Safe Driving Skills for Life: Resource Pathways

✓ Driver Wellness: health, skills, knowledge, choices

- Flexibility Fitness –in regards to driving [https://www.aaafoundation.org/sites/default/files/flexibility_brochure.pdf]
- Brain Games [www.aarp.org/health/brain-health/]
- Making your vehicle “fit” YOU
  - CarFit (AAA, AARP & AOTA) [www.car-fit.org]
  - Smart Features – finding the right vehicle (AAA) [http://seniordriving.aaa.com/smartfeatures]

✓ Recognizing Change / Options

- Self assessments
  - Roadwise Review (AAA) [https://www.aaafoundation.org/roadwise-review-online]
  - Check Your Performance (AAA) [http://seniordriving.aaa.com/evaluate-your-driving-ability/self-rating-tool]
  - Driver practice - ADEPT Driver - [http://www.adeptdriver.com/products/lifelong-driver/]


- Health issues and effects on driving –video clips [http://www.nhtsa.gov/DrivingSafety/OlderDrivers/Video+Toolkit+On+Medical+Conditions]

- Medication assessment
  - Roadwise Rx (AAA) [http://www.roadwisexr.com/]

- Driver refresher courses
  - Smart Driver [www.aarp.org/driversafety]
  - RoadWise Driver [www.aaa.com/drivertraining]

- Professional evaluation
✓ Family Conversations...When, what & how!
  ▪ We Need to Talk… (The Hartford) www.safedrivingforalifetime.com
    □ Including Transportation Cost

✓ Transition from Driving...Planning your options
  ▪ Getting There Worksheet – (The Hartford) www.safedrivingforalifetime.com ppg 17 & 18, We Need to Talk
  ▪ Types of Rides
    □ Family / friends
    □ Local faith-based or non-profits – volunteer drivers
    □ Gov't demand-response (local aging & disability) / Paratransit
    □ Private via adult day centers, housing, stores, businesses
    □ Taxi / car service / Uber / Lyft (some have voucher programs to offset costs)
    □ Public transit (train, subway, light rail, bus)
  ▪ Dealing w/ Insistently Unsafe Drivers
    □ Review common dangers
    □ Suggest / refer to licensing agency medical review process
    □ Recommend "no driving" prescription
    □ Vehicle-related tactics (The Hartford) www.safedrivingforalifetime.com
      □ Hiding / filing down / replacing keys
      □ Disabling the car
      □ Remove the car by loaning, giving, selling, or send car for "repairs" with no return

✓ Primary Resources
  ▪ AARP Driver Safety http://www.aarp.org/home-family/getting-around/driving-resource-center/driving-welcome/
  ▪ AAA Senior Driving www.seniordriving.aaa.com
  ▪ The Hartford www.safedrivingforalifetime.com
  ▪ CarFit – free community program to help understand safety features of your car & how to adjust car to best fit YOU! www.car-fit.org
  ▪ Clinicians Guide to Assessing & Counselling Older Drivers, 3rd Ed. (including many worksheets of patient and caregiver materials) http://www.nhtsa.gov/DrivingSafety/OlderDrivers
  ▪ Clearinghouse for Older Road Users (NHTSA & FHWA) https://www.roadsafeseniors.org/
Safe Driving Skills for Life / Resource Pathways

Individual

Family / Caregiver

Health Care / Clinicians

Law Enforcement

Driver Safety Programs & Memberships

Seeker Pathways

Transportation Planning & Programs

Occupational Therapists / Driving Rehab Specialists

Medical Review Process for Drivers

Senior Programs & Services

Health Programs

Community / Social Workers

Alternative Transportation Services

Highway Design & Traffic Safety Engineering

Medical Review Process for Drivers

Senior Programs & Services

Transportation Planning & Programs

2016 Lifesavers: Statewide Strategies for Supporting an Aging Population

Comprehensive Plan
- Program should address driver licensing and medical review of at-risk drivers, medical and law enforcement education, roadway design, and collaboration with social services and transportation services providers (to include increasing awareness of older driver transportation options, such as ride programs or transit services)
- Key components of effective program – collaboration with the groups affected, coordination of efforts, and communication with those impacted; NHTSA recommends establishing working group to encourage & facilitate
- Integrate ODS into State strategic highway safety plans and other related activities, including impaired driving, occupant protection, and especially driver licensing programs, and coordinate with other highway safety projects

Program Evaluation, Data & Analysis:
- Identify the frequency and types of older driver crashes, analyze all crash & citation data, and use data to build new programs or adjust existing programs to increase effectiveness
- Develop system to analyze data for improvement of the medical review process, to include number of cases, referral source of the cases, case disposition, and future crash involvement or referrals of restricted drivers compared with the general population
- Regularly conduct analyses and evaluation of the referrals that come through the medical review system to determine whether procedures are in place to appropriately detect and regulate at-risk drivers
- Conducting and publicizing statewide surveys of public knowledge and attitudes about older driver safety, and evaluating the effectiveness of educational programs by measuring behavior and attitude changes

Traffic Engineers – Roadway Design:
- Consider ODS as emphasis area in SHSP if data analysis identifies as an area of concern
- Develop and implement plan for deploying guidelines and recommendations to accommodate older drivers and pedestrians
- Develop & implement communications and educational plan for assisting local entities in deployment of guidelines and recommendations to accommodate older drivers & pedestrians

Internal to licensing agency:
Recommended driver licensing policies & practices
- Establish a Medical Advisory Board (MAB), consisting of a range of medical professionals, to provide policy guidance to the driver licensing agency to implement
- MVA Access to Medical Expertise: The medical review function of the DMV should include staff with medical expertise in the review of medically referred drivers
- Medical review policies should align with the Driver Fitness Medical Guidelines (Driver Fitness Medical Guidelines) published by NHTSA and the AAMVA
- Healthcare provider immunity for referrals: All medical and emergency medical service providers who provide a referral regarding a driver, made in good faith to the driver licensing authority, should have immunity from civil, criminal, and administrative liability
- MVA staff observational training: Train DMV staff, including counter staff, in identification of medically at-risk drivers and referral of those drivers for medical review
- **Licensing Restrictions**: Consider licensing restrictions as a means of limiting the risks presented by individual drivers while allowing for the greatest autonomy possible
- **In person license renewal**: In-person renewal should be required of individual drivers over a specified age if the State determines through analysis of crash records that there is a problem with older driver crashes
- Provide a simple, fast, and if possible, very low cost or free way for individuals to convert their **driver licenses to identification cards**; get word out on how & when appropriate
- Provide information on **transportation options** and community resources to drivers who are required to submit to medical review of their licenses

**External to licensing agency: Recommended communications program for effective identification of medically at-risk drivers**

**Medical Providers Outreach, Education & Integration:**
- **Easy physician referral**: Facilitate referrals of medically at risk drivers to the driver licensing authority for review, and make medical referral information and forms easy to find on the DMV Web site
- Establish and implement a **communications plan** for reaching medical providers
- Disseminate **educational materials** for medical providers. Providers should include physicians, nurses, occupational therapists, and other medical professionals who treat or deal with older people and/or their families
- Facilitate the provision of **Continuing Medical Education (CME) credits** for medical providers in learning about driving safety
- Outreach & training for medical providers (eg, physicians, nurses, etc) in making referrals of medically at-risk drivers and in finding resources on functional abilities and driving

**Law Enforcement Outreach, Education & Integration:**
- **Easy law enforcement referral**: An easy way for law enforcement officers who are in the field to make referrals of medically at-risk drivers to the driver licensing authority
- A **communications plan** for outreach to law enforcement officers with information on medically at-risk drivers
- Training and education for law enforcement officers that includes emphasis on “writing the citation” for older violators, identifying the medically at-risk driver, and making referrals of the medically at-risk driver to the driver licensing authority

**Social Services/Aging Services Outreach, Education & Integration:**
- Collaborate with State Units on Aging and other **social services providers** on providing support related to older drivers who are transitioning from driving
- Collaborate with State DOT-Transit offices & local **planning** organizations to provide information at the local level on how individuals can access transportation services
- Develop **joint communications** strategies and messages related to driver transitioning

**Outreach, Education & Integration to Public:**
- Develop and implement **communication strategies** directed at specific high-risk populations as identified by crash and population based data. States should consider a range of audiences, including families and friends of at-risk drivers. Communications should highlight and support specific policies and programs underway in the States and communities. Programs and materials should be culturally-relevant, multi-lingual as necessary, and appropriate to the target audience
- Establish **working group** of State & local agencies and organizations that have interest in older driver safety and mobility with the goal of developing common message themes
- **Focus** the communication efforts on the support of the overall policy and program