



Meeting Minutes

November 6, 2015

Opening Comments – 9:00 Chief Ticer

Introductions

20 of 24 members in attendance, therefore we have a quorum.

Self-Introductions: Name; Agency, Entity or Interest Represented

Work Group Recommendations

Program Management & Strategic Planning – Glenn Davis, chair

- Strong look at primary seat belt legislation. One of fifteen states that is not a primary.
- Statistical category that documents DUI (alcohol, marijuana, drugs)
 - Identified in marijuana gap analysis
- Roadside devices, technology is not there yet
- Experts that can serve as a resource
- Gaps in impaired
- Arrested for DUI, above.
- Suggest – perhaps Judicial

Casias – Comes down to, information we do have isn't going to where it needs to be. This is a bigger challenge, now that the state doesn't do blood testing. Labs don't have an obligation to report other than agency requesting. Suggest labs have to report. Comes down to data collection and assessment of it. Also a data gap is fatal crashes where you don't have a charge because the at fault driver died. The coroners aren't required to report, missing that whole set of data. Not a law enforcement test, not a prosecution test – it is an autopsy test. Where should those testing results have to be reported & what is done with them. Courts aren't going to be able to help you, probation might, but it's not a court issue, it is more of a traffic issue.

Gray – Where does information go now?

Hernandez – It is a stage approach, both on law enforcement and coroner. By the time it gets to marijuana, there have been potentially several tests. Marijuana is not the first one in the stream. If multiple drugs and alcohol, usually stops at alcohol. Regardless if arrest or fatal crash. Gets layered pretty deep. It's not being tested all the way through.

Flavia – Next best source ADDSCODS, already have some fields. A little weak in terms of quality and integrity, but could be bumped up to get there. For lack of a better place in statute, may be a simpler fix. OBH and Judicial changing their system is not easy, but is doable.

Ticer – Breath test does not cost as much as a blood test. If alcohol is in the system, it does not change the charges. If LE has that number, it often times stops there.

Davis – Wanted to thank the legislators for the felony DUI bill last session. We appreciate your time in coming here.

Criminal Justice – Deputy Chief Steve Johnson, chair

- Identify Best Practices to Reduce Refusals
 - Reach out to district attorney groups
 - Reduce 31% rate
 - Setting target goal to reduce to 25% in 12 month period of time
 - What make up of repeat offenders are in the 31% rate?
 - Develop Express Consent card for Officers
 - Make sure consistent on message.
 - Provide Briefing Training utilizing POST
 - Provide information to law enforcement across the state as to what refusal rate is and best practices.
- Best Practices – Reimbursement Costs for Testing Expenses.
 - Benefit for smaller agencies
 - Provide Form Standardization
 - Best practice helping law enforcement become consistent in reimbursement costs for testing. Big benefit to the smaller agencies. Expenses across the state are consistent. Ask for restitution in this matter. The offender upon conviction is then told they have the reimbursement responsibility for that.
- Develop/Determine Best Practices for the Five Nano Grams Issue.
 - Manual
 - Training
 - Colorado & Wyoming Joint Efforts
 - Efforts that are already going on in Wyoming, bring to Colorado and have a more collective approach.
 - What are best practices, standardized approach.
- Outreach on Felony Blood Draw.
 - Position Statement from CDAC
 - Longer term goal.

Prevention – Ellen Anderson, chair

- Enhance formation and running of alternative ride solutions across the state.
 - Many models (i.e. Uber, Wisconsin has program that tax dollars facilitate)
 - How do we get all this information in place to be a resource for communities
 - Repository where someone could call up.
 - Question, how do we do that? One member of the group suggested a study to determine if it is needed. There is a definite need.
 - How do we get the funding? How can we get a cache of information all in one place.
 - Not only the rides, other issues, overnight parking ticket, how do we deal with that?
- Education for young people that have been arrested for MIP,
- Support for already existing community based programs

Senator Steadman – Not a good budget year for new things.

Lemley – The task force doesn't have the resources for a study.

Senator Kefalas – Consider tasking National Conference State Legislators folks to look at what others do. In Fort Collins, doing a good job with alternative rides. Is there a way to compile recommendations?

Anderson – NHTSA did a study on Topsy Taxi came to conclusion, injury and night time crashes were reduced by 15%.

Representative Young – Question to Dr. Timken, what are your thoughts about other sources of funding?

Timken – Wouldn't hurt to explore. Even though studies are somewhat limited, a larger scale study would be worthwhile. To gather good data on a larger basis. Every indication, this sort of thing is a positive tool to add to the repertoire of things we are already doing.

Impaired Driving Intervention and Treatment – Christine Flavia & Sue Parker (co-chairs)

See handout – draft rules

Representative McCann – Encourage restaurant association and alcohol manufacturers and distributors to post signage for public education on felony DUI. General population is not always aware when bills are passed. Looking at ways to ensure message is out so that people understand the consequences.

Communication – Sam Cole, chair

- Let public know the repercussions of the felony DUI.
- So important people do know what can happen if they are convicted of DUI first or fourth offense.
- Commend CSP for participation on our committee

Data & Program Evaluation – Nicole Richmond, chair

- Five different agencies that DUI offenders come into contact throughout the process and none of the agencies communicate well.
- No mechanism to evaluate the data.
- Data driven decisions, do not exist. Policy recommendations are difficult to make without the data.

Legislative Outreach – Fran Lanzer, chair

Legislation Sponsors' Remarks (if in attendance)

Senator Steadman – question, if we had additional resources to direct this problem, where would you prioritize? Reason I ask, member of JBC, spent past two years working on tax policy around marijuana. Author of proposition BB, putting additional money to ARIDE, drug treatment, and screening. Marijuana taxation has created opportunity to invest money in marijuana related issues. Missed opportunities, we don't tax alcohol like we do marijuana. We are one of the lowest in the country for alcohol taxation. Ready for a conversation for taxing alcohol like we do in marijuana. Blending the two together to address the issues caused by alcohol and marijuana.

Ticer – Data is priority.

Casias – Ability for inmates in county jails to be able to have therapy opportunity while they are there.

Senator Steadman r – Putting extra money, started a couple of years ago, not in every county. But it is up to the sheriffs.

Casias – They may be the first time they are sober. Sets the hook, gives them tools for when they come out.

Johnson – Sherrifs talk about it, but part of it is the expense. More the rural jail facilities.

Hernandez – Believe data is important, would put it in prevention. Long term, change culture at a young age where in the future, it is unacceptable to choose to drive impaired.

Senator Steadman – Are there evidence based programs that you are talking about?

Hernandez –Not to the level that I am talking about.

Richmond – Couple of things in public health, when intervention is passive, structure has changed their behavior, best intervention theoretically that you can have. Have to look at the data at the nuances. Different levels of mechanisms that are working. Sometimes you need to have the different mechanisms that are in play. It isn't a one intervention, you have to work down the levels of intervention. Department of Revenue is changing there codes of data sharing. If we are going to have the capacity, need to have the avenues of data sharing available to us. It is not currently.

Anderson – You can Google NHTSA Topsy Taxi, you can find the study that show it works.

Wells – There are evidence based programs. OBH funds secondary prevention. Variety of funding, grant funding, special funding, Persistent Drunk Driving, LEAF – there are different pots of money.

Maroney – If you look at data, that will help to identify more in depth the problems.

Batchelor – Private sector wants to look for solutions, if there is more funding in place, it will explode.

Cole – Testing out options, currently testing out personal breathalyzers. Putting out different tools.

Representative McCann – Provide state funding to groups that work with youth. Will be getting some funding from Proposition BB. Seeing community based programs trying to work harder on marijuana issues. Helping youth understand long term ramifications.

Representative Lawrence – Asked for data previously from law enforcement and schools which was huge, so can appreciate how large a project this. Thanks to CDOT and communication group for educating the public about the changes in law with the felony DUI bill.

Break: 11:25

Reconvene: 11:35

Public Comments

None

Minutes of Previous Meeting

Flavia motion to approve, second by Aylmer. All in favor, motion passes.

Statistics

State Fatality Numbers (CDOT) – Glenn Davis

Data through 11/03/15

- 460 Fatalities in 2015 through 9/30/15
- 427 Fatalities in 2014 through 9/30/14
- Increase of 8%, trending to be over 500 at years end
- 30% were impaired driving

Media Relations & Significant Upcoming Events

Sam Cole, CDOT

- Halloween weekend – DUI enforcement wave.
- City of Denver rolled out their BAT van, made a big splash and a press conference.

Lightning Round Update

Hernandez – IACP conference, discussions are very similar in regards to data. Great discussion on 21st century policing.

Maroney – Met with CDOT last month, awarded a grant to “Cops in Shops” – investigators inside establishments. Combine efforts under the same time as the Heat is On enforcement waves. Compliance checks, cops in shops, check points to get information from minors arrested for DUI. Excited to kick it off, likely will be some press releases on the program. Finished first annual Colorado Alcoholic Beverage Symposium. Brought industry and law enforcement together for training. Makes industry more aware on what is expected from them from the Division of Liquor Enforcement.

Flavia – Make suggestion for Captain Fisher being reassigned, maybe some way we could recognize him for his efforts since he has been with the task force since its inception. Other news, Sue Parker’s health has taken quite a down turn. Thoughts with her.

Aylmer – Great to have legislators here. I think they all learned something.

Casias – Trial with DUID marijuana refusal – CDAC needs to really work with young district attorneys on how to prosecute these.

Amend – Prelude for POST presentation at next meeting. Educational campaign for Colorado school students. We believe that is a population that has been missed. Reaching out to School Resource Officers both urban and rural.

- Change students perception of harm within school
- Increase community and student awareness
- School Resource Officers Aid teachers in building to identify students using
- Targeting 4th, 7th, and 10th graders – that is when they start to drive

At least two bills, POST is legislatively mandated to provide community outreach. It is undefined, and looking to define it.

Hanson – Great to see working on fake IDs. People are also finding look alikes and taking those and that person is going and getting another ID from DMV. Looking at bars having a bar code to run to see if IDs are real.

Tracy – Will keep all of you posted when the 9News story goes out.

Abbott – Moving forward hoping to use Anheuser Busch to help communicate and prevent impaired driving.

Robinette – Not enough to tell them call Uber, it is not safe to leave your car overnight in LoDo.

Alternatives for people, if they are out and they over consume, what do they do with their cars?

Nixon – Congratulations to getting that many legislators in the room together. Gained a lot of ground there and developed legislators. Funding for marijuana, and remind you that prescription drug abuse and driving is a growing problem. Encourage using funding for marijuana both to prescription drugs. Suggest to POST to also include for prescription drug abuse amongst minors (i.e. Skittles parties.)

Richmond – Suggestion for analysis of alternative rides, funding for it. Capstone for graduate students, can do for their capstone for no cost. Analyzing data for 2014 for CDOT Problem Identification report. Looking at factors related to traffic fatalities. If you have anything you would like added, please let her know.

Weltzer – Rides home, in Chicago earlier this week training, students that indicated their company will reimburse without prejudice for getting a ride home.

Anderson – That is exactly the kind of information that the alternative ride coordinator could have.

Involved a study of burn out for LE, specifically DUI officers. Experienced DUI officers burned out in 10 years, due to turnover of Das. Suggestion was to engage top DAs to have that interaction with the baby Das so the officers could listen to. It would make the officers feel valued, and it would be good to hear the Das

Anderson – Toxicologist, a lot of the information coming out today. Recognize, Colorado is a fee for service. Legislature mandated that CBI take over 2014. CSP has to use CBI, no other agency has to.

Everyone else can use other. 2/3 of case load is BAC only. A lot of the information coming out earlier today, \$200

CBI charges \$30 alcohol and \$300 for 9 drug panel. Includes discovery and testimony. Have to be careful of the limitations of data.

Davis – Will invite Captain Fisher back for recognition for his time with the task force.

- 76 agencies, 388 arrests, 245 during Halloween weekend.
- Doing a Border Wars with Wyoming – CSP, CSU, Ft Collins, Loveland PD, and Larimer County. Looking forward to that. – CSU and Wyoming
- Part time regional law enforcement coordinators – pass on to anyone interested.

Lanzer – Federal budget process, congress \$2.5 billion VOCA, in most recent budget proposal was reduced to \$1 billion. Joining with COVA and several other agencies to ask them to oppose that cut and restore funding. Share with professional and personal contacts.

- Candle light vigil – tomorrow evening 4:30-6:30
- Dec 8th – Colorado Gives Day – MADD is participating – encourage you to support MADD or other non-profits.

Motion to adjourn made by Maroney, second by Aylmer.

Adjourn: 12:09 pm

Next Meeting: Friday, January 15, 2015

Colorado Department of Transportation
4201 E. Arkansas Ave.
Auditorium Conference Room
Denver, CO 80222

In attendance:

Chief Bob Ticer, Avon Police Department, Chair

Glenn Davis, Colorado Department of Transportation, Vice Chair

Brenda Hahn, Colorado State Patrol, Secretary

Chief Scott Hernandez, Colorado State Patrol

Captain Jeff Goodwin, Colorado State Patrol

Steve Johnson, Douglas County Sherriff's Office, Colorado Sherriff's of Colorado

Ed Casias, SCAO, Judicial

Cory Amend, POST

Dave Timken, CIDRE

James Hanson, Student Under 21

Amber Gray, Victim/Citizen

Jennifer Tracy, Victim

Leslie Chase, Colorado Department of Transportation

Polly Lawrence, State Representative

Fran Lanzer, MADD Colorado

Senator Nancy Todd

Patrick Maroney, Colorado Department of Revenue, Liquor Enforcement

Representative Beth McCann

Jeff Groff, Colorado Department of Public Health and Environment

Christine Flavia, Colorado Department of Human Services, Office of Behavioral Health

Katie Wells, Colorado Department of Human Services, Office of Behavioral Health

Webster Hendricks, Colorado Department of Human Services, Office of Behavioral Health
Chris Lawson, Coloradans for Safety
Senator John Kefalas
Senator Pat Steadman
Representative Joni Arndt
Paul Aylmer, Colorado Restaurant Association
Ben Whitney, Weld County District Attorney's Office, Colorado District Attorneys Council
Andrew Lemley, New Belgium Brewing
Nicole Richmond, Colorado Department of Public Health and Environment
William Farr, Thornton Police Department
Ronn Nixon
Chris Citron, Community/Victims
Julie Vardiman, Alcohol Monitoring System
Tom Kissler, Smart Start
Kim Abbott, Anheuser Busch
Ashley Brooks-Russell, CU Anschutz – Public Health
Stephen Schmitz, Drive Able
Dan Anderson, CBI, Toxicology
Senator Nancy Todd
Barbara Brodt, MADD
Bob Weltzer, Public
Representative Joann Ginal
Clint Thomason, CBI
Sam Cole, CDOT
Liz Couture, Colorado Safety Association
Ellen Anderson, Retired Pitkin County Sheriff's Office, Aspen Topsy Taxi



21.240.82 LEVEL II FOUR PLUS TREATMENT

- A. Agencies shall apply for a license in order to provide Level II Four Plus treatment and must hold or apply for approval to conduct Level II therapeutic education and or, Level II therapy.
- B. Level II Four Plus services are intended for those individuals with four (4) or more offenses for DUI/DWAI, BUI, or FUI.
- C. All Level II Four Plus services provided shall be driven by the individual's clinical assessment.
- D. Staff assessing and providing Level II Four Plus treatment shall at minimum possess a CAC III or LAC. Staff holding other mental health licenses must also have a minimum of a CAC II, MAC or NCAC II. Staff providing specialized assessment or treatment services must hold current and valid credentials and or licensure in the area of service provision.
- E. Staff providing specialized assessment or treatment services must hold current and valid credentials and or licensure in the area of service provision.
- F. Screening.
 - 1. Agencies shall screen for all of the following, document results and coordinate further services as appropriate.
 - a. Cognitive functioning;
 - b. Trauma;
 - c. Traumatic brain injury;
 - d. Grief and loss;
 - e. Co-occurring mental health issues.
 - 2. Recommended screening instruments can be referenced in *OBH Guidelines for Level II Four Plus Treatment*.
- G. Clinical Assessment(s).
 - 1. Agencies shall consider the results of screenings throughout the initial and ongoing clinical assessment process.
 - 2. Agencies shall utilize validated, evidence based assessment instrument(s) that include those areas identified in 21.190.3 D.
 - 3. In addition to (b) agencies shall utilize an assessment tool specifically designed to address co-occurring mental health issues in this population.
 - 4. Agencies shall continue the assessment throughout the course of treatment and shall be reviewed and updated when there is a change in the person's level of care or functioning, or, at minimum, every six months.
 - 5. Agencies shall use methods and procedures to assess that are developmentally and age appropriate, culturally responsive, and conducted in the individual's preferred language and/or mode of communication.
 - 6. Recommended assessment instruments can be referenced in *OBH Guidelines for Level II Four Plus Treatment*.



H. Provision of Level II Four Plus services shall:

1. Be determined by the results of the screenings and clinical assessment
2. Consist of not less than eighteen (18) months of attendance which includes a minimum of one-hundred eighty (180) hours of treatment.
3. Be a combination of treatment strategies that include, but not limited to:
 - a. Individual counseling;
 - b. Group therapy, unless clinically contraindicated;
 - c. Family /other supportive adults therapy, if applicable;
 - d. Interlock counseling, if the individual has an ignition interlock installed;
 - e. DUI Level II therapy, if applicable;
 - f. Education, if applicable;
 - g. Medication assisted treatment, if applicable;
 - h. Residential treatment, if applicable;
 - i. Other treatment as indicated by the initial and ongoing clinical assessment;
4. Recommended models of treatment can be referenced in *OBH Guidelines for Level II Four Plus Treatment*.
5. In addition to compliance with section 21.190.4 service planning and reviews, agencies providing Level II Four Plus treatment shall conduct service plan reviews at a minimum of every sixty (60) days in collaboration with supervising probation officers.
6. Agencies providing Level II Four Plus treatment shall provide case management activities, where applicable, to ensure the coordination of client services and needs, and the continuity of care, with other services.
7. Consideration shall be given to clients' needs for aftercare and peer recovery support services.

I. Testing and Monitoring

1. All clients shall be regularly tested for alcohol and drug use. Agency drug and alcohol toxicology collection shall be observed by trained staff. Testing and sharing of results shall be coordinated with probation.
2. Monitoring may include the following:
 - a. Urinalysis;
 - b. Breath analysis;
 - c. Continuous alcohol monitoring;
 - d. Mobile/remote breath testing;
 - e. Direct and indirect biomarker testing;
 - f. Drug and other testing as appropriate.



CTFDID: Data and Evaluation Subcommittee

Members:

Janet Allbee (CSP)

Lisa Barker (CDPHE)

Carolyn Berry (POST)

Susan Colling (CSC)

Jeff Groff (CDPHE)

Brenda Hahn (CSP)

Benjamin Mitchell (CDOR)

Jack Reed (DCJ)

Nicole Richmond (CDPHE)

Ashley Brooks-Russell (CSPH)

Dr. David Timken (CIDRE)

Jackie Urioste (CDHS)

Ed Wood (DUID Victim's Voices)

Objective

- To answer the following evaluation questions:
 - What is the impairing substance and prevalence in DUI/DUID cases of.....**
 - a) Impaired drivers cited by law enforcement for DUI/DUID?
 - b) Impaired drivers involved in a motor vehicle crash resulting in no injury?
 - c) Impaired drivers involved in a motor vehicle crash resulting in an injury?
 - d) Impaired drivers involved in a motor vehicle crash resulting in a fatality?

Process

1. **RESEARCH** - The DUI/DUID process from stop to disposition.
2. **OUTLINE** - The DUI/DUID Case Lifespan.
3. **EVALUATE** - The current sources of critical data points.
4. **IDENTIFY** – The gaps in data collection.
5. **ASSESS** - The practical and realistic solutions.
6. **RECOMMEND** – The specific changes to current processes.
7. **COLLECT** - The relevant data in one centralized location.
8. **SHARE** – The data with stakeholders and partners.
9. **EDUCATE** – The public and elected officials.

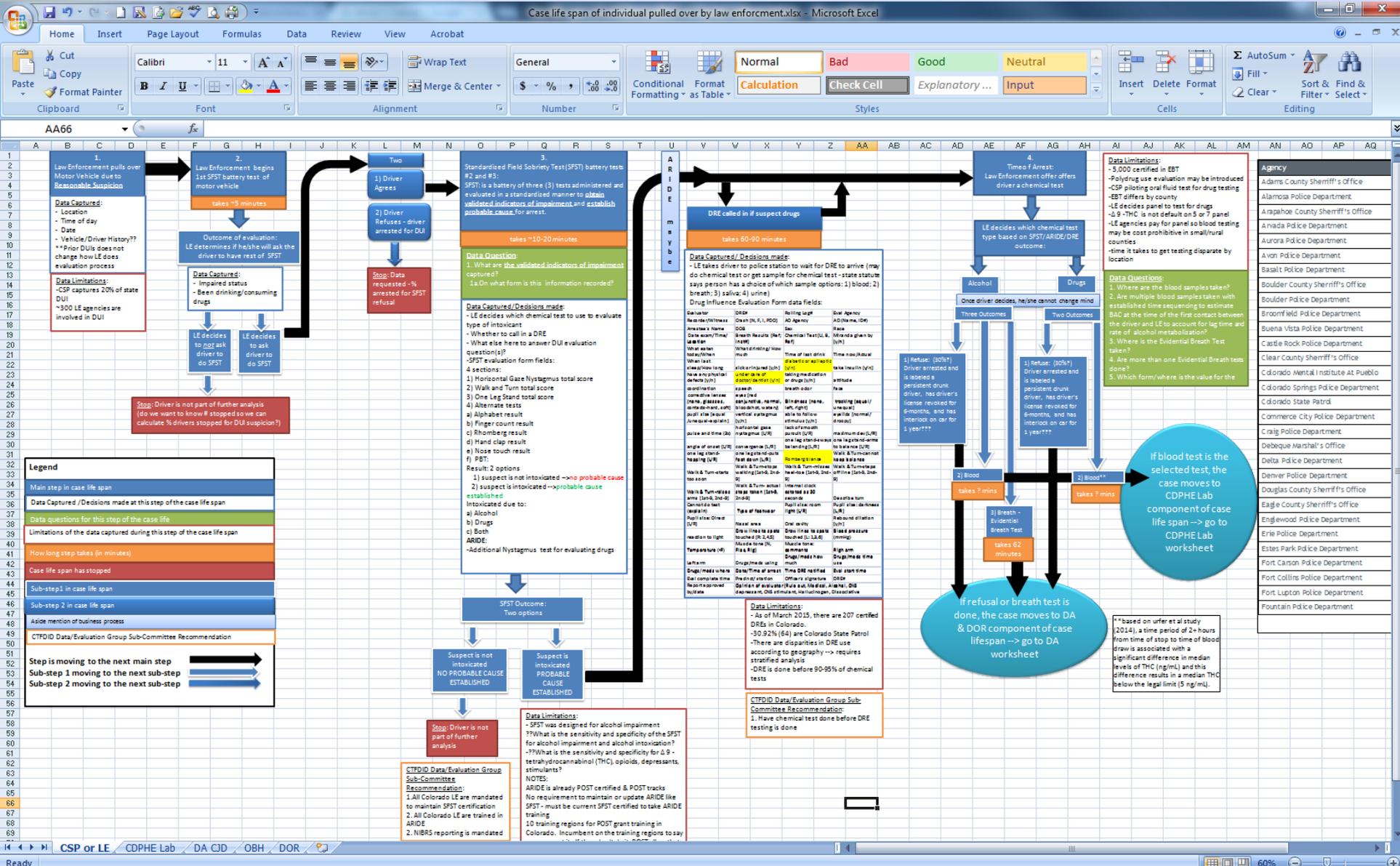
Complexity

- Colorado's DUI/DUID process is highly complex and requires a numerous state agencies and public engagement to reduce drunk and impaired driving in our state.
 - Law Enforcement
 - State Judicial
 - Department of Revenue
 - Department of Transportation
 - Office of Behavioral Health
 - Department of Health
 - Elected Officials
 - Colorado Citizens
 - Private Entities
 - Other State and Federal Partners

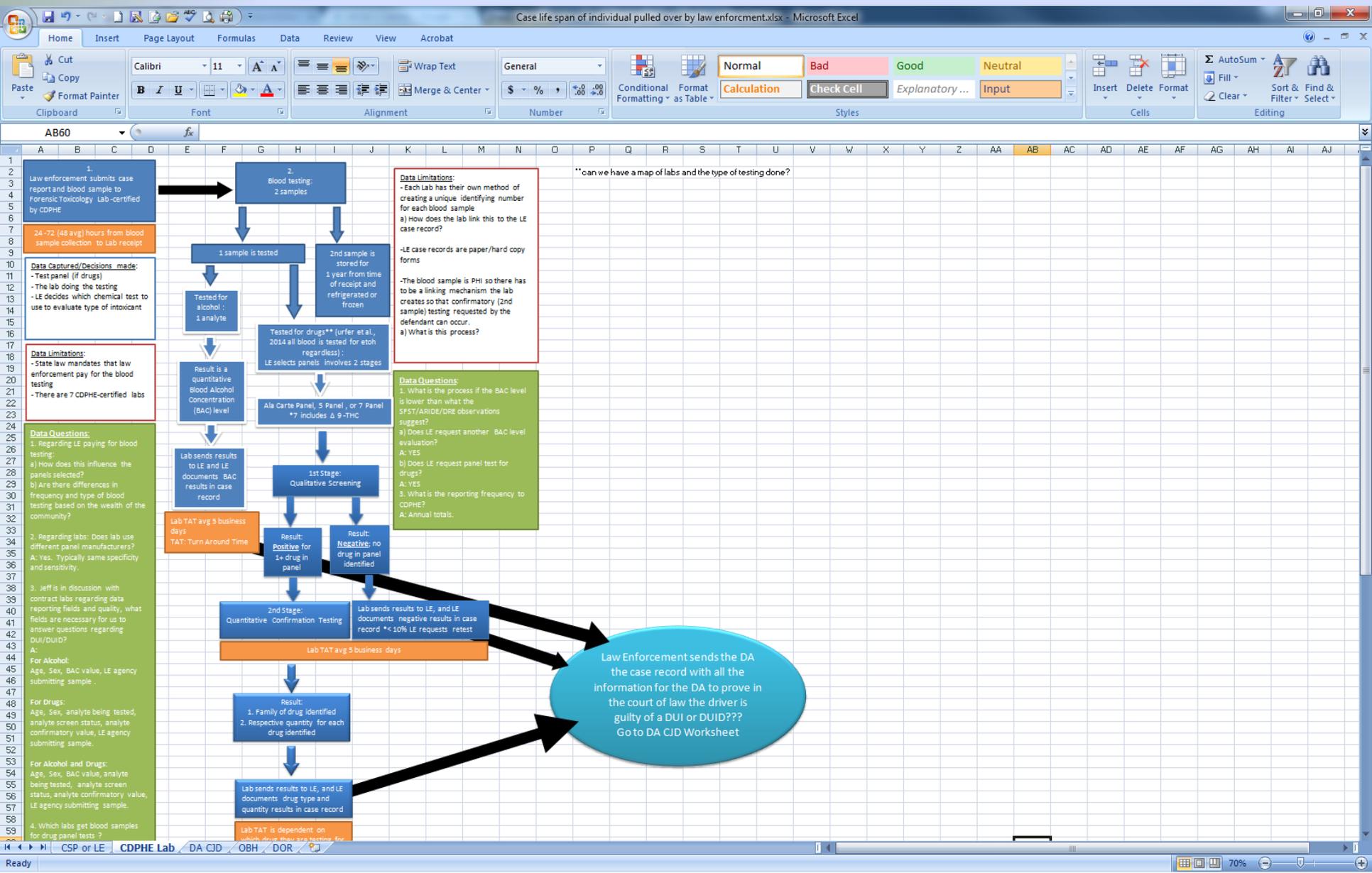
Challenges

- 5 different state agencies involved in the process for 1 case
- Data challenges
 - Incompatible and/or outdated databases that are compatible or able to communicate with one another.
 - Outdated business practices
 - BAC levels sent to probation by law enforcement
 - Paper (faxes, copies, written reports)
 - Unique identification numbers for each case within agencies not shared across agencies
 - Example: Different unique identifiers used by law enforcement, courts, department of revenue, etc.
 - Jurisdiction of who “owns” the data
 - Does driver own data on laboratory work?
 - Does driver own data on driver control records?
 - Does the state agency own the records?
 - Does the federal government own the records?

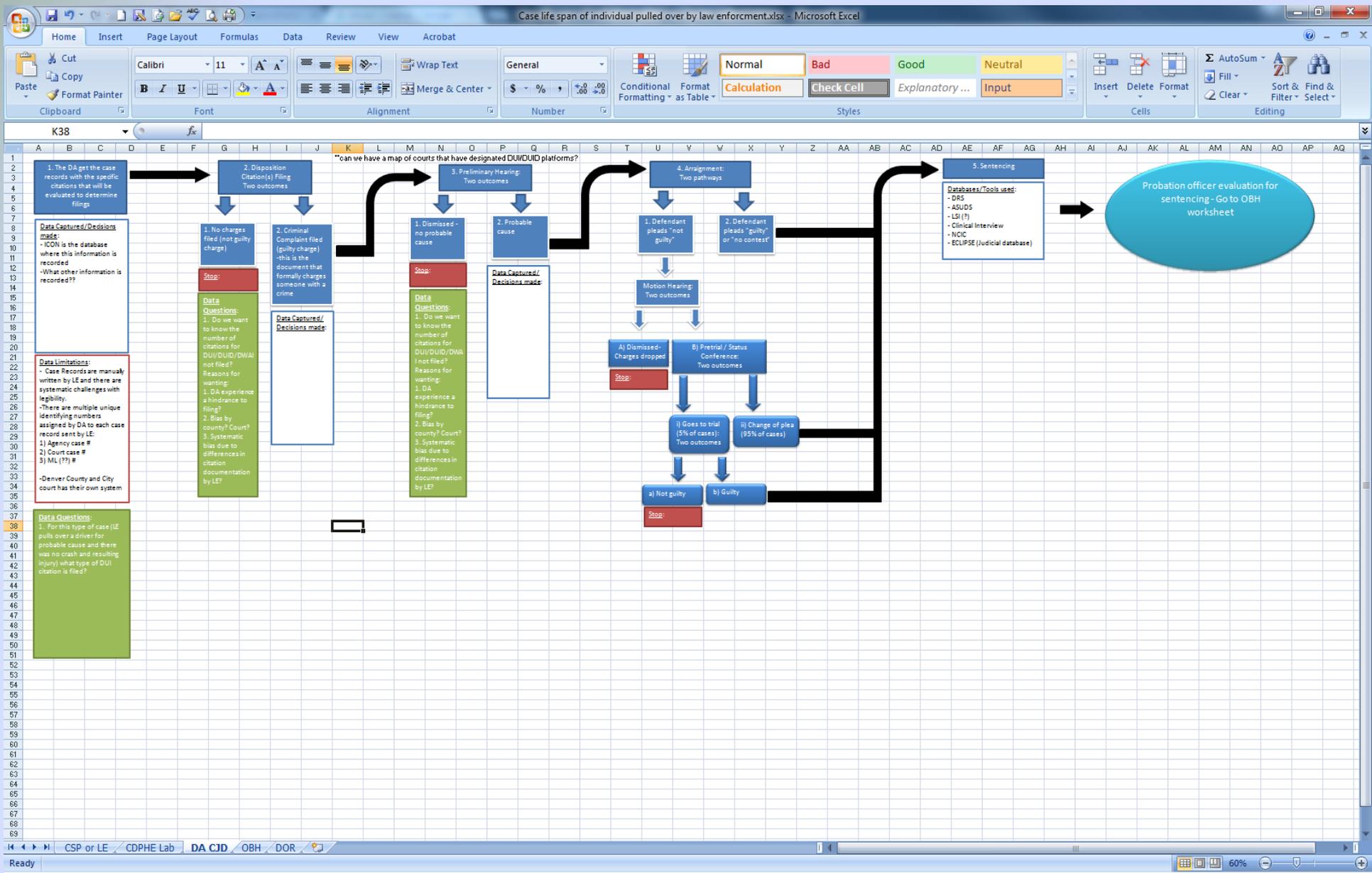
Law Enforcement: Business steps to determine probable cause for DUI/DUID



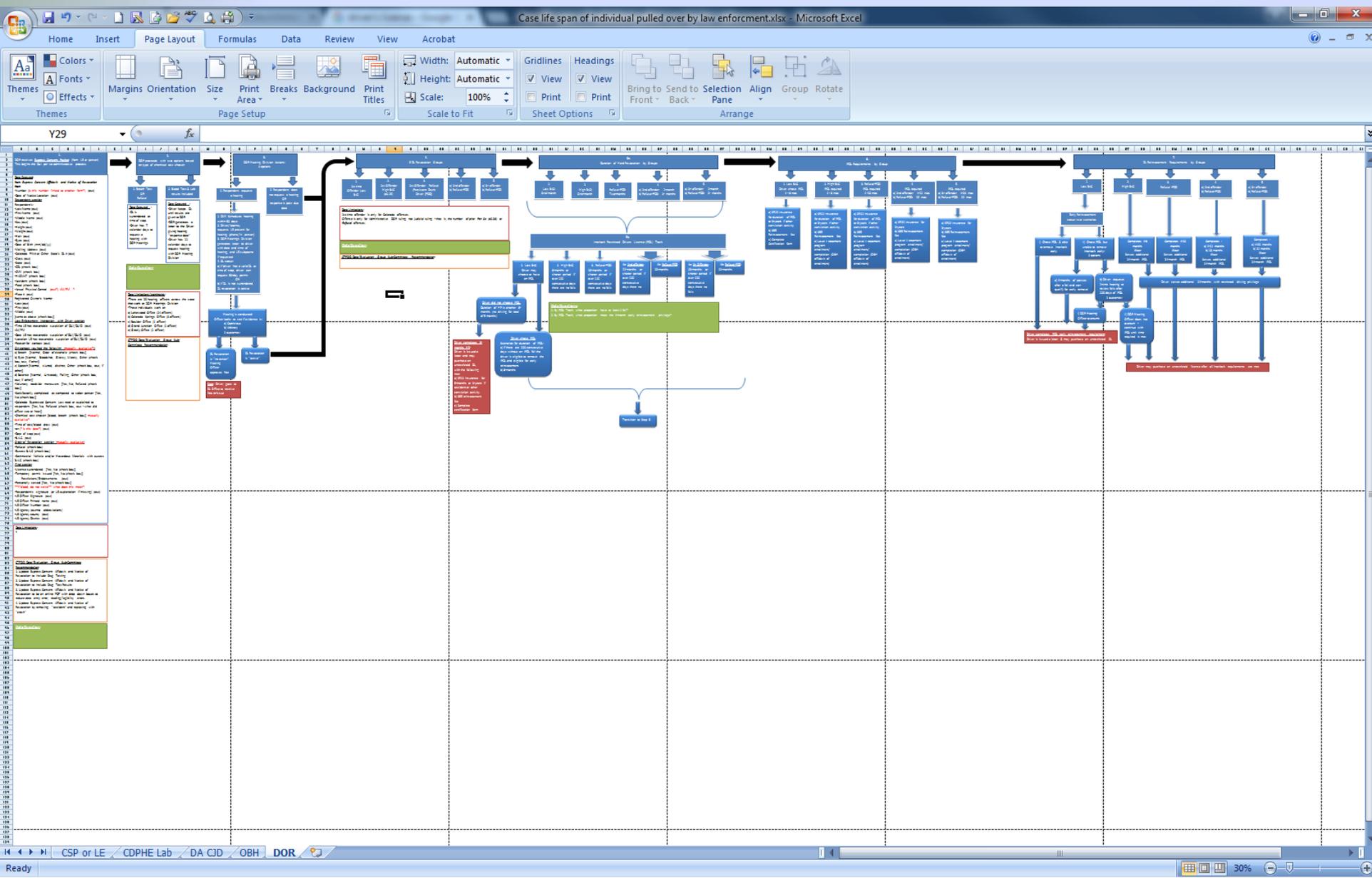
Forensic Toxicology Laboratory Testing: Business steps to quantify sources of impairment



Colorado Judicial Court: Business steps to establish determination and treatment



CDOR, DMV, Driver Control, Interlock Program: Business steps of administrative license restrictions



Office of Behavioral Health: Business steps for DUI/DUID treatment

Case life span of individual pulled over by law enforcement.xlsx - Microsoft Excel

Home Insert Page Layout Formulas Data Review View Acrobat

Width: Automatic Height: Automatic Scale: 100% Gridlines: View Headings: View Print: Print Sheet Options: Bring to Front Send to Back Selection Pane Align Group Rotate Arrange

U50

1 Determination of Education Treatment Placement Level for DWI/DUI offenses

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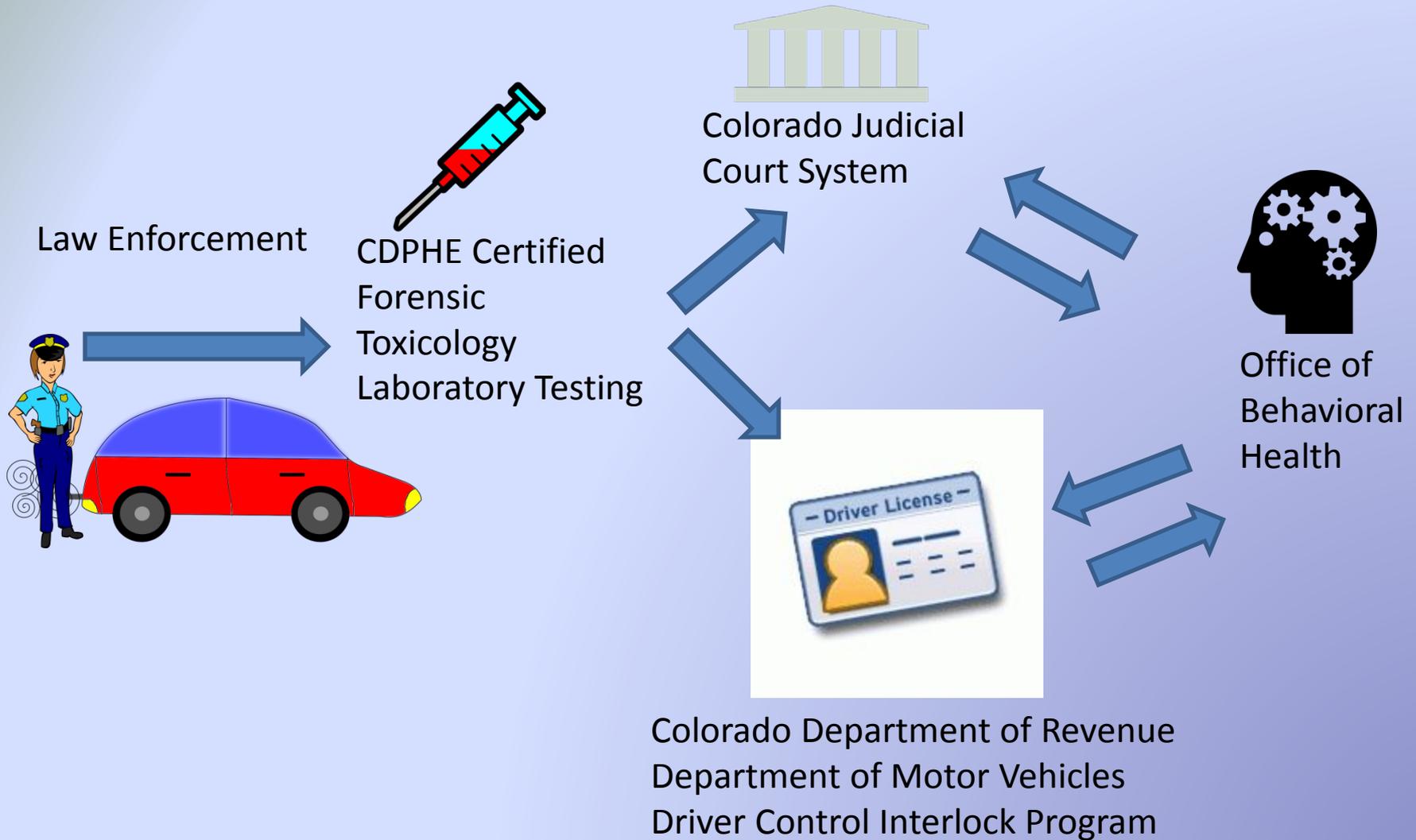
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Case Lifespan Summary



4 - Recommendations

1. Colorado Law Enforcement Officers trained and certified on ARIDE (roadside maneuvers).
2. All DUI/DUID citations issued by Colorado Law Enforcement Officers are recorded and later extracted for analysis from either the NIBRS (National Incident Reporting System) or through the Colorado Judicial System.
3. Probation enters a total of 6 additional fields of information into the TMS-ADDSCODS system when assigning the treatment level.
4. Establish a common working analytical file that is updated from the TMS-ADDSCODS system and either the NIBRS or Judicial system on an ongoing basis that can be accessed by stakeholders.

Problem Identification #1

1. Not all law enforcement officers are trained and certified on ARIDE (roadside maneuvers)
2. NHTSA requires officers are currently certified in SFST prior to being certified in ARIDE
3. NHTSA only requires a one-time certification in ARIDE.
4. SFST certification requires recertification every two-years.

Recommendation #1

1. Colorado Law Enforcement Officers who perform DUI/DUID enforcement be certified in ARIDE maneuvers.

Problem Identification #2

1. NIBRS (National Incident Based Reporting System) is the federal database used by the Colorado Bureau of Investigation (CBI) to submit citation information.
2. NIBRS tracks the citations issued by law enforcement. Citations issued do not necessarily equate to the charges filed by the District Attorney.
3. Data entered into NIBRS may be delayed.
4. Citation information is entered into each case filing by the courts.
5. Extraction of the citation information may be an alternative option to using NIBRS.
6. Extraction of the citation information may have to come from 2-3 different databases within Colorado's Judicial systems.

Recommendation #2

1. All DUI/DUID citations issued by law enforcement officers are entered consistently into a centralized database maintained by either the Colorado Bureau of Investigation or the State Judicial system.
2. Extracts of those citations are downloaded on a consistent basis into a common working analytical file to be accessed by stakeholders.
3. Personal identifiers are not needed for this data extract.

Problem Identification #3

1. Forensic Toxicology laboratory results are provided to the requesting law enforcement agency directly. These results are provided to the District Attorney and to DOR.
2. Results are not recorded by either the DA or DOR and cannot be easily tracked as each case is “silo-ed”.
3. Systems used to track individuals are either outdated or are not able to communicate with each other. There is no single or centralized database for DUI/DUID offenders.
4. All DUI/DUID defendants are required by Probation to undergo some form of treatment. The treatment level assigned by Probation is entered into the TMS-ADDSCODS system.
5. Probation officers receive the laboratory results as part of the case file.
6. OBH Treatment Providers report back to both Probation and to DOR the status of the treatment through the TMS-ADDSCODS system.
(completion or failure to complete)

Recommendation #3

1. Probation officers receive the critical information needed to assess the data gaps identified by the ITFDID.
2. 6 Additional fields are need to be added to the TMS-ADDSCODS database used by Probation Officers to include:
 1. Time of Arrest (found of police report)
 2. Time of sample collection (found on lab report)
 3. Type of sample collected, eg. Blood, urine, saliva (found on lab report)
 4. Analyte(s) found in sample (found on lab report)
 5. Analyte(s) measured result (found on lab report)
 6. Number of prior offenses, if any.
3. OBH has the ability to add these fields to the current database.
4. Extracts of these data points are downloaded on a consistent basis into a common working analytical file to be accessed by stakeholders.
5. Personal identifiers are not needed for this data extract.

Problem Identification #4

1. Lack of State database capacity
 - The state of Colorado currently does not have the capacity to answer comprehensive public health and public safety questions surrounding DUI/DUID prevalence rates.
2. Lack of efficient means to capture and analyze critical data in one central location.
 - To attain the evaluation goals, the state will need to link information from each agency for each case.

Recommendation #4

1. Create a linked analytical file that is updated on an ongoing basis.
2. Extract data from either the NIBRS or State Judicial systems and TMS-ADDSCODS databases.
3. Removal of personal identifying information.
4. Establish data sharing and publication guidelines.
5. Access to the data extracts by stakeholders for analysis.
6. Ongoing OIT support and funding to maintain the data will be required.

ITFDID Data Committee next steps

1. Partner with the State Probation Office and Judicial staff.
2. Outline data schema for an enhanced OBH database. (TMS-ADDSCODS)
3. Partner with OIT officials to develop and maintain the shared analytical file.
4. Create data usage guidelines and recommendations.
5. Identify initial and potential ongoing costs.

Conclusion

1. Currently, the data to help drive educational outreach and policy decisions is not being effectively captured and analyzed.
2. The TFDID Data Committee recognizes that there are many other valuable data points that would be useful, so additional recommendations will be likely moving forward.
3. The 4 recommendations being proposed are a great start for Colorado and will serve as the foundation for further study and future recommendations.

Thank You

Questions?