



Oregon

John A. Kitzhaber, M.D., Governor

Governor's Advisory Committee on DUII

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DATE: March 12, 2015

TO: House Judiciary Committee

FROM: Teresa Douglas, Governor's Advisory Committee on DUII
Alcohol and Drug Evaluation Specialist

SUBJECT: House Bill 2660

Introduction:

House Bill 2660 eliminates the requirement for the Ignition Interlock Device on persons participating in a DUII Diversion program if their arrest was a result of drug intoxication or their blood alcohol content was under .10%.

Background:

The requirement for Ignition Interlock Devices was added to the DUII Diversion program in the 2011 Legislative session, sponsored by Representative Kim Thatcher. The DUII Diversion program began in 1982 and from the beginning, has required participants to not operate a vehicle with any intoxicant in their body. In the last few years, the requirement was amended to require total abstinence while under a DUII Diversion agreement. The Ignition Interlock Device was added as an additional tool to monitor compliance.

What the Bill Does:

This bill will lessen the Ignition Interlock Device requirements for DUII Diversion program participants and weaken the ability of the Alcohol and Drug Evaluation Specialist to monitor compliance with program requirements.

Summary:

It is a common misconception that DUII offenders use only one intoxicating substance. Many offenders either use combinations of drugs and alcohol or change the substance they are using to avoid detection. While undergoing treatment, offenders are urine tested regularly to determine compliance with abstinence requirements. These urine tests are not just for alcohol or their drug of choice because poly-drug abuse is common. It is also a common misconception that anyone under a certain blood alcohol content does not have a problem with alcohol. Many times it is more a matter of timing. In my 30 years as an Alcohol and Drug Evaluation Specialist, I have seen many offenders who were clearly alcoholic that had a low blood alcohol content. They may have drunk the night before and still be intoxicated at a lower blood alcohol content in the morning on their way to work. There may have been a crash involved and there was a substantial lapse of time before the officer could take them into custody and get them to an intoxilyzer for a breath test. The assumption that these DUII offenders should be exempt from an Ignition Interlock Device requirement is simply not a valid reality. Those of us who work with these offenders regularly see the benefit of the use of the Ignition Interlock Device on all DUII offenders. With the addition of the Ignition Interlock Device requirement to the DUII Diversion

March 12, 2015
House Judiciary Committee
HB 2660

program, Alcohol and Drug Evaluation Specialists are now able to monitor abstinence compliance. The Ignition Interlock Device has been a substantial improvement in my ability to provide for a measure of public safety. The Ignition Interlock Device has also provided opportunities for intervention when the person has been found to be drinking after completing treatment. Before the Ignition Interlock Device requirement was implemented, we had no way to know if someone was drinking and driving while on Diversion, unless they received another DUII. Unfortunately, this left the public at more risk and the client's treatment process less effective.

The Ignition Interlock Device has created more opportunities for treatment intervention and effectiveness, prevention of repeated intoxicated driving incidents and more public safety. Therefore, the Governor's Advisory Committee is not in favor of this bill and would ask that the committee vote no on HB 2660.

[Date]
[Committee]
Page 2