

# High-Risk Impaired Driver

## State Checklist

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High-risk impaired drivers continue to pose a major public safety threat as they cause a disproportionate number of fatalities on our roadways. With approximately 10,511 impaired driving deaths in 2018, states must do more to address this problem.

### The Problem

More than 20 years ago, Responsibility.org placed a focus on high-risk impaired drivers who present a critical threat on our roadways, Today, this problem persists. These offenders are disproportionately involved in impaired driving deaths.

### Who are they?

Repeat impaired drivers

Drivers with high blood alcohol concentrations (BAC) of .15 or above

Drivers impaired by a combination of substances (polysubstance impaired drivers)

Even as drunk driving has declined steadily over the years, **the number of alcohol-impaired traffic fatalities caused by high-risk impaired drivers has remained relatively unchanged.**

- ✓ Approximately 25% of individuals arrested and 30% of individuals convicted for DUI in the United States are repeat drunk drivers (Warren-Kigenyi and Coleman, 2014).
- ✓ The most frequently recorded BAC among drinking drivers in fatal crashes in 2017 was .16 (NHTSA, 2018).
- ✓ An overwhelming majority of alcohol-impaired traffic fatalities are caused by drivers at high-BAC levels (.15 or above). In 2017, 68% of alcohol-impaired driving fatalities were in crashes in which at least one driver had a BAC of .15 or higher (NHTSA, 2018).
- ✓ Data from the Washington Traffic Safety Commission identifies polysubstance impairment as the most common type of impairment found among drivers involved in fatal crashes.



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Refer to our State Map for data on statistics and laws:

<https://www.responsibility.org/alcohol-statistics/state-map/>



### Priority Solutions:

- Support evidence-based countermeasures;
- Expand implementation of model programs;
- Support innovation in the form of technology, promising practices, and research;
- Provide more training/equipment for each facet of the DUI system.

### Policy Options:

- Promote collaboration and leadership to make impaired driving a priority.**
  - Establish multi-jurisdictional impaired driving task forces with relevant stakeholders
  - Allow non-traditional partners to provide input and offer solutions
  - Conduct cross-training with law enforcement, prosecutors, judges, and toxicologists
  - Identify gaps in the DUI system and develop a strategic plan to address them
- Provide law enforcement with more tools to remove high-risk impaired drivers from the roadway**
  - Increase training opportunities, particularly Advanced Roadside Impaired Driving Enforcement (ARIDE) and the Drug Evaluation and Classification (DEC) Program
  - Utilize oral fluid to test for presence of drugs at roadside; collect data and evaluate the program
  - Allocate funds to impaired driving enforcement initiatives including saturation patrols, dedicated DUI officers, dedicated DUI teams/units, No Refusal weekends, equipment, etc.
  - Establish phlebotomy programs for law enforcement (Already in place in 10 states)
  - Establish electronic warrant systems to streamline the DUI arrest process
- Strengthen ignition interlock programs to increase installation rates and compliance**
  - Encourage program entry (e.g., allowing installation post-arrest and offering day-for-day credit)
  - Ensure that an agency has the authority to and is actively monitoring participants
  - Address offender non-compliance (graduated sanctions, compliance-based removal)
  - Require all convicted DUI offenders to install interlocks
  - Connect interlock program participants with treatment initiatives when possible

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### Policy Options:

- Promote accountability and behavior change to reduce recidivism and save lives**
  - Enhance penalties for high-BAC and polysubstance impaired drivers
  - Mandate screening and assessment for all impaired drivers
  - Identify both substance use and mental health disorders
  - Utilize alcohol and drug monitoring technologies as appropriate
  - Implement intensive supervision programs such as 24/7
  - Expand the use of DUI Courts or add DUI tracks to existing drug courts
  - Implement specialized treatment programs for high-risk offenders
  
- Make modifications to DUI laws to account for court decisions and emerging technologies**
  - Increase lookback period to at least 10 years
  - Implement administrative penalties for individuals who refuse tests
  - Modify implied consent language to allow for emerging technologies (e.g., oral fluid)
  
- Improve state data collection to get a better understanding of the impaired driver population**
  - Mandate the reporting and analysis of fatality, arrest, and conviction data for alcohol, drug, and polysubstance-impaired driving on an annual basis
  - Increase the testing rate of fatally and serious-injured drivers; ideally, alcohol and drug testing would be mandatory in each of these instances

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