**Transcript**

August 28, 2025, 2:05PM

 **Harding, Ed H (KYTC)** started transcription

0:03
Matt are you.
Let us know who he is and who he works for.
My name is Sydney Duval and I am with ATM Co chair of the bear driving task force.
And program manager over the alcohol related impaired driving.
My name is Kyle stork.
I also work with the Albany highway safety.
I am the ignition interlock coordinator for the state.
Rob Richardson central Kentucky LEM.
I'm rob wertheim.
I am the Dre state coordinator.
Chris well I'm the LA.
World War 's office of highway safety pio.
I'm ada Harding.
We're gonna off site always saved you on traffic records and and stats.
I'm Bernie Owens.
I work as a justice program administrator for the highway safety program at Kentucky State Police.
Ashley Bush Kentucky violence injury prevention program at the Kentucky injury prevention Research Center kiprote.
Brendan Stein deferred taking state police forensic laboratory system toxicology section supervisor.
Claire Yates vision zero coordinator at Louisville metro.
John McCarty retired judge.
That are on the team if you'd like to just kind of go around and introduce yourselves.
Alright we we wanna go through it alphabetically here.
So Alan that'll be fun.

 **Alan** 1:42
Yes, Alan George, Woodford County Attorney and DUI liaison for the Kentucky County Attorney's Association Board.

1:51
And Brian Carter.

 **Carter, Bryan (KYTC)** 1:54
Morning everyone.
I'm Brian Carter.
I work with Rob Werfel, assistant Dre coordinator, and oversee the phlebotomy program.

2:05
And Nate king.

 **Dean, Nathan R (KYTC)** 2:08
It's not alphabetical, but.
I guess never mind.
I was confused.

2:21
Steve you were here.
You wouldn't have that problem.

 **Dean, Nathan R (KYTC)** 2:23
Well, at first I thought he was going by first name.
And then I realized, no, he's not.
Anyways, my name is Nate Dean and I am the grants branch manager with the Kentucky Office of Hwy. Safety.

2:36
And Brad Franklin.
You are you are for the good of your family.

 **Franklin, Brad B (KYTC)** 2:50
Sorry, Mike was my mic was muted.
Brad Franklin can take you off Hwy. Safety.

2:56
And then javo.
Jabo has had unmuted are you there.
No.
OK Megan pezzel.

 **Kissel, Megan E (BHDID/Frankfort)** 3:21
My name is Megan Kissel and I work for the DUI program in the Department for Behavioral Health, Developmental and Intellectual Disabilities.

3:31
Files.

 **Harrison, Merrell (KYTC)** 3:40
Can you hear me now?

3:42
Mm-hmm.
Yes Gabe.

 **Harrison, Merrell (KYTC)** 3:44
All right, I got my mic figured out.
Earl Harrison J Bo is my nickname.
Highway safety and ignition interlock program.

3:56
And back to Jeff lyles.
1.
Well we'll come back to you Joe Alex Audi.

 **Otte, Alex** 4:13
Alex Audi. I'm the regional executive director with mother's construct driving.

4:18
Indent and Tiffany quarles.

 **Quarles, Tiffany L (BHDID/Frankfort)** 4:30
Hello sorry, I am Tiffany quarles.
I am the alcohol prevention enhancement specialist for the division of substance use disorder.

4:44
And not sure why it's not scrolling down on the participants here so judge hassel.

 **Robby Hassell** 4:52
Good morning folks. I'm Robbie hassel.
I'm a senior Cor judge in North Carolina meeting with you today as the regional Judicial outreach liaison, along with our colleague and friend Judge John McCarty.
Who's your state, Jol?
As I said to Tiffany, I'm going to have to apologize ahead of time.
You'll see me hopping in and out a little bit of this meeting because the Virginia Impaired Driving Task Force at which I'm also a member, has chosen to meet at this exact time.
So I'll be hopping back and forth between the two of these, but great to be with everyone this morning.

5:20
We understand judge thank you.
And Kenny Johnson.
And we'll we'll come back to you Troy dye.

 **Troy Dye** 5:43
Troy dime, the law enforcement liaison for Northern Kentucky with the Highway safety office.

5:50
Ryan Connolly.

 **Ryan Conley (FBI TFO)** 5:52
Yeah. Thanks, Ryan.
Connie with the Ashland, KY, Police Department assistant chief.

5:58
And William Neal.

 **Tennill, William T (PPC)** 6:01
Hi everybody.
Travis tunnel.
I'm the assistant director of ABC Division of Enforcement.

6:08
I think that I think that everybody on there I think we have one or 2 but maybe they're there and appreciate everybody for being here.
We'll go ahead and get started.
Just kind of hopefully Sidney had sent out the minutes from my last meeting and let me just go ahead and get them approved.
Everybody somebody would like to.
Make an introduction Larry.
We appreciate that.
And then we'll let tip kind of go through some of our ahs updates.
OK.
So.
Sure right now you know that we are.
Most of you may know that we're under the drive so we're getting pulled over.
Campaign so that will go until.
So Monday on Labor Day September first.
So after that.
The next thing that we have the big thing that we have going on is our impaired driving awards that is going to be held on December 10th.
At the Hyatt.
Regency in Lexington the nomination e-mail will go out just like for clicking a ticket that.
Will should go out?
In the last week of November or towards the end of November the beginning of December we will get those sent out as soon as we can.
To help plan the award ceremony so be sure to be on the lookout for that or make sure your agencies know to be on the lookout for that and that will only come in electronic form.
Yes Sir.
The next thing.
We want to talk about is the teen or the Kentucky safe teen driving challenge and I'm going to let marla and Ed give us some information on that.
Hey so at the beginning of the year we had a driving challenge for teams.
Our goal was to have 500 sign up.
We had 1200 to sign up.
We had about 800 teens accurately take part of the challenge.
500 loose teams had a score about 80% or better.
So since we surpassed what we were our goal we're going to do a second challenge this fall.
The way that challenge will differ is we're going to allow 15 year olds with our permits or driver 's license so it'll be 15 to 19 year olds.
And we're also going to have high schools compete against each other.
To get this particular contest underway we are looking for sponsors and we'll let Ed he'll help me out here with this.
So we're going through and trying to get sponsors on this.
They where the state decided we put a request for proposal out there and and ask for people to reply to that.
So if you all have any anybody who's a 3rd party they would be interested in in going through and contributing to that.
We have a RFP is out on.
The vendor self-service portal or state government and we'll have we'll have a link on the top of both of our web pages to go through and.
And indicate how to get to that proposal.
We'll have that information there.
So it went live on the 6th or 26th and then we'll be accepting questions on that through the the second of September.
And then it closes just a a little while after that.
But again you'll need to to register as vendor self self-service portal to go through and actually apply for that RFP and again our partners at triple-A were very awesome and helped us out.
On their first iteration and so it we're just trying to before we maybe maybe did something a little bit differently and so this time we're trying to make sure that we're we're following all the all the check boxes that we need to on it so so we we.
Hope to have them as a partner again for this one but we're hoping to potentially expand.
And have more partners again with the expansion of.
The.
Of the way that we're gonna try to do school versus school and so forth this time around.
Can you place the the link or more information to that in minutes that's sent out?
Yes Yep yes.
Thank you Tim you're welcome.
So the next person we had on the agenda was sabra Jones.
She's the regional for the North East.
I do not believe.
She has been able to join us yet.
So.
Hopefully she might know better.
I don't know.
Oh she might be on your team.
Yes that's a good point.
So let's just jump on down if she's able to hop in then we'll just plug her in.
Matt 's going to provide us an update on the oral swab pilot that we have going on right now OK.
Yeah we just to kind of touch on where we're at a little bit we.
Have finished with the GHSA part of it which was our initial grant?
Finish that up sent a final report into them this past week.
We had the 5 agencies that that received one of the so toxic units we've received some data.
We haven't gotten all the data.
Like a year from 3 of the agencies I'm not real sure exactly what we'll get from them yet.
The 2 of the agencies pipewell PD and Madisonville PD have submitted you know the usage on their.
Actually sent that to Ed earlier too just to share it with him a little bit.
The.
Feedback from the agencies was was super.
They really liked the unit.
It was able to detect a lot of positive hits which I know they've correlated quite a bit of that with with the the actual drug through the through the blood test.
We're still trying to compile everything to compare it with if the RE evals were done we'll kind of look through some of that information.
Hopefully we'll have a better breakdown in comparison for you the next task force meeting.
I do know there were.
There's always questions like when we try to test these things out like I mentioned to Brandon before we had.
One instance at Pike PD where they had gotten the suspect they got a positive heated for cocaine.
The suspect admitted to using cocaine the blood results did not come back with cocaine in the system but it came back with all the metabolites of cocaine because how quickly it metabolizes.
So those kind of things help us kind of correlate compare everything together.
That's why it's important time wise to be able to get the usage of some toxin unit then get the blood drawn as quickly as we can because in that instance the way you know Brandon can you know tell you more but the way it metabolizes the system met.
So fast that when you get even get adre on the scene depending.
It takes that or even see the side effect from it but they can also see those side effects going away from it too as well when they're doing their eval so.
You know this is a tool that I think the agencies are gonna come gonna be able to use a lot just to help them with probable cause of getting.
The getting a warrant for the blood results which is huge and then being able to get adre in there too as well to do the eval we have purchased 55 more units.
Currently we have 303034 of those 34.
Hands right now.
We have some other units that we are right now going to get with our LE LS on in their region and select some agencies that would be willing to start using these.
We.
Are really really pushing to use Ed has came up with a a sheet or a a link?
That data link that they can go in and enter each time the so toxa is used.
The agency.
The officer to go in and enter that into it that they have used it.
These are the results that we found or whatever and that comes straight to into our system for you know that way we can keep a running spreadsheet for all that.
We really really have to have the data in order to justify what's you know how we're using these and to show like we would like to be able to do here in the near future to have some kind of.
Breakdown of everything.
So that we can correlate that and have that in with one of our presentations we share with everybody because I know this is a big push a lot of other states are looking to use these.
I know a lot of states have said they're going to start using these and have it yet and I think they're really kind of waiting to see.
How?
The reaction.
Comes out of you know our usage of them and some of the other states that are using these too as well so.
Right now we're we'll hopefully get some of that more of the data collected so we'll have a bigger.
A bigger pool.
Pull from and with KSP now using those 2 we're hoping that just kind of increases that amount so that by the time we have our next task force meeting we'll be able to and as as we go through and we get some of this information I'll be we.
Just send out updates as we randomly can that way we'll keep everybody on the task force.
You know kind of informed on what's going on with that.
Anybody have anything to add to that.
I was going to ask how many oral salts or do you all have out.
How many agencies do you anticipate participating in whatever?
Well we want to.
Get as many out as we possibly can.
The thing is is these units cost us around $5000.00.
They're the only inhaled units in the country that make it safe for officers use roadside so we you know and they every all it said there's always going to be.
False positives.
False negative type things that go on.
That's why correlating with the blood and the Dre 's is huge and like I said right now we had 5.
We had 5 units.
We started out with with the ghsa grant which turned out pretty good.
Without we just haven't collected all of our agency data yet.
We've gotten 2 of them so far but we've also got feedback from the agencies and they they really like those as well.
Just helps out but KSB now has 34 units so and then we have another you know 20 some units that are that were waiting to get out.
So we're.
Gonna hopefully have about 60 units out pretty soon.
I mean with all the agencies we have in the state and the number of you know we're always going to have units that go down and break or something like that but we are able to.
The cool thing.
About sotox of these units is they store all this.
So we'll be able to go back and print out the information.
That's all these the the number of times that.
Here's one.
The partridges.
So we will know we'll be able to go in and print that stuff out and we'll actually have that information.
So that is one thing that we're the way we do.
As well and the vendor does have the capability to plug a device in it is encrypted on the device though so it's not like.
We'd go through and tell them hey to plug ASD card in and copy the data across.
So.
On the actual number is swamp.
So we we went through and when we did the the training with all of them we went through and said make sure that you let us know on how many you've used so that we can go ahead and report her the replacement kits for those so every one.
Of the KSP posts got it was at a starter kit of 102 pests so so every KSP post has at least that 100.
I think rob Richardson 's going to be going through and trying to help with making sure that we get the the supplies to them.
So it does happen.
So part of the problem is the cartridges.
Are they have a shelf life?
So we don't want you on order too many and each cartridge test cartridge is $27.40 a piece.
Swab itself is $4.50 so you can see every test you run.
There's about $31.00 right.
So it's not cheap.
It's not like APVT in that it's Pvt.
I'm with ABQ strong.
Everybody know.
You know what I mean.
Yeah the other big thing is Britney is I haven't wanted to bother major Walker.
Oh yeah.
I know they had some personal things going on but really what we need is what Ed created the link for the data.
It's so simple.
OK.
I know initially we were looking at KYops and Brandon we were trying to figure out major Walker and I because the big thing is to have correlate.
Those results with a blood submission through you all.
How are we gonna correlate that?
And can it be done within beast or.
Does it need to be done with kyops and I don't know if kyoops talks to beast?
I'm assuming it does not.
Oh thanks over here.
Yes So what I've learned from other states is that that's the big thing right.
Because if when we die but this is going to have to be done by hand which I'll be honest with you.
Society now I don't think it has to be so I think that's what major Walker was working toward was talking to people at kyops was an option there or the CAD system does the CAD system talk to to be any.
I don't know if anything to talk to beast.
I don't know.
Yeah so because I you know.
I think we also talked major Walker knight about the CAD system because the way but in the meantime temporarily Matt and I talked and Ed the link.
It takes 30 seconds.
I I've I know the 5 agencies that we do have they have that link.
Does KSB have this link or?
Well they don't but I'll be honest there's you've got some really there's a trooper I talked to.
Perfect OK.
He called me down at post 7 and I don't wanna dime him out but he's he's rocking and rolling down there because we had to give.
A few posts have needed more cartridges so I kind of know what posts are really knocking it out 'cause we don't want it.
Like I said we don't want to give him 100 cartridges that are going to sit on the shelf and expire because every box we buy a cartridge is $685.00.
There's only 25 in it so you just don't sit there.
The collectors are different.
But.
If if I can send you that link?
I would you know again I don't.
I'd like to talk to major Walker.
Say hey temporarily let's just use this.
There is no identifiers on their right head.
We're not getting any kind of name date of birth right.
Social all we're doing is time that you run it and it can show you.
3 new chair.
It's very simple.
It's very basic but it does give us a map the kind of data that Matt needs and I've really been pushing this and then I'm going to defer to Allen who's on the call.
Alan you there.

 **Alan** 20:55
Yes.

20:56
I talked to.
We talked to Jenny.
I know like Matt said we do have some of these other devices and I know Jeff and Troy and Bob are here but really what we want before we deploy these other devices is.
A friendly prosecutor right.
Someone that is in favor and maybe you can help us with that in correlation with getting with Jenny.
I know Jenny knows some folks already.
That that want these devices.
In their jurisdictions but obviously we don't want to pick an agency where the prosecutor 's office is like I don't want that right 'cause that.
That's that's really not going to help our our cause out.
So maybe that could be on your radar a little bit.
I would appreciate that.

 **Alan** 21:38
Well, we have a board meeting.
September 11th, so I could ask that we have a mass e-mail and see who might be interested.

21:52
I think right.
Yeah that'd be great.
The data really like I said we want to correlate it between all 3 aspects of it because we want to make the case is really strong for one but the other thing too is by by being able to justify this stuff we've got to be able to fund.
This but it's like rob said.
It's expensive.
It's ongoing because you continuously have to purchase things for these agencies a lot of times that may or may not have phones to do that.
We can but by being able to justify this I know the cabinet.
Was really on board because they were the ones?
The reason we bought the the other 55 because transportation cabinet was like yeah we think this is a this is a good need and we were able to acquire the funds to get those but now it's going to be to the point to where we have to.
Show them we're using these things.
That are getting good results out there and they're you know they're getting people off the road they're getting those that have drug problems and you know it's it's kind of a big correlation to not only get them off the road but you get them help after the fact.
Too and that's something we'll start to.
Look forward to.
In the near future is trying to you know especially with these drug impaired driving and stuff like that being able to with our friends from behavioral health kind of see where we need to go with this as far as getting treatment done for these folks so.
Question is there like does the device have a geolocation.
Yeah.
Because if that was something you could technically link that whatever 's put in the KSP the citation for and link it that way.
Geo location I don't.
I mean they don't have GPS on them so the the device operates.
I don't click that OK.
So you do set the date and the time on it.
It is a rechargeable battery in it so they're able to go through and charge those.
It does have an external printer.
That's paired with it.
And so they the 2 of those were able to to go through and print that but it's not capturing GPS coordinates.
On it.
Alex Alex Audi.
Want to see the.
I think online had a a question or comment.

 **Otte, Alex** 23:50
No, I just have a question.
Thank you so much.
I.
I don't know that this is something that we even are hoping for would want, with both programs being so new, but I'm curious if there's any overlap in the agencies participating in the oral fluid program and the law enforcement phlebotomy program. If we're seeing any of the same.
Agencies kind of participate in both.

24:13
Also that would be good because they all they link together so obviously I'm gonna give you scenario you you the roadside the subject volunteers to everything.
You get a positive hit on an oral fluid device with a very low alcohol.
Right and the impairment 's not indicative of alcohol but they're very impaired now.
They refuse let's say they're like hey get them and they're gonna refuse a blood draw.
Or they're going to get a blood draw either way.
If they have a phlebotomist that's going to expedite that especially with some drugs on board that metabolize very quickly?
One thing I would do want to add is I've talked to the sales Rep.
The new update and we're going to have to get all our devices.
My plan is is I'll go around the state and update these devices but they're now going to they're I think it's end of the month they're going to test for fentanyl.
Which is huge right now big time?
Probably the biggest thing I do want to talk about with those devices.
Remember when we train this and no one here maybe even had the training but the name they don't correlate like blood.

 **Alan** 25:17
Repl.
Hi. Hi.

25:24
I think that's the biggest thing.
And maybe pikeville I know some of the guys in pikeville.
They may have thought because 25 milligrams is what the cut.
Is I'm using for THC?
That's doesn't correlate to the same blood as it does oral fluid and and I think that's a little bit of misconception there but I do think that update with the fentanyl is is going to fare pretty well within our state especially from what we're seeing.
Or hearing so and I can only speak for pikeville which is the agency I've partnered with.
And they are certainly interested in getting somebody in to Jeffrey Baldwin training.
And but of course it's.
In many cases especially in these smaller apartments it's a manpower issue of being able to lease loose somebody for 2 or 3 weeks off of scheduling.
But you know they're they're working on it right now.
So currently they don't overlap but we're hoping that it will grow to where they do so between the phlebotomy the world swabs and the Dre 's all 3.
Of them space.
Because we actually do have one agency and it's Madisonville where we have a Sergeant there that is adre adre instructor of phlebotomist and he's been trained to run the setoxa device so he's.
That is one of the 5 that we put out in the field but the rest of them.
Don't really.
They're probably not even close to counties that have a fullbotaminst right now.
Kind of thing.
The phlebotomy program is kind of in the beginning stages.
Right now I think we and we'll get into this in just a minute on how we have if you want we can kind of just kind of correlate into this how many how many do we currently have and what is what's your next class of like.

 **Carter, Bryan (KYTC)** 27:23
Was that for phlebotomy?

27:25
Yeah.

 **Carter, Bryan (KYTC)** 27:26
So we have 5 scheduled for the October class.
Our goal is to add two or three.

27:35
Good.

 **Carter, Bryan (KYTC)** 27:35
And that would double the number in the in the state if we were able to to meet that goal.
We currently have 7.

27:44
So this technically this will be like our 3rd class phobotomus right yes yeah.
So it's kind of like I said we're in the beginning stages of this and it's really starting to it the main thing was starting once to try to get the chiefs and trying to get them on board at first and what we called it was very very new.
To them but I think.
Now that they're starting to understand it more they're starting to realize hey it's a huge benefit for us to have somebody in our agency that can draw blood.
And so it's really I think it's kind of catching up but like Bob said some of the agencies that really need a phobotamous or smaller agency because they're in these rural counties and that's when.
You get the warrant to trying to get the blood is a huge deal for them but at the same time to get them trained they'd have to lose an officer for a couple weeks and it just it takes a little time but I think we're going to we.
Trying to work within the the best we can as far as getting this stuff done but I know we have to follow the rules and regulations because of the the company.
The healthcare company that we use that actually trains our phlebotomists and makes them a national phlebotomist it's a big deal and we want to do it the right way.
So we can't.
We don't want to.
Jeopardize what we're doing with the program.
For.
Next question is Sir just.
Clarification.
Not all in person.
Unit tell us we have a presence a an aid.
Particularly that's it.
The oral swab is one means to give us a more exacting level and the phlebotomy is another method of getting on the exact correct.
We'd like to remember when we're teaching the sotox is not evidentiary.
We better understand yeah.
It's it's just yeah.
Select select select.
Like if you need to OK.
And that's that's the way we we look at and that's we want to give.
So it's basically to give the officers that don't that think something 's there and they they don't trust what they're seeing or they're second guessing what they're saying.
They use the swab and it does hit positive.
They're like Oh yeah I guess I am.
We need to at least go ahead and draw the blood call to to get a warrant whatever they need to do then get the blood and then like I said.
Is a?
Well whether drug over alcohol whatever it is and they have adre local get the Dre in there to do the eval and then try to tie all 3 together to make the case stronger for the prosecution but also it helps the judges too as well saying that we.
Actually have put 3 different pieces together and they all point in the right direction so and again it.
And then there's times like we were talking about even there's going to be times where it might hit on something and the DRA may came in and come in and say well it's not really that.
This is a medical issue of some sort and it's not really this.
And so there's probably good instances will come out of that but we know as the way the study is right now there's probably going to be more bad than good but there are going to be instances where.
And and judge for your information you know so toxic is the would would be the model right of that device but the science behind that is comes from Abbott labs which I think is important to know because that's a pretty big.
Company that deals in medical.
Any furniture that particular unit?
I'm sorry doesn't have it manufactured.
Yeah but what they do is it obviously to get to the law enforcement Abbott owns intoxicated which is the maker of breath testing devices and that.
Right.
So that's how that is followed through so that it's important because somebody asked me about that and listens.
So we've we've.
Got Flyers so from the the manufacturers so we can share.
The the like judicial side.
What I think for me guys?
You know where I'm coming from right.
This isn't this.
This so toxic I can see a judge going.
Whoa holy cow some guy made this in his garage.
You know no no no.
Abbott lab is behind this.
So you know and if you just.

 **Robby Hassell** 31:54
And just to under score what Judge McCarty is saying, this, this is a process you're going to have to go through as your educating judges as we are helping them to do to sift out the, the underlying science and the verification and also the restrictions and limitations as to.
What this oral fluid mobile test system does and what it can't do and what it shouldn't be relied upon for much as the PBT?

32:18
Yeah.

 **Robby Hassell** 32:20
And on just as part of your probable cause determination.
The PBT results themselves are usually not admissible, and it's also prosecutors training. You will tell you that.

32:27
All right.

 **Robby Hassell** 32:31
The sequencing and and what you got on the front end before you even get into, that's going to be important as you're presenting your case. So you don't open yourselves up to confirmation bias, getting dinged on cross examination.
Because once you see it, OK, well, everything is gonna be consistent with that.

32:46
Good.

 **Robby Hassell** 32:49
And that's what I'm seeing. And so.
As Judge McCarty is saying, you know, getting the warrants itself is still a fairly new thing.
In in Kentucky for the blood stuff.
So this is a great alternative as a law enforcement investigative tool.
As far as proving your case in court, you're still gonna need to have everything else that goes with that.
This is just a piece of it.

33:11
Absolutely.
Right and that's the whole thing is if if the officer just uses this by itself and then doesn't follow up with anything else like the doing the due diligence of getting the blood work on time or you're calling it DRN if they have available.

 **Robby Hassell** 33:27
With God, right? Yeah.

33:28
Or.
Yeah so we're specifically asking.
It's on its own we've already told them it's it's probably not going to go anywhere at all.
You're going to maybe get somebody off the road for the night but that's about it.
Our the main idea for this is that it's going.
It's it's probably the best tool we have on the drug side for right probable cause.
So if if you have a positive test on this device then I don't think there's going to be a judge which you can answer this that's that's going to say no to a blood draw warrant or to other considering we have.
Oh yeah there's.
Well all right judge.
I want to kill now.
That aside that's the idea.
Let's let's provide a probable cause for blood draw warrants.
That in combination with Dre should should give us pretty bad case.
And Alex to go back to your previous question I can I can state for the central reason region that in my experience the agencies that are interested in the phlebotomy program.
Seem to also be interested in getting one of the so toxic devices but that does not necessarily hold true in reverse.
So the so a lot of the agencies that are interested in setups are not necessarily interested in globally.
But that could be because they have a good relationship with their hospitals and don't really need that or or something along those lines.

 **Otte, Alex** 34:57
Sure. So sorry to keep us on this. If we need to move on, but in follow up to that, is there a way and and forgive my ignorance, I don't know if there's a cost to send a person a full bottoming training for us or or what that?
Looks like, but is there a way for us to incentivize counties or agencies with us to toxa device to send someone for for the phlebotomy training more or less just for data collection for us?

35:25
I mean.
We'll provide the training for free now.
Yeah I'm around 3.
I mean.

 **Otte, Alex** 35:29
OK.

35:29
And we and we.
We will cover their overtime if they're called out to do a blood draw.
So that's kind of an incentive.
But we try to make things as easy as possible for them that where they don't have to do anything with it but we also do like look for those agencies too.
Which will allow their phlebotomists because we will pay for their over time when they go do the blood draw we pay we have a grant set aside to where they can build that?
Tell us what it costs them to go do the blood draw.
So a lot of these agencies when they when we meet with them we actually kind of talk to them or talk to the chief about hey you have a phlebotomist here you got 2 or 3 counties around you that you could get to pretty quick.
Would you allow your phobotomist to go do drug blood draws in these other counties as well?
I mean we're going to pay for their overtime.
So we're trying to make it as easy for them and as beneficial for anybody that's around them that needs 12 as well.
So like I said it's just kind of in the beginning stages right now and it's you know it's growing and it will grow.
It's like I said it's just it's like anything else it just takes a minute to get the momentum and then all of a sudden it kind of it's kind of like with the Dre stuff.
And all but Alex you have to balance that because let me tell you.
About law enforcement agencies which.
I know at least the 3 of us are very they will take advantage and take advantage.
Give you a good example I won't tell you the agency with that piece of equipment $5000.00 everything.
I had an agency contact me about the printer paper that you can purchase from Amazon.
A case of it for $50.00.
So my personal opinion is there comes a point where you got to have and I'm going to say this from my fto my LELFTO they got to have some skin in the game.

 **Otte, Alex** 37:20
Absolutely, yeah.

37:20
So that's that's not a lot to ask for right.
Right 'cause like Max said we're doing everything we can but you gotta give a little right and.

 **Otte, Alex** 37:25
Agreed.

37:31
But it will.
I think it will come.
I think agencies once they.
Figure it all out.
I mean you're gonna have some that are gung ho.
You're gonna have some that are lukewarm and you're gonna have to die.
So what.
They're not gonna do it.
It's just it's just the nature of the beast really.
But you know we'll take what we can get because we know that.
Whatever 's out there to help them 'cause you know the best we can.
We're gonna try to give them the best we can provide them especially with support and you know but we again.
We've got to have agencies that will get us the information we need for feedback so that we know.
And that.
What we're doing is working because if we can't justify what we're doing then eventually it's gonna kind?
Of fall apart.
And and I know that is happening because one.
Of the.
Guys up in northeast Kentucky actually traveled to.
Another county to do a blood test for them.
Yeah so I know it's happened at least once and that and that's good.
Yeah that was one of the reasons that we you know when they asked in the beginning to do it and they were willing to go to another county or whatever to do the blood draw which was which was huge because you hear more and more of.
The hospital.
Certain hospitals won't do it because they want the the suspect to actually be a patient before they'll do the blood draw and that requires them filling out all this paperwork and all so the hospital refused.
And so we make it as easy as we can for them to do it makes the officer not makes them want to do like judge hassle saying so if if they can follow all the steps the way they need to do it and the easier it is for.
Them to do it getting the blood drawn off because if it comes out it becomes a hassle for them to get a blood draw.
They'll probably do the swab and they're like pretty jail for tonight and then we'll let it go after that and case falls apart and I know we're going to get pushed back on the phlebotomy stuff because everybody does.
And currently I think right now.
Now.
We have one in same area up in northern Eastern Kentucky.
An Ohio attorney has questioned whether a law enforcement phlebotomist is you know certified to draw blood in this.
And that's.
Let me ask a jurisdiction question too.
Kentucky State Police have not an issue local police.
It might be an issue to go out and county.
Could be?
Are they law enforcement related activity so?
But some say there's a lot of there's a lot of vacancies that belong to the like there's a group that backups program.
Back up.
Which is all like you know the MOU stuff where everybody kind of has gives everybody kind of jurisdiction to be able to help those in those?
Right.
There's things that are on the statement.
Mou groups.
Right I think where you're coming from it's not.
Uncommon I think there's actually KRS in there that says that if you're receiving it's requested that you have jurisdiction to that jurisdiction while you're there.
And on your way back home it's because.
I can see you know what I mean.
So I think that's probably.
Yeah that being a revival too.
What we're doing but again those are things that we've had in place in the past that maybe a lot of them don't look like the backups program because when we did we tried to do attack like when we try to do the the corridor grants or whatever that?
Big thing actually having agency writing tickets in other counties which allows them to do that because they were members of that backup program that was part of the central Kentucky.
That passports that would not have been several years ago but.

 **Dean, Nathan R (KYTC)** 40:50
I have AI have a quick question and I.

 **Otte, Alex** 40:51
Well, if there's anything that.

 **Dean, Nathan R (KYTC)** 40:55
Go ahead. No, go ahead.

 **Otte, Alex** 40:55
I was going to say if there's anything that that we can do to help, you know, the conversation with the agencies who maybe Luke warm or unwilling, I just pulled up our numbers and just last quarter we had 53 cases that we knew were drug involved, but.
It says unknown type and of course that's only in the 10 counties that our program monitors.
But if there's anything that we can do to help, message to the Luke warm ones, they start over here to be a resource for that.

41:22
Appreciate that.
Yeah OK.
Yeah.

 **Dean, Nathan R (KYTC)** 41:25
So I don't want to step on the toes of of Matt or Tiffany, but I just have a question.
Rob Richardson, what is the setups reps name? I can't think of it off the top of my head.

41:38
Dollar rental car.
Rob Doug works for a whole lot of rob.
's which.

 **Dean, Nathan R (KYTC)** 41:40
Yeah, Cory.

41:41
Is all good?

 **Dean, Nathan R (KYTC)** 41:42
Yeah. Yeah, too many.
Too many probably, but anyways.

41:46
Hello.

 **Dean, Nathan R (KYTC)** 41:48
I don't know if there would be interest on on the this task force perspective of him giving a presentation next time around, kind of tailored to this audience.

41:48
Good.

 **Dean, Nathan R (KYTC)** 41:58
I don't know if there's interest in that or not.

42:00
How are you?
No absolutely.
We glad to do that yeah.
Actually I'm texting with him right now because I wanna make it clear that you know we have the 5 and KS peace got 34 there are 3 other devices in our state that would purchase from an agency on their own drive and I'd like you know alth.
They purchased them I would like you know we've I've dedicated to support them.
Because and they give them also the link so we can get that data the more data we have from this device although we didn't purchase them right better off we are.
So I'm sure rob will do that.
Yeah because we we've got to get some training and what I encourage is what we do have the training.
I will send Tiffany and Matt because we'll probably do the next training and the next step we get out here in Frankfurt if any of you would like to attend I highly encourage this judge.
That way you can kind of get a basis and understand how that device is working because.
It does have a quality control sort of like a like the intoxilizers do when it goes air blank.
There's a way that it's internally checking itself.
I don't want to get into all the science but like I said it's not just a it's not just a $300.00 Pvt someone 's flown into is what I'm saying.
See you're messing with the checks now because you're putting a new endoxylizer in.
Look brand.
That's brand.
It's not his section.
Out of his.

 **Robby Hassell** 43:26
That's how.

43:26
Company.

 **Robby Hassell** 43:28
Yeah.

43:29
But out outside here.
But yeah I mean I think.
Yeah I think that's a great idea yeah.
So do you.
Want to go ahead and do the RE updates.
Yeah we just wrapped up.
We had an A ride Tuesday and Wednesday this week over Maysville and then we're at the tail end of our schedule kind of where a ride we have like 3 left.
Till our Dre school starts in November and I'm super excited about the DRA school because right now the way it stands it looks like I have 14 students which is one of the largest classes.
That we've done.
So pretty excited about that.
Because it was a little bit of a struggle last class to get people to commit and so on and so forth.
So this has been fantastic and I'm already started building out our training schedule for 26th already have some dates places and and so forth that we're doing.
Have our Dre schools already scheduled for 26 and?
Probably in November when I'm down in Florida I'll get start working on 27 with them.
And and what they have going on there was a little concern with the field search site that we use in Jacksonville.
There was a possibility that she was gonna the lady that runs the mission that we used was gonna retire she says.
No she is not going to retire in fact.
The building though that she leases.
Is kind of in an area that they're trying to revitalize so there's a possibility if the building that she leases gets sold?
That she will move to another location.
She's not going to close up and go out of business or anything like that so we'll continue to go to Jacksonville as long as she is up and running for our field certifications and.
You know we're we're just taking away man and and usually have a great response for a rides around the state always.
And we're just trying to train as many people as we can.
Then we've dipped our toe in the SFST world of doing basic SFST.
For Bowling Green 's Academy and Owensboro 's new Academy we were helping some with LMPD while they were in kind of in between instructors a little bit.
But I think.
They've gotten it worked out now with.
Ron Fey is kind of back for the city so Ron is back doing that and they've brought some other guys in and so and and I told Ron you know we're always available to help if need be.
We're always there for that so hopefully next year we'll do another round of SFST instructor classes.
At least one along with our a ride and the basic SFST that we're doing with those academies and then our 2 Dre schools so.
So question with the classes that you have scheduled for 26 because October can they still apply for October or is that full or.
For our November the one coming the one in 25 here.
No no probably remember yeah yeah.
They can.
I don't want to cut anybody off because you never know so I I know things change.
We're still several months out and so things change.
Some people may have to defer to another class or someone so forth.
So if anybody has anybody that wants to still apply.
Shoot me an e-mail and I'll send you an application packet and we'll go from there.
Can they apply for the ones in 26?
Yes I'll take applications for those as well.
I have to update the new the the application with those dates and that's just a matter of me doing that and I was planning on doing that this week.
So OK.
Well when you get that done share it with and then we'll blast it out to the task force and get our program managers to send it out.
I will.
Absolutely and I'll I'll update the the listing on our our website.
Projector.
All right.
Thanks Raj.
OK and since we interrupted your presentation at the beginning of the meeting do you want to touch on that.
Well actually I was going to say our our guest speaker who was here.
So hurry I've been talking.
She is in the Virginia meeting as well and she's getting ready to do a presentation there.
So I told her I would let you talk about the.

 **Robby Hassell** 48:06
Just a quick overview, I'm gonna give you.

48:06
Mister tosa stuff that's what you were talking about in the beginning.
Can you talk about research?
Can you talk about research?
We're talking about all types of stuff.
OK.
But what we were showing on the on the online there so the I I was looking at how long the average the average time.
So rob mentioned 3030 seconds.
It actually took a minute and 19 seconds.
Because how long it's been taking.
Well I need to.
Well yeah.
So they they left it sitting on the screen for that long at least.
Glass.
Yeah so here.
It could be chimoted on the radio or something.
It could be taking a drink of their their.
Slurpee or something and I I apologize.
I I got upgraded from 5 installments.
Install.
But so so on the on the questions that we've got in there we we tried to keep it short and sweet on it and so sure so it's taken a minute and 19 seconds.
It's for everybody that's that's gone through and filled one out right now.
So so we're trying to keep it as as as lean as we can on the questions we're asking for.
So we're just going through and saying what's the date of the test time of the test.
Who the officer is that's doing it?
And then once you.
Go through and say the agency we added a additional piece in there for KSP.
So if you pick KSP then it asks which poster in and then it goes through and says hey is a positive negative or was there an issue.
Issue with going through running the test and based off of those if you said not but it was negative then did you go through and call anybody out to help you out on this.
And if you did what's their name or if it did test positive we're going through and saying.
Well what did it indicate.
And so when the update does become available we'll add the 7th category on here.
So fentanyl will be one of the check boxes.
They'll be able to pick.
But from these and we can go through and and build reports and figure out well what what complexation we've got here in Kentucky on.
This.
Brand you you appreciate this.
I'm curious.
Don't forget good amount of data is C you know as well as I do different parts of the state.
We have different issues right.
Eastern Kentucky has a whole different issue maybe the Northern Kentucky in Western Kentucky that's that's what I'm excited about.
It's kind of stupid.
I realize it but I I like to.
And Ashley that can help help you all as well I mean it's more data to help really substantiate and and you know identify what we know is going on in that area.
Ident.
Ify.
So geographically based off of what the agency or the KSP post is we'll be able to.
Say a county or a post level but not.
The individual GPS so that that way we're getting patterns not not individual identifiers.
Right correct.
For.
OK.
So I'm gonna apologize up front because eBay has missed this trying to multitask.
How is the test taken?
Linked to the side page.
It's not so there's not.
There's no way to right now that's the.
That's got to be.
You've got to you've got to.
They either.
So you would have to wait for that.
Do that now we're telling them to put on the citation if their results sort of like a PBT?
Like PBT some jurisdictions will allow presence of alcohol.
So we've we've taught everyone to to go back train the trainer teach everyone to say hey I I had a positive hit for THC.
That's what they're going to put on the citation but the problem is.
Very first we don't have that.
We we don't have that built into KYops to where what would be nice is if it was built in kyops they can put it in there then.
Generate you know then there's an indicator on the device for like which test it is.
Right like there's a serial number attached to the test.
There is a it'll it.
It is downloaded within this the device itself.
Wait.
We can sync the device and print out every test it's done and it'll give you a but it will give you a number.
But but we can't we should.
Much like your cell phone.
For your computer it has a Mac address assigned to the actual device.
I can show you APDF of a downloaded system but.
There's not anything for.
The officer to see in their hand.
Yes there is.
On the screen it'll have positive or negative from those 6 categories right.
But no I'm talking about identifying the test.
No versus the test before.
No no.
Well they do get a print out.
They can print the slip.
Out and have a check.
Oh so there's catching that.
Yeah yeah they're supposed to attach that.
To the side.
Paper look 'cause I know with the suave that he did before each unit has a serial number and you pull the sticker off and you put it on.
The citation that it'll have a it'll print out and it.
Correct.
Have the serial number?
Yeah you'll now begin it.
That used it yeah.
Yeah the unit.
Why it'll have the serial number?
The unit.
But it doesn't back.
And when we do print that out the problem with all that stuff where it's encrypted we we can't.
So I have.
So that's downloaded.
I have to send it to sokoxa so toxa.
But that through their encrypted system and then they can send it back it's very convoluted.
OK.
But the result will be a test change inside.
On the green so that's that's what the.
Officer sees on the actual device when they go through and run the test.
I apologize that it's turned sideways there but that's that's what they give when the tips has completed.
Help.
That's the screen that they see with.
What was indicated on?
And then once result.
Is attached to the ticket OK so?

 **Dean, Nathan R (KYTC)** 53:45
But I.

53:47
In case for your receipt for.
User and you can fare it off and then you'll receive paper and then you can tear that off and attach that staple or whatever Jeter.
Thank.
Citation I was was trying to see I thought I may have taken a screenshot actually of.
The receipt when we were in the training so this is from the training course that we the first one that we did with KSP and in Richmond.
So so we went through and Troy and I sat there.
And took screenshots of of exactly what each of the calibration screens looked like.
And so forth form those.

 **Dean, Nathan R (KYTC)** 54:21
So and follow up while Ed's looking for that follow up to your comment, Rob.

54:22
So.
Yes.

 **Dean, Nathan R (KYTC)** 54:27
So the only capturing of the data is through that convoluted process that you just described, correct?

54:34
Mm-hmm.
Oh what's he saying yes.

 **Dean, Nathan R (KYTC)** 54:36
The sotox and stuff.

54:37
In a positive way.
Yeah.
So if we want if we want every so if we want every test that that unit has done basically we have to download the information and we would have to send it with sotoxa and then they would have to run their program to decode it.

 **Dean, Nathan R (KYTC)** 54:54
OK.
I got you.

54:57
And actually there is ASD card.
So you'll like this because again.
Brought my brother portfolio will appreciate this.
You know cops will break an ancient.
So there.
So.
Is a little message on where that SD card goes?
Do not remove it will void the warranty?
Well we've already had an agency remove that and stick an SD card in it download the information so so again I'm gonna go back to criticize my perfect.
So I get it I get it.
The user card.
So so here's here's a receipt from when we were doing that training where it went through and said exactly what what the analyzer was what the serial number on it is and so forth what the results of those were.
And then they're loaded with 4 test questions at the end of that right now.
And so those are the the questions by default that it goes through and asks after they've they've gone through and performed the test.
Rest.
Ideally you want them to sign it but this device so this is huge.
Yeah.
Believe it or not in in across the water in Europe.
And there's a second place as I know where this is actual everything.
Just.
It is evidentiary.
It is oversee.
But you can see the cartridge number it does.
I'm sorry to tell you I forgot all about that.
It does have each test has its own ID if that's what you're asking.
That's what I was.
Asking yes and you can see.
Yes.
It right there and portable breath testers that we've been using for well decades.
Yeah they have the same technology attracted to test tracks.
So if for some reason.
The printer 's not working.
It's.
They can write that lot.
The scope does.
It show up.
It won't show up on the screen for them.
Actually it it will.
Hello.
So it stores all the tests that were done on the device.
We both.
For me to want him going into that.
But but if the printer doesn't work it saves that result and they can come back and when they have their new paper they can hit print.
Yeah we have about a year so.
And it will let them print.
So what we're trying to do from the user standpoint.
I gave a radar one time to one of our officers in Frankfurt the next thing I know he had it in European mode when I called stalker.
Our answer to prayer.
He had to go in and do a sequence of pushing buttons.
So what I'm telling you that's why we we don't want to train.
Boots on the ground to go in too much into this device.
You're just.
Asking operator.
Exactly they're to operate because if they get into the technical part of it or bunch of buttons the next thing you know.
But they they gave us a bunch.
CMO gave us a bunch of those 800 Pvt 's to beta test we gave them the agency said.
Of course that time you could go in and change the set.
And then we put it all back in the box and came back to them and said lock it fix it too you know you cannot change any settings except at the factory and because they will you know they'll get in there and start messing with them first thing.
You know.
It's stolen.
Yes once you actually.
If you all need help getting?
More agencies with your Traffic Safety checkpoints let's continue education training.
Be happy to get that information to Robert and let him share with people.
OK yeah.
Ed is there a box for them to record the test ID number on that form you submit.
I did.
Not put that on there.
We'd go through and add it very easily.
'cause that might be.
That might be a good a good way of date of tying things together for us if we have the test ID number.
I think.
In the the form that they submit.
If we yes if we can have a stream to connect that back because you know?
Or alternatively.

 **Dean, Nathan R (KYTC)** 58:50
I think there's various.
I think there's various ways we can connect to the data.
That's kind of why I asked the question about getting it.
But if it's a huge, cumbersome hard process to get the data, I mean I think that's potentially our hang up. But I think there's a number of ways we could link it.
It's just once we.
It's just, you know, getting the data to link to.
That's kind of why I asked.
How do we get it?

59:16
But now I date the date the time and the agency gets us extremely close.
But but if it does work out that they were at at a checkpoint and they went through and used it twice within a half hour then making sure that we can tell those 2 apart.
If if we have the test ID number collected on the form then at any point we want to when we download results later for our own purposes we should be able to link those 2 things together and be like OK this is the this is the form sub?
And if if.
For X test yeah but if we can do that then we should be fine.
And our ultimate goal is to raise recidivism.
And the more that we can track from roadside to completion of treatment the more comprehensive.
The follow up for me and the more that we can help these individuals change their behavior even if it's just to learn not to do it on the road but ultimately we want to see recovery.
So we have such an abundance of.
Mental health and substance concerns out there right now and it's such a it's such a hill blonde.
Is that?
One thing that I wanted to point out Jenny trueread was not able to be here with us today but she is in a prosecutorial training and she just wanted to point out that Kentucky is moving away from the intoxic laws are 9000.
And that that distribution should begin by the spring time.
So hopefully between the spring and the summer we will see those changeovers occurring.
To the updated technology.
Is there just kind of going round Robin and also for those of you online if there's something that you would like to provide us an update on?
Things changes.
Legislative changes that you see coming down the pipeline anything like that that would be a really good time to to do that.
Of course it's Alex.
Come on in girl.
Tell us what you got.

 **Otte, Alex** 1:01:34
Feel like I'm talking a lot.

1:01:37
Yeah.

 **Otte, Alex** 1:01:37
1st just a question.
When do we anticipate all agencies in the state having the new intoxic?
How long does that step take?

1:01:45
So we don't.
We don't yet have a projection on when they will have that.
We know that in the spring or we've been told we don't know anything until it happens.
We've been told that they will start to transition those in the spring.
So I don't have a solid follow up date on that.
I'll talk to Jenny.
I know that you have open communication with her as well.
And see if we can pin that down a little closer and even if they start.
You know how many units are out there.
It's going to take a minute to get them you know and if.

 **Otte, Alex** 1:02:17
Sure.

1:02:22
It could take a minute to give them to all the agencies especially the more rural off the radar agencies.

 **Otte, Alex** 1:02:27
What?
OK. And then just to updates on that or is our walk like Mad event is back at the Capitol this year on October 18th, so we'd love for you all to join us and we are in the process of finalizing our last quarter Antech report for our court.
Monitoring program so as soon as we have that finalized, hopefully by the end of next week, I'll be able to share that with the task force. Thank you.

1:02:52
Awesome thanks Alex.
I know this.
Is probably a dumb question but have you sent or not you as mad sent out the link to register for the qualified mad event on in October?

 **Otte, Alex** 1:03:08
It is live, so I'll send it to the task force when we finish this meeting.

1:03:13
OK excellent thank you.

 **Otte, Alex** 1:03:15
Thank you.

1:03:21
The jumbo review brain and I know we've had a little bit of a comment.
I do good.
Oh no.
Sorry sorry mate you're welcome.
To wait my.
It's wait my turn.
Well I don't see other hands coming up so I'm gonna offer you a.
Sure.
We're talking about that base data if you guys aren't familiar our laboratory laboratory information system is called beast it's barcode enabled.
Something other I don't know the rest of the acronym but that's what we use when we get a case in.
That's where all the data goes in for subject names citation number.
For us from the blood draw date draw time all that stuff.
Goes into that system this time last year September 24 we upgraded.
It's the same company the same system but we went from a server based or a a client server based system primarily like a program on your desktop.
To.
Web-based and you would think it would be you know almost like moving into a different apartment in the same building it it was like building an entire new building so.
Getting data for me even right now is cumbersome.
I I can't even figure out some of my own numbers internally because.
That transition has not been smooth since September last year when we went live.
I do have a few numbers.
TC numbers did increase.
From 2023-2024 about 133 more positives came back.
The bad news is I don't know my total number of tests in 2024 so I don't know if the total went up.
Because there was a more volume of cases in general or that there was an actual increase.
On the whole based on the previous numbers.
I don't know what we were expecting to see from where.
Group.
Marijuana kind of went with this little if that we want to see an increase and things like that.
It may take another year to kind of get some of that data in because that was what last spring was that spring last.
Where did that go January?
January but don't know.
I don't even know if we've got any medical dispenser.
This year.
I don't even know if there's any up and running app right now.
I think we need to have them at the.
Next guest would be if there are then it'd be it'd be in Louisville or Lexington first.
It's like.
I'm just based on that for Bowling Green or or bowling Kentucky.
I thought they put one way elsewhere.
You have to actually drive there.
I'm talking about.
It's in beverdale Beaver.
There is one in Beaver Dam.
Dance.
Yeah you have to drive there.
Beaver Dam is one of my former jurisdictions.
It's B for Dan.
That's why I.
So.
So I I I was wrong.
I figured lexie 's in a little Bieber man.
On the natural and the Western Kentucky Parkway.
Imagine to be today.
So I don't know what that increases.
I don't need more data really on that but it did go up slightly the other thing I kind of wanted to touch on was.
As for me gabapentin potentially.
Neurontin that's been one we've been battling for a few years now as far as being able to test for it every so many years about 4 years or so within community they can come out with.
Recommendations for toxicology DUID labs and they tear the drugs.
Tier one is drugs that every DUI detoxifology lab should be tested or again their recommendations.
They're not anything that's saying.
You absolutely have to but they should be testing for gabapentin welding Tier 2 which is more regional.
You could think about it.
Look at it.
It's moving into tier one.
Which means we in the laboratory we have to figure out a way to start testing for we tried a couple of things already with not great results?
But it's coming.
It's more I would.
And now John Mike will be they put out a bill legislatively and you can see what the bill says but it's not law yet.
That's kind of the stage.
We're at it's sort of out there.
We know it's coming.
It's really not been.
Implemented yet so I've got some more to do on Monday to figure out what to do for.
Testing purpose 'cause you really don't wanna test a drug by itself.
For everything we try to get the results out to everybody as quickly as possible so we help a lot of times we'll group them together concise atox a test like benzos are together opiates are together class of drugs are together to have one drug by itself like that.
If that's what we'd have to test it would really slow the process down and keep reporting coming out in a timely fashion?
So God we are working on better.
According to the website there are 7 dispensary real estate.
Hill management board that's this new me but this one.
I don't know if that's the one.
Oh that.
Medical practitioners.
Maybe those are licensed forms and these.
Yeah I know frank for frank 's account.
Guys and license.
I do.
We got one.
Yeah there's probably one.
That would be you're looking at what's it is this this.
The people that can issue you.
Who's operating locations?
But yes I have.
So so I'm assuming that you.
I went there.
Pulled up this website man.
A lot haven't been certified.
That goes through and says from medical cannabis yeah so I mean they're they're.
All through the state yeah.
Thank you medical universe AI.
There's a place in Lexington rob I saw the old brishes.
It was gonna be a dispensary and a hot dog stand like they had like.
Great yeah.
There you can get your THC.
She needed your dog.
I'm just curious legislative wise no we talk a lot through kasp to see.
Perfect here.
Recreational who's gonna make a push this year.
I do know that there may be a per southeast may come up for the license plates and I don't know if judge if you have less.
Of the dispensary.
All right.
A few parents stivers has said it's not gonna happen on his watch.
OK.
I don't know but.
OK.
Just curious uh.
Patterns change you know.

 **Robby Hassell** 1:09:43
Well, and if I could chime in for a moment, I I know she were here. I'm actually.

1:09:43
Yeah I would say that.

 **Robby Hassell** 1:09:49
Witnessing Sabra present to the Virginia task Force folks, but back to the conversation about the groupings for toxicology. It's essential that the the toxicologists be given that flexibility to follow up on the initial blood draw results, particularly when alcohol is is not present.
And so I don't want to speak for her, but I sort of AM.
Because I know that's what she would say.
This is not surprising.
PC hasn't been a name in.

1:10:17
OK is she still visible.
Still presenting judge hassle.

 **Robby Hassell** 1:10:21
Yes, yes.

1:10:23
OK she there.
She gave a message and she said.

 **Robby Hassell** 1:10:25
Yeah, she she she's finishing up, I think, given where she started and what time frame she said she had.
So I know she wants to come back to us on this side of the house.
I made a fun comment just now about recommending that Kentucky do such and such, and I said wait a minute. We're in Virginia, so she's doing the same thing I am.

1:10:42
Hold.

 **Robby Hassell** 1:10:46
But I'm sorry, go ahead.
So one of the states actually.

1:10:49
Oh you're good thank you thank you.
Related to this.

 **Robby Hassell** 1:10:52
I'm always here to chime in for Judge Cardi.

1:10:58
Related to this I can say that some of these dispensaries.
This could be changing.
I have a couple of friends in the state auditor 's office and I happen to know that they are currently investigating the process by which we licensed the dispensaries so.
The apparently that was not done by quite fairly.
The the lottery yes.
Let's say with the father.
It's not gonna be transportation no.
You send.
But anyway that that could have some impact on which places are currently licensed so.
Well we're we're.
In sovereign finish up on that end do you wanna give us a call and update on interlock.
Yeah I can do that.
I don't have much to say fortunately.
We're just kind of chugging along the way that full steam ahead we have we've seen an increase in overall number of installation facilities.
Which is good?
And we're from my understanding from driver 's licensing is that we're steadily seeing uptick in participation.
The biggest thing kind of on my horizon that I'm aware of is that there is one of our.
Vendor companies that's going to be implementing a fun feature called smart idle which will allow the way that the device apparently works when you start a car you have to blow into the device to get the car to start after 5 minutes it will ask you to ret.
To make sure that you haven't had anything in between then and then from that point on it will ask.
Randomly every 15 to 45 minutes.
So the smart idle feature is made so that kind of prevent barriers and entry and lessen those it will allow you blow into the device start the vehicle you can set it to smart idle mode.
These devices are GPS enabled link to the excel in the car.
And it will allow the car to idle until it detects removement and then will force your retest at that moment that it's detecting.
In movement.
So basically you can start the car let run for however long you want and before you can drive the car anywhere else you have to make another repast.
This is good reducing some barriers to entry.
It's great for people like welders who have to leave their vehicles running over the road truck drivers if they had them installed you can leave your car running overnight with this feature so that's good.
It's going to hopefully increase our participation rates.
Something that we.
Have kind of talked about this before we allow that to be implemented in the state?
We're gonna start requiring a waiver because the way our DUI law is currently written it is based on intention and not actual operation.
So if you were to get in the car sent to smart idle check a model with a speeding you could still be charged with DUI if you intend to operate the car in our physical control over even though the car has moved the natural retest so we're going.
To.
Submit a waiver when the device is installed but if we choose to use that feature you are aware that could happen and you could get a DUI anyway.
Reporting in Thompson.
I'm pulling up both on on over the road trucks I mean.
They're not they're not currently required.
It's voluntary for over the road truck drivers if you have.
AI mean currently commercial drivers license.
Yeah there are some in other states that do that and you can voluntarily install it.
OK however.
You lose your seat.
What about insurance?
Like I said.
It could be voluntary so you could not have had a DUI but could have an alcohol problem and you're.
Allowed to be at all since you.
Got a full one and.
It's hard to find.
If I?
However all of that being said if you have a commercial vehicle or you use your vehicle for work in the state of Kentucky we do allow an exception where you don't have to use the device you can write it you can have a a waiver for that so.
They're not.
Like I said they don't have to be installed.
It's just an option.
OK.
That would be the.
That would be the same thing for like I said the the example I mentioned earlier like a welder or something like that.
You asked to keep their vehicle running for.
Reasons of powering something you can also get a work exemption for that in certain cases.
Like putting one on a lawnmower.
You do it if you wanted to.
I I promise you the companies that install and will not if you want to pay to rent that device.
Install it on your own.
OK.
Does anybody have any questions about that?
Maybe I got it first though.
OK so sabra 's back so I'm gonna let her jump in and.
Tell.
Us who you are and what you do.

 **Sabra Jones** 1:16:11
Absolutely. Can you hear me OK?

1:16:14
Yeah.

 **Sabra Jones** 1:16:16
OK, perfect. Perfect.
Well I am.
Thank you so much for being so flexible today.
A lot going on today, apparently.
I got another task, first meeting in an hour.
So it's a lot of fun.
I am the regional toxicology liaison that gets the support, not only.
The wonderful state of Kentucky, but also the other states in Nitza regions, I2 and three.
And if you haven't heard?
Of the regional toxicology liaison program, we have been around since 2022 and I see Judge Hassel on the call.
We are similar to our wonderful judicial outreach liaisons. Our Traffic Safety resource prosecutors, and our incredible law enforcement liaisons.
And we are here to help support our government funded toxicology lads and I have to say I was really lucky.
Chris Hartzell, my fellow RTL, and I.
And we have two other RTLS. We got to go into Kentucky just a couple of months ago and do some training for the laboratory, which was fantastic on testimony and impaired driving cases.
But that's the type of thing that we do.
We provide support to our government funded laboratories.
We first have to identify them, understand their testing, try to find ways to support them through training, collaboration, coordination and connection to not only.
Each other, especially if there's more than one lab touching impaired driving case work in that state, but also to the other Traffic Safety partners.
Some states do an incredible job of engaging with their toxicologist, but some they have so many labs that it's very challenging to identify where all the impaired driving casework is being handled in the state.
So we try to help facilitate that. Those lines of communication into our toxicology labs and out of we also.
Here to sort of help with.
Labs that want to expand their scope of testing or improve their data. Because when we do that, especially through standardization, we will have better state level data with regard to impaired driving and then federal federal data. And so I know that's a lot of information I'm gonna pop.
My contact information into the chat.
I just recently expanded into regions 1-2 and three.
The end of 2024, but if I can ever be of service, provide information on a national level on toxicology, toxicology, data and things of that nature. If you're ever in need of presentations or educational material or just information, that is why we are here and it.
Is a real honor to get to support all of you and all the toxicologists in the state, so I'm happy to answer any questions if anyone has any, but I will put my contact information.
In the chat, just in case anybody would like to reach out, or if I can be ever of service in the future.

1:19:24
Thank you.
You have lots of lots of thoughts.
I have lots of curiosities about how how we can lean on you and.
What we can learn from you for sure?
So we may.

 **Sabra Jones** 1:19:44
Wonderful. Well please. Yeah.

 **Robby Hassell** 1:19:45
Sabre, if you could share briefly what what you did in North Carolina with us earlier this year.

 **Sabra Jones** 1:19:47
Yes.
Yes, yes.
Thank you, judge.
So I about 2022 and 2023, Nitsa had provided funding for an organization known as Tox Cell to come in and facilitate toxicology stakeholder meetings that would bring together all the toxicology laboratories that touch impaired driving case work.
Along with other Traffic Safety partners, so that would be your state Highway Safety Office.
Your law enforcement agencies, judges, prosecutors, you name it, all into the same room and go through a process of understanding what testing was happening in the state, the capabilities of the laboratory and any challenges that the laboratory was facing.
But it also provided an opportunity that all those other Traffic Safety partners could hear that information and provide information about their roles.
So at the end of those meetings, they would provide a report of sort of the current state of testing for that particular state. Now that was in 2223 and they did it in about 10 different states or so. And one of those states was north.
Carolina and North Carolina is one of my states.
But this actually preceded my role as the RTL, and so their director of their Governor's Hwy. safety program asked me to come in, take that report and those action items that were listed in that report and formulate, like, bring in all the toxicology labs, bring in the.
Traffic Safety partners that were available to attend and Judge Hassel was there and what we did is we looked at those action items.
And formed toxicology working group.
Through the state highway safety safety offices, impaired driving task force and that would allow this sort of ongoing communication understanding of the capabilities and as things change or challenges occur, everyone was sort of aware of that information.
So we did that a few months back.
We had an in person meeting in North Carolina where the labs came in as well as the state Highway Safety Office and the other Traffic Safety partners. And then we have.
Plans to have ongoing meetings.
We'll have our fall meeting in just a couple of weeks where we'll come back together and have that opportunity to learn from each other and have that opportunity to be together and meet. And so in addition to that though, we actually have done this on our own.
Like different nitza, regional offices have asked the RTLS of their region to facilitate meetings like this. And so in region 7, for example, their nitsa regional administrator had Chris.
Parcel, my colleague, go into every state and they hadn't been a part of that initial 10 States and do the exact same thing.
And then in region five, we were able to do that for one of the region 5 states as well.
So if that is ever something that might be of interest, I would be more than happy to help facilitate that.
You know, it's really just a matter of kind of being the note taker and helping to provide sort of the context of what information might be really helpful to understand.

1:23:01
Yeah.

 **Sabra Jones** 1:23:07
Of a state of testing within a particular state and all the different labs that may be touching impaired driving cases.
But if I can ever be of service in that way or provide any additional data or help, please do not hesitate to reach out.

1:23:26
Great thank you.
I'm gonna sit out at me when I sit out for the communication I'll also add your contact info in that for all of our task force members.

 **Sabra Jones** 1:23:43
Wonderful. Thank you.

1:23:50
Is there anybody else that would like to provide an update?
Anything coming down the pipeline or something that you've been working on.
I know that we had emission interlock legislation.
Last.
This well this past session.
I've heard that we will possibly be revisiting that in some form.
For the next session.
Talks are limited on that right now but.
I do believe that there is a 2 year plan when I started talking with everybody last year.
So it's my understanding that something will be coming down the pipes on that hopefully sooner than later so that we know we know what what the talks are.
That is really all that I know about.
So I guess unless anyone has anything specifically they want to talk about our next our next item would be looking for a follow up date for December for our last quarterly meeting.
And I know we're having our DUI awards.
Recognition on December 10th.
So I'm looking at we try to do these on Wednesdays.
This for this meeting we just had to go with availability between conferences and availability on the room there's a lot going on in August.
So my initial thought.
December is gonna be December 3rd.
Do we know of any?
Out loud conflicts on the radar.
If we don't?
That's our e-mail match.
So if we don't we'll send that for a tentative and then of course I'll have to check with the conference room.
Scheduling to see if that's available.
And if it if that works.
For us and then also for the OB task force following.
Then we will stick with December 3rd.
We'll set that as tender.

 **Alan** 1:26:13
Would that also be at 10:00?

1:26:16
Yes Sir.
Is that gonna conflict with you with you Allen with your schedule?

 **Alan** 1:26:24
Yeah. First Wednesday of the month. I don't have a court. So that's so that's good.

1:26:27
OK.
Oh it's good OK.
Which one is it that you can't do?
Is that the 3rd Wednesday of the month?

 **Alan** 1:26:43
3rd MDT is on the third Wednesday afternoon.

1:26:53
OK.
State.
Well I feel like that's all we really have to go over today.
I appreciate everybody joining us in person and online.
If we don't have?
Anything to add we just.
Need a motion to dismiss.
Thank you Jerry second OK.
Thank you all so much for joining online and in person for anybody that's sticking around for the open meet board we will provide lunch.
Down in our cafeteria.
Yep and Ron I've just been paying for it.
Here that.
Now we'll give you a card.
And you just take this with you and get your lunch.
And then we'll settle on with them afterwards.

 **Harding, Ed H (KYTC)** stopped transcription