

South Dakota

2007

Strategic Highway Safety Plan



Prepared by the South Dakota Department of Transportation

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STATE OF SOUTH DAKOTA
M. MICHAEL ROUNDS, GOVERNOR

September 2007

My Fellow South Dakotans:

When someone in our state dies in a traffic crash, the sense of loss extends beyond the family and extended family to all South Dakotans. This is especially true when we lose young people. Traffic crashes are the No. 1 cause of death for South Dakotans 14 to 24 years old. South Dakotans lose neighbors, relatives and friends in traffic crashes at a higher rate than almost all other states.

We can reduce these losses by doing what we already do so well: work together to solve a problem. I support this *Strategic Highway Safety Plan* as an interagency, multidisciplinary plan for greater cooperation among the South Dakota public and private organizations wanting to reduce needless deaths on our highways.

Personal responsibility also has a role in saving lives, including the choices made by drivers, passengers, pedestrians, cyclists and public safety professionals.

This plan focuses the State's safety partners on a coordinated and comprehensive effort to improve highway safety. The goals of the plan are increased cooperation and communication among local, state, tribal and federal agencies; engineers; law enforcement officials; educators; emergency medical services officials; metropolitan planning organizations; safety advocacy groups; and others concerned with highway safety in South Dakota. It offers proven and experimental strategies to reduce traffic crashes, injuries and fatalities.

We lost 191 neighbors, relatives, friends and visitors in 2006. We can reduce this number. Thank you for your efforts on behalf of highway safety.

Sincerely,

M. Michael Rounds

How South Dakota's *Strategic Highway Safety Plan* was developed

This South Dakota *Strategic Highway Safety Plan* draws heavily on traffic safety efforts and goals outlined in the annual [Highway Safety Plan](#) put out by the South Dakota Department of Public Safety's (DPS) Office of Highway Safety, the longtime lead agency on traffic safety in South Dakota. The most recent edition is dated 2007. The [Highway Safety Plan](#) is the product of continual consultation with the Roadway Safety Advisory Committee, a group of more than 60 private and public agencies with interests in preventing motor vehicle crashes, injuries and fatalities.

The [Highway Safety Plan](#) and this *Strategic Highway Safety Plan* draw on crash statistics published in the annual [Motor Vehicle Traffic Crash Summary](#) prepared by the DPS Accident Records Office. These statistics show that drunk drivers, run off road crashes, speeding, lack of safety restraints and young drivers are major factors in fatal and injury crashes. Statistics pertaining to each factor are included in the overview section for each of these safety emphasis areas.

The same safety issues behind South Dakota's crash statistics surfaced as areas needing action in breakout sessions at the Transportation Safety Conference held in Pierre in April 2006. Many Roadway Safety Advisory Committee members participated in these sessions.

This *Strategic Highway Safety Plan* cites South Dakota Department of Transportation (DOT) research published in [Factors Contributing to South Dakota Crash and Fatality Rates](#) in 2005 to highlight the incompleteness of current crash data collection in South Dakota and similar problems in neighboring states. This study led to a subsequent study that got underway in June 2006, [Improving Motor Vehicle Crash Reporting on Nine South Dakota Indian Reservations](#). Other recent SDDOT research that has influenced South Dakota traffic safety policies and actions includes: [Development of South Dakota Accident Reduction Factors](#) (1998), [Identification of Abnormal Accident Patterns at Intersections](#) (1999), [Identification of Methods for Truck Crash Reduction](#) (1999), [Unified Reporting of Commercial and Non-Commercial Traffic Accidents](#) (2001) and [Updating South Dakota Crash Frequencies and Crash Reduction Factors](#) (2004).

The choice of data analysis and data collection as areas of safety emphasis is derived from the findings of these research efforts and the judgment of experienced traffic safety staff in the DPS and DOT. We need to have accurate numbers and need to better understand what those numbers tell us about crash causes.

The *Strategic Highway Safety Plan* was written by SDDOT staff and circulated among Department managers for comment. Federal Highway Administration (FHWA), National Highway Traffic Safety Administration (NHTSA) and Federal Motor Carrier Safety Administration (FMCSA) officials reviewed the draft document. Current members of the

Roadway Safety Advisory Committee and the state's metropolitan planning organizations then were contacted for input, which has been incorporated in the final plan.

Roadway Safety Advisory Committee members

(Additional agencies are continually added)

South Dakota State Agencies

Attorney General's Office
Department of Education
Department of Health
Department of Public Safety
 Highway Patrol
 Office of Emergency Medical Services
 Office of Highway Safety
 Driver Licensing Program
Department of Revenue and Regulation
Department of Social Services
Department of Tourism and State Development
Department of Transportation
Governor's Office
Unified Judicial System
Sanford School of Medicine, University of South Dakota
S.D. Kids Count, University of South Dakota
S.D. Local Transportation Assistance Program, South Dakota State University
Northern State University alcohol and drug program

Federal agencies

Federal Highway Administration
S.D. Urban Indian Health
Federal Motor Carrier Safety Administration
National Highway Traffic Safety Administration

Local and private agencies, organizations and officials

AAA South Dakota	S.D. Air National Guard Safety Office
AARP	S.D. Assn. of City Commissioners
ABATE	S.D. Assn. of Cooperatives
Associated General Contractors	S.D. Assn. of County Highway Superintendents
City County Alcohol and Drug Programs	S.D. Assn. of Towns and Townships
City engineers	S.D. Beer Wholesalers
Custom Harvesters	S.D. Coalition for Children
DARE	S.D. Council of Mental Health Centers, Inc.
Early Childhood Connections	S.D. Emergency Medical Services for Children
Emergency education	S.D. Municipal League
Emergency response agencies	S.D. Police Chiefs' Assn.
Gold Wing Road Riders Association	S.D. Retail Liquor Dealers Assn.
Law enforcement training	S.D. Teen Court Assn.
Midamerica Motoplex	Sturgis Chamber of Commerce
Mothers Against Drunk Drivers (MADD)	Sturgis Motorcycle Rally
Native American Advocacy Project	
Outdoor Motorsports	
Public works directors	
Sioux Falls Safe Kids	
S.D. Agri-Business Assn.	

Current traffic safety efforts in South Dakota

Overview

South Dakota state agencies have worked to improve highway safety for decades. The departments of Public Safety and Transportation increasingly cooperate in traffic engineering and law enforcement efforts. The Office of the Attorney General and departments of Health, Social Services, Education, and Revenue and Regulation promote highway safety. Tribes, counties, cities, metropolitan planning organizations, schools, and various law enforcement agencies plan and take actions within their jurisdictions. In some cases these organizations work together toward the goal of preventing traffic fatalities and injuries. In others, the organizations pursue individual goals.

In South Dakota, public agencies come together with private traffic safety groups at meetings of the Roadway Safety Advisory Committee. This interagency, multidisciplinary committee has been a model for many other states. We will expand and improve upon this model in the South Dakota *Strategic Highway Safety Plan*.

This section provides summaries of publicly funded traffic safety efforts in South Dakota, focusing on the State's central role in providing funds, manpower and technical assistance.

South Dakota State Government Traffic Safety Efforts

Department of Public Safety

The Department of Public Safety has long been the lead agency in highway safety efforts. Its Office of Highway Safety develops the annual [Highway Safety Plan](#) with broad stakeholder input and submits it to NHTSA. The office coordinates driver education efforts through media purchases and press releases, and is a resource for other private and public groups interested in traffic safety.

The South Dakota Highway Patrol plays a large role in implementing this plan, especially in traffic law enforcement.

The Motor Carrier Services Unit prepares a commercial vehicle safety plan that is submitted to the FMCSA. Motor Carrier Services works collaboratively with the Department of Revenue and Regulation, DOT and the South Dakota Trucking Association to plan and participate in FMCSA's Commercial Vehicle Information Systems and Networks (CVISN) program. CVISN's goal is to boost the productivity and safety of commercial vehicles through use of advanced information systems and equipment.

The Office of Highway Safety, in a partnership with the DPS Office of Emergency Medical Services, supports ambulance services and training in South Dakota. In this fiscal year, 3,000 ambulance personnel will get refresher training from the Office of Emergency Medical Services. This training includes basic trauma life support or pre-hospital trauma life support, recertification of emergency medical technicians, defensive driving courses for ambulance or rescue truck personnel, and training of new ambulance personnel and first responders. Training schedules can be accessed at: http://www.state.sd.us/dps/EMS/EMT_Information/Courses.htm

The DPS Driver Licensing Program administers tests and issues drivers' licenses to resident motorists, bus drivers and commercial vehicle drivers. This program also maintains the driving records for all South Dakota drivers, including the recording of all revocations, suspensions, cancellations or disqualifications. The program notifies holders of the drivers' licenses of the changes.

The Office of Accident Records receives and processes motor vehicle traffic crash reports. The records are compiled and used to create the statistics necessary to quantify and identify problems, develop countermeasures and evaluate those countermeasures. This office publishes the annual South Dakota [Motor Vehicle Traffic Crash Summary](#).

Department of Transportation

Traffic safety is an integral concern as road design, traffic engineering and highway maintenance decisions and activities are made and performed by Department of Transportation managers and employees. Formally, the DOT addresses safety concerns in the Statewide Intermodal Long-Range Plan, Statewide Transportation Improvement Program (STIP), Roadway Safety Improvement (RSI) Program, Railroad Crossing Improvement (RCI) program, Intelligent Transportation Systems program, and research program—all coordinated with the Federal Highway Administration. DOT staff members also are longtime, active members of the Roadway Safety Advisory Committee, which advises the Office of Highway Safety on the [*Highway Safety Plan*](#) and performs other functions directed toward improving highway safety.

The Department identifies crash-prone locations annually through the RSI program. Crash-prone locations are plotted on crash maps using three consecutive years of crash record data. Local government officials, DOT Region personnel and Highway Patrol officials also inform the Traffic and Safety Engineer of locations requiring investigation. Once locations are identified, crash records are examined for additional information about the number and type of crashes. If the number of crashes is high, collision diagrams are drawn to determine crash patterns. If traffic volumes are available, crash rates are determined.

A review team performs an on-site inspection of a location when warranted by the crash pattern, crash rate of 2.0 or greater, and a benefit/cost ratio of 1:1 or more. The review team then recommends any safety improvement for the location as an RSI project in the STIP.

Traffic safety is an integral part of the design process for projects undertaken for other reasons, such as adding capacity or improving the road surface. Engineers within the Office of Road Design examine the crash data for the project locations and incorporate countermeasures in the new designs.

DOT's Traffic and Safety Engineer works with local governments on signing and safety issues. This work is funded by a federal 402 highway safety grant provided by the Office of Highway Safety. Local governments can request assistance from the State to determine signing needs for local roads. The Traffic and Safety Engineer also will recommend other safety improvements for local roads. The State uses 402 funds to reimburse local governments for 90 percent of the cost of sign materials.

Road Safety Audit (RSA) and Road Safety Audit Review (RSAR) processes are being initiated at DOT. In the RSA process, an independent review team analyzes plans for safety-related deficiencies and discusses those issues with the design team while the project is still in the design stage. The RSAR process also uses an independent team to conduct an on-site roadway inspection and recommend immediate, short-term and long-term safety improvements to the entity responsible for the road.

The DOT receives about \$2 million annually for the RCI program for the implementation of safety improvements at public crossings of active railroad tracks. There are currently over 1,800 public at-grade intersections and 94 separation structures eligible for this financial assistance statewide. Funds are made available for this program with a match ratio of 90/10, with the roadway authority typically providing the 10 percent match.

RCI projects can include the installation or upgrading of active highway-rail grade crossing signal systems, crossing approach and surface improvements, visibility and geometry improvements, signs and pavement markings, and grade crossing elimination/consolidation. One-hundred percent funding or an incentive payment may be available for an elimination/consolidation project.

Potential projects for the RCI program are identified in various ways, such as a request from the roadway authority or railroad; crossings that require attention due to highway construction; crossings that are crash scenes; and crossings that are rated high by index rating formula. Projects eligible for these funds are ranked and programmed according to the allowable budget. The RCI projects are listed in the annual STIP.

Region Traffic Engineers and staff continually review road locations of concern and act to improve safety. Region personnel work closely with local government officials and the public to address State highway concerns. Signing and pavement marking improvements are done regularly. DOT has increased efforts to replace worn-out signs with new signs made of brighter and more reflective sign sheeting. Region personnel continually work to provide brighter and more durable pavement markings.

DOT's Office of Transportation Inventory Management assembles high-quality pavement surface, roadway geometrics, geographic and other engineering data to improve the safety and efficiency of the highway system.

Finally, new information technologies are improving traffic safety. The recently implemented 511 road weather information phone number, and a corresponding Internet service, have been heavily used, especially during winter weather events. The 511 service helps travelers decide whether or not to set out on winter roads. Publicizing this important service has been part of DOT's external communications efforts.

The ongoing deployment of a Maintenance Decision Support System (MDSS) should have safety, environmental and logistical benefits. The MDSS will use environmental sensor stations and sensors embedded in pavements to transmit weather and road condition information to maintenance crews. DOT personnel will use the MDSS for winter maintenance recommendations, such as when to send snowplows out, what snow and ice control treatments to use, and the rate treatments should be applied.

Office of the Attorney General

As part of the "Parents Matter" program, the South Dakota Attorney General has committed staff time to assisting states attorneys in more aggressive prosecution of individuals who sell alcohol to minors. "Parents Matter" is a combined effort of the

Attorney General's Office, the Department of Public Safety and the Department of Human Services to equip parents to curb teenage drinking and driving.

The 24/7 Sobriety Project started in January 2005 as a way to detect alcohol use by certain individuals charged with drunk driving. The project started with twice-a-day tests for participants and has expanded to include use of ankle bracelets that can sense the presence of alcohol when placed near skin. The Attorney General announced in September 2006 that 25 of the bracelets, paid for by NHTSA, will be used to monitor defendants in rural areas where twice-a-day testing is more difficult to obtain. The 2007 Legislature passed a measure expanding this program.

Finally, the Attorney General's Office hosts a Traffic Safety Resource Prosecutor to help South Dakota prosecutors effectively prosecute traffic safety violations. This position is funded by a grant through the DPS Office of Highway Safety.

Department of Education

The Department of Education monitors the training given to school bus drivers. The agency also certifies driver education instructors.

Department of Health

The Department of Health promotes good safety habits for children walking to and from school. It also reports certain data and distributes information relating to traffic safety.

Department of Social Services

The South Dakota Department of Social Services administers Gov. Mike Rounds' child seat program, [Project 8](#). [Project 8](#) is South Dakota's effort to make sure children are in the best seats for their height and weight until they are at least eight years old. At eight years old, most children can safely wear a seat belt because they are taller than 4'9" and weigh more than 80 pounds. Child seats are distributed to income-eligible parents and their children. Certified car seat technicians in 38 counties help educate parents and others about car seats and their proper installation. They also help parents practice installing car seats.

South Dakota crash statistics

South Dakota has made progress in reducing injury crashes and fatal crashes in which alcohol was involved.

In 2004, 36.7 percent of fatal crashes involved alcohol use. It is the lowest percentage since 1979, the starting date for reliable statistics for alcohol-related fatal crashes. The worst year for alcohol-related fatal crashes was 1981, when 100 of 162 fatal crashes, or 61.7%, were alcohol-related.

The number of injury crashes in South Dakota has trended downward since 1995, when the secondary law requiring front-seat passengers to wear safety belts went into effect. The primary law requiring passengers under 18 to wear seat belts went into effect in 2001. A total of 5,543 injury crashes were reported in 1995. The number was 4,346 in 2005. That's a decline of 21.6 percent.

And yet South Dakota's fatality rate is consistently higher than most other states in the U.S., and most of its neighboring states. South Dakota had the second-highest fatality rate per 100 million vehicle miles traveled (VMT) in the nation in 2003 and 2004, according to the latest NHTSA figures. Only Montana had a higher fatality rate in 2003. Only Mississippi's rate exceeded South Dakota's in 2004. Considered by total population, South Dakota's fatality rate in 2005 also was higher than the national average, 24 per 100,000 in population. The national average is 14.7 per 100,000 in population.

When measured by vehicle miles traveled, South Dakota's fatality rate contrasts significantly from those of its neighboring states, as you can see in Table 1.

Table 1

South Dakota and adjacent states:
Fatal crashes per 100 million vehicle miles traveled (VMT), 2001-2004

State	2001	2002	2003	2004
South Dakota	2	2.12	2.38	2.24
Iowa	1.51	1.51	1.48	1.45
Minnesota	1.51	1.51	1.48	1.45
Montana	2.3	2.59	2.41	2.04
Nebraska	1.36	1.64	1.54	1.32
North Dakota	1.51	1.51	1.48	1.45
Wyoming	2.16	1.95	1.79	1.77

Source: National Center for Statistics and Analysis of the National Highway Traffic Safety Administration

Using the fatality rate per 100,000 population, South Dakota still ranked higher than most neighboring states in 2005. See Table 2.

Table 2

South Dakota and neighboring states:
Fatalities per 100,000 population, 2005

<u>State</u>	<u>2005</u>
Wyoming	33.4
Montana	26.8
South Dakota	24.0
North Dakota	19.3
Nebraska	15.7
Iowa	15.2
Minnesota	10.9

Source: National Center for Statistics and Analysis of the National Highway Traffic Safety Administration

In South Dakota, 61% of all fatal crashes in 2005 involved a vehicle leaving the road. A typical run off the road crash involves some or all of these factors: a young driver, drinking passengers or driver, driver and/or passengers not wearing seat belts, and a driver exceeding the speed limit.

Drunken driving is the No. 1 contributing factor in South Dakota traffic deaths, followed in rank order by running off the road and exceeding the speed limit. As mentioned in the introduction, traffic crashes are the No. 1 cause of death for residents aged 14 to 24 years, and younger drivers are overrepresented in our crash statistics.

Crashes with animals rarely are fatal, but they are numerous. Crashing into an animal is the first harmful event in 30.8 percent of total South Dakota crashes. Often the animal is a deer, but the statistic includes wildlife and domesticated animals. Only crashes with other motor vehicles are more common as the first harmful event.

Our data about fatal crashes are accurate, but, because of underreporting of Native American crashes on Indian reservations, South Dakota's crash information is incomplete. Underreporting also is a problem in other states that have sovereign tribal governments and lands within their borders.

DOT's Office of Research is doing a study aimed at better collection of data about these crashes on our Indian reservations. This study and its progress are described in the "Safety Emphasis Areas" section of this plan under "Improving data collection."

Table 3

South Dakota yearly comparison of fatal crashes, injury crashes and total crashes, 1995-2005

<u>Year</u>	<u>Injury Crashes</u>	<u>Fatal Crashes</u>	<u>Total Crashes</u>	<u>Deaths</u>
1995	5,543	140	19,362	158
1996	5,653	142	21,653	175
1997	5,478	128	20,899	148
1998	5,112	149	19,735	165
1999	5,032	136	20,019	150
2000	5,252	150	19,475	173
2001	4,888	154	17,699	171
2002	4,702	159	17,335	180
2003	4,781	173	18,018	203
2004	4,581	166	17,163	197
2005	4,346	158	16,254	186

Source: 2005 South Dakota Motor Vehicle Traffic Crash Summary.

South Dakota's goals for reducing fatalities

This first *Strategic Highway Safety Plan* adopts goals very close to those already set by the DPS 2007 [*Highway Safety Plan*](#):

In the short term:

- Reduce the 2005 rate of 2.29 fatalities per 100 million VMT to 1.55 per 100 million VMT, slightly above the current national average, by 2010.
- Reduce the number of total fatalities by five percent annually through 2010 to 144, a total drop of 42 fatalities, or 23 percent, from the total of 186 in 2005.
- Reduce the total number of crashes by five percent annually through 2010, or from 16,254 in 2005 to 12,577 in 2010.

In the long term:

- Reduce the 2005 rate of 2.29 fatalities per 100 million VMT to 1.0 per 100 million VMT by 2015. Based on DOT's projected 2015 VMT of 9,895,000,000, this would further reduce total fatalities to 99, or a 53 percent drop from 2005.

Core strategies for achieving these goals

South Dakota's *Strategic Highway Safety Plan* uses four core strategies to reduce highway fatalities, injuries and collisions.

Education

Driver education is used to establish behaviors that keep people safe on our highways. Educational strategies also aim at changing behaviors that contribute to crashes, such as drunk driving, speeding, lack of safety restraint usage and inattentive driving. Educational efforts also can make good drivers better at using antilock brakes and other safety technologies.

Enforcement

Enforcement of traffic laws boosts compliance. Greater compliance with seat belt laws, laws against drinking and driving, and speed limits will reduce fatalities, injuries and crashes.

Engineering

Road design affects driver behavior and the severity of crashes. Modification of the roadway can be a solution in some crash-prone locations. Increasing the number of Road Safety Audits on key projects also could have benefits.

Emergency Services

The difference between a fatal crash and an injury crash can be the length of time it takes to transport victims to appropriate medical care and the quality of care victims receive in transit.

Safety emphasis areas

South Dakota will continue to reduce traffic deaths, injury crashes and total crashes on all roads and highways by focusing on the following nine safety emphasis areas.

1. Impaired drivers.
2. Occupant protection.
3. Run off road crashes and head on collisions.
4. Preventing crash fatalities and injuries among young drivers.
5. Speed management.
6. Emergency response services.
7. Preventing deer-auto collisions.
8. Improving data collection.
9. Improving data analysis.

Impaired drivers

Impaired drivers are the No. 1 cause of fatal crashes in South Dakota

Overview

The problem of the impaired driver, often a drunk driver, persists in South Dakota in spite of educational efforts, high-visibility enforcement, changing social attitudes and serious legal consequences for those convicted. Drunk driving was the No. 1 contributing cause in fatal crashes in South Dakota in 2005. Alcohol use was a factor in the crash deaths of 74 people in 2005, or 39.8 percent of all highway fatalities. Alcohol use was a contributing cause in crashes that injured 818 others.

Forty-three percent of fatal crashes in South Dakota had some alcohol involvement, compared to a national average of 39 percent, according to 2005 NHTSA data. When this category is narrowed to crashes where the driver had a blood-alcohol content of .08 percent or higher, the percentage of fatal crashes moves down only two points to 41 percent. The national average for fatal crashes involving a blood-alcohol content level of .08 percent or more is 33 percent.

It should be noted here that South Dakota is penalized by the federal government for not being in compliance with the federal repeat offender law, Section 164. This law requires states to enact and enforce a law establishing minimum penalties for repeat intoxicated drivers, including suspension of driver's license for at least a year. Current South Dakota law gives judges leeway to allow individuals with a second DUI conviction to continue driving to work, school or counseling, if they complete a court-approved chemical-dependency program and show proof of financial responsibility. Judges also have the authority to issue work permits to individuals with multiple DUIs, provided the individual totally abstains from alcohol.

Goal

Reduce alcohol-related fatalities by five percent per year over five years, 2008-2012.
Reduce alcohol-related injuries by five percent per year over five years, 2008-2012.

Strategies

In its 2007 [Highway Safety Plan](#), the DPS states that additional resources will be spent to expand enforcement and educational efforts, and to work with the media to increase public awareness of these efforts. Crash data will be used to ensure that high-risk populations and geographic locations are targeted. Law enforcement will partner with local, State, federal and tribal agencies to promote safe driving. A U.S. Dept. of Justice “Enforcing Underage Drinking Laws” grant, 402 highway safety funds, 410 alcohol funds and 164 money that is included in our hazard elimination funds will be used to carry out this work.

South Dakota law enforcement agencies will continue to focus enforcement efforts on removing impaired drivers from roads. The DPS will implement a plan to provide essential equipment to law enforcement agencies for weekend alcohol checkpoints, public education, community projects, school-based events, activities promoting judicial training regarding alcohol-related cases, and alcohol intervention.

Funding will also help the State provide technical assistance and support to private antidrinking and antidrug organizations such as Mothers Against Drunk Driving (MADD) and Students Against Destructive Decisions (SADD).

The South Dakota Highway Patrol will partner with local law enforcement agencies in the use of three Blood Alcohol Testing (B.A.T.) units for sobriety checkpoints and special saturations. The B.A.T. unit is a cube van equipped to be a testing facility for blood alcohol levels and a mobile jail for individuals arrested for driving while intoxicated and other violations. Individuals will be processed, tested, recorded and jailed at the checkpoint. The intent of the B.A.T. mobile is to keep officers at the scene so that enough manpower is kept on-site to run the DUI detection operation. Each of the three Highway Patrol districts will schedule a minimum of eight sobriety checkpoints and special impaired driving operations in FY07.

Performance measures

Statistics compiled in the annual [Motor Vehicle Traffic Crash Summary](#) will be used to check progress on objectives.

Occupant protection

Safety restraints laws are saving lives, but increased restraint use could prevent even more deaths and injuries

Overview

Safety restraints are an effective way to reduce the risk of death and injuries in motor vehicle crashes. South Dakota's seat belt laws have been strengthened in recent years.

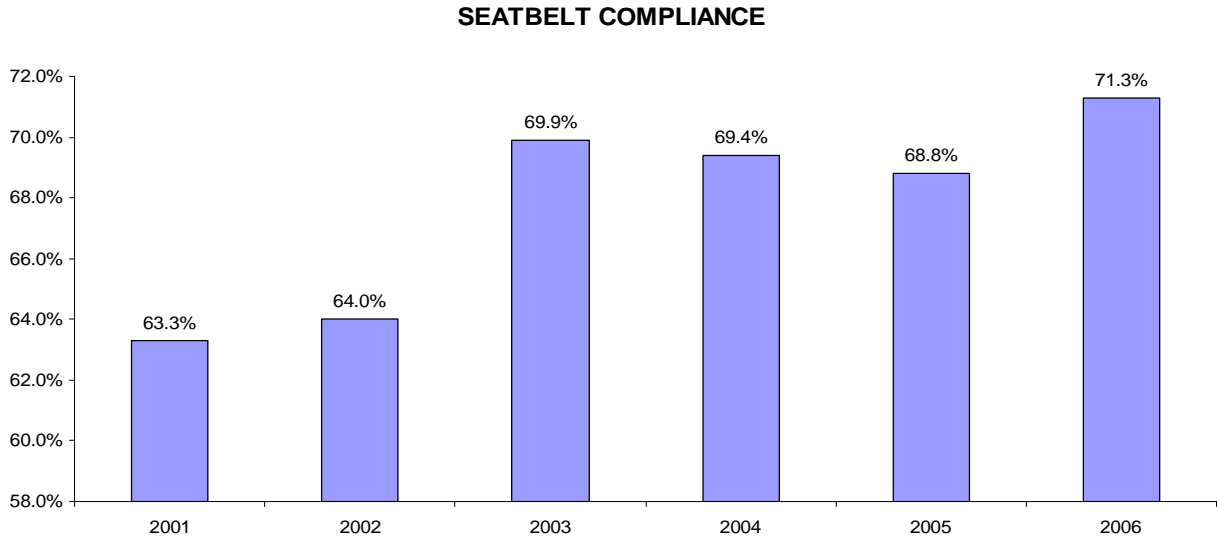
The Child Passenger Restraint System law took effect in July 1984. The law requires children under five to be secured in child passenger restraint systems. This is a primary law, meaning police are allowed to stop and ticket a driver based on this observed violation alone.

The secondary law requiring front-seat passengers to wear seat belts took effect in 1995. Secondary enforcement means that officers may issue a safety belt citation if and only if the vehicle was stopped for some other reason. The primary law requiring children aged 5-17 years to be belted in or in a child safety seat took effect in 2001.

Although the statistical trend for seat belt use in South Dakota is upward, the disregard and misuse of safety restraints continues to be a significant cause of fatalities and injuries in South Dakota. Of the 186 individuals who died in 2005 crashes, 96 of them, or 51.6 percent, were not using a safety restraint system.

Figure 1

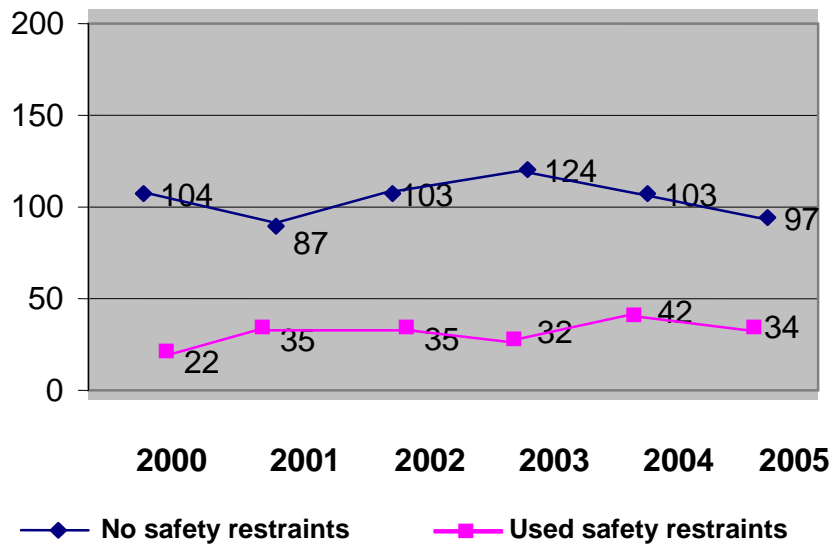
Seat belt compliance in South Dakota.



Source: 2007 South Dakota Highway Safety Plan.

Figure 2

Number of fatalities in fatal crashes in which safety equipment was not used versus number of fatalities in fatal crashes in which safety equipment was used.

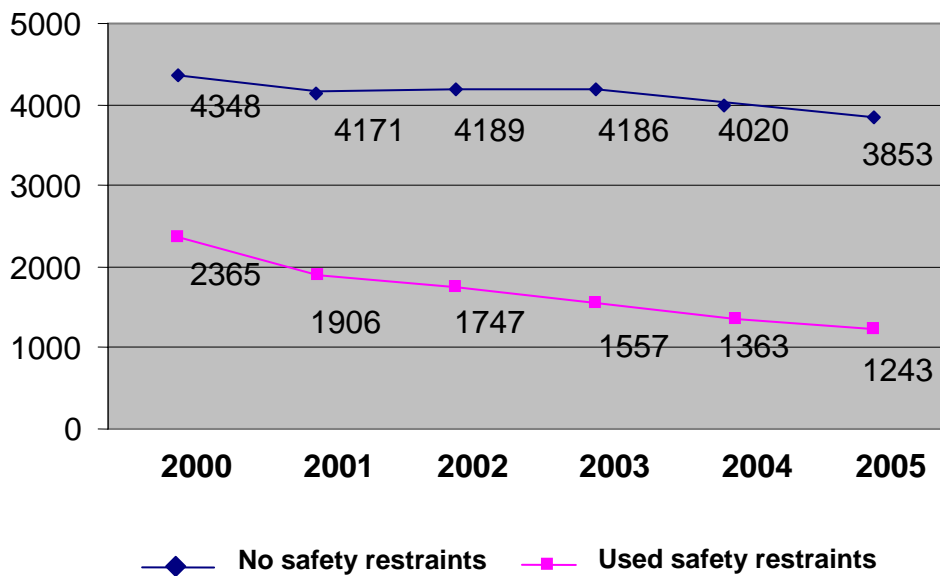


Source: 2005 South Dakota Motor Vehicle Traffic Crash Summary

Injuries for both restrained occupants and unrestrained occupants have declined overall since 2000. See Figure 3.

Figure 3

Number of injured occupants using safety restraints versus number of injured occupants who didn't use safety restraints.



Source: 2005 South Dakota Motor Vehicle Traffic Crash Summary

In a 2004-2005 observational survey targeted toward Native Americans, NHTSA and the Bureau of Indian Affairs found that South Dakota and North Dakota had the lowest safety restraint usage among six comparable states. The other states were Montana, New Mexico, Utah and Wyoming.

Goals

- Increase seat belt use in South Dakota from a rate of 71.3 percent in 2006 to 73 percent in 2007.
- Increase child safety seat usage from the 2006 rate of 86.8 percent to 88 percent.
- Increase 14-17-year-old seat belt use from 60.6 percent in 2006 to 65 percent in 2007.

Strategies

The core strategies for increasing safety restraint use involve law enforcement and the promotion of proper use of safety restraints for drivers and passengers of all ages. The DPS Office of Highway Safety channels 402 highway safety and 157 incentive funds to numerous local, State, federal and tribal programs for safety restraint education. Funds will be used in FY07 to provide child seat checkup events to promote the proper use of child safety seats. [Project 8](#) will provide infant, convertible and special needs seats to low-income and needy families with children up to eight years old.

South Dakota contracts for an annual statewide seat belt survey, and will continue to monitor progress toward seat belt use goals.

Finally, the DPS will provide support for sustained high-visibility enforcement of current seat belt and child safety seat laws.

Performance measures

Statistics compiled in the annual [Motor Vehicle Traffic Crash Summary](#) and the seat-belt survey will be used to check progress on goals.

Run off road crashes and head on collisions

Most South Dakota fatalities involve a car that left its lane

Overview

In South Dakota, vehicle roadway departures result in more fatalities than all other crash types. As a contributing cause to fatal crashes, it is second only to drinking drivers. The vast majority of the roadway departures are single-vehicle events. However, leaving the intended operating lane can have other consequences, especially head on collision. In 2004, according to NHTSA, 31.4 percent of fatal collisions were attributed to collisions with fixed objects, 10.8 percent to head on collisions, and 10.6 percent to overturning vehicles. The following South Dakota statistics provide an indication of the possible severe consequences of a roadway departure.

Table 4

South Dakota roadway departure fatalities, 2001–2005

Year	2001	2003	2003	2004	2005
Roadway Departure Fatalities	110	124	141	132	114
Single Vehicle Crash Fatalities	104	118	138	118	111
Total Fatalities All Causes	171	180	203	197	186

Source: National Highway Traffic Safety Administration

South Dakota has the highest percentage of all vehicle miles traveled that are rural, when compared to six similar states: Montana, New Mexico, Nevada, North Dakota, Utah and Wyoming, according to [*Factors Contributing to South Dakota Crash and Fatality Rates*](#). When rollovers are investigated by road class, rural interstate and rural local roads have the largest percentage of all fatal crashes. Rural local roads have the highest rollover fatal crash rate per 100 million VMT.

The percentage of all South Dakota fatal crashes with a vehicle rollover coded as the first harmful event was nearly three times the national rate in 2003. Additionally, the study found that South Dakota's fatal rollover rate per 100 million VMT has also been on the rise since 1998. An upward trend in total crashes with a rollover as the initial harmful event also was noted.

The causes of roadway departures are varied and include:

- Avoiding a vehicle, object or animal in the travel lane;
- Inattentive driving due to distraction, fatigue, sleep or driving under the influence;
- Effects of weather on pavement conditions;
- Traveling too fast through a curve.

Some of the reasons for increased rates of roadway departures include:

- Narrow travel lanes,
- Substandard curves.
- Unforgiving shoulders and roadsides.

(Note: The Department is correcting these situations as funding permits.)

It is very likely that a severe roadway departure crash can be avoided if certain conditions exist. Those conditions include ditch sections with gentle side slopes and firm soil to support a vehicle, and no fixed objects. Under these conditions, a driver often can regain control of the vehicle.

Goal

To reduce the number of run off road crash fatalities by five percent per year, 2008-2012.

There were 114 roadway departure fatalities in 2005: These are the target reductions:

Table 5

<u>Year</u>	<u>Target no. of roadway departure fatalities</u>
2008:	108
2009:	103
2010:	98
2011:	93
2012:	88

Strategies

1. Review crash data and determine if there are any locations with a higher incidence of roadway departures and/or head on collisions.
 - a. Initiate roadside safety assessments at locations with a high incidence of roadway departures and/or head on collisions.
 - b. Evaluate and recommend countermeasures at those locations.
 - c. Prioritize for possible corrective action.

2. Evaluate countermeasures to be used as a routine accommodation for projects in the STIP. Some of those countermeasures include:
 - a. Continue reviewing current shoulder rumble strip policy and develop recommendations on policy modification with consideration for all modes of transportation.
 - b. Continue reviewing pavement marking and signage placement policy and quality of materials.
 - c. Continue removing, relocating or shielding roadside fixed objects.
 - d. Continue reviewing guardrail placement procedures and materials.
 - e. Continue improving shoulders and their maintenance to moderate edge drop-off.
 - f. Consider implementing Intelligent Transportation System features.
 - g. Consider installation of longitudinal and median barriers at locations of left-side roadway departures.
 - h. Continue improving public information and access to weather and road condition reports.
 - i. Continue slope and ditch flattening and traversable culvert end treatments.
 - j. Continue reviewing superelevation of curves and consider corrective actions including reduced speed limits.
 - k. Continue to improve skid resistance of pavements.
 - l. Initiate RSA training for all project facets, including design, construction and maintenance.
 - m. Continued emphasis on use of safety restraint systems.
 - n. Continue using RSI and RSA procedures to evaluate and implement countermeasures.

Performance measures

Conduct comprehensive comparison of crash data frequencies before and after countermeasures are implemented.

Challenges

1. Traffic volume, crash and roadway inventory data must be accurately and efficiently collected and disseminated. Potential versus actual risk needs to be consistently measured.
2. Expertise, resources and time are sparse. Training in the use of the latest tools and techniques is needed.
3. Roadway departure safety improvements compete for limited maintenance and construction funding. The processes for obtaining right of way and arranging for utility relocations cause lengthy project delays. There also is a strong potential for project scopes to increase beyond their original intent.

Preventing crash fatalities and injuries among young drivers

Young drivers are involved in more crashes than any other age group in South Dakota

Overview

The high rate of crashes among South Dakota's young drivers warrants further analysis and research. Motor vehicle crashes were the leading cause of death among 14-24-year-olds in South Dakota from 2001-2005.

Licensed drivers under 25 years of age comprise 17.6 percent of total licensed drivers in South Dakota. Yet they were overrepresented as the drinking drivers in fatal and injury crashes (35.6 percent) and the speeding drivers in fatal and injury crashes (50.3 percent) in 2005. Young drivers were involved in more crashes than any other age group in South Dakota in 2005: 31.4 percent of crashes involved drivers under 25. The percentage jumped to 48.8 percent if 25-34 year-olds were included.

Young drivers also were identified as a focus area in [*Factors Contributing to South Dakota Crash and Fatality Rates*](#). The study compared South Dakota young driver crash rates to those of six other states for 1998-2003 and found that "South Dakota is not doing substantially better or worse than the peer states."

Another area requiring research is driver education in South Dakota. Drivers' ed curriculum is under local control. The National Transportation Safety Board found in 2005 that the standard driver's education course for teenagers in the United States has not changed in 50 years. The NTSB is calling for a national model curriculum that states can adopt. No overview of driver education in South Dakota could be found during research for this strategic plan.

Goals

To reduce fatal and injury crashes in the 14-24 age group from 2,431 in 2005 by five percent a year for five years (2008-2012). The 2008 year is used as the starting point because this plan won't be approved until mid-2007. The 2005 number of fatal and injury crashes for this age group is used because it is the most current figure available.

Table 6

Year Target no. of fatal and injury crashes for drivers aged 14-24

2008:	2,309
2009:	2,194
2010:	2,084
2011:	1,980
2012:	1,881

Table 7

To reduce fatal and injury crash rates in the 25-34 age group from 1,274 in 2005 by five percent a year for five years.

Year Target no. of fatal and injury crashes for drivers aged 25-34

2008:	1,210
2009:	1,149
2010:	1,092
2011:	1,037
2012:	985

Strategies

South Dakota's crash data for teen drivers will be analyzed for a greater understanding of the causes of traffic crashes involving young drivers.

The DOT Office of Research will contract for a study comparing driver education in South Dakota with driver education offered in states with lower crash rates for young drivers. South Dakota's driver education curriculum also will be compared with any model curriculum developed or endorsed by the National Transportation Safety Board.

Performance measures

The DOT Office of Research publishes new research on driver education in South Dakota in 2008.

Data analysis of young driver involvement in crashes provides greater understanding of the causes of these crashes, enabling better decisions about countermeasures.

Numbers of fatal and injury crashes involving younger drivers in South Dakota will be monitored and analyzed using the annual [Motor Vehicle Traffic Crash Summary](#).

Speed management

Speeding is the No. 3 factor contributing to crash deaths

Overview

Speeding was a contributing factor in 16 percent of fatal crashes in 2005. Only drinking and running off the road are more frequent contributing factors in fatal crashes.

Goal

Reduce the number of speeding drivers involved in injury and fatal crashes by five percent over five years, 2007-2011. There were 341 speeding drivers in fatal and injury crashes in 2005.

Table 6

<u>Year</u>	<u>Target no. of injury and fatal crashes involving speed</u>
2007	324
2008	308
2009	293
2010	278
2011	264

Strategies

South Dakota Highway Patrol enforces speed limits with manpower and aircraft through Operation Safe. Operation Safe uses data to identify high-risk areas and carries out a comprehensive corridor enforcement campaign in those areas. Media coverage of the campaign is encouraged, so that the public has a greater awareness of enforcement actions and ways to avoid crashes.

Approximately 800 hours of in-air time is used along with on-the-ground troopers to stop habitual speeders who otherwise would avoid detection by using radar detectors.

According to the South Dakota Highway Patrol, speed limits around the state are vigorously enforced by law enforcement agencies, particularly in areas identified as speed-related crash corridors. School zones are a priority for municipal departments. Coordination among various agencies, though, is limited to an isolated project.

Performance measures

Statistics compiled in the annual [Motor Vehicle Traffic Crash Summary](#) will be used to check progress on objectives. Calculation of reduction goals will start with 2005 statistics.

Statistics gathered by the DOT on average speeds on Interstate and non-Interstate highways will also be monitored.

Emergency response services

More data about emergency medical services provided to crash victims needs to be collected and analyzed

Overview

Emergency medical services (EMS) are a typical South Dakota challenge. A vital service must be provided over a large state with vast, sparsely populated areas. Crashes can happen far from hospitals and ambulance services staffed by full-time professionals. In fact, 83 percent of South Dakota ambulances are staffed by volunteers, many of them over 50 years of age. The Office of Emergency Medical Services, in a partnership with the Office of Highway Safety, provides ambulance services and training in South Dakota and needs to do so continuously to maintain the current level of ambulance services.

Statistics about provision of emergency medical services in South Dakota are considered accurate through 2001. The Office of Emergency Medical Services switched in 2002 to database software that requires ambulance services to input response times and other data, then periodically send the data to the State. This required extra step of downloading the data, and the user-unfriendly software, have cut contributed records in half, from about 50,000 a year to 25,000 a year, rendering data gathered from 2002 to the present incomplete.

Another problem in the current system of EMS provision is the lack of standard procedures guiding decisions about where patients with particular injuries should be taken. Sending certain types of patients directly to a trauma center, rather than first stopping at a closer hospital without a trauma center, could save lives. South Dakota currently has two Level II American College of Surgeons (ACS)-verified Trauma Centers, Sanford Health and Avera McKennan Hospital, both in Sioux Falls. Avera Queen of Peace in Mitchell is an ACS Level III Trauma Center.

Data collection by hospitals regarding trauma cases also is spotty.

Goals

To move to Web-based data collection software that is easy for ambulance services to use, thereby increasing their contributions of response time and other emergency medical service information to the Office of Emergency Medical Services.

To mandate that all hospitals in South Dakota collect and report data on trauma patients with a trauma registry.

Strategies

The South Dakota Office of Emergency Medical Services is working with the National Emergency Medical Services for Children Data Analysis Resource Center (NEDARC), to examine South Dakota emergency medical service data collection. South Dakota is considering issuing an RFP for a new Web-based data collection system that will integrate crash, hospital and ambulance service data. NEDARC is a national resource center located at the University of Utah School of Medicine that provides technical assistance to EMS agencies and EMS for children projects in developing their data capabilities. It is funded by the Maternal and Child Health Bureau of the U.S. Dept. of Health and Human Services. South Dakota also wants NEDARC to help the State become compliant with the National Emergency Medical Services Information System (NEMSIS). NEMSIS is a national effort to standardize EMS data collection, so that EMS data can be analyzed at the local, state and national levels.

The Office of Emergency Medical Services funded a data summit Feb. 15 and 16 to begin the process of addressing current EMS data issues and moving South Dakota toward NEMSIS compliance. NEDARC and the National EMS Information System Technical Assistance Centers (NEMSIS TAC) were invited to facilitate this meeting of the Governor's EMS Advisory Committee and other South Dakota EMS stakeholders.

The Office of Emergency Medical Services will work with the Governor's EMS Advisory Committee to craft legislation mandating that all South Dakota hospitals participate in a trauma registry that guides decisions on where patients are sent for medical care. A trauma registry also would require collection of certain data about patient outcomes, with the State Dept. of Health as the possible central repository for that data. The Office of Emergency Medical Services hopes to introduce this proposed legislation during the 2008 legislative session.

Performance measures

The number of emergency medical services records contributed by ambulance services to the Office of Emergency Medical Services or another State Agency will increase.

A trauma registry will be created for South Dakota hospitals.

Crash, ambulance and hospital data about injuries resulting from crashes will be analyzed for a better understanding of EMS performance in South Dakota.

Preventing deer-auto crashes

Deer-auto crashes are a statewide traffic safety problem

Overview

Statewide, hitting a wild or domesticated animal is the second-most common initial incident in a crash, making up 30.8 percent of initial harmful events in 2005 crashes. The vast majority of these crashes were with wild animals—deer in particular.

The DOT has initiated a study in the Mitchell Region to determine whether or not deer reflectors might reduce those collisions. This research could be applied in other parts of South Dakota.

In 2004, four people died in a crash that began with a wild animal hit. There were no such fatalities in 2005. Twenty-eight people received incapacitating injuries, and 37 received non-incapacitating injuries in total animal hits in 2005.

Table 7

2005 South Dakota statewide crashes where the first harmful event was a wild animal hit.

Month	2005					Grand Total
	Fatal	Incapacitating injury	Non-incapacitating injury	Possible injury	Damage only	
January	0	0	0	0	281	281
February	0	0	0	2	203	205
March	0	1	2	0	195	198
April	0	1	2	2	243	248
May	0	2	0	0	343	345
June	0	0	5	3	453	461
July	0	7	5	1	280	293
August	0	10	6	1	230	247
September	0	5	0	1	352	358
October	0	0	6	1	672	679
November	0	2	11	7	1019	1039
December	0	0	0	0	427	427
Grand Total	0	28	37	18	4698	4781

Source: South Dakota Office of Highway Safety

Whitetail and mule deer populations in South Dakota as a whole have been relatively steady over the past few years, although, from an agricultural landowners' perspective, they are overabundant and therefore aggressively managed by the Department of Game, Fish and Parks. In 2005, the working statewide population estimate for whitetails was 215,000; for mule deer, 82,000.

Deer reflectors previously have been used by the DOT in the Sioux Falls and Black Hills areas. Deer reflectors are reflectors on posts installed in a series. Reflected light from headlights is thought to create a "fence" of light that deer will avoid. While the sense among DOT staff is that these have reduced collisions, no formal analysis has been done.

Other countermeasures for deer-auto crashes have been tried elsewhere. High-cost, high-tech options include detection methods using infrared light, radar, laser, radio frequency beams and heat detection cameras. Their effectiveness is unproven. Fencing combined with overpasses and underpasses is proven effective but comes at considerable cost. Given South Dakota's positive past experience with deer reflectors, this relatively low-cost countermeasure deserves closer scrutiny before other options are considered.

Goal

To evaluate a possible solution to deer-auto collisions, with the ultimate goal of reducing these collisions.

Strategies

Based on reports from the contractors who pick up dead deer on South Dakota highways, the following stretches of road have been selected for deer reflector installation:

- Interstate 90, from Mile Reference Marker (MRM) 402 eastward to MRM 409, near the Minnesota border.
- I-90 between Plankinton and Mt. Vernon, MRM 312-MRM 318.
- I-90 just west of Mitchell, between MRM 327.5 and MRM 330.

A \$90,000 contract to install these deer reflectors was awarded in May. Over the next few years, Mitchell Region staff will compare deer-auto crash numbers prior to installation of the deer reflectors with deer-auto crash numbers after deer reflectors were installed.

Mitchell Region also has installed deer crossing warning signs at locations where there have been high averages of deer collisions per mile.

Mitchell Region will continue to evaluate other methods of reducing deer-auto collisions being tested in other states.

Performance measures

Annual reports will be prepared indicating whether or not deer reflectors are effective in reducing deer-auto collisions at certain locations in the Mitchell Region, starting one year after reflector installation in 2007. Efforts also will be made to identify other effective means of preventing deer-auto collisions.

Improving data collection

Assuring accurate information for traffic safety decisions

Overview

Motor vehicle crashes are a leading cause of death for Native Americans. According to the National Center for Injury Prevention and Control, the crude death rate for motor vehicle crashes for all races in South Dakota for the years 2000-2002 was 24.19 per 100,000 population. This was 73.92 for the Native American/Alaska Native population—three times the rate for other South Dakotans. This statistic is based on ICD-10 codes from death certificates.

One obstacle to preventing fatal and injury crashes on Native American reservations is the lack of detailed information about these crashes. The DPS Office of Highway Safety inconsistently receives reports of motor vehicle crashes from tribal and Bureau of Indian Affairs (BIA) police departments on Indian reservations. Sometimes crash reports are not prepared or not prepared correctly. Other times, crash reports are prepared but are not submitted to the Office of Highway Safety. The percentage of crashes actually reported is unknown, but estimates range from five percent to 70 percent, depending on location.

The lack of reliable crash data results in lost funding for tribes and the BIA that could be used to correct safety hazards, improve roads or promote traffic safety. It also reportedly results in lost or delayed insurance payments for individuals who have difficulty obtaining reports about crashes involving their vehicles. Most importantly, opportunities to save lives and prevent injuries are lost because data that could help identify factors contributing to motor vehicle crashes are unavailable.

The following factors have been suggested as potentially contributing to this problem:

- A shortage of experienced law enforcement staff, resources, and training;
- Varying crash reporting policies among tribal administrations;
- Limited availability of electronic databases and other information technology;
- Concerns about ultimate uses of crash data and potentially negative impacts to tribal members;
- Concerns about driver privacy;
- Lack of clarity or understanding of State of South Dakota reporting requirements;
- Conflicting reporting requirements by the State of South Dakota and the Bureau of Indian Affairs;
- Differences in crash investigation and reporting protocols;
- Poorly established networks of communication among agencies;
- Inadequate institutional arrangements between State and tribal agencies.

Other factors may also apply, but until the extent of the problem is determined and contributing factors accurately identified, significant improvements to crash reporting are unlikely.

Goal

To improve the completeness and accuracy of crash data reported to the DPS from the nine reservations through research of current practices and proposed improvements.

Strategies

DOT's Office of Research launched the research project, ["Improving Motor Vehicle Crash Reporting on Nine South Dakota Indian Reservations," SD2005-14](#), in February 2006. ICF Consulting's Polly Quick, an expert in social impact assessments, is the principal investigator. The project technical panel included representatives of all nine tribes, the BIA, NHTSA, FHWA, the Indian Health Service, DPS and the Governor's Office of Tribal Relations.

Following is the list of project tasks:

1. Conduct interviews and site visits with staff of tribal offices, the BIA, the Indian Health Service, the South Dakota Office of Highway Safety, and the DOT to identify crash data needs and to describe current crash reporting practices.
2. From results of the interviews and site visits, make a preliminary assessment of the availability, quality and usability of crash data from South Dakota Indian reservations.
3. From the results of the interviews and site visits, identify best crash reporting practices as well as barriers to complete and accurate crash reporting.
4. Prepare a technical memorandum and meet with the project's technical panel to review results of tasks 1-3.
5. From the examination of available crash reports and databases available on each reservation, develop estimates of current reporting rates and rates that might be achieved through improved procedures.
6. From crash reports and databases available on each reservation, identify calendar year 2005 crash reports that could be, but which have not yet been, submitted to the State Office of Highway Safety. In cooperation with local authorities, prepare a supplemental submission of that data to the Office of Highway Safety.

7. Develop recommendations for practical changes in procedures, protocols, cooperative agreements between agencies, staff levels, training, information technology, and any other significant factors to improve the completeness and accuracy of future crash reporting on reservations. Estimate the resource requirements and cost of recommended changes.
8. In accordance with the [Guidelines for Performing Research for the South Dakota Department of Transportation](#), prepare a final report summarizing the research methodology, findings, conclusions and recommendations.
9. Make an executive presentation to the DOT Research Review Board and the Aberdeen Area Tribal Chairmen's Health Board at the conclusion of the project.

All tasks except submission of the final revised report were completed by April 2007.

Performance measures

The desired outcome is a report outlining ways to improve accuracy and completeness of crash reporting by BIA and tribal law enforcement agencies.

Improving data analysis

The State of South Dakota needs to analyze all relevant data when considering actions to reduce fatalities, injuries and total crashes

Overview

The Office of Accident Records within the Department of Public Safety compiles crash record data into the Crash Data System. Starting in 2004, South Dakota developed its Crash Data System to conform to the Model Minimum Uniform Crash Criteria (MMUCC) guidelines. The purpose of the MMUCC is to provide a minimum, standardized data set for describing crashes that can be used to generate the information needed to improve highway safety nationally and within each state.

The Office's annual [*Motor Vehicle Traffic Crash Summary*](#) provides statistics, broken down geographically, for fatalities, injuries, economic losses, contributing factors, alcohol involvement, speeding, young drivers and seat belt use. Increases and decreases are noted, and South Dakota's fatality rate is compared with neighboring states. In addition to crash records provided by law enforcement agencies, this summary draws on data from the Unified Judicial System regarding alcohol enforcement and emergency response services.

However, up to this point, staff time and expertise have not been available to systematically and regularly analyze the largely behavioral data gathered by the DPS with the engineering data residing in databases at the DOT. That engineering data includes pavement conditions, traffic flow studies, vehicle speed surveys and roadway geometrics. The time and expertise to analyze a better-rounded set of contributing factors in crashes would allow for more accurate assessments of crash-prone locations and more cost-effective spending on solutions.

For example, if speeding, rather than shortcomings in road design, were determined to be the main cause of a cluster of crashes on a stretch of highway, the best use of public money might be additional law enforcement efforts rather than road reconstruction. Poor pavement conditions might justify lowering speed limits and stepped-up enforcement aimed at greater compliance of those limits.

Goal

To bring together all available data sources when analyzing crashes and considering countermeasures.

Strategies

The DPS has 402 and 408 funds available to fund an FTE data analyst/statistician position or hire a consultant for this work. DOT and DPS can use the data analyst/statistician or consultant to more systemically and intensively analyze engineering and behavioral factors in crashes and provide these analyses to both departments.

The DOT also will pursue training from the USDOT in the use of performance measures and determination of benefit/cost ratios. Federal funds can be used to pay for this training.

Performance measures

The DPS and DOT will receive analyses to help them select the most cost-effective behavioral and/or engineering countermeasures and to help the agencies evaluate those countermeasures after implementation.

Evaluating performance measures and improving the *Strategic Highway Safety Plan*

In addition to its work with the [Highway Safety Plan](#), the Roadway Safety Advisory Committee will advise the Dept. of Transportation on the emphasis areas and goals of the *Strategic Highway Safety Plan*.

The group will update the plan and review a report of progress toward all goals at least once a year. Optimally, this meeting would occur in late summer or fall, after the DPS Office of Highway Safety has published crash statistics from the previous year in the annual [Motor Vehicle Traffic Crash Summary](#). The management analyst within the DOT's Office of the Secretary will review the summary and prepare the report with statistics pertaining to progress toward strategic plan goals.

Action plan for 2007

1. Ask Mark Leiferman, Program Manager for the SDDOT Road Design Office, for greater involvement of Road Design staff on the Roadway Safety Advisory Committee. Person responsible: Julie Bolding, DOT.
2. Ask the metropolitan planning organizations in South Dakota to join the Roadway Safety Advisory Committee. Person responsible: Roy Meyer, DPS.
3. Ask the Game, Fish and Parks Dept. to formally assign a representative to the Roadway Safety Advisory Committee. Person responsible: Cliff Reuer, DOT.
4. Discuss the *Strategic Highway Safety Plan* and new Roadway Safety Advisory Committee member involvement at the annual Transportation Safety Conference. Person responsible for getting the plan on the agenda: Sharon Johnson, FHWA.
5. Organize Roadway Safety Advisory Committee meetings, making a special effort to get attendance from new members. Person responsible: Roy Meyer, DPS.
6. Assess how tribal government participation in the Roadway Safety Advisory Committee can be encouraged. Person responsible: Julie Bolding, DOT.
7. Assess how the Roadway Safety Advisory Committee can communicate with new, private highway safety advocacy groups. Person responsible: Roy Meyer, DPS.
8. Compile report reviewing progress on performance measures in 2007. Person responsible: Julie Bolding, DOT.
9. Create an action plan for the 2008 *Strategic Highway Safety Plan*. Person responsible: Julie Bolding, DOT.