

Annual Oklahoma Highway Safety Forum Norman, OK – April 21, 2014



Bill O'Leary - National Highway Traffic Safety Administration

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Background

- 30 year career with the Vermont State Police
- DUI Instructor
- Helped stand up the DRE Program
- 3 years in drug unit, specializing in Prescription Drug Fraud and Diversion
- Retired as the Commander of the Traffic Safety Section
- Currently EJS Program Manager for Impaired Driving Enforcement training



Until now, Drug Problem In US Addressed by Individual Agencies

➤ **Law Enforcement**

➤ **Government**

➤ **Highway Safety**

➤ **Prevention**

➤ **Treatment**

➤ **Toxicology**

➤ **Prosecution**

➤ **State Medical Boards/Orgs.**



Fight against opioid abuse in Oklahoma will take team effort

U.S. Senate Judiciary holds drug hearing in Rutland

Prescription Painkillers Seen as a Gateway to Heroin

"Addiction to heroin and other opiates — including certain prescription painkillers — is impacting the lives of Americans in every state, in every region, and from every background and walk of life — and all too often, with deadly results,"

"I've never seen in my lifetime, in this state, a law enforcement community more fully committed to prevention and treatment efforts as we have right now," Leahy said. "And I think we Vermonters ought to be proud of that."

"we can't arrest our way out of the issues of drugs in our community."

Vermont fights drug crimes with treatment, not jail

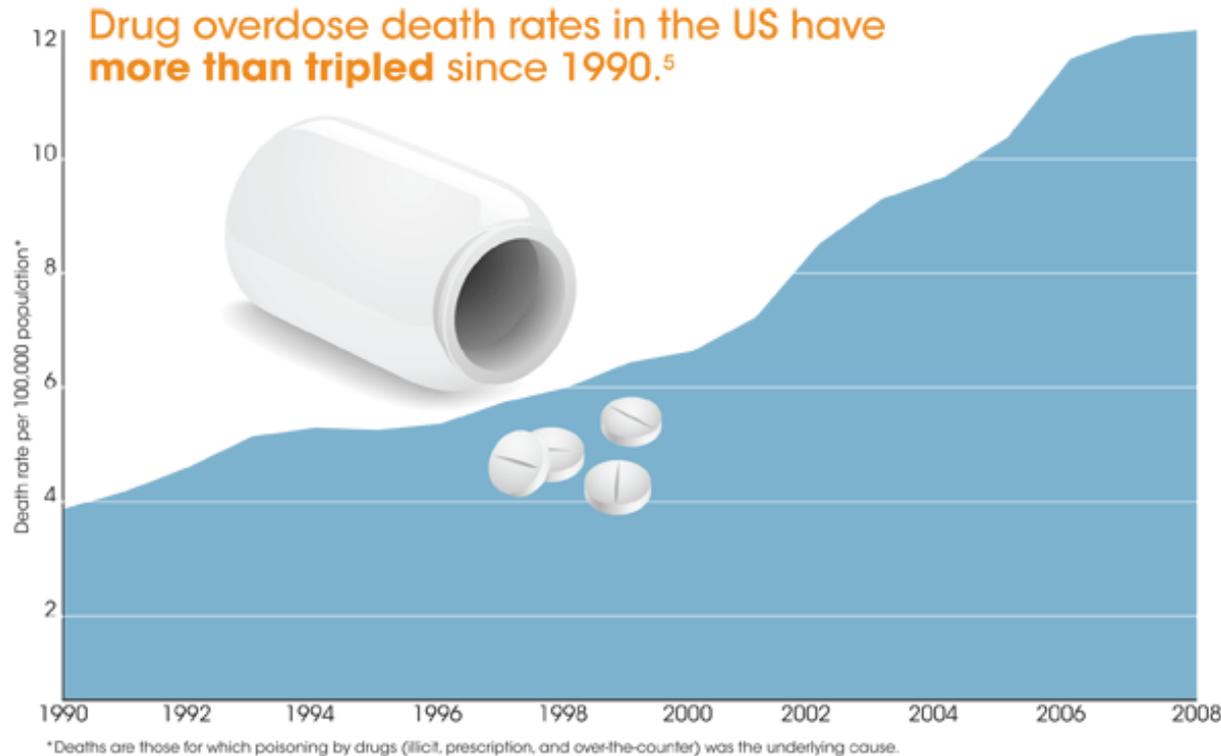
Two charged with growing hallucinogenic mushrooms in Oklahoma City apartment

State of Addiction: Oklahoma ranked No. 1 state in prescription painkiller abuse

Holder urges use of drug to help in heroin ODs

Between 2006 and 2010, the attorney general said, heroin overdose deaths increased by 45%. And between 2008 and 2013, he said, heroin seizures along the U.S. southwest border increased by more than 320%

Prescription Drug Abuse



- In 2010, of the 38,329 drug overdose deaths in the United States, 22,134 (60%) were related to prescription and OTC drugs.
- In 2011, drug misuse and abuse caused about 2.5 million emergency department (ED) visits. Of these, more than 1.4 million ED visits were related to prescription and OTC drugs.

How Do You Want Your State To Be Viewed?

Before



Now



It Takes a Community

- Law enforcement, prosecution, the courts and the rest of the criminal justice system continue to employ conventional methods to interdict commonly abused street drugs
- The need has never been greater for responsible professionals to work together. Drug addiction is more than just a health issue. It's more than a law enforcement issue. Some feel law enforcement can't arrest people for having an illness.
- Yet it is PRESCRIPTION DRUGS that account for the most visits to our nation's emergency rooms
- Pharmacists have a corresponding responsibility to ensure that a prescription is for a legitimate medical purpose
- Conducting drug diversion investigations doesn't attract many cops. Diversion investigators don't drive cool cars or get to kick in doors. They see the underside of addiction
- Many legitimate prescription holders believe it is OK to drive without any thought of impairment because they have a prescription
- How do these prescription drugs make their way to the street

Working Together to Solve Issues

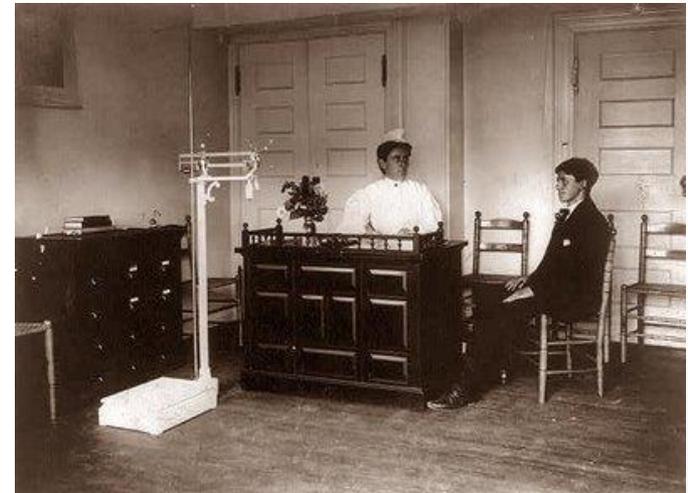
- Labs and DRE's
- Law Enforcement and Medical Boards/Associations and Med Schools
- Law Enforcement, Prosecution, Community Coalitions and Prevention
- Oklahoma Bureau of Narcotics, Traditional Law Enforcement, Medical Boards, Pharmacy Boards, Licensing
- Training for "road" officers, troopers and deputies on what to look for in terms of Rx's out of the bottle, what it means when they see the yellow pages with doctor's office names ripped out or when they see different names or addresses on Rx containers



Common Types of Drug Diversion via Medical Doctors, Dentists, Pharmacists, etc.

➤ *Dated*

- Practitioners who have not kept up with appropriate prescribing methods
- Demonstrates a failure to understand changes in medicine or treatment as it relates to pain management
- Barre, VT (crowded office)



Common Types of Drug Diversion via Medical Doctors, Dentists, etc.

➤ *Duped*

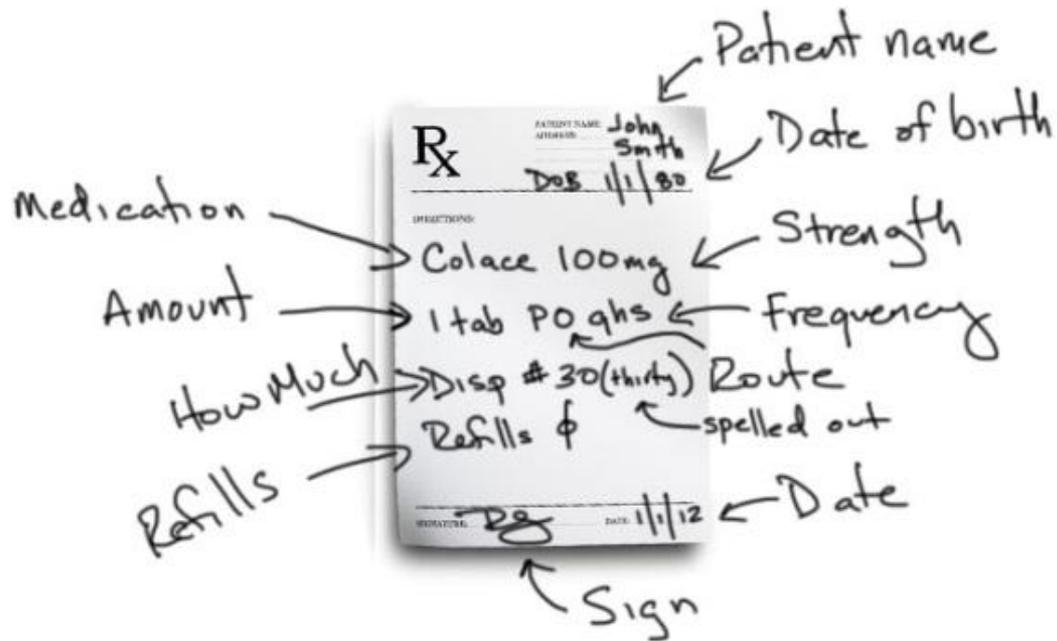
- Practitioners who fail to identify current trends in diversion (brown ink)
- Practitioners who fall victim to those who offer bogus documents, x-rays, etc.
- 26 pharmacies and 29 prescriptions
- One arrestee was eating 60 Percodan per day



Common Types of Drug Diversion via Medical Doctors, Dentists, etc.

➤ *Deceitful*

- *Medical professionals who sell RX drugs for profit or other gains*



Common Types of Drug Diversion via Medical Doctors, Dentists, etc.

➤ *Drugged*

- Practitioners who become drug addicts themselves
- Search warrant revealed Percodan in Aspirin storage boxes
- Rph with Tylox in his socks and shorting Cocaine HCL for procedures
- Hycodan Rx case



Common Types of Drug Diversion via Medical Doctors, Dentists, etc.

➤ *Besides obtaining hard drugs through illicit means, what do most of the people above have in common when it came to obtaining their drugs?*

➤ *THEY DROVE to get their supply!*



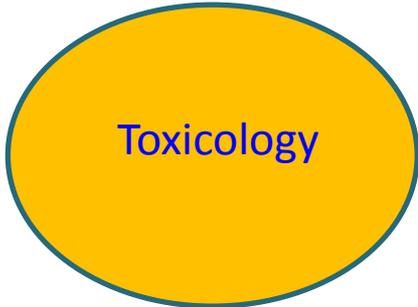
Three Key Aspects to the DRE Program



Enforcement



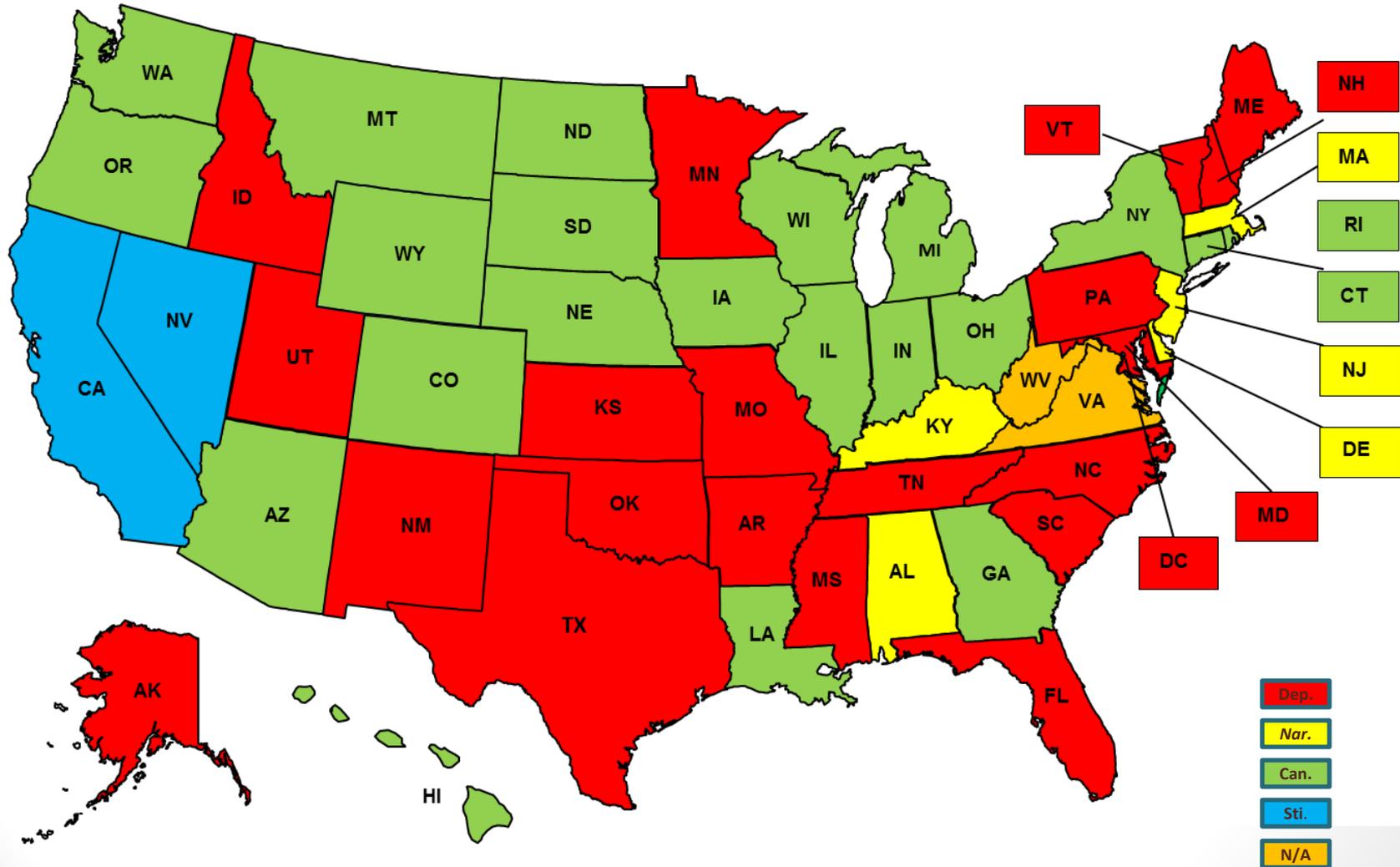
Prosecution



Toxicology

Primary Drug Classifications Observed by DRE's: 2010-2012

Source: Sobriety Testing Resource Center



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National Sobriety Testing Resource Center & DRE Tracking System Reports

View 'DRE Opinion' & 'Toxicology Results' Match

NHTSA Region: **Not Selected**
 State: **Oklahoma**
 Region: **All**
 Agency: **All**
 Date(s): **01/01/2012 to 12/31/2012**

March 26, 2014 10:37 AM
 Confidential Confidential

Drug Category Name	Total Opinions	% of All Test Results	Evaluations with completed Toxicology	Confirmed Matches of Completed Toxicology	Rate of Accuracy of Completed Toxicology
Stimulants:	125	20.66%	99	85	85.86%
Depressants:	289	47.77%	210	184	87.62%
Hallucinogens:	3	0.50%	3	2	66.67%
Dissociative Anesthetic:	14	2.31%	9	7	77.78%
Narcotic:	174	28.76%	128	97	75.78%
Inhalants:	32	5.29%	21	16	76.19%
Cannabis:	198	32.73%	153	131	85.62%
Totals:	835		623	522	
Percentage of Total Opinions:			74.61%	62.51%	

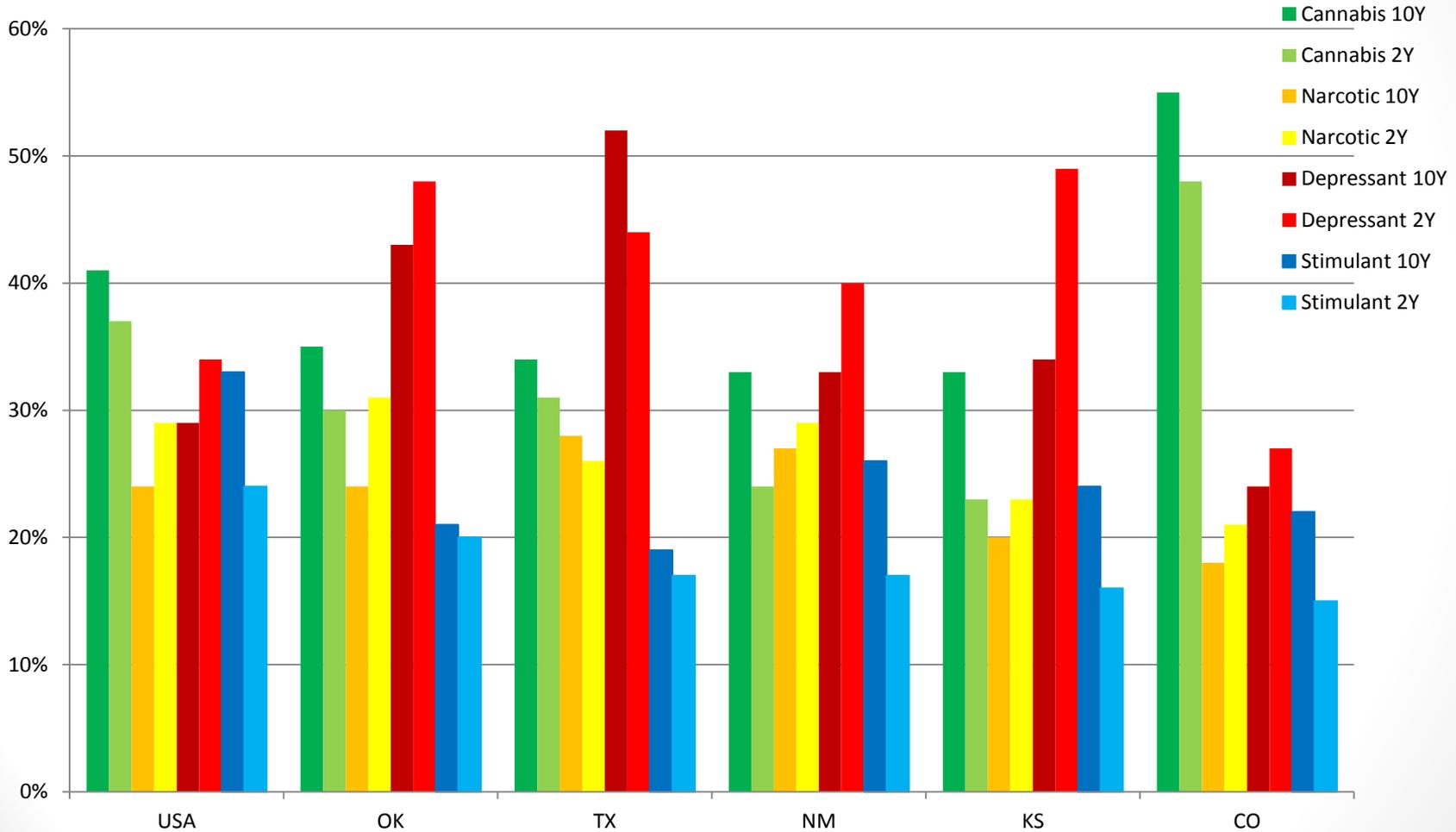
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Current : Fair, 32 °F
 Wind Speed: 21 mph
 Visibility: 10 mi
 User zip code is not available. Default Zip Code: 20706
[More information ...](#)

Ten and Two Year Comparison by Confirmed Drug Category

2001-2010 / 2011-2012 Source: Sobriety Testing Resource Center



Drug Testing in Fatal Crashes

DOTHS 811 415

State	Not Tested for Drugs		Tested, No Drugs Reported		Tested, Drugs Found		Tested, Results Unknown		Unknown if Tested		Total
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	
	Oklahoma	466	89%	31	6%	24	5%	0	0%	0	
Mississippi	476	98%	0	0%	4	1%	0	0%	7	15%	487
Louisiana	170	32%	56	10%	57	11%	230	43%	26	5%	539
Texas	842	43%	579	29%	461	23%	14	1%	125	6%	2,021
New Mexico	0	0%	219	99%	2	1%	0	0%	0%	0%	221
Connecticut	2	1%	12	17%	90	57%	12	8%	24	15%	157
Montana	28	17%	4	2%	124	77%	0	0%	5	3%	161
Vermont	4	7%	26	46%	22	39%	0	0%	4	7%	56
Maine	121	100%	0	0%	0	0%	0	0%	0	0%	121

Drug Involvement of Fatally Injured Drivers

Source: NHTSA Traffic Safety Facts, November 2010 – DOT HS 811 415

US – 18% of fatally injured drivers tested positive for drugs (N-3,952)

CT – 57 % of fatally injured drivers tested positive for drugs (N-90)

MT – 77% of fatally injured drivers tested positive for drugs (N-124)

ME – 0% of fatally injured drivers tested positive for drugs (N-121)

MS – 1% of fatally injured drivers tested positive for drugs (N-476)

**OK - 5% of fatally injured drivers tested positive for drugs (N-24/521)
89% NOT tested for drugs**

Spring 2013 - OST asks NHTSA for Performance Measures re: DEC Program

- Data on drugged driving incidents up to this point has been scarce and unreliable at best
- DEC Program has data which paints a picture of the issue and defines impairment based on Enforcement Evaluations
- This presents a great opportunity to not only showcase the program on a national scale but to better identify the issue of drugged driving
- This means two major agencies in the US (ONDCP and DOT) are looking at the DEC Program



What is NHTSA Doing?

- In 2013, we completed a synchronization project with the SFST, ARIDE and DRE curricula. We also released an On-Line version of ARIDE
- We are in the final phases of discussion with bringing a toxicology fellow to NHTSA. Much like a TSRP or JOL, they will offer advanced expertise to our Research, Impaired Driving and Enforcement and Justice Services Divisions
- The NHTSA/IACP DRE program now has 7,000 credentialed DRE's nationwide. As of last October, the program exists in all 50 states and DC
- Oklahoma is well represented in the program with approximately 174 DRE's who conducted 374 Enforcement Evaluations in 2012
- Jim Maisano and Lance Arnold of Norman PD hosted last year's conference with approximately 700 professionals in attendance. Jim sits on a national committee which provides great insight from a broad spectrum of prominent subject matter experts

What is NHTSA Doing? (cont'd)

- Virginia Beach Crash Risk Study
 - * Under agency review

- Examine the Effects of Inhaled Cannabis on Driving Performance
 - * Data collection is complete. Analysis of blood and fluids underway

- Explore the Predictive Validity of the DEC Program Tests
 - * Under agency review

- Evaluation of the ARIDE (including On-Line ARIDE) Courses
 - * Ongoing

- 2013 Roadside Survey
 - * Data collection complete. Comparative review to 2007 underway

- Examine the Accuracy and Feasibility of “On-Site” Drug Detection Devices
 - * 4 California sites (plus CHP) using screening devices to capture oral fluids -

Questions?



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