OMB Control No. 2127-XXXX

Expiration Date: TBD

Under the Paperwork Reduction Act, a Federal agency may not conduct or sponsor, and a person is not required to respond to a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control number. The OMB Control Number for this information collection is 2127-XXXX. The average amount of time to complete the form is 30 minutes. All responses to this collection of information are voluntary. The purpose of this research study is to examine public attitudes toward motor vehicle safety and relationships between attitudes, behaviors, and demographics. If you have comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden send them to Information Collection Clearance Officer, National Highway Traffic Safety Administration, 1200 New Jersey Ave, S.E., Washington, DC, 20590.

Instructions

The National Highway Traffic Safety Administration (NHTSA) is providing tools, equipment, and resources to assist with improving Drug Recognition Expert (DRE) officers' performance and law enforcement agencies' DRE capabilities. The goal of this effort is to increase the frequency of DRE use in driving under the influence of drugs (DUID) cases and to improve the efficiency, consistency, and completeness of the officers' evidence gathering, report writing, case building, and testimony related to DUID cases.

The tools, equipment, and resources provided through this effort include laptops, tables, mobile phones, supplies, and software that can assist with DRE data collection, DRE call-outs, expedited warrant programs, and law enforcement phlebotomy programs. The allocated resources to participating agencies are necessary for each agency to properly participate in the demonstration project. Issued resources, cannot be recouped due to the individualized nature of the software set up, multi-factor authentication safety and security measures, and specified nature or use of the tools required by each individual participating agency. Participating agencies therefore may benefit from the resources provided (e.g., training, tools and technologies for collecting data, implementing a call-out system, implementing an electronic warrant system, and/or implementing law enforcement phlebotomy), helping to support your agency's future efforts in carrying out Drug Influence Evaluations on drivers suspected of drug-impaired driving.

This support program is open to all agencies with DREs. However, local agency applicants must obtain sign-off by the DRE State Coordinator at the end of this application to indicate they are aware of the local agency's intent to participate in this support program.

A webinar will be held on X date to provide more information about this support program and answer questions. Visit ENTER URL to register.

Interested agencies should complete and email this application to DRESupport@toxcel.com by X date.

Section 1: General Information

1.1	Agency Name	Click or tap here to enter text.			
1.2	Point of Contact First and Last Name	Click or tap here to enter text.	1.3	Point of Contact Job Title	
1.4	Street Address	Click or tap here to enter text.	1.5	City	Click or tap here to enter text.
1.6	State	Click or tap here to enter text.	1.7	ZIP Code	Click or tap here to enter text.
1.8	Point of Contact	Click or tap here to enter text.	1.9	Point of Contact	Click or tap here to enter text.

Email Address		Phone Number
1.10 Type of Agency (Select one, it	☐ State Police/Highway Patrol	☐ State Department of Transportation
should represent the primary agency applying for the funding)	 □ Local Police Department (City/County/Municipality) □ Local Sheriff's Office □ State Highway Safety Office 	☐ City/County Department of Transportation ☐ Other (describe) Click or tap here to enter text.

Section 2: Program Description

2.1	How will the support provided by this program be used? (Select one of the two options and enter other relevant supporting responses to included questions)	 □ How many DREs are in the State? Click or tap here to enter text. Over the past three years has the number of DREs in your State □Increased □Decreased □Stayed the same □ Which agency(s) and jurisdiction(s) (if other than the one submitting this application)? Click or tap here to enter text. • How many DREs will directly benefit from this program? Click or tap here to enter text. • Over the past three years has the number of DREs in each agency/jurisdiction □Increased □Decreased □Decreased and Decreased, depending on the agency/jurisdiction □Stayed the same • Estimated size of area (square miles) covered by each agency(s)/jurisdiction(s)? Click or tap here to enter text.
2.2	Select which statement(s) describes the reason for your state, agency, or jurisdiction to participate in this DRE Demonstration project? (Select all that apply)	☐ Provide DRE officers with the resources, technology, and tools (both hardware and software) to enhance efficiency, completeness, and consistency in data collection.
		□Develop protocols, policies, and procedures to enhance or improve how DREs are used (i.e., call-out procedures, sharing DREs across jurisdictions).
		☐Implement procedures to facilitate the DRE evaluation process (i.e., law enforcement phlebotomy, expedited warrants).

Section 3: Strategies and Implementation Status

Assess the status of implementation by your state, agency, or jurisdiction of the following strategies that you are interested in implementing or enhancing. If you are not interested in or your State does not allow for a particular strategy, you do not need to complete that section.

Strategy 1: Data Collection and Analysis		
3.1	What type of technology does your state, agency, or jurisdiction utilize for data collection during DRE investigations? (Select all that apply)	□iPad
		□Android-based tablet
		□Laptop
		☐Smart Phone
		☐Other (describe) Click or tap here to enter text.
		\Box n/a – no technologies are used for data collection
3.2	What data entry system does your state, agency, or jurisdiction utilize for data collection during DRE investigations? (select all that apply)	□NHTSA DRE Data System
		□ITSMR
		□Internally developed system (describe)
		□Other (describe) Click or tap here to enter text.
		□n/a - no data entry system is used
3.3	Indicate if your state, agency, or jurisdiction analyzes data about DRE investigations. (Select one)	□No data are collected
		□Data are collected but little to no effort is made to analyze what is collected.
		□Data are collected and efforts are made to analyze; findings are not used in any formative manner
		□Data are collected, analyzed, and used to inform others of project successes
3.4	What data collection issues do your DREs currently facing that you feel could be improved through support from this program?	Click or tap here to enter text.

3.5	Describe the current state of DRE callouts or sharing resources across jurisdictions. (Select one of the options and enter other relevant supporting responses to included questions)	□Callouts and resource sharing are not currently being done, but we would like to do so.
		□Callouts and resource sharing occurs, but there are no formal policies or procedures for doing so.
		☐ The State/jurisdiction has formal, written policies and procedures for callouts and resource sharing. Please describe what you would like to enhance about your callout and resource sharing procedures. Click or tap here to enter text.
3.6	If you are currently conducting callouts, indicate	□iPad
	what type of technology your state, agency, or jurisdiction utilizes for callouts. (Select all that	□Android-based tablet
	apply)	□Laptop
		☐Smart Phone
		☐Other (describe) Click or tap here to enter text.
		\Box n/a – not currently conducting callouts
3.7	If you are currently conducting callouts, indicate what system or software your state, agency, or jurisdiction utilizes for callouts. (Select all that apply)	☐Text messaging
		□Direct phone calls
		☐ Group based systems such as Group Me, Active 911
		☐ Emergency Communication Systems
		□Dispatch System
		☐Hotline/Call Center
		☐Everbridge Software
		☐Web-based data entry system
		☐Other (describe) Click or tap here to enter text.
		\Box n/a – not currently conducting callouts
3.8	Indicate if your state, agency, or jurisdiction	□No data are collected
	collects and analyzes data about callouts. (Select one)	□Data are collected but little to no effort is made to analyze what is collected.
		□Data are collected and efforts are made to analyze; findings are not used in any formative manner
		□Data are collected, analyzed, and used to inform others

		of project successes □n/a – not currently conducting callouts
3.9	What are the DRE resource sharing and/or callout issues that your DREs are currently facing that you feel could be improved through support from this program?	Click or tap here to enter text.

Stra	ntegy 3: Expedited Warrants	
3.10	Describe the current state of practice for obtaining an expedited search warrant to draw blood from impaired driving suspects. (Select one)	☐There is no expedited warrant program, but we would like to implement one.
		☐An expedited warrant program is in the preliminary planning stages.
		☐An expedited warrant program has been planned and approved but not yet implemented.
		□An expedited warrant program exists but is not universally used within the state/jurisdiction.
		☐ An expedited warrant program exists and is commonly used. Please describe what you would like to enhance about your expedited warrant program. Click or tap here to enter text.
3.11	If you do not currently have an expedited warrant program, does state law allow for such a program?	☐Yes. Provide a link or attach the text of the law with your application. Click or tap here to enter text.
		☐No. How do you plan to use this program to support expedited warrant implementation if state law does not allow for the use of expedited warrants? Click or tap here to enter text.
3.12	If you have an expedited warrant program or are	□iPad
te	planning a program, indicate what type of technology your state, agency, or jurisdiction utilizes for the program. (Select all that apply)	☐Android-based tablet
		□Laptop
		☐Smart Phone
		□Other (describe) Click or tap here to enter text.

		□n/a - do not currently have an expedited warrant program
3.13	If you have an expedited warrant program or are planning a program, indicate what system or software your state, agency, or jurisdiction utilizes for expedited warrants. (Select all that apply)	☐Web-based data entry system
		□Direct phone call
		☐Email using PDF, Word, or other completed documents
		□Combination of email, phone, web-based system
		□Other (describe) Click or tap here to enter text.
		□n/a - do not currently have an expedited warrant program
3.14	Indicate if your state, agency, or jurisdiction	□No data are collected
	collects data about expedited warrants. (Select one)	□Data are collected but little to no effort is made to analyze what is collected.
		□Data are collected and efforts are made to analyze; findings are not used in any formative manner
		□Data are collected, analyzed, and used to inform others of project successes
		$\Box \text{n/a}$ – do not currently have an expedited warrant program
3.15	What are the issues that your DREs are currently facing that you feel could be improved through support from this program for implementing or enhancing expedited warrants?	Click or tap here to enter text.

Strategy 4: Law Enforcement Phlebotomy		
3.16 Describe the current implementation of law enforcement phlebotomy in your state/agency.	☐There is no law enforcement phlebotomy program, but we would like to implement one.	
(select one)	☐A law enforcement phlebotomy program is in the preliminary planning stages.	
	☐A law enforcement phlebotomy program has been planned and approved but not yet implemented.	
	\Box A law enforcement phlebotomy program exists but is not universally used within the state/jurisdiction.	
	□A law enforcement phlebotomy program exists and is commonly used. Please describe what you would like to enhance about your law enforcement phlebotomy program. Click or tap here to enter text.	
3.17 If you do not currently have a law enforcement phlebotomy program, does state law allow for	☐Yes. Provide a link or attach the text of the law with your application. Click or tap here to enter text.	
such a program?	□No. How do you plan to use this program to support law enforcement phlebotomy implementation if state law does not allow for the use of law enforcement phlebotomy? Click or tap here to enter text.	
3.18 Indicate if your state, agency, or jurisdiction	□No data are collected	
collects data about your law enforcement phlebotomy program. (select one) Skip this question if you do not currently have a	□Data are collected but little to no effort is made to analyze what is collected.	
law enforcement phlebotomy program.	□Data are collected and efforts are made to analyze; findings are not used in any formative manner	
	□Data are collected, analyzed, and used to inform others of project successes	
	□n/a – do not currently have a law enforcement phlebotomy program	

3.19 What are the issues that your DREs are currently facing that you feel could be improved through support from this program for implementing or enhancing a law enforcement phlebotomy program?

Click or tap here to enter text.

Other Strategies 3.20 Describe any other strategies to improve DRE performance that you would like to see support for in the future and why this support is needed. Click or tap here to enter text.

Section 3: Signatures

Please obtain the following signatures before submitting this application.

Point of Contact/Applicant	Name: Click or tap here to enter text. Date:Click or tap here to enter text. Signature:
DRE State Coordinator (if different than POC/Applicant)	Name: Click or tap here to enter text. Agency: Click or tap here to enter text. Date:Click or tap here to enter text. Email Address: Click or tap here to enter text. Phone: Click or tap here to enter text. Signature: