



National Transportation Safety Board

Washington, D.C. 20594

Safety Recommendation

Date: November 29, 2004

In reply refer to: H-04-46

Mr. Sylvester Daughtry, Jr.
Executive Director
Commission on Accreditation for Law Enforcement Agencies
10302 Eaton Place, Suite 100
Fairfax, Virginia 22030-2215

Of the 291 million individuals living in the United States, approximately 191 million, or 65.6 percent, are licensed to drive. Every year, about 42,000 individuals die in traffic-related crashes. The National Highway Traffic Safety Administration estimated in 2000 that highway crashes cost U.S. society about \$230.6 billion a year, with each roadway fatality costing an average of \$977,000, and each critical injury crash costing an average of \$1.1 million.¹

The National Transportation Safety Board is an independent Federal agency charged by Congress with investigating transportation accidents, determining their probable cause, and making recommendations to prevent similar accidents from occurring. We are providing the following information to urge your organization to take action on the safety recommendation in this letter. The Safety Board is vitally interested in this recommendation because it is designed to prevent accidents and save lives.

This recommendation addresses the need for improved awareness and training for health care professionals, law enforcement, and the public regarding State medical oversight laws and practices. The recommendation is derived from the Safety Board's special investigation into the medical oversight of noncommercial drivers² and is consistent with the evidence we found and the analysis we performed. As a result of this investigation, the Safety Board has issued 12 safety recommendations, 1 of which is addressed to the Commission on Accreditation for Law Enforcement Agencies. Information supporting this recommendation is discussed below. The Safety Board would appreciate a response from you within 90 days addressing the actions you have taken or intend to take to implement our recommendation.

The act of driving requires the proper orchestration of sensory/perceptual, cognitive, and motor activities to be performed successfully. Certain medical conditions have been found to negatively affect one or more of these activities, thereby increasing the safety risk of drivers that suffer from them. The extent of the overall impact of medically impaired drivers is not known

¹ L. Blincoe, A. Seay, E. Zaloshnja, T. Miller, E. Romano, S. Lucher, and R. Spicer, *The Economic Impact of Motor Vehicle Crashes*, 2000, DOT HS 809 446 (Washington, DC: NHTSA, 2000).

² For additional information, read National Transportation Safety Board, *Medical Oversight of Noncommercial Drivers*, Highway Special Investigation Report NTSB/SIR-04/01 (Washington, DC: NTSB, 2004).

because data are not available (except for data on alcohol-related accidents) on the number of licensed drivers with high-risk medical conditions or on the number of accidents in which a driver's medical condition was a contributory factor. However, statistics on the number of Americans with one or more of the following high-risk medical conditions offer some perspective on the medical oversight issues that State licensing agencies face:³

- Epilepsy: 2.5 million (180,000 new diagnosed cases each year).⁴
- Diabetes: 18.2 million (1 million new cases diagnosed each year in those over 20).⁵
- Sleep Disorders: 50 to 70 million.⁶
- Cardiovascular Disease: 23.5 million (41.7 million additional have hypertension).⁷
- Alzheimer's Disease: 4.5 million (10 percent of those over 65 years and nearly 50 percent of those over 85 years suffer from the disease).⁸
- Arthritis: 40 million (over 7 million report limited activity due to the disease).⁹
- Eye Diseases: 5.5 million—cataracts, 2 million—glaucoma, and 1.2 million—later-stage macular degeneration.¹⁰
- Alcoholism: 14 million (alcohol linked to 40 percent of all automobile fatalities).¹¹

The National Transportation Safety Board's interest in the medical oversight of noncommercial drivers stems from its examination of six noncommercial vehicle accidents in which a driver's medical condition played a role.¹² Of the six medical impairment-related accidents, one involved a diabetic driver and five involved drivers who experienced seizures.

The Safety Board has also investigated a substantial number of commercial vehicle and school bus accidents involving drivers with impairing or potentially impairing medical conditions, such as cardiovascular disease, visual impairment, renal disease, and sleep disorders.

³ See the American Medical Association's *Physician's Guide to Assessing and Counseling Older Drivers* (Chicago 2003), <<http://www.ama-assn.org/go/olderdrivers>>, for a more exhaustive list of medical conditions and medications that may impair driving.

⁴ Epilepsy Foundation <<http://www.epilepsyfoundation.org/answerplace/statistics.cfm>>.

⁵ National Diabetes Information Clearinghouse <<http://diabetes.niddk.nih.gov>>.

⁶ U.S. Department of Health and Human Services, *2003 National Sleep Disorders Research Plan*, National Institutes of Health Publication No. 03-5209 (Washington, DC: HHS, 2003).

⁷ U.S. Department of Health and Human Services, *Summary Health Statistics for U.S. Adults: National Health Interview Survey, 2001*, Series 10, Number 218 (Washington, DC: HHS, 2004).

⁸ National Institute on Aging, *Progress Report on Alzheimer's Disease, 1999*, NIH Publication No. 99-4664 (Bethesda, MD: National Institute on Aging, 1999).

⁹ R.C. Lawrence, C.G. Helmick, F.C. Arnett, R.A. Deyo, D.T. Felson, E.H. Giannini, S.P. Heyse, R. Hirsch, M.C. Hochberg, G.G. Hunder, M.H. Liang, S.R. Pillemer, V.D. Steen, and F. Wolfe, "Estimates of the Prevalence of Arthritis and Selected Musculoskeletal Disorders in the United States," *Arthritis and Rheumatism*, 41(5) (1998): 778-799.

¹⁰ University of Washington Department of Ophthalmology <<http://depts.washington.edu/opthweb/statistics.html>>.

¹¹ *Traffic Safety Facts 2003: Alcohol*, DOT HS 809 761 (Washington, DC: NHTSA, 2003).

¹² For additional information, read National Transportation Safety Board, *Medical Oversight of Noncommercial Drivers*, Highway Special Investigation Report NTSB/SIR-04/01 (Washington, DC: NTSB, 2004).

On March 18 and 19, 2003, the Safety Board held a public hearing¹³ to discuss the factors that contribute to medically related accidents. Major topics included the:

- Current state of knowledge regarding potentially impairing medical conditions.
- Adequacy of procedures for reporting medically impaired drivers.
- State licensure and oversight of drivers with high-risk medical conditions.
- Programs to increase public awareness of State oversight laws and procedures.
- Rehabilitation and transportation options for medically impaired drivers.

The Safety Board learned during the course of the hearing and has noted in its report on the medical oversight of noncommercial drivers¹⁴ that the issues encompassing this subject are complex and will require the close cooperation of Federal, State, and private organizations to create an effective and uniform system that protects public safety while being sensitive to the needs of individual drivers.

Tens of millions of Americans have medical conditions that place them at risk of becoming incapacitated while driving. However, apart from alcohol addiction, the extent to which medical impairment contributes to the number of traffic accidents is not well defined. Safety Board investigations have shown that medical incapacitation can lead to traffic accidents. Research studies have found a correlation between certain medical conditions and an increased risk of accident involvement, although no agreement has been made on the degree of risk for each type of condition. Nonetheless, research¹⁵ shows that the accident risk associated with some medical conditions approaches or even exceeds that for alcohol and drug use. Based on the available research and the Safety Board's accident investigations, the Board concluded that many medical conditions associated with increased accident risk are incompatible with the unrestricted operation of motor vehicles.

Law enforcement officers often witness unsafe driving behaviors and incapacitated drivers on the roadway. However, most are not trained to consider or identify medical impairment during traffic stops or accident investigations. Testimony at the public hearing indicated that although some officers receive supplemental training helpful in identifying alcohol- or drug-impaired drivers, medical impairments are rarely even considered in this training.

The executive director of the International Association of Directors of Law Enforcement Standards and Training stated that several emerging programs are aimed at increasing officer awareness of all driver impairment aspects, but for the most part, such training is not currently offered at police academies. The National Highway Safety Administration January 2004 publication, *Compendium of Law Enforcement Older Driver Programs*,¹⁶ supports these statements and lists several programs in which law enforcement agencies have aided the efforts of senior citizen organizations, family help networks, social service agencies, public and private transportation, the media, and motor vehicle departments in educating seniors about medical

¹³ Information on this hearing, including the full transcript, is available at <http://www.nts.gov/events/2003/med_noncomm/default.htm>.

¹⁴ NTSB/SIR-04/01.

¹⁵ E. Diller, L. Cook, E. Leonard, J. Reading, J.M. Dean, and D. Vernon, *Evaluating Drivers Licensed With Medical Conditions in Utah, 1992-1996*, DOT-HS-809-023 (Washington, DC: NHTSA, 1999).

¹⁶ See <<http://www.nhtsa.dot.gov/people/injury/olddrive/LawEnforcementOlderDriver03/index.htm>>.

conditions associated with aging. However, the publication lists only a few programs that are aimed at educating the officers about medical impairment, and most of these are not offered nationwide.

To increase law enforcement officer awareness of medically impairing conditions is paramount in fostering the ability to report medically unfit drivers to the licensing agency. The absence of nationwide medical awareness training for officers suggests a lack of awareness of the risks that impairing medical conditions can pose. The Safety Board concluded that a lack of specific training may hinder many law enforcement officers in the ability to identify signs of driver medical impairment.

Therefore, the National Transportation Safety Board recommends that the Commission on Accreditation for Law Enforcement Agencies:

Work with the National Highway Traffic Safety Administration, the International Association of Directors of Law Enforcement Standards and Training, and the American Medical Association to develop a training program to help police officers identify common medical conditions that can impair a driver's ability to operate a motor vehicle and then promote this training to all new and veteran officers. (H-04-46)

The Safety Board also issued safety recommendations to the U.S. Department of Transportation, the National Highway Traffic Administration, the National Committee on Uniform Traffic Laws and Ordinances, the American Association of Motor Vehicle Administrators, the Liaison Committee on Medical Education, the American Osteopathic Association, the Association of American Medical Colleges, and the Federation of State Medical Boards.

In your response to this letter, please refer to Safety Recommendation H-04-46. If you need additional information, you may call (202) 314-6177.

Chairman ENGLEMAN CONNERS, Vice Chairman ROSENKER, and Members CARMODY, HEALING, and HERSMAN concurred in this recommendation.

By: Ellen Engleman Connors
Chairman