative based on his observations. The evaluation must also be recorded on the candidate's Rolling Log and Progress Log. The evaluation shall include the Face Sheet and a complete narrative identifying the category(ies) of the drug(s) affecting the subject. If the DRE instructor who observed and supervised the candidate's evaluation is not available in person to review and approve the Face Sheet and narrative, the candidate should prepare a copy or scan of the completed Face Sheet and narrative and send it to*

*the DRE instructor who observed the evaluation for review and approval. After the DRE instructor reviews and approves the candidate's evaluation, the DRE instructor should return any documentation, feedback and/or comments to the candidate. (The recommended way will be by e-mail so that a date and time is recorded on the correspondence.) If the DRE instructor will not be available in person to sign the candidate's progress log, they should indicate in their correspondence to the candidate that they authorize another DRE instructor to sign the candidate's progress log on their behalf. The candidate should keep any returned correspondence with the original evaluation in case any future review is necessary for certification purposes.*

**New Language added -**

**1.10.01** *Based upon rigorous training practices unique to the Province of Quebec, Canada and considering language barrier issues relating to limited numbers of English speaking officers, a lack of sufficient numbers of impaired subjects available for observational testing, and international scheduling issues hampering attendance at field certification sites in the United States, an alternate certification process was proposed to the Technical Advisory Panel (TAP). After thorough review of scientific data gleaned from trial studies and site visits by TAP members, the Province of Quebec, Canada, will be allowed to conduct certification training using a modified field certification process. The approved process will be: 1) each candidate DRE will complete a minimum of twelve certification evaluations which will include no less than nine hands-on evaluations, 2) no more than five of the nine evaluations may be conducted by utilizing professional actors, 3) the other four hands-on certification evaluations will be conducted on actual drug impaired subjects, 4) the remaining three evaluations may be in the role as an observer. The simulated evaluations conducted using the professional actors will follow the same guidelines that were utilized in the research and trial studies.*

**1.11** *Prior to completing the certification phase of training, the candidate DRE must demonstrate the ability to draw correct conclusions consistent with observed physiological signs and symptoms. In addition, the conclusions must be supported by forensic testing. No candidate DRE shall be certified as a DRE unless blood, urine, or other appropriate biological samples are obtained and tested from at least nine subjects whom the candidate has examined for certification purposes. These may include subjects for whom the candidate served as the examination recorder or observer as well as those subjects directly evaluated by the candidate DRE. Further, the candidate cannot be certified unless the opinion concerning the drug category or categories affecting the subject is supported by forensic testing analysis 75 percent of the time, or in at least seven of the nine samples submitted for certification purposes. For purposes of this standard, a candidate's opinion is supported if the forensic testing analysis discloses the presence of at least one drug category named by the candidate. In the event the candidate has concluded that three or more categories of drugs are involved, at least two categories must be supported by forensic testing.*

**Commentary:** *Successful and uniform application of this standard places important forensic toxicological requirements on the program. Whenever possible, the DRE instructor should obtain a biological sample to confirm the candidate's opinion during the field certification process. Although the candidate must complete a minimum of 12 drug influence evaluations (Standard 1.10), Standard 1.11 requires only 75 percent of those to include a biological sample. This allows*

*for those cases in which a biological sample is unavailable, such as when a subject refuses or cannot provide one. In those case's when an evaluation is not supported by forensic testing, a certified DRE instructor should ensure that the candidate's opinion was based on observable signs and symptoms consistent with the opinion.*

**New language added to 1.11 -**

*For the alternate certification process approved for the Province of Quebec, Canada, the same standard for conclusions supported by forensic testing will be utilized. The candidate cannot be certified unless the opinion concerning the drug category or categories affecting the drug impaired subjects evaluated are supported by forensic testing analysis 75 percent of the time, or in at least three of the four samples submitted for certification purposes. If additional certification evaluations on actual impaired subjects are needed for the candidate to demonstrate the required 75 percent confirmation, additional evaluations will be conducted on drug impaired subjects. Actors will not be utilized for these evaluations.*

**1.12** *Prior to concluding field certification training, the candidate DRE shall satisfactorily complete an approved Certification Knowledge Examination. The examination shall be administered and the results reviewed by at least two certified DRE instructors. The examination shall only be administered after the candidate has completed not less than six drug influence evaluations with not less than three of the drug influence evaluations being performed by the candidate.*

**New language added** - *There is no remedial test for the Certification Knowledge Examination. If the DRE candidate cannot successfully demonstrate their ability to perform as a DRE to two DRE instructors during the administration of the Certification Knowledge Examination, then the candidate should be removed from the DRE training process.*

**Commentary:** *The Certification Knowledge Examination includes a comprehensive written examination section. As previously described, certification is based on the evaluation by the DRE instructors of the skills and abilities of the candidate DRE rather than on the completion of a specified set of tasks. There is no specific scoring of the Certification Knowledge Examination. The purpose of the Certification Knowledge Examination is to aid the instructors in evaluating the candidate's qualifications, performance, and general abilities to perform as a DRE.*

*Since this is the final step in the certification process, it is important that the candidate be prepared to take the Certification Knowledge Examination. It should be administered when, in the judgment of the reviewing instructor(s), the candidate has demonstrated proficiency in conducting, evaluating, and documenting results of the drug influence evaluation process. After the candidate has completed the Certification Knowledge Examination, the candidate's responses will be reviewed by at least two DRE instructors. The review will be within seven days of the administration of the Certification Knowledge Examination if two DRE instructors are not present during the administration of the examination. The use of two DRE instructors to evaluate the candidate may overcome any bias either for or against a candidate. If the opinions of the initial two DRE instructors are not comparable in their opinion of the candidate's approval or rejection of the Certification Knowledge Examination, a third DRE instructor (which may be the DEC Program state coordinator) will be utilized to review the Certification Knowledge Examination.*

*The majority opinion between the three DRE instructors should be the final opinion of the candidate's approval or rejection of the Certified Knowledge Examination. However, the DEC Program state coordinator will have final review and approval or rejection of the Certification Knowledge Examination.*

*The Certification Knowledge Examination should be an evaluation step near the end of the candidate's certification process after the candidate has had sufficient training time to have a comprehensive understanding of the DRE process, procedures and material.*

**New language added –**

*The Certification Knowledge Examination is to be administered and proctored by a DRE instructor or the DEC Program state coordinator. The Certification Knowledge Examination is not to be administered as a take-home or unsupervised examination.*

*It is difficult to develop a standard due to the different jurisdictions that are involved. The following listed procedures are provided as a suggested guideline or best practice for the administration of the Certification Knowledge Examination. It is understood that testing dates, time and locations may vary from state to state, so the following procedures are not written as strict policy. However, with each state following these guidelines as closely as possible for the administration and review of the Certification Knowledge Examination, the guidelines will support standardization in the administration of the examination in all jurisdictions.*

*The Certification Knowledge Examination should be considered as one examination and all parts should be administered on the same testing day, whenever possible. The Certification Knowledge Examination should be treated and reviewed as a single knowledge examination. It is preferred that the examination be taken in sequence and administered in an area with adequate space for the candidate DRE to take the examination. It is preferred that the location be a secure location, such as an institution or facility used for learning, conducting classes, or testing.*

*Recommendations for the actual administration process are: The Certification Knowledge Examination may be administered in one full part or in two separate parts on the day of testing. Sections 1 and 2 may be administered together to ensure the candidate knows and understands the basic parts of the DRE evaluation and the DRE matrix. After the candidate has completed these two sections, they should be reviewed by monitoring DRE instructors, and if there are any questions about the responses, the DRE instructors may ask the candidate for clarification of a response or to explain items in more detail or depth. After successfully completing those two sections, the candidate may then proceed to examination sections 3, 4, and 5. If the candidate cannot successfully complete sections 1 and/or 2 they should be dismissed from the DRE training.*

*When the candidate has completed all five sections of the Certification Knowledge Examination, either as a single examination or administered in two parts as described above, the candidate's full Certification Knowledge Examination should be reviewed as a whole. The reviewing DRE instructors should review the examination as a totality of the candidate's knowledge and understanding when developing their opinion as to their approval or rejection of the Certification Knowledge Examination. If there are questions about any of the candidate's responses, the DRE*

*instructors may ask the candidate for clarification or to explain items in more detail or depth. This is necessary so that the reviewing DRE instructors fully evaluate the candidate's qualifications, performance, and general abilities to perform as a DRE.*

**Acceptance or Rejection of the Certification Knowledge Examination:**

*If two DRE instructors approve the candidate's Certification Knowledge Examination, then those two DRE instructors should sign the candidate's Progress Log on the appropriate lines.*

*If two DRE instructors reject the candidate's Certification Knowledge Examination, then the candidate should be dismissed from the DRE training. In cases of rejection, the lead DRE instructor, the DRE School course manager and the DEC Program state coordinator should be notified of the potential rejection. This will allow them to address subsequent questions and concerns from the candidate or sponsoring department. The DEC Program state coordinator should then proactively inform the candidate's department of the rejection.*

**3.5 New language added** - *When a DRE has completed all requirements for recertification, the DRE's agency coordinator or a certified DRE instructor shall verify to the appropriate DEC Program coordinator that the minimum recertification requirements have been met by signing the recertification document.*

*These documents are then forwarded for approval to the agency and DEC Program state coordinator and then submitted to IACP. Once received and approved by IACP, the DRE will receive two years of credentialing from the previous date of expiration listed on the DRE's credentialing records.*

**Commentary:** *In the event that information verifying completion of recertification requirements is not received by the IACP prior to the expiration of certification, the IACP will place that DRE's record into a database for expired DRE certifications and consider that DRE inactive and, therefore, a decertified status unless notified otherwise by the DEC Program state coordinator. A decertified DRE wishing to be reinstated must provide verification, forwarded through the agency and DEC Program state coordinator, that all certification requirements enumerated in Section V of the International Standards of the Drug Evaluation and Classification Program have been met.*

- **IACP Recertification and Assurances Form Revision.**

*The IACP DRE Recertification form was updated adding the revised language from Standard 3.4 and the form becomes effective immediately for use.*

- **SFST International Standards Regarding Refresher Training.**

**New language added – 3.4** *It is recommended that all SFST instructors complete a minimum of 8 hours of state-approved refresher/update training at a minimum of every two years from the date of their most recent state refresher/update training as an SFST instructor.*

**Commentary:** *The methods of training are left to the individual state. However, the training should include curriculum revision updates to ensure consistency and accuracy in the delivery of the SFST training. Instructing an SFST course shall not be considered part of the refresher/update training.*

- **IACP Awards and Special Recognitions.**

Chuck reported that all the IACP awards and recognitions are being reviewed by the IACP to ensure consistency and that they follow IACP mission and goals. This will include the review of the annual awards presented by the DRE Section for DRE Emeritus, Ambassador and the Karen Tarney-Bookstaff DRE of the Year Award. **(Action Item)**

- **DRE Drug Category Video Updates.**

Chuck reported communications with a couple of states about updating and/or re-doing some of the currently used DRE training drug category videos. Two states (Arizona and Oregon) have expressed interest in assisting with this project. **(Action Item)**

- **Washington State and Arizona DRE Validation Studies.**

Chuck provided an update on the Washington State University DRE validation study reported on several years prior. It is apparently on hold due to the legalization of marijuana in that state. Therefore, it's status is unknown. Sergeant Daven Byrd with the Arizona DPS reported that the Arizona validation study is progressing along and the preliminary results are very promising. The data is still preliminary and the results are still months from completion. **(Action Item)**

- **Toxicology/Laboratory Testing Resolution.**

Chuck reported that the TAP proposed Highway Safety Committee (HSC) Resolution regarding the recommended laboratory testing for drugs in suspected drugged driving cases is being reviewed by the IACP Resolution committee during the Conference. It is expected that it will be passed and if so, it will be forwarded to the DEC Program State Coordinators and the toxicology groups and organizations in hopes of getting the information out to all responsible parties. **(Action Item)**

- **Mid-Year TAP Meeting.**

Chair Ticer reported on some on-going discussions about holding a mid-year TAP meeting, possibly in conjunction with the other IACP mid-year meetings. Those normally occur in late March or early April. However, this is still under review within the IACP. One issue of concern continues to be funding to attend a second meeting. There was some discussion about trying to conduct a second meeting via a webinar or the Go to Meeting format. **(Action Item)**

- **National Sobriety Testing Resource Center (NSTRC).**

Bill O'Leary from NHTSA reported on a need to review the current DRE national database system for possible improvements and upgrades. NHTSA intends to convene a meeting of data subject matter experts in December to make recommendations for the data system. The goals will be to improve the system, make it more user friendly, and collect more useable and pertinent drugged driving data. **(Action Item)**

- **SFST/ARIDE/DRE Instructor Development Course (IDC) Revisions.**

Bill O'Leary provided an update on the SFST and DRE Instructor Development Course (IDC) curriculum, formally referred to as the "Train-the-Trainer" program. The last time the IDC curricula were updated was in 2006. The NHTSA/IACP curriculum workgroup, working in

conjunction with the Transportation Safety Institute (TSI) in Oklahoma City, have completed the initial drafts of the SFST, DRE Condensed, and DRE IDC curriculum and will pilot test them one more time. Two initial pilots were conducted (Oregon and New York) which provided some worthwhile input and recommendations. If all goes well with the final pilots, the IDC materials will be released in early 2017. **(Action Item)**

- **SFST/ARIDE/DRE Curriculum Updates.**

Bill also reported that the plan at NHTSA is to update and revise the SFST, SFST Refresher, ARIDE and DRE curricula every two years. Work has already begun on the updates and revisions of the 2015 curriculum, planning for a September/October 2017 release. **(Action Item)**

- **Synthetic Cannabinoids (DRE Drug Category).**

Amy Miles and the Scientific Committee were requested to review the synthetic cannabinoids (SC's) to try and determine if they should be included in the Cannabis DRE drug category based on their various impairment signs, symptoms and indicators. To do this, the SC's were charted on the current DRE Matrix to try and determine how they fit into the drug categories. Many of the SC DRE cases are showing HGN, VGN, and indicators not consistent with some of the other drug categories. A discussion ensued regarding the possible need for a separate drug category for synthetic drugs, however, that was not supported. It was recommended that the Scientific Committee continue to review the signs, symptoms and other indicators to determine the most appropriate DRE drug category, instead of creating a new category. It was pointed out the synthetic drugs continue to evolve and frequently change, and the signs, symptoms and indicators may also change. Other concerns were what the toxicology results would show for many of the synthetics, and if the labs would be able to test for the various substances. Amy reminded the members that the request was to determine if the SC's should remain in the DRE Cannabis drug category, or if they should be moved to another category. There were also concerns that the DREs may be getting an incorrect opinion call when calling Cannabis and the lab reported something other than Cannabis.

A recommendation was made to add more information into the DRE curriculum to address the Synthetics being encountered by DREs and the labs. Chair Ticer requested that the Scientific Committee look further at the impairment indicators and work with the Curriculum Committee about adding additional information on the synthetics into the DRE curriculum. **(Action Item)**

#### **NHTSA Updates:**

- **On-Line ARIDE Training Update/Name Change.**

NHTSA confirmed that they are open to suggestions or a name change for the on-line ARIDE. Bill O'Leary asked that while in the field, DRE's let police administrators know that there is on-line training available as there are some agencies that cannot send their officers to the classroom training. NHTSA plans to review the name change suggestions and do not foresee a problem with a name change. John Marshall from NHTSA reported that he has taken the on-line and the classroom ARIDE and sees the difference and the concerns many of the DREs and State Coordinators have. Bill O'Leary advised that the goal is to enhance the program and to get training to those who cannot otherwise attend the classroom training, and understand the need to call a DRE. Therefore, NHTSA asked for the continued support for the on-line training.

Eight on-line ARIDE name change suggestions were received. On-line Drug Impaired Driving and Overview of Drug Impaired Driving (O-DID) were two recommendations receiving the most support. Both will be reviewed by NHTSA. Bill reported if a name revision is accepted, then the SFST proficiency pre-requisite should be removed. This led to a discussion about the SFST proficiency and it being a critical piece of the training. Some members were in favor of expanding it, and others were in favor of removing it. Chair Ticer advised that the on-line version contains good educational information, and that legalized marijuana states and many other groups are asking for some type of drug impairment education. He suggested more discussion about using the on-line version for a public education program. A motion was made and passed to change the name of On-Line ARIDE using one of the recommended titles. **(Action Item)**

- **Review of ARIDE (Classroom and On-Line).**

A NHTSA funded review of both the ARIDE training programs is still on-going. The review will look at the similarities and differences, determine the effectiveness of both programs, and make recommendations for future training. The review completion date is not known. **(Action Item)**

- **NHTSA Highway Safety Grant Funds for DEC Program.**

Written information from NHTSA was provided to the DEC Program State Coordinators and TAP members on what is, and is not allowed to be purchased with federal funds for the DEC Programs. The information was previously provided to the DRE State Coordinators at the annual meeting in Denver. It was recommended that each state coordinator work with their state HSO and verify what they can purchase before the purchase, so that NHTSA is not acting as a referee.

- **Other Discussion Topics.**

John Marshall spoke about the future of the DEC Program and advised that more questions are being asked about the effectiveness of the program. NHTSA anticipates the DEC Program coming more to the forefront, which may result in more funding. He reported that there is total support for the DEC Program from NHTSA. He also addressed the DRE database and the importance of the use of data from the database. NHTSA understands that the data is limited, and when data is extracted from it, there is an asterisk that the data is limited and not complete.

#### **New Business:**

- **State DEC Program Standards Review.**

Chuck Hayes and Jim Maisano reported 14 states (AR, CA, FL, KS, MN, MO, NC, NE, NY, OK, OR, TX, VT, WY) submitted requests to have their enhanced/more stringent DRE standards reviewed by the Standards Committee. This requirement was added to the International Standards of the DEC Program and described in the October 2015 Executive Summary. Jim reported there were no conflicts with the IACP International Standards requiring action. The individual state enhanced/more stringent standards had been provided to the TAP members prior to the meeting for their final review. The 14 requests were approved by TAP. A letter advising of the approval will be sent to each DEC Program State Coordinator. **(Action Item)**

- **TAP Membership Mission and Responsibilities.**

Chuck provided an updated TAP mission and responsibilities document for the members to review. There was some discussion about the DRE Section members serving two positions on TAP which resulted in a suggestion to include the next vice-chair if the current chair is holding two positions. **(Action Item)**

- **TAP Goals.**

The members also received an updated TAP Goals document for their review and approval. The previous document needed updating adding ARIDE, support for DRE National Tracking System, support of consistent toxicology testing, and supporting drugged driving research. A motion was made and passed to accept the revisions. **(Action Item)**

- **DRE Field Certifications – NSA Resolution.**

Chuck reported that the National Sheriff's Association (NSA) passed a resolution to support the sheriffs assisting in locating more DRE field certification training sites around the country. IACP conducted a review of the certification training conducted at the Maricopa County Jail in Phoenix, Arizona and found everything to be order. The hope is that the NSA resolution will assist in locating more facilities like the Maricopa County location.

- **CHP/TREDS Training.**

Lt. Brett Carter from the California Highway Patrol (CHP) reported on the Training Research Education for Driving Safety (TREDS) program that assists in evaluating older drivers in California. Through the training, when an officer contacts an older driver, they can use a nine-question session to evaluate the drivers driving ability. CHP is assisting in training about 9,000 officers. Initially it was 2-hour class but has been reduced to 1-hour. CHP is willing to share the program with other law enforcement agencies. There was some discussion about a piece of this program being added into the impaired driving curriculum or maybe be a DRE in-service subject to assist in identifying possible medical impairment.

- **DITEP Updates.**

Chuck reported that work is underway to update the Drug Impairment Training for Education Professionals (DITEP) training. It has not been updated in at least three years and is in need of updating. Once the draft update is completed, IACP will ask that the Curriculum Committee do a review of the materials. **(Action Item)**

- **Out-of-Country DREs.**

Chuck reported besides DREs in Canada, there are now DREs in China (Hong Kong), Germany, Guam and the United Kingdom. He thanked those states/agencies that have assisted in getting some of the international DREs trained. There is impaired driving training interest in Brazil, and Chuck is working with their law enforcement officials on that. The main concern in training out-of-country DREs continues to be re-certifications. Chuck requested that the IACP be notified of any out-of-country DRE training requests and when out-of-country DREs are trained.

- **Upcoming TAP Appointments/Vacancies.**

Chair Ticer discussed the new TAP appointments and/or reappointments due December 31, 2016. Those positions include the representatives from the Highway Safety Office, Medical, Prosecutor, Toxicologist, and Region II. Chair Ticer requested that letters of interest be submitted prior to November 15, 2016. **(Action Item)**

**Other Discussion Topics:**

- **Reviews of the DEC Program Procedures.**

Bill O'Leary reported that NHTSA is continuing their strong association with IACP and the DEC Program, which is currently in the 3<sup>rd</sup> extension. As the program grows, sometimes issues may surface that may require special attention. In the last couple of years there have been some issues requiring a review by NHTSA and the IACP. Bill reminded everyone of the importance of establishing and maintaining program integrity. He described a recent situation where inappropriate DRE recertification allegations were reported, which required immediate attention. NHTSA foresees a need to have TAP, or some part of TAP, to be able to look at these types of issues to help ensure program integrity whenever needed. In the next contract with the IACP, NHTSA intends to place more emphasis on the ability to conduct periodic reviews the DEC Program and the training procedures to ensure program integrity. To do this, NHTSA and the IACP may request periodic assistance of the TAP Regional DRE Coordinators should it be needed.

- **Instructor Recommendations for Certification.**

Kyle Clark reported on some confusion as to who the two instructors are that recommend the DRE candidate for certification. It was the intention of the International Standards to require that the two instructors were instructors that observed the DRE candidate during the certification process. To help clarify this, it was recommended that TAP adopt revised language in Standard 1.15 to read; *When the DRE candidate has satisfactorily completed all requirements of the classroom and field certification portions of the DRE training, at least two certified DRE instructors who have observed and approved the candidate during field certification evaluations will verify that the candidate meets all requirements for certification as a DRE.* A motion was made and passed to approve the language change to 1.15. **(Action Item)**

- **SFST International Standards.**

Jim Maisano discussed the proposed revisions of the SFST International Standards addressing the language recommending stronger support of the use of wet labs for SFST training addressed Standard 1.2. The proposed language was discussed and a motion made and passed to adopt the new language in the SFST International Standards. **(Action Item)**

- **Criteria for DRE Correct Opinions:**

A question about how and if alcohol (ETOH) can count as a Depressant in a DRE's opinion and be considered as a correct call if no other drug is detected. After some discussion, it was agreed that alcohol be treated as a separate substance and would not count as a CNS depressant confirmation, unless used as an Alcohol Rule out. NHTSA was going to check with the DRE National Tracking System administrators to determine how alcohol is treated in the DRE evaluation opinions.

## **From the floor:**

- **Cannabis Impairment Research.**

Tom Woodward from Maryland reported that he was contacted by a representative of the Center for Forensic Sciences at RTI International in North Carolina. RTI was collaborating with Johns Hopkins University in Baltimore to try and secure an NIH grant to evaluate cannabis impairment. They're hoping to have some DREs involved in the study to help identify impairment in test subjects. Since the study will be conducted in Maryland, they were hoping to get some local DREs involved, which was the main reason they contacted Tom. As part of the research, they also want to try and identify some possible new sobriety tests that might help to identify Cannabis impairment. They are looking for ideas for some possible tests other than the existing SFSTs. Tom asked that the TAP members think about this and to share any ideas they may have with him.

Along with this, Glenn Glaser from California reported on a cooperative project the California Highway Patrol DRE Unit is involved in with the researchers from San Diego State University who are attempting to do the same thing.

- **Videotaping DRE Evaluations.**

Chuck reported receiving an inquiry from a DRE state coordinator about TAP's position on videotaping DRE enforcement evaluations. In the past, TAP has not taken a position on this and has left it up to the individual states. After some discussion, both pro and con, it was decided to continue to leave such decisions up to the individual states. Several members indicated that states should consider that videotaping evaluations could lead to increased requests for more videos which could influence other states.

## **TAP Member Reports:**

**Administrator:** Lt. Brent Carter of the California Highway Patrol reported on his recent appointment by his agency to replace Captain Danny Lamm as the TAP Administrator representative. Captain Lamm has assumed other duties and responsibilities within the department.

**At-Large DRE:** Mike Iwai suggested that as states get more involved in drugged driving issues, and especially with marijuana legalization matters, they may want to reach out to non-profits to help lobby for necessary legislation. One example would be AAA. Mike also reported on his recent participation in a NHTSA impaired driving assessment in North Dakota. Joe Abrusci was unable to attend the meeting and Matt Myers had nothing new to report.

**Highway Safety:** Darrin Grondel, speaking for the Governors Highway Safety Association (GHSA), thanked the TAP members and the IACP for the impaired driving work they do. He reported that the GHSA and the Foundation for Advancing Alcohol Responsibility (FAAR), also known as Responsibility.Org, will once again provide grants to states for drugged driving training. Last year, four states (FL, IL, NV and TX) each received a \$20,000 grant to conduct ARIDE and DRE training. Due to the success of those grants, they will be offered again in 2017. The GHSA and FARR will announce the grants later this year. The IACP will assist in getting the information out to the DEC Program state coordinators. Darrin also reported that during 2010-2014, Washington saw a substantial increase in fatal crashes and a large percentage of

those crashes involved THC. The average THC levels in those crashes were between 7-8 ng THC, but many were also below the 5ng level. Darrin advised that a report on this from Washington State would be coming out soon.

International: D’Arcy Smith from the Royal Canadian Mounted Police reported receiving more interest from other countries about DRE training. He intends to contact the international DREs to determine how they are using their DRE training in their respective countries. He also reported that Canada will be legalizing marijuana next year. Due to the impending legalization, there is an increased demand for DRE training in Canada. Currently there are 503 certified DREs in Canada. They also have approximately 590 that have allowed their certification to lapse. Canada will be trying to get many of those re-certified. Thus far, 118 new DREs have been trained this year. Canadian DREs conducted approximately 1,400 evaluations last year and have conducted over 1,800 thus far this year.

Medical/Optomety: Dr. Don Alves was unable to attend the meeting, and Dr. Karl Citek had no new information to report.

NHTSA: John Marshall once again thanked the TAP members, the TAP committees, and the IACP for their continued efforts with the ARIDE and DEC Program.

Police Training: Kyle Clark reported that the Institute of Police Technology and Management (IPTM) recently developed and started a new 1 day training for marijuana training for police officers. The training focuses on identifying impairment roadside clues. They have also developed a training course on police ambush survival tactics.

POST: Dan Zivkovich suggested that based on today’s conversations dealing with SFST and DRE instructor qualifications and procedures that the TAP members ensure this information gets passed onto their respective POST academies.

Prosecutor: Ken Lebrato reported on a combined Supreme Court case from Minnesota and North Dakota that addressed blood and breath testing (Birchfield vs. North Dakota). He mentioned the case as many states are sometimes unclear when a major court ruling occurs and what impact it may or may not have on them. The case did not change the previous ruling from Missouri (McNeely) that does not give authority to take blood without consent ruling it was too intrusive. The Birchfield case also addressed breath testing and the Court ruled that the breath test did allow for prosecution if the person refuses to give breath test. The case also reinforced that officers cannot force suspects to give blood. Ken also reported that he has officially retired from prosecuting and with his TAP term ending at the end of the year, he will not be seeking reappointment. The members of TAP expressed their gratitude to Ken for his many years of prosecution and his valuable participation with the TAP through the years.

Regional Coordinators:

Region 1 - Jonlee Anderle reported that Region 1 continues to hold regional meetings. The last one was held in May in Seattle, Washington. Most the region state coordinators attended the meeting in person and others participated by conference call. The meeting focused on cooperative efforts between the states and included an update on toxicology testing and a report from the NHTSA Regional Office.

Region 2 - Joe Turner reported that due to a change in the Indiana HSO, he is no longer the Indiana DRE state coordinator. Therefore, he will be stepping down from his regional coordinator duties. He has been assisting other states with their DRE training and will continue to do whenever possible.

Region 3 - Don Decker reminded everyone that the 2017 IACP Annual Training Conference on Alcohol, Drugs and Impaired Driving will be held in National Harbor, Maryland August 12 – 14th. He also reported that many states in his region are keeping a close watch on the pending Canadian court case regarding the admissibility of DRE expert testimony. He also reported that Maryland and West Virginia are assisting Virginia by training officers from that state in DRE. Eight Virginia officers will be attending the West Virginia DRE school in November.

Region 4 – Jim Maisano thanked Texas for providing their state version of the DITEP training to any state that wants to use the training.

Toxicology: Amy Miles reported that many states are exploring roadside oral testing devices and that oral fluid use may be expanding and could possibly be used for field certifications. She reported on an oral testing study conducted in Wisconsin where 115 roadside samples were collected in a 4-month period and then compared to blood samples. The study also include training over 100 officers to do the testing. The results of the study will hopefully be published soon. She also reported on the improved communication between DREs and the toxicology labs. However, additional work is needed in this area and if state coordinators need assistance in this area, she is willing to assist. She also reported that she has heard from various prosecutors around the country about not knowing how to proceed with DRE prosecution and that they feel inadequate in this area.

**TAP Committee Assignments:** Chair Ticer reminded the members of the current sub-committee assignments which include: Curriculum: Chair Kyle Clark, Joe Abrusci, Jonlee Anderle, Don Decker, Mike Iwai, and Matt Myers. Scientific: Chair Amy Miles, Don Alves, Brent Carter, Karl Citek, D’Arcy Smith, and Joe Turner. Standards: Chair Jim Maisano, Darrin Grondel, Ken Lebrato, Cecilia Marquart, John Marshall, and Dan Zivkovich.

Chuck Hayes and any future appointments by the IACP will continue their committee support role. Chair Ticer also advised that there may be adjustments and new appointments to the committees pending any new appointments or re-appointments at the end of the year.

**Adjournment:** A motion was made, seconded and approved to adjourn the meeting at 4:15 pm. The next annual meeting is scheduled for Friday, October 20, 2017 in Philadelphia, PA as part of the IACP Annual Conference.

Last Update: 12/21/16