ILLINOIS STATE POLICE DIRECTIVE
ENF-018, DRIVING UNDER THE INFLUENCE ENFORCEMENT AND PROCESSING

RESCINDS:

REVISED:
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2022-038

RELATED DOCUMENTS:
ENF-008, ENF-011, ENF-013, ENF-017, ENF-021, OPS-038, OPS-201, SRV-005

RELATED CALEA STANDARDS (6th Edition):
61.1.2, 61.1.5, 61.1.9, 61.1.10, 61.2.2, 83.2.1, 83.2.6, 83.3.2

I. POLICY

The Illinois State Police (ISP) will:

I.A. Promote the safety of persons using highways in Illinois.

I.B. Provide a deterrent to persons who may choose to operate a motor vehicle while their abilities are impaired by alcohol or other drugs.

I.C. Vigorously enforce the Driving Under the Influence (DUI), Implied Consent, and Zero Tolerance laws.

I.D. Provide toxicological assistance to officers in the enforcement and prosecution of DUI statutes.

II. AUTHORITY


II.B. 20 ILCS 2605/2605-54 – The Illinois State Police Law, “Conor’s Law” Training Policy; persons arrested while under the influence of alcohol or drugs.

II.C. 235 ILCS 5/6-20, Liquor Control Act of 1934, Transfer, possession, and consumption of alcoholic liquor; restrictions.

II.D. 705 ILCS 405/1-1 et. seq. - Juvenile Court Act of 1987.

II.E. 720 ILCS 570/100 et. seq. – Illinois Controlled Substances Act.

II.F. 720 ILCS 646/1 et. seq. – Methamphetamine Control and Community Protection Act.

II.G. 720 ILCS 690/0.01 et. seq. – Intoxicating Compounds Act.


II.J. People v. Jones, 214 Ill.2d 187 (2005) – Where an officer has probable cause to believe a defendant is under the influence of alcohol, the defendant has no statutory right to refuse chemical testing under 625 ILCS 5/11-501.2(c)(2).

II.K. People v. Farris, 2012 Ill. App. 3d 100199 (3rd Dist. 2012) – An officer may not use force to obtain a blood draw requested under 624 ILCS 5/11-501.2(c)(2).

II.L. United States Department of Transportation’s (USDOT’s) DWI Detection and Standardized Field Sobriety Testing Participant Guide – February 2018 Edition developed by the National Highway Traffic Safety Administration (NHTSA) in conjunction with the Traffic Safety Institute and International Association of Chiefs of Police (IACP).

III. PROCEDURES

III.A. Observation and Screening
III.A.1. Vehicle in motion – Observation of the vehicle to include Illinois Vehicle Code violations or other relevant actions observed by the officer.

III.A.2. Personal contact – Observations of the driver to include sensory observations such as odors, statements and others deemed relevant by the officer.

III.A.3. Pre-arrest screening – Testing of the driver in accordance with NHTSA’s Standardized Field Sobriety Tests or other tests as deemed necessary by the officer and particular circumstances.

   III.A.3.a. Only officers trained in Standardized Field Sobriety Tests administration may conduct the following SFST activities:

   - III.A.3.a.1) Horizontal Gaze Nystagmus
   - III.A.3.a.2) Walk and Turn
   - III.A.3.a.3) One Leg Stand

   III.A.3.b. Other non-validated Field Sobriety Tests which may be used are the:

   - III.A.3.b.1) Alphabet
   - III.A.3.b.2) Counting
   - III.A.3.b.3) Finger to Nose
   - III.A.3.b.4) Lack of Convergence
   - III.A.3.b.5) Modified Romberg Balance
   - III.A.3.b.6) Pupil Size Observation

   III.A.3.c. Officers may only administer tests they are trained to administer.

III.B. Preliminary Breath Tests (PBT)

   III.B.1. An officer may request submission to a PBT only after establishing reasonable suspicion and, when practical, after administering the standardized field sobriety tests.

   III.B.2. Only trained PBT operators may conduct portable breath tests.

   III.B.3. Only use PBT devices certified by a technician or an individual specially trained to perform PBT accuracy checks at least once every 93 days.

   III.B.4. Include the PBT results in the arrest report.

   **NOTE:** A subject exhibiting obvious impairment, while producing a low breath alcohol reading, may be under the influence of drugs or suffering from a medical problem. Consider requesting a Drug Recognition Expert (DRE) evaluate the subject.

III.C. Arrest

   III.C.1. After establishing probable cause, place the driver under arrest for driving under the influence of alcohol, other drug, or combination of both, in violation of 625 ILCS 5/11-501.

   III.C.2. Consider requesting a DRE when not reasonably believing alcohol is the cause of impairment. When necessary, contact a DRE using the procedures listed in Addendum 2 of this directive.

   III.C.3. After securing the arrestee, the officer must request Communications upgrade the incident with the appropriate incident type codes.

   III.C.4. Complete the Illinois Citation and Complaint, form ISP 5-052 (this form is available from the Records Bureau, Division of Justice Services), and issue the citation before reading the Warning to Motorist to the driver.
III.D. Submission to Test(s)

III.D.1. The officer will complete the Warning to Motorist form, read it to the driver, and provide a copy to the driver.

III.D.2. Following the warning, the officer will request the driver submit to a chemical test(s).

III.D.2.a. Breath test

III.D.2.a.1) Request submission to a breath test unless:

III.D.2.a.1)a) The driver is physically unable to complete a breath test.

III.D.2.a.1)b) At the time of arrest, there is reason to believe the driver is under the influence of drugs.

NOTE: At the time of the arrest, if there is reason to believe that the driver is under the influence of alcohol and drugs, request a breath test and blood/urine test.

III.D.2.a.2) Only Breath Analysis Operators (BAOs) may conduct evidentiary breath tests and must conduct them in accordance with ISP standards.

III.D.2.a.3) The appropriate information required to complete the Breath Analysis Instrument Log, form ISP 5-022. This form is entered in the log book by the BAO.

III.D.2.b. Blood/Urine test

III.D.2.b.1) If the subject crashed a vehicle and requires treatment by a licensed physician for injuries sustained in the crash, the arresting officer will consult with the treating physician to determine the best method for testing the subject without unreasonably jeopardizing the subject’s treatment.

III.D.2.b.2) Request submission to a blood test when a breath test is not possible or appropriate and/or when the use of alcohol, cannabis, and/or other intoxicating compounds is suspected. Submission to a blood test:

III.D.2.b.2)a) Officers may request blood/urine when not requesting submission to a breath test for reasons as stated in subparagraph III.D.2.a.1 of this directive, or is inappropriate.

III.D.2.b.2)b) Officers may request blood/urine in addition to a completed breath test when the breath test results lead to the presumption the driver is under the influence of, a combination of alcohol and cannabis, or an intoxicating compound.

NOTE: The collection and testing of whole blood is the preferred method in the detection of alcohol, cannabis, and intoxicating compounds. Blood is needed for delta 9 – tetrahydrocannabinol (THC) quantitation. Urine collection and testing is the preferred method for detecting drugs in a subject.

III.D.2.b.3) Request submission to a urine test when a breath test or blood test is not possible, or appropriate, or when suspecting drug use.

III.D.2.b.4) Only authorized persons will collect blood samples and will collect them in accordance with ISP standards to include only a physician authorized to practice medicine, a licensed physician assistant, a
III.D.2.b.5) Collect blood/urine samples will be collected in the presence of the arresting officer, medical personnel, another law enforcement officer, or an agency employee who can authenticate the sample.

III.D.2.b.6) In cases involving an opposite sex arrestee, a same-sex officer or medical personnel will collect the urine sample.

III.D.2.b.7) Sample containers

III.D.2.b.7)a) Label individual tubes of drawn blood with the subject’s name and withdrawal date and treat the samples as biohazard evidence.

III.D.2.b.7)b) Label the urine sample container with the subject’s name and collection date.

III.D.2.b.8) Package samples according to instructions contained in the ISP specimen collection kit. If an ISP specimen collection kit is not available, officers may submit a blood sample in two standard gray top vacuum tubes containing an anticoagulant and preservative. Urine samples (at least 60 milliliters) may be collected in a clear, dry container containing no preservative. Mail or deliver the kit to a Division of Forensic Services (DFS) laboratory.

III.D.2.b.9) Complete an Evidence Inventory and Receipt, form ISP 1-010, available in the ISP Document Library, and distribute it in connection with the blood/urine sample.

III.D.2.b.10) Handle blood/urine samples in accordance with established evidence procedures outlined in ISP Directive OPS-201, “Evidence - Collecting and Packaging.”

III.E. Law Enforcement Sworn Report (LESR)

III.E.1. Refusal – When a driver refuses to submit to chemical tests, the arresting officer will immediately complete the appropriate LESR section.

III.E.2. Submission – When a driver agrees to submit to and completes the chemical test(s) requested, the arresting officer will complete the appropriate LESR section if the test(s) disclose:

III.E.2.a. An alcohol concentration of .08 or more.

NOTE: A citation for 625 ILCS 5/11-501a.1 should be issued if tests indicate the alcohol concentration is .08 or more unless otherwise instructed by the appropriate State’s Attorney.

III.E.2.b. Any amount of a drug, substance, or compound in the blood or urine resulting from the unlawful use or consumption of cannabis listed in the Cannabis Control Act (720 ILCS 550/1), or the use of medical marijuana causing impairment in accordance with 625 ILCS 5/11-501(a)(6), or a delta-9-tetrahydrocannabinol concentration of either 5 nanograms or more of whole blood or 10 nanograms or more of other bodily substances (625 ILCS 5/11-501a)(7), or a controlled substance listed in the Illinois Controlled Substances Act (720 ILCS 570/100) or Methamphetamine Control and Community Protection Act (720 ILCS 646), or an intoxicating compound listed in the Use of Intoxicating Compounds Act (720 ILCS 690/0.01).

III.E.3. When a driver refuses or fails to complete the chemical test(s) requested, or the results indicate an alcohol concentration of 0.08 or more or a delta-9-tetrahydrocannabinol concentration of either 5 nanograms or more of whole blood or 10 nanograms or more of other
bodily substances or any amount of a drug, substance, or intoxicating compound, the
arresting officer will confiscate all Illinois Driver's License(s) or Permit(s) on the arrestee’s
person and immediately forward them to the circuit court of venue along with the sworn report.

III.E.3.a. Issue a Receipt to Drive if the subject’s driving privileges are valid at the time of
arrest.
III.E.3.b. Void the Receipt to Drive if the subject’s driving privileges are not valid.
III.E.3.c. Refer to ISP Directive ENF-013, "Bonding Procedures," if the driver has a
non-Illinois driver’s license.

III.F. Non-Consensual blood draw procedures (625 ILCS 5/11-501.2)

III.F.1. If a subject refuses to consent to a blood draw, the officer shall contact the local prosecuting
attorney to obtain a search warrant prior to obtaining a non-consensual blood, breath, or urine
test, even in a case involving death or personal injury.

III.F.1.a. The following criteria are required:

III.F.1.a.1) The officer has probable cause to believe the driver has caused
the death or personal injury of another.

NOTE: Personal injury shall include any type A injury as
indicated on the traffic accident report completed by a
law enforcement officer that requires immediate
professional attention in either a doctor’s office or a
medical facility. A type A injury shall include severely
bleeding wounds, distorted extremities, and injuries
that require transporting the injured party from
the scene. See 625 ILCS 5/11-501.2(c)(3); 625 ILCS 5/11-501.6(g).

III.F.1.a.2) The officer has probable cause to believe the driver has committed
a DUI violation, arrested the driver, and completed a DUI citation.
III.F.1.a.3) The officer has read the Warning to Motorist and requested test(s).
III.F.1.a.4) The driver has refused to submit to or failed to complete chemical
testing.

III.F.1.b. If the officer is unable to establish contact with a local prosecuting attorney and the
jurisdiction permits law enforcement officers to seek search warrants directly from
a judge without the involvement of a prosecuting attorney, the officer may attempt
to contact a judge for a search warrant.

III.F.1.c. If the officer is unable to reach a prosecuting attorney or judge to obtain a search
warrant, the officer shall wait until a prosecuting attorney or judge responds.

III.F.1.d. If a search warrant is signed by a judge, the officer shall transport the driver (if
applicable) to a medical facility for testing.

III.F.1.e. Private Phlebotomist - As an alternative for taking a subject to a medical facility for
a blood draw, the officer has the option of contacting a private phlebotomist
company contracted with the ISP. That company will provide a licensed and
trained phlebotomist to draw a defendant’s blood at the time and location of
processing. The subject is responsible for arranging payment with the private
phlebotomist company.

III.F.1.e.1) If the subject has been in a vehicle crash and requires treatment
by a licensed physician for injuries sustained in the crash, the
arresting officer will consult with the treating physician to determine
the best method for testing the subject without unreasonably
jeopardizing the subject’s treatment.

III.F.1.e.2) Deliver the search warrant to the medical personnel and request
blood and/or urine samples collection in accordance with ISP
standards.
III.F.1.e.3) If medical personnel refuse to perform testing or the subject physically resists the testing, the officer should contact their supervisor and consult with the respective state’s attorney’s office for how to proceed.

NOTE: If the subject continues to physically resist and/or refuse to submit to the blood draw after the search warrant issuance, the arresting officer may charge the subject with obstructing justice (720 ILCS 5/31-4).

III.F.1.e.4) Complete blood draw and/or urine collection will be completed as outlined in III.D.2.b. of this directive.

III.F.1.e.5) Package samples according to instructions contained in the ISP specimen collection kit. Handle blood/urine samples in accordance with established evidence procedures outlined in ISP Directive OPS-201, “Evidence - Collecting and Packaging.”

III.F.1.e.6) Complete the Evidence Inventory and Receipt and distribute copies appropriately.

III.F.1.e.7) Transport the driver to appropriate jail facility, if applicable.

III.F.1.e.8) Complete the LESR for refusing the originally requested test(s).

III.F.1.e.9) Complete ISP reporting and bonding procedures.

III.F.1.e.10) Include the search warrant with the report.

NOTE: In the event there is no probable cause of a 625 ILCS 5/11-501 violation, but a driver was involved in a Type A injury or fatal motor vehicle accident, the officer should follow the statutory guidelines outlined in 625 ILCS 5/11-501.6.

III.F.1.f. In a death or personal injury DUI case, blood, breath, or urine samples can be obtained from samples collected by the hospital in the regular course of providing emergency medical treatment without a request from law enforcement.

III.F.2. If a subject refuses to consent to a blood draw and is physically resisting taking of a sample, the officer shall not proceed with the blood draw.

III.G. Traffic Crash Warning to Motorist Procedures (625 ILCS 5/11-501.6)

III.G.1. If the following criteria are met:

III.G.1.a. The driver of a motor vehicle is involved in a personal injury or fatal motor vehicle accident on a public highway

NOTE: Personal injury shall include any type A injury as indicated on the traffic accident report complete by a law enforcement officer that requires immediate professional attention in either a doctor’s office or a medical facility. A type A injury shall include severely bleeding wounds, distorted extremities, and injuries that require transporting the injured party from the scene. See 625 ILCS 5/11-501.2(c)(3); 625 ILCS 5/11-501.6(g).

III.G.1.b. The officer finds no indicators on scene that the driver is under the influence of alcohol, drugs or intoxicating compounds.

III.G.1.c. The driver committed a violation of the Illinois Vehicle Code (IVC) or similar provision of a local ordinance, other than equipment violations contained in Chapter 12 of the IVC or similar provisions of local ordinances, as evidenced by the traffic citation issuance.

III.G.2. The officer will:
III.G.2.a. Complete and issue at least one citation for an Illinois Vehicle Code (IVC) violation committed by the driver, other than equipment violations contained in Chapter 12 of the Illinois Vehicle Code or similar provisions of a local ordinance.

III.G.2.b. Transport driver to a facility for chemical testing, if applicable.

III.G.2.c. Complete and read the Traffic Crash Warning to Motorist.

III.G.2.d. Request portable breath test and/or other chemical tests of breath, blood, and/or urine.

III.G.2.e. After the driver either submits to or refuses the requested tests, complete and issue the Traffic Crash Sworn Report. There is no receipt to drive.

III.G.2.f. Mail the Traffic Crash Sworn Report to the Secretary of State (SOS) if the results indicate an alcohol concentration of 0.08 or more, or for any amount of a drug, substance, or intoxicating compound. Mail and/or provide the Sworn Report to the driver along with the appropriate Uniform Traffic Citation.

III.G.2.g. Complete appropriate bonding procedures.

IMPORTANT: Do not use the Traffic Crash Sworn Report in a non-consensual blood draw situation. If indicators of DUI are present, follow standard DUI arrest procedures.


III.G.3.a. If the following criteria are met:

III.G.3.a.1) The driver of a motor vehicle was stopped for a violation of the Illinois Vehicle Code on a highway.

III.G.3.a.2) The driver is under 21 and the officer has probable cause to believe, or personal knowledge, the driver has consumed an alcoholic beverage.

III.G.3.a.3) The officer believes the driver has a blood alcohol content (BAC) of .01 or more and less than .08 (after conducting standardized field sobriety tests, when practical, and having the driver submit to a PBT, when available).

III.G.3.b. The officer will:

III.G.3.b.1) Complete and issue at least one citation for an Illinois Vehicle Code (IVC) violation committed by the driver.

III.G.3.b.2) Transport driver to a facility for testing.

III.G.3.b.3) Complete and read the Zero Tolerance Warning to Motorist.

III.G.3.b.4) Request chemical tests of breath, blood, and/or urine.

III.G.3.b.5) Complete the Zero Tolerance Sworn Report.

III.G.3.b.6) Complete a report and a citation for Zero Tolerance, 625 ILCS 5/11-501.8 marked "record copy only."

III.G.3.b.6)a) Include breath test results in speed and zone fields (see II.G. of this directive).

III.G.3.b.6)b) All copies of the Zero Tolerance citation will be forwarded with the report.

III.G.3.b.6)c) This citation is for record keeping only, and no portion is given to the violator.

III.G.3.b.7) Complete bonding procedures and distribute the Zero Tolerance Sworn Report:

III.G.3.b.7)a) Copy to the motorist

III.G.3.b.7)b) Copy to the Secretary of State

III.G.3.b.7)c) Attach a copy with the report
III.G.4. Juvenile Procedures

III.G.4.a. If the driver is under 18, the officer must follow the proper juvenile procedures (see the "Juvenile Manual" for the procedures). If the officer believes the driver has a BAC less than .08, the officer should follow zero tolerance procedures.

III.G.4.b. However, if a test is then given and the test result is greater than .08, the test result cannot be used to charge a DUI offense due to the zero tolerance warning that was read to the driver.

III.G.4.c. If other independent probable cause is developed, a DUI citation can be written and the statutory summary suspension process followed.

III.G.4.d. If .08 or greater, the officer will follow standard DUI procedures.

III.G.4.e. When appropriate, consider a charge of Illegal Consumption of an Alcoholic Beverage by a Minor (235 ILCS 5/6-20).

III.H. Reporting and Distribution of Forms

III.H.1. The arresting officer will complete an ISP report subsequent to any arrest for a violation of 625 ILCS 5/11-501, et seq. as soon as practical following completion or refusal of the chemical test(s) requested.

III.H.2. Attach the Alcohol and/or Drug Influence Report, form ISP 5-229, to the applicable report as a supplement. TraCS users will complete the appropriate section in TraCS in lieu of the Alcohol and/or Drug Influence Report.


III.I. Care and Release from Custody

III.I.1. The Academy will provide training to all ISP officers concerning response and care for persons under the influence of alcohol or other intoxicating compounds.

III.I.2. Officers will monitor persons arrested who are under the influence of alcohol or other intoxicating compounds while the subject is in their custody and provide proper medical care as necessary. If the subject in custody requires medical attention, the officer will follow the procedures outlined in ISP Directive ENF-014, “Prisoner Transportation, Handling, Searching, and Jailing.”

III.I.3. Release of subjects under the age of 21 who are under the influence of alcohol or other intoxicating compounds:

III.I.3.a. If the subject is at least 18 years of age, but under the age of 21, make a reasonable attempt to contact a responsible adult to take custody of the person under the influence of alcohol or other intoxicating compound.

III.I.3.a.1) Consider a person a responsible adult when age 21 years or older, not under the influence of alcohol or other intoxicating compound, who is willing to care for the person under the influence of alcohol or drugs.

III.I.3.a.2) Document such attempts in the ISP report and include the time(s) and name(s) of the individual(s) with whom contact was attempted.

III.I.3.b. If the subject is under the age of 18, conduct bonding and release procedures in accordance with the Juvenile Court Act and ISP Directive OPS-037, “Juvenile Procedures.”

III.I.3.b.1) Do not release juveniles until a parent or legal guardian is contacted and arrangements are made for them to take custody of the juvenile.
III.I.3.b.2) If unable to contact a parent or guardian within a reasonable time period, contact the appropriate child services authorities to arrange for juvenile custody transfer to a known responsible adult.

III.I.3.b.3) Document all attempts to contact a parent/guardian in the ISP report.

III.J. Collection of Statistical Data

The arresting officer will record implied consent data in the Chemical Tests Given section of the Alcohol Influence Report located in TraCS.

Indicates new or revised items.

-End of Directive-
I. PURPOSE

This addendum will provide a standardized procedure for the detection of impaired drivers through training and certification processes.

II. DEFINITIONS

II.A. Standardized Field Sobriety Testing (SFST) – the three National Highway Traffic Safety Administration’s (NHTSA) validated tests, which includes Horizontal Gaze Nystagmus (HGN), Walk and Turn (WAT), and One Leg Stand (OLS), administered by the officer to show impairment.

II.B. Advanced Roadside Impaired Driving Enforcement (ARIDE) – a comprehensive intoxicated driving course which enables the officer in the detection of drug-impaired drivers.

II.C. Drug Recognition Expert (DRE) – officers trained to recognize impairment in drivers under the influence of drugs or a combination of drugs and alcohol. A DRE is able to provide expert testimony, upon approval of the court, as to drug and/or alcohol impairment.

III. SFST

III.A. Training will adhere to the NHTSA/International Association of Chiefs of Police (IACP) approved curriculum.

III.B. Initial training will be given to all new Cadets while in the Illinois State Police (ISP) Academy.

III.C. A live workshop will be used in the training.

III.D. District Commanders shall ensure that personnel on patrol and/or participating in alcohol-related hirebacks complete an SFST refresher course on a bi-annual basis and in years when new NHTSA Manuals are released. The SFST refresher training will adhere to the NHTSA/IACP approved curriculum and should include proficiency examinations.

IV. ARIDE

IV.A. Training will adhere to the NHTSA/IACP approved curriculum.

IV.B. ARIDE must be taught by a DRE Instructor per NHTSA/IACP administrative rules.

IV.C. Training will be given to all ISP personnel in a patrol function.

IV.C.1. All new Cadets, upon completion of the Field Training Officer (FTO) program, will be required to attend ARIDE training at the ISP Academy. The ISP Academy will schedule the training for approximately two months after the projected end date of the FTO period.

IV.C.2. Each district will conduct an ARIDE refresher in conjunction with the SFST refresher. The ARIDE refresher must be taught by a DRE Instructor and can be instructor-led or web-based format. The ARIDE refresher curriculum will be developed by the DRE Instructor and must be approved by the DRE State Coordinator.
IV.D. The online version of the ARIDE class is NOT an approved curriculum for ISP personnel.

-End of Addendum-
I. PURPOSE

This addendum will provide a standardized procedure for the utilization of Drug Recognition Experts (DRE) to assist with patrol and investigation functions.

II. DEFINITIONS

II.A. Drug Recognition Expert (DRE) – officers trained to recognize impairment in drivers under the influence of drugs or a combination of drugs and alcohol. A DRE is able to provide expert testimony, upon approval of the court, as to drug and/or alcohol impairment.

II.B. Agency Coordinator – a DRE Instructor who supervises the DRE officers within the Illinois State Police (ISP).

II.C. State Coordinator – a designee recommended by the Illinois Department of Transportation (IDOT) to the Illinois Chiefs for designation by the International Association of Chiefs of Police (IACP) as the head of the DRE program for the state.

III. DRE SELECTION/CERTIFICATION PROCESS

III.A. DRE applicants must:

III.A.1. Have at least two years of experience on patrol.

III.A.2. Be presently assigned to patrol duties. Those not assigned to patrol duties are eligible for consideration for DRE training on a case by case basis.

III.A.3. Have successfully completed the National Highway Traffic Safety Administration (NHTSA)/IACP approved SFST training.

III.A.4. Have successfully completed the NHTSA/IACP approved ARIDE training.

III.A.5. Submit the following information for selection consideration:

III.A.5.a. Student application.

III.A.5.b. Copies of two DUI arrest reports, with video tapes if available, from the previous 12 months, preferably including one report involving DUI drugs.

III.A.5.c. Letter of recommendation from a local prosecutor or from a currently certified DRE.

III.A.6. Fully complete the application. All applications are reviewed by the Agency Coordinator and recommended to the State DRE Coordinator for final approval. Incomplete applications will not be considered.

III.A.7. Express their willingness to serve as a DRE for the required minimum two-year period.

III.B. DRE Training

III.B.1. Training will adhere to the NHTSA/IACP approved curriculum.

III.B.2. Phase I DRE Pre-School (16 Hours) – During this phase of training the students will become familiar with the seven drug categories and the techniques and procedures for evaluating
III.B.3. Phase II DRE School (56 hours) – Students will receive detailed instructions in the techniques of drug influence evaluation examinations as well as in physiology, the effect of drugs and legal considerations. Upon completion of this phase of training, the student must pass a written exam before proceeding to Phase III of the DRE training.

III.B.3.a. Students must maintain at least an 80 percent average score throughout the DRE School.

III.B.3.b. Students must score at least 80 percent on the final exam to proceed to Phase III of the DRE Training. Students will be afforded a retest on the final exam at the discretion of the State Coordinator.

III.B.4. Phase III DRE Field Certifications – This phase will be completed within 90 days of the completion of Phase II. During this portion of the training, students under the direction of a certified instructor(s) will evaluate subjects suspected of drug impairment other than alcohol.

III.B.4.a. DRE students shall administer 12 evaluations, at least six of which are evaluations as the primary evaluator.

III.B.4.b. Each candidate, whether serving as an evaluator, observer, or recorder, shall independently complete a report on the evaluation to include a DRE face sheet and narrative and shall independently identify the category(ies) of drugs affecting the subject to a DRE Instructor.

III.B.4.c. To obtain a DRE certification, the student must maintain an 80 percent toxicological confirmation rate and complete a comprehensive Certification Knowledge Examination.

III.B.5. At the conclusion of the Field Certification Training, the student shall prepare a curriculum vitae (CV) to submit to a DRE Instructor for approval. The CV will reflect the student’s training and experience. The student shall maintain a rolling log of all evaluations they conduct or observe.

IV. DRE RECERTIFICATION

IV.A. Recertification is necessary to ensure the DRE maintains proficiency. Maintaining the following records concerning certification and recertification is required:

IV.A.1. Copies of all drug evaluations.

IV.A.2. Rolling log.


IV.A.5. Training certificates.

NOTE: A DRE must complete the DRE Recertification in the presence of a DRE Instructor.

IV.B. DREs are certified by the IACP for two years. To achieve DRE Recertification, a DRE shall demonstrate continuing proficiency by performing the following:

IV.B.1. Performing a minimum of four evaluations since the date of their last certification. Training or “mock” evaluations do not count towards the four evaluations. One evaluation must include a certified DRE Instructor as a witness. The evaluations are performed on subjects impaired by drugs. A separate instructor-witnessed simulated classroom evaluation is permitted; and

IV.B.2. Complete a minimum of eight hours of recertification training since the date of the DREs most recent certification (or prior recertification) date. Only training approved by the State
DRE Coordinator is permissible. Training may occur over two sessions, each no less than four hours consistent with the IACP standards for such training; and

IV.B.3. Present an updated CV and rolling log to the State DRE Coordinator; and

IV.B.4. The DRE shall have all evaluations up-to-date and entered into the National DRE Tracking System database prior to recertification.

IV.C. Obtaining a one-year administrative extension following certification lapse is possible by submitting a written request to the State DRE Coordinator within 30 days prior to their certification expiration date. The extension provides additional time for the DRE to obtain recertification by the State DRE Coordinator without repeating the original certification process. Extensions are granted at the sole discretion of the State DRE Coordinator.

V. DRE INSTRUCTOR

V.A. Training will adhere to the NHTSA/IACP approved curriculum.

V.B. Because of the highly technical nature of the functions performed by the DRE, only persons experienced in the techniques of drug influence evaluations should instruct in the Drug Evaluation Classification (DEC) Program. In general, these instructors will be certified DREs with experience in performing drug influence evaluations and in providing testimony in court in the area of drug recognition.

V.C. Certified instructors are responsible for observing, evaluating, and verifying the performance of candidate DREs throughout the training and certification process. In addition, certified instructors must provide periodic update training to DREs already certified.

V.D. Only persons DRE certified may obtain certification as DRE Instructors.

V.E. A DRE desiring to become an instructor in the DEC Program shall make written application to the Agency Coordinator through the chain-of-command. The Agency Coordinator will ensure that the candidate meets all requirements to become an instructor and will refer the application to the State Coordinator.

V.F. The Agency Coordinator shall verify to the State Coordinator that the Candidate DRE Instructor meets all prerequisites to enter the DRE Instructor Training. The following are prerequisites:

V.F.1. Must have been a certified DRE for at least three years.

V.F.2. Must have completed a minimum of 25 enforcement DRE evaluations.

V.G. The DRE Instructor Candidate shall satisfactorily complete the NHTSA/IACP approved DRE Instructor Development Course, or an approved equivalent, which shall include both a knowledge and practical examination of Candidate Instructors.

V.H. Upon satisfactory completion of the NHTSA/IACP approved classroom portion of the training, or completion of an equivalent program, candidates are designated as a Candidate Instructor for the purposes of completing the instructor certification. To complete instructor certification, the Candidate Instructor must:

V.H.1. Teach a minimum of two hours in the classroom of an approved Drug Recognition Training program; and

V.H.2. Supervise the administration of not less than two drug influence evaluations performed by candidate DREs during certification training.

V.I. Upon satisfactory completion of instructor training, copies of all documentation, including instructor progress logs, examination scores, and instructor evaluations, are forwarded to the Agency Coordinator. The Agency Coordinator will forward these documents to the State Coordinator who shall certify that the candidate has successfully completed all Phases of DRE Instructor Training. The IACP will then credential and register each applicant as a certified DRE Instructor.
To ensure the proper conduct and delivery of the approved DRE curriculum, all training sessions conducted as part of the DEC Program are coordinated by a certified DRE Instructor who has previously instructed. All classes taught by Candidate Instructors are supervised directly by a certified DRE Instructor.

An instructor trainer shall have demonstrated proficiency as an instructor.

A DRE Instructor trainer must possess DEC Program knowledge, have audited all phases of the DEC Program, and possess the ability to articulate the student and instructor manuals.

To ensure consistency, classes taught by instructor trainers shall be taught in cooperation with certified DRE Instructors.

The following criteria are considered sufficient cause for removing and decertifying a DRE from the DRE Program, and require reporting through the chain-of-command and to the Agency Coordinator:

- Substandard performance.
- Improper and inaccurate documentation of DRE evaluations.
- Refusing to perform a DRE evaluation.

**NOTE:** This does not mean a subject refuses to complete a DRE evaluation.

- Insufficient use of DRE skills.
- Failure to complete biennial recertification.
- Any inappropriate acts on the part of the DRE that would bring discredit upon the DRE Program.

If the Agency Coordinator deems decertifying a DRE is necessary, he or she will contact the State Coordinator to begin the process.

Each DRE is issued and responsible for the following equipment:

- Stethoscope
- Sphygmomanometer
- Pupilometer card
- Digital thermometer and covers
- Penlight
- UV penlight
- DRE kit bag
- DRE manuals

In the event of a DRE decertification or other separation from the Program, the DRE must return all issued DRE equipment to the Agency Coordinator.
VIII.A. The Shift Supervisor on duty shall contact and dispatch a DRE, if available, for a traffic crash which results in the death or Class A injury of an ISP officer and any driver is suspected of driving under the influence of drugs or a combination of alcohol and drugs.

NOTE: Nothing in section VIII.A. of this directive shall prohibit the District Commanders or designees from contacting and/or dispatching a DRE when any driver is not yet suspected of driving under the influence of drugs or a combination of alcohol and drugs.

VIII.B. The Shift Supervisor on duty shall request a DRE respond to the scene, if available, when circumstances warrant DRE expertise. The following circumstances are considerations when determining if DRE response is needed:

VIII.B.1. A traffic crash results in death or is potentially fatal, a Traffic Crash Reconstruction Officer (TCRO) is dispatched to the scene, and a driver is suspected of driving under the influence of drugs or a combination of alcohol and drugs.

VIII.B.2. A traffic crash involves a commercial motor vehicle, and the crash results in death or Class A injury, and there is suspicion of drug use by an involved driver.

VIII.B.3. A traffic crash involves a vehicle owned by the state of Illinois, and the crash results in death or Class A injury, and there is suspicion of drug use by an involved driver.

VIII.B.4. An officer has made an arrest for driving under the influence (DUI) to which the portable breath test (PBT) is inconsistent with the amount of impairment shown by the arrestee, and the Shift Supervisor on duty feels the case is beyond the officer's expertise.

VIII.B.5. A DUI of drugs or drug and alcohol combination arrest is made and the arrestee is felony-eligible for DUI.

VIII.B.6. A request for an ISP DRE is made by an outside agency and such request is permissible without negatively impacting operational needs.

VIII.C. The Shift Supervisor on duty shall contact and/or dispatch a DRE using the following order of priority:

VIII.C.1. ISP DRE currently on-duty within the District of occurrence at the time of the crash. The DRE is immediately dispatched to the incident.

VIII.C.2. On-duty DRE assigned to a neighboring district or local police agency, and it is determined the DRE is within a reasonable distance from the incident.

VIII.C.2.a. Requests for an ISP DRE from a neighboring district are made through the neighboring district's Shift Supervisor.

VIII.C.2.b. A list of local DREs is available through the DRE State Coordinator.

VIII.C.3. Off-duty ISP DRE assigned to the District where the crash occurred. If available, and within a reasonable distance, dispatching an off-duty DRE to the incident is permissible.

VIII.C.3.a. Factors such as response time and the training levels of the initial investigating officer and/or TCRO are considerations before requesting a DRE is called out on non-scheduled overtime.

VIII.C.3.b. If DRE response is not an option due to weather, travel distance, previously assigned duties, or other circumstances affecting DRE availability, the on-duty Shift Supervisor may permit the DRE to contact the investigating officer via telephone to provide guidance in the matter.

NOTE: Discontinuing attempts to contact and/or dispatch a DRE is permissible if the above options fail to identify an available DRE within a reasonable distance/time.

VIII.D. The responding DRE:

VIII.D.1. Shall conduct a drug evaluation on the suspected at-fault driver involved if applicable.
VIII.D.2. Shall conduct a drug evaluation on any driver suspected of, or arrested for, driving under the influence of drugs.

VIII.D.3. May conduct a drug evaluation on the remaining drivers involved if applicable.

NOTE: The DRE has the discretion to determine if a drug evaluation on all the drivers involved is necessary.

VIII.D.4. ISP employees involved in a traffic crash are processed in accordance with ISP Directive EQP-003, “Department Vehicle Crash and Incident Reporting.”

NOTE: In a Class “A” injury or fatal crash, the involved employee shall submit, upon the request of a law enforcement officer who has established probable cause, to a chemical test or tests of his/her blood, breath, or urine for the purpose of determining the alcohol content thereof, or the presence of any other drug or combination of both, in accordance with 625 ILCS 5/11-501.2(c). In situations where probable cause does not exist, administrative action requires reasonable suspicion, in accordance with established labor contract guidelines and protocols, to determine whether chemical testing is necessary.

IX. DRE RESPONSE AND REPORTING

IX.A. A DRE shall respond to calls for service within a reasonable distance of their assigned service area.

IX.B. A DRE shall make valid and fair assessments of the suspected impaired person and document findings factually following IACP/NHTSA DRE protocol.

IX.C. A DRE will complete a Drug Influence Evaluation face sheet, as well as a narrative report detailing their observations, and forward the report to their supervisor.

IX.D. The supervisor shall send a copy of the approved report to the Agency Coordinator.

IX.E. Upon report completion, the DRE will document the drug evaluation on their rolling log and in the National DRE Database.

X. AGENCY COORDINATOR

X.A. The following are prerequisites for Agency Coordinators:

X.A.1. Must possess certification as a DRE Instructor; and

X.A.2. Certified as a DRE for a minimum of five years; and

X.A.3. Has completed a minimum of 50 DRE evaluations.

X.B. The following are the duties of the Agency Coordinator:

X.B.1. Manage users on the National DRE Database.

X.B.2. Submit NHTSA reports to the State DRE Coordinator.

X.B.3. Approve/reject reports on the National DRE Database.


X.B.5. Coordinate ARIDE training.

X.B.6. Monitor certification dates of expiration for DREs.

X.B.7. Provide training so DRE officers can maintain their certification if needed.
NOTE: States must have access to the National DRE Database to perform their duties according to NHTSA/IACP. Only certified DRE officers are authorized to be on the National DRE Database.

-End of Addendum-