



# Highway Safety Plan











July 3, 2017

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# **Executive Summary**

On behalf of the Mayor of the District of Columbia and the Director of the District Department of Transportation (DDOT), the DC Highway Safety Office (HSO) submits the Fiscal Year 2018 Highway Safety Plan (HSP). This document serves as the District's application for State and Community Highway Safety Funds under Section 402 and the National Priority Safety Programs under Section 405 for Federal funding based on the Fixing America's Surface Transportation (FAST) Act signed into congress on December 5, 2015.

The District has made every effort to support the six FAST Act National Priority Safety Programs:

- Occupant Protection
- Traffic Safety Information Systems Improvements
- Impaired Driving Countermeasures
- Distracted Driving
- Graduated Driver Licensing Laws
- Non-motorized Safety (NEW)

In accordance with The Highway Safety Act of 1966, the District of Columbia established the Highway Safety Office (HSO); Federal grants from the National Highway Traffic Safety Administration (NHTSA) primarily fund its activities. HSO is located within the Department of Transportation and, under the FAST Act requirements, and is designated as the lead District agency responsible for maintaining its aggregate expenditures for occupant-protection, impaired-driving, and traffic safety-information system improvement programs above the average level of such expenditures in fiscal years 2014 and 2015.

This plan is data driven and evidence-based on current analytics performed on crashes, population, registered drivers, citations and other data to ensure the best possible use of Federal and District funds dedicated to traffic safety. The Plan is prepared each year and details the District's priority areas, sets goals and performance measures, and describes specific project activity that can provide the greatest impact on the District traffic crashes, injuries, and fatalities.

Based on NHTSA Fatality Analysis Reporting System (FARS), fatalities in the District remained at 23 in 2015 and 2014. However, a recent study indicates that there is a correlation between recessions and motor vehicle fatalities. Figure 1 shows an upward trend in fatalities national data (FARS)

# U.S. Recession Periods and Motor Vehicle Fatalities

Chart shows correlation between U.S. recessions and motor vehicle fatalities, 1971 - 2016

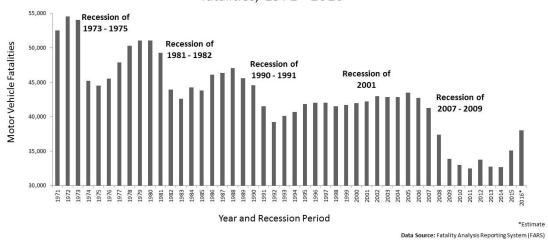


Figure 1: U.S. Recession Periods and Motor Vehicle Fatalities

Preliminary 2016 National Safety Council data estimate that as many as 40,200 people died in motor vehicles crashes last year, a 6 percent rise from 2015 (37,757). A 14 percent increase in deaths since 2014 is the largest two-year jump in more than five decades. This is relevant in setting the safety performance measures as the following discussion demonstrates that the road safety problem facing the District is as much regional/national as local.

A number of factors contribute to the high crash risks affecting the road user population. While some of these factors are intrinsic to any mode, such as age, gender, or mode skill, others relate to social, economic, and policy decisions.

The District's population has steadily increased to 681,170 in 2016—approximately a 13.2 percent increase from 2010. Between July 1, 2015 and July 1, 2016, Washington, DC added 10,793 new residents, a 1.6 percent increase or an average of 900–1,000 new residents per month. Of the 10,793 net growth citywide, 0–17 year olds accounted for 24.4 percent (2,633 residents); 18–64 year olds at 60 percent (6,478 residents), and 65 years and over at 15.6 percent (1,682 residents). Of the District's increase in population, 63 percent was persons between ages 20 and 39.

There were almost 798,000 jobs within the District in 2015, up from 715,000 in 2005. It is expected that by 2045, the District will have over 1.0 million jobs, or 25 percent of the region jobs. Further, commuters who live outside of DC account for 70 percent of all DC jobs, a statistic projected to increase.

In 2015 the District welcomed a total of 21.3 million visitors, a 5 percent increase from 20.2 million in 2014. On average, expectations are that DC tourist visitation will increase by at least 2–3 percent per year. DC ranks in the top 10 U.S. cites to visit and anticipates increasing international visitation.

These numbers indicate a DC daytime population of well over 1.5–1.6 million people, or more than 2.5 times the resident population. Therefore, unlike any other state in the nation, solving the District's crash problem is a regional issue.

Other factors the District must consider when improving safety on the roadway system include:

- 1. Nonmotorized trips (pedestrian/bicyclist). Rapidly increasing numbers of persons working/commuting, recreational, and tourist visitation have resulted in significant increases in bike and pedestrian trips (e.g., Bikeshare trips increased by more 10 percent per day from 2015 to 2016 to approximately 8,500 trips (greater than 2.2 M trips per year) with 15–20 percent being casual riders—not registered in the Bikeshare system).
- 2. New modes of transportation—DC Streetcar. The Streetcar service on H Street commenced in March 2016 with daily weekday passenger averaging 2,419 passengers (67,853/month). In following 12 months, daily weekday ridership has reached a high of 3,207 (93,909/month—March 2017) or a 32 percent increase.
- 3. In August 2015, the **District implemented a new crash-reporting system** that captures injury data based on the 4<sup>th</sup> edition of the Model Minimum Uniform Crash Criteria (MMUCC). There is a high probability that future serious injury numbers resulting from a crash will increase as officers are fully trained to more accurately and consistently code in the field.
- 4. **Legalizing marijuana**—others are evaluating the effect of this and by 2018 or before, the District will have sufficient data and best practices to address this emerging problem.

Prior to 2016, the Metropolitan Police Department (MPD) database defined injury data as "disabling and non-disabling." In 2016, the MPD changed the injury severity level coding in its crash form to correspond with the MMUCC, as per Federal regulation under MAP-21<sup>1</sup>. This plan includes all injuries as defined by MMUCC as:

- Suspected Serious Injury. Any injury other than fatal that results in one or more of the following: severe laceration resulting in exposure of underlying tissues/muscle/organs or resulting in significant loss of blood; broken or distorted extremity (arm or leg); crush injuries; suspected skull, chest, or abdominal injury other than bruises or minor lacerations; significant burns (second and third degree burns over 10 percent or more of the body); unconsciousness when taken from the crash scene; and paralysis.
- Suspected Minor Injury. Any injury that is evident at the scene of the crash other than fatal or serious injuries. Examples include lump on the head, abrasions, bruises, minor lacerations (cuts on the skin surface with minimal bleeding and no exposure of deeper tissue/muscle).

<sup>&</sup>lt;sup>1</sup> Federal Register / Vol. 79, No. 47 / Tuesday, March 11, 2014 / Proposed Rules. Accessed at: <a href="https://www.Federalregister.gov/documents/2014/03/11/2014-05152/national-performance-management-measures-highway-safety-improvement-program">https://www.Federalregister.gov/documents/2014/03/11/2014-05152/national-performance-management-measures-highway-safety-improvement-program</a>

As Table 1 indicates, the major problems in the District to be addressed are pedestrian and bicyclist, followed by aggressive and impaired driving. The highest number of crashes resulted from aggressive driving behavior, followed by pedestrian and impaired driving.

Table 1: Crash Data by Highest Injuries Causes in 2016

	2015 5 1 1111		
	2015 Fatalities	Injuries	Total Crashes
	(FARS)*	(2016)	(2016)
Pedestrian	13	509	1052
Bicyclists	1	442	796
Aggressive Driving	7	190	4463
Impaired Driving	11	122	918
Occupant Protection	1	105	615
Motorcyclists	3	95	263
*- FARS 2016 data is not yet available			

The District is committed to mitigating these problems and providing a safe transportation system for all road users. As such, the HSP details a number of strategies in enforcement, education, and emergency services developed to reverse any negative trends and ultimately reduce traffic fatalities and injuries. The goal remains Toward Zero Fatalities.

This document links directly to the District's Strategic Highway Safety Plan (SHSP), last updated in September 2014. The SHSP includes strategies in the 4Es of traffic safety—engineering, enforcement, education, and emergency medical services—to target distinct emphasis areas believed to significantly reduce the number of deaths and injuries in the District. This HSP addresses three of the emphasis areas outlined in the 2014 SHSP—High-Risk Drivers (Impaired and Aggressive Drivers), Pedestrian and Bicycle Safety, and Occupant Protection.

The HSO focus is on major enforcement and public awareness campaigns implemented in conjunction with national and high-visibility mobilization for the following program areas:

- Impaired Driving
- Occupant Protection
- Aggressive Driving
- Pedestrian and Bicycle Safety
- Traffic Records

The HSP includes the following components, as required by 23 CFR 1300.00:

**Highway Safety Planning Process.** Describes a the District's planning process, data sources, and process used to identify the District's highway safety problems, and participants involved in these processes and efforts to coordinate with the SHSP.

**Performance Plan.** Details the performance measures and the method and justification used to select targets for each program area. These targets are data driven and support the long-range goals of the SHSP and describe how the District will adjust its upcoming HSP to better meet performance targets if these were not meet.

Highway Safety Strategies and Projects. Divided by program area, this section identifies a data-driven problem and proven-countermeasure project activities. It also includes HSO safety partners, project description, project numbers, and level of funding for their activities provided under the Sections 402 (State and Community Highway Safety Program) and 405 (National Priority Safety Program), which HSO will use to support these initiatives.

**Performance Report.** A Federal requirement, the report provides a snapshot of the District's performance by program-area level and its success in meeting its performance targets for the core measures identified in the FY2017 HSP.

**Performance Cost Summary.** Details the District's proposed allocation of funds (including carry-forward funds) by program area based on the projects identified in the Highway Safety Strategies and Projects section. The funding levels used would be an estimate of available FY2018 funds.

**Certifications and Assurances.** Appendix A. Certifications and Assurances for Highway Safety Grants, includes a certification statements signed by the Governor's Representative for the District's Highway Safety Office. The statement provides assurances that the District will comply with applicable laws and regulations, financial and programmatic requirements, and the special funding conditions of the programs.

**Section 405 Application**. Appendix B. Application Requirements for Section 405 Grants. In FY2018, the District will apply for three Section 405 funds and will follow the Fixing America's Surface Transportation Act (FAST) requirements when necessary.

# Overview of the Highway Safety Office

### Introduction

The Federal Highway Act of 1966 designates the District's Mayor to prepare and administer a District-wide highway safety program. **Muriel Bowser** was elected Mayor of the District of Columbia in November 2014. Mayor Bowser serves as the eighth elected Mayor of the District of Columbia. The mayor named **Leif A. Dormsjo** as the DDOT Director and he will act as her representative for the District's highway safety program.

In accordance with The Highway Safety Act of 1966, the District of Columbia established the Highway Safety Office (HSO); Federal grants from the National Highway Traffic Safety Administration (NHTSA) primarily fund its activities. The HSO is located within the Department of Transportation and, under the FAST Act requirements, is designated as the lead District agency for maintaining its aggregate expenditures for occupant-protection, impaired-driving, and traffic safety-information system improvement programs above the average expenditure level in fiscal years 2014 and 2015.

The HSO coordinates and manages the District's highway safety program. This includes its leadership role to identify the District's traffic safety emphasis areas and collaborate with safety and private sector organizations. The also provides technical assistance to grantees and ensures compliance with Federal program regulations and guidelines. The HSO works in tandem

# MISSION

Develop and maintain a cohesive sustainable transportation system that delivers safe, affordable, and convenient ways to move people and goodswhile protecting and enhancing the natural, environmental, and cultural resources of the District.

with NHTSA to implement programs focusing on occupant protection, impaired driving, aggressive driving, pedestrian and bicycle safety, and traffic records.

# Organization Overview

The HSO is located within the **DDOT Planning and Sustainability Division (PSD).** The Transportation Safety Office (TSO) Chief, **Carole A. Lewis,** is the District's Highway Safety Coordinator and administers the District's highway safety program. Her duties include planning, organizing, evaluating, monitoring, and directing the operations and programs in accordance with Federal and District rules, regulations, and guidelines. The HSO has a contracted KLS Engineering to assist the HSO Coordinator with the safety programs.

### Key Partnerships

The HSO collaborates with law enforcement, judicial personnel, private sector organizations, and community advocates to coordinate activities and initiatives relating to behavioral issues in traffic safety. These partners

work together to achieve the HSO vision for a safe and efficient transportation system that has zero trafficrelated deaths and injuries. The following are the public sector and community partners for FY2018:

- District Department of Transportation (DDOT)
- Metropolitan Police Department (MPD)
- Office of the Attorney General (OAG)
- Metropolitan Washington Council of Governments (COG)
- Office of the Chief Medical Examiner (OCME)
- Office of Chief Technology and Officer (OCTO)
- Fire and Emergency Medical Services (FEMS)
- Department of Health (DOH)
- Department of Motor Vehicles (DMV)
- Washington Regional Alcohol Program (WRAP)
- Washington Area Bicyclist Association (WABA)
- Howard University
- McAndrew Company, LLC
- KLS Engineering, LLC
- Federal partners include:
  - National Highway Traffic Safety Administration (NHTSA)
  - Federal Highway Administration (FHWA)
  - Federal Motor Carrier Safety Administration (FMCSA)
  - US National Park Service

# **District of Columbia Demographics**

# **Population**

The U.S. Census Bureau estimates the District's population was 681,170 on July 1, 2016, a 13.2 percent increase since the 2010 U.S. Census. The increase continues a growth trend since 2000, following a half-century of population decline. The District has increased the proportion of white, Asian, and Hispanic residents, and a decline in the city's African-American population.

Table 2 below shows the District's population by race, age, and gender.

Race % Change 2010 2015 White (a) 38.5 % 44.1 % +5.6 % African-American (a) 50.7 % 48.3 % -2.4 % American Indian & Alaska Native (a) 0.3 % 0.6 % +0.3 % Asians (a) 3.5 % 4.2 % +0.7 % 0.1 % 0.2 % +0.1 % Native Hawaiian & Other Pacific Islander (a) 2.9 % 2.7 % -0.2 % Persons reporting 2 or more races 9.1 % +1.5 % Hispanic or Latino Origin (b) 10.6 %

**Table 2: District Population** 

The District was the 22<sup>nd</sup> most populous U.S. city in 2015. It is the center of all three branches of the Federal government and the home of many of the national monuments and museums. It also is the location of 176 foreign embassies and headquarters of many international organizations, trade unions, nonprofit organizations, lobbying groups, and professional associations, which results in an ethnically diverse, cosmopolitan, mid-size capitol city.

According to the District of Columbia Department of Employment Services, the total number of jobs in the District in January 2017 was 780,100, reflecting an increase of 7,500 jobs from March 2016. As of January 2017, the District's unemployment rate is 5.7 percent. Federal employees make up 25.7 percent of the District's workforce (200,100 workers). Some of the other largest employers are medical institutions. There are 14 hospitals (four are accredited trauma centers), including the George Washington University, Georgetown University, Washington Hospital Center, and Howard University Hospital, which employ approximately 28,200 employees. Professional, scientific, technical, and business services employ more than 166,300 people. During the workweek, however, the number of commuters from the suburbs into the city swells the District's population to a daytime population of more than 1.5 million people.

<sup>(</sup>a) Includes persons reporting only one race

<sup>(</sup>b) Hispanics may be of any race, so are also included in applicable categories.

The District of Columbia is comprised of eight Wards. Figure 2 below indicates the Wards with the largest population.

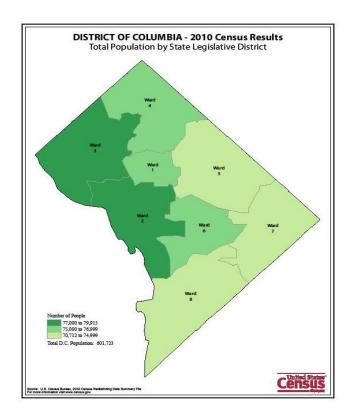


Figure 2: District of Columbia Population by Ward

Ward 2 covers a significant portion of downtown DC. It comprises both business and residential areas. Several important museums, theaters, and a major sports venue are located in the area. Ward 3 consists of many diverse neighborhoods, including American University Park, Klingle, Cathedral Heights, Chevy Chase, Cleveland Park, Forest Hills, Foxhall, Friendship Heights, Glover Park, and Woodley Park. Local attractions in Ward 3 are Fort Reno Park, Mazza Gallerie/Chevy Chase Pavilion, Forest Hills Park, Chevy Chase Park, Avalon Theatre, Uptown Theatre, and the 4th of July Palisades Parade.

# Geography

The District of Columbia is located in the mid-Atlantic region of the U.S. East Coast and is bordered by Montgomery County, Maryland, to the northwest; Prince George's County, Maryland, to the east; and Arlington and Alexandria, Virginia, to the south and west. As the Nation's capital, the District is independent and is not part of a state.

The south bank of the Potomac River forms the District's border with Virginia; its two major tributaries are the Anacostia River and Rock Creek. The highest natural elevation in the District is 409 feet above sea level at Fort Reno Park in upper northwest Washington and the lowest point is sea level at the Potomac River. The City has a total area if 68.34 square miles, of which 61.05 square miles is land and 7.29 square miles is water.

# **Transportation**

The District's transportation system is crucial to residents and businesses, the Federal government, and the millions of tourists who annually visit the Nation's capital. There are 1,153 road miles—60 percent are local roads, 15 percent are minor arterials, 13 percent are collectors, 8 percent are principal arterials, and 5 percent have freeway and expressway classifications.

As of March 31, 2017, the number of licensed District drivers was 453,658—male drivers 213,978 and women drivers 239,680,



Nation's Capital at Night

which represents a 0.8 percent decrease from May 2016 of 457,283. As Table 3 below shows, there are also more than 309,900 registered vehicles (0.7 percent increase from May 2016 of 307,880 vehicles) in the District, as of March 31, 2017.

Table 3: Active Registration and Drivers (as of March 31, 2017)

Active Vehicle Registration		
Passenger Car	90.3 Percent	
Truck/Tractor/Trailer	1.8 Percent	
Motorcycle	1.7 Percent	
Federal/Government Vehicle	6.3 Percent	
Total Registered Vehicle	309,970	

Source: Department of Motor Vehicles, March 31, 2017.

Based on the number of active licensed drivers, and as Figure 3 shows, the largest age group is 25–34 years. This age group (25-34 years) increased 1.8 percent since 2016 (144,891). Other high percentage increases in drivers include a 4.5 percent for the 35-44 age group (102,459 in 2016) and a 6.3 percent increase for drivers older than 69 years (36,983 in 2016).

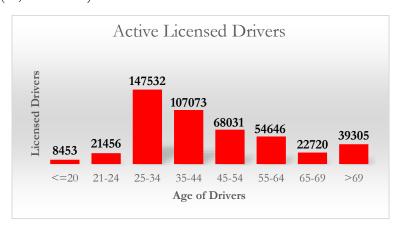


Figure 3: License Drivers by Age (as of March 31, 2017)



The Washington Metropolitan Area Transit Authority (WMATA) operates the Washington Metro, the city's rapid-transit system, as well as Metrobus. Both serve the District and its suburbs. Metro currently includes 91 stations and 118 miles of track. After the New York City Subway, Metro is the second-busiest rapid transit system in the United States, with more than 800,000 trips per day.

Metrobus has a fleet of 1,503 buses that cover an area of 1,500 square miles in the District, Maryland, and Virginia. There are more than 300 bus routes

serving 12,216 stops, including 2,398 bus shelters, with an average ridership of 400,000 riders each weekday, making it the Nation's sixth-largest bus system.

The city also operates its own DC Circulator bus system, which connects commercial areas within central Washington. An expected 32 percent increase in transit usage within the District by 2030 has spurred construction of a new DC Streetcar system to interconnect the city's neighborhoods, as well as the additional Metro lines that will connect Washington to Dulles Airport in Virginia.

In August 2008, the District of Columbia became the first jurisdiction in North America to launch a Bikesharing system. SmartBike DC offered 120 bikes at 10 stations in downtown DC and the Center City. Approximately 1,600 people joined SmartBike DC during its two years of operation. Capital Bikeshare was then formed in partnership with Virginia's Arlington County, Fairfax County, the City of Alexandria, and Montgomery County, Maryland. With Capital Bikeshare, riders can take a bicycle from more than 440 stations across the Washington, DC metro region



Capital Bikeshare

and return it to any station near a rider's destination. It is currently one of the largest bicycle-sharing systems in the country with over 3,700 bicycles and 440 stations. Currently there are 61.7 miles of bike lanes, and 18.8 miles of shared lanes in the District. The District plans to further expand this network.

### Media in the District

Washington, DC is a prominent center for national and international media. The Washington Post, founded in 1877, is the oldest and most-read local daily newspaper in Washington. Popularly referred to as "The Post," the paper had the sixth-highest readership of all news dailies in the country in 2011. The Washington Post Company also publishes the Express, a daily free commuter newspaper that summarizes events, sports and entertainment. The Post also publishes the Spanish-language paper El Tiempo Latino.

The Washington Times is another popular local daily and is the city's second general interest broadsheet; the Washington City Paper also has substantial readership throughout the Washington area. There are several other weekly community and specialty papers that focus on neighborhood and cultural issues. Other publications based in Washington include the National Geographic magazine and political publications such as The Washington Examiner, The New Republic, and Washington Monthly.

The Washington Metropolitan Area is the ninth-largest television media market in the U.S. with two million homes, approximately 2 percent of the U.S. population. Several media companies and cable television channels have their headquarters in the area, including C-SPAN; Black Entertainment Television (BET); Radio One; the National Geographic Channel; Smithsonian Networks; National Public Radio (NPR); Travel Channel (in Chevy Chase, Maryland); Discovery Communications (in Silver Spring, Maryland); and the Public Broadcasting Service (PBS) (in Arlington, Virginia). The headquarters of Voice of America, the U.S. government's international news service, is near the Capitol in Southwest Washington.

# **Highway Safety Planning Process**

# The Planning Process

Developing and implementing the HSP is a year-round effort. At any one point, the HSO may be working on previous, current, and upcoming fiscal year plans. The process in Figure 4 outlines HSO activities and coordination.

Figure 4: Grant Cycle October November/December/January Fiscal Year Begins Final Reports & Claims Submitted, Nov. 1st New Grants Implemented Submit Annual Report, Dec. 31st Host strategic planning meeting (2 to 3 year) Submit First Quarter Report, Jan. 15th **GRANT** August/September Fiscal Year Ends, Sept 30th **CYCLE** FY Grant Finalized February/March/April Review performance goals and strategies Host a grantee meeting Post Request for Proposal Submit Second Quarter Report, Apr. 15th June/July Proposals Evaluated and Reviewed Agencies Notified Submit Third-Quarter Report. July 15th May Develop Highway Safety Performance Proposals due May 1st Plan, July 1st

## **Traffic Safety Project Proposals**

Each year, the HSO uses the problem-identification process to identify its highway safety programs; it identifies the top priority areas and sends out a request for grant proposals to address these issues. The HSO uses the SHSP, NHTSA's Countermeasures that Work: A Highway Safety Countermeasure Guide for State Highway Safety Offices (Eight Edition, 2015), and past experience to select strategies, countermeasures, and projects that could best help the District achieve its safety goals.

Because the District's program is City based, this allows for a less-structured and more open-grants solicitation process. The Coordinator's experience and knowledge, as well as the ongoing partnerships, further allow for direct solicitation of grant proposals. For example, all enforcement-based grants go directly to the MPD, as it is the only law enforcement agency in the City eligible to receive Federal grant funds. Grant proposal requests posted in the DC Register and the HSO website had a due date of May 1, 2017. The FY2018 Grant Application, along with other grant-related forms, is posted on the HSO website (<a href="https://www.ddot-hso.com">www.ddot-hso.com</a>).

The following questions are considered when selecting projects for funding:

- Is the problem adequately identified?
- Is the problem identification supported by accurate and relevant data?
- Is the project directly related to the problem identified?
- Are the objectives appropriate to the problem?
- Are the goals and objectives realistic and achievable?
- Are the Performance Measures and Targets appropriate to the Objectives?
- Will this project save lives and reduce serious crashes?
- Are the strategies implemented proven?
- Is this project cost-effective?
- Is the evaluation plan sound? (Is the performance/progress measurable?)
- Is there a realistic plan for self-sustainability (if applicable)?

The HSO and NHTSA jointly review all traffic safety grant applications to ensure the completeness of the application packages and that they clearly identify their problems, goals and objectives, and use of evidence-based strategies and activities and performance measures. Goals and objectives must support the HSO, ensure activities, measure their effectiveness, and estimated costs justify the anticipated results.

# Who Can Apply

Any District Government agency or nonprofit organization that can show a plan that addresses an identified highway safety problem may apply for Federal funding. The problem must fall within one of the District's emphasis/priority areas or in an area where there is documented evidence of a safety problem.

A project director of each nonprofit organization must submit a Grant Application and comply with the grant program guidelines as follows:

- All funding must be for highway safety purposes only.
- All funding must be necessary and reasonable.
- All funding is based on implementing evidence-based strategies.
- All funding is passed through from the Federal government and is subject to both Federal and District regulations.
- All projects must be performance-based in reducing crashes, injuries and fatalities.
- Projects are only approved for one full or partial fiscal year at a time.
- Funds cannot be used to replace or supplant existing expenditures, nor can they be used to carry out general operating expenses of the grantee.
- All funding is on a reimbursement basis. The grantee must pay for all expenses up front and then submit a reimbursement request with the necessary back-up documentation to receive the funds.

The designated project director must ensure project/program objectives are met, expenditures are within the approved budget, and reimbursements and required reports are submitted in a timely manner.

### Risk Assessment

As required by 2 CFR Parts 200.331(b), a Risk Assessment is conducted for each grantee prior to awarding the NHTSA funds. The objective of this assessment is to provide the District with a tool with which to better monitor each grantee. This assessment will evaluate each grantee and identify each as a high-, medium-, or low-risk designation. This allows the HSO to focus its monitoring efforts on the higher risk entities and ensure they meet program requirements and objectives. The risk assessment may include information such as past performance of the grantee during previous grants and review timeliness of claim submissions and progress reports.

The HSO may notify grantees during the assessment of the need to answer or explain any identified deficiencies. Based on the risk level (high, medium, or low), the HSO will determine the level or type of monitoring during the grant period to better track the project progress. Any grantee receiving more than \$200,000 will receive onsite monitoring.

### Pre-Award Notice and Reporting Requirements

Upon final approval, the HSO Coordinator notifies each project director of the approved amount of funding and advises of individual fiscal and administrative reporting/evaluation requirements.

The HSO monitors all projects on a regular basis, which includes onsite monitoring. Additional monitoring may be required for grantees where the HSO determines that the organization is a medium- or high-risk grantee. Project directors are required to submit a quarterly progress report, which outlines activities from the grant application and submit an equipment record when purchasing equipment. As of FY2018, the HSO will perform onsite monitoring of equipment for any grantee who has purchased equipment under the grant on a biannual basis. If the grantee is not achieving project goals, then the HSO reserves the right to terminate the project or require changes to the project action plan.

All grants are reimbursable in nature, meaning that the agency must first spend the funds and then submit a

reimbursement voucher and request reimbursement from the HSO. This reimbursement voucher indicates the amount of Federal funding spent. Agencies must attach backup documentation to the submitted reimbursement voucher to include receipts, timesheets, etc. Agencies must submit a final performance report at the end of the project period; it must also provide an in-depth cumulative summary of the tasks performed and goals achieved during

Quarterly Progress Reports		
Period	Due Date	
October to December	January 15th	
January to March	April 15 <sup>th</sup>	
April to June	July 15 <sup>th</sup>	
Final Performance Report	Nov 1st	

the project period. This report is due no later than November 1 of each year that the grant is in place.

### **Problem Identification**

The HSO uses the problem-identification process and guidelines outlined in the NHTSA *Traffic Safety Performance Measures for States and Federal Agencies* and the *GHSA Guidelines for Developing Highway Safety Performance Plans*.

This is a crucial step in solving the problem and determining which projects to implement that would be most effective and efficient in addressing the District's crashes, injuries and fatalities. An initial review of the data highlights those factors that contribute to a high percent of fatalities and injuries.

### **Sources of Information**

This section reviews how the HSP uses a number of sources and partnerships to determine the District's crash problem.

### Traffic Crash Data

The HSO obtains fatality data through the NHTSA Fatality Analysis Reporting Systems (FARS). The FY2018 Highway Safety Plan uses FARS data from 2011 to 2015 and preliminary 2016 FARS data from MPD. The District's fatality numbers are relatively small and, therefore, in order to get a clearer picture of the District's traffic safety problems, HSO uses injury data.

The HSO, through an agreement with the MPD, has access to the MPD Cobalt-RMS/Traffic Crash system. The access to the crash data is through a REST API called CLERK and HSO can obtain all the crash data, including injury-related data. The Cobalt-RMS/Traffic Crash system interfaces with the DC DMV Destiny system to retrieve driver- and vehicle-related information based on either the Tag or VIN numbers. The HSO can also access the Department of Motor Vehicle (DMV) and obtain number of registered of vehicles and number of licensed drivers.

In August 2015, the District implemented a new crash-reporting system that captures injury data based on the MMUCC 4<sup>th</sup> Edition. There is a high probability that future serious injury numbers resulting from a crash will increase as officers are fully trained and able to more accurately and consistently code in the field.

The identification process examines the following variables, including crash severity (fatality and injuries), time of day, day of the week, driver gender and age, contributing circumstances (speed, impaired, seat belt use, etc.), and location by Ward.

### Enforcement Data

The MPD is the primary law enforcement agency for the District of Columbia and the HSO works closely with the agency throughout the year to provide locations and time of enforcement activities. The HSO has access to daily enforcement activities and reports on number of citations issued during campaigns and overtime enforcement.

### Seat Belt Use Observational Survey

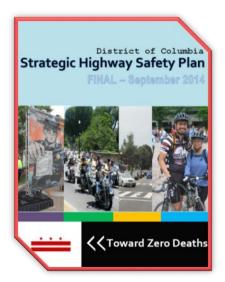
The District conducts an annual seat belt use survey each year in June. The latest report was conducted between Wednesday, June 1st and Thursday, June 30th, 2016. During this observation period, surveyors observed a total of 15,000 vehicles, resulting in 17,406 driver and right-front passenger observations at the 150 observation sites randomly selected to represent District-wide safety belt use. The result was an overall weighted statewide safety belt use rate for the District of Columbia of 94.1 percent.

To calculate the safety belt usage rates, belted occupants were considered as well as all the drivers and front-seat passengers who were belted correctly. Conversely, "not belted" occupants were considered as drivers and front-seat passengers who were not belted or who were wearing the belt incorrectly—either under their arm or behind their back. Note that all observation sites were original sites; thus, they used no alternate sites. The overall statewide use rate is representative of all front-seat occupants (drivers and right-front passengers), all times of the day (7:30 a.m.–6:00 p.m.) from Monday through Friday.

### Strategic Highway Safety Plan

The District's HSP links directly to the District's Highway Strategic Safety Plan (SHSP) 2014 and has the same fatality, serious injury, and fatality per 100 million vehicles miles travelled performance target.

The SHSP's goal is to reduce all traffic-related fatalities and injuries by 20 percent by 2025 and is the guiding document that governs traffic-safety investments throughout the District. The HSO is also responsible for developing and implementing the District's SHSP and has contracted with KLS Engineering on this effort. Two teams involved in the process developed the 2014 SHSP; a Strategic Management Team (SMT)—comprised of executives/senior managers



from various agencies, and Safety Partners—agencies or organizations responsible for safety on the District's roadways. The HSO coordinator and previous and current grantees attended these meetings and provided input and guidance relative to the behavioral highway safety program areas. The following identifies participants involved in the SHSP process:

DDOT	DDOT	MPD	OAG
<ul> <li>Adil Rizvi</li> </ul>	<ul> <li>Jose Colon</li> </ul>	<ul> <li>Anne Grant</li> </ul>	<ul> <li>Andrew Fois</li> </ul>
<ul> <li>Alberta Paul</li> </ul>	<ul> <li>Jose Thommana</li> </ul>	<ul> <li>Comm. James Crane</li> </ul>	<ul> <li>Kimberly Brown</li> </ul>
<ul> <li>Amber Carran-Fletcher</li> </ul>	<ul> <li>Karen Gay</li> </ul>	<ul> <li>Glenn Amodeo</li> </ul>	<ul> <li>Melissa Shear</li> </ul>
<ul> <li>Asnake Negussie</li> </ul>	<ul> <li>Maurice Keys</li> </ul>	<ul> <li>Lee Nobriga</li> </ul>	<ul> <li>Whitney Stoebner</li> </ul>
<ul> <li>Brett Rouillier</li> </ul>	<ul> <li>Mike Goodno</li> </ul>	<ul> <li>Lisa Sutter</li> </ul>	
<ul> <li>Carole Lewis</li> </ul>	<ul> <li>Ogechi Elekwachi</li> </ul>	<ul> <li>Lt. Nicholas Breul</li> </ul>	FMCSA
<ul> <li>Clarence Dickerson</li> </ul>	<ul> <li>Paul Hoffman</li> </ul>	<ul> <li>Lt. Ronald Wilkins</li> </ul>	FMCSA
<ul> <li>Colleen Hawkinson</li> </ul>	<ul> <li>Rahul Jain</li> </ul>	<ul> <li>Michele Molotsky</li> </ul>	<ul> <li>Bernard McWay</li> </ul>
<ul> <li>Dena Thweatt</li> </ul>	<ul> <li>Reginald Arno</li> </ul>	<ul> <li>Officer Arlinda Page</li> </ul>	<ul> <li>Deborah Snider</li> </ul>

- Eric Ambrose
- Eric Walden
- Eulois Cleckley
- Faisal Khan
- George Branyan
- Gregg Steverson
- Harvey Alexander
- Howard Chang
- James M. Cheeks
- Jameshia Peterson
- Jeffrey Powell
- Jim Sebastian

### **WMATA**

- Gregory C Kupka
- Janice Mayo
- Kristin Haldeman

### **HSEMA**

Patrice White

### **FEMS**

- Erik Johnson
- Sean Egan

### **MWCOG**

- Andrew Meese
- Michael J Farrell

### Others

- D. Lynn and Sally Wilson, Children's National Medical Center
- Dawn Moreland, MedStar Washington Hospital Center
- Dayna Minor, Associates for Renewal in Education
- Edward R. Stollof, ITE, Safety Program Senior Director

- Reginald Bazile
- Robert Green
- Ronaldo Nicholson
- Sam Zimbabwe
- Soumya Dey
- Steven Zike
- Victory RichWilliam McGuirk

### DC Office on Aging

- Courtney Williams
- Linda Irizarry

### DCSC

- Dan Cipullo
- Joyce Jenkins
- Michael Francis
- Nancy McKinney

### DMV

- Cherice Stanley
- David Glasser
- Elaine Speller
- Kenneth King
- Lucinda BabersRick Whitley

### **OCME**

Lucas Zarwell

Company

Kids

Angela Mickalide, Safe

Jim McAndrew and Mary

McAndrew, McAndrew

KLS Engineering Staff

Kristin Rosenthal, Safe

Kurt Erickson, WRAP

**Truckers Association** 

Teresa Edelen, DC

Tiffany Rose, DC

Tourism

- Officer Gerald Anderson
- Officer Robert Wells
- Officer Wen Ai
- Raphael Dionicio
- Sgt. Andrew Margiotta
- Sgt. James Schaefer
- Sqt. Terry Thorne

### **US Capitol Police**

- Christopher Dickhoff
- Jason .R. Bachman
- Joseph Torreyson
- Lt. Talaya MayronneLt. Timothy Bowen
- Michael Riccardi
- Michael Riccard
- Michael Riley
- Mike Baierlein
- Richard Larry
- Ryan Ford
- Sgt. Brian Verderese

### **DCPS**

- Anthony Hinnant
- Patrice Bowman

### осто

Mario Field

- Armen Abrahamian, PG County
- Marlene Berlin, IONA Senior Services
- Patrick N. Foster, PG County
- Philip Sause, Maryland DOT
- Randy Dittberner,
   Virginia DOT
- Sharon Bauer , IONA Senior Services
- Trish Blomquist, MRC

Kristen Allen

OCME

**NHTSA** 

DOH

FHWA

Beth Baker

Brian Amy

Cynthia Harris

Robert Austin

- Jawad ParachaPeter Doan
- Sandra Jackson

### **US Park Police**

- Janice Bindeman
- Lt. Russel Fennelly
- Maj. Keith Horton

Errol Noel, Howard

Hazlewood, George

University Hospital

Lakisha Johnson,

Victor Weissberg,

**Arlington County** 

Associates for

Renewal in

Education

PG County

Wayne Wentz,

University

Washington

Kenyatta

 Officer Pentti Gillespie

The HSP and the SHSP use the same process to identify problems in the District and identify/select evidence-based countermeasures. The primary sources for evidence-based strategies are the GHSA *Countermeasures that Work*, NHTSA *Highway Safety Uniform Guidelines*, the NCHRP 500 series, and scientifically sound evidence-based research regarding strategies not identified by GHSA, NHTSA, or NCHRP.

The SHSP used a systematic data- and information-driven process and guidance from the District's safety partners. The HSO uses two primary crash data sources to analyze and identify the District's most significant traffic safety problems, the NHTSA FARS program and the MPD Crash Data. The latter contains information on crashes and injuries for the District.

The problem-identification process uses FARS fatality data and MPD data for injuries. The data queried determines 1) who is involved in a crash (e.g., age, gender, seat belt use, impairment, etc.), 2) when crashes occur (e.g., time of day, day of the week, month), 3) what is the cause of the crash (e.g., speed, alcohol, other), and 4) where crashes occur in the District.

Understanding the data helped the HSO and its stakeholders identify the five Critical Emphasis Areas (CEAs) listed in the 2014 SHSP to improve traffic safety and decrease injuries and fatalities in the District. The following identify the five CEAs (SHSP):

- 1. High-Risk Drivers
  - a. Aggressive Driving
  - b. Impaired Driving
  - c. Driver Competency and Licensing
  - d. Distracted Driving
- 2. Pedestrian and Bicyclist Safety
  - a. Pedestrian Safety
  - b. Bicyclist Safety
- 3. Engineering/Facilities Infrastructure
  - a. Signalized intersections
  - b. Nonsignalized Intersections (STOP Controlled only)
  - c. Work Zones

- 4. Special Vehicles
  - a. Large Trucks
  - b. Motorcycles
- 5. Special Target Areas
  - a. EMS
  - b. Occupant Protection
  - c. Traffic Incident Management (TIM)

### Vision Zero Plan

In February 2015, Mayor Bowser launched Vision Zero in response to U.S. Department of Transportation Secretary Anthony Foxx's Mayors' Challenge for Safer People and Safer Streets. Vision Zero marks a new approach to the District's challenges and a renewed sense of urgency within our city. The goal of Vision Zero is to realize zero fatalities by 2024.

More than thirty District agencies and safety partners worked to develop the plan that better educates stakeholders and grows a safety



culture; more efficiently enforces life-saving laws; enhances the design of complete streets; and collects, leverages, and shares crucial safety data.

### **DISTRICT AGENCIES**

Executive Office of the Mayor

Council of the District of Columbia

Office of the Deputy Mayor for Public Safety and Justice

Office of the Deputy Mayor for Planning and Economic Development

Office of the Deputy Mayor for Education

Office of the Deputy Mayor for Health and Human Services

District Department of Transportation

Advisory Neighborhood Commission Board

DC Fire and Emergency Medical Service Department

DC Homeland Security and Emergency Management Agency

DC Taxicab Commission

Department of Consumer and Regulatory Affairs

Department of General Services

Department of Health Department of Housing and Community Development

Department of Parks and Recreation

District Department of Energy and the Environment

District Department of Motor Vehicles

District Department of Public Works

District of Columbia Public Schools

Metropolitan Police Department

Office of Aging Office of Disability Rights

Office of Planning

Office of Risk Management

Office of the Attorney General

Office of the Chief Medical Examiner

Office of the Chief Technology Officer

Office of the State Superintendent of Education

Office of Unified Communications

Washington Metropolitan Area Transit Authority

### STAKEHOLDER GROUPS

DC Pedestrian Advisory Council

DC Bicycle Advisory Council

All Walks DC

Black Women Bike

Coalition for Smarter Growth

DC Alliance of Youth Advocates

Kidical Mass DC

League of American Bicyclists

Paralyzed Veterans of America

Safe Routes to School

Street Wize Foundation

Washington Area Bicyclist Association

Downtown Business Improvement District

Southwest Business Improvement District

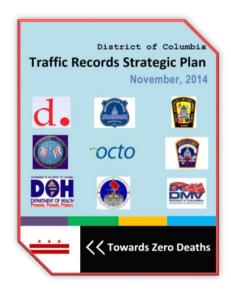
Adams Morgan Business Improvement District

Capitol Riverfront Business Improvement District

### District Traffic Records Coordinating Committee

In 2007, the District of Columbia established its Traffic Records Coordinating Committee (TRCC) comprised of nine District agencies (DDOT, MPD, FEMS, DMV, OCTO, OAG, DCSC, OCME and DOH). The HSO is also the TRCC Coordinator. The TRCC included policy-level representatives from each major system owner (crash, roadway, enforcement/adjudication, driver, vehicle, injury surveillance system/emergency medical system).

The vision of the District's TRCC is to enhance transportation safety and reduce crashes and crash-related injuries through a coordinated approach that will provide timely, accurate, complete, integrated, uniform, and accessible traffic records data. The TRCC developed the following goals:



- To provide an ongoing District-wide forum for traffic records and support the coordination of multi-agency initiatives and projects.
- To leverage technology and appropriate government and industry standards to improve the timely collection, dissemination, and analysis of traffic records data.
- To improve the interoperability and exchange of local and regional traffic records data among systems and stakeholders for increased efficiency and enhanced integration.
- To create a user-friendly data system incorporating public and private data sources that better informs traffic-related policy and program decision makers.

Participants prioritized and vetted projects during their quarterly meetings and this process becomes the following year's spending plan for the District's Section 405c (traffic records) funding.

In 2016, NHTSA conducted a comprehensive assessment of the District's traffic records system, updating the previous traffic records assessment (TRA) conducted in 2012. The District of Columbia received the final report for the 2016 Assessment on June 27, 2016, and is not due for another Assessment until 2021. Currently, the District is in the process of updating the 2014 Traffic Records Strategic Plan to include a number of goals and objectives identified as areas for improvements by the 2016 TRA. The updated Traffic Records Strategic Plan will serve as a guiding document for traffic records improvements over a five-year period, 2018 through 2022.

# Target-Setting Process

The overall goal of the HSO is zero deaths from traffic-related crashes in the Nation's Capital. However, when setting the performance targets, participants must ensure targets are obtainable and follow the SMART principle: S–Specific, M–Measurable, A–Action-oriented, R–Realistic, and T–Time-frame. The following factors are were considered when setting the performance targets for FY2018:

- **Fatality Numbers**. As previously noted, District fatalities numbers are small and progress to reduce these numbers further becomes increasingly difficult. Therefore, it might be a better use of resources to look at reducing the District's injuries.
- Legalization of Marijuana. In February 2015, it became legal in the District for adults 21 years and older to use marijuana up to two ounces and growing up to six plants in their homes for personal use. This has increased the potential for drug-impaired driving in the District.
- Nonmotorized Trips. The increase number of bike and pedestrian trips, e.g., Bikeshare trips increased by over 10 percent per day from 2015 to 2016 to approximately 8,500 trips (over 2.2 M trips per year) with 15–20 percent being the casual rider—not registered in the Bikeshare system.
- New Modes of Transportation, DC Streetcar. The Streetcar service on H Street commenced in March 2016 with daily weekday passenger averaging 2,419 passengers (67,853/month). In 12 months since, daily weekday ridership has reached a high of 3,207 (93,909/month—March 2017) or a 32 percent increase.
- New Crash-Reporting System. In August 2015, the District implemented a new system that captures injury data based on the MMUCC 4th Edition. There is a high probability that future serious-injury numbers resulting from a crash will increase as all officers complete training and provide more accurate and consistent coding in the field.

When considering all these, exposure can potentially increase by at least 10 to 15 percent per year. However, the relative risk varies that 1) a driver or passenger, 2) a bicyclist, or 3) a pedestrian might die or be seriously injured in a traffic collision. It is clear that countermeasures to improve road safety must come from activities that reduce:

- Exposure
- Risk of the crash
- Risk of injury

# **Performance Plan**

### **Core Performance Measures**

Performance measures are the tools or standard used to determine whether programs work and to what extent. Developed by NHTSA in collaboration with GHSA and others, the FAST Act identified 11 Core outcomes and one behavior performance measure. However, with the District's relatively small fatalities numbers each year, the HSO has added injuries as additional performance measures. Note that all the fatalities numbers are based on FARS data, with 2015 data being the most current available. Table 4 below identifies the program areas with the related performance measures.

**Table 4: Core Performance Measures** 

Program Area	NHTSA Measure	Core Performance Measures	Measured By
Overall HSO	C-1	Reduce Fatalities	Number of traffic-related fatalities
Program Area Goals	C-2	Reduce Serious Injuries	Number of traffic-related serious injuries
	C-3	Decrease Fatality Rate per 100 Million VMT	Fatalities per 100 million VMT
Occupant Protection	C-4	Decrease Unrestrained fatalities	Number of unrestrained fatalities (all seating positions)
		Decrease Unrestrained injuries	Number of unrestrained injuries (all seating positions)
	B-1	Increase Observed Belt Use	Observed belt use
Impaired Driving	C-5	Decrease Fatalities with a BAC at 0.08 or Above	Number of fatalities with a 0.08 or above BAC
		Decrease Impaired-related Injuries	Number of injuries where the driver is impaired by drugs or alcohol or both.
Aggressive	C-6	Decrease Speeding-related Fatalities	Number of speeding-related fatalities.
Driving		Decrease aggressive-related Injuries	Number of aggressive-related injuries
Motorcycle	C-7	Decrease Motorcyclist fatalities	Number of motorcyclist fatalities.
Safety	C-8	Decrease Unhelmet Motorcyclist Fatalities	Number of unhelmet motorcyclist fatalities.
Younger Driver	C-9	Decrease Drivers 20 or Under Involved in a Fatal Crash	Drivers 20 years and under involved in fatal crashes.
Pedestrian	C-10	Decrease Pedestrian Fatalities	Number of pedestrian fatalities.
and Bicycle		Decrease Pedestrian Injuries	Number of pedestrian injuries.
Safety	C-11	Decrease Bicyclist fatalities	Number of bicyclist fatalities.
		Decrease Bicyclist Injuries	Number of bicyclist injuries.

The FY2018 HSP aligns with the District's vision Toward Zero Deaths and the Highway Safety Improvement Program (HSIP). A Team comprised of DDOT (HSIP, HSP, SHSP, VZ), MPD, Metropolitan Washington Council of Governments (MWCOG), and Federal Highways Administration (FHWA) met on May 16th, 2017, and established specific targets based on the variety of data sources mentioned in this report to address the District traffic safety problems. The Team established the methodology and targets for C-1: Fatalities, C-2: Serious Injuries and C-3: Fatality rate per 100 million vehicle-miles travelled; these are identical for the HSP and HSIP for FY2018. With the targets generated for these traffic safety indicators, the District is on track to achieve its long-term goal of the SHSP.

The program areas and performance measure identified in Table 4 are the focus of the District's HSP for FY2018. Participants established these performance targets based on reviewing the data trends from recent years, understanding the changing environment within the District, and using the same methodology established by the Team on May 16, 2017. There are program areas where the District numbers are relatively small and can fluctuate from year to year, making it almost impossible to accurately predict future year targets.

# **Program Area Targets**

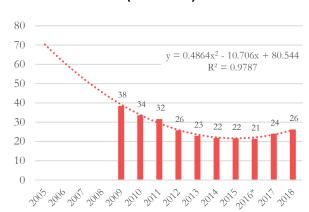
### **Overall Fatalities**

As Figure 5 shows, between 2005 and 2016 the District fatality trend follows the national trend, downward from 48 in 2005 to 15 (lowest) in 2012, followed by an upward trend to 2016 of 26 traffic fatalities (Preliminary FARS data\*). This upward trend, based on actual traffic fatalities (FARS), makes this projected value in 2018 (31 traffic fatalities).

Figure 5: Fatality Annual (FARS) Trend (2005-2018)



Figure 6: 5-year Rolling Average Fatality (FARS) (2005–2018)



Using the 5 year rolling average trend (Figure 6), which to some extent evens out the yearly fluctuation, gives a projected value of 26 (actual 25.99) traffic fatalities for the 2014–2018 5-year average.

With the increases in population, worker trips, tourist visitations, VMT, nonmotorized trips, and other tripmaking activities in the District, exposure is expected to increase by at least 10 to 15 percent per year.

However, with the ongoing and planned road safety activities in engineering, enforcement, education and emergency services, the District believes that a goal of 26 traffic fatalities is achievable in 2018.

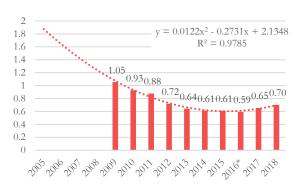
**Fatality Rate.** The Fatality Rate is the number of traffic fatalities per 100 million vehicle miles traveled. As Figure 7 shows, the current trend of crash occurrences and resulting traffic fatality rate is increasing primarily because the many issues highlighted previously. This upward trend, although based on actual traffic fatality rates, makes this projected value in 2018 (0.810) an unrealistically high target.

Using the 5-year rolling average trend, which to some extent evens out the yearly fluctuation, gives a projected value of 0.703 in for the 2014–2018 5-year average.

Figure 7: Fatality Rate per 100M VMT Annual Trend (2005–2018)



Figure 8: Fatality Rate per 100M VMT 5-yr. Rolling Average Trend (2005–2018)



With the increases in population, worker trips, tourist visitations, VMT, nonmotorized trips, and other tripmaking activities in the District, exposure is expected to increase by at least 10 to 15 percent per year, as noted previously. However, with the ongoing and planned road safety activities in engineering, enforcement, education and emergency services, the District believes that a goal of 0.703 traffic fatality rate is achievable in 2018.

**Serious Injuries.** HSO defines serious according to MMUCC 4<sup>th</sup> Edition. The current trend of crash occurrences and resulting serious injuries is increasing (Figure 9) because of the many issues highlighted previously. In-particular, the District implemented a new crash-reporting system that captures injury data based on the MMUCC 4<sup>th</sup> Edition. There is a high probability (based on experiences from other States) that future serious injury numbers resulting from a crash will increase as officers complete training and more accurately and consistently code in the field.

The upward trend, although based on actual serious injuries, makes this projected serious injury value in 2018 (455) an unrealistically high target.

Figure 9: Serious Injury Trend (2007-2018)

Figure 10: Serious Injury 5-yr Rolling Average Trend (2007-2018)



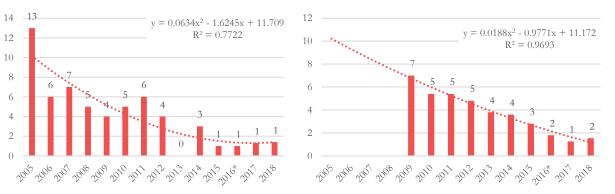
The 5-year rolling average serious injury rate trend, which to some extent evens out the yearly fluctuation, makes the projected value of 384.2 serious injuries in 2018—also an unrealistically low target based on current trends.

With the increases in population, worker trips, tourist visitations, VMT, nonmotorized trips, and other tripmaking activities in the District, exposure is expected to increase by at least 10 to 15 percent per year, as previously noted. In addition, the new electronic reporting system can potentially lead to an increase in serious injury reporting through improved accuracy and consistency. Thus, using an average of both the low and high projections, the District believes that a goal of limiting serious injuries to 420 persons is achievable in 2018.

**Unrestrained Fatalities.** As Figure 11 shows, between 2005 and 2016 (Preliminary FARS data\*) the District unrestrained fatalities remained low, the highest being 6 in 2011 and the lowest being zero in 2013. The 2018 projection is 1.4. However, with these small numbers, it is difficult to account for the fluctuations from one year to the next. Therefore, using the 5-year rolling average of 2 for the 2014-2018, 5-year average seems a more realistic predication.

Figure 11: Unrestrained Fatalities Trend (2005–2018)

Figure 12: Unrestrained Fatalities 5-yr Rolling Average (2005-2018)



**Unrestrained Injuries.** The number of unrestrained injuries follows a downward trend from 2007 to 2011, followed by the current upward trend in 2016 of 122 (MMUCC coded), making the projected value of 155 for

2018. The 5-year rolling average trend, which to some extend evens out the yearly fluctuation, makes the projected value of 126 unrestrained injuries for the 2014-2018 5-year average.

Figure 13: Unrestrained Injuries Trend (2007-2018)

Figure 14: Unrestrained Injuries 5-yr. Rolling Avg.(2007-2018)





**Observation Belt Use.** As Figure 15 shows, in 2016, the District attained a seat belt use rate of 94.1 percent. It is understood that reaching 100 percent compliance is difficult as there will always be a small percent of population that choose not to wear their seat belts. The goal is to maintain the 94.1 percent rate in 2018.

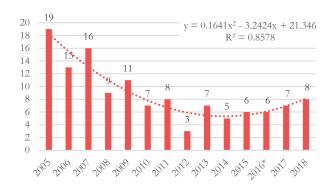
98 96 95.5 94.1 94 93.2 92.4 92 90 88 87.46 86 84 82 2013 2014 2015 2016 2012

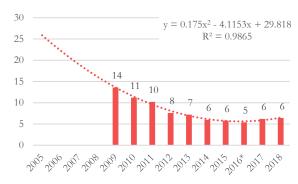
Figure 15: Percent Observed Belt Use for Passenger Vehicle

Alcohol-impaired Driving Fatalities. The number of alcohol-impaired drivers (BAC +0.08) and related fatalities have been decreasing and have been less than 10 since 2010, the lowest being in 2012 at 3. As Figure 16 shows, there has been an upward trend since 2014 to 2016 (\*preliminary FARS data) of 6; resulting in a projected increase in 2018 of 8. The District's small numbers and the fluctuation from year to year, makes it a challenge for the models to predict accurately. Using the 5-year rolling average (Figure 18), the estimated 2014–2018 5-year average is 6.

Figure 16: Alcohol-Impaired Fatalities Trend (2005-2018)

Figure 17: Alcohol-Impaired Fatalities 5-yr. Rolling Avg.



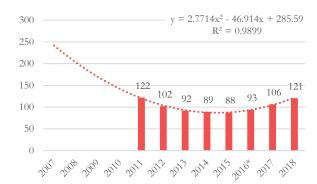


Impaired-Driving Injuries. Over the past 5-years, the number of impaired-related injuries (drug/alcohol) in the District has fluctuated between 76 (lowest in 2012) and 122 (highest in 2016). The linear trend line predicts an upward trend line with 122 in 2016 (MMUCC) and a 2018 target of 172. The 5-year rolling average trend (Figure 19), which to some extent evens out the yearly fluctuation, makes the projected value of 122 impaired-related injuries for the 2014–2018 5-year average.

Figure 18: Impaired-Driving Injuries Trend (2007-2018)



Figure 19: Impaired-Driving Injuries 5-yr. Rolling Avg

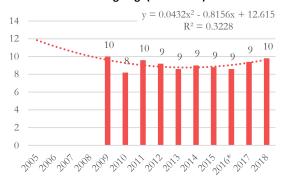


**Speeding-related Driving Fatalities.** The number of speeding-related driving fatalities has been fluctuating within the District. As Figure 20 shows, the lowest is 6 in 2012 and 12 is the highest in 2014. There was a 42 percent increase from 12 in 2014 to 7 in 2015 and, based on preliminary 2016 data, the number of fatalities involving speed remains at 7. As Figure 20 shows, there is a low level of confidence based on the trend in predicting the 2018 goal of 11. The 5-year rolling average, predicts 10 fatalities for the 2014–2018 5-year average (Figure 21).

Figure 20: Speeding-related Fatalities Trend (2005-2018)



Figure 21: Speeding-related Fatalities 5-yr.
Rolling Avg. (2005-2018)



**Aggressive-Driving Injuries.** Aggressive driving-related injuries are on a downward trend, as Figure 22 shows, with a high of 344 in 2010 and the low in 2016 of 190 related injuries. This was a 36 percent decrease in 2016 (190) compared to 2015 (296). Using the annual trend line, the 2018 goal is 134, whereas Figure 22 indicates that using the 5-year rolling average shows a projected goal of 225, with a higher level of confidence than the annual trend. With the increase in population in the District and the increase in the number of drivers, in particular, the 1.8 percent increase in drivers between ages 25 and 34 and 4.5 percent increase between ages 35 and 44, a goal is to not exceed 225 for the 2014–2018 5-year average.

Figure 22: Aggressive-Driving Injuries Annual Trend (2007–2018)

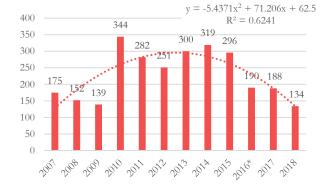
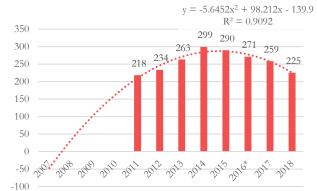


Figure 23: Aggressive-Driving Injuries 5-yr.Rolling Avg (2007-2018)



**Motorcycle-related Fatalities.** This is not an emphasis area in the District, but is included as it is a NHTSA requirement. The number of motorcycle-related fatalities has not exceeded 4 since 2009; however, preliminary data for 2016 indicate that there were 6 motorcyclist-involved fatalities. As Figure 24 shows, the annual trend has a low level of confidence. However, the 5-year rolling average (Figure 25) indicates a target of no more than 5 for the 2014–2018 5-year average is appropriate.

Figure 24: Motorcyclist-related Fatalities Annual Trend (2005–2018)

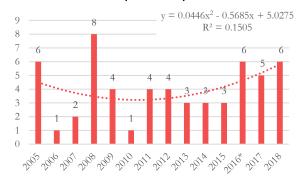


Figure 25: Motorcyclist-related Fatalities 5-yr.Rolling Avg (2005-2018)



**Unhelmeted Motorcyclist Fatalities.** Again, although this is not an emphasis area in the District, it is included as it is as a NHTSA requirement. The number of unhelmeted motorcyclist fatalities in the District has not exceeded 2 since 2005, with a 5-year average of 1 (2012–2015); therefore setting a target of no more than 1 in 2018 is appropriate

**Younger Driver-related Fatalities.** This is not an emphasis area in the District, but is included as it is as a NHTSA requirement. The number of younger driver-related fatalities has not exceeded 2 since 2008, as Figure 26 shows. A goal to not exceed the 5-year average (2011–2015) of 2 fatalities for the 2014-2018 seems appropriate.

Figure 26: Younger Driver Fatalities Trend

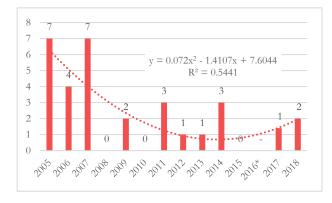


Figure 27: Younger Driver Fatalities 5-yr. Rolling Average



**Pedestrian-related Fatalities.** As Figure 28 shows, and based on the 5-year trend, pedestrian fatalities are increasing. Pedestrian fatalities increased by almost 45 percent in 2015 (13) compared to 2014 (9). There is also an anticipated increase in fatalities related to the increase in pedestrian exposure. Based on these factors, using the 5-year rolling average of 11 for the 2014–2018 5-year average is appropriate.

Figure 28: Pedestrian-related Fatalities Trend (2005–2018)

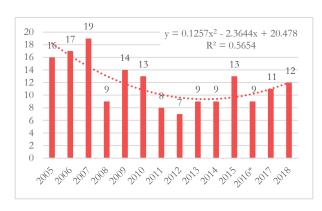
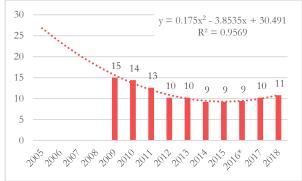


Figure 29: Pedestrian-related Fatalities 5-yr.
Rolling Avg. (2005-2018)

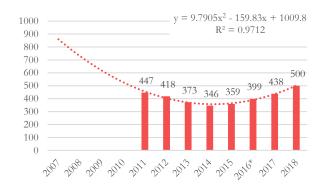


**Pedestrian-related Injuries.** The number of pedestrian-related injuries is on an upward trend. There was a 40.6 percent increase from 370 in 2015 to 509 in 2016. The District will need to focus its strategies to reverse this trend as the number of pedestrian trips in the District increases. The goal is to not exceed the number of related injuries in 2016 of 509.

Figure 30: Pedestrian-related Injuries Annual Trend



Figure 31: Pedestrian-related Injuries 5-yr. Rolling Avg (2007-2018)



**Bicyclist-related Fatalities.** The number of bicyclist-related fatalities has not exceeded 2 since 2010; however, with the increase in exposure, there is a potential for fatalities to increase. Based on the historical trend and the alternative baseline calculation (Figures 32 and 33), a target of no more than the 5-year rolling average (2014–2018) of 1 is appropriate.

Figure 32: Bicyclist-related Fatalities Annual Trend

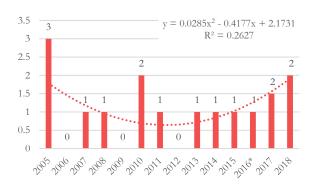


Figure 33: Bicyclist-related Fatalities 5-yr. Rolling Average



**Bicyclist-related Injuries.** The number of bicyclist-related injuries is at an upward trend; in 2016 (442) there was a 46 percent increase from the number of injuries in 2015 (302). With the increase in bicyclists in the District (Bikeshare program and the number of bike lanes), there is a need for the District to reverse the trend. This will involve a culture shift in drivers to accommodate the growth of bike trips, estimated at 5–10 percent increase annually. The District will work to maintain a target of no more than the number of related injuries in 2016 of 442.

Figure 34: Bicyclist-related Injuries Linear Trend



Figure 35: Bicyclist-related Injuries 5-yr. Rolling Average



**Table 5: FY2018 Performance Measure Targets** 

Program Area	NHTSA Measure	FY2018 Performance Targets
Overall HSO Program Area Goals	C-1	Limit expected increase in fatalities to 18 percent from the 5-year average (2011–2015) of 22 to no more than the 5-year rolling average (2014–2018) of 26, or a 16 percent decrease based on 2018 actual projection.
	C-2	Limit expected increase in serious injuries to 32 percent from the 5-year average (2011–2015) of 319 to no more than the 5-year rolling average (2014–2018) of 420, or an 8 percent decrease based on 2018 actual projection.
	C-3	Limit expected increase in the traffic fatality rate to 18 percent from the 5-year average (2011–2015) of 0.61 to no more than the 5-year rolling average (2014–2018) of 0.703, or a 14 percent decrease based on 2018 actual projection.
Occupant Protection	C-4	Decrease number of unrestrained fatalities by 33 percent from the 5-year average (2011–2015) of 3 to no more than the 5-year rolling average (2014–2018) of 2.
		Limit expected increase in unrestrained injuries to 18 percent from the 5-year average (2011–2015) of 107 to no more than the 5-year rolling average (2014–2018) of 126, or a 23 percent decrease based on 2018 actual projection.
	B-1	Maintain observation belt use to more than 94.1 percent.
Impaired Driving	C-5	Maintain the number of alcohol-related fatalities to no more than the 5-year average (2011–2015) of 6, or a 33 percent decreased based in 2018 actual projection.
		Limit expected increase in impaired-related to a 38 percent from the 5-year average (2011–2015) of 88 to no more than the 5-year rolling average (2014–2018) of 121, or a 42 percent decrease based on 2018 actual projection.
Aggressive Driving	C-6	Limit expected increase of speeding-related fatalities to 11 percent from the 5-year average (2011–2015) of 9 to no more than the 5-year rolling average (2014–2018) of 10, or 10 percent decrease based on 2018 actual projection.
		Reduce the number of aggressive-related injuries by 22 percent from the 5-year average (2011–2015) of 290 to no more than the 5-year rolling average (2014-2018) of 225.
Motorcycle Safety	C-7	Limit expected increase of motorcyclist fatalities by 66 percent from the 5-year average (2011–2015) of 3 to no more than the 5-year rolling average (2014–2018) of 5, or a 17 percent decrease based on 2018 actual projection.
	C-8	Maintain the number of unhelmet motorcyclist fatalities to no more than the 5-year average (2011–2015) of 1 by December 2018.
Younger Driver	C-9	Maintain the number of drivers age 20 or under involved in a fatal crash to no more than the 5-year average (2011–2015) of 2 by December 2018.

Pedestrian and Bicycle Safety	C-10	Limit expected increase of pedestrian-related fatalities by 22 percent from the 5-year average (2011–2015) of 9 to no more than the 5-year rolling average (2014–2018) of 11, or an 8 percent decrease based on 2018 actual projection.
		Maintain number of pedestrian-related injuries to no more than 509 (2016) by December 2018.
	C-11	Maintain the number of bicyclist-related fatalities to no more than the 5-year average (2011–2015) of 1 by December 2018.
		Maintain number of bicyclist-related injuries to no more than 442 (2016) by December 2018.

# **Highway Safety Strategies and Projects**

The District safety partners work with the HSO to achieve the District's safety goals; they use data-driven problem identification and proven countermeasure activities that will reduce the District's fatalities and injuries. Based on the data analysis, behavioral survey findings and discussions with key partners, the District's FY2018 will focus on impaired-related, occupant protection, aggressive driving, pedestrian, and bicycle safety, and Traffic Records. This supports two of the five emphasis areas in the District's SHSP. It is important to note that while distracted driving, younger driver, and motorcycle safety are not included in the FY2018 HSP focus areas, the HSO and its safety partners address these areas.

In 2004, the District of Columbia enacted the Distract Driving Safety Act, which restricted the use of mobile phone and other electronic devices while driving. The law places additional restrictions on school bus drivers or individuals with a learner's permit and prohibits these drivers from using any mobile phone or other electronic device, even if it has a hands-free accessory, unless they are placing an emergency call. The penalty for violating the law is \$100. However, first-time violators can have the fine suspended by providing proof of having acquired a hands-free accessory prior to the imposition of the fine. The Distracted Driving Safety Act does not impose points on violators.

For younger drivers between the ages of 16 and 21, the District has a Gradual Rearing of Adult Drivers (GRAD) Program, which permits novice drivers to safely gain driving experience before obtaining full driving privileges. The three stages in the graduated licensing program are Supervised learner's phase, Intermediate phase in which drivers earn a provisional license, and Full license—depending on age, there may be conditions.

Drivers under this program will face penalties if they violate traffic laws or GRAD program requirements. The District also has a zero tolerance for younger drivers (under the age of 21 years) with any measurable amount of alcohol in their blood. These drivers will lose their license for a specific period (between 6 months to a year). Parents or adults who aid these young drivers can also be fined \$300 and have their licenses revoked for up to 90 days.

District law defines a motorcycle as a two- or three-wheeled motor vehicle that has one or more of the following characteristics: piston displacement of more than 50cc, capable of traveling over 35 miles per hour on level ground, more than 1.5 brake horsepower (S.A.E. rating), wheels under 16 inches in diameter, and a manual transmission. To operate a motorcycle in the District, drivers must first have a valid driver's license from DMV before they can obtain a motorcycle endorsement. To get a motorcycle endorsement, applicants must have a valid DC driver's license, be at least 18 years of age, pass the motorcycle knowledge test, and pass the motorcycle demonstration skills test or provide a motorcycle demonstration course of completion approved by Maryland or Virginia. Motorcyclists in the District are required to wear a helmet.

The following sections provide an overview of the District's Evidence-Based Traffic Safety Enforcement Program and details on the safety focus area—the when, where, demographics related to the injuries, project descriptions and activities, as well as the funding levels and sources. The HSO uses the Countermeasures that

Work (CTW): A Highway Safety Countermeasure Guide for State Highway Safety Offices, Eight Edition, 2015 (<a href="http://www.ghsa.org/html/publications/countermeasures.html">http://www.ghsa.org/html/publications/countermeasures.html</a>), as well as NHTSA Uniform Guidelines for State Highway Safety Programs, Guideline posted on the NHTSA website at <a href="http://www.nhtsa.gov/nhtsa/whatsup/tea21/tea21programs/">http://www.nhtsa.gov/nhtsa/whatsup/tea21/tea21programs/</a>. The HSO uses these documents as references to help select effective, evidence-based countermeasure for the FY2018 HSP.

### **Evidence-Based Traffic Safety Enforcement Plan**

The Metropolitan Police Department (MPD) receives a significant portion of the District's Highway safety grant funds awarded, as it is the primary law enforcement agency in the District and has more than 4,000 sworn and civilian members in the Department.

The HSO has developed procedures to ensure the efficient and effective use of enforcement resources that support the goals of the District's highway safety program. The District incorporates an evidence-based approach in its District-wide enforcement program through the problem identification process described in the Planning Process Section.

The HSO constantly monitors these grants to ensure that law enforcement projects remain relevant with the ability to adjust to any situation. This provides the program managers and law enforcement managers with quick insights into the progress of each project. MPD focuses on the date, times, and locations where enforcement should be emphasized in the District, as provided by the HSO and other MPD sources. This information is based on data assembled from previous year's crash histories, citizen complaints, holidays, and events in the District, and NHTSA and DDOT Traffic Safety calendars. To ensure resources target the greatest need, monthly monitoring reports allow for adjustments in the areas worked, number of hours worked per officer, and the number of tickets/arrests issued.

### Occupant Protection Plan

The FAST Act rates the District as a high-use State. The following sections conform to the FAST Act requirements for 405b application for the District.

#### **Overview**

Proper and consistent use of seat belts and child safety seats are the most effective protection to reduce the severity of a crash. The District has one of the most comprehensive seat belt laws in the nation, which went into effect on April 9, 1997. Unlike many states, District law allows police to stop a vehicle solely because its drivers and passengers are not properly buckled up. The law requires the following:

- All motor vehicle passengers in the front seat and back seat are required to buckle up. Drivers are responsible for seat belt compliance for all passengers. It's a \$50 fine and 2 points for not having your seat belt buckled at all times—for drivers and all passengers, front and back seats.
- All children under the age of 8 must be properly seated in an installed infant, toddler or booster child-safety seat. Booster seats must be used with both a lap and shoulder belt. Children between 8 and 16 years old must be securely fastened with a seat belt. Drivers who fail to properly secure their child will be face even stiffer penalties—a \$75 fine and 2 points for a first offense, and a \$150 fine for fourth and subsequent offenses.

The District has had over a 90 percent seat belt use rate since in 2014. Shown in Figure 36, in 2013, the overall seat belt use rate dropped from 92.4 percent in 2012 (95.16 percent in 2011) to 87.46 percent, a statistically significant decrease of 4.94 percent. The reason for the decrease in 2013 was the change in the 2013 study that included usage rates among small commercial vehicles (taxi cabs and small commercial trucks). In 2016, 94.1 percent of drivers observed the seat belt use law. This includes all front passengers (driver and front seat occupants) in all passenger vehicles, including small commercial vehicles (under 10,000 lbs).

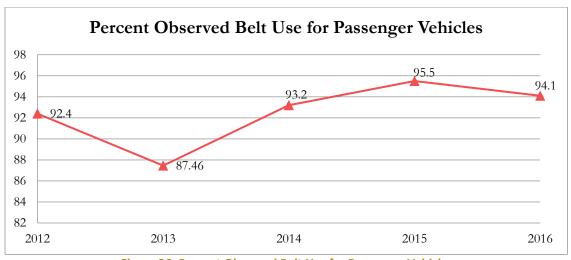
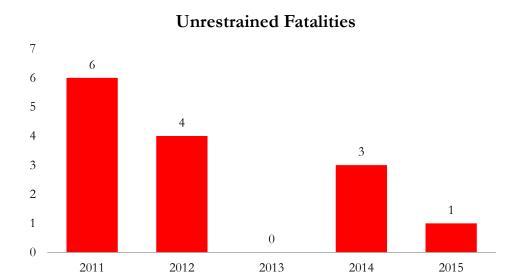


Figure 36: Percent Observed Belt Use for Passenger Vehicles

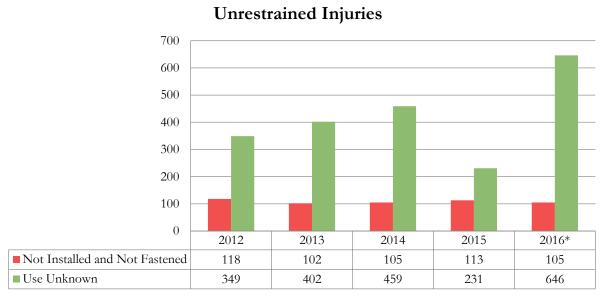
#### Unrestrained-related Data Trends

The number of unrestrained fatalities in the District is on a downward trend. The definition of Unrestrained is "not fastened" and/or "not installed."



Preliminary 2016 data indicate only one fatality involving an unbelted driver.

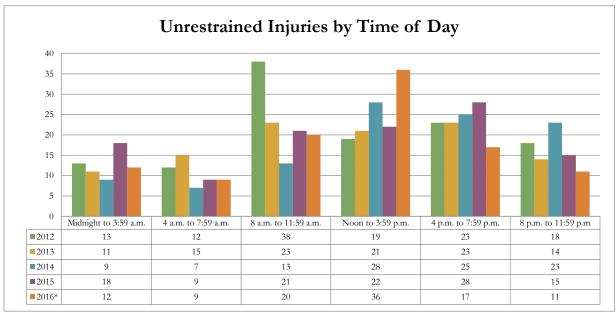
Between 2012 and 2016, a total of 543 unrestrained-related injuries represented about 5.4 percent of all injuries (10,132), resulting in an average of 109 injuries per year. Unrestrained-related injuries accounted for approximately 3.4 percent of all injuries in 2016 (105 out of 3,094)—a 7 percent decrease from 2015.



 $<sup>\</sup>ast$  - MMUCC Compliance

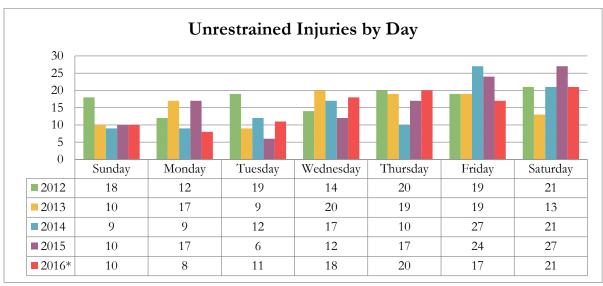
## When they occur

Injuries resulting from unrestrained conditions seem to occur mostly during the day. The highest frequencies of unrestrained injuries occur between noon to 3:59 p.m. (22.8 percent), 4 p.m. to 7:59 p.m. (21 percent), and 8 a.m. to 11:59 a.m. (20.8 percent) Overall, a significant portion of unrestraint injuries (43.6 percent) occur between 8 a.m. to 3:59 p.m.



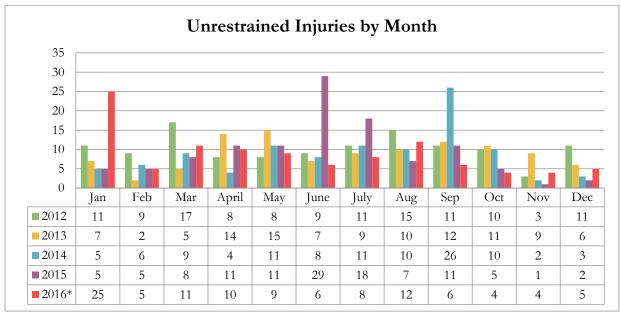
\* - MMUCC Compliance

Fridays and Saturdays have the highest frequencies of unrestrained injuries with 19.2 percent and 18.6 percent, respectively.



<sup>\* -</sup> MMUCC Compliance

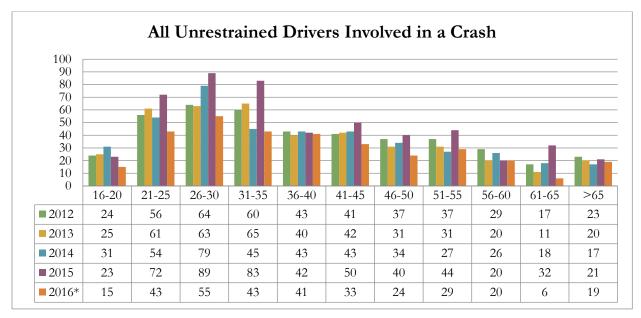
The months between June and September (summer) have the highest frequencies of unrestrained injuries at 32.9 percent of the total injuries. The District's **Click It or Ticket** campaigns runs in May and June, with a mini-campaign in March and Child Passenger Safety enforcement conducted in September.



<sup>\* -</sup> MMUCC Compliance

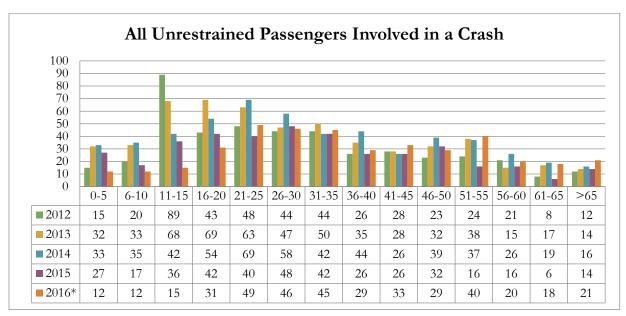
### Unrestrained occupants

The driver age groups with the highest involvement in unrestraint crashes are 26–30 years (16.7 percent), 31–35 years (14.1 percent), and 21–25 years (13.6 percent). Overall, drivers within the 21–35 year age group accounted for 44.4 percent of all unrestraint-related crashes.



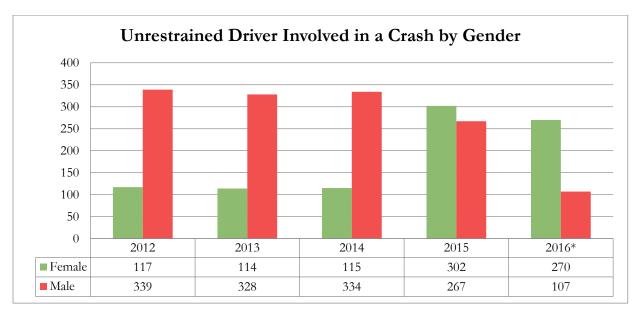
<sup>\* -</sup> MMUCC Compliance

The passenger age groups with the highest involvement in unrestraint crashes are 11–15 years (10.8 percent), 21–25 (11.6 percent), 16–20 years (10.3 percent), and 26–30 (10.5 percent). Overall, passengers within the 11–30 year age group accounted for 43.3 percent of all unrestraint-related crashes.



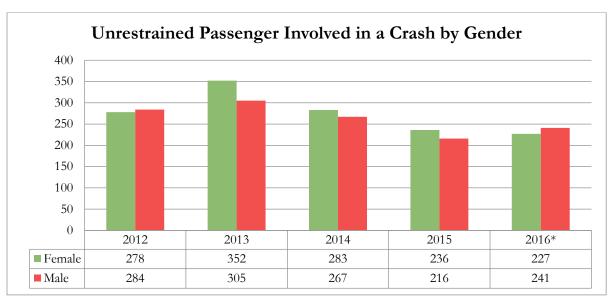
<sup>\* -</sup> MMUCC Compliance

From the summaries, male drivers comprise the highest group involved in unrestraint crashes with 60 percent compared to 40 percent for female drivers.



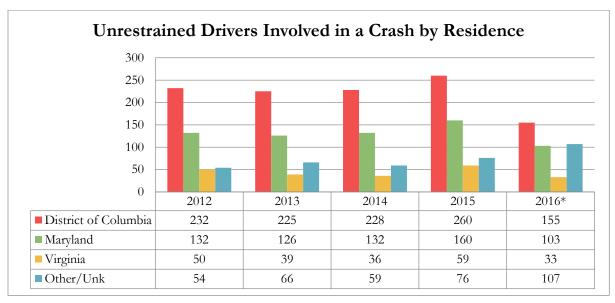
<sup>\* -</sup> MMUCC Compliance

For unrestrained passengers, the percentage of unrestrained female passengers involved in crashes is slightly higher than male passengers, at 51.2 and 48.8, respectively.



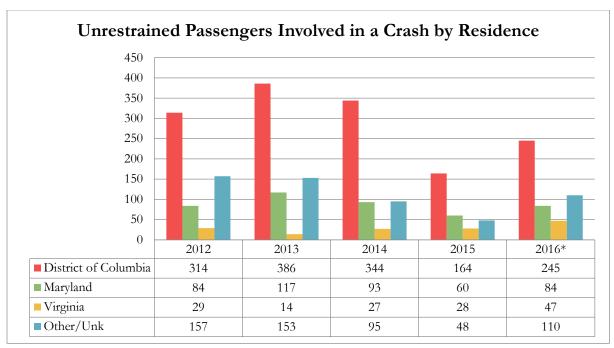
\* - MMUCC Compliance

The majority of drivers involved in unrestrained crashes live in the District (47.2 percent). A substantial portion of drivers originate from Maryland (28 percent) with a much smaller proportion from Virginia (9.3 percent).



<sup>\* -</sup> MMUCC Compliance

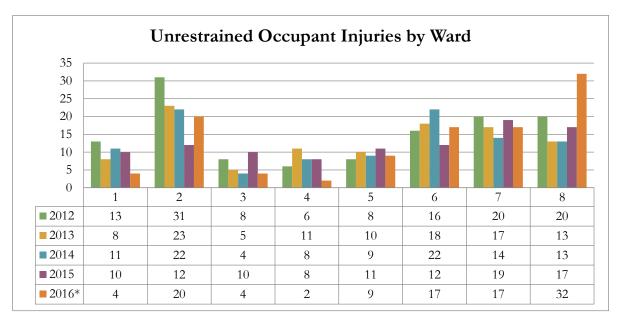
Similarly, the majority of passengers involved in unrestrained crashes live in the District (55.9 percent). A substantial portion of drivers originate from Maryland (16.9 percent) with a much smaller proportion from Virginia (5.6 percent).



<sup>\* -</sup> MMUCC Compliance

## Where they occur

The highest unrestraint-related injuries occurred in Ward 2, accounting for about 20.2 percent of all unrestraint-related injuries between 2012 and 2016. Wards 6, 7, and 8 had relatively even distributions of unrestraint-related injuries of 15.9 percent, 16.3 percent and 17.8 percent respectively.



<sup>\* -</sup> MMUCC Compliance

#### Strategies

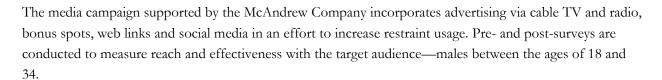
The HSO is committed and continues its efforts to increase the proper and consistent use of seat belts and child safety seats as a mitigating factor in reducing the severity of a crash. The District, with above 90 percent seat belt compliance rate, will strive to maintain and increase this rate where possible. One of the areas needing improvement in seat belt use is among commercial vehicles; the HSO will address this through additional enforcement efforts.

#### Click It or Ticket (CIOT)

The HSO is aware that the most effective strategy for achieving and maintaining a high seat belt-use rate is to conduct highly publicized, high-visibility enforcement of its primary seat belt laws and will continue to participate in national Click It or Ticket events. The District adopted the national enforcement and media campaign *Click It or Ticket* in 2002 and conducts media and enforcement activities in close

concert with NHTSA coordination. Click It or Ticket (CIOT) is the most successful seat belt enforcement campaign ever and helps increase the District's seat belt usage rate. During each mobilization, officers focus on motorists who fail to wear their seat belts—day and night. However, because nighttime passenger vehicle occupants are among the least likely to buckle up and are the most likely to die in crashes when unrestrained,

nighttime enforcement has become a priority of the CIOT mobilization.



The MPD performs high-visibility enforcement campaigns throughout the District and MPD conducts a zero tolerance enforcement of the District's seat belt laws. MPD also enforce the District's seat belt laws by regularly conducting saturated patrol in high-risk locations during daylight and nighttime hours. Enforcement increases during CIOT and Child Passenger Safety (CPS) week in the District and supports NHTSA dates in May/June and in September, respectively. In addition to the national campaigns, the District hosts at least two additional campaigns each year in January and March.

#### Occupant Protection for Children Program

The occupant protection for children is part of the occupant restraint program administered by the District CPS Coordinator with DDOT; grants fund the CPS activities. This will include training for first-time technicians and recertification for trained technicians. These new technicians and seasoned technicians alike will staff inspection stations throughout the District. Each inspection station will have at least one national Certified Child Passenger Safety Technician during official posted hours. The technicians will ensure that parents, grandparents, and caregivers learn how to properly install their child passenger restraints and will receive other safety information and brochures.

2 POINTS

In addition to this program the CPS coordinator also administers the District Safe Child Program. Research indicates that four of five car seats are installed incorrectly and that using the correct car seats and booster seats can reduce the risk of death in a crash by as much as 71 percent.

Project Safe-Child (<a href="https://ddot.dc.gov/page/car-safety-seat-program">https://ddot.dc.gov/page/car-safety-seat-program</a>) is a program for District of Columbia residents. The purpose is to provide infant, toddler, and booster seats to DC residents at a reduced rate and provide information and educational materials on properly buckling children.

Parents and caregivers can get free hands-on help from a Certified Child
Passenger Safety Technician and learn how to install their safety seats at any of
the District's inspection station and outreach locations and special events. See Appendix C.

The CPS coordinator partners with MPD to promote and plan these events, as well as events that support National Child Passenger Safety Week and focuses on both car seats and booster seats.

#### Certified Child Passenger Safety Technicians (CPS)

The District currently has more than 50 National Child Passenger Safety Certified Technicians; at least one at every CPS fitting station. In FY2018, the District will host two 32-hour National Child Passenger Safety Certification Training and provide one recertification training for police officers, fire and EMS departments, and health care and child care providers. These training classes will be held in April and accommodate a minimum of 20 students who will be trained by the CPS coordinator and two additional instructors.

See Appendix C for a complete list of current certified technicians' certifications, as well as to recruit new CPS Technicians. Of those technicians who did not re-certify, job change has been the biggest factor.

### **CPS Inspection Stations**

The District has at least one inspection station in every Ward. Technicians at these locations conduct at least three demonstrations/inspections per month on how to use child safety seats and boosters. See Appendix D for these locations.

The District works with Department of Health—Healthy Start Program, Bright Beginnings, and DC Developing Families to reach underserved District residents. The District estimates that approximately 35 percent of the District is underserved.

#### Observational Survey of Occupant Protection and Child Restraint Use

The HSO will also fund Howard University to conduct the National Occupant Protection Use Survey (NOPUS) of seat belt use by all front passengers (driver and front seat occupants) in all passenger vehicles, including small commercial vehicles (under 10,000 lbs). The survey will comply with observation methodology adopted by NHTSA for the District's 2018 seat belt survey.

The table below lists the strategies included in this HSP (FY2018) and these are also included in the District's SHSP, 2014.

#### **Enforcement Strategies**

Strategy 1. Continue to conduct Click It or Ticket (CIOT) Campaign accompanied by enforcement.

Strategy 2. Conduct enforcement at locations identified with high-injury crashes and unknown and/or low seat belt use.

#### **Education Strategies**

Strategy 2. Provide training to MPD officers on seat belt laws, applicability, seat belt use in crashes, and methods to improve seat belt crash reporting.

Strategy 3. Expand educational efforts to develop and distribute educational materials (e.g., brochures, flyers).

Strategy 5. Expand community programs.

- Quarterly child passenger safety workshops.
- Car seat inspection events.
- Increase number of District child passenger safety certified technicians.
- Continue booster seat program.

## FY2018 Performance Target

- Decrease the number of unrestrained fatalities by 33 percent from the 5-year average (2011–2015) of 3 to no more than the 5-year rolling average (2014-2018) of 2.
- Limit the expected increase in unrestrained injuries to 18 percent from the 5-year average (2011–2015) of 107 to no more than the 5-year rolling average (2014–2018) of 126 or a 23 percent decrease based on the 2018 actual projection.
- Maintain the observational seat belt use to over 94.1 percent.

#### Project Summary

Project Number	M1X-2018 Occupant Protection
Project Title	Occupant Enforcement – MPD
Project Goals/Description	Conduct overtime high-visibility seat belt enforcement activities regularly and during Click It or Ticket and Child Passenger Safety week. Enforcement will focus on locations where crash data and observational surveys indicate a low use rate.
Budget	\$170,440 Section 405b
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 2, Section 2.1

Project Number	PM 2018
Project Title	Paid Advertising—McAndrew Company
Project Goals/	Click It or Ticket It (CIOT). Influence attitudes and actions of audiences regarding
Description	seat belt usage not only for themselves but also for their passenger and reinforce the message that law enforcement strictly enforces DC seat belt laws.
	Child Passenger Safety Campaign (CPSC). Educate and increase awareness by parents/caregivers to use a child safety seat in the back of vehicles, restrain their child properly and in accordance with their size emphasizing the 4 Steps for Kids. Additionally, ensure all child seats are installed properly by promoting the "National Seat Check Saturday" at various locations in the District.
Budget	\$195,000 402
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 2, Section 3.1

Project Number	OP 2018
Project Title	Project Safe Child – DDOT CPS Coordinator
Project Goals/ Description	Training, purchase of car seats, education, outreach to community, materials/supplies.
Budget	\$100,000 Section 402
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 2, Section 6.2 and 7.2

Project Number	OP 2018
Project Title	Project Safe Child—DDOT CPS Coordinator
Project Goals/ Description	CPS Coordinator salary and benefits
Budget	\$200,000 MOE
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 2, Section 6.2 and 7.2

Project Number	OP 2018
Project Title	Occupant Protection Survey 2018
Project Goals/ Description	Conduct annual National Occupant Protection User Survey (NOPUS) using NHTSA standards and provide public information through a national and state report, by the Howard University.
Budget	\$110,000 Survey; Section 402,
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 2, Section 7.

**Table 6: Occupant Protection Program Area - Budget Summary** 

Project Number	Project Title	Budget	Budget Source
M1X-2018	Metropolitan Police Department	\$170,440	Section 405b
PM 2018	Paid Advertising	\$195,000	Section 402
OP 2018	Project Safe Child for DDOT	\$100,000	Section 402
OP 2018	OP Survey 2018	\$110,000	Section 402
402 Total		\$405,000	
405b Total		\$170,440	
TOTAL		\$575,440	

## Impaired Driving Program Area

#### **Overview**

Consumption of alcohol and drugs continues to be prominent factor in serious injury crashes in the District. The number of drivers under the influence of drugs or/and a combination of both drugs and alcohol is increasing, making this a very serious, complex problem.

Despite the mounting research evidence that driving under the influence of drugs (other than alcohol) is common, there is minimal public awareness of this fact, and drugged drivers are less frequently detected, prosecuted, or referred to treatment when compared to drunk drivers.

The legal drinking age in the District of Columbia is 21, and the Metropolitan Police Department enforces the following three very distinct drinking and driving laws.

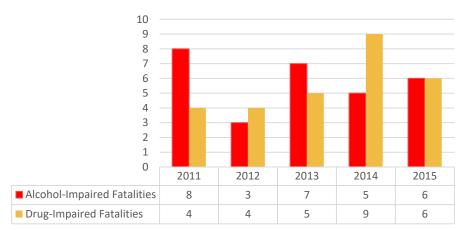
- **Driving while intoxicated (DWI)**. Applies to a person having a statutorily prohibited blood alcohol concentration (BAC) of .08 or higher. (In April 1999, the District of Columbia adopted the .08 percent BAC standard for driving while intoxicated.) The driver can be convicted in court based solely on the breath, blood or urine results without any structured field sobriety test.
- Driving under the influence (DUI). Applies to a person having a blood alcohol concentration of .07 percent or lower. Under DC code, a driver can be charged with a DUI offense if, in addition to a BAC reading, the officer has other signs of impairment from a structured field sobriety test and from observations of the suspect's driving behavior.
- Under Age Drinking. Persons under the age of 21 cannot purchase, consume, or possess any alcoholic
  beverages of any kind. If these drivers are found to be operating a motor vehicle with any measurable
  amount of alcohol, they will be placed under arrest and charged with DWI—Driving While Intoxicated.

In accordance with the FAST Act, the District of Columbia is rated as a Low Range State and qualifies for 405 funding to continue to support the its efforts to reduce drinking and driving.

#### Impaired-Related Data Trends

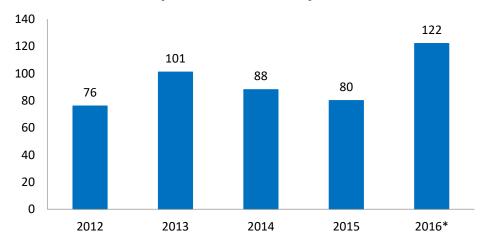
Driver impairment (i.e., the use of alcohol and/or drugs) continues to be a major cause in traffic-related crashes in the District. Alcohol-impaired fatalities have fluctuated with the highest number of fatalities as 8 occurring in 2011 and the lowest as 3 occurring in 2012. Preliminary data indicated that there were 6 alcohol-related fatalities in 2016. Drug-impaired fatalities have also fluctuated from a high of 9 in 2014 to a low of 4 in 2011 and 2012, as the figure below shows.





Between 2012 and 2016, a total of 467 impaired-related injuries (alcohol and drugs) represented about 4.6 percent of all injuries (10,132) resulting in an average of 94 injuries per year. Impaired-related injuries accounted for approximately 4 percent of all injuries in 2016 (122 out of 3,094), a 52.5 percent increase from 2015.

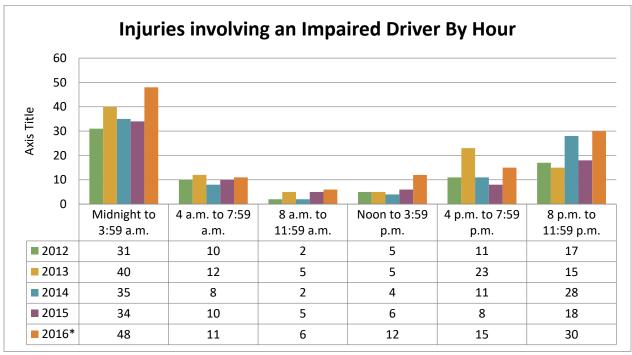
# **Impaired-related Injuries**



<sup>\* -</sup> MMUCC Compliance

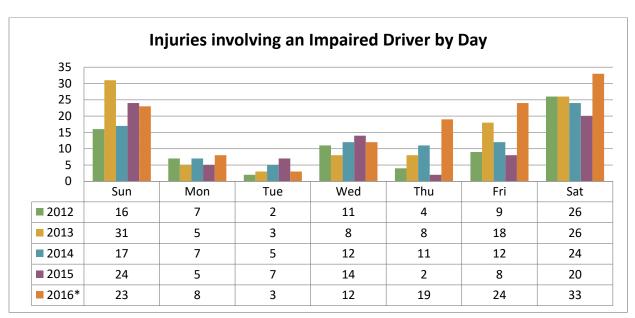
## When they occur

Between 2012 and 2016, 40.3 percent of all impaired-driving related injuries occurred between midnight and 3:59 a.m., and 23.1 percent occurred between 8 p.m. and 11:59 p.m.



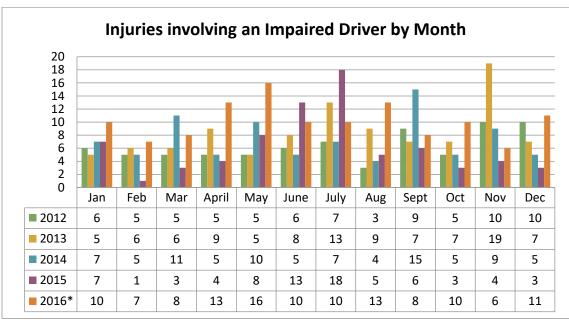
<sup>\* -</sup> MMUCC Compliance

The days of the week with the highest frequencies of impaired-related injuries are Saturdays and Sundays with 27.8 percent and 23.9 percent, respectively. About 15.3 percent occur on Fridays.



<sup>\* -</sup> MMUCC Compliance

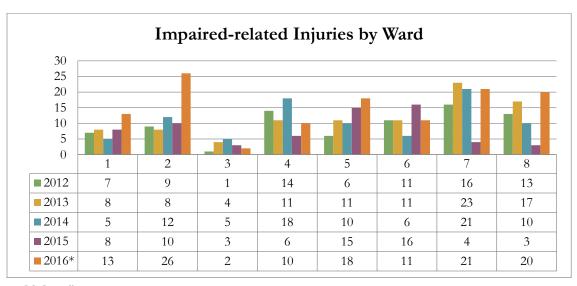
The months of the year with the highest frequencies of impaired-related injuries are May to September and November. Checkforce Strikepoint campiagns run the months of January, February—Super Bowl, March—St Patricks Day, May—Cinco de Mayo, August, October, November, and December,



<sup>\* -</sup> MMUCC Compliance

## Where impaired-related injuries occur

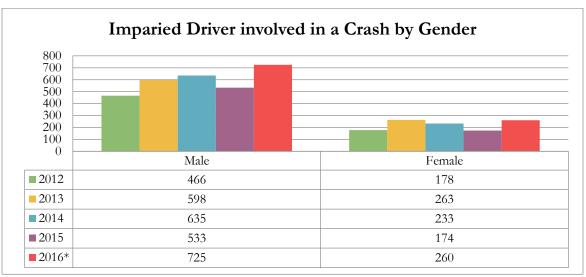
The chart below presents the distribution of crashes by Ward. The highest impaired-related injuries occurred in Ward 7, accounting for about 19.2 percent of all impaired-related injuries between 2012 and 2016. Wards 2, 4, 5, 6, and 8 had relatively even distributions of impaired-related injuries ranging from a low of 12.4 percent in Ward 6 to a high of 14.7 percent in Ward 2. Ward 3 had the least number of impaired-related injuries at 3.4 percent, followed by Ward 1 at 9.3 percent.



<sup>\* -</sup> MMUCC Compliance

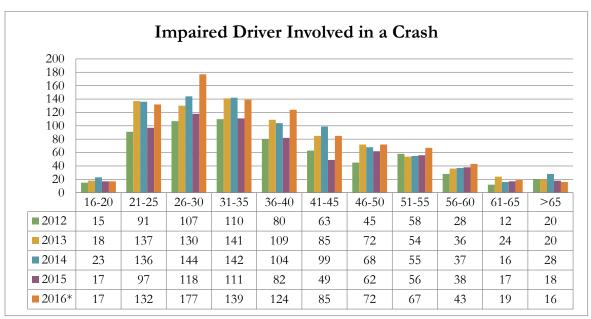
## Who drives impaired

The chart below provides summaries of impaired-driving crashes by gender. The summaries reported male drivers as highest group involved in impaired-related crashes with an overwhelming majority of 72.7 percent (27.3 percent for female drivers).



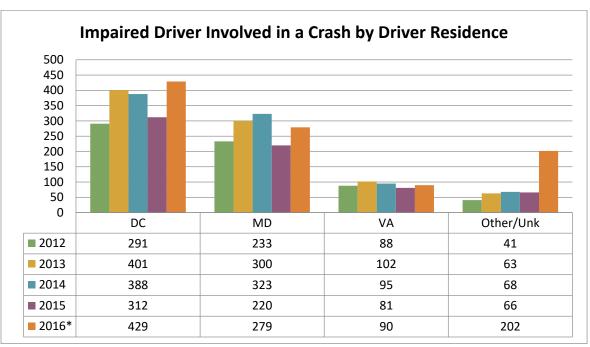
<sup>\* -</sup> MMUCC Compliance

The age groups with the highest involvement in impaired-related crashes are 26–30 years (17.5 percent), 31–35 years (16.6 percent), and 21–25 years (15.4 percent). Overall, drivers within the 21–35 year age group accounted for 49.5 percent of all impaired-related crashes.



<sup>\* -</sup> MMUCC Compliance

The majority of drivers involved in impaired-related crashes live in the District (44.7 percent). A significant portion of drivers originate from Maryland (33.3 percent) with a much smaller proportion from Virginia (11.2 percent).



<sup>\* -</sup> MMUCC Compliance

#### FY2018 Performance Target

- Maintain the number of alcohol-related fatalities to no more than the 5-year average (2011–2015) of 6 or a 33 percent decreased based on the 2018 actual projection.
- Limit the expected increase in impaired-related to a 38 percent from the 5-year average (2011–2015) of 88 to no more than the 5-year rolling average (2014–2018) of 121 or a 42 percent decrease based on the 2018 actual projection.

### **Program Strategies**

The HSO is committed to removing impaired drivers, pedestrians, bicyclists, and motorcyclist from the District's roadways and will continue to work on the enforcement and education strategies outlined in the 2014 SHSP. The HSO Coordinators planed and implemented the following agencies to work together in getting these high-risk drivers off the District roadways.

The HSO has partnered with Metropolitan Police Department (MPD) to enforce the District's DUI laws by regularly conducting saturated patrol and publicized checkpoints and using specially trained officers and equipment in high-risk locations; both methodologies are found in the NHTSA publication *Countermeasures That Work: A Highway Safety Countermeasure Guide for State Highway Safety Offices, 8th Edition, 2015.* This effort

would include uniformed law enforcement officers "saturating" a high DUI-related crash area and engaging the driving public by pulling over as many traffic violators as possible to serve as a deterrent to impaired driving. The HSO and other MPD sources provide these high-risk locations. As an additional deterrent, the HSO and MPD have also invested in building an Impaired Driving Mobilizing Processing Unit that is fully equipped with Intoxilyzer, breath-testing instruments, fingerprint equipment, holding cell, officers' workstations, and all other equipment and supplies necessary for it to be a fully functional DUI processing center. Using this van will also increase the efficiency of onsite DUI processing, checkpoints and, as a result, an increase in DUI arrests. This hybrid approach, along with the associated national crackdowns and mobilization, will provide continuous direct and general deterrence in impaired driving.

The District will also continue to participate in the National Enforcement Crackdown—where the primary message is *Drive Sober or Get Pulled Over*—in the summer months and holidays, as well as in the Checkpoint Strikeforce Campaign (<a href="http://www.checkpointstrikeforce.net/">http://www.checkpointstrikeforce.net/</a>). This is a research-based, multi-State, zero-tolerance initiative conducted jointly with Maryland and Virginia. The media campaign by The McAndrew Company operates in conjunction with regional law enforcement waves aimed at getting impaired drivers off the roads and educating the public about the dangers and consequences of drunk drivers. Additional enforcement in deterring excessive drink is the District's Cops-in-Shops program, focusing on underage drinking, ABRA compliance checks, and beverage service policies for all ABC license holders.

The HSO is aware that for the enforcement efforts to be effective there must be proper prosecution and adjudication of DUI arrests. Therefore, the agency is committed to continue funding for a dedicated traffic-safety resource prosecutor (TSRP) position, and a DUI Team comprised of four DUI prosecutors and a paralegal with the Office of the Attorney General (OAG). OAG works with law enforcement, judicial communities and policymakers to take a tough stance on impaired driving offences to protect the citizens of the District of Columbia. Comprehensive training arms law enforcement officers and prosecutors with the tools they need to better conduct their investigations and effectively present evidence in court to ultimately convict and deter impaired drivers. The team also meets and discusses drug-impaired driving cases, marijuana impairment, and discusses the revisions of legislation on marijuana per se levels and how to effectively prosecute marijuana-impaired cases.

With the increase in drug use and the legalization of recreational marijuana in the District, there is also a need for forensic toxicology to support these cases. The HSO also partners with the Office of the Chief Medical Examiner (OCME) and with two toxicologists who perform the forensic examination for MPD and operate the only toxicology laboratory in the District. OCME also has a new screening program with upgraded equipment and testing capabilities that will allow it to screen for the presence of drugs and chemicals known to cause impairment and ensure proper analysis of evidence collected from drug-impaired drivers in a timely and professional manner.

The HSO will continue to partner with the Washington Regional Alcohol Program (WRAP) and provide communication and outreach strategies to the public on the dangers of driving while impaired. These efforts include education programs for high schools, community groups, and business. This program also provides a

no-cost taxicab ride designed to prevent drunk driving during the SoberRide campaigns (http://www.wrap.org/soberride/).

This group meets monthly basis for DUI Enforcement meetings hosted by the Traffic Safety Resource Prosecutor (TSRP). At these meetings, the TSRP keeps attendees abreast of legal issues, courtroom ruling trends, discovery matters, and training opportunities. Furthermore, attendees receive updates by the police agency representatives on the occurrences and enforcement measures in their agency. These meetings also allow for creating new training programs, enforcement initiatives, and intra-agency coordination.

The District, through the efforts of the Vision Zero program, has teamed with George Washington University Hospital to replicate a proven protocol to increase collection of blood evidence used to adjudicate impaired drivers throughout all District of Columbia trauma centers. Drunk and drugged driving incidents represent a significant portion of District traffic fatalities, yet MPD officers face difficulties when obtaining blood evidence in suspected cases of impaired driving. Plans are to replicate the GWU Hospital Impaired Operator Blood Collection process throughout all District hospitals to more effectively prevent impaired driving.

The following table lists strategies included in this HSP (FY2018) and that are also included in the District's SHSP, 2014.

### **Enforcement Strategies**

Strategy 1: Reduce excessive drinking and underage drinking:

• Continue and expand ID compliance checks with establishments selling alcohol.

Strategy 2: Enact beverage service policy:

• Expand monitoring/enforcement of beverage service policies for alcohol servers and retailer.

Strategy 4: Prosecute DUI offenders:

 Ensure all enforcement agencies using breath-test instruments provide updated training to OAG staff prior to system going online and on a regular basis for all new staff.

Strategy 5: Legislative actions:

- Promote legislation to require civil asset forfeiture of automobile impoundment after multiple DUI convictions.
- Publicize region-wide DC's intent for strong enforcement and prosecution of DUI offenses (also listed under Education).

Strategy 6: Enhance judicial process that identifies and effectively disarms offenders with multiple DUIs:

• Work with OAG, DCSC, DMV, and MPD to institute an electronic system for easily obtaining DUI past-conviction data for DC-prosecuted cases.

Strategy 10:

 Continue to work with hospitals to enable easier consent to blood draws and access to medical treatment records. Strategy 12: Prosecute, impose sanctions on, and treat DUI offenders:

- Continue to screen all DUI offenders for substance abuse.
- Review/update legislation to effectively target high BACs and repeat offenders in accordance with best practices.

Strategy 15: Provide continuing support to the Traffic Safety Resource Prosecutor to:

- Prosecute criminal traffic violations with particular emphasis on DUI.
- Review/develop DUI-related legislation.
- Conduct training.
- Improve interagency communications.

Strategy 21: Traffic Safety Resource Prosecutor (TSRP):

• Continue TSRP activities in DUI (court room/litigation support, discovery, community outreach training, etc.).

### **Project Summary**

Project Number	M6OT 2018—Impaired Driving
Project Title	Alcohol Enforcement—MPD
Project Goals/Description	Highly visibility enforcement used to reduce impaired-driving fatalities and serious injuries. Enforcement conducted is during the times and locations where the data indicate high risk for impaired driving behaviors. Enforcement will also be coordinated with the national mobilizations and Checkpoint Strikeforce campaigns throughout the District.
Budget	\$135,000, Section 402; \$364,000, 405d;
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 2.1 and 2.2

Project Number	M6OT 2018—Impaired Driving – <i>Cops in Shops</i>
Project Title	Alcohol Enforcement—MPD
Project	"Cops in Shops" program allows officers to work undercover at retail locations to
Goals/Description	help catch underage patrons trying to purchase alcohol or adults buying alcohol for
_	minors. Typically, officers work undercover and will either be inside or outside
	liquor stores watching for underage buyers or adults purchasing alcohol for
	underage drinkers.
Budget	\$50,000; Section 405d
Evidence of	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 2.2
Effectiveness	

Project Number	M6X 2018; FDLPEM 2018 Impaired Driving Media
Project Title	Paid Advertising—Impaired Driving Campaign
Project Goals/Description	Build an awareness of Impaired Driving to reduce the number of alcohol-related crashes. Increase belief of arrest for drinking and driving. Increase the perception that law enforcement is out with patrols and checkpoints. Target audience includes male drivers 18 to 44 years old
Budget	\$400,000 Section 405d
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 5.2

Project Number	M6OT 2018—Impaired Driving;
Project Title	Office of the Attorney General—DUI
Project Goals/Description	Project funds the Serious Impaired-Driving Offender Program. Each year, the number of alcohol-related offenses, particularly DWI/DUI, increases. As a result of this increased number of cases, there is a tremendous need for DUI attorneys to manage the caseload.
Budget	\$743,166; Section 405d
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 3.1 and 2.3

Project Number	M6OT 2018—Impaired Driving
Project Title	Office of the Attorney General—TRSP
Project Goals/Description	Program funds the Serious Impaired Driving Offender Program by prosecuting impaired-driving offenses and working with other agencies through the TRSP.
Budget	\$187,500; Section 405d
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 3.1 and 2.3

Project Number	FDLBAC—Impaired Driving		
Project Title	Office of the Chief Medical Examiner—Chemical Testing		
Project Goals/Description	OCME seeks two full-time equivalent positions (DUI toxicologists), training, equipment, and supplies. This will supplement DUID enforcement and provide comprehensive DUI and DUID testing of District drivers suspected impaired driving while also reducing turnaround times and overall backlog of casework.		
Budget	\$282,126; Section 405d		
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 2.3		

Project Number	M6OT 2018—Impaired Driving
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Project Title	Washington Regional Alcohol Program (WRAP)		
Project	Increase knowledge and awareness of the dangers of alcohol by promoting healthy		
Goals/Description	decisions through direct educational programs at local public and private high		
	schools and with community groups in the District of Columbia.		
Budget	\$129,800, Section 405d		
Evidence of	Countermeasures That Work, 8th Edition, 2015, Chapter 1, Section 5.2 and 5.4		
Effectiveness			

Project Title	George Washington University
Project Goals/Description	Replicate the GWU Hospital Impaired Operator Blood Collection process throughout DC hospitals to more effectively prevent impaired driving.
Budget	\$169,000, Vision Zero Funds; MOE Funds

**Table 7: Impaired Driving Program Area - Budget Summary** 

Project Number	Project Title	Budget	Budget Source
M6OT 2018	Impaired Enforcement	\$414,000	Section 405d
		\$135,000	Section 402
M6X 2018 FDLPEM 2018	Paid Advertising	\$400,000	Section 405d
M6OT 2018	Office of the Attorney General	\$187,500	Section 405d
MIOOT 2016		\$743,166	Section 405d
FDLBAC	Office of the Chief Medical Examiner	\$282,126	Section 405d
M6OT 2018	Washington Regional Alcohol Program	\$129,800	Section 405d
405d Total		\$2,156,592	
402 Total		\$135,000	
Total All Funds		\$2,291,592	

	Washington Regional Alcohol Program	\$129,800	Section 405d
	Impaired Driving Media	\$150,000	Section 405d
405d Total		\$2,957,460	
402 Total		\$135,000	
Total All Funds		\$3,092,460	

## **Aggressive Driving**

#### **Overview**

Aggressive driving usually involves speeding, as well as other factors, such as following too closely or improper lane change. Speeding is the primary contributing circumstance for traffic-related fatalities and injuries in the District.

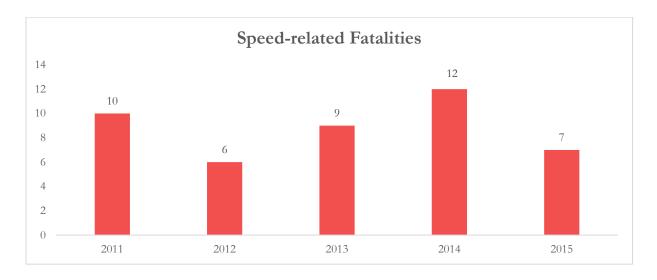
The following fines for speeding in DC are based on the number of miles per hour over the posted speed limit.

Violation	Fine
Speeding 1–10 mph over limit	\$50
Speeding 11–15 mph over limit	\$100
Speeding 16–20 mph over limit	\$150
Speeding 21–25 mph over limit	\$200
Speeding 26+ mph over limit	\$300

### Speeding-related Data Trends

While FARS data reports only on speeding-related fatalities, aggressive driving involves speeding, as well as factors such as driving too fast for conditions; exceeding posted speed limit; following too closely; improper passing; operating motor vehicle in erratic, reckless, careless, negligent or aggressive manner; ran red light and ran STOP sign. The following injury charts includes these additional factors.

Between 2011 and 2015, speeding-related fatalities accounted for 41.3 percent of all traffic fatalities (40.8 of 108). In 2015, speeding-related fatalities accounted for 30.4 percent (7 of 23) of all traffic-related fatalities. Preliminary data indicated that in 2016 there were nine speeding-related fatalities.



Between 2012 and 2016, there was a total of 1,356 aggressive driving-related injuries representing about 13.4 percent of all injuries (10,132) resulting in an average of 271 injuries per year. Aggressive driving-related injuries accounted for 6.1 percent of all injuries in 2016 (190 out of 3,094)—a 35.8 percent decrease in 2015.

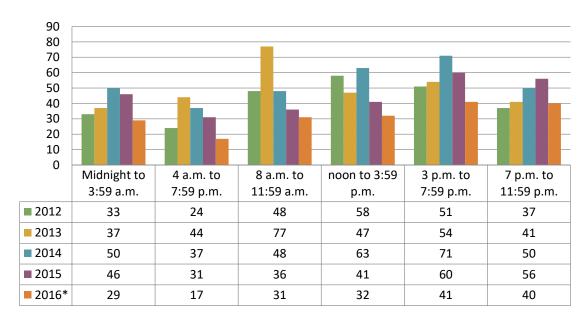


<sup>\* -</sup> MMUCC Compliance

## When they occur

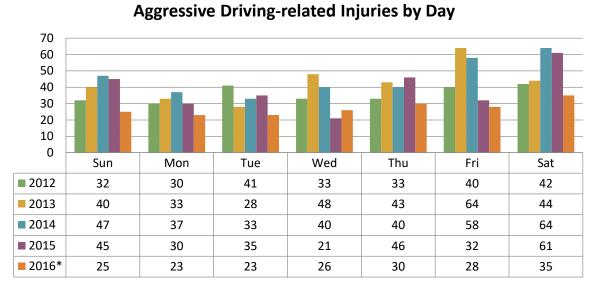
The highest frequencies of aggressive driving-related injuries occur between the hours of 3 p.m. to 7:59 p.m. (20.8 percent), noon to 3:59 p.m. (18.1 percent), and 8 a.m. to 11:59 a.m. (18 percent).

# **Aggressive Driving-related Injuries by Time of Day**



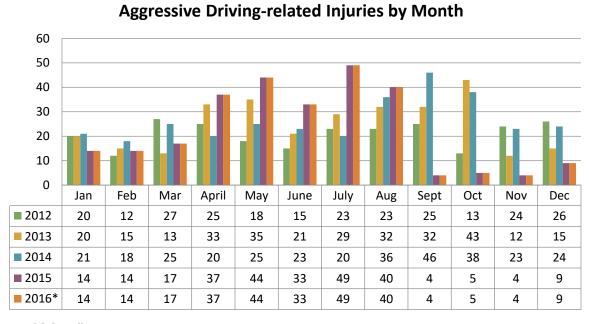
<sup>\* -</sup> MMUCC Compliance

Saturdays and Fridays are the days of the week with the highest frequencies of aggressive driving-related injuries with 18.5 percent and 16.7 percent, respectively.



#### \* - MMUCC Compliance

The months of the year with the highest frequencies of aggressive driving-related injuries are July (10.9 percent) and August (11.4 percent). The Smooth Operator program runs in the District in June, July, August, and September.



<sup>\* -</sup> MMUCC Compliance

## Who Drives Aggressively

The following chart presents summaries of aggressive driving-related crashes by gender. The summaries report male drivers as largest group involved aggressive driving-related crashes with 65.3 percent (34.7 percent for female drivers).

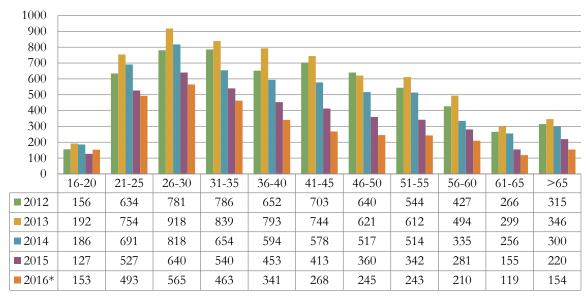




#### \* - MMUCC Compliance

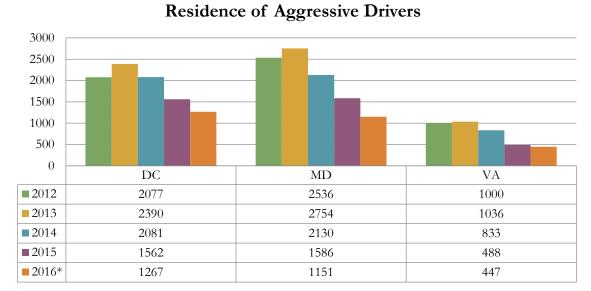
The age groups with the highest involvement in aggressive driving-related crashes are 26–30 years (14.7 percent), 31–35 years (13 percent) and 21–25 years (12.3 percent). Overall, drivers in the 21–35 year age group accounted for 40 percent of all aggressive driving-related crashes.

# Ages of an Aggressive Driver



<sup>\* -</sup> MMUCC Compliance

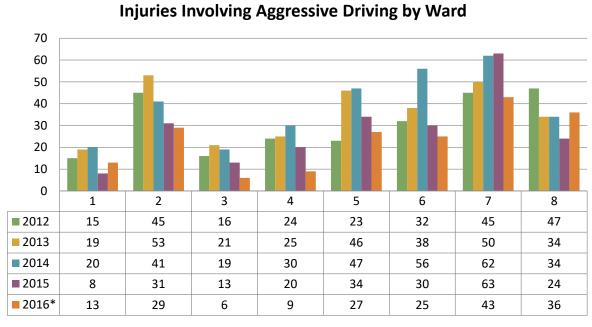
The majority of drivers involved in aggressive driving-related crashes reside in Maryland (43.5 percent), followed by the District (40.2 percent) and Virginia (16.3 percent).



<sup>\* -</sup> MMUCC Compliance

## Where they occur

The following chart presents distribution of crashes by Ward. The highest aggressive driving-related injuries occurred in Ward 7 (21 percent) followed by Ward 2 (15.9 percent), Ward 6 (14.4 percent), Ward 5 (14.1 percent), and Ward 8 (14 percent). Ward 3 and Ward 1 had the least number of injuries at 6 percent each.



<sup>\* -</sup> MMUCC Compliance

### FY2018 Performance Target

- Limit the expected increase of speeding-related fatalities to 11 percent from the 5-year average (2011–2015) of 9 to no more than the 5-year rolling average (2014–2018) of 10 or 10 percent decrease based on the 2018 actual projection.
- Reduce the number of aggressive-related injuries by 22 percent from the 5-year average (2011–2015) of 290 to no more than the 5-year rolling average (2014–2018) of 225

#### Strategies

The HSO, in partnership with MPD, remains committed to using enforcement and education to address unsafe speed on the District's roadways. Particular emphasis will continue to monitor driving speeds, enforce posted speed limits, and identify other unsafe driving behaviors in known problem locations areas with a higher incidence of crashes, as well as locations identified from the Data-Driven Approaches to Crime and Traffic Safety (DDACTS).

The District will also continue to maintain its partnership with Maryland public safety officials and law enforcement through the Smooth Operator program (<a href="http://smoothoperatorprogram.com/">http://smoothoperatorprogram.com/</a>). This program is a model for a coordinated, intra- and interstate program designed to combat aggressive driving problems and find short- and long-term solutions. It provides education, information, and solutions for the problem of aggressive driving. Smooth Operator describes aggressive driving as a combination of unsafe and unlawful actions that demonstrate a conscious and willful disregard for safety.

The Smooth Operator campaign works to influence audience attitudes toward aggressive-driving behaviors and their destructive consequences. Additionally, it promotes positive behaviors that will help improve the safety and well-being of the community. Paid media provided by the McAndrew Company will target men ages 18–34 as well as high risk takers; media will run in conjunction with regionally coordinated law enforcement waves. The campaign may use a combination of radio, cable TV, out-of-home advertising, and digital/social media.

The District, through the Vison Zero program, works with the Office of Risk Management (ORM) to implement a District-wide driver safety program, including online training and behind-the-wheel training for high-risk drivers. Motor vehicle incidents involving District Government fleet have been increasing in frequency. With nearly 5,000 licensed drivers operating vehicles on a daily basis, this ORM program will ensure professional drivers in District Government are among the safest drivers on the road.

The table below lists the strategies included in this HSP (FY2018); they are also included in the District's SHSP, 2014.

### **Enforcement Strategies**

Strategy 1. High-Visibility Enforcement:

 Use either expanded regular patrols or designed aggressive driving patrols to target selected high-crash or high-violation geographical areas (refer to latest DDOT speed information).
 Officers focus on drivers who commit common aggressive-driving actions such as speeding, following too closely, and running red lights. Enforcement is widely publicized.

Strategy 5. Investigate and determine the use of new technologies (examples):

- Laser speed-measurement equipment (provide more accurate and reliable evidence of speeding).
- Stationary LIDAR.
  - Evaluate pilot program in a selected high-speed corridor.

### Education Strategies

Strategy 1. Conduct educational and public information outreach campaigns:

• Educate roadway users on the dangers of aggressive driving and rules of the roads (e.g., Smooth Operator campaign).

## **Project Summaries**

Project Number	PT 2018			
Project Title	Police Traffic Services/Aggressive Driving—MPD			
Project	Police Traffic Services (PTS) focuses on speeding and aggressive driving and other			
Goals/Description	moving violations. Drivers should know that MPD has a zero tolerance policy for			
Goals/ Description	not complying with the traffic laws in the District.			
Budget	\$424,800 Section 402			
Evidence of	Countermeasures That Work, 8th Edition, 2015, Chapter 3, Section 2.2			
Effectiveness				

Project Number	M6X 2018		
Project Title	Paid Advertising—Smooth Operator		
Project Goal/	Influence audience attitudes and action toward aggressive-driving behaviors and		
Description	their destructive consequences to cause and sustain positive behaviors that help to improve safety and well-being of our community. Target audiences are drivers		
	between the ages of 18 to 44, with emphasis on male drivers ages 18 to 24.		
Budget	\$150,000 Section 402		
Evidence of	Countermeasures That Work, 8th Edition, 2015, Chapter 3, Section 4.1		
Effectiveness			

Project Title	District of Columbia Office of Risk Management (ORM)	
Project Goal/	District-wide driver safety program including online training and behind-the-	
Description	wheel training for high-risk drivers.	
Budget	\$130,000; Vision Zero; MOE Funds	

**Table 8: Aggressive Driving Program Area - Budget Summary** 

Project Number	Project Title	Budget	Budget Source
PT 2018	Metropolitan Police Department	\$424,800	Section 402
M6X 2018	Paid Advertising – Smooth Operator	\$150,000	Section 402
402 Total		\$574,800	
Total All Funds		\$574,800	

## Pedestrians and Bicyclists

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#### **Overview**

offenses.\*

Pedestrians and bicyclists are among our most vulnerable roadway users and they suffer more serious injuries than vehicle occupants when involved in a crash with a motor vehicle. The District has placed pedestrian enforcement efforts in areas identified as particularly dangerous. These efforts emphasize education and safety tips to increase community member awareness.

The Council of the District of Columbia enacted the Pedestrian Safety Amendment of 2005 on March 16, 2005. The law has increased the civil infractions and fines for pedestrians who violate safety measures. Fines range from \$10 to \$50.

DC Code Title 50, Sections 2201 through 2221 and DCMR Title 18, detail how a driver should operate a motor vehicle on the streets of the District of Columbia:

•	Failure to STOP and give right-of-way to a pedestrian who has begun crossing on the WALK signal (signalized intersection).	\$75 and 3 points
•	Failure to STOP and give right-of-way to a pedestrian crossing the roadway within any marked crosswalk or unmarked crosswalk at an intersection (unsignalized crosswalk).	\$250 and 3 points
•	Overtaking a stopped vehicle from the rear at a marked crosswalk or at an unmarked crosswalk to permit a pedestrian to cross the roadway.	\$250 and 3 points
•	Failure to give right-of-way to a pedestrian on a sidewalk (e.g., alleys and parking lots).	\$250 and 3 points
•	Colliding with a pedestrian while committing any of the above-listed	\$500 and 6 points

<sup>\*</sup> Criminal charges are possible. Penalty for colliding with a pedestrian leads to a double fine.

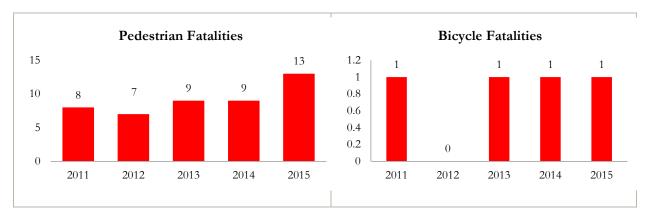
When travelling on city streets, cyclists should follow the same rules of the road as motorized vehicles. This means stopping at STOP signs; obeying traffic signals and lane markings; and using hand signals to let others know your intention to stop or turn. Furthermore, cyclists must to be aware of their surroundings.

In accordance with the FAST Act, the District of Columbia is qualifies for 405(h) incentive grant for Nonmotorized safety by having exceeded 15 percent of the total annual crash fatalities in 2015 (14 out of 23; 61 percent).

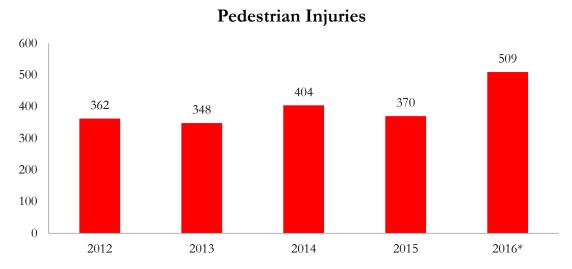
\$500 and 6 points

#### Pedestrian and Bicycle Data Trends

Between 2011 and 2015, 46 pedestrian fatalities and 4 bicycle-related fatalities represented 42.6 percent and 3.7 percent of all traffic fatalities (108), respectively. Preliminary data indicate that nine pedestrians and one bicyclist were involved 2016

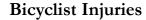


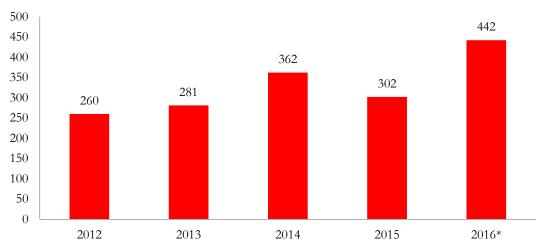
Between 2012 and 2016, a total of 1,993 pedestrian injuries represented about 19.8 percent of all injuries (10,132) and resulting in an average of 398 injuries per year. Pedestrian injuries accounted for approximately 16.4 percent of all injuries in 2016 (509 out of 3,094); a 37.5 percent increase from 2015.



\* - MMUCC Compliance

Within the same time period, a total of 1,647 bicyclist injuries represented about 16.3 percent of all injuries (10,132), resulted in an average of 329 injuries per year. Bicyclist injuries accounted for approximately 14.3 percent of all injuries in 2016 (442 out of 3,094), a 46.3 percent increase from 2015.



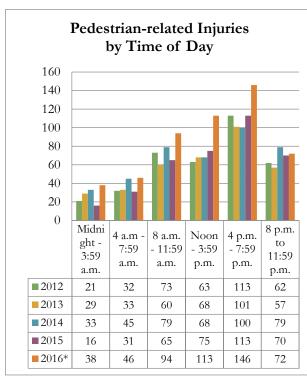


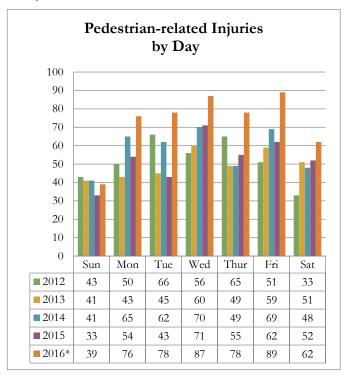
\* - MMUCC Compliance

#### When Pedestrian-Related Crashes Occur

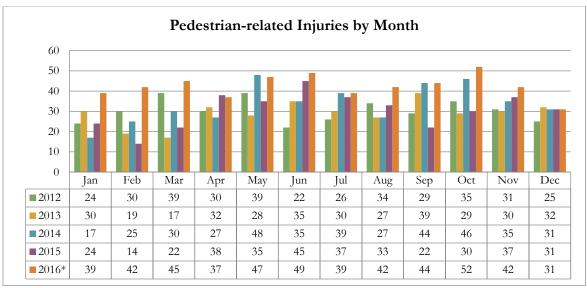
An analysis of traffic crash data for the years 2012–2016 revealed the majority of pedestrian injuries occurred between 4 p.m. to 7:59 p.m. (28.7 percent), on Wednesdays (17.2 percent) and Fridays (16.5 percent), and during the months of May (9.9 percent) and October (9.6 percent).

#### When Pedestrian Injuries Occur





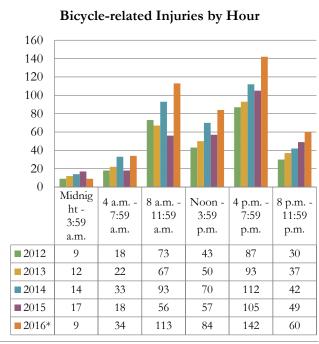
<sup>\* -</sup> MMUCC Compliance



<sup>\* -</sup> MMUCC Compliance

The majority of bicyclist-related injuries occurred between 4 p.m. to 7:59 p.m. (32.7 percent), during weekdays (Monday–Friday) and during the months of May and September, which together account for almost 69 percent of all bicyclist injuries.

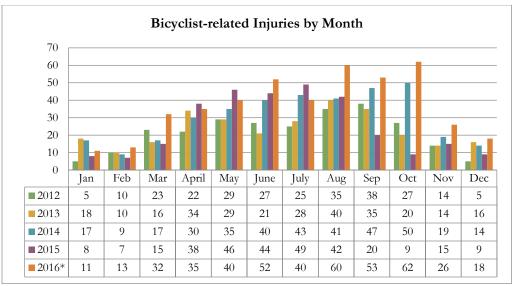
#### When Bicyclist-related Injuries Occur



#### Sun Mon Tue Wed Thur Fri Sat 013 014 ■ 2015 016\*

Bicycle-related Injuries by Day

<sup>\* -</sup> MMUCC Compliance

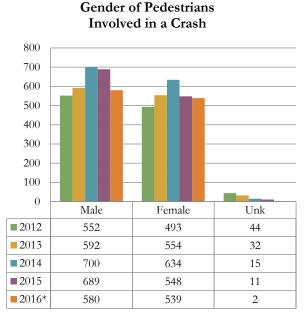


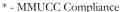
<sup>\* -</sup> MMUCC Compliance

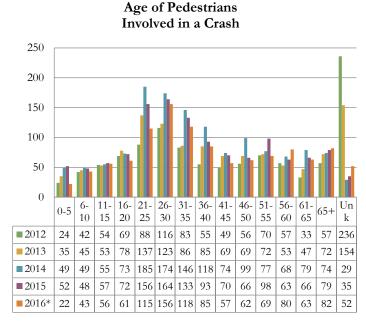
#### Who is Involved in a Pedestrian-related Crash

The data revealed that male pedestrians (52 percent) are slightly more involved in crashes than female pedestrians (46 percent). The age groups with the highest involvement in pedestrian crashes are 26–30 years (12.2 percent), 21–25 years (11.4 percent), and 31–35 years (9.5 percent). Overall, drivers within the 21–35 year age group accounted for 33.1 percent of pedestrian crashes.

#### Those involved in a pederstrian-related crash

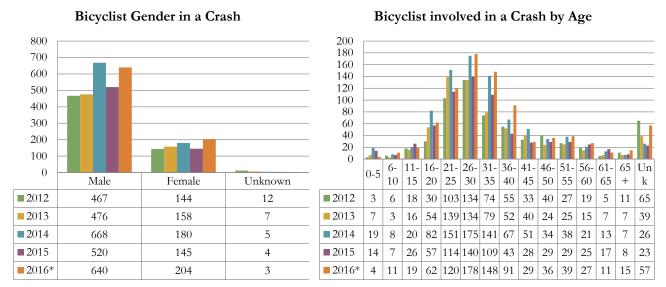






About 76.3 percent of all bicyclist involved in crashes are males. The age groups with the highest involvement in bicyclist crashes are 26–30 years (20.9 percent), 21–25 years (17.3 percent), and 31–35 years (15.2 percent). Overall, drivers within the 21–35 year age group accounted for 53.4 percent of all bicyclist crashes.

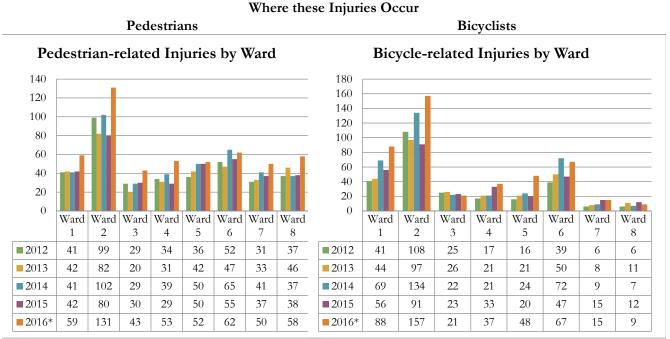
#### Those Involved in a Bicycle-related Crash



<sup>\* -</sup> MMUCC Compliance

#### Where Pedestrian- and Bicycle-Related Crashes Occur

Both pedestrian- and bicyclist-related injury crashes occurred most frequently in Wards 1, 2, and 6.



<sup>\* -</sup> MMUCC Compliance

#### FY2018 Performance Target

- Limit the expected increase of pedestrian-related fatalities by 22 percent from the 5-year average (2011–2015) of 9 to no more than the 5-year rolling average (2014–2018) of 11 or an 8 percent decrease based on the 2018 actual projection.
- Maintain the number of pedestrian-related injuries to no more than 509 (2016) by December 2018.
- Maintain the number of bicyclist-related fatalities to no more than the 5-year average (2011–2015) of 1 by December 2018.
- Maintain the number of bicyclist-related injuries to no more than 442 (2016) by December 2018.

#### Strategies

The District is the nation's third worst traffic-congested area, is the eighth most popular tourist destination, and recognizes the need for roadway design that accommodates pedestrian and bicyclist for accessibility and safety. DDOT has developed and is currently implementing the Pedestrian Master Plan (2008) and Bicycle Master Plan (2005), which outline strategies to make the environment safer and decrease the overall exposure for both pedestrians and bicyclists. Currently, the District has 61.7 miles of bike lanes and 18.8 miles of shared lanes. The District plans to further expand this network.

In 2010, the District joined the Capital Bikeshare program with Arlington County, Virginia. This program is a service owned by the local governments but operated in a public-private partnership with Alta Bike Share. The program launched in September 2010 with 400 bicycles at 49 stations. To date, the program has expanded to become multijurisdictional with Alexandria and Montgomery County. From the Bikeshare database, as of May 2016, Bikeshare had almost 3,000 bicycles in service providing about 200,000 trips per month within the District. Based on a survey, nearly 6 in 10 respondents use Bikeshare to commute to or from work and 40 percent often make a commute trip by Bikeshare.



The chart above shows the significant increases in bike trips since 2012. Bikeshare trips increased more than 10 percent per day, from 2015 to 2016, to approximately 8,500 trips; 15–20 percent of rentals were to casual riders—not registered in the bike share system.

The District Streetcar service on H Street began operation in March 2016 with daily weekday passenger averaging 2,419 passengers (67,853/month). In the 12 months since, daily weekday ridership has reached a high of 3,207 (93,909/month, March 2017) or a 32 percent increase.

There is concern that with the increased District focus to expand the multimodal network and attract new users, crashes will continue to rise. The HSO will continue to partner with MPD to regularly enforce and educate pedestrian, bicyclist and drivers on traffic safety and sharing the roadways. Using the data-driven approach described earlier in the HSP, MPD will select enforcement times and locations; the data analyses are designed to identify who is involved in crashes, when and where.

Enforcement will be in conjunction with paid media activities with the McAndrew Company. They will use a mix of out-of-home, social media and radio advertising that will speak to pedestrians, cyclists and drivers and support law enforcement efforts in specific locations at specific times.

The HSO will also continue to partner with Maryland and northern Virginia through the Metropolitan Washington Council of Government (MWCOG) Street Smart campaign. This is a public education, awareness, and behavioral campaign geared to promoting pedestrian and bicycle safety. Since 2002, the campaign has used mass media (radio, newspaper, and transit advertising) to raise awareness and educate motorists, pedestrians and bicyclists to build safer streets and sidewalks. High-visibility law enforcement also enforces laws and trains road users to be better drivers, cyclists and pedestrians.

The Washington Area Bicyclist Association (WABA) is approaching a Ward-based community outreach to address the high rate of bicycle and pedestrian crashes—and their disproportionate effect on communities of color. WABA's mission is to create a healthy, more livable region by promoting bicycling for fun, fitness, and affordable transportation; advocating for better bicycling conditions and transportation choices for a healthier environment; and educating children, adults, and motorists about safe bicycling.

The District has implemented under the Vision Zero plan strategies to work with the District's senior population through DC Villages. The goal is to reduce the number of seniors driving by offering an expanded volunteer ride program and increased use of ridesharing; improving senior driving education; and enhancing pedestrian safety and navigation. Seniors in the District drive very few miles but represent the second leading age group in collisions and fatalities. Seniors are also the second leading age group in pedestrian crashes. DC Villages will help reverse this trend by providing alternative transportation options for seniors and providing real-time information on the safest walking routes.

The District under the Vision Zero plan has also teamed up with Gearin' Up Bicycles to organize teams of trained youth and adult bicycle mechanics to provide education, repairs, safety checks, and free safety equipment in coordination with the District of Columbia Public Schools' Biking in the Park program. Today, there are no bicycle shops in Wards 7 and 8. Gearin' Up Bicycles will ensure people biking in these communities, especially children, are using safe equipment.

District of Columbia Department of For-Hire Vehicles (DFHV) will provide preventative enforcement for vehicles for hire, in coordination with DDOT traffic control. DFHV will prevent dangerous driving with

compliance check points and focused enforcement in areas with high concentrations of vulnerable travelers. From 2010 to 2014, there were nearly 2,000 crashes involving taxis, 392 of which resulted in injuries. DFHV will target for hire vehicle drivers who illegally load and unload, drive erratically, and interact dangerously with bicycle and pedestrian facilities.

The following table lists the strategies included in this HSP (FY2018); they are also included in the District's SHSP, 2014.

#### **Enforcement Strategies**

Strategy 1: Implement Targeted Enforcement Campaign. Examples include:

- Conduct regular pedestrian safety enforcement operations that target motorists and pedestrians.
- Use speed enforcement in areas where high concentrations of pedestrians cross or on high pedestrian-crash corridors.
- Enforce relevant polices—NRTOR, blocking of sidewalks, crosswalks, etc.

Strategy 3: Expand the Traffic Safety focus at MPD:

- Provide Safety Training for all officers, retraining every 2 years (to include refresher classes in ARIDE, SFST, etc.).
- Review/update the online Ped/Bike training, to be:
  - Completed every 2 years by MPD officers.
  - Added to the Academy curriculum.
  - Expanded to include other Federal Enforcement Agencies.
- ARIDE training for other law enforcement agencies in the District.

#### Education Strategies

Strategy 1: Targeted Education Initiatives:

- Continue and expand pedestrian traffic-safety education in elementary, middle, and high schools.
- Improve pedestrian safety information training in DDOT, MPD, DMV, WMATA, and among other District agencies and other Federal Agencies.
- Educate pedestrians on dangers of walking along or crossing roadways while distracted (e.g., texting while walking).

Strategy 4: Continue Street Smart, the pedestrian awareness campaign:

- Expand the use of social media.
- Expand to include all DC enforcement agencies and other agencies as necessary.

## Project Summaries

Project Number	PS 2018	
Project Title	Pedestrian/Bicyclist Enforcement—MPD	
Project Goal/ Description	Conduct data-driven, high-visibility enforcement of Districts laws to drivers, pedestrians and bicyclists.	
Budget	\$131,700; Section 402	
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 8, Section 4.4 and Chapter 9, Section 3.3	

Project Number	PS 2018	
Project Title	Paid Media, Pedestrian and Bicycle - McAndrew	
Project Goal/ Description	Educate pedestrians, cyclists and drivers on safe behaviors and to support law enforcement.	
Budget	\$150,000; Section 402;	
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 8, Sections 4.5 and 4.6	

Project Number	PS 2018	
Project Title	Metropolitan Council of Governments—Street Smart	
Project Goal/ Description	increase awareness of pedestrian and bicyclist on roadways. Improve the behaviors of all drivers, pedestrians and bicyclists. Coordinate and support an intensive region-vide education and enforcement effort.	
Budget	\$100,000; Section 402;	
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 8, Sections 4.5 and 4.6	

Project Number	FHX 2018	
Project Title	WABA—Vision Zero Community Outreach and Education—Bike Safety	
Project Goal/ Description	Reduce bicycle and pedestrian roadway fatalities and serious injuries by engaging a diverse grassroots community committed to Vision Zero through experiential education activities.	
Budget	\$189.933; Section 405h;	
Evidence of Effectiveness	Countermeasures That Work, 8th Edition, 2015, Chapter 9, Section 2.2	

Project Title	DC Villages / Capitol Hill Village	
Project Goal/ Description	Reduce the number of seniors driving through an expanded volunteer ride program and increased use of ridesharing; improve senior driving education; and enhance pedestrian safety and navigation.	
Budget	\$160,000; Vision Zero Funded; MOE	

Project Title	Gearin' Up Bicycles
Project Goal/ Description	Organize teams of trained youth and adult bicycle mechanics to provide education, repairs, safety checks, and free safety equipment in coordination with the District of Columbia Public Schools' Biking in the Park program.
Budget	\$80,000; Vision Zero Funded; MOE

Project Title	District of Columbia Department of For-Hire Vehicles (DFHV)	
Project Goal/ Description	Coordinate with DDOT traffic control so that DFHV can prevent dangerous driving with compliance check points and focused enforcement in areas with high concentrations of vulnerable travelers.	
Budget	\$61,000; Vision Zero Funded; MOE	

Table 9: Pedestrian and Bicyclist Safety Program Area - Budget Summary

Project Number	Project Title	Budget	Budget Source
PS 2018	Metropolitan Police Department	\$131,700	Section 402
PS 2018	Paid Media – Ped and Bike	\$150,000	Section 402
PS 2018	Street Smart – DC Contribution to Campaign with MWCOG	\$100,000	Section 402
FHX 2018	WABA	\$189,933	Section 405h
405h Total		\$189,933	
402 Total		\$381,700	
Total All Funds		\$571,633	

#### **Traffic Records**

#### **Overview**

It is the responsibility of the District of Columbia to reduce crashes, injuries, and fatalities and associated cost by identifying transportation safety issues and developing and implementing effective integrated programs and activities. As traffic safety data is the primary source of knowledge about the traffic safety environment, human behavior, and vehicle performance, there is an urgent need for the District to collect, process, integrate, and use timely, accurate, consistent, uniform, integrated, and accessible traffic safety data.

In 2007, the District of Columbia established its Traffic Records Coordinating Committee (TRCC), of which the HSO is a member. It also includes policy-level representatives from each major system owner (crash, roadway, enforcement/adjudication, driver, vehicle, injury surveillance system/emergency medical system) covering nine District agencies (DDOT, MPD, FEMS, DMV, OCTO, OAG, SCDC, OCME and DOH).

The vision of the District's TRCC is to enhance transportation safety and reduce crashes and crashrelated injuries through a coordinated approach that will provide timely, accurate, complete, integrated,

#### **TRCC Committee**

- 1. Department of Health
- 2. Department of Motor Vehicles
- 3. Department of Transportation
- 4. Superior Court of the District of Columbia
- 5. Fire/Emergency Medical Services
- 6. Metropolitan Police Department
- 7. Office of the Attorney General
- 8. Office of the Chief Medical Examiner
- Office of the Chief Technology Officer

uniform, and accessible traffic records data. To achieve the Vision, the TRCC developed the following goals:

- Provide an ongoing District-wide forum for traffic records and support the coordination of multiagency initiatives and projects.
- Leverage technology and appropriate government and industry standards to improve the timely collection, dissemination, and analysis of traffic records data.
- Improve the interoperability and exchange of local and regional traffic records data among systems and stakeholders for increased efficiency and enhanced integration.
- Create a user-friendly data system incorporating public and private data sources that better informs traffic-related policy and program decision makers.

The HSO Coordinator also serves as the traffic records coordinator; she serves as a single point of contact for coordinating and scheduling the TRCC activities, meetings, and tracking the progress made and projects implemented from the traffic records strategic plan.

To achieve the objective of improving traffic data quality, the District of Columbia underwent a traffic safety data systems assessment (referred to here as Traffic Records Assessment [TRA]) in 2005. A NHTSA Team conducted an update of that assessment in 2007 and 2012. The 2007 assessment led to the District's first

Traffic Records Strategic Plan in 2007. The 2012 assessment led to the District the Traffic Records Strategic Plan update in 2014. Each assessment identified deficiencies and provided accompanying recommendations to improve the traffic records/safety data systems in the District. The 2014 plan focuses on specific projects to undertake and achieve the vision of the District's TRCC and included the following:

- Priority projects based on recommendations from the 2012 assessments.
- Performance measures for each quality metric identified in the projects.
- Information on schedule, benchmarks, budget, etc.

The period covered by the 2014 Strategic Plan is a 5-year period from January 2014 to December 2018. HSO reviews the 2014 Strategic Plan annually for relevance to current safety data problems in the District. In developing and implementing projects to address in each of the component areas, the TRCC determined the level of impact and success of efforts and resources expended. Table 10 shows projects included in the Plan. These projects not only include funded through the TRCC but also other projects relevant to achieving the goals of the TRCC. This is crucial, as the TRCC annual funding is only \$250,000 and most of the work must be accomplished through collaboration with other District Agencies.

#### Performance Targets

The District's Traffic Records Strategic Plan, revised in November 2014, identifies the following goals:

- Provide ongoing coordination among all stakeholders in support of initiatives and projects that improve the quality of the District's traffic records;
- Improve the timeliness of traffic records data collection and sharing;
- Increase the accuracy of traffic records data;
- Increase the completeness of traffic records data;
- Promote uniformity of traffic records data;
- Promote the ability to integrate traffic records data; and
- Facilitate access to traffic records data.

#### TRCC Activities

The District has maintained a high-level of interest and commitment from all of its original partners in the traffic records community. The District's TRCC Working Committee meets on a quarterly basis with executive-level meetings on an as-needed basis. Typical TRCC activities include the following:

- Provide a forum for coordination, cooperation, and collaboration of interagency activities that improve the District's traffic safety data systems.
- Develop interagency project teams to develop implementation plans for carrying out the objectives of the Strategic Plan, as necessary.

- Review and endorse programs, regulations, projects and methodologies to implement the improvements identified in the Strategic Plan.
- Receive periodic updates from the project teams.
- Encourage and provide for the sharing of data among all members, owners, users and collectors and collaborate on interagency projects.
- Support electronic data collection for all types of data, including crash, roadway (including volume and asset management), vehicle, driver, medical, and citation or adjudication data.
- Approve and implement other tasks to further the TRCC goals and achieve quality traffic safety data.
- Prepare yearly demonstrated project progress reports and other funding documents for NHTSA.

#### Completed and Ongoing Projects

The 2014 Strategic Plan identified 32 projects to address and improve traffic-data components in the areas of crash, roadway, driver, vehicle, citation/adjudication, and injury surveillance.

The 2007 Strategic Plan recommended 29 projects covering six data-quality areas for implementation; 11 were completed and 7 were begun. The remaining projects were reassessed and carried over to the 2014 Strategic Plan.

The 2014 Strategic Plan was the direct result of one of the major recommendations of the 2012 TRA, which was to update the 2007 Strategic Plan. This plan, 2014 Strategic Plan, provided the District's TRCC with a basis for moving forward in updating the 2007 Strategic Plan with recommendations provided in the 2012 assessment reports.

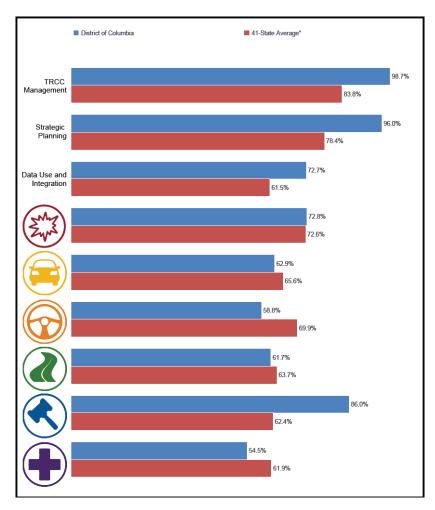
Based on the assessment reports, the 2014 Strategic Plan proposed several new projects. Table 10 below shows the list of projects, many of which are multi-year projects involving different funding sources; prioritization may overlap, and represents the best case at this time.

**Table 10: TRCC Projects** 

	Project		STATUS
	CRASH DATA COMPONENT		
1.	Develop formal crash data quality-control program.	MPD	Ongoing
2.	Establish DMV Traffic Records Safety Coordinator.	DMV	Not Started
3.	Work with Department of Interior to obtain data from crashes reported by the US	MPD	Ongoing
	Park Police.		
4.	Revise PDO crash reporting threshold to include reporting on crashes that result in	MPD	Not Started
	damage but no vehicle is towed.		
	ROADWAY DATA COMPONENT		
5.	Develop Transportation Integrated Enterprise Solution (TIES)*	DDOT	Completed
6.	Update OCTO planimetric data.	DDOT	Completed
7.	Roadside data updates.	ОСТО	Completed
8.	Develop comprehensive dataset and a quality-control program designed to support	DDOT	Ongoing
	the District's road safety programs (MIRE Compliance).		

	Project	LEAD	STATUS
9.	Adopt ESRI Roads and Highway Module.	AGENCY DDOT	Completed
10.	Develop Enterprise Routing Network.	DDOT	Completed
11.	Revamp Street Inventory System (SIS).	DDOT	Not Started
12.	Traffic count data governance.	DDOT	Not Started
12.	VEHICLE DATA COMPONENT		1 vot Started
13.	Complete National Motor Vehicle Title Information System (NMVTIS) for the	DMV	Ongoing
13.	District.	Diviv	Oligoling
14.	Establish web and FTP application to allow jurisdictions to electronically report	DMV	Not Started
	convictions to the District.	23.1.1	1,000 0000000
15.	Update legacy vehicle system to a more robust platform with increased functionality	DMV	Not Started
	(Funding procured, Funding level >\$5 M).		
	DRIVER DATA COMPONENT		
16.	Enter backlog of manual/paper traffic convictions received from other jurisdictions	DMV	Ongoing
-	into DMV Destiny system.		
17.	Create brochures and PSAs to inform, educate and improve drivers' understanding	DMV	Completed
	of information provided on the DC Driver's Record.		_
18.	Develop effective communications link between DMV and the Court regarding the	DMV	Not Started
	Ignition Interlock program.		
19.	Evaluate impact of the Graduated Driver License program, both in terms of	DMV	Not Started
	reduction in injury and fatality crashes, and in terms of the level of enforcement of		
	the law's provisions.		
20.	Establish interface between MPD and DESTINY to electronically capture traffic	DMV	Not Started
	arrest data (3340 Prop. Suspension Notices).		
21.	Update legacy driver system to a more robust platform with increased functionality	DMV	Not Started
	(Funding procured, Funding level >\$5M).		
	ENFORCEMENT/ADJUDICATION DATA COMPONENT	D.D. O.H.	
22.	Develop linked dataset including crash and citation data District-wide to determine	DDOT	Completed
	impact of various countermeasures on crash incidence and severity.		
22		DM	NT C 1
23.	Implement consolidated notices that include all ticketed violations whenever	DMV	Not Started
	customers receive a notice.		
24.	customers receive a notice.  Complete electronic citation system (Hand-held Ticket Writing Equipment).	MPD	Ongoing
24. 25.	Customers receive a notice.  Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.	MPD OAG	Ongoing Completed
24.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology	MPD	Ongoing
24. 25. 26.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.	MPD OAG OCME	Ongoing Completed Completed
24. 25.	customers receive a notice.  Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet	MPD OAG	Ongoing Completed
24. 25. 26.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from	MPD OAG OCME	Ongoing Completed Completed
24. 25. 26.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.	MPD OAG OCME	Ongoing Completed Completed Ongoing
24. 25. 26.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data	MPD OAG OCME	Ongoing Completed Completed
24. 25. 26. 27.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.	MPD OAG OCME	Ongoing Completed Completed Ongoing
24. 25. 26.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl,	MPD OAG OCME	Ongoing Completed Completed Ongoing
24. 25. 26. 27.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.	MPD OAG OCME OCME	Ongoing Completed Completed Ongoing Ongoing
24. 25. 26. 27.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.	MPD OAG OCME OCME	Ongoing Completed Completed Ongoing Ongoing
24. 25. 26. 27. 28.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the	MPD OAG OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing
24. 25. 26. 27. 28.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.	MPD OAG OCME OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing
24. 25. 26. 27. 28. 29.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.  Finalize and implement the centralized electronic trauma data repository.	MPD OAG OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing Ongoing
24. 25. 26. 27. 28. 29. 30.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.  Finalize and implement the centralized electronic trauma data repository.  Develop/enhance the centralized electronic Hospital Discharge Data (HDD).	MPD OAG OCME OCME OCME OCME OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing Ongoing Not Started
24. 25. 26. 27. 28. 29. 30. 31. 32. 33.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.  Finalize and implement the centralized electronic trauma data repository.  Develop/enhance the centralized electronic Hospital Discharge Data (HDD).  Develop a centralized electronic ER data repository.	OCME OCME OCME OCME OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing Ongoing Not Started Not Started
24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.  Finalize and implement the centralized electronic trauma data repository.  Develop/enhance the centralized electronic Hospital Discharge Data (HDD).  Develop a centralized electronic ER data repository.  Establish Crash Outcome Data Evaluation System (CODES).	MPD OAG OCME OCME OCME OCME OCME OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing Ongoing Not Started Not Started Ongoing
24. 25. 26. 27. 28. 29. 30. 31. 32. 33.	Complete electronic citation system (Hand-held Ticket Writing Equipment).  Identify additional resources for prosecution of impaired driving offenses.  Provide new driving-under-the-influence of drug (DUID) screening methodology and implementation.  Upgrade to new EC/IR II equipment. This upgrade provides internet communication with the equipment that allows OCME to collect data instantly from a remote connection.  Identify new LCMSMS equipment. Collect drug-driving (DUID) impairment data (not alcohol) and rapidly test/quantify drugs like marijuana, K2, bath salts, fentanyl, heroin, and prescription medications.  Identify additional resources for prosecution of impaired driving offenses.  INJURY SURVEILLANCE DATA COMPONENT  Develop applications to allow Fire and Emergency Medical Services (FEMS) to send preliminary information regarding patient condition to the hospital and allow the public to notify FEMS of traffic crashes.  Finalize and implement the centralized electronic trauma data repository.  Develop/enhance the centralized electronic Hospital Discharge Data (HDD).  Develop a centralized electronic ER data repository.	OCME OCME OCME OCME OCME OCME	Ongoing Completed Completed Ongoing Ongoing Ongoing Ongoing Ongoing Not Started Not Started

In 2016, a team of experts from NHTSA conducted an in-depth peer review of the District's traffic records system. The District of Columbia received the final report for the 2016 Assessment on June 27, 2016, and is not due for another Assessment until 2021. Over three time periods, 391 questions were asked, and based on the answers provided, the District's traffic records system was rated as meeting the ideal, partially meeting the ideal, or not meeting the ideal. In summary, the District of Columbia average score was higher than the State average score of 66.4 percent. Figure below provides a snap shot of how the District performed compared to the State average by each assessment component.



The NHTSA assessment team commended the District of Columbia TRCC as highly functional, comprehensive, and effective given the small size of the District highway safety office. The assessment further stated that given the level of success and the detailed, comprehensive documentation currently involved with the TRCC, there are no major recommendations or considerations except to maintain and continue to evolve as the District does.

Currently, the District is in the process of updating the 2014 Traffic Records Strategic Plan to include key recommendations identified by the 2016 TRA. The updated Traffic Records Strategic Plan will serve as a guiding document for traffic records improvements over a 5-year period from 2018 through 2022.

#### **Project Activities**

TRCC funding is very limited (~\$250,000/year) and thus direct control over a broad range of projects will not occur. The TRCC uses its leverage and influence to work with partners and develop, fund, and implement supportive projects important to achieving TRCC goals. Table 10 illustrates the broad reach of the TRCC in helping to improve and advance the state of the District traffic record systems. The TRCC specifically funded or approved the following projects:

#### Traffic Records Coordinating Community—KLS Engineering

The District has maintained a high-level of interest and commitment from all original partners in the traffic records community. The District's TRCC Working Committee meets on a quarterly basis with executive-level meetings on an as-needed basis. The NHTSA assessment Team commended the District of Columbia TRCC as highly functional, comprehensive, and effective. The Team further stated that given the level of success and the detailed, comprehensive documentation currently involved with the TRCC, there are no major recommendations or considerations except to maintain and continue to evolve as the District does. Based on the 2016 NHTSA Assessment Team they rated the TRCC Management, Strategic Planning, and Data Use and Integration very highly as follows:

- TRCC Management—District 98.7 percent, National state-wide average 83.6 percent.
- Strategic Planning—District 96 percent, National state-wide average 78.4 percent.
- Data Use and Integration —District 72.7 percent, National state-wide average 61.5 percent.

Typical TRCC activities include the following<sup>2</sup>:

- Prepare, update, and maintain District's Traffic Safety Information System Strategic Plan, which acts as a guide for implementing of traffic safety systems and data improvements.
- Coordinate interagency activities that improve the District's traffic safety data systems.
- Work with the TRCC membership to develop interagency projects and associated implementation plans for carrying out the objectives of the Strategic Plan as necessary.
- Document periodic updates relating to TRCC projects.
- Highlight and evaluate state-of-the-art applications that can improve the overall TRCC goals.
- Assist in preparing yearly demonstrated project progress reports and other funding documents for NHTSA.

<sup>&</sup>lt;sup>2</sup> Uniform Guidelines for State Highway Safety Programs, No. 10, Section IV

#### Data Entry Convictions—Department of Motor Vehicles (DMV)

DMV maintains the driver records of all licensed drivers in the District of Columbia. DMV performs the necessary functions required for receiving and entering convictions and withdrawals to applicable driver records and executing appropriate suspension and revocation actions.

The DESTINY system is the backbone of the DMV motor vehicle information system. The system is an integrated driver license and vehicle registration information system that DMV employees use to perform transactions and access customer records. DESTINY also maintains an electronic record of a driver's traffic record. DMV shares this information with other agencies, such as the Metropolitan Police Department and the courts to improve road safety by enforcing District vehicular laws and regulations.

The 2015, backlog of approximately 24,000 convictions resulted in approximately 10,900 driver administrative actions relating to traffic law violations. Administrative actions were a result of both "point accumulation" and "major moving" violations.

The DMV receives approximately 2,400 convictions per month from other jurisdictions. To enter convictions in a timely manner and avoid a backlog, DMV requires additional hours for DMV's knowledgeable staff to enter convictions into the DESTINY system. The convictions are posted to the appropriate driver records. DMV will assign Legal Instrument Examiners to enter the convictions. Convictions will be entered in the evenings and on weekends. With the additional hours each week, DMV will be able to maintain data currency.

#### E-Citation Program—Metropolitan Police Department (MPD)

Phase II of MPD's e-Citation System that is compatible with its sister agencies, the DC Department of Public Works and the District Department of Transportation will start in fiscal year 2018. This system will reduce the average stop time for an officer, data run and citation entry. Today, on average about 25 percent (>40,000) of all tickets issued by MPD are dismissed by DMV for multiple reasons. Of those dismissed, more than 16,000 are moving violations or approximately 25–30 percent of all moving violations (non-automated). This is a higher rate of dismissals than other enforcement agencies operating in the District, such as the USCP and USPP that average between 8 and 15 percent. The e-Citation will speed up the process, and in particular, reduce officer error and decrease the number of dismissed tickets.

Phase II will be to purchase 500 additional mobile licenses included with server software, which will bring the total to 1,000 for MPD. Included will also be officer training, handheld printers with various accessories

# MIRE FDE Data Collection—Office of Information of Technology and Innovation (OITI)

One of top recommendations in the most recent Traffic Records Program Assessment Advisory report was to improve the data dictionary for roadway data inventory and updates, address changes and quality control routines related to inventory, and collect data for MIRE compliance. While the primary purpose of this effort is to capture/collect an array of roadway characteristics that will allow DDOT to populate the missing MIRE FDEs, work will be initiated to address the other recommendations.

#### OITI is proposing to:

- 1. Collect additional detail on specific centerline characteristics (primarily detailed lane data).
- 2. Create automated processes to derive the MIRE FDEs.
- 3. Prepare related documentation.

Traditional approaches (use imagery, capture the data items, store in MIS of choice) will lead to a safety data inventory that can quickly become stale. DDOT intends to enforce new inventory maintenance responsibilities and continually maintain the base inventory when changes occur. As long as the base is current, automations can be run to derive updates for all remaining MIRE FDEs on-demand.

# Modernized Data Backend (MDB) System—Office of Chief Technology Officer (OCTO)

OCTO is in the process of developing the Modernized Data Backend (MDB) system to provide a more modernized, scalable, versatile and adaptable database backend. Field has presented a data flow chart which provides an insight on how the data from various data sources can be utilized into the data visualization and analysis using various software. This MDB helps in

- Standardizing the data curation process across the databases.
- Develop database(s) of record
- Integrate data cataloging and metadata solution
- Streamline geospatial data layer specifications
- Standardize and streamline ETLs / data feeds
- Measure directed data utilization
- Implement online archiving framework
- Remove file geodatabase and its dependencies

On April 27th, 2017 DC Mayor has signed memo related to Open Data Policy. The policy relates to data created and managed by the District government which are valuable assets and are independent of information systems in which the data reside. As such, the District government shall maintain an inventory of its datasets and strategically plan and manage its investment in data and systems.

Datasets are classified into 5 levels as the following:

- Level 0: Open
- Level 1: Public Not Proactively Released
- Level 2: For District Government Use
- Level 3: Confidential
- Level 4: Restricted Confidential

## Project Summary

Project Number	M3DA 2018	
Project Title/s	Traffic Records Strategic Plan—KLS	
Project Goals/ Description	Improve the state-of-the-practice (timeliness, accuracy and completeness) of electronic crash data records collection and entry. Provide travel, contractual services, coordinate events, and traffic license maintenance fees related to the Traffic Record Assessment projects, and improve District-wide traffic record system.  CODES is a collaborative approach to obtain medical and financial outcome information related to motor-vehicle crashes for highway safety and injury control decision making. Approach will allow District to measure benefits in terms of reducing death, disability, and medical costs.	
Budget	\$150,000 Section 402	

Project Number	M3DA-2018	
Project Title	Data Entry Convictions—DMV	
Project Goals/ Description	Entering convictions in a timely manner and avoid a backlog requires that DMV allocate additional hours for its knowledgeable staff to enter convictions into the DESTINY system. Convictions will be entered in the evenings and on weekends.	
Budget	\$70,000; Section 405c	

Project Number	M3DA 2018
Project Title	e-Citation
Project Goals/ Description	<ul> <li>Phase II is a continuation of the e-Citation Program that was approved in FY2017.</li> <li>Project Goals:</li> <li>Reduce the time it takes to issue a citations from fifteen (15) minutes to four to 5 minutes;</li> <li>To issue multiple violations in a matter of seconds.</li> <li>To improve availability of citations</li> </ul>
Budget	\$575,000.00; Section 405c

Project Title	MIRE FDE Data Collection – OITI		
Project Goals/ Description	Primary purpose of this effort is to capture/collect an array of roadway characteristics that will allow DDOT to populate the missing MIRE FDEs, work will be initiated to address the other recommendations.		
Budget	\$50,000; MOE		

Project Title	Modernized Data Backend (MDB) System – OCTO				
Project Goals/ Description	To provide a more modernized, scalable, versatile and adaptable database backend. Field has presented a data flow chart which provides an insight on how the data from various data sources can be utilized into the data visualization and analysis using various software.				
Budget	\$500,000; MOE				

**Table 11: Traffic Records Program Area - Budget Summary** 

Project Number	Project Title	Budget	Budget Source		
M3DA 2018	Traffic Records Strategic Plan	\$150,000	Section 402		
M3DA 2018	Data Convictions—DMV	\$70,000	Section 405c		
M3DA 2018 e-Citation Phase II		\$575,000	Section 405c		
405c Total		\$645,000			
402 Total		\$150,000			
Total All Funds		\$795,000			

#### Planning and Administration

The District's Highway Safety Office will analyze crash data and implement proven effective countermeasures to identify the District's highway safety concerns. KLS Engineering assists the HSO office to ensure that the HSO program is data driven and evidence based. The HSO coordinates, monitors existing programs, and modifies them based on their progress and success. The HSO is also prepares the District's Strategic Highway Safety Plan (SHSP) and coordinates the District's Traffic Records Committee.

#### FY2018 Performance Target

- Conduct Stakeholders' meeting to get input and provide guidance to develop the FY2019 Highway Safety Performance Plan (Grantee Workshops).
- Administer and monitor grantees for FY2018 to ensure they meet NHTSA requirements.
- Submit and complete the FY2017 Annual Report to NHTSA by December 31, 2017.
- Develop and submit the FY2019 Highway Safety Plan by July 1, 2018.

#### Strategies

The Planning and Administration program area includes those activities and costs necessary for the overall management and operations of the HSO. These activities:

- Identify the District's most significant traffic safety problems.
- Prioritize problems and develop methods to distribute funds.
- Develop the annual Highway Safety Plan (HSP) and Annual Report.
- Coordinate the HSP with the SHSP and other state plans.
- Recommending individual grants for funding.
- Develop planned grants.
- Monitor grants.
- Participate on various traffic safety committees and task forces.
- Conduct annual District-wide observational seat belt use surveys.
- Provide sound fiscal management for traffic safety programs.
- Attend NHTSA meetings and other safety-related trainings.
- Serve as the TRCC Coordinator:
  - Provide primary point of leadership and accountability for the Traffic Safety Information Systems activity within the District.
  - Prepare a plan to implement traffic safety data improvements.
  - Recommend forming interagency project teams to develop implementation plans for carrying out the plan objectives.

- Coordinate and schedule the TRCC, in addition to tracking the progress of implementing the State's traffic records strategic plan.
- Review programs, regulations, projects, and methodologies for conformance with the mission and goal of the TRCC and for conformance with national policy on traffic safety information systems.
- Provide executive guidance and coordination for programs, projects, and regulations as they become operational.
- Receive periodic updates from the project teams.
- Approve and implement other tasks in furtherance of the TRCC goals to achieve quality traffic safety data from state traffic safety information systems.
- Participates on the SHSP Updates.

#### **Project Activity**

Project Number	PA 2018
Project Title	Planning and Administration
Project Goals/Description	Program administration—Fund travel, services, supplies, and office equipment for administrative personnel: HSO Coordinator.
Budget	\$23,500; Section 402

Project Title	Planning and Administration
Project Goals/Description	Program administration—HSO Coordinator salary and benefits
Budget	\$300,000; MOE Funds

Project Number	SA 2018
Project Title	Update to Procedures Manual; Maintenance of HSO Website—KLS
Project Goals/ Description	Update Procedure Manual as needed. This document assists in administering the US DOT, NHTSA, safety grant program in compliance with applicable laws of the District of Columbia and other Federal laws and regulations. Provide training, etc. As needed, update the HSO website to reflect state-of-the-practice.
Budget	\$125,000; Section 402

Project Number	SA 2018
Project Title	SHSP Update—KLS
Project Goals/ Description	Work with all District agencies to implement the SHSP strategies, monitor progress and prepare reports. Provide guidance though project demonstrations and other state-of-the-practice tools/technologies.
Budget	\$200,000 Section 402

Project Number	SA 2018
Project Title	Highway Safety Reports—KLS
Project Goals/ Description	Develop the Highway Safety Performance Plan and Annual Report to comply with US DOT, NHTSA requirements.
Budget	\$200,000 Section 402

**Table 12: Planning and Administration - Budget Summary** 

Project Number	Project Title	Budget	Budget Source
PA 2018 Planning & Administration		\$23,500	Section 402
	Office of Highway Safety Procedures Manual; Updating Website	\$125,000	Section 402
SA 2018	SHSP Coordination, Monitoring and Evaluation	\$200,000	Section 402
	Highway Safety Report	\$200,000	Section 402
Total All Funds/402		\$548,500	

## NHTSA Equipment Approval

The District's equipment needs and the associated funding are unclear at this time. The HSO will submit a letter to NHTSA Region 3 office requesting approval prior to any purchase of equipment valued for over \$5,000.

## **Performance Report**

## **Core Outcome Measures**

	Description	2011	2012	2013	2014	2015	2016 HSP	Goal Met
C-1	Number of traffic fatalities	27	15	20	23	23	23	Goal met
C-2	Number of serious injuries	1,612	1,567	1,655	1,802	1,981	1,763	Goal not met
C-3	Fatalities per 100 million vehicle miles Traveled	0.76	0.42	0.57	0.65	0.65	0.68	Goal Met
C-4	Number of unrestrained passenger vehicle occupant fatalities, all seat positions	6	4	0	3	1	3	Goal met
C-5	Number of fatalities in crashes involving a driver or motorcycle operator with a blood alcohol concentration of 0.08 g/dL or higher	8	3	7	5	6	6	Goal met
C-6	Number of speeding- related fatalities (FARS)	10	6	9	12	7	7	Goal met
C-7	Number of motorcyclist fatalities	4	4	3	3	3	4	Goal met
C-8	Number of unhelmeted motorcyclist fatalities	2	1	0	1	1	1	Goal met
C-9	Number of drivers 21 or younger involved in a fatal crash	3	1	1	3	0	1	Goal met
C-10	Number of pedestrian fatalities	8	7	9	9	13	9	Goal not met
C-11	Number of bicyclist fatalities	1	0	1	1	1	1	Goal met

Source: NHTSA STSI/FARS

## **Core Behavior Measures**

Description		2012	2013	2014	2015	2016
B-1 Observed seat belt use for passenger vehicles, front		92.4	87.46	93.2	95.5	94.1
	seat outboard occupants	32.4	67.40	JJ.2	55.5	J <del>7</del> .1

Source: District of Columbia Observational Seat Belt Survey

## **Core Activity Measures**

	Description	FY2011	FY2012	FY2013	FY2014	FY2015	FY2016
A-1	Number of seat belt citations issued during grant-funded enforcement activities	1,009	2,116	1,367	869	931	2,555
A-2	Number of impaired driving arrests made during grant-funded enforcement activities	65	257	210	187	150	213
A-3	Number of speeding citations issued during grant-funded enforcement activities	1,007	1,697	15	72	145	1,004
	Number of distracted driving citations issued during grant-funded enforcement activities		1,167	1,030	677	862	2,068
	Number of pedestrian and bicycle related citations issued during grant-funded enforcement activities		591	592	691	704	294

Source: Citations shown resulted from grant funded activities

## **Additional Core Outcome Measures**

	Description	2011	2012	2013	2014	2015	2016 HSP	Goal Met
C-12	Number of serious injuries in crashes involving a driver or motorcycle operator with a blood alcohol concentration of 0.08 g/dL or higher	93	76	101	88	80	86	Goal met
C-13	Number of unrestraint- occupant serious injuries	97	118	102	105	113	100	Goal not met
C-14	Number of speeding- related serious injuries	282	251	300	319	296	280	Goal not met
C-15	Number of pedestrian serious injuries	313	362	348	404	370	371	Goal met
C-16	Number of bicyclist serious injuries	252	260	281	362	302	299	Goal not met

Source: State Crash Data Files

#### Lessons Learnt

When comparing the goal against the actual FARS numbers and state injury numbers for 2015, The District exceeded the goals set for pedestrian fatalities, serious injuries, unrestraint injuries, speeding injuries and bicyclist-related injuries.

In 2015, the District approved legislation legalizing Marijuana. Known as Initiative 71, this city law made using up to 2 ounces of marijuana and the possession and cultivation of up to three marijuana plants legal. Marijuana use impairs the psychomotor skills required for safe driving, and the available epidemiological evidence suggests that cannabis does increase the risk of crashing. A report commissioned by the Governors Highway Safety Association found that about 40 percent of all drivers who died in crashes and tested positive for drug use in 2013. Of those, more than a third tested positive for marijuana, the report said. However, this risk is not well qualified in terms of how varying doses of marijuana affect driving. This uncertainty hinders development of effective road safety policy targeting cannabis-impaired.

A new crash-reporting application was initiated in August 2015. This system has more MMUCC assets/attributes and improved data edits and other features that increase data accuracy. The effect of this is not currently known, but in other States with similar legislation, improved crash reporting results in a higher number of reported crashes and injuries because officer timeliness on the scene and better accuracy and consistency of information captured.

Accurate assessment of crash severity—often the data recorded by the officer on the scene represents their impression of the crash victim. This may not represent the actual severity of the crash victim, as severe internal injuries do not manifest itself as a physical injury. The HSO is investigating data linkages with the emergency medical services and potentially the hospital trauma units. The challenge will be to use alternative data sources (i.e., EMS data or hospital data) as (1) the primary source to identify crash severity, and (2) ability to correlate this with past records to establish trend.

A number of other factors contribute to the high-crash risk to the road user population. While some of these factors are intrinsic to any mode, such as age, gender, or mode skill, others relate to social, economic, and policy decisions.

- 1. The District's population has steadily increased to 681,170 in 2016—on average 10–12,000 (or 1.5–2 percent) new residents per year.
- 2. The 798,000 jobs within the District in 2015 is an increase from 715,000 in 2005. It is expected that the District work force will grow by over 1.2 percent annually.
- 3. Commuters who live outside of the District account for 70 percent of all DC jobs; this is also projected to increase.
- 4. In 2015 the District welcomed a total of 21.3 million visitors, a 5 percent increase from 2014. On average, projects are that DC tourist visitation will continue to increase by at least 2–3 percent per year.
- 5. Huge and increasing numbers of persons working/commuting, recreational and tourist visitation have resulted in significant increases in bike and pedestrian trips (e.g., Bikeshare trips increased by over 10 percent per day from 2015 to 2016 to approximately 8,500 trips or over 2.0 million per year.

6. New modes of transportation. The Streetcar service on H Street began in March 2016 with daily weekday passenger averaging 2,419 passengers (67,853/month). In the 12 months since, daily weekday ridership has reached a high of 3,207 (93,909/month—March 2017), or a 32 percent increase.

With these many external factors, the District has major challenges to set and meet **realistic** safety goals inparticular with exposure increasing by 10–15 percent per year. The huge regional influx of workers, visitors, and others daily creates major challenges. The District must also work with its neighboring jurisdictions and State agencies that often have competing road safety concerns with varying schedules. Considering all these factors, the District believes it has made significant progress in meeting all goals. In 2018 and beyond, the District will continue its work to implement countermeasures that seek to reduce:

- Exposure
- Risk of the crash
- Risk of injury

## Performance Cost Summary (HCS 2018-HSP-1)

Submit to NHTSA Region 3 office

## Appendix A. Certification and Assurances

#### APPENDIX A TO PART 1300 – CERTIFICATIONS AND ASSURANCES FOR HIGHWAY SAFETY GRANTS (23 U.S.C. CHAPTER 4; SEC. 1906, PUB. L. 109-59, AS AMENDED BY SEC. 4011, PUB. L. 114-94)

[Each fiscal year, the Governor's Representative for Highway Safety must sign these Certifications and Assurances affirming that the State complies with all requirements, including applicable Federal statutes and regulations, that are in effect during the grant period. Requirements that also apply to subrecipients are noted under the applicable caption.]

State:	District of Columbia	Fiscal Year:	2018

By submitting an application for Federal grant funds under 23 U.S.C. Chapter 4 or Section 1906, the State Highway Safety Office acknowledges and agrees to the following conditions and requirements. In my capacity as the Governor's Representative for Highway Safety, I hereby provide the following Certifications and Assurances:

#### GENERAL REQUIREMENTS

The State will comply with applicable statutes and regulations, including but not limited to:

- 23 U.S.C. Chapter 4 Highway Safety Act of 1966, as amended
- Sec. 1906, Pub. L. 109-59, as amended by Sec. 4011, Pub. L. 114-94
- 23 CFR part 1300 Uniform Procedures for State Highway Safety Grant Programs
- 2 CFR part 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
- 2 CFR part 1201 Department of Transportation, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

## INTERGOVERNMENTAL REVIEW OF FEDERAL PROGRAMS

The State has submitted appropriate documentation for review to the single point of contact designated by the Governor to review Federal programs, as required by Executive Order 12372 (Intergovernmental Review of Federal Programs).

## FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)

The State will comply with FFATA guidance, <u>OMB Guidance on FFATA Subaward and Executive Compensation Reporting</u>, August 27, 2010, (<a href="https://www.fsrs.gov/documents/OMB">https://www.fsrs.gov/documents/OMB</a> Guidance on FFATA Subaward and Executive Compensation Reporting 08272010.pdf) by reporting to FSRS.gov for each sub-grant awarded:

- Name of the entity receiving the award;
- · Amount of the award;

- Information on the award including transaction type, funding agency, the North American Industry Classification System code or Catalog of Federal Domestic Assistance number (where applicable), program source;
- Location of the entity receiving the award and the primary location of performance under the award, including the city, State, congressional district, and country; and an award title descriptive of the purpose of each funding action;
- A unique identifier (DUNS);
- The names and total compensation of the five most highly compensated officers of the entity if:
  - (i) the entity in the preceding fiscal year received-
    - (I) 80 percent or more of its annual gross revenues in Federal awards;
    - (II) \$25,000,000 or more in annual gross revenues from Federal awards; and
  - (ii) the public does not have access to information about the compensation of the senior executives of the entity through periodic reports filed under section 13(a) or 15(d) of the Securities Exchange Act of 1934 (15 U.S.C. 78m(a), 78o(d)) or section 6104 of the Internal Revenue Code of 1986;
- Other relevant information specified by OMB guidance.

#### **NONDISCRIMINATION**

(applies to subrecipients as well as States)

The State highway safety agency will comply with all Federal statutes and implementing regulations relating to nondiscrimination ("Federal Nondiscrimination Authorities"). These include but are not limited to:

- Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq., 78 stat. 252), (prohibits discrimination on the basis of race, color, national origin) and 49 CFR part 21;
- The Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, (42 U.S.C. 4601), (prohibits unfair treatment of persons displaced or whose property has been acquired because of Federal or Federal-aid programs and projects);
- Federal-Aid Highway Act of 1973, (23 U.S.C. 324 et seq.), and Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 1681-1683 and 1685-1686) (prohibit discrimination on the basis of sex);
- Section 504 of the Rehabilitation Act of 1973, (29 U.S.C. 794 et seq.), as amended, (prohibits discrimination on the basis of disability) and 49 CFR part 27;
- The Age Discrimination Act of 1975, as amended, (42 U.S.C. 6101 et seq.), (prohibits discrimination on the basis of age);
- The Civil Rights Restoration Act of 1987, (Pub. L. 100-209), (broadens scope, coverage and applicability of Title VI of the Civil Rights Act of 1964, The Age Discrimination Act of 1975 and Section 504 of the Rehabilitation Act of 1973, by expanding the definition of the terms "programs or activities" to include all of the programs or activities of the Federal aid recipients, sub-recipients and contractors, whether such programs or activities are Federally-funded or not);
- Titles II and III of the Americans with Disabilities Act (42 U.S.C. 12131-12189) (prohibits discrimination on the basis of disability in the operation of public entities,

- public and private transportation systems, places of public accommodation, and certain testing) and 49 CFR parts 37 and 38;
- Executive Order 12898, Federal Actions to Address Environmental Justice in Minority Populations and Low-Income Populations (prevents discrimination against minority populations by discouraging programs, policies, and activities with disproportionately high and adverse human health or environmental effects on minority and low-income populations); and
- Executive Order 13166, Improving Access to Services for Persons with Limited
   English Proficiency (guards against Title VI national origin
   discrimination/discrimination because of limited English proficiency (LEP) by ensuring
   that funding recipients take reasonable steps to ensure that LEP persons have meaningful
   access to programs (70 FR at 74087 to 74100).

#### The State highway safety agency-

- Will take all measures necessary to ensure that no person in the United States shall, on
  the grounds of race, color, national origin, disability, sex, age, limited English
  proficiency, or membership in any other class protected by Federal Nondiscrimination
  Authorities, be excluded from participation in, be denied the benefits of, or be otherwise
  subjected to discrimination under any of its programs or activities, so long as any portion
  of the program is Federally-assisted.
- Will administer the program in a manner that reasonably ensures that any of its subrecipients, contractors, subcontractors, and consultants receiving Federal financial assistance under this program will comply with all requirements of the Non-Discrimination Authorities identified in this Assurance;
- Agrees to comply (and require any of its subrecipients, contractors, subcontractors, and
  consultants to comply) with all applicable provisions of law or regulation governing US
  DOT's or NHTSA's access to records, accounts, documents, information, facilities, and
  staff, and to cooperate and comply with any program or compliance reviews, and/or
  complaint investigations conducted by US DOT or NHTSA under any Federal
  Nondiscrimination Authority;
- Acknowledges that the United States has a right to seek judicial enforcement with regard to any matter arising under these Non-Discrimination Authorities and this Assurance;
- Insert in all contracts and funding agreements with other State or private entities the following clause:
  - "During the performance of this contract/funding agreement, the contractor/funding recipient agrees
    - a. To comply with all Federal nondiscrimination laws and regulations, as may be amended from time to time;

- Not to participate directly or indirectly in the discrimination prohibited by any Federal non-discrimination law or regulation, as set forth in Appendix B of 49 CFR part 2l and herein;
- c. To permit access to its books, records, accounts, other sources of information, and its facilities as required by the State highway safety office, US DOT or NHTSA;
- d. That, in event a contractor/funding recipient fails to comply with any nondiscrimination provisions in this contract/funding agreement, the State highway safety agency will have the right to impose such contract/agreement sanctions as it or NHTSA determine are appropriate, including but not limited to withholding payments to the contractor/funding recipient under the contract/agreement until the contractor/funding recipient complies; and/or cancelling, terminating, or suspending a contract or funding agreement, in whole or in part; and
- e. To insert this clause, including paragraphs a through e, in every subcontract and subagreement and in every solicitation for a subcontract or sub-agreement, that receives Federal funds under this program.

### THE DRUG-FREE WORKPLACE ACT OF 1988 (41 U.S.C. 8103)

The State will provide a drug-free workplace by:

- a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- b. Establishing a drug-free awareness program to inform employees about:
  - O The dangers of drug abuse in the workplace.
  - o The grantee's policy of maintaining a drug-free workplace.
  - Any available drug counseling, rehabilitation, and employee assistance programs.
  - O The penalties that may be imposed upon employees for drug violations occurring in the workplace.
  - o Making it a requirement that each employee engaged in the performance of the grant be given a copy of the statement required by paragraph (a).
- c. Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will
  - o Abide by the terms of the statement.
  - o Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five days after such conviction.
- d. Notifying the agency within ten days after receiving notice under subparagraph (c)(2) from an employee or otherwise receiving actual notice of such conviction.
- e. Taking one of the following actions, within 30 days of receiving notice under subparagraph (c)(2), with respect to any employee who is so convicted –

- Taking appropriate personnel action against such an employee, up to and including termination.
- o Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.
- f. Making a good faith effort to continue to maintain a drug-free workplace through implementation of all of the paragraphs above.

#### POLITICAL ACTIVITY (HATCH ACT)

(applies to subrecipients as well as States)

The State will comply with provisions of the Hatch Act (5 U.S.C. 1501-1508), which limits the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

#### CERTIFICATION REGARDING FEDERAL LOBBYING

(applies to subrecipients as well as States)

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

- 1. No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.
- 2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
- 3. The undersigned shall require that the language of this certification be included in the award documents for all sub-award at all tiers (including subcontracts, subgrants, and contracts under grant, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who

fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

## RESTRICTION ON STATE LOBBYING

(applies to subrecipients as well as States)

None of the funds under this program will be used for any activity specifically designed to urge or influence a State or local legislator to favor or oppose the adoption of any specific legislative proposal pending before any State or local legislative body. Such activities include both direct and indirect (e.g., "grassroots") lobbying activities, with one exception. This does not preclude a State official whose salary is supported with NHTSA funds from engaging in direct communications with State or local legislative officials, in accordance with customary State practice, even if such communications urge legislative officials to favor or oppose the adoption of a specific pending legislative proposal.

# <u>CERTIFICATION REGARDING DEBARMENT AND SUSPENSION</u> (applies to subrecipients as well as States)

#### Instructions for Primary Certification (States)

- 1. By signing and submitting this proposal, the prospective primary participant is providing the certification set out below and agrees to comply with the requirements of 2 CFR Parts 180 and 1300.
- 2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out below. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
- 3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default or may pursue suspension or debarment.
- 4. The prospective primary participant shall provide immediate written notice to the department or agency to which this proposal is submitted if at any time the prospective primary participant learns its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 5. The terms covered transaction, debarment, suspension, ineligible, lower tier, participant, person, primary tier, principal, and voluntarily excluded, as used in this clause, have the

meaning set out in the Definitions and coverage sections of 2 CFR Part 180. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.

- 6. The prospective primary participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by NHTSA.
- 7. The prospective primary participant further agrees by submitting this proposal that it will include the clause titled "Instructions for Lower Tier Certification" including the "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion—Lower Tier Covered Transaction," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions and will require lower tier participants to comply with 2 CFR Parts 180 and 1300.
- 8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the list of Parties Excluded from Federal Procurement and Non-procurement Programs.
- 9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, the department or agency may disallow costs, annul or terminate the transaction, issue a stop work order, debar or suspend you, or take other remedies as appropriate.

## <u>Certification Regarding Debarment, Suspension, and Other Responsibility Matters-Primary</u> <u>Covered Transactions</u>

(1) The prospective primary participant certifies to the best of its knowledge and belief, that its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded by any Federal department or agency;

- (b) Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of record, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the Statements in this certification, such prospective participant shall attach an explanation to this proposal.

### Instructions for Lower Tier Certification

- 1. By signing and submitting this proposal, the prospective lower tier participant is providing the certification set out below and agrees to comply with the requirements of 2 CFR Parts 180 and 1300.
- 2. The certification in this clause is a material representation of fact upon which reliance was placed when this transaction was entered into. If it is later determined that the prospective lower tier participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal government, the department or agency with which this transaction originated may pursue available remedies, including suspension and/or debarment.
- 3. The prospective lower tier participant shall provide immediate written notice to the person to which this proposal is submitted if at any time the prospective lower tier participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
- 4. The terms covered transaction, debarment, suspension, ineligible, lower tier, participant, person, primary tier, principal, and voluntarily excluded, as used in this clause, have the meanings set out in the Definition and Coverage sections of 2 CFR Part 180. You may contact the person to whom this proposal is submitted for assistance in obtaining a copy of those regulations.
- 5. The prospective lower tier participant agrees by submitting this proposal that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by NHTSA.
- 6. The prospective lower tier participant further agrees by submitting this proposal that it will include the clause titled "Instructions for Lower Tier Certification" including the "Certification

Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion – Lower Tier Covered Transaction," without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions and will require lower tier participants to comply with 2 CFR Parts 180 and 1300.

- 7. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the List of Parties Excluded from Federal Procurement and Non-procurement Programs.
- 8. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
- 9. Except for transactions authorized under paragraph 5 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, the department or agency with which this transaction originated may disallow costs, annul or terminate the transaction, issue a stop work order, debar or suspend you, or take other remedies as appropriate.

<u>Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion -- Lower</u> Tier Covered Transactions:

- 1. The prospective lower tier participant certifies, by submission of this proposal, that neither it nor its principals is presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency.
- 2. Where the prospective lower tier participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

#### **BUY AMERICA ACT**

(applies to subrecipients as well as States)

The State and each subrecipient will comply with the Buy America requirement (23 U.S.C. 313) when purchasing items using Federal funds. Buy America requires a State, or subrecipient, to purchase only steel, iron and manufactured products produced in the United States with Federal funds, unless the Secretary of Transportation determines that such domestically produced items would be inconsistent with the public interest, that such materials are not reasonably available and of a satisfactory quality, or that inclusion of domestic materials will increase the cost of the overall project contract by more than 25 percent. In order to use Federal funds to purchase

foreign produced items, the State must submit a waiver request that provides an adequate basis and justification to and approved by the Secretary of Transportation.

# PROHIBITION ON USING GRANT FUNDS TO CHECK FOR HELMET USAGE (applies to subrecipients as well as States)

The State and each subrecipient will not use 23 U.S.C. Chapter 4 grant funds for programs to check helmet usage or to create checkpoints that specifically target motorcyclists.

## POLICY ON SEAT BELT USE

In accordance with Executive Order 13043, Increasing Seat Belt Use in the United States, dated April 16, 1997, the Grantee is encouraged to adopt and enforce on-the-job seat belt use policies and programs for its employees when operating company-owned, rented, or personally-owned vehicles. The National Highway Traffic Safety Administration (NHTSA) is responsible for providing leadership and guidance in support of this Presidential initiative. For information on how to implement such a program, or statistics on the potential benefits and cost-savings to your company or organization, please visit the Buckle Up America section on NHTSA's website at www.nhtsa.dot.gov. Additional resources are available from the Network of Employers for Traffic Safety (NETS), a public-private partnership headquartered in the Washington, D.C. metropolitan area, and dedicated to improving the traffic safety practices of employers and employees. NETS is prepared to provide technical assistance, a simple, user-friendly program kit, and an award for achieving the President's goal of 90 percent seat belt use. NETS can be contacted at 1 (888) 221-0045 or visit its website at www.trafficsafety.org.

## POLICY ON BANNING TEXT MESSAGING WHILE DRIVING

In accordance with Executive Order 13513, Federal Leadership On Reducing Text Messaging While Driving, and DOT Order 3902.10, Text Messaging While Driving, States are encouraged to adopt and enforce workplace safety policies to decrease crashes caused by distracted driving, including policies to ban text messaging while driving company-owned or -rented vehicles, Government-owned, leased or rented vehicles, or privately-owned when on official Government business or when performing any work on or behalf of the Government. States are also encouraged to conduct workplace safety initiatives in a manner commensurate with the size of the business, such as establishment of new rules and programs or re-evaluation of existing programs to prohibit text messaging while driving, and education, awareness, and other outreach to employees about the safety risks associated with texting while driving.

#### **SECTION 402 REQUIREMENTS**

- 1. To the best of my personal knowledge, the information submitted in the Highway Safety Plan in support of the State's application for a grant under 23 U.S.C. 402 is accurate and complete.
- 2. The Governor is the responsible official for the administration of the State highway safety program, by appointing a Governor's Representative for Highway Safety who shall be responsible for a State highway safety agency that has adequate powers and is suitably

- equipped and organized (as evidenced by appropriate oversight procedures governing such areas as procurement, financial administration, and the use, management, and disposition of equipment) to carry out the program. (23 U.S.C. 402(b)(1)(A))
- 3. The political subdivisions of this State are authorized, as part of the State highway safety program, to carry out within their jurisdictions local highway safety programs which have been approved by the Governor and are in accordance with the uniform guidelines promulgated by the Secretary of Transportation. (23 U.S.C. 402(b)(1)(B))
- 4. At least 40 percent of all Federal funds apportioned to this State under 23 U.S.C. 402 for this fiscal year will be expended by or for the benefit of political subdivisions of the State in carrying out local highway safety programs (23 U.S.C. 402(b)(1)(C)) or 95 percent by and for the benefit of Indian tribes (23 U.S.C. 402(h)(2)), unless this requirement is waived in writing. (This provision is not applicable to the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.)
- 5. The State's highway safety program provides adequate and reasonable access for the safe and convenient movement of physically handicapped persons, including those in wheelchairs, across curbs constructed or replaced on or after July 1, 1976, at all pedestrian crosswalks. (23 U.S.C. 402(b)(1)(D))
- 6. The State will provide for an evidenced-based traffic safety enforcement program to prevent traffic violations, crashes, and crash fatalities and injuries in areas most at risk for such incidents. (23 U.S.C. 402(b)(1)(E))
- 7. The State will implement activities in support of national highway safety goals to reduce motor vehicle related fatalities that also reflect the primary data-related crash factors within the State, as identified by the State highway safety planning process, including:
  - Participation in the National high-visibility law enforcement mobilizations as identified annually in the NHTSA Communications Calendar, including not less than 3 mobilization campaigns in each fiscal year to –
    - o Reduce alcohol-impaired or drug-impaired operation of motor vehicles; and
    - o Increase use of seatbelts by occupants of motor vehicles;
  - Submission of information regarding mobilization participation in accordance with 23 CFR part 1300.11(d)(6)(ii);
  - Sustained enforcement of statutes addressing impaired driving, occupant protection, and driving in excess of posted speed limits;
  - An annual Statewide seat belt use survey in accordance with 23 CFR part 1340 for the measurement of State seat belt use rates, except for the Secretary of Interior on behalf of Indian tribes;
  - Development of Statewide data systems to provide timely and effective data analysis to support allocation of highway safety resources;
  - Coordination of Highway Safety Plan, data collection, and information systems with the State strategic highway safety plan, as defined in 23 U.S.C. 148(a).
     (23 U.S.C. 402(b)(1)(F))

- 8. The State will actively encourage all relevant law enforcement agencies in the State to follow the guidelines established for vehicular pursuits issued by the International Association of Chiefs of Police that are currently in effect. (23 U.S.C. 402(j))
- 9. The State will not expend Section 402 funds to carry out a program to purchase, operate, or maintain an automated traffic enforcement system. (23 U.S.C. 402(c)(4))

The State: [CHECK ONLY ONE]

■ Certifies that automated traffic enforcement systems are not used on any public road in the State;

OR

□ Is unable to certify that automated traffic enforcement systems are not used on any public road in the State, and therefore will conduct a survey meeting the requirements of 23 CFR 1300.13(d)(3) AND will submit the survey results to the NHTSA Regional office no later than March 1 of the fiscal year of the grant.

I understand that my statements in support of the State's application for Federal grant funds are statements upon which the Federal Government will rely in determining qualification for grant funds, and that knowing misstatements may be subject to civil or criminal penalties under 18 U.S.C. 1001. I sign these Certifications and Assurances based on personal knowledge, and after appropriate inquiry.

Signature Governor's Representative for Highway Safety

6/24/17 Date

Leif A. Dormsjo

Printed name of Governor's Representative for Highway Safety

## Government of the District of Columbia

## **Department of Transportation**







### MEMORANDUM

TO:

Beth Baker, NHTSA Region 3 Administrator

**FROM** 

Leif A. Dormsjo, Director, District Department of Transportation

Mayor's Representative for Highway Safety

SUBJECT:

Maintenance of Effort Certification

The District Highway Safety Office is the designated agency to receive NHTSA Federal funding and is required to submit certification regarding maintenance of Effort under 23 CFR13 Part 1300 Uniform Procedures for State Highway Safety Grant Programs.

In my capacity as the Mayor's Representative for Highway Safety, I hereby designate the District Department of Transportation as the lead District agency responsible for maintaining its aggregate expenditures for occupant protection programs, impaired driving programs, and traffic safety information system improvement programs above the average level of such expenditures in fiscal years 2014 and 2015.

Signature of Mayors Representative for Highway Safety

6/29/17

LEIF A. DORMSJO

Printed name of Mayor's Representative for Highway Safety

## Appendix B. 405 Applications

### APPENDIX B TO PART 1300 – APPLICATION REQUIREMENTS FOR SECTION 405 AND SECTION 1906 GRANTS

[Each fiscal year, to apply for a grant under 23 U.S.C. 405 or Section 1906, Pub. L. 109-59, as amended by Section 4011, Pub. L. 114-94, the State must complete and submit all required information in this appendix, and the Governor's Representative for Highway Safety must sign the Certifications and Assurances.]

cal Year: 2018
1

In my capacity as the Governor's Representative for Highway Safety, I hereby provide the following certifications and assurances -

- I have reviewed the above information in support of the State's application for 23 U.S.C.
   405 and Section 1906 grants, and based on my review, the information is accurate and complete to the best of my personal knowledge.
- As condition of each grant awarded, the State will use these grant funds in accordance with the specific statutory and regulatory requirements of that grant, and will comply with all applicable laws, regulations, and financial and programmatic requirements for Federal grants.
- I understand and accept that incorrect, incomplete, or untimely information submitted in support of the State's application may result in the denial of a grant award.

I understand that my statements in support of the State's application for Federal grant funds are statements upon which the Federal Government will rely in determining qualification for grant funds, and that knowing misstatements may be subject to civil or criminal penalties under 18 U.S.C. 1001. I sign these Certifications and Assurances based on personal knowledge, and after appropriate inquiry.

Signature Governor's Representative for Highway Safety

Date

Printed name of Governor's Representative for Highway Safety

## **Appendix C. CPS Yearly Activities**

WARD	Address of Event	Zip Code	Event	Lead Technician
1	LeDroit Park is a neighborhood	20001	Family Fun Day	Karen Gay
1	Marie Reed Elementary School	20009	Booster Seat Event	Arlinda Page
1	CentroNia' (Spanish)	20009	CPS Workshop monthly	Karen Gay
1	Mary's Center	20009	CPS workshop monthly	Karen Gay
1	COMP Clinic	20009	CPS Workshop monthly	Arlinda Page
1	Howard University	20060	Baby Shower (Bright Beginnings)	Karen Gay
1	Columbia Heights Educational Campus	20009	AmeriHealth Latino	Karen Gay
1	1420 Columbia Rd NW	20010	CentroNia' Summer Festival	Karen Gay
1	Children's Hospital	20010	Children's Day with EMSC	C. Lightfoot
1	2000 Rosemount Ave NW	20010	Rosemount Center	Arlinda Page
2	Metropolitan Police Department	20001	Car Seat Inspections	Flo Carter
2	Seaton Elementary School	20001	CPS Booster awareness	Karen Gay
2	Traffic Division	20001	CPS Daily Inspections	Arlinda Page
2	801 Mt Vernon Pl NW	20001	NBC 4 2500	La Gon Vene
2	1711 Rhode Island Ave NW	20036	YMCA	Karen Gay
2	1300 New York Ave NW	20005	IDB Employee Health Fair Veteran Admin- Summer Safety	Karen Gay
2	810 Vermont Ave NW	20420	Campaign	Karen Gay
2	National Capitol Collaborative	20001	Back to School Event	Karen Gay
2	DC Convention Center	20001	2015 Tots to Teens Expo	Arlinda Page
3	2nd District Police Department	20016	National Night Out	Danellia Santos
3	American University	20016	CPS Car Seat Check Event	Karen Gay
4	901 4th St NW	20001	4th District Community day	Arlinda Page
4	6200 2nd St NW	20011	National Children Center	Sylvia Perkins
5	Azeeze Bates Day Care Center	20002	Car seat Workshop	Karen Gay
5	La Petite Academy	20010	Annual EMSC Day	C. Lightfoot
5	Turkey Thicket Recreation	20017	Car seat Check event	C. Lightfoot
5	Kendall Demonstration School	20002	Annual 2 day Car Seat Check	Karen Gay
5	Providence Hospital	20017	CPS Weekly Inspections	Karen Gay
5	NCCI Resource Day	20001	CPS Car Seat Inspection	Karen Gay
5	1222 Rhode Island Ave NE	20018	Ola LaLuz del Mundo	Karen Gay
5	Providence Hospital	20017	Center for Life Baby Shower	Karen Gay
5	1731 Bunker Hill Road Ne	20017	June Fair Family Community	Karen Gay
5	Galluduate University	20002	New Heights Summit	Lawrence Curtis
5	45 P St NW	20001	Traffic Safety Day with A.R.E	Karen Gay
5	601 Edgewood St NE	20017	Edgewood/Brookland Safety Day Noyes Educational Campus Safety	Arlinda Page
5	2725 10th St. NE	20018	Day Browne Education Campus Health	Arlinda Page
5	850 26th St NE	20002	Fair	Arlinda Page

5	1400 E St NE	20002	Family Day God of Prophecy	Karen Gay
6	Senator side of the Hill	20002	Car Seat Check Day on the Hill	Bob Walls
6	DC Child and Family Services A. Office of the State Superintendent of	20003	CPS Training twice a month PreCaution in Transporting	Karen Gay
6	Education	20002	Children	Karen Gay
6	Child and Family Services Admin	20003	CPS Workshop	Karen Gay
6	19th and E Streets SE	20002	36th Annual Peter Bug Day Festival	Karen Gay
6	At The Yards	20003	Auto Alliance Dept. of Consumer & Regulatory	Karen Gay
6	1104 4 <sup>th</sup> SW	20024	Affairs	Karen Gay
6	DC Stadium Armory	20002	DPW Truck Touch	Karen Gay
7	Engine 30	20019	Car Seat Inspections	Stephanie Lewis
7	Educare of Washington DC	20019	Booster Seat Event	Karen Gay
7	Assembly of Saints, CDC	20019	CPS Workshop for Parents	Karen Gay
7	272 53rd St NE	20019	Clay Terrace Health Day Community Child Development	Karen Gay
7	4021 Minnesota Ave SE	20019	Center	Karen Gay
7	5600 Eads St NE	20019	Drew Elementary	Arlinda Page
8	Big Mama's Children Center	20032	Car Seat Inspection Day	Vene Lagon
8	Zena's Child Development Center	20032	Annual Car Seat Check Day	Arlinda Page
8	Excel Academy Public Charter School	20020	Booster Seat Check	Karen Gay
8	St Timothy Development Center	20020	Annual Car Seat Check Day	Sylvia Perkins
8	Apple Tree Early Leaning Center	20020	Booster Seat Program	Karen Gay
8	Vision of Victory Child	20020	CPS Booster Seat Fitting	Arlinda Page
8	Children Clinic on MLK	20020	CPS Checkup Event	Sylvia Perkins
8	Bald Eagle Recreation Center	20032	Safety Day Excel Academy Public Charter	Sylvia Perkins
8	2501 Martin L King Ave SE	20020	School	Sylvia Perkins
8	6200 Martin L King Ave SE	20032	National Children Center	Sylvia Perkins Cynthiana
8	2501 Good Hope Road SE	20020	Bring it All Together Apple Tree Institute (Parklands	Lightfoot
8	2011 Savannah Street SE	20020	Campus)	Karen Gay Cynthiana
8	2118 Ridge Crest St SE	20020	Capitol View YMCA	Lightfoot
8	1901 Mississippi Ave SE	20020	Med Star MCO Family Day	Sylvia Perkins

## **INSPECTION STATIONS**

Ward	Location	Address	Zip	Technicians
1	Children's Hospital	111 Michigan Ave NW	20010	Sylvia Perkins
1 2	3 <sup>rd</sup> District Police MPD Traffic Division	1620 V St NW 501 New York Ave NW	20009 20002	Donna Allen Arlinda Page, Darryl Priestly
4	4th District Police Station	6001 George Ave NW	20011	Medgar Webster
3 5	2nd District Police Department Providence Hospital	3220 Idaho St NW 1150 Varnum St NE	20016 20017	Danellia Santos Karen Gay

6	DC Dept of Motor Vehicle	1101 Half St SW	20024	Larry Walker
7	6th District Police Department	100 42nd St SE	20019	Philip Lanciano
8	MPD Training Academy	4665 Blue Plains Dr SW	20032	Renee Kennedy
8	THEARC	1901 Mississippi Ave SE	20020	Sylvia Perkins