



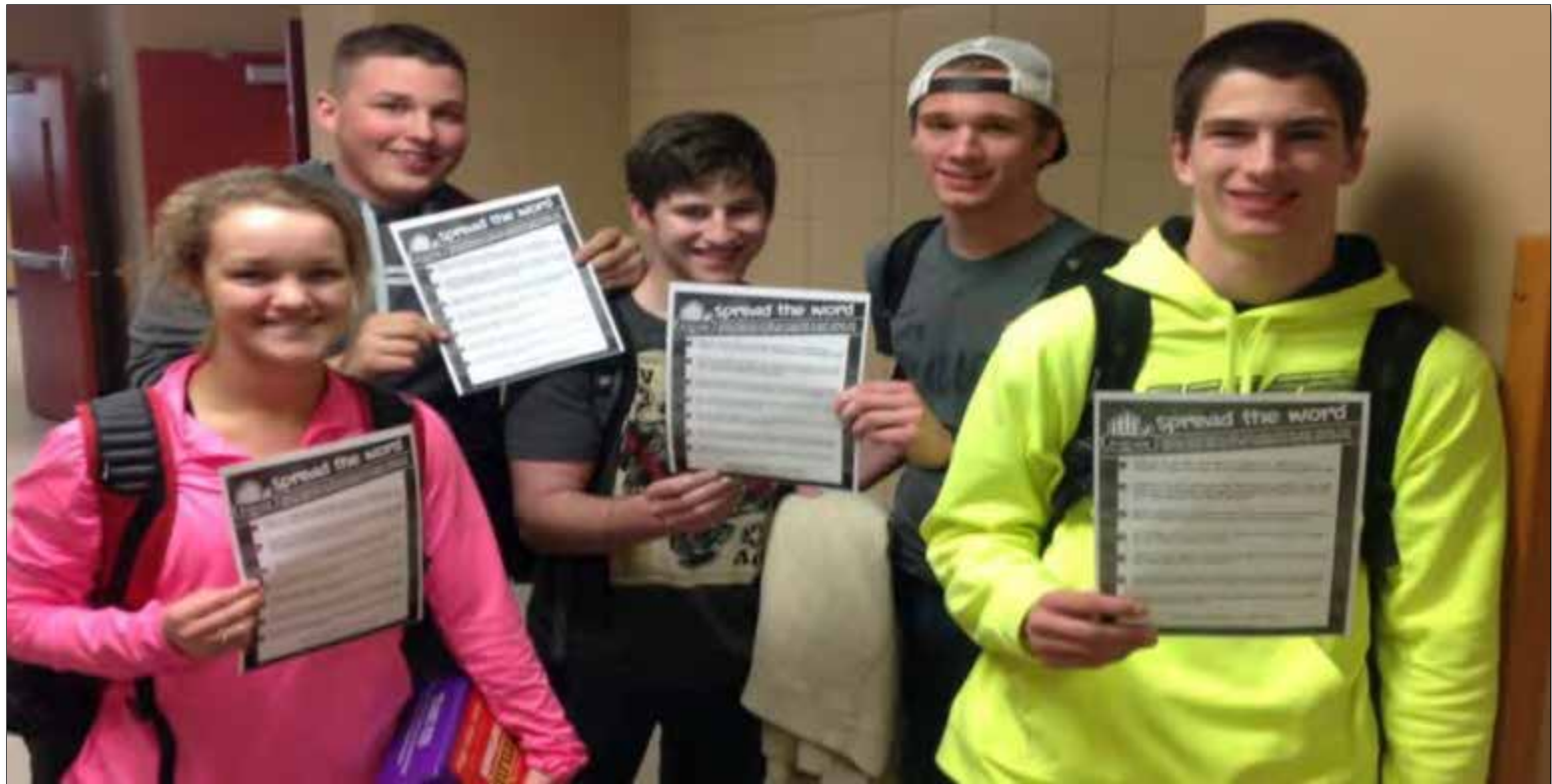
TOWARD ZERO DEATHS  
Because your life counts

**Welcome**  
**West Central Minnesota**  
**Toward Zero Deaths**  
**Workshop**

*May 12, 2015*

# Mission

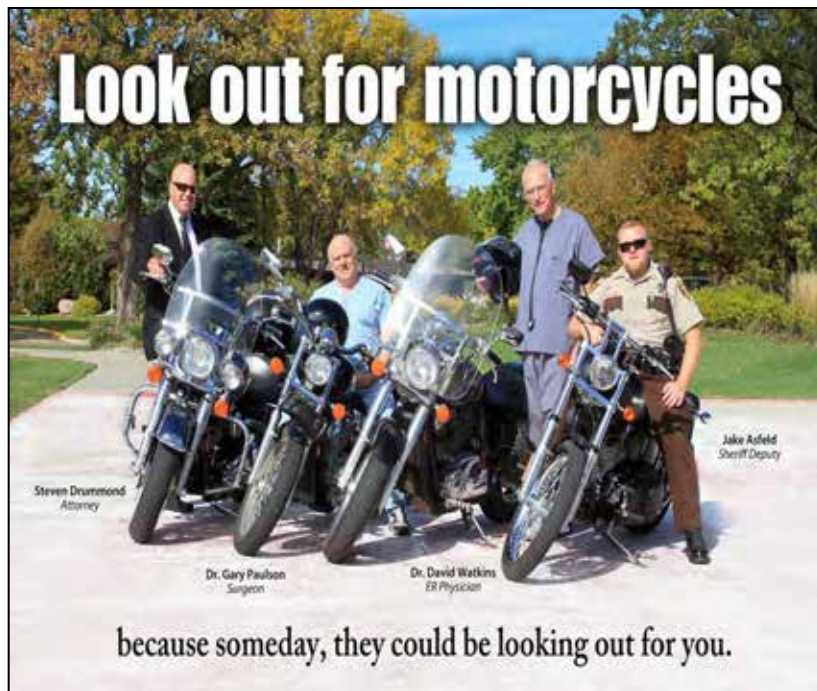
To move West Central Minnesota toward zero deaths on our roads using education, enforcement, engineering and emergency medical & trauma services.



# TZD Cornerstone

~~Five~~ Four “E” approach:

- Enforcement
- Engineering
- Education & Outreach
- Emergency Medical & Trauma Services
- **Everyone Else!**



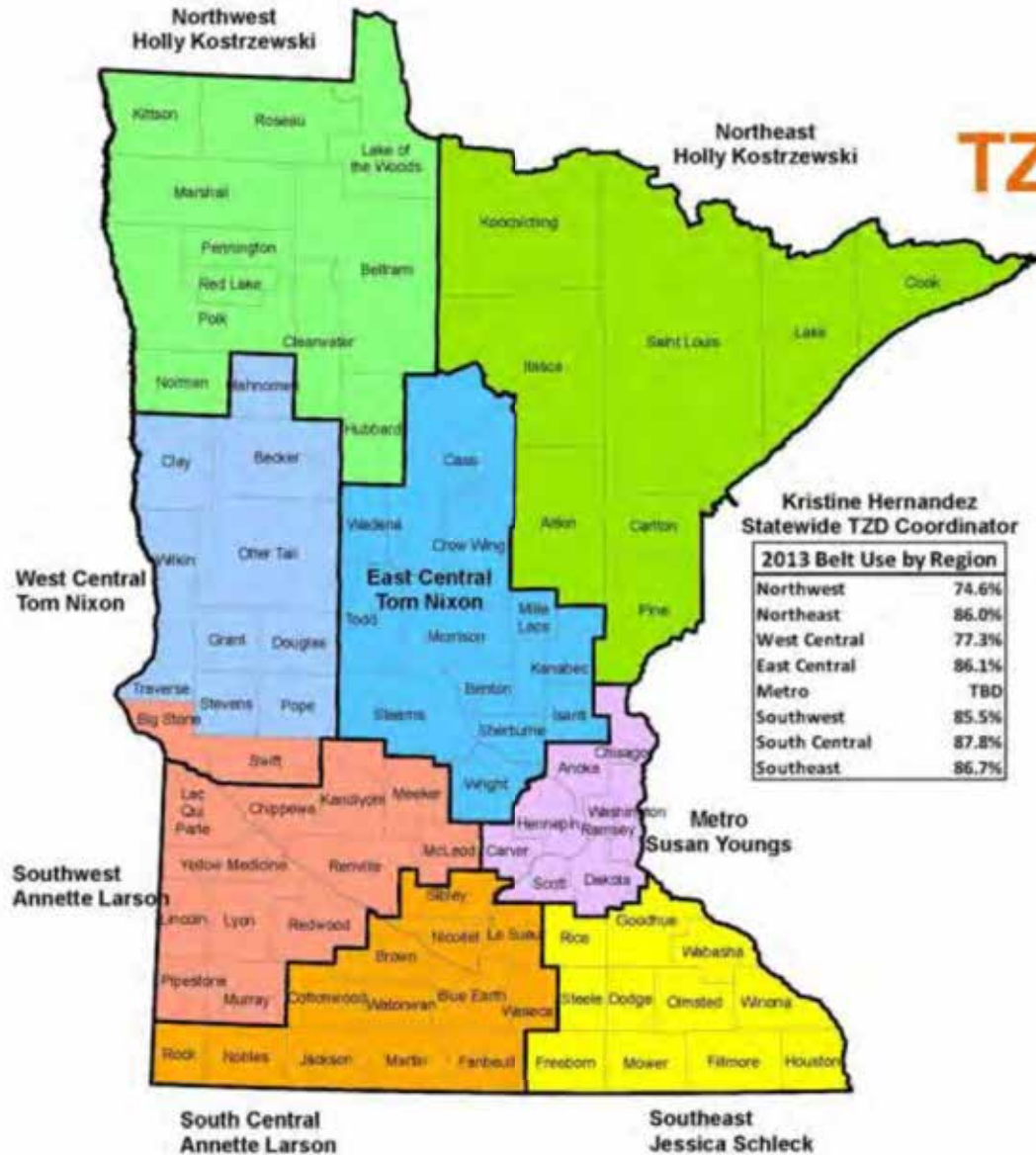
# Year-to-Date Traffic-Related Deaths



As of May 11, 2015, there were **113** traffic-related deaths on Minnesota roads, compared to **96** deaths at this time last year.



# TZD Regions



# What Have We Done Regionally?



*Tom Nixon,  
West Central Minnesota  
Toward Zero Deaths  
Regional Coordinator*



## 2014-15 West Central Minnesota TZD Safe Roads Coalitions

- ***Douglas***
- ***Otter Tail***
- ***Stevens/Traverse/Grant***
- ***Clay***



# Wifi Password to download the e-packet

**Password: 6655**

**Room: 0**

# Clay County TZD



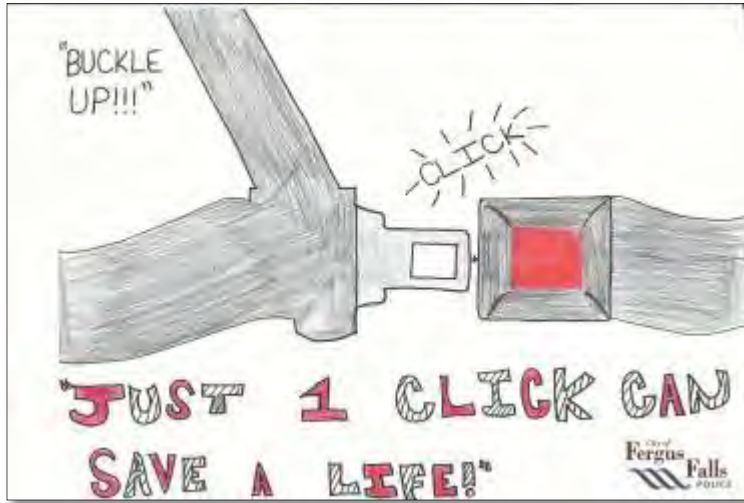


**TOWARD  
ZERO  
DEATHS**



**Moorhead  
Every 15 Minutes**

# Otter Tail County Safe Communities







## Otter Tail





# Stevens Traverse Grant TZD





# Douglas County Safe Communities





# DWI Kick Off News Conference



# Distracted Driving



## Follow us on Twitter and Facebook!



- Follow us on Twitter: @MNTZD



- Like us on Facebook: MNTZD

# Goal: Zero Deaths



# Minnesota's Traffic Safety Culture

*Kristine  
Hernandez,  
Minnesota  
Toward  
Zero Deaths  
Program  
Coordinator*







TOWARD ZERO DEATHS  
Because your life counts

# Exploring Minnesota's Traffic Safety Culture

*Kristine Hernandez*  
*Minnesota Toward Zero Deaths Program Coordinator*

*May 1, 2015*

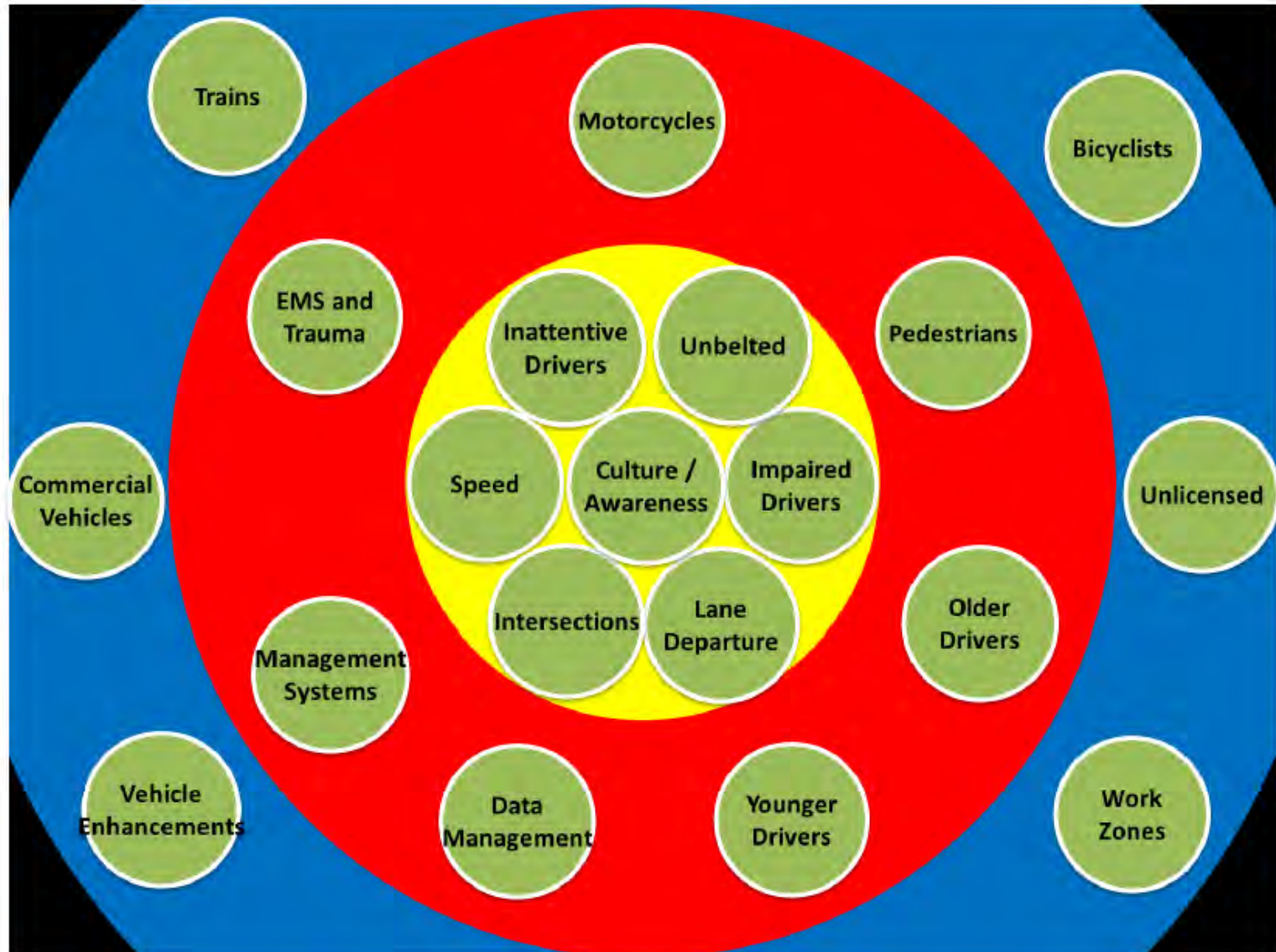
## What is *Traffic Safety Culture*?

*Shared:*

- Values
- Beliefs
- Norms
- Attitudes

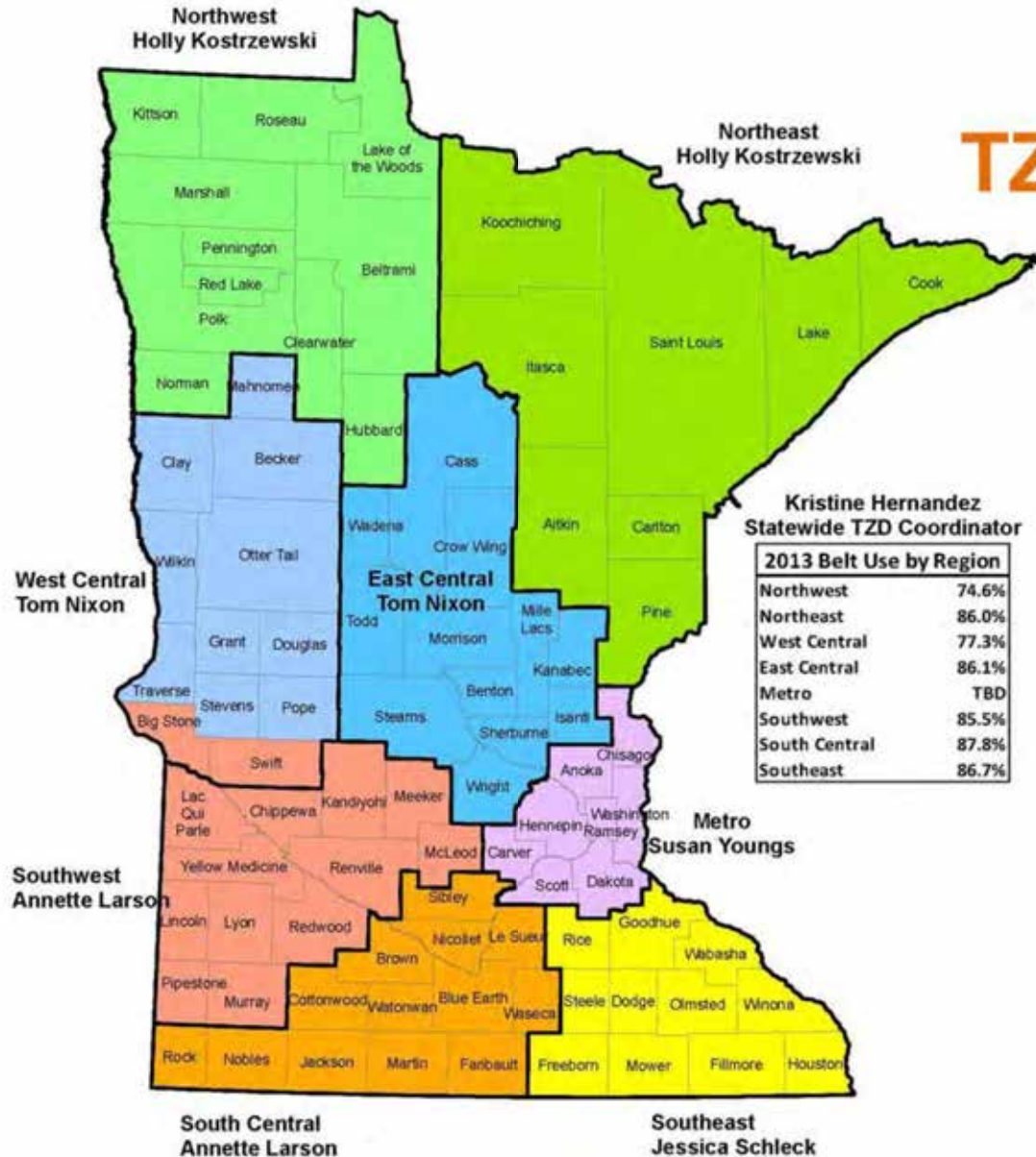


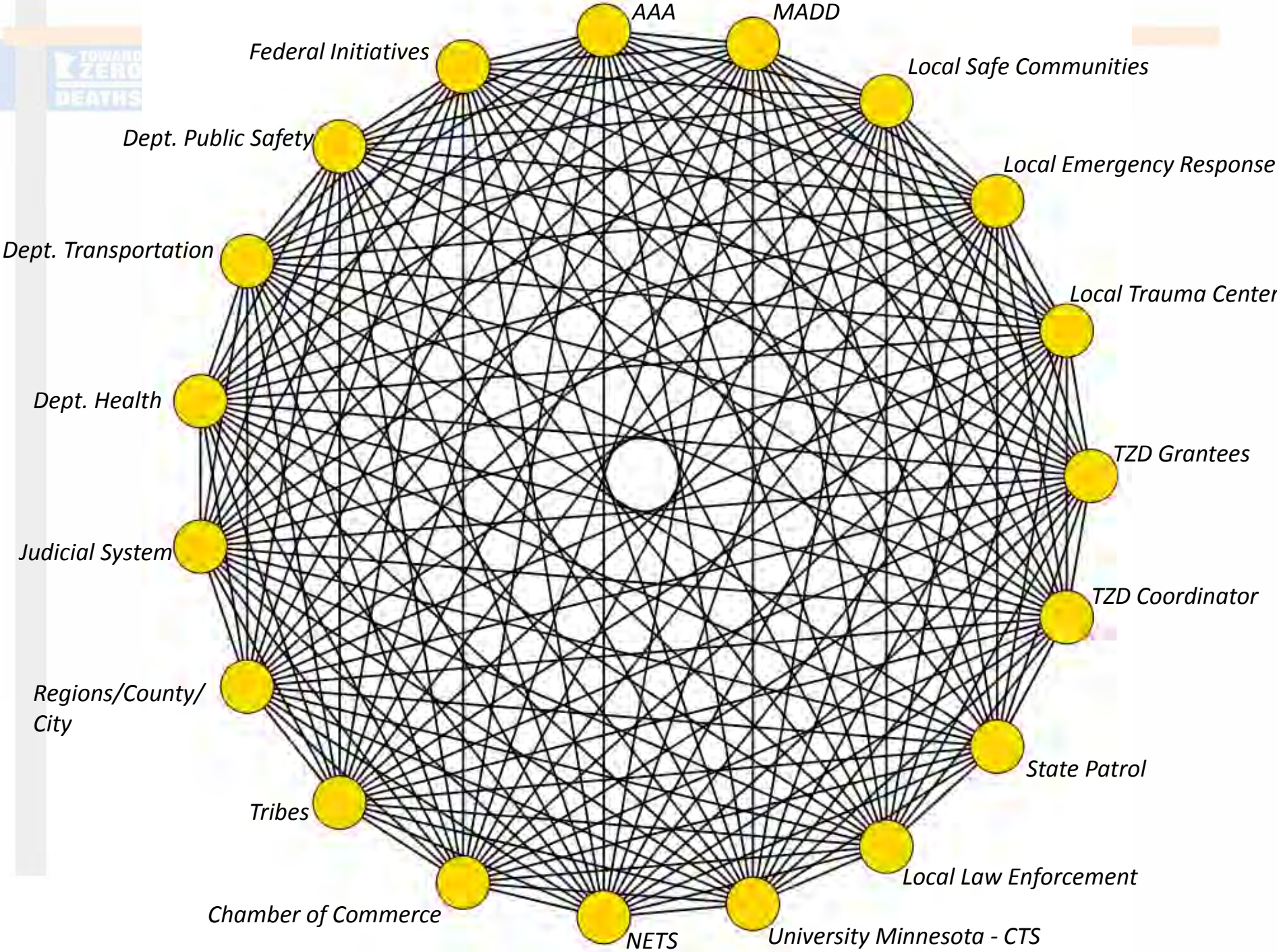
# Emphasis Area Priorities





# TZD Regions







# 2015 TZD Regional Workshops



**May 1:**

Southwest – Morton

**May 7:**

Southeast – Rochester

**May 12:**

West Central – Fergus Falls

**May 13:**

Northwest – Bemidji

**May 27:**

Northeast – Duluth

**May 29:**

South Central – Fairmont

**June 2:**

East Central – Baxter

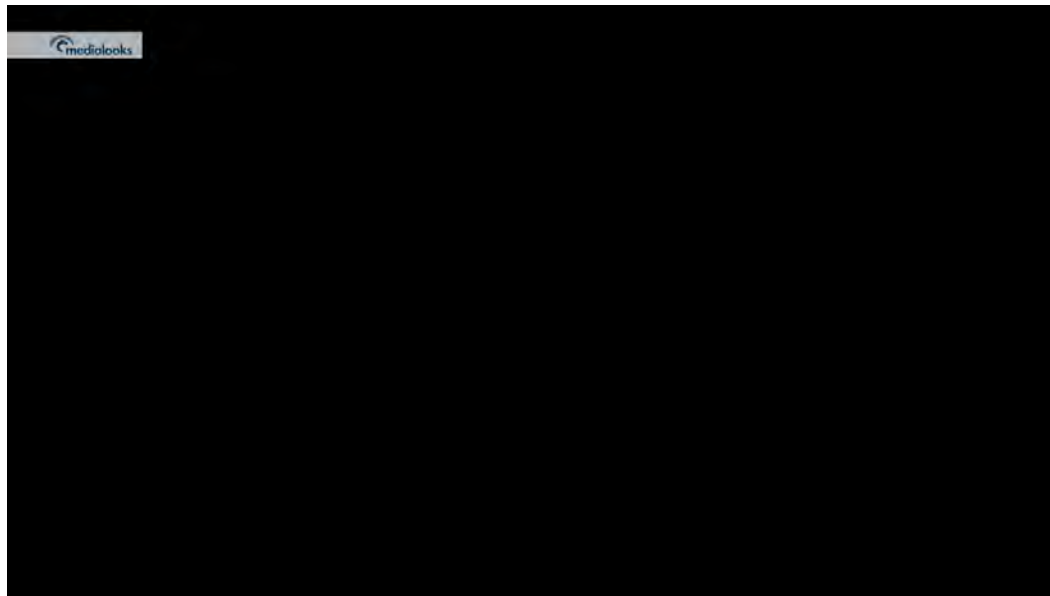
**June 5:**

Metro – Oakdale

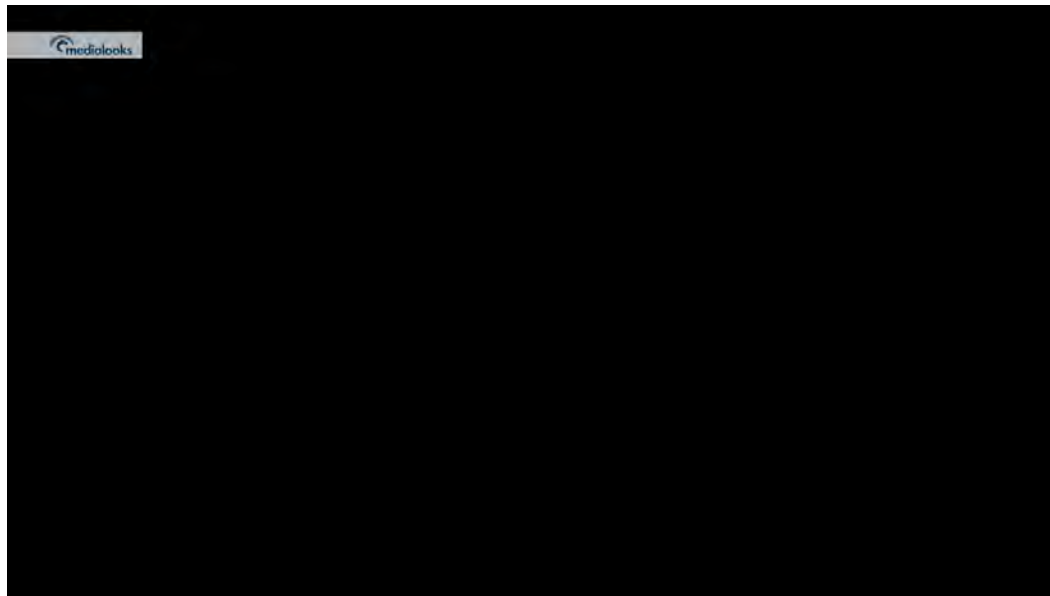
# MnDOT Work zone Safety Campaign 2014



# Speak Up: Texting + Driving = Illegal



# Speak Up: Texting + Driving = Illegal





# Legislative Gains

## 2005

- .08 Blood Alcohol Content (BAC)
- Statewide Trauma System

## 2006

- Cell Phone Ban for Provisional/  
Novice Drivers

## 2008

- Graduated Driver's License
- No Electronic Communications  
(text, e-mail, web access)



## 2009

- Booster Seat
- Primary Seat Belt

## 2010

- DWI Administrative  
Sanctions/Ignition  
Interlock

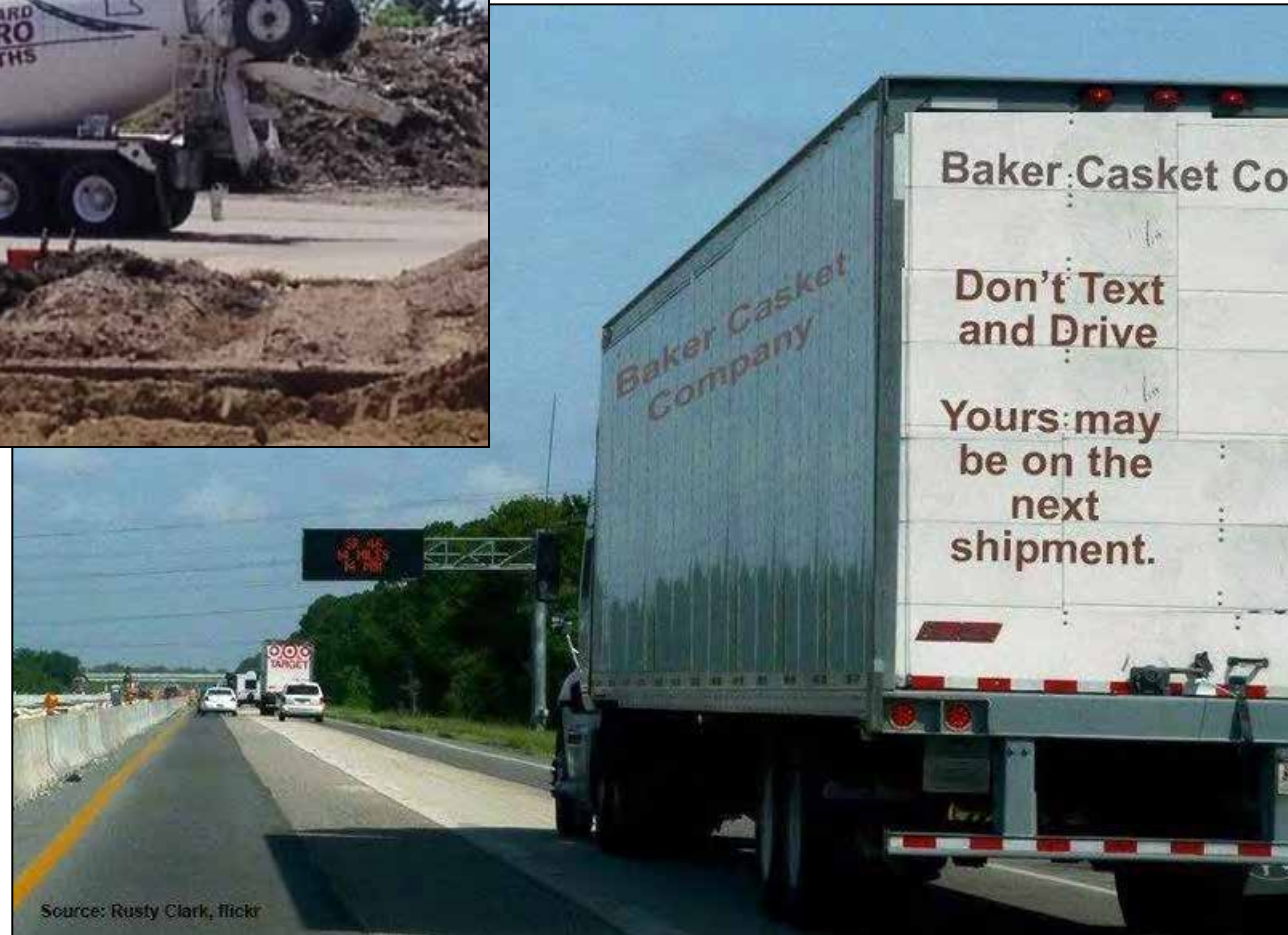
## 2014

- Parent Component for  
driver education

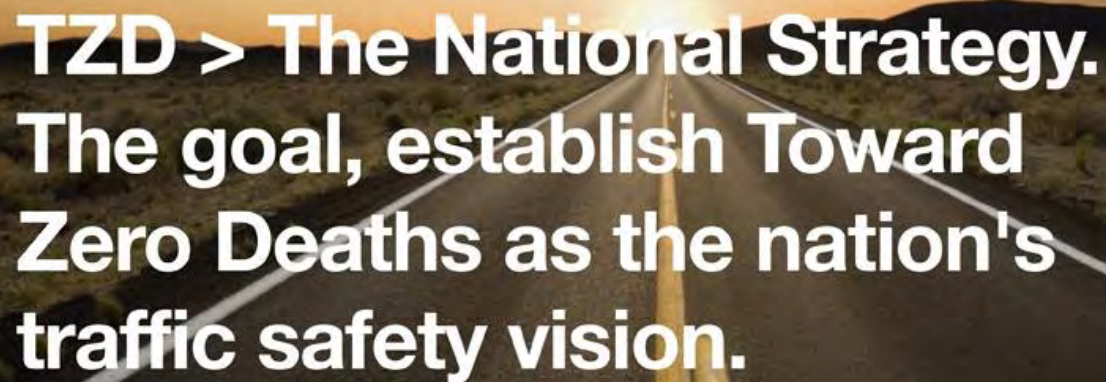
# TZD Program Growth

	2003	2014
Seatbelt Use	82%	95%
Cable Median Barrier	0 miles	450 miles
% Treated @ Designated Trauma Hospital	67%	99%
TZD Safe Road Coalitions (funded & unfunded)	< 10	52
TZD Enforcement Grant Agencies	104 (41 grants)	283 (55 grants)
County Safety Plans and District Safety Plans	0	95
Ignition Interlock Participants	0	8,633
TZD Regions with MnDOT & MPS Leadership	0	8
Participants in Annual TZD Conference	110	961
DWI Courts	0	16

# Traffic Safety Culture



[www.towardzerodeaths.org](http://www.towardzerodeaths.org)



**TZD > The National Strategy.  
The goal, establish Toward  
Zero Deaths as the nation's  
traffic safety vision.**



# BUCKLE UP MONTANA

a safety movement from  
the Montana Department of Transportation



OUR PARTNERS

## Messages are specific to the target audience

Who is the target audience? What do they value.



### (BUCKLE UP BOYS)

Levi, Billy and Rusty Hendrickson of Arlee  
Rodeo champions - Seat belt users

—◆—  
“We count on the buckle.  
So should you.”

### BUCKLE UP IN YOUR TRUCK.

Pickup trucks are twice as likely to roll over  
as a car. A seat belt increases your chances  
of survival in a rollover by up to 80%.

TOWARD  
ZERO  
DEATHS

# BUCKLE UP MONTANA

*a safety movement from  
the Montana Department of Transportation*



OUR PARTNERS



## This New Zealand Road Safety Ad Features Older, Unsung Heroes

*Subtly-Scripted Ad Focuses on the Witnesses, Not the Drunk Drivers*



# *Looking Forward*

## Toward Zero Deaths Goal

### 2020 Targets

- Less than **300 fatalities**
- Less than **850 serious injuries**





# Goal: Zero Deaths

*How do we get there?*

*Answer: Reduce deaths by **one per month** each month for the next 5 years  
(60 less in 60 months....Is that attainable?)*

**Lieutenant Don Marose**  
**Minnesota State Patrol**  
**don.marose@state.mn.us**  
**651-297-7132**

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# 2012 NATIONAL SURVEY DRUG USE AND HEALTH (NSDUH)

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- 22.6 million people (8.9%) have used illicit drugs in the past month
- 17.4 million consider themselves current marijuana users
- 60% only use marijuana
- 77% use marijuana in combination with other illicit drugs

# TYPES OF DRUGS COMMONLY USED

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Cocaine	2.3 million
Hallucinogens	1.0 million
Psychotherapeutics	6.3 million
Tranquilizers	1.8 million
Sedatives	0.3 million
Pain Relievers	4.7 million
Stimulants	1.2 million



# WASHINGTON STATE (2006)

12% of 370 fatally injured drivers had marijuana in their systems at the time of the crash.







# PERCENT OF HIGH SCHOOL SENIORS REPORTING LIFETIME USE



70% alcohol (51% drunk)

45% marijuana



22% any Rx drug

13% narcotics other than heroin

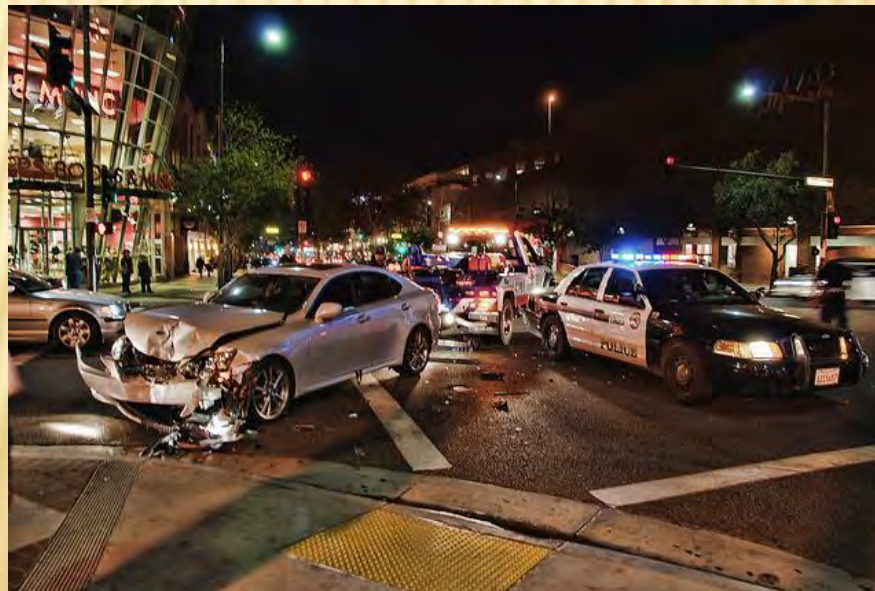
5% cocaine    2% meth    1.5% heroin



# SADD

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More than 19% of high school seniors admitted driving under the influence of marijuana in 2010





# U.S. STATISTICS

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- 19.5 Million illicit drug users (12 years old and up)
- 56,000 12-17 year old dependent on inhalants
- 3.3 Million Americans used an ADHD substance last year

# U.S. STATISTICS

---

- 1.5 Million Emergency Room visits were associated with drug use/abuse (SAMHSA)
- 56% of those were due to illicit drug use/abuse
- 600,000 were due to non-medical use prescription or over-the-counter medications

# U.S. STATISTICS

---

- 21% of 16-20 year olds reported driving under the influence in the last 12 months
- 15.1 million abuse prescription drugs (up from 7.8 million in last decade)
- 3% of 12-17 year olds reported current abuse of prescription drugs (2nd to marijuana and ahead of cocaine, meth, ecstasy, and heroin)



# SAMHSA NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE

- Marijuana is the most commonly used illicit drug, with 14.6 million users
- 7 million people (12 years and older) were users of psycho-therapeutic drugs taken non-medically





# PARTNERSHIP FOR A DRUG-FREE AMERICA

- 20% of teenagers has abused a prescription painkiller to get high
- 10% of teenagers has abused an OTC product (cough medicine)

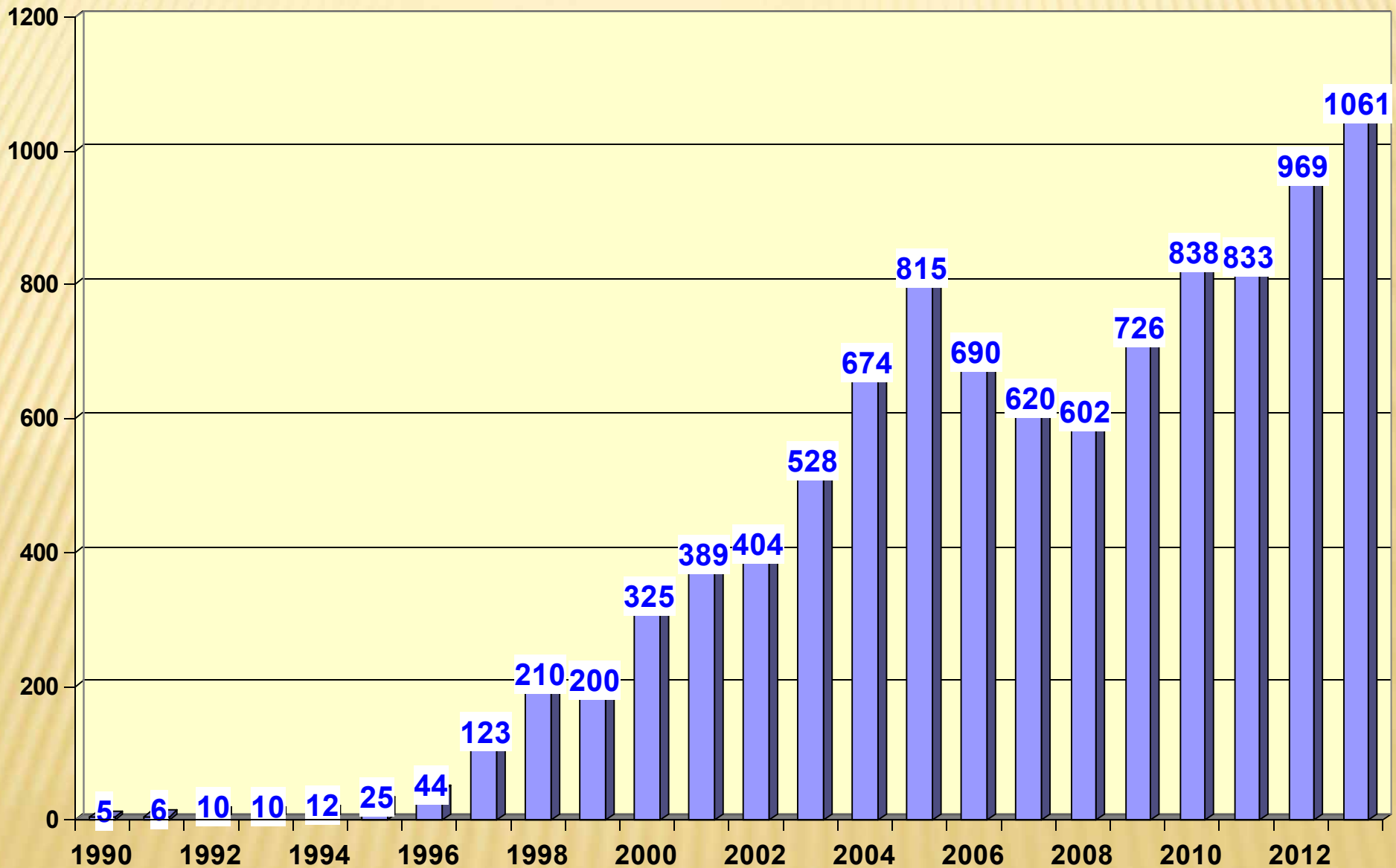
# MN STATISTICS

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- Minnesota ranks 8<sup>th</sup> for incidents of driving under the influence of illicit drugs at 5.7%
- 1 in 6 high school seniors reported driving after using alcohol or drugs

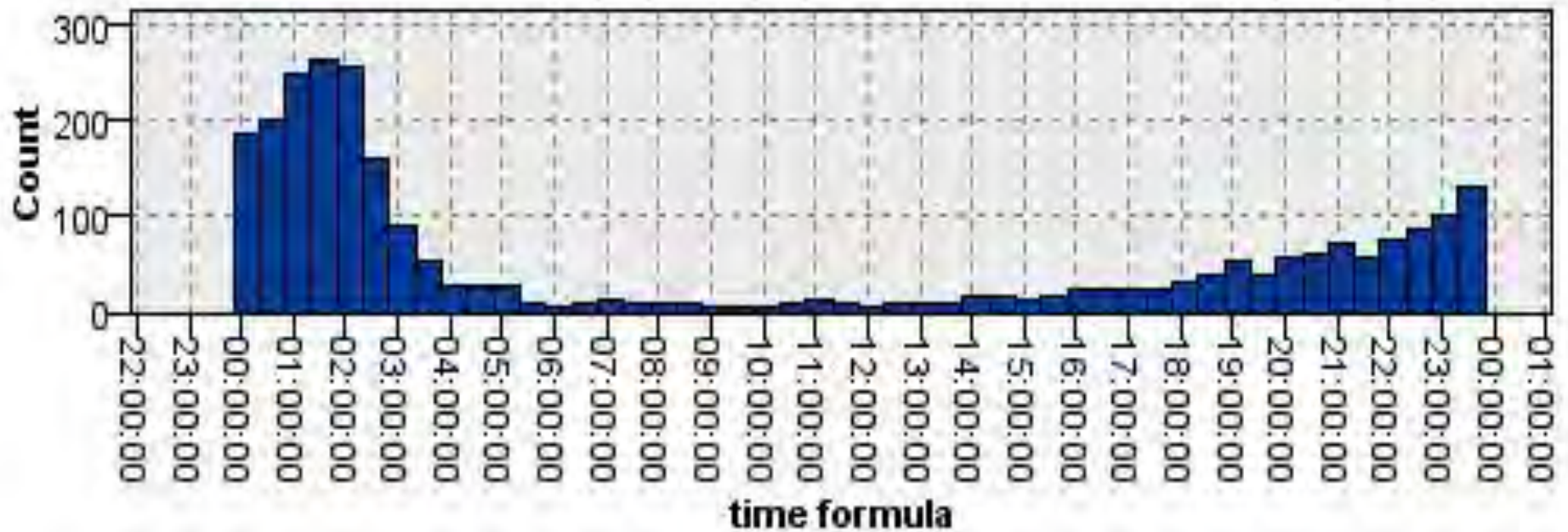
(Minnesota Student Survey)

# DWI-CONTROLLED SUBSTANCE ON DRIVER'S RECORD



# DWI ARRESTS BY TIME OF DAY

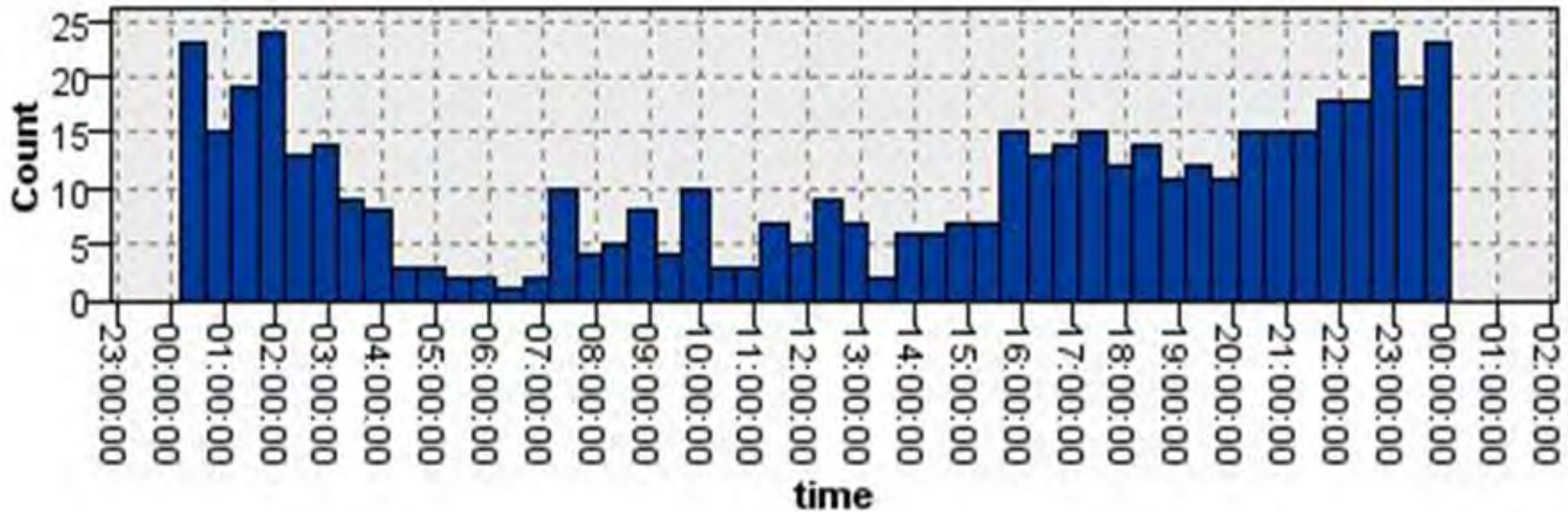
Alcohol





# DWI ARRESTS BY TIME OF DAY

Schedule I and II Controlled Substances



# WHAT IS A “DRUG”?

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# DEFINITION

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Any substance which, when taken into the human body, can impair the ability of the person to perform designated tasks safely.





## ***SOBRIETY TEST***

Look at the photo above -  
if it looks right to you ...

**You're Drunk**



# MSS 169A.20 DWI

## SUBDIVISION 1: DRIVE, OPERATE, OR PHYSICAL CONTROL WHILE.....

- 1) Influence of alcohol
- 2) **Influence of controlled substance**
- 3) **Knowingly under the influence of a hazardous substance**
- 4) Combination of (1) and/or (2) and/or (3)
- 5) Alcohol concentration .08 or more at time of incident or w/in 2 hours
- 6) Alcohol concentration over .04 while in commercial vehicle
- 7) **Body contains any amount of controlled substance or its metabolite listed in Schedule I or II (other than marijuana)**

# CENTRAL NERVOUS SYSTEM DEPRESSANTS



Alcohol  
Barbiturates  
GHB

Anti-anxiety Tranquilizers  
Anti-Depressants

Paxil

*Many Others*



# CENTRAL NERVOUS SYSTEM DEPRESSANTS

- HGN and VGN present
- Eyelids droopy
- Eyes bloodshot and watery
- Drowsiness
- Thick, slurred speech
- Uncoordinated
- Fumbling
- Slow, sluggish reactions





# CENTRAL NERVOUS SYSTEM STIMULANTS



Cocaine

Ritalin

Amphetamines

Khat

Methamphetamine

Adderall





# CENTRAL NERVOUS SYSTEM STIMULANTS

- Divided attention impairment
- Starts test too soon
- Accelerated internal clock
- Completes test too quickly
- Rapid and jerky movements
- Talkativeness
- Body tremors
- Exaggerated reflexes



# CENTRAL NERVOUS SYSTEM STIMULANTS

- Restlessness
- Anxiety
- Euphoria
- Excitation
- Bruxism
- Loss of appetite
- Pupils dilated



# HALLUCINOGENS



Peyote

Psilocybin

LSD

MDMA (Ecstasy)

Bufotenine

'Plant Food'/'Bath Salts'

Salvia Divinorum

NBOMe





# HALLUCINOGENS

- Uncoordinated
- Severe divided attention impairment
- Poor perception of time and distance
- Poor balance
- Distorted internal clock
- Disoriented
- Nausea





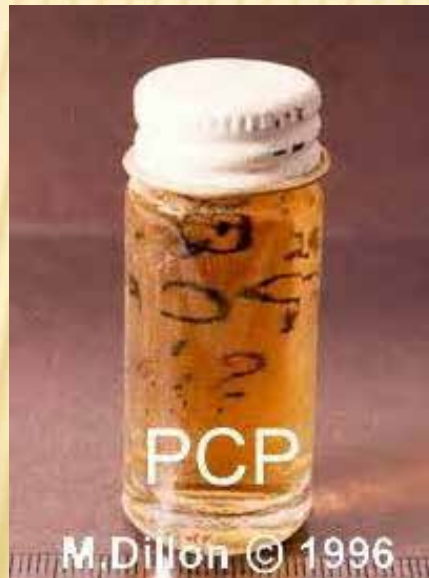
# HALLUCINOGENS

- Dazed appearance
- Body tremors
- Perspiring
- Paranoia
- Difficulty with speech
- Piloerection
- Statements suggesting hallucinations



# DISSOCIATIVE ANESTHETICS

- PCP (Phencyclidine) and its analogs
- Ketamine
- Dextromethorphan
- Ketaject
- Vetalar
- Xyrem



# DISSOCIATIVE ANESTHETICS

- HGN and VGN
- Blank stare
- Loss of memory
- Perspiring heavily
- Warm to touch
- Cyclic behavior
- Incomplete, slurred verbal responses





# DISSOCIATIVE ANESTHETICS

- Cyclic behavior
- Agitated
- Rigid muscle tone/'Moon Walking'
- Disoriented
- Nonresponsive
- Chemical odor
- Slowed internal clock





# NARCOTIC ANALGESICS

Heroin  
Oxycontin  
Morphine  
Codeine  
Vicodin  
Demerol  
Methadone  
Darvon  
Buprenorphine  
Suboxone



# 14% of U.S. residents report nonmedical use of Rx pain relievers

U.S. consumes 80% of opioids worldwide



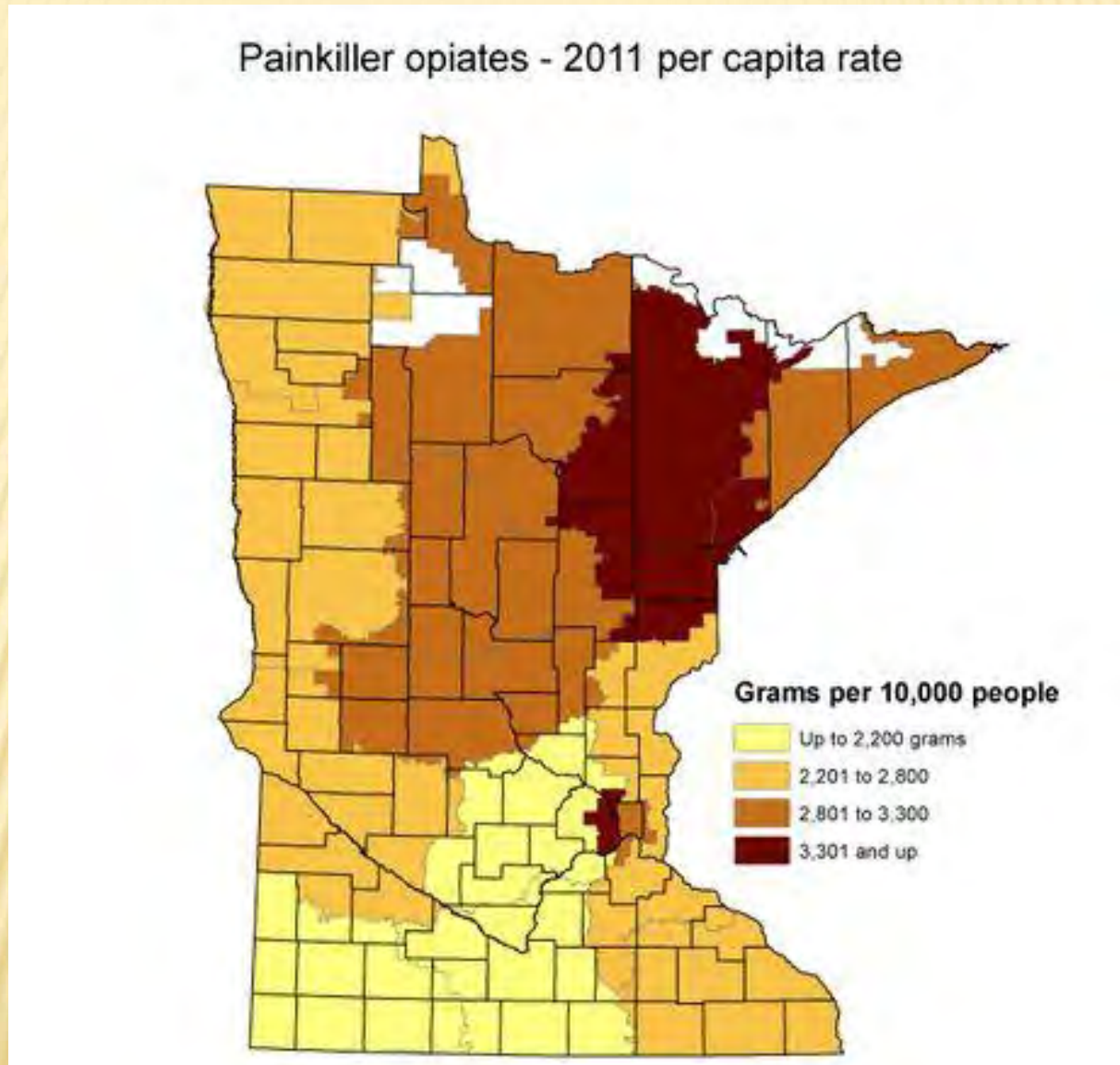
# ONDCP

“From 1997 to 2007, the milligram-per-person use of prescription opioids in the U.S. increased from 74 milligrams to 369 milligrams, an increase of 402%.”





# Prescription painkillers sold in Minnesota - 2011



SOURCE: Automation of Reports and Consolidated Orders System (ARCOS), U.S. Drug Enforcement Administration, 2012. Prescription opiate analgesics (painkillers) include: codeine, morphine, fentanyl (brand names: Sublimaze, Actiq, etc.), hydrocodone (brand names: Vicodin, Lortab), hydromorphone (brand names: Dilaudid, Palladone), meperidine, pethidine (brand name: Demerol), and oxycodone (brand names: OxyContin, Percodan, Percocet).

# NARCOTIC ANALGESICS



“Track marks”

“On the nod”

Slowed reflexes

Facial itching

Dry mouth

Euphoria

Flaccid muscle tone

Low, slow, raspy speech

Pupils visibly and obviously constricted

# NARCOTIC ANALGESICS

Pupil size constricted

Eyelids will be droopy

Divided attention impairment

Poor coordination and balance

Slowed internal clock





# INHALANTS



Gasoline  
Glues  
Paint (Toluene)  
Hair Spray  
Anesthetic Gases



# INHALANTS

- HGN and VGN
- Odor of the inhaled substance
- Dizziness, numbness
- Traces of substance around the face and nose
- Bloodshot, watery eyes
- Distorted perception of time and distance
- Light headedness



# INHALANTS

- Flushed face, possible sweating
- Intense headaches
- Slow, thick, slurred speech
- Nausea
- Non communicative
- Floating sensation





# CANNABIS

Marijuana

Hashish

Hashish Oil

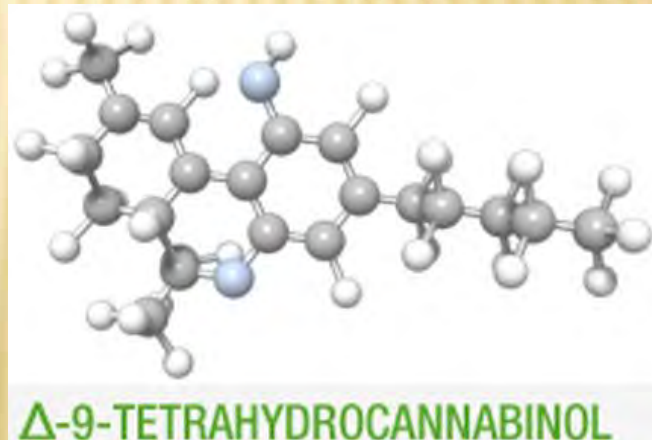
Marinol

Synthetic Cannabinoids



# CANNABIS

- Derived primarily from various species of Cannabis plants
- Primary psychoactive ingredient is Delta-9 Tetrahydrocannabinol (THC)



# CANNABIS

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- Effects depend on the strength of the THC in the dose consumed
  - THC concentrations decades ago, peaked at relatively low levels (3-6 %)
  - Current levels are being reported at more than 30%



# CANNABIS

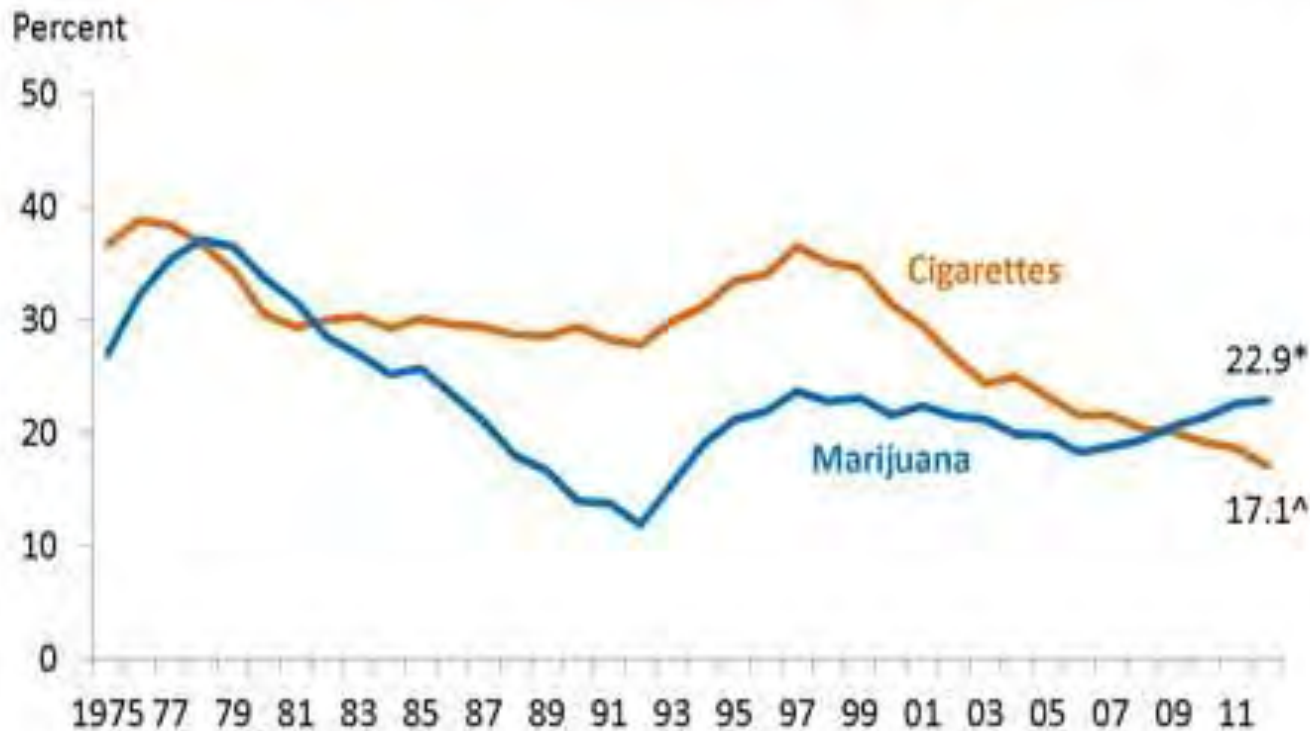
Corrupts neurochemical endocannabinoids that play key roles in memory formation, learning, decision-making...

*...and is Addictive.*



# More kids smoke marijuana than cigarettes

## Past Month Cigarette and Marijuana Use among 12th Graders, 1975 to 2012



Significant \* increase or <sup>^</sup> decrease from 2007

Source: University of Michigan, 2012 Monitoring the Future Study

**22.9%**

**17.1%**

# MARIJUANA



Over 29 million Americans used marijuana in 2010

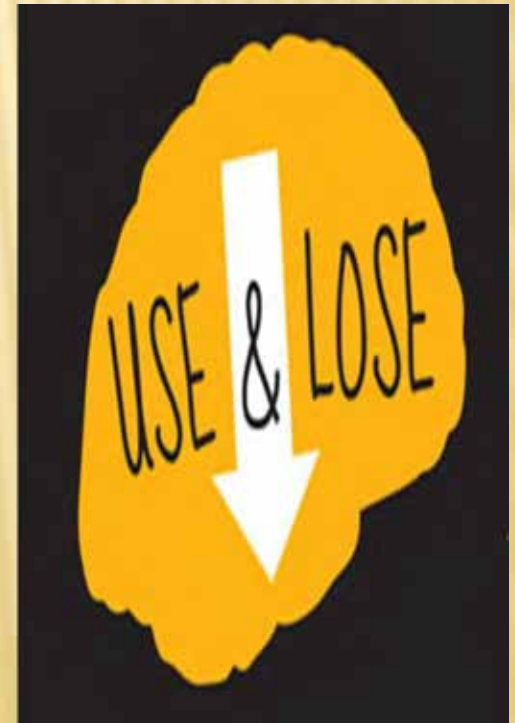


# NIDA

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People who used marijuana heavily through their teens and into adulthood showed a significant drop in I.Q. (an average of 8 points) between the ages of 13 and 38

Those who never used showed no drop in IQ



# FACT

1 joint reduces driving skills by 41%  
(2 joints = 63%)



-NHTSA

# CANNABIS

Odor of marijuana

Impaired perception of time and distance

Marked reddening of whites of eyes

Problems with divided attention tasks

Body tremors

Disorientation

Impairs attention

Relaxed inhibitions







**Johnny smoked  
a rock of crack.**



**And almost had  
a heart attack!**



**Billy smoked  
a bunch of pot.**



**A little hungry  
is all he got!**

**REMEMBER KIDS...**  
**POT IS SAFER THAN CRACK.**



**CJ CONSUMPTION JUNCTION.COM**  
What's your Dysfunction?

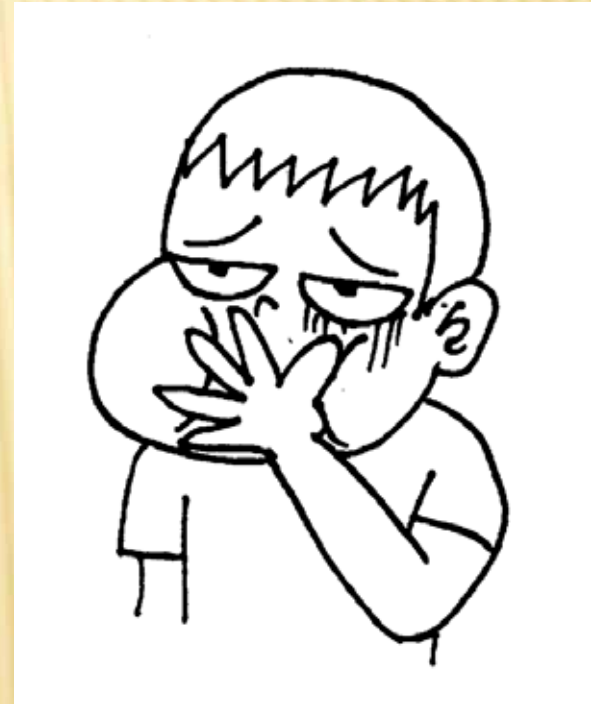
# CANNABIS APPLICATIONS

- Lowers intraocular pressure
- Suppresses nausea
- Helps inhibit seizures
- Appetite enhancer
- A muscle relaxant
- A tumor growth retardant



# MARINOL APPLICATIONS

- Legitimate medicinal use as an anti-vomiting agent, commonly associated with cancer chemotherapy
- Other uses include treatment of glaucoma or as an appetite enhancer for anorexia disorders



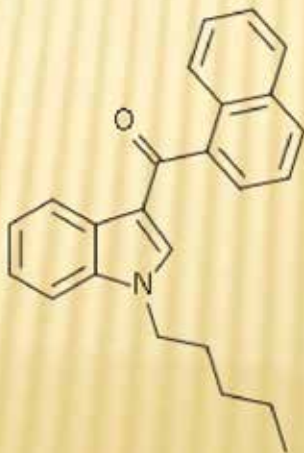


# SYNTHETIC CANNABINOID PRODUCTS



# JWH-018 1-PENTYL-3-(1-NAPHTHOYL)INDOLE

Created in 1995 for experimental purposes in animal and cell cultures, not humans, by Dr. John Huffman, PhD at Clemson University





# JWH-018 1-PENTYL-3-(1-NAPHTHTOYL)INDOLE

- Not structurally related to THC, but has longer duration of action.
- Sold commercially since 2002 as “SPICE” and as it’s parent compound





# SYNTHETIC CANNABINOID PRODUCTS

Typically include:

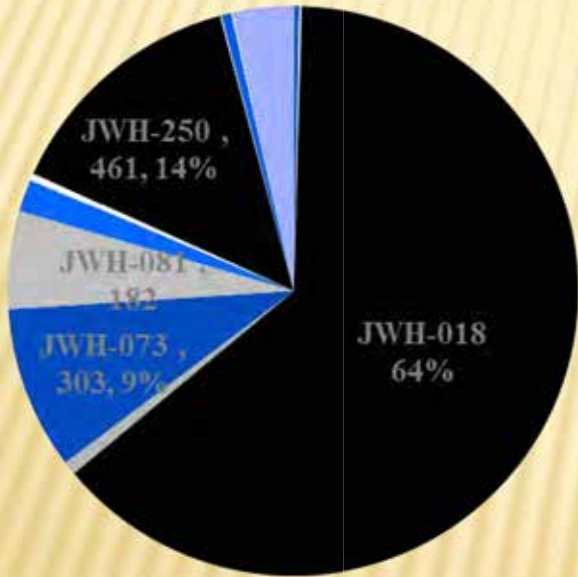
- ❖ Olive colored herbs
- ❖ Combination of herbs
- ❖ Plant materials

All enhanced with a THC synthetic analog

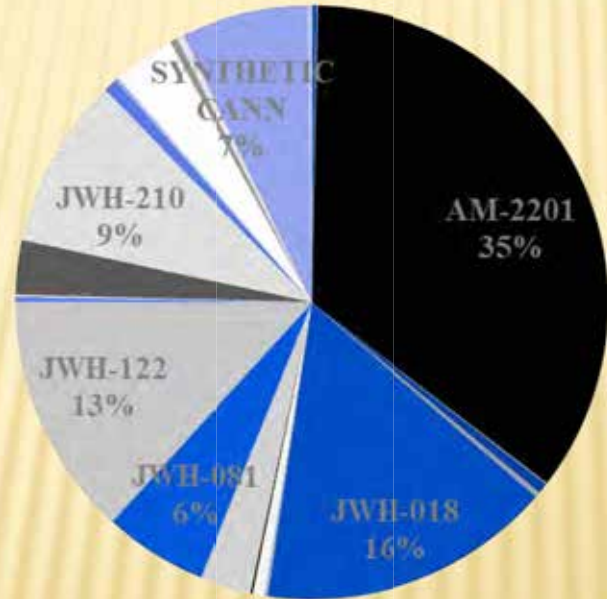
When smoked, synthetic cannabinoid products mimic the hallucinogenic effects of marijuana

# CANNABINOID VARIETIES IDENTIFIED IN U.S. NFLIS TOXICOLOGY LABS

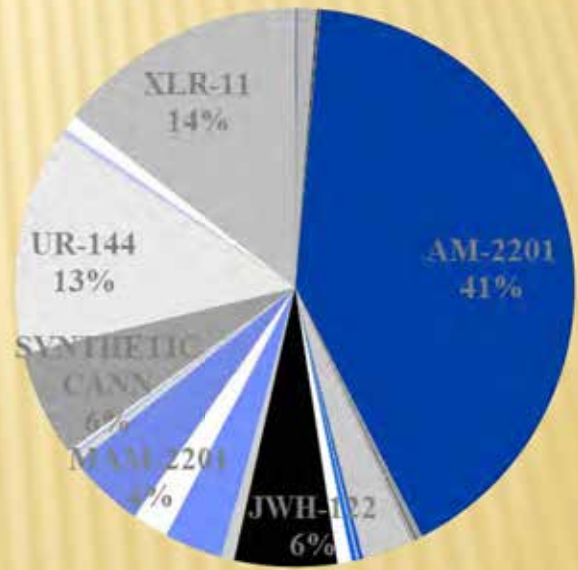
19 variations reported in 2010



44 variations reported in 2011



55 variations reported in 2012



# SYNTHETIC CANNABINOID EFFECTS

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- ✓ Very similar to cannabis but is considerably more potent than similar amounts of cannabis.
- ✓ Users may experience far more intense effects compared to smoking cannabis
- ✓ Has been shown to cause profound changes in CB1 receptor density, causing desensitization to its effects more rapidly than related cannabinoids



# SYNTHETIC CANNABINOID EFFECTS

- Panic attacks
- Agitation
- Tachycardia (range of 110 to 150 BPM)
- Elevated blood pressure
- Anxiety
- Pallor
- Numbness and tingling
- Seizures
- Convulsions



# SYNTHETIC CANNABINOID EFFECTS

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- Visual changes
- Color enhancement
- Uncontrollable laughter
- Euphoria
- Talkativeness
- Sexual stimulation
- Time impairment
- Sedation
- Sleep aid
- Analgesia
- Anti-depressant

# CHAPTER 4770, MEDICAL CANNABIS

## Who Qualifies?

1. Cancer, with severe or chronic pain, nausea, or vomiting
2. Glaucoma
3. HIV/AIDS
4. Tourette's Syndrome
5. Amyotrophic Lateral Sclerosis (ALS)
6. Seizures, including those characteristic of epilepsy
7. Severe and persistent muscle spasms, including M.S.
8. Crohn's Disease
9. Terminal Illness with life-expectancy < 1 year, with severe or chronic pain, or nausea/vomiting, or cachexia

**Chronic pain on its own is presently NOT a qualifying condition**



# CHAPTER 4770, MEDICAL CANNABIS

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## **NO smokeable or plant-form is permitted**

Only liquids and oils in capsule, tincture or vaporized form are allowed.

## **Program promotes continuous learning**

Patient Registry requires reporting on effectiveness, side effects, etc.

## **Patient registration and reporting process through MDH**

Upon certification, patients must register with the State of Minnesota and submit an application fee before visiting a patient center. System will enable medical cannabis providers, MDH and health professionals to actively monitor usage and impacts

# CHAPTER 4770, MEDICAL CANNABIS

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## **Patients must be Minnesota residents**

No reciprocity with other state-based medical cannabis programs.

## **Only two manufacturers are permitted**

Each manufacturer will have four patient centers operational by July 1, 2016

## **The cost of medical cannabis is all out-of-pocket**

Insurance currently does not cover a patient's visit to a patient center and/or the medicine itself.

# CHAPTER 4770, MEDICAL CANNABIS

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## **MDH will oversee an extensive testing program**

Testing will monitor for medicine content, contamination, metals, pesticides, microbials, residual solvents, and consistency and stability.

## **Packaging parameters are well-defined**

All medicine packaging must be: plain (minimize appeal to children), tamper evident, child-resistant, and include medicine names that reflect medical cannabis' nature (no crazy names).

Labels must include: chemical composition, dosage/directions, date of manufacture/batch number, patient name/DOB/address, and caregiver name (if any).



# CHAPTER 4770, MEDICAL CANNABIS

## Prohibitions:

Nothing in the sections of Minnesota's law permits any person to engage in and does not prevent the imposition of any civil, criminal, or other penalties for...

1. Undertaking any task under the influence ..... that would constitute negligence or professional malpractice
2. Possessing or engaging in the use of medical cannabis:
  - (i) On a school bus or van
  - (ii) On grounds of any preschool, primary or secondary school
  - (iii) In any correctional facility
  - (iv) On the grounds of any child care facility or home daycare

# CHAPTER 4770, MEDICAL CANNABIS

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## Prohibitions:

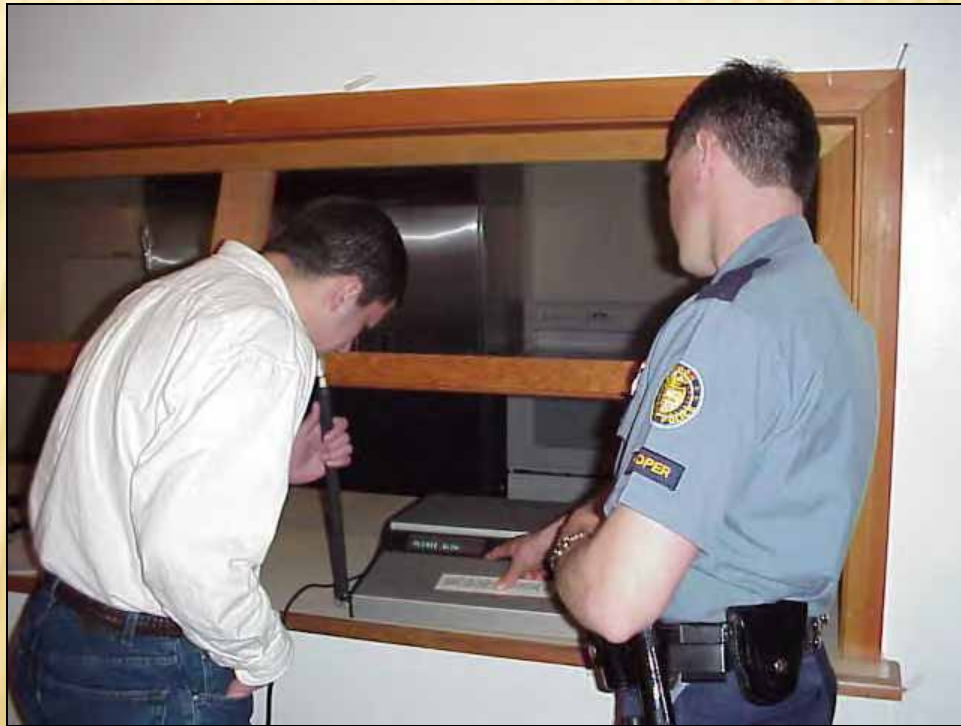
### 3. Vaporizing medical cannabis

- (i) On any form of public transportation
- (ii) Where vapor would be inhaled by a non-patient minor/child
- (iii) In any public place, including any indoor or outdoor area used by or open to the general public or a place of employment

### 4. Operating, navigating, or being in actual physical control of any motor vehicle, aircraft, train, or motorboat, or working on transportation property, equipment, or facilities while under the influence of medical cannabis.

# Step 1: Alcohol Concentration

DRE or Arresting Officer determines if alcohol is involved





# Step 2: Interview of Arresting Officer

- ❑ DRE determines the reason for the arrest
- ❑ Driving observed?
- ❑ SFST results?
- ❑ Statements made?
- ❑ Other relevant matters



# Step 3: Preliminary Evaluation

- ❑ “Fork-in-the-Road” for the DRE
- ❑ DRE determines if there is sufficient reason to suspect drug impairment
- ❑ Determines if impairment may be medically related



# Step 4: Eye Examinations

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DRE tests for:

- ❑ Horizontal Gaze Nystagmus (HGN)
- ❑ Vertical Nystagmus (VGN)
- ❑ Lack of Convergence

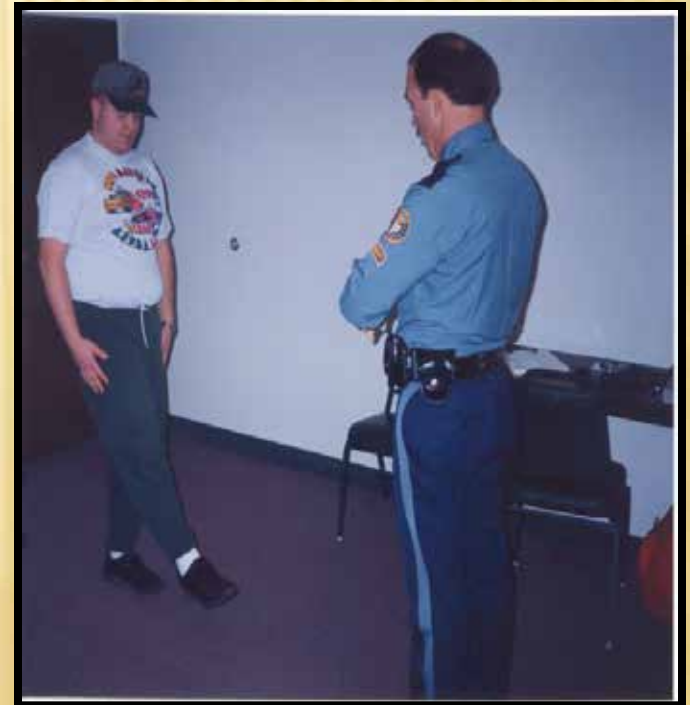




# Step 5: Divided Attention Tests

DRE administers divided attention tests:

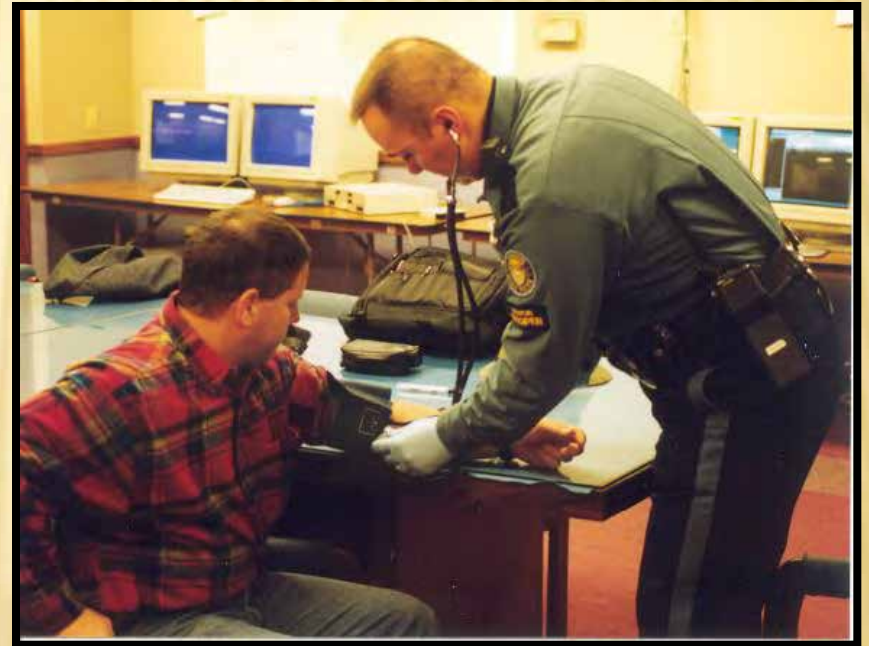
- ❑ Modified Romberg Balance
- ❑ Walk and Turn
- ❑ One-Leg Stand
- ❑ Finger-To-Nose



# Step 6: Vital Signs Examinations

DRE conducts three vital signs examinations

- ❑ Pulse rate (3 times)
- ❑ Blood pressure
- ❑ Body temperature



# Step 7: Dark Room Examinations

DRE examines suspect's pupils

- ❑ Pupilometer used to estimate the suspect's pupil sizes in three different light levels.
- ❑ Includes examination of nasal and oral cavities.





## Step 8: Muscle Tone

DRE examines arrestee's arms for muscle tone; flaccid, rigid, or normal



# Step 9: Examination for Injection Sites

DRE examines for injection sites

Frequently used areas include:

Arms    Neck    Ankles



# Step 10: Statements and Interview

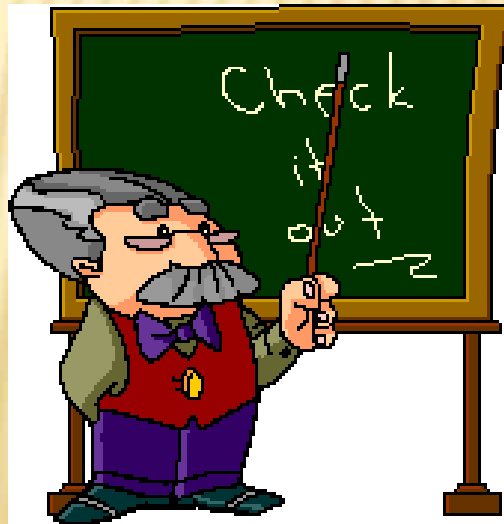
- ❑ DRE conducts a structured interview
- ❑ Miranda warnings given if not previously done
- ❑ Suspect questioned about drug use based upon the results of the evaluation
- ❑ DRE records admissions





# Step 11: Opinion of the DRE

- ❑ DRE forms an opinion as to the drug influence and the drug category(s)
- ❑ DRE makes an “informed opinion” based upon totality of evaluation and evidence
- ❑ DRE Symptomology Matrix used to form final opinion



# Step 12: Toxicology

- ❑ Implied Consent Advisory invoked
- ❑ A urine or blood sample is requested for analysis



---

***QUESTIONS?***



---

**THANK YOU.**

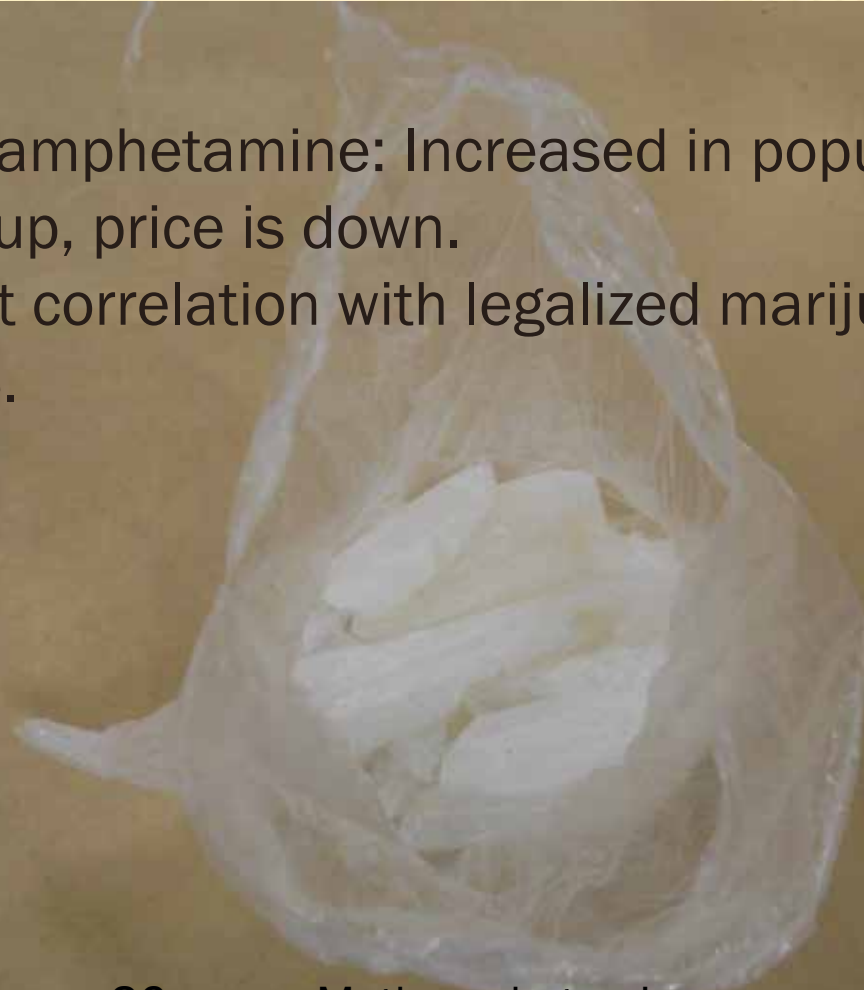
**Lieutenant Don Marose**  
**Minnesota State Patrol**  
**[don.marose@state.mn.us](mailto:don.marose@state.mn.us)**

**Trooper Isaiah Godding**  
**Minnesota State Patrol**  
**isaiah.godding@state.mn.us**

---

# LOCAL CASE STUDY

- Methamphetamine: Increased in popularity, purity up, price is down.
- Direct correlation with legalized marijuana in the US.



86 grams Methamphetamine



# LOCAL CASE STUDY

Local Dealers are selling high quality  
Methamphetamine



# LOCAL CASE STUDY



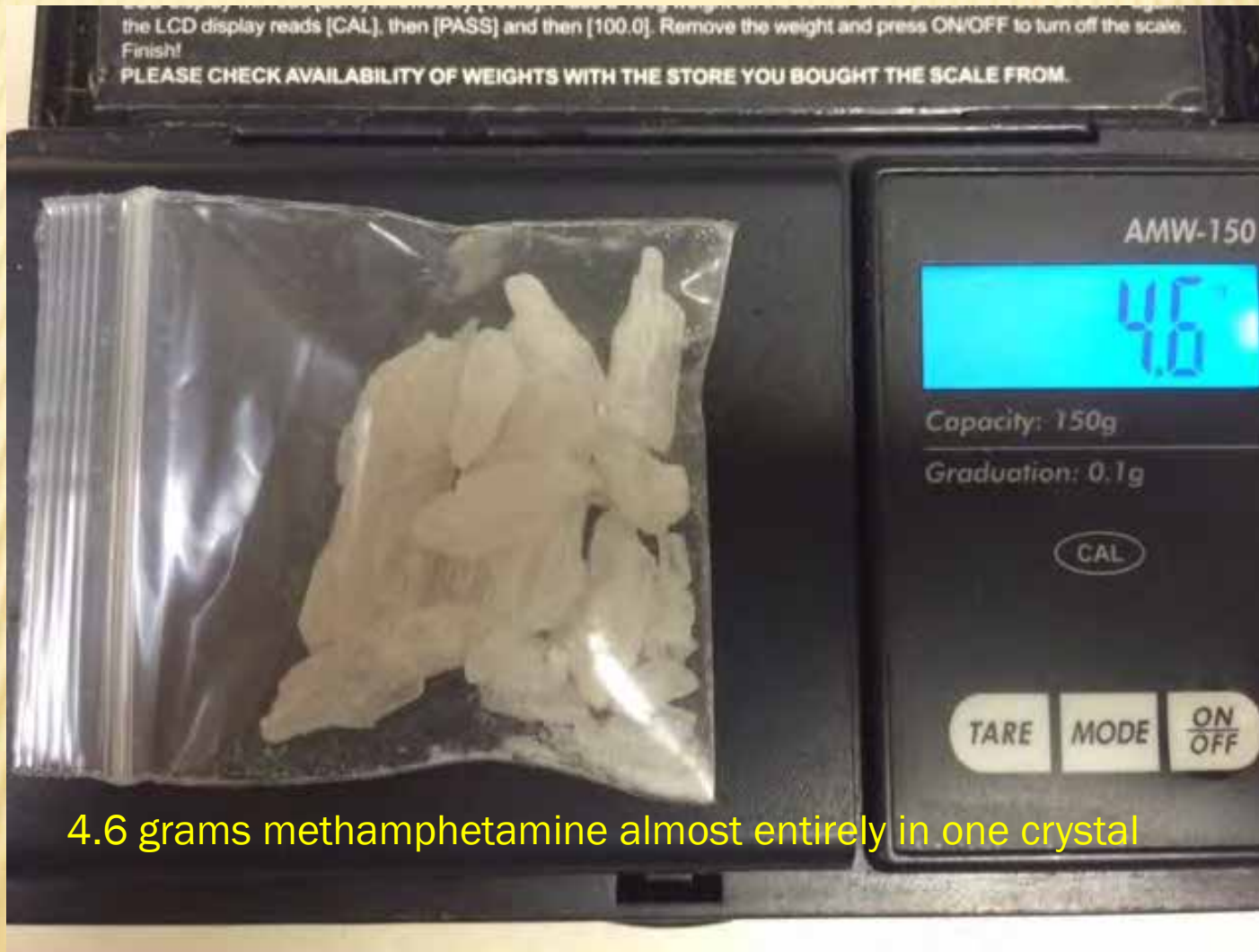
# LOCAL CASE STUDY



\$16,530 cash seized from drug sales.



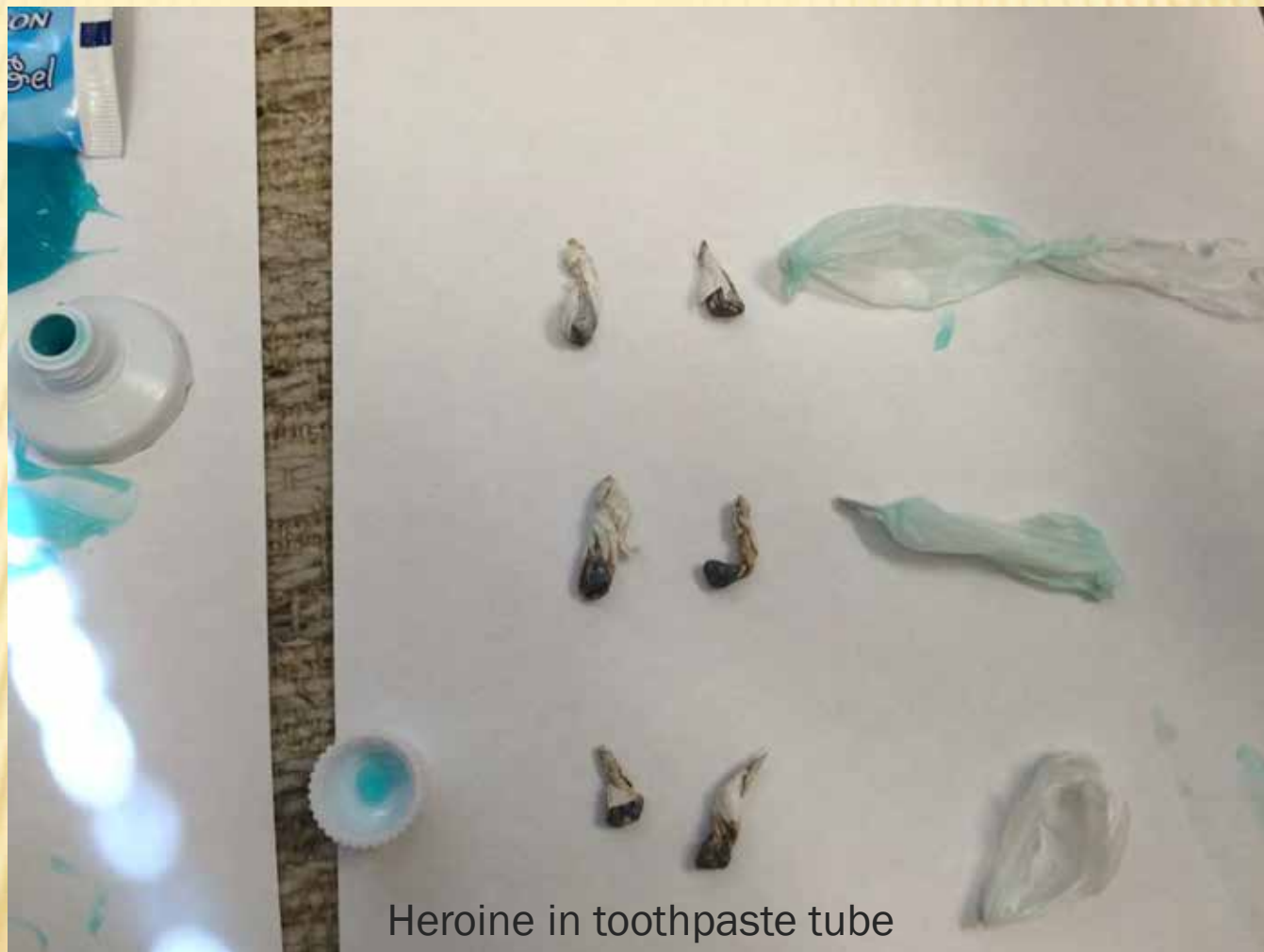
# LOCAL CASE STUDY



# LOCAL CASE STUDY



# LOCAL CASE STUDY





# LOCAL CASE STUDY

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Indoor Marijuana grow tent



# LOCAL CASE STUDY



Outdoor Marijuana grow



# LOCAL CASE STUDY



Local marijuana seizure



# LOCAL CASE STUDY

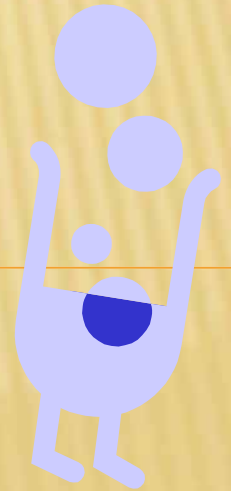


Local marijuana and  
paraphernalia seizure

# INVESTIGATION OF DRUGS IN THE URINE OF DRIVERS STOPPED FOR ALCOHOL DWI

Lisa LaGoo

BCA Toxicology Section Intern



# RESEARCH METHODS

- ✘ Urine samples from 235 DWI cases
  - + January through March 2007
  - + All samples were submitted for alcohol screening only





# DRUGS SCREENED

- + THC
- + Cocaine
- + Opiates
- + Amphetamines
- + Phencyclidine
- + Barbiturates
- + Benzodiazepines
- + Methadone
- + Propoxyphene
- + Basic drugs
- + Over 500 compounds



---

# 43% of Drivers Found to be Positive for Other Substances

Schedule I – 20%

Schedule II – 14%

Schedule III – 0%

Schedule IV – 1%

Schedule V – 0%

Unscheduled – 30%

# SCHEDULE I

## × THC

+ 46 samples

+ 20% positive





# SCHEDULE II

14% of the cases - 33% of the positive results

- ✘ Methamphetamine (3% - 8%)
- ✘ Opiates (6% - 13%)
- ✘ Cocaine (4% - 9%)
- ✘ Propoxyphene, Amphetamine (Each 1% - 2%)

# SCHEDULE IV

---

1% of cases - 3% of positive results

- ✘ Two benzodiazepines (of 146)
- ✘ One case of Zolpidem (Ambien)

# UNSCHEDULED DRUGS

30% of cases - 70% of positive results

- × Diphenhydramine (6% - 13%)
- × Doxylamine (3% - 6%)
- × Trazodone, Chlorpheniramine, Venlafaxine  
(Each 2% - 4%)
- × Tramadol, Orphenadrine, Dextromethorphan,  
Fluoxetine, Diltiazem  
(Each 1% - 3%)

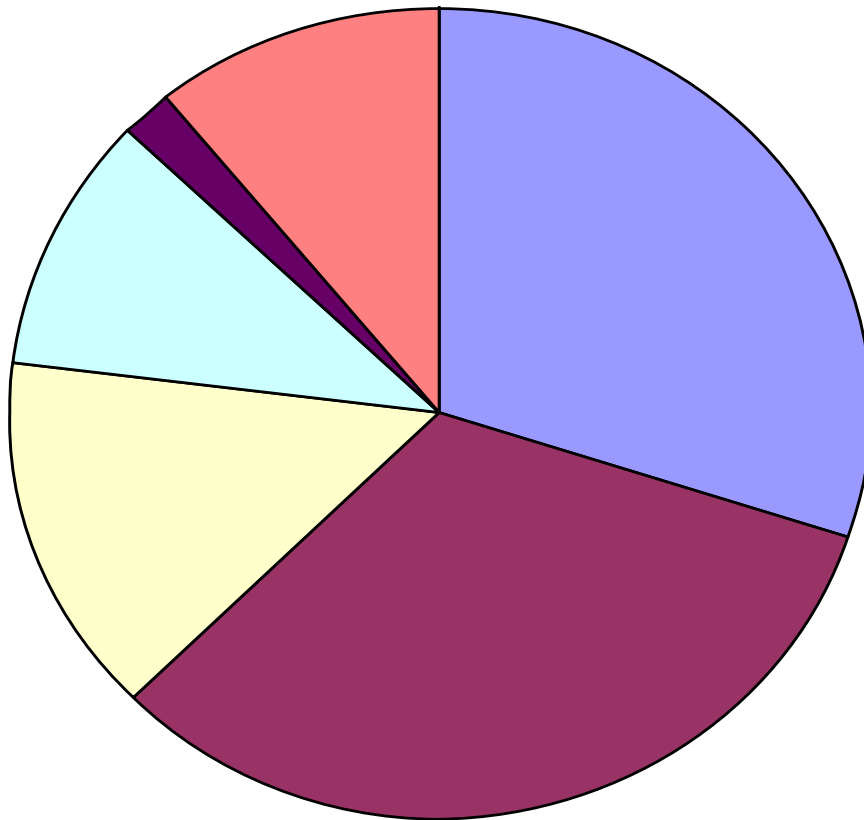


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# UNSCHEDULED COMPOUNDS

- Pseudoephedrine, Amitryptiline, Propranolol  
(Each 1% - 2%)

# DRE EVALUATION CATEGORIES



- Cannabis
- CNS Depressants
- CNS Stimulants
- Narcotic Analgesics
- Dissociative Anesthetics\*
- NA

# POLY-PHARMACY

- × **One drug**

72% of positive screens

- × **Two drugs**

20% of positive screens

- × **Three drugs**

7% of positive screens

- × **Four drugs**

1% of positive screens





# CONCLUSIONS

✘ Identified drugs in 43% of 235 DWI cases tested

70% Unscheduled

✘ Most common drugs found

THC – 20%

Diphenhydramine – 6%

Hydrocodone and other opiates – 6%

Citalopram – 4%

Cocaine – 4%

Methamphetamine – 3%

Doxylamine – 3%

# Break: be back at 10:00



# West Central Minnesota Crash Facts

*Lt. Chuck Backes, Minnesota State Patrol and  
Tom Swenson, MnDOT District 4 traffic engineer*





# Crash Photos DEAD or ALIVE



# Crash Photos DEAD or ALIVE





# Crash Photos DEAD or ALIVE





# Crash Photos DEAD or ALIVE



# Crash Photos DEAD or ALIVE





# Crash Photos DEAD or ALIVE





## How Many Were Fatal Crashes?

a) 6

b) 4

c) 2

d) 1

e) 0

# Crash Photos DEAD or ALIVE



# West Central Minnesota Regional Crash Data

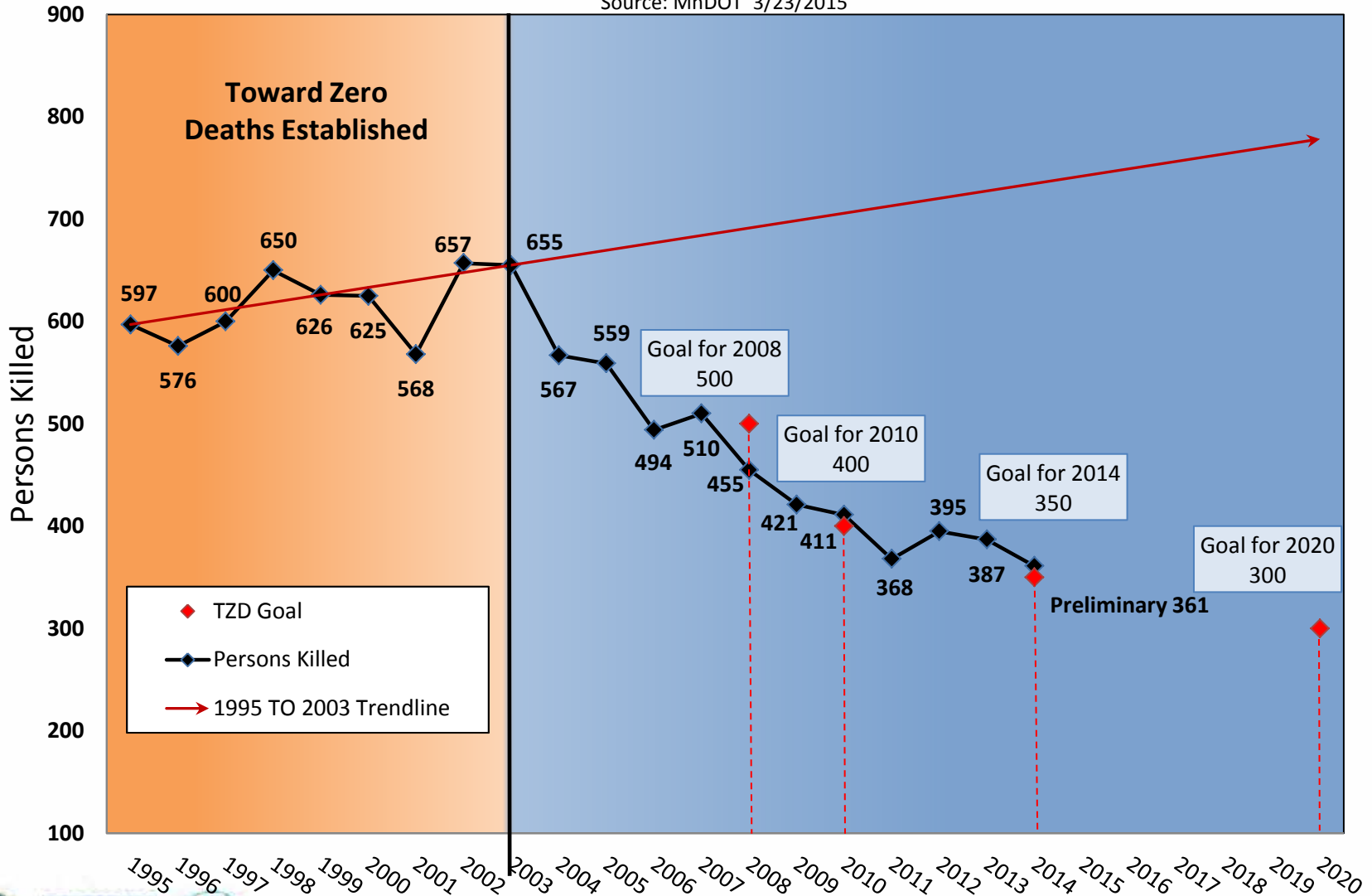
May 12, 2015



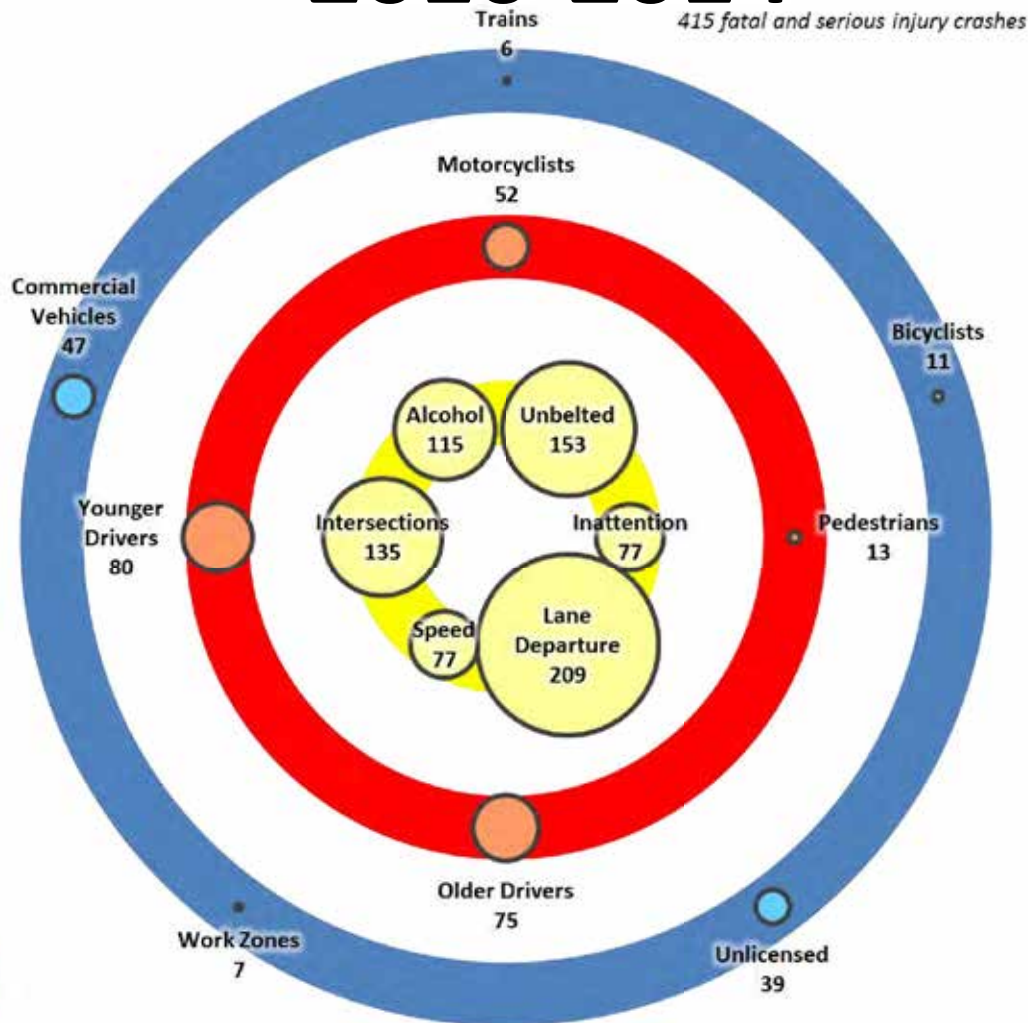


# Minnesota Roadway Fatalities

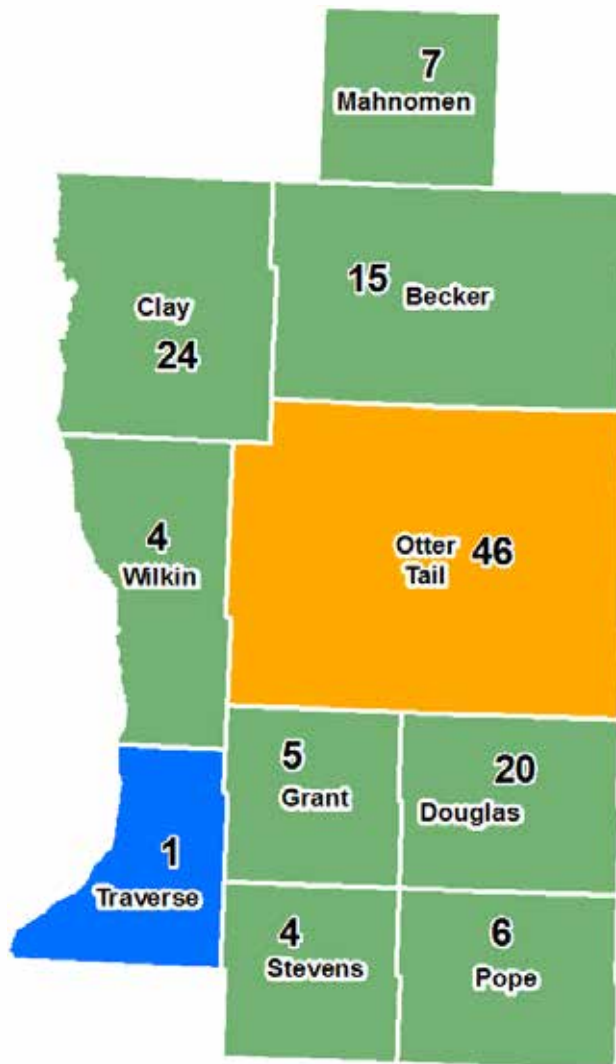
Source: MnDOT 3/23/2015



# West Central Region Focus Areas 2010-2014



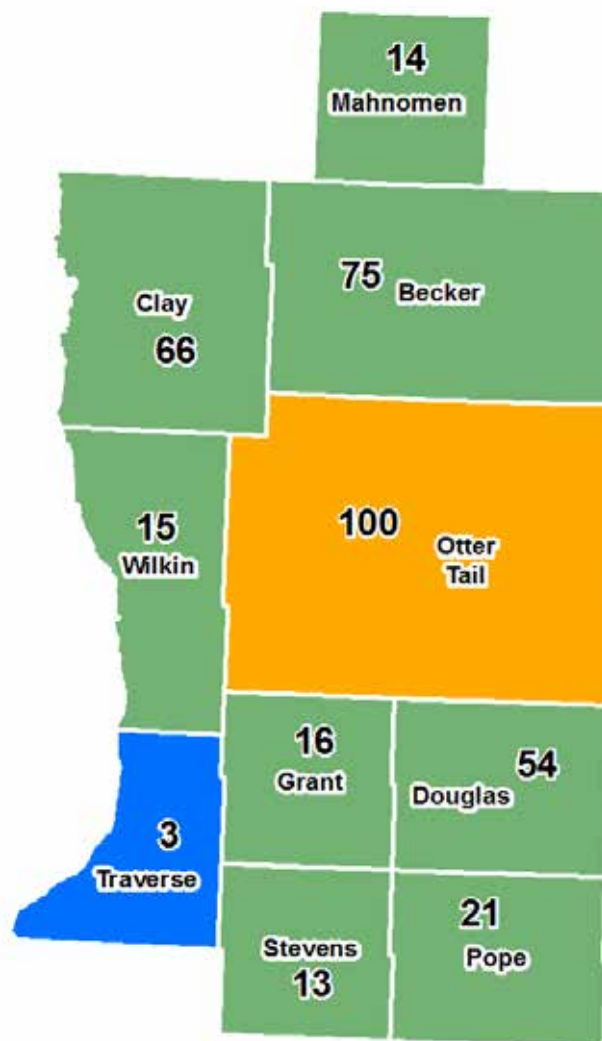
# 2010-2014 Fatalities



Region Totals	
2010	35
2011	21
2012	33
2013	23
2014*	20

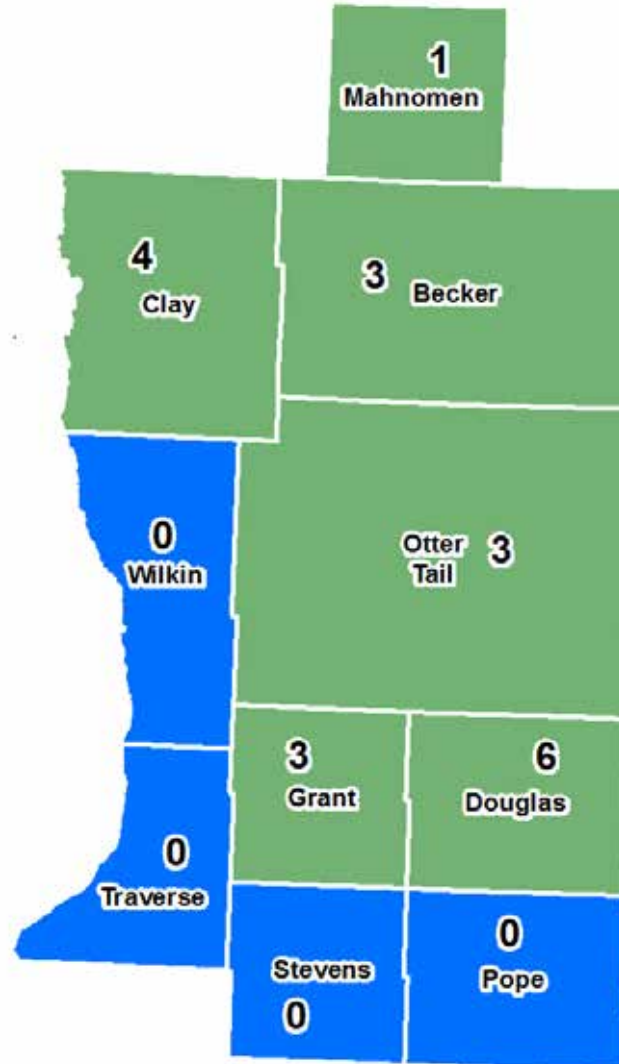


# 2010-2014 Serious Injuries



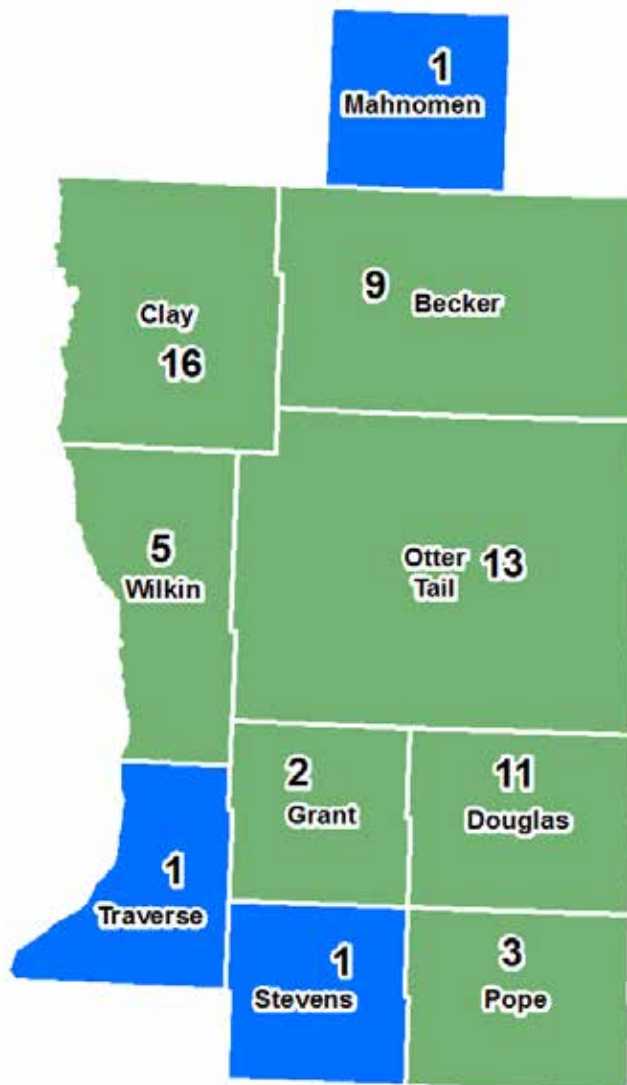
Region Totals	
2010	69
2011	78
2012	94
2013	74
2014*	62

# 2014 Fatalities\*



\*2014 data are preliminary

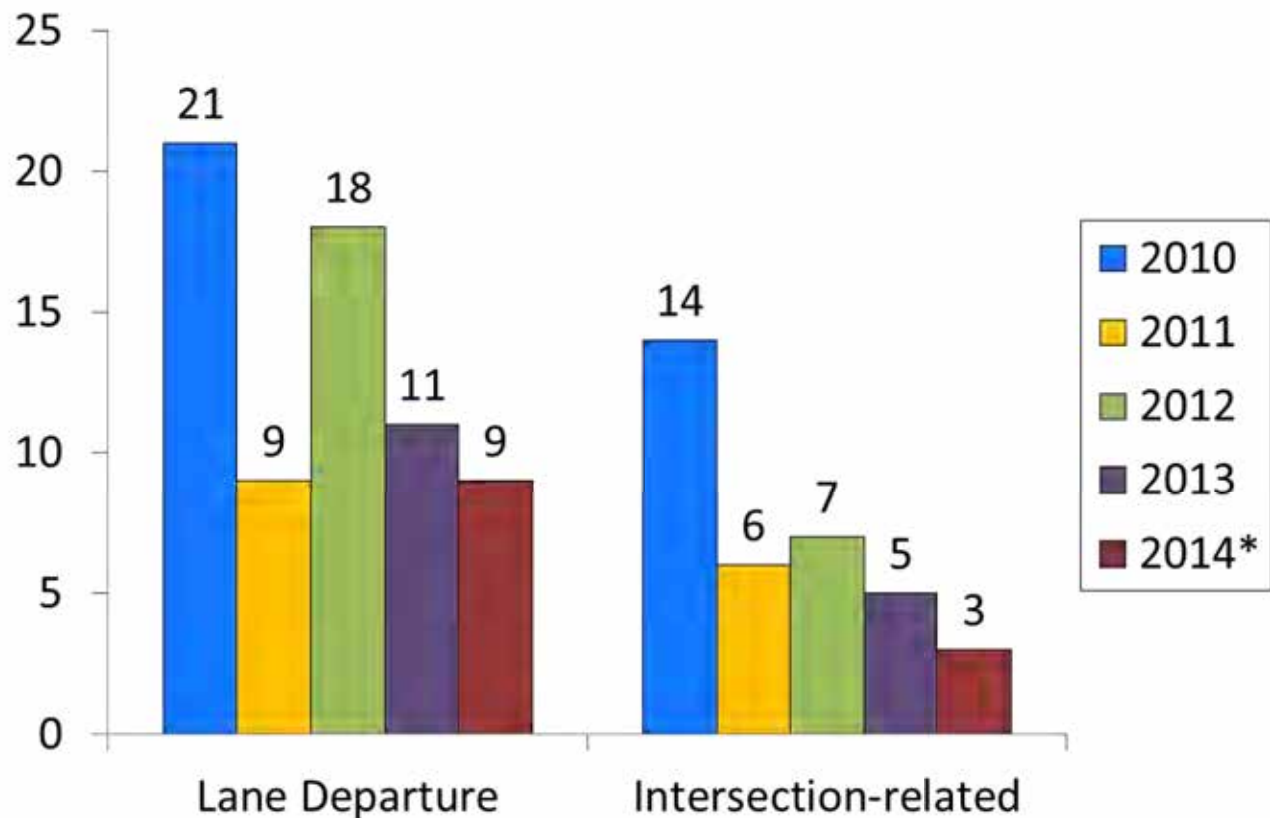
# 2014 Serious Injuries\*



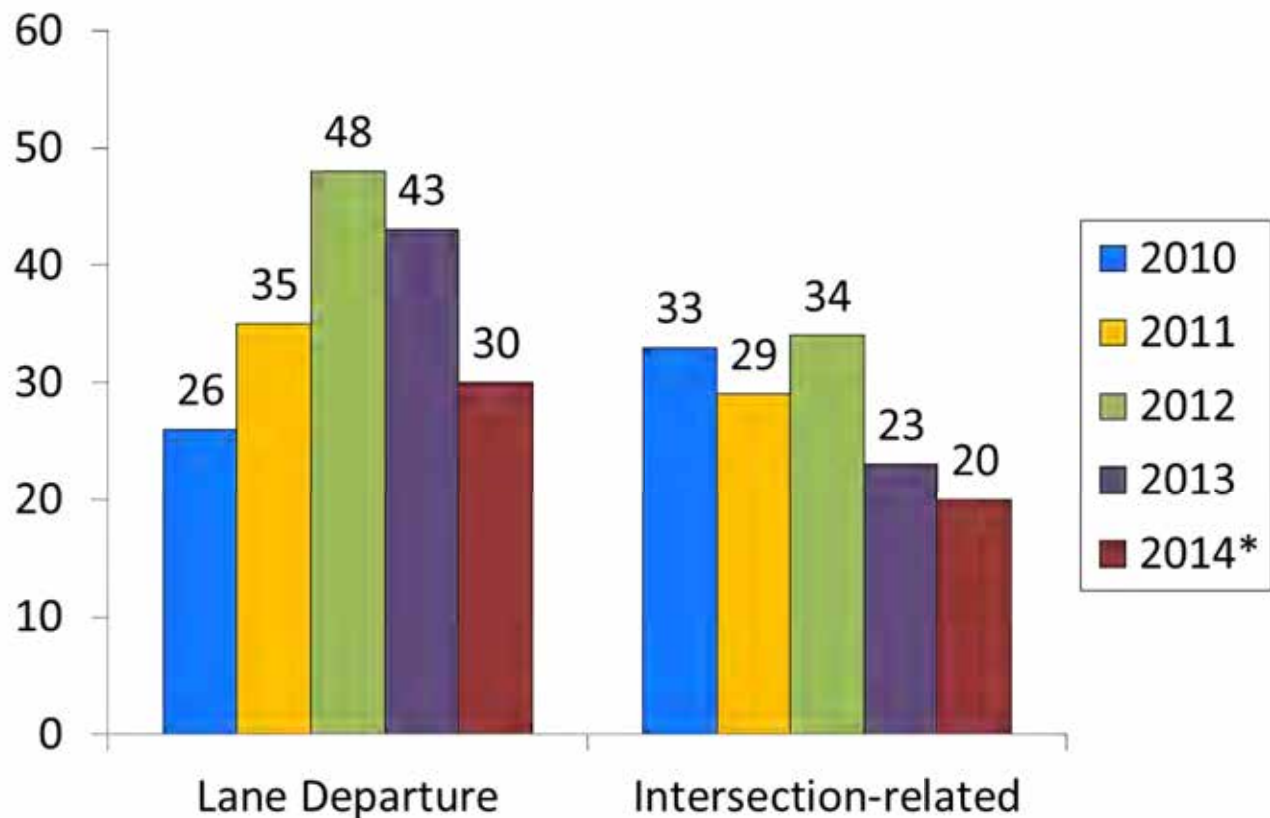
\*2014 data are preliminary



# 5-year Progress in Fatalities



# 5-year Progress in Serious Injuries



# Case Study

At your tables there are maps

- Vehicle 1 west bound on 26 and vehicle 2 was north bound on Hwy 9
- Daytime
- Wet roads
- 26 has a stop at 9















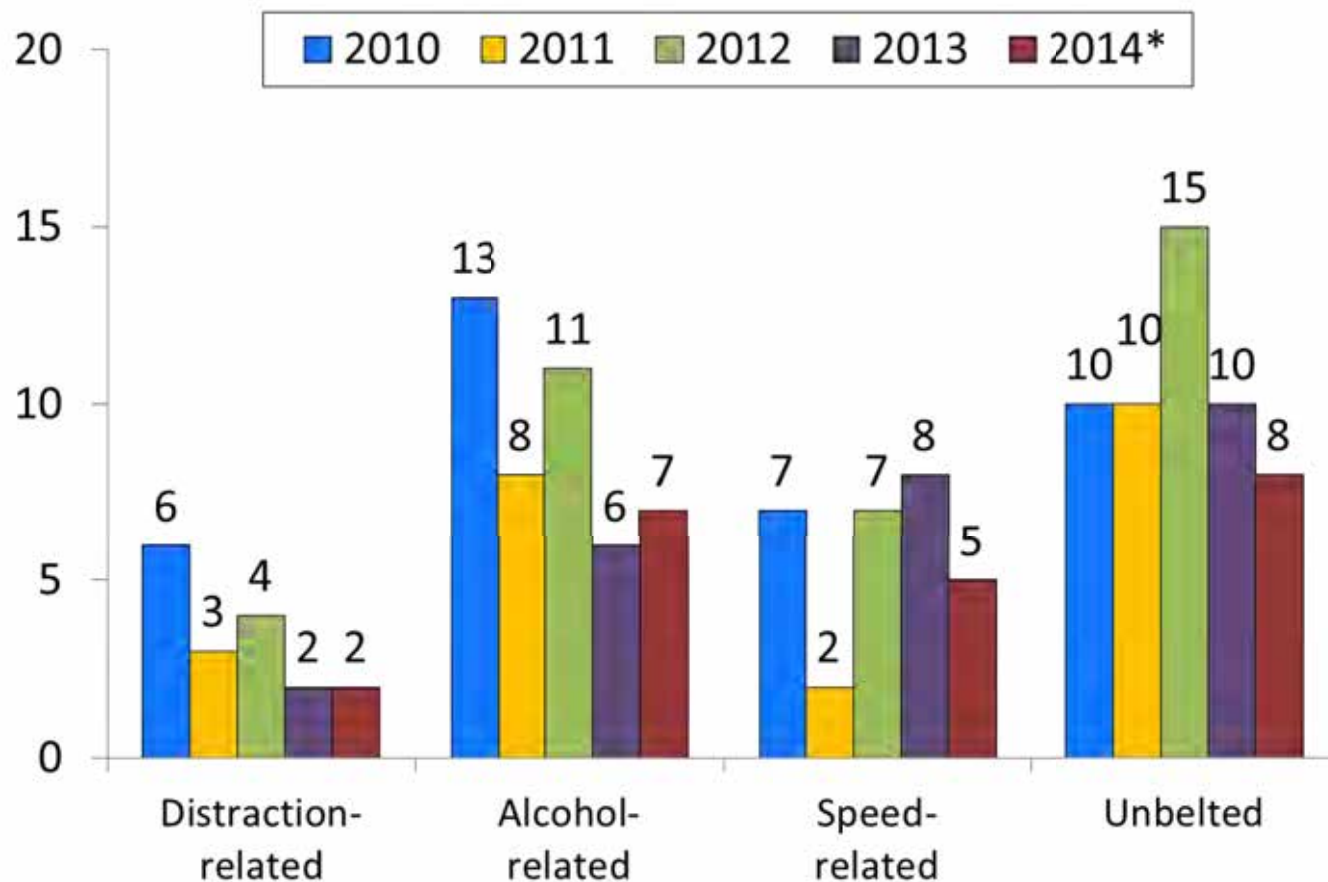




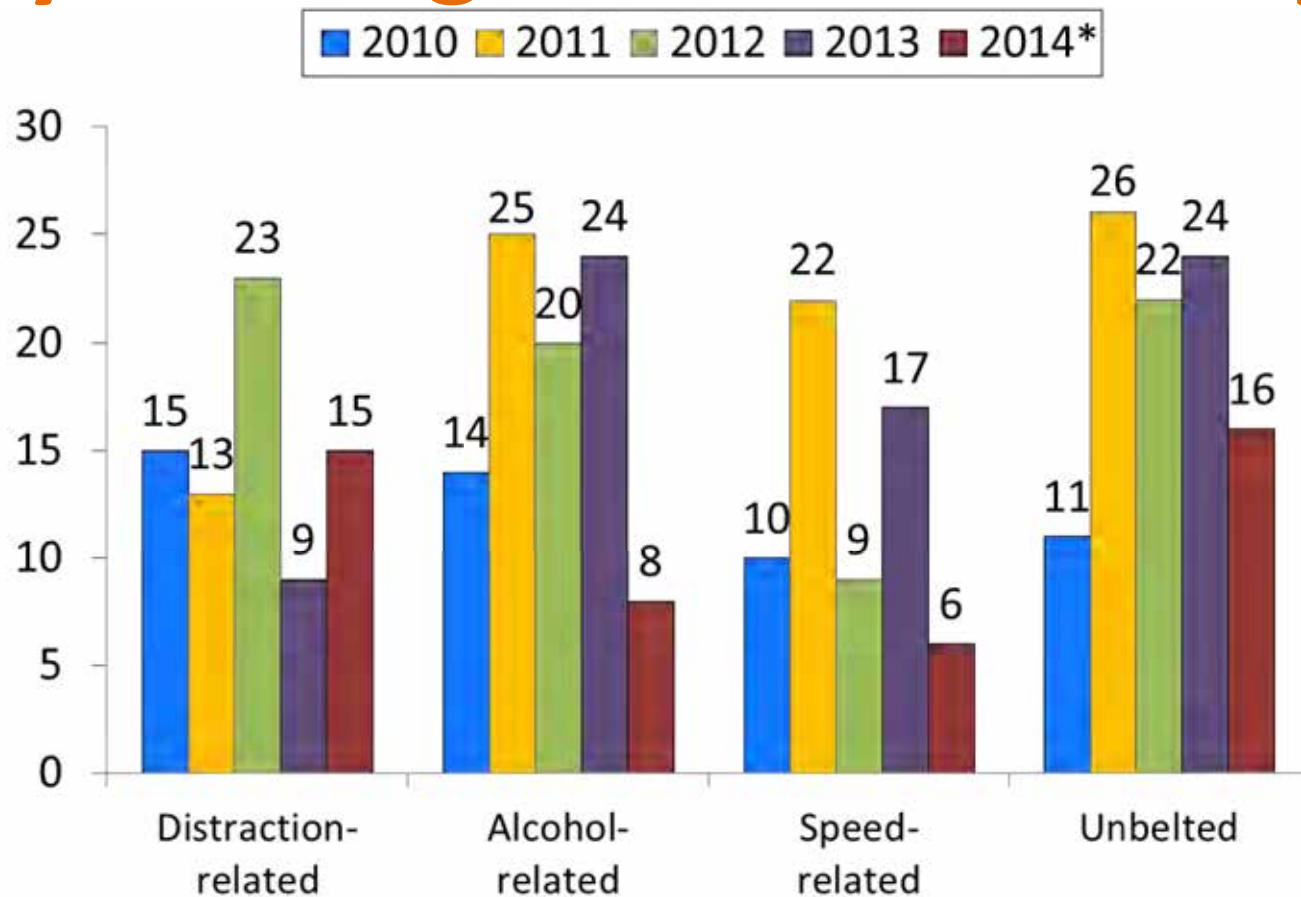
# Possible Mitigation Strategies

- What options exist to respond to this type of crash?

# 5-year Progress in Fatalities



# 5-year Progress in Serious Injuries





# Key Findings for 2014\*

## West Central Region

- Males 20-24 are overrepresented in serious injury and fatal crashes, followed most closely by males 15-19 and 45-49.
- 1.7 fatalities per month
- 5.2 serious injuries per month
- Alcohol-, speed- and unbelted-related crashes are decreasing.

# Key Findings for 2014\*

- Successes!
  - 4 Counties with ZERO fatalities
  - 3 Counties with ONE serious injury
- Challenges
  - Distraction remains a challenge

# Resources

- **Minnesota Toward Zero Deaths**
  - <http://www.MinnesotaTZD.org>
- **Strategic Highway Safety Plan**
  - <http://www.dot.state.mn.us/TrafficEng/Safety/SHSP>
- **Minnesota Crash Facts**
  - <https://dps.mn.gov/Divisions/OTS>



## Senior Driver Panel

*Susie Palmer, OTS*

*John McKagan, DVS*

*Gene Ladoucer, AAA*

*Tom Swenson,  
MnDOT*



# Older Drivers

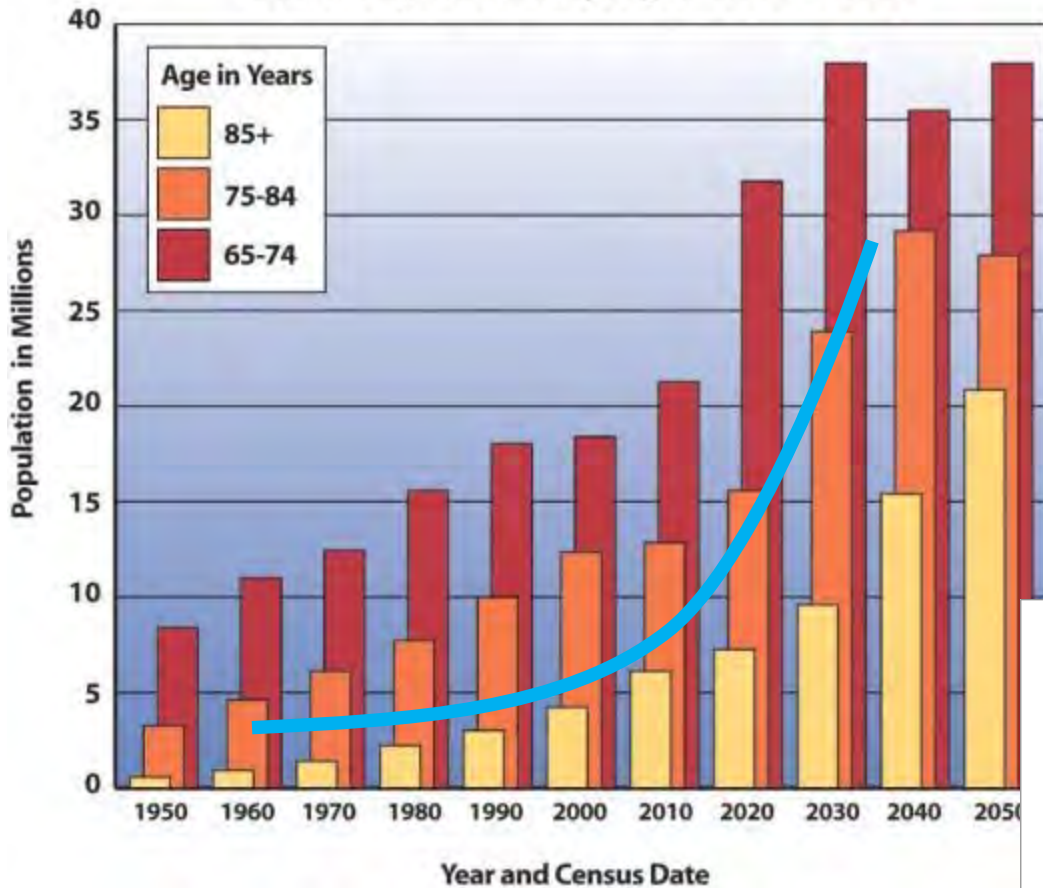
*Tools to address the challenges  
of staying mobile while aging*



Gene LaDoucer  
AAA-The Auto Club Group



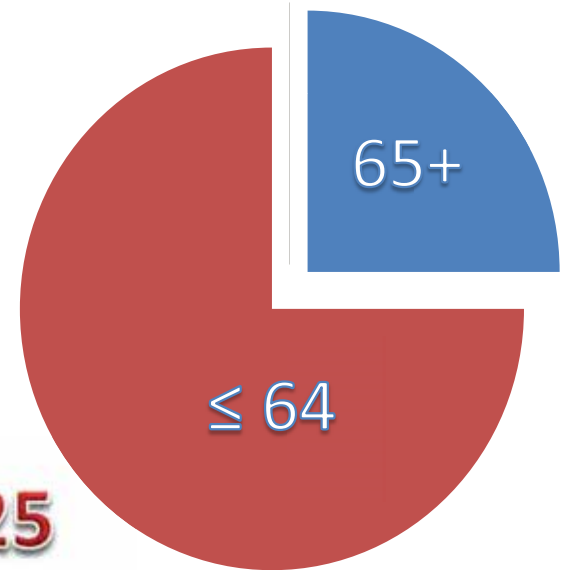
## Older Population by Age: 1950 - 2050



'The only thing worse than getting older is not getting older!'

'Getting old stinks...  
but it beats the alternative.'

**By 2025**

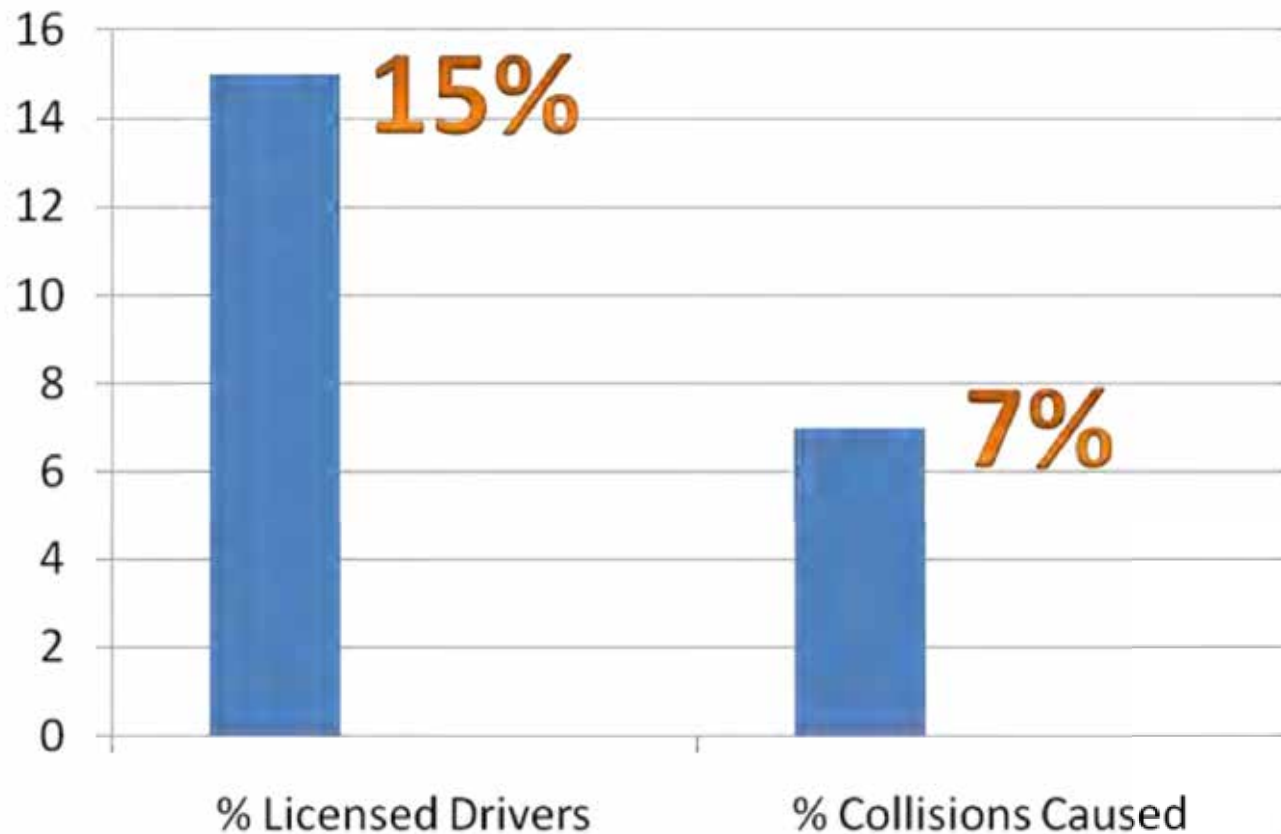




# Strengths

- Experience
  - Been there, done that (they anticipate risks)
- Good habits
  - Seat belt use - high
  - Technology use - low
  - Speed - low
  - Impairment - low (except prescription meds)
- Self-Regulate
  - Limit driving at night
  - Avoid driving in bad weather
  - Eliminate left turns/backing; avoid busy intersections/highways

# Underrepresented in At-Fault Crashes



Source: RAND Corporation

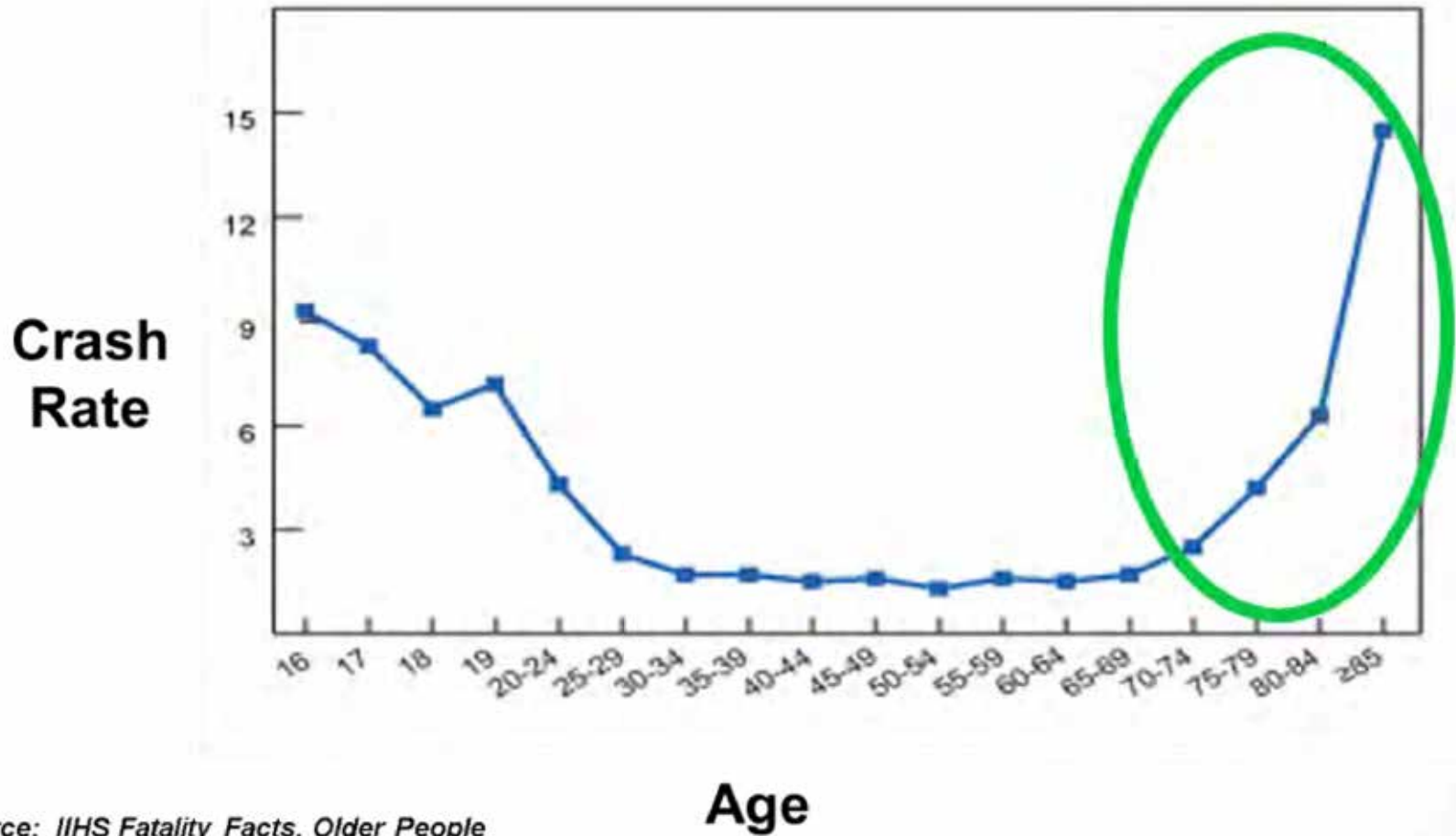
# Weaknesses

- **Visual decline** - peripheral, contrast, glare, moving objects
- **Cognitive decline** – short/long term memory, reaction time
- **Physical decline** – strength, flexibility, arthritis
- **Increased fragility**

All occur in different ways and at different times for each person.



# High Fatality Rates



Source: IIHS Fatality Facts, Older People

# Lifelong Mobility

- Seniors have a strong desire to keep their cars and independence.
- Loss of mobility doubles the risk of depression.
- AAA goal = Keep seniors driving as long as safely possible.



# AAA Resources

## SeniorDriving.AAA.com

- Website contains tips and tools to:
  - Evaluate driving abilities
  - Understand mind and body changes
  - Improve driving skills
  - Maintain mobility and independence
  - Make transition from driver to passenger, if needed



# AAA Resources

The screenshot shows the top portion of the AAA Senior Driving website. At the top left is the AAA logo, followed by the text "SENIORDRIVING.AAA.COM" and "HELPING SENIORS DRIVE SAFER & LONGER". To the right is a search bar with the word "SEARCH" in a red button. Below this is a navigation bar with buttons for "HOME" and "Join AAA". A main menu contains several categories: "Evaluate Your Driving Ability", "Understanding Mind & Body Changes", "Improve Your Driving Skills", "Maintain Mobility & Independence", "Tools & Additional Resources", and "Resources for Family & Friends". The main content area features a large blue box with the heading "KNOW THE LICENSING LAWS IN YOUR STATE" and a paragraph explaining that many states have enacted special provisions for older drivers. A "LEARN MORE" button is located below the text. To the right of the text is a photograph of an older man and woman standing next to a silver car. Below this are four smaller thumbnail images with captions: "SMART FEATURES FOR OLDER DRIVERS", "DOES YOUR CAR FIT YOU?", "KNOW THE LICENSING LAWS IN YOUR STATE", and "GET A DRIVING HEALTH CHECK UP".

CHANGE TEXT SIZE A A A

## ROADWISE RX



Roadwise Rx is a free online tool that provides confidential, individualized feedback about users medication side effects and interactions, highlighting how these effects may impact safe driving abilities.

[Learn more >](#)

## FIND YOUR PERFECT FIT



Attend a free CarFit clinic, where trained technicians and an occupational therapist can help you find your ideal vehicle "fit" for maximum comfort and safety. It takes only about 20 minutes. Find out if CarFit is available near you.

[Learn more >](#)

## TAKE A REFRESHER COURSE



Increase your confidence and awareness behind the wheel with AAA's Driver Improvement Course. Contact your local AAA club to see if classroom or online courses are offered in your area.

[Learn more >](#)

# AAA Resources

## Roadwise Review (online and DVD)

- Interactive Driving Evaluation
  - ✓ manual abilities
    - strength, flexibility, reactions
  - ✓ visual abilities
    - useful field of view
    - high and low contrast visual acuity
    - visualization of missing information
    - visual search
  - ✓ cognitive abilities
    - working memory
    - manage multiple distractions/stimuli



# AAA Resources

## ***Smart Features (online and print)***

- Factors for evaluating a current or future vehicle:
  - ◆ Safety features, such as seat belts and the positions and types of airbags
  - ◆ Ergonomics, or design features, that reduce operator fatigue and discomfort, such as adjustable pedals and seats
  - ◆ Comfort, such as ease of entry and exit, leg room and size of control buttons
  - ◆ Value, which incorporates the total cost of ownership including price, operating and maintenance costs, as well as reliability, fuel economy and resale value



# AAA Resources

## Find a vehicle tailored to fit your needs

First, select vehicle features that help you adapt to your individual considerations. **Select all that apply**

Limited knee range of motion; hip or leg pain



Click to view features

Short-statured or overweight



Click to view features

Arthritic hands; diminished motor skills



Click to view features

Limited upper body range of motion: back, neck, shoulders, arms



Click to view features

Diminished vision



Click to view features

Cognitive decline or reduced mental capabilities



Click to view features

VIEW VEHICLES

PRINT FEATURES

# AAA Resources

## View the makes and models that are a best fit for your needs

### Vehicles listed include the following features you selected:

**Limited Leg Strength or Range of Motion; Hip or Leg Pain** - Comfortable seats, Adjustable foot pedals

**Short-Statured or Overweight** - Tilt and telescoping steering wheel

**Arthritic Hands; Diminished Motor Skills** - Thick steering wheel, Keyless ignition

**Limited Upper Body Range of Motion: Back, Neck, Shoulders, Arms** - Large, wide-angle mirrors

**Diminished Vision** - Larger audio and climate controls

**Cognitive Decline or Reduced Mental Capabilities** - High-contrast instrument panel

Make and Model ▼	MSRP	Fuel Economy (MPG)
Chrysler 300	\$29,595 - \$49,625	18CTY / 27HWY
Chrysler Town & Country	\$30,930 - \$40,585	17CTY / 25HWY
Dodge Charger	\$27,590 - \$47,950	18CTY / 27HWY
Nissan Pathfinder	\$30,115 - \$44,795	14CTY / 20HWY
Volkswagen Routan	\$27,840 - \$45,100	17CTY / 25HWY

# AAA Resources

## **CarFit (a community traffic safety program)**

- Program developed by AAA, AARP and the American Occupational Therapy Association (AOTA).
- Quick, yet comprehensive review of vehicle 'fit'
- Improves driver safety:
  - ◆ Proper use/adjustment of safety features
  - ◆ Improved comfort
  - ◆ Better control & increased confidence
  - ◆ Promotes conversations between older drivers and their families



# How things have changed

- Adjustable shoulder & lap belt
- Push-button ignition
- 8-way adjustable electric seats
- Rain-sensing wipers
- Electric, heated side view mirrors
- Adjustable brake, accelerator pedals
- Tilt, telescoping steering wheels
- Auto-on headlights
- Headlight dimmer on turn signal
- Bluetooth, Wi-Fi, GPS, ABS, ESC etc.



Many can lead to more comfortable and safe driving,  
if understood and used properly.

# AAA Resources

## CarFit (a community traffic safety program)

Trained technicians use a 12-point checklist to evaluate:

- Proper seat belt use/positioning
- Distance between breastbone (or chest) and the air bag
- Line of sight above steering wheel
- Proper positioning of head restraint
- Neck mobility, mirror settings for checking vehicle's blind spots
- Ability/difficulty using controls (ignition, signals, headlights etc.)
- Final step is a conversation with an Occupational Therapist (OT)



Helping Mature Drivers Find Their Safest Fit



# CarFit Requirements

- Committed volunteers
  - ◆ Anyone can volunteer; most come from health or traffic safety
- Training
  - ◆ Technicians: 4-hours + participate in one event
    - Coordinators can train technicians
  - ◆ Coordinators: 4-hours + plan/coordinate one event
    - Two CarFit instructors serving the region
- Occupational Therapist
  - ◆ OTs must also receive training
  - ◆ Online module available
- Basic support materials
  - ◆ Printed information materials, clipboards, rulers etc.
  - ◆ Signs, cones, tables, chairs etc.
  - ◆ 'Gadget' kit

# CarFit Challenges

- Committed volunteers
  - ◆ Sound familiar?
- Older drivers skeptical of purpose
  - ◆ Requires education before events
    - AAA resources mentioned earlier
- Suitable location/weather
  - ◆ Limited use, familiar parking lot
  - ◆ Senior centers/retirement communities
  - ◆ Churches
  - ◆ Hospitals/health care centers



# Thank you!

- Contact information:  
Gene LaDoucer  
701-893-3759  
eladoucer@aaand.com

# DVS is made aware of At Risk Drivers by:

- Medical community
  - **Driving Assessments**
- Family
- Neighbors
- Law Enforcement
- Courts



# What you should know:

- Doctors are protected under statute 171.131 from liability, civil or criminal if they report a person that isn't physically qualified to drive.
- Family members are protected under the Department of Public Safety's data privacy act. DVS will not give out their information to the driver unless ordered by the courts.
- Anyone else DVS has to give out the information to the driver.



# Once DVS receives information, action taken can be:


- Cancel privileges
  - Only from doctor
- Set up for an evaluation interview
  - Usually seen within 2-3 weeks





# Evaluation Interview

## Meeting with a Driver Evaluator:

- Involves a review of medical history
  - A review of the driver's driving record
  - Reviews reported information with the driver
  - Performs a short screening of driving laws
  - May discuss with family, if available
- 
- A silhouette of a tree is positioned on the right side of the slide, set against a background of a sunset or sunrise. The sky transitions from a bright orange and yellow at the bottom to a deep purple and blue at the top. The tree's branches are dark and detailed, extending towards the top right corner of the frame.

# Decision:

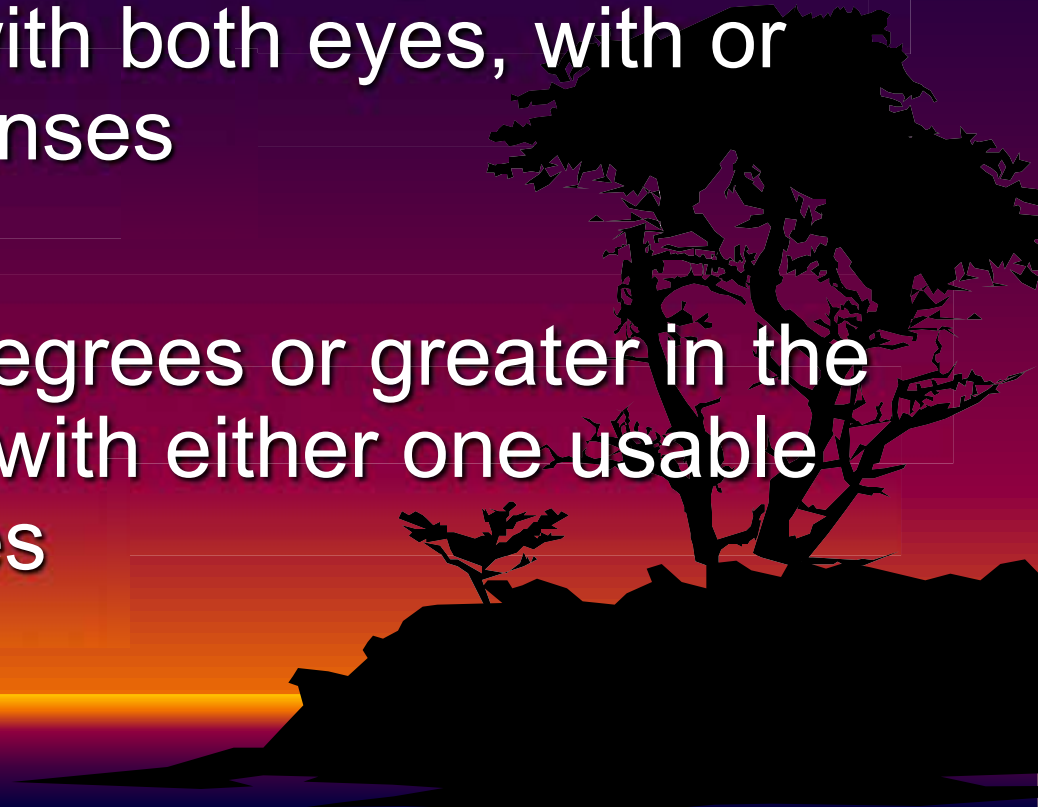
- Evaluator may require:
  - Vision statement
  - Physician statement
  - Knowledge test
  - Road test
- Driver is given 30 days to comply



# Vision Requirements

## To Qualify For License:

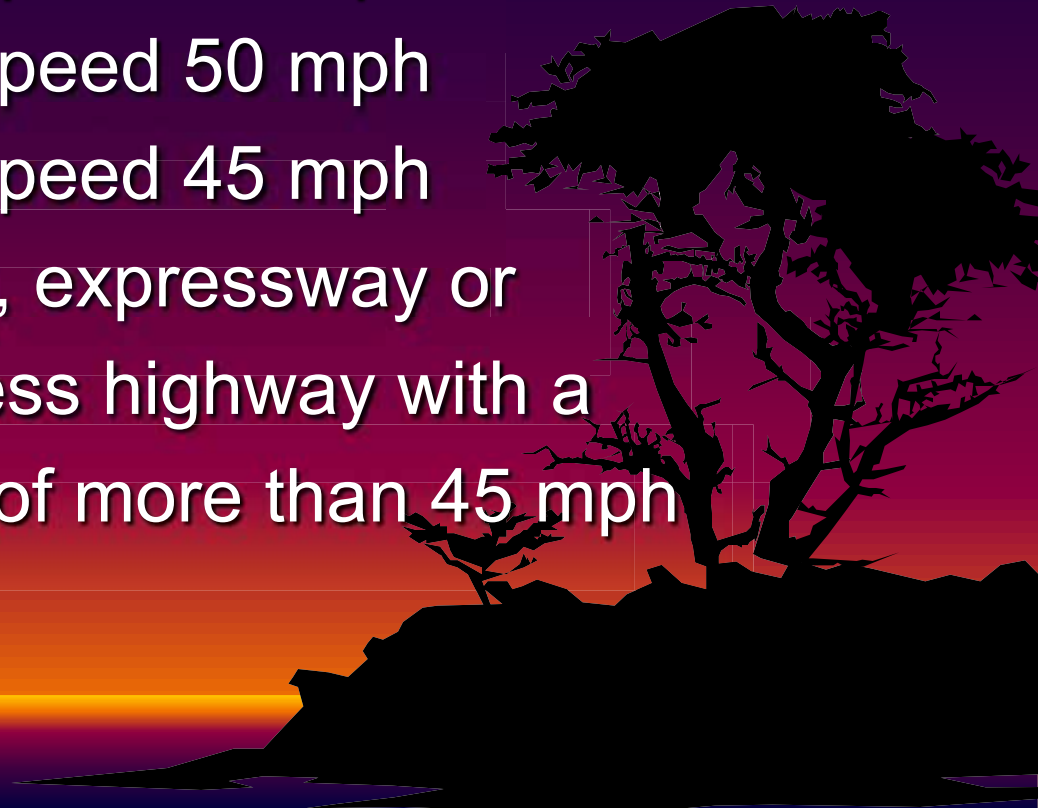
- Visual acuity of 20/40 or better, with either one usable eye or with both eyes, with or without corrective lenses
- Visual field of 105 degrees or greater in the horizontal diameter with either one usable eye or with both eyes



# Vision Restrictions

## When Vision Acuity Is:

- 20/50 = Maximum speed 55 mph
- 20/60 = Maximum speed 50 mph
- 20/70 = Maximum speed 45 mph  
= No freeway, expressway or limited access highway with a speed limit of more than 45 mph





# Other Restrictions

## In Addition To Restricted Speeds:

- Certain roads
- Area limitations
- Daylight only
- Additional mirrors



# Physician Statement

Is driver medically qualified to drive?

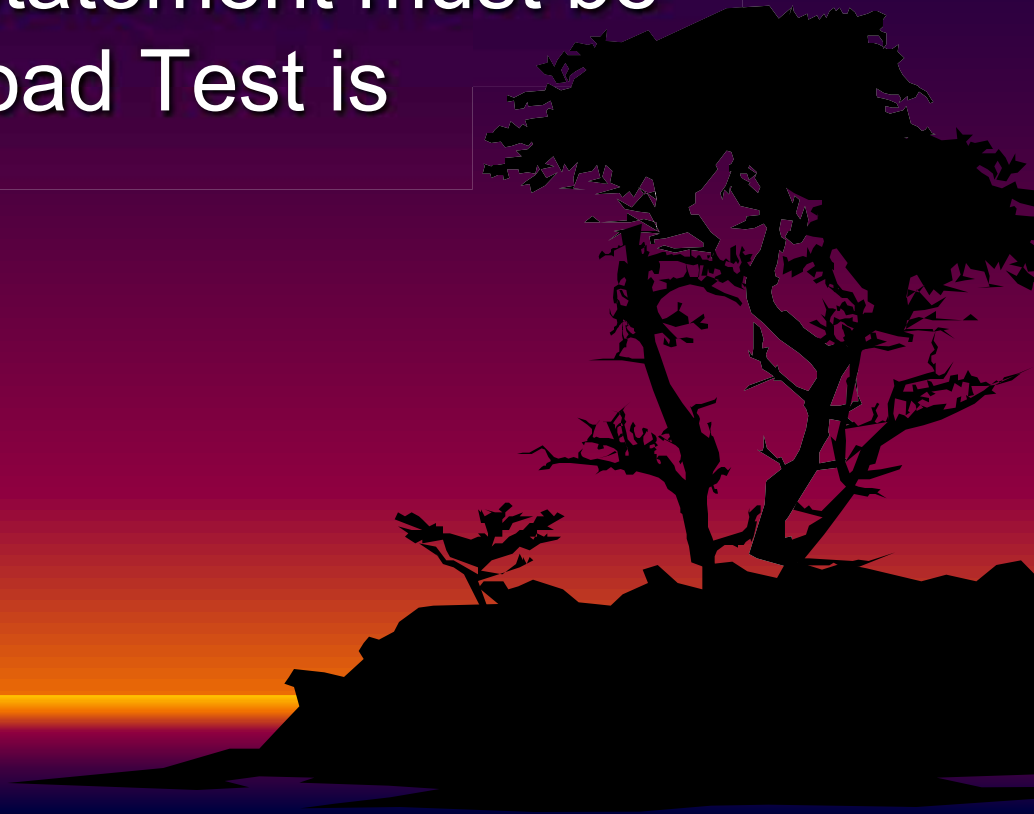
## Possible Restrictions:

- Daylight Only
- No Freeways
- Distance allowed
- Miles per hour
- Certain roads
- Adaptive equipment



# Vision & Physician Statements

- When required, the vision statement and/or physician's statement must be submitted before Road Test is administered.



# Knowledge Test

## Purpose:

- To evaluate a driver's knowledge and understanding of Minnesota traffic laws and road signs.





# Road Test

## Driver is evaluated on:

- Obeying rules of the road
- Ability to drive a motor vehicle safely under normal traffic conditions
- Awareness of risks and proper reactions
- Ability to use good observation skills



# Equipment Demonstration

## Locate and demonstrate the operation of:

- Seat adjustment
- Seat belt
- Emergency (4-Way) flashers
- Windshield wipers
- Headlights – Low beam and High beam
- Parking (Emergency) Brake
- Defroster & Fan controls
- Horn
- Mirror Adjustment
- Proof of Vehicle Insurance



# Road Test

## Process:

- Test attempts & fees
- Driver Training Requirement
- Area Special Test
- Cancellation
- Provide suggestions for alternate modes of transportation





# Senior Driver Panel

Tom Swenson  
MnDOT

We all have a stake in **A**  **B**





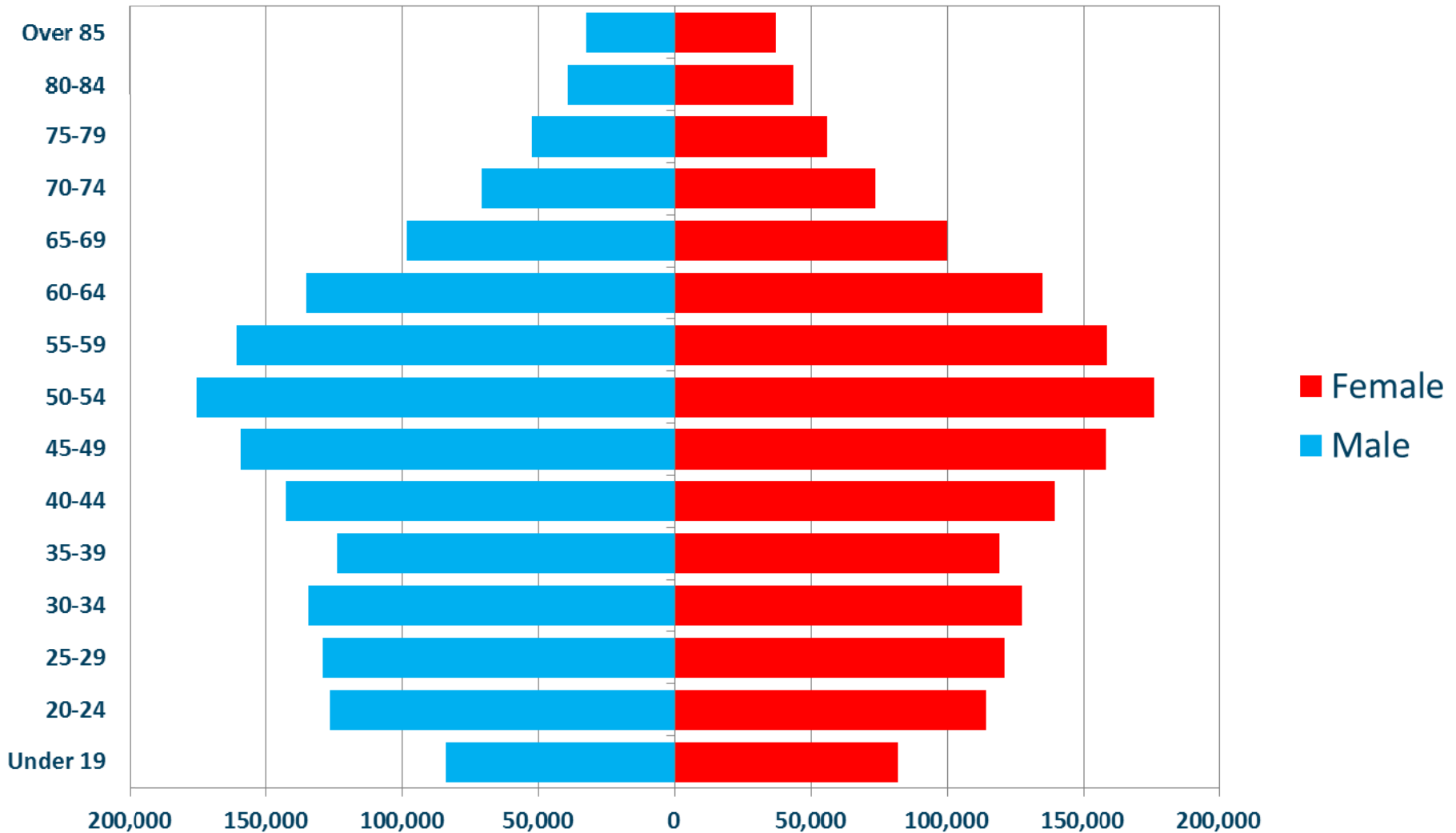
# Goals

- ▶ To eliminate traffic deaths on Minnesota roadways => TZD
- ▶ Provide a transportation system that meets the needs of all users



# Minnesota Licensed Drivers by Age and Sex, 2011

SOURCE: <http://www.fhwa.dot.gov/policyinformation/statistics/2011>



What is good for older drivers is generally good for all drivers.



# Tools

- ▶ Improvements to Highway Infrastructure (Traditional)
  - Signs
  - Signals
  - Pavement Markings
  - Intersection & Roadway Design
- ▶ Vehicle Advancements (Rapid)
- ▶ Cultural Change (Slow)





# Search for Better Materials

- ▶ Research
- ▶ Manufactures continually working on new products
- ▶ MnDOT test before use
- ▶ Provision use on limited number projects
- ▶ E.g. Pavement Marking Test Deck (NTPEP)
  - July 2013
  - 3 year test
  - 85 products
  - 1288 lines (427 wet recoverable)
  - Bituminous and Concrete





# Increased Visibility

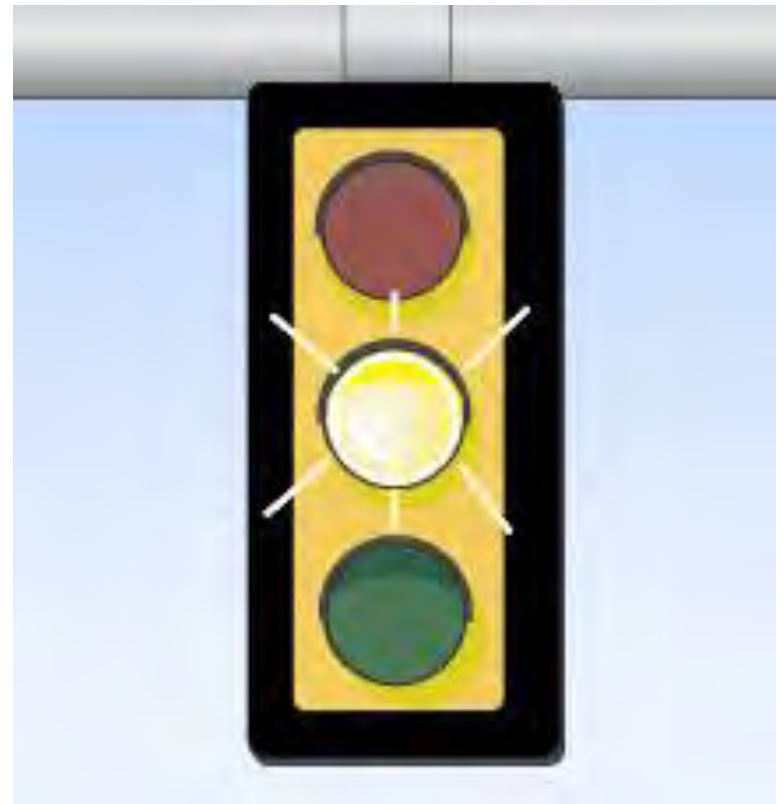
- ▶ Larger Signs
- ▶ Color and Contrast
- ▶ Open Lettering Study in 2014





# Signal improvements

- ▶ LED signals
- ▶ Background shields
- ▶ Left turn signal phases
- ▶ All-red clearance intervals
- ▶ Multiple Signal Heads





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120543  
DATE:  
9/11/2012

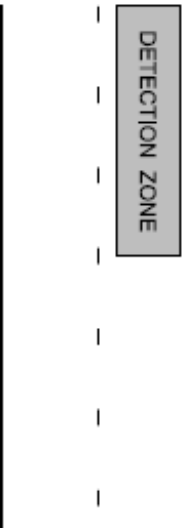
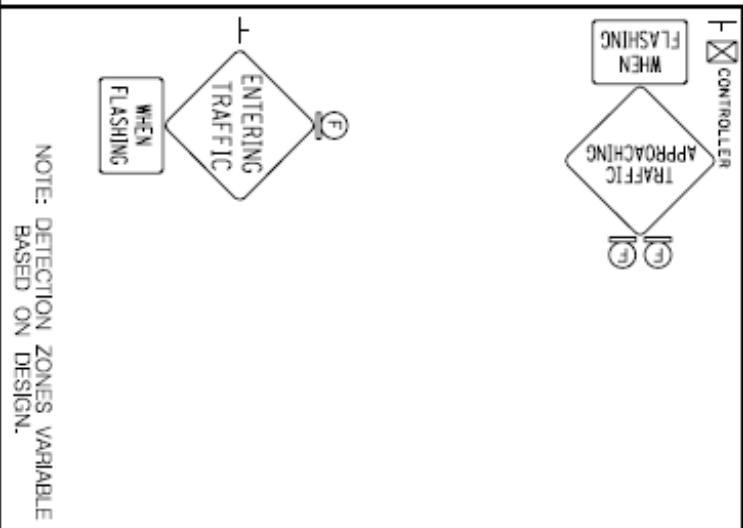
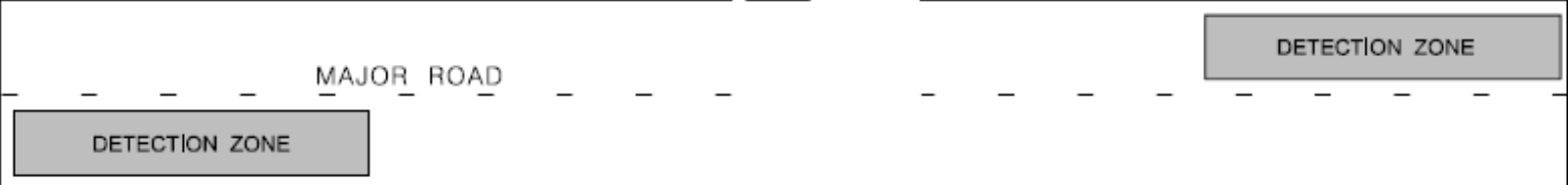
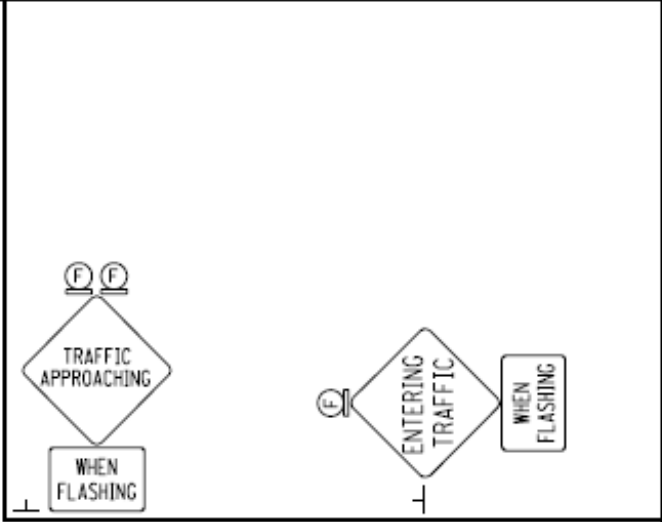


PARSONS  
BRINCKERHOFF



RICHS CONCEPT LAYOUT  
4-WAY INTERSECTION

EXHIBIT  
1-A





TRAFFIC  
APPROACHING

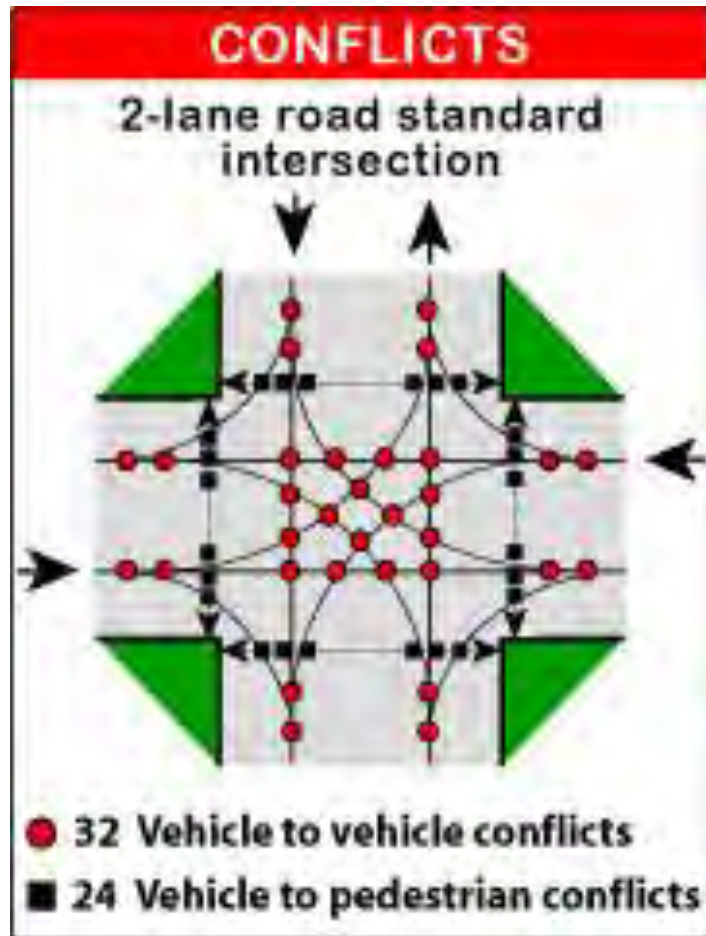
WHEN  
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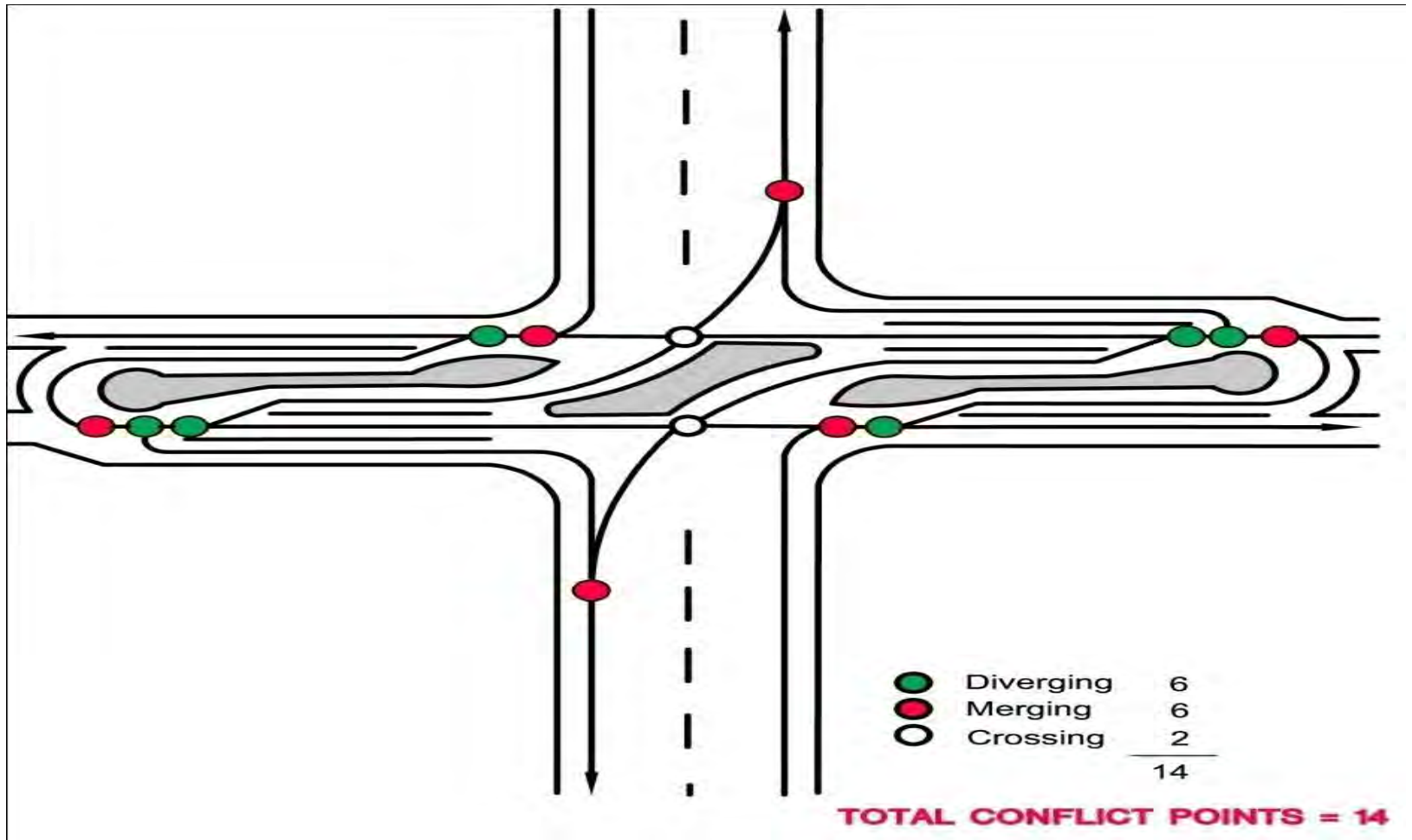


# Reduce Conflict Points





# Reduced Conflict Intersection



# Getting the Word Out

- ▶ Older Driver Workshops
- ▶ Table top demonstrations
- ▶ State Highway Map
- ▶ State Fair Outreach
- ▶ Partner Organizations
- ▶ Public Project Meetings



# Vehicle Advancements

## ▶ Driver Assist Availability

- Lane departure
- Blind spot detection
- Collision avoidance, etc.
- Vehicle to Vehicle Communication



## ▶ Automated Vehicles



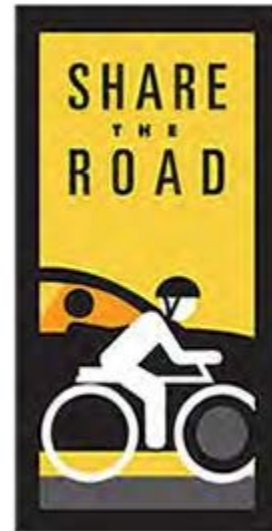
# Self Driving Car





# Transportation Alternatives

- ▶ Mobility programs
  - For those who don't drive



- For those who don't want to drive.
- <http://www.dot.state.mn.us/sharetheroad/index.html>



# Useful Resources Related to Older Drivers

Office of Traffic Safety

Minnesota Department of Public Safety



Online access to statewide community resources for seniors, their families, and caregivers.

Need help finding assistance with day-to-day things like transportation or meals? The Senior Section of MinnesotaHelp.info will help seniors, their families, and caregivers focus on finding the help they need.



A One Stop Shop for Minnesota Seniors

Start a Search →

### Popular Search Topics

- [Adult Day Services](#)
- [Assistive Technology](#)
- [Caregiver](#)
- [Consumer Directed Community Supports \(CDCS\)](#)
- [Death and Dying](#)
- [Environment / Conservation](#)
- [Financial Help](#)
- [Food Assistance and Other Nutrition](#)
- [Grandparents Raising Grandchildren \(Kinship Caregivers\)](#)
- [Help finding the right resource](#)
- [Help in Your Home](#)
- [Housing](#)
- [Legal and Advocacy Services](#)
- [Long Term Care Ombudsman](#)
- [Medical Centers and Services](#)
- [Medicare and other benefits](#)
- [Mental Health Services](#)
- [Nursing Homes](#)
- [Personal and In Home Safety](#)
- [Prescription drug help](#)
- [Senior Centers, Community Programs and Recreation](#)
- [Transportation](#)
- [Volunteering, Education and Jobs](#)
- [Wellness](#)

### → Take Me To...



#### DHS Licensing Information Lookup

DHS Licensing Information Lookup is an online tool Minnesotans can use to search for licensed programs' public information such as: child care, group homes and many other services for children and vulnerable adults. Many ways to search including name, license number or zip code.

#### MN Dept. of Health - Health Care Facility and Provider Database

This database offers information about Minnesota health care providers, including state registration and licensure status. Search by name county, city or type.

#### Caregiver Link

Information and services to help you care for an older adult (such as a parent, spouse, other

[www.seniorlinkageline.com/public/default.aspx?se=senior](http://www.seniorlinkageline.com/public/default.aspx?se=senior)

or call 1-800-333-2433

# Senior Link

Senior Link Home

Search

My Saved Plans

My Saved Searches

Sign in to View

Sign In



## Enter a Location

### Select a Location

Start by choosing a specific area where services are available. Next, select a topic(s) from the Launch a Search box.

Statewide

County

City

Zip

Address

Use this Location



## Pick a Topic

### Transportation

- Bus Services
- Door-to-Door
- Help paying for transportation
- Long Distance
- Transportation Information

Clicked on "Transportation" in Senior Linkage Line



24/7 Helpline: 1.800.272.3900

Find your chapter:   [search by state](#)

## Welcome to the Alzheimer's Association Minnesota-North Dakota Chapter

### Home

[About Our Chapter](#)

[ACT on Alzheimer's](#)

[Advocate](#)

[Areas We Serve](#)

[Champions at Work](#)

[Contact Us](#)

[Donate](#)

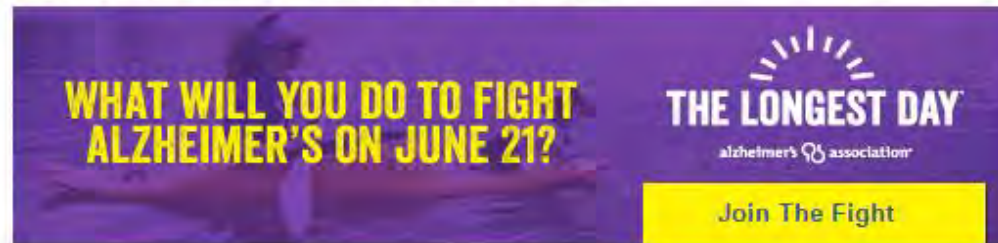
[Education Programs and Conferences](#)

[Helping You](#)

[Local News](#)

[Professionals in MN-ND](#)

[Special Events](#)



**WHAT WILL YOU DO TO FIGHT ALZHEIMER'S ON JUNE 21?**

**THE LONGEST DAY**  
alzheimer's association

[Join The Fight](#)

### WE CAN HELP

We offer many programs.  
Learn what's available in your area.

### CALL US ANYTIME - 800.272.3900

24 hours, 7 days a week.  
More about our Helpline.

### COMMUNITY HIGHLIGHTS



#### Twins Day

Join us for our 7th annual Alzheimer's Association Twins Day!



#### Walk to End Alzheimer's®

Registration is now open. Join or start a team today!

[www.alz.org/mnnd/](http://www.alz.org/mnnd/) Helpline: 1-800-272-3900

Click Life with ALZ, Then Caregiver Center

## Top Safety Concerns

Wandering

Home Safety

Dementia & Driving

Medication Safety

## Find your local Chapter

Zip code:   Search by state

## Get Weekly E-News

## Dementia & Driving Resource Center

**Driving demands quick reaction time and fast decision making** — because of this, a person with Alzheimer's will eventually become unable to drive. Dealing with the issue early on can help ease the transition.

### Read more

[Having the conversation](#)  
[Planning ahead](#)  
[Signs of unsafe driving](#)  
[Resources](#)

Watch how four families deal with different issues related to dementia and driving.



<http://www.alz.org/care/alzheimers-dementia-and-driving.asp>

Click Safety, then Dementia & Driving



# Family Conversations With Older Drivers

Information to help address sensitive subjects and foster meaningful conversations



## Expertise on Aging

The Hartford Center for Mature Market Excellence

Publications

Partnerships

We Need to Talk

Dementia and Driving

Comprehensive Driving Evaluations

Driving Wellness

## Supportive Family Conversations

Share: [f](#) [in](#) [t](#) [g](#) [e](#)

Because driving represents independence and freedom for most older adults, the idea of limiting or giving up driving can be a deeply personal and emotional issue. That's why The Hartford Center for Mature Market Excellence<sup>SM</sup>, together with the MIT AgeLab, created information to help families address sensitive subjects and foster meaningful family conversations about older driver safety.

For older drivers, limiting driving presents practical problems and can cause strong emotions, from sadness to anger. Family members themselves may feel angry, frustrated, or guilty about depriving their loved one of the freedom of driving. Despite these concerns, family members and older drivers alike prefer to keep these conversations "in the family".

[www.thehartford.com/mature-market-excellence/family-conversations-with-older-drivers](http://www.thehartford.com/mature-market-excellence/family-conversations-with-older-drivers)

**THE HARTFORD INSURANCE COMPANY CENTER FOR MATURE MARKET EXCELLENCE**

# Free Home and Driving Safety Guides

From the Hartford Center for Mature Market Excellence

click on Publications on prior Hartford site

- **You and Your Car: A Guide to Driving Wellness**
  - describes how drivers can stay safely on the road for a lifetime
- **Your Road Ahead: A Guide to Driving Evaluations**
  - Describes the benefits of having a comprehensive driving evaluation from an occupational therapist
- **We Need to Talk: Family Conversations with Older Drivers**
  - Provides families with easy-to-use, practical information to help them plan ahead and initiate productive conversations with older adults about driving safely
- **At the Crossroads: Conversations about Alzheimer's & Driving**
  - Helps families determine when it's time for loved one with dementia to stop driving and help them cope with driving cessation



Driving Safety →

Home

Aggressive Driving →

Bicycles →

Child Safety at  
Parents Central →

Distracted Driving →  
at [Distraction.gov](http://Distraction.gov)

Drowsy Driving →

Enforcement &  
Justice Services →

Impaired Driving →

Motorcycles →

Occupant  
Protection →

## Older Drivers



Getting older does not necessarily mean a person's driving days are over. But it is important to plan ahead and take steps to ensure the safety of your loved ones on the road. NHTSA offers free materials to help you learn more about how to recognize and discuss changes in your older loved one's driving.

Older Drivers



CHAT HELP



### Additional Resources

- ▼ Promoting older dr
- » Talking with Older D  
Driving
- » Video Toolkit on Me  
Older Drivers
- » Drive Well Toolkit: I  
Safety and Mobility

Driving while suffer

For law enforce

For medical person

Research

[www.nhtsa.gov/people/injury/olddrive/](http://www.nhtsa.gov/people/injury/olddrive/)

or

[www.nhtsa.gov/Driving+Safety/Older+Drivers](http://www.nhtsa.gov/Driving+Safety/Older+Drivers)

# NHTSA Resources on Older Road Users

- Physician's Guide to Assessing and Counseling Older Drivers
- Older Driver Highway Safety Program Guidelines
- Driving When You Have (A Stroke, Arthritis, Parkinson's, Sleep Apnea, Diabetes, Seizures, Cataracts, Glaucoma, and more)
- Traffic Safety Facts (Older Population)
- Safe Driving for Older Adults
- Driving Safety While Aging Gracefully
- Safe Mobility for Older People Notebook (DOT HS 808 853)
- NCSA Fact Sheet on Older People
- Older Drivers; Cues for Law Enforcement
- Stepping Out-Mature Adults Be Healthy, Walk Safety
- Adapting Motor Vehicles for Older Drivers
- Intersection Negotiation Problems of Older Drivers

## ADED Search by Category

---

### CDRS- Certified Driver Rehabilitation Specialists

Certified as a trained expert within the field a CDRS (Certified Driver Rehabilitation Specialists) work with people of all ages and abilities, exploring alternative transportation solutions for drivers with special needs.



### Driver Rehabilitation Specialists

Driver rehabilitation specialists work with people of all ages and abilities, exploring alternative transportation solutions for drivers with special needs.



---

### Mobility Equipment Dealers

Mobility Equipment Dealers provide

### Mobility Equipment Manufacturers

Mobility Equipment

[www.driver-ed.org](http://www.driver-ed.org)

**Association for Driver Rehabilitation Specialists**

Also have many Disabilities and Driving Fact Sheets





## Reports Statistics

Crash Facts

Impaired Driving Facts

County-Specific Fact Sheets

Traffic Death and Injury Maps

Expand All Collapse All

## REPORTS AND STATISTICS

### The Importance of Crash Data

Compiling accurate crash data is critical to OTS. Analyzing crash data allows officials and law enforcement to better address traffic safety issues — by understanding why and where crashes are occurring, and who is being impacted.

OTS produces documents concerning Minnesota's motor vehicle crashes. In addition, OTS houses the state's Fatality Analysis Reporting System analyst. Two major publications produced by OTS are [Minnesota Motor Vehicle Crash Facts](#) and the [Minnesota Impaired Driving Facts](#).

### What's New

#### High Risk Driver Analysis

Read the [summary](#) of a random telephone survey of Minnesotans for the purpose of examining the behaviors of Minnesotans with regard to a variety of risky driving behaviors. The results of this survey help to better understand the characteristics of high-risk drivers in the state in order to inform efforts to improve traffic safety.

#### Related

Minnesota County

National

Minnesota

Report a report from

Minnesota demogra

Minnesota

Minnesota

Minnesota Sanction

Question road sec

2015 Hig Letter

## Office of Traffic Safety Website

<https://dps.mn.gov/divisions/ots/Pages/default.aspx>

You may need to click on “Divisions” & then “Office of Traffic Safety” if it goes to DPS home page

/



# SENIOR DRIVING



## PROGRAMS:

If you have a Broadband connection, we recommend that you download the film of your choice. View these movies you will need a Windows Media Player. [Click here](#) to download the program.

For Microsoft Powerpoint Presentations, first download the program to your computer. Then double click on the file to view in the Powerpoint viewer. [Click here](#) to download Powerpoint viewer.

## The Conversation

Features several older drivers discussing their driving experiences and tips on how you can approach them on this delicate topic.

25:40 total running time

[DOWNLOAD](#)

[VIEW](#)

## Senior Self Assessment: Discussion Guide

[DOWNLOAD](#)

## Observing Seniors: Discussion Guide

[DOWNLOAD](#)

## PowerPoint Presentation

[DOWNLOAD](#)

## The Key

A documentary about signs in the older driver and how family members and

50:35 total running time

[DOWNLOAD](#)

[VIEW](#)

National Road Safety Foundation

<http://nationalroadsafety.org/programs/senior-driving>

# Review of Websites

- **Office of Traffic Safety:**
- <https://dps.mn.gov/divisions/ots/reports-statistics/Pages/default.aspx>
- **Minnesota Alzheimer's Association:**
- <http://www.alz.org/care/alzheimers-dementia-and-driving>
- **Minnesota Senior Linkage Line:**
- [www.seniorlinkageline.com](http://www.seniorlinkageline.com) or 1-800-333-2433
- **National Highway Traffic Safety Administration:**
- <http://www.nhtsa.gov/people/injury/olddrive/> or
- <http://www.nhtsa.gov/Driving+Safety/Older+Drivers>
- **The Hartford Mature Market:**
- <http://www.thehartford.com/mature-market-excellence/family-conversations-with-older-drivers>
- **Association for Driver Rehabilitation Specialists:**
- [www.driver-ed.org](http://www.driver-ed.org)
- **AAA:**
- <http://dev.seniordriving.aaa.com/>
- **National Road Safety Foundation**
- <http://nationalroadsafety.org/programs/senior-driving>

**Susie Palmer**

[Susie.palmer@state.mn.us](mailto:Susie.palmer@state.mn.us)

651-201-7071

# Lunch & Exhibits





# Personal Impact Statement

*The Story of  
Kaylee Holte;  
a mother's  
perspective.  
- Lisa Ecker*





*The Story of Kaylee Holte;  
a mother's perspective.*

**(Video Clip)**





[www.clawsphotography.com](http://www.clawsphotography.com)

*The vehicle Kaylee was riding in the night  
of the crash.*







**“Don't ever take  
for granted what  
you have today  
because  
tomorrow it just  
might not be  
there!”**

*Lisa Ecker*

# Breakout Sessions

**Drive Sober in Clay County or Get Pulled Over**



*Photography by Marie Koplos*

## Wrap Up

*Jody Martinson,  
District Engineer,  
Minnesota  
Department  
of Transportation,  
District 4*



# TZD Success Factors



- Commitment to change American culture regarding traffic safety
- Collaboration with other traffic-safety advocates
- Promote best practices and lessons learned



## How can you be involved in TZD?

- Stakeholder breakfasts in person or online
- Annual statewide conference and/or regional workshops
- Regional TZD Steering Committee meetings, news conferences & special events
- TZD mailing list(s)
- Be a TZD Ambassador!



# TZD Statewide Conference

**October 29-30, 2015  
St. Cloud**



[www.minnesotatzd.org](http://www.minnesotatzd.org)

Why we do



# Goal: Zero Deaths

