

**SUBSTANCE ABUSE/DRUG TESTING
POLICY OUTLINE**
Established March 15, 1993
Revised June 1, 1997
DOT Addendum Revised: March 2, 2020
Rebranded January 1, 2024

I. Purpose and Policy Statement

There is sufficient evidence to conclude that the use of illegal drugs and other forms of drug abuse, including alcohol, will seriously affect an employee's physical and mental health and their ability to safely perform assigned duties.

When City employees participate in illegal drug and other drug and/or alcohol abuse, the integrity of the Municipal Employees and the public confidence in them are destroyed. This confidence is further eroded by the potential for corruption created by drug use.

Therefore, to preserve public safety and the safety of co-workers, as well as to insure the integrity of the Municipal Employees and to preserve the public trust and confidence in an efficient and drug free public-sector profession, the City of Des Plaines has established a Substance Abuse Policy which includes a drug testing program to detect prohibited substance abuse by its employees and potential employees.

Employees are expected to be drug and alcohol free at all times that they are in the work place. This means that it is prohibited to use or possess drugs or to abuse prescription medications when expected to perform assigned job duties, either during the regularly scheduled workday or any overtime or emergency responses*. Employees must realize that many legal and illegal drugs used for recreational purposes may remain in the system for several days, and that residual amounts of legal and illegal drugs discovered in the system are prohibited in this policy.

II. Definitions*

- A. "Policy" – all references to Policy shall mean the General Policy as well as specific directives applicable to specific departments and/or employee groups on drug screening and all rules and regulations contained herein.
- B. "Drugs" shall mean any controlled substance listed in Chapter 56-1/2, as amended, of the Illinois Revised Statutes, known as the Controlled Substances Act, for which the person tested does not submit a valid pre-dated prescription.

*For the rules on this subject applicable to Public Works employees, please refer to the ADDENDUM attached to this policy.

These include the following compounds:

DRUG GROUP CONFIRMATION	DRUG/METABOLITE DETECTED	INITIAL TEST LEVEL ng/ml	GC/MS
Amphetamine	Amphetamine Methamphetamine	1,000 ng/ml 1,000 ng/ml	500 ng/ml 500 ng/ml
Cocaine Metabolites	Benzoylcegonine	300 ng/ml	150 ng/ml
Marijuana Metabolites	Delta-9-THC-9-COOH	50 ng/ml	15 ng/ml
Opiate Metabolites	Codeine Total Morphine	2000 ng/ml 2000 ng/ml	15000 ng/ml 15000 ng/ml
Phencyclidine	PCP	25 ng/ml	25 ng/ml

Prohibited drugs also include alcohol while on duty or operating City vehicles, and prescription drugs which have not been specifically prescribed by a registered physician or over-the-counter drugs that are not being used for the purpose or in the manner prescribed.

- C. Covered Employees – include all employees of the City.
- D. “Positive Test Results” shall mean a positive result on both an initial screening test and a confirming test with testing technology as specified by D.H.H.S. If the initial test is positive, but the confirming test is negative, the test results will be deemed negative and no action will be taken. A positive confirming test is one where the specimen tested contained drug or drug metabolite concentrations.
- E. Supervisor – sworn and civilian employees assigned to a position having day-to-day responsibility for supervising subordinates, or responsible for commanding a work element; includes temporary appointment to such position.
- F. Drug Test – a urinalysis test administered under D.H.H.S. certified conditions and procedures to detect drugs.
- G. “Alcohol Free” means a detection less than .05.
- H. Reasonable Suspicion – that quantity of proof of evidence that is more than a hunch but less than probable cause. Reasonable suspicion must be based on specific, objective facts and any rationally derived inferences from those facts about the conduct of an individual that would indicate that the individual is or has been using drugs while on or off duty.
- I. The Drug Policy Committee shall consist of supervisory and non-supervisory representatives from the Police, Fire and General Employee groups. The Drug Policy Committee will meet as needed to monitor the administration of the drug policies set forth herein, and will meet with the City Administration to recommend, discuss and/or implement any changes in the policy. Any recommendations made by this committee will be forwarded to the City Manager and Mayor.
- J. Medical Review Officer. A licensed physician who is responsible for receiving laboratory results generated by an employers’ drug testing program, has knowledge of substance abuse disorders, and has appropriate medical training to interpret and evaluate an individual’s confirmed positive test result

together with his/her medical history and any other relevant biomedical information. Selection of an M.R.O. will be mutually agreed to by the Drug Policy Committee members.

III. Prohibited Activities*

- A. City of Des Plaines employees are prohibited from the use, possession, sale, or transfer of prohibited drugs, except within the scope of their job assignment.
- B. City employees shall not ingest any illegal narcotics or other dangerous substance, unless as prescribed by a licensed medical practitioner familiar with the employees' assigned duties.
- C. With regard to safety sensitive positions only (see definition of job classifications included in this category listed in the Appendix):
 - 1. It is the responsibility of any employee that is required to take prescription medication that may adversely affect job performance, to submit to their ranking officer, immediate supervisor, or department head documentation of same from the prescribing physician. This documentation shall include the nature of the illness or injury and known side effects which affect job performance.
 - 2. The ranking officer/department head shall document the type of drugs used, dates used, and potential side effects. This information will be confidentially maintained by the department's Drug Policy Coordinator at all times.
 - 3. Where such medication may interfere with job performance, the employee may be temporarily reassigned to other duties. The City will utilize the assistance of the M.R.O. in determining when an individual should be reassigned.
- D. Employees not in safety sensitive positions are not regularly required to report prescribed medications. However, if a supervisor feels that the employee's performance is possibly being effected by medication, then the supervisor may ask the employee for prescription information and then will check with the Medical Review Officer for possible side effects and whether there may be an inability to continue to perform major job functions. If the supervisor finds it necessary to relieve the employee of their duties, then the employees' sick leave is to be utilized.
- E. Any employee who unintentionally ingests or is made to ingest an illegal narcotic or other dangerous substance shall immediately report the incident to their supervisor so that appropriate medical steps may be taken to ensure the employee's health and safety.

*For the rules on this subject applicable to Public Works employees, please refer to the ADDENDUM attached to this policy.

IV. Scope of Testing*

A. Mandatory

- 1. Pre-Employment – all applicants for any City position shall be required to submit to and pass a drug test as a condition of employment, as part of the pre-employment medical examination. Applicants

shall be disqualified from further consideration for employment for failure to appear as scheduled, refusal to submit to a required drug test, or any confirmed, positive drug test.

2. Probationary Employees – Effective June 1, 1997 all probationary employees will be tested one (1) time to be determined on a random basis during the first twelve (12) months of their initial employment; employees with a longer than one year probationary period will be tested up to two (2) additional times to be determined on a random basis during the remainder of their probationary period. Testing dates are at the discretion of the M.R.O. A confirmed positive test result during probation may result in termination.
3. Leaves of Absence – For safety sensitive positions only, an employee having been on a leave of absence, whether paid or unpaid, of 180 consecutive days or more shall submit to a drug test prior to returning to their work assignment. Leave of absence is to include personal, medical, work related injury or disciplinary time away from the job.
4. Traffic Accident – any employee who, while operating a Des Plaines department motorized vehicle, including construction and maintenance equipment, is involved in an accident that results in any personal injury to the employee or another requiring immediate medical treatment away from the scene, will be required to submit to a drug test and alcohol test in accordance with this policy. All CDL drivers will be tested per DOT rules in attached ADDENDUM. **Exception:** The department vehicle is unoccupied or not being driven or in the actual physical control of the employee at the time of the accident or injury and there is no reasonable suspicion of drug use.
5. When a City employee is involved in an on-the-job accident or injury, other than with or in a motor vehicle, a supervisor shall conduct a preliminary investigation promptly and, as part of the investigation, shall evaluate the employee's appearance and behavior. Drug testing may be required where there is reasonable suspicion that an error or mistake due to drug use by the City employee caused the accident or injury, or where there is reasonable suspicion that employee drug use may have contributed to the incident.
6. Sworn Police employees assigned on a full time basis to the Metropolitan Enforcement Group or any other specific drug enforcement unit and the civilian Lab/Property Specialist will be tested a minimum of once a year; date to be at the discretion of the Medical Review Officer.
7. Discharge of Firearm – any sworn employee who discharges a firearm other than at the range or to destroy an animal shall be required to submit to a drug test as soon as is reasonable.

B. Reasonable Suspicion as Basis for Testing

1. For purposes of this type of testing, reasonable suspicion that an employee uses illegal drugs may be based upon, among other things:
 - a. observable phenomena, such as direct observation of drug use and/ or the physical symptoms of being under the influence of a drug or alcohol;
 - b. a pattern of documented abnormal conduct or erratic behavior, without reasonable explanation;

- c. arrest or conviction for a drug related offense; or the identification of an employee as the focus of a criminal investigation into illegal drug possession, use or trafficking;
- d. information provided either by reliable and credible sources and/or independently corroborated;
- e. newly discovered evidence that the employee has tampered with a previous drug test.

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V. Drug Testing Procedure

- A. Specimen collection procedures. The authorized collection site personnel shall conduct each specimen collection in accordance with D.H.H.S. guidelines, and in view of the following definitions:
 - 1. Witnessed collection: all collections shall be conducted in the privacy of an approved facility unless circumstances require a monitored or observed collection, as defined below.
 - 2. Monitored collection: the collection site personnel shall accompany the employee (donor) into the approved facility, allowing the donor to provide the specimen behind a barrier, and shall listen for the natural sounds of urination. Monitored collections may occur only if there has been obvious attempt by the donor to adulterate or substitute a specimen, then the collection site personnel will be required to directly observe the donor provide the specimen.
- B. The Departments' Drug Policy Coordinator will communicate in confidence, with the collection site, regarding any prior attempts at adulteration or substitution.
- C. The testing procedures and safeguards provided in this policy to ensure the integrity of the City drug testing program shall also be followed by those personnel administering pre-employment drug tests.
- D. The supervisor ordering an employee to submit to drug testing, shall contact the department head via the chain of command and explain the circumstances and reason for testing. A supervisor from the next level of supervision will also be consulted at the time the order to report is issued and must confirm the basis for the reasonable suspicion test.
- E. The department head shall be responsible for ensuring that the City's drug testing procedures are being followed.
- F. An employee being tested for suspected drug use or alcohol abuse will submit to a urine and/or breath/alcohol test. For breath/alcohol testing, the standards, type of equipment, training of testing personnel, etc. will be according to National Traffic Highway Safety Administration breath test standards, and following the same DOT alcohol testing procedures as required for CDL drivers. Testing will be done off-site at an approved medical facility. In the case of CDL drivers, if a breath test cannot be conducted the test is either cancelled or the donor is considered to have refused to test – a violation of the Policy resulting in the need to comply with all return to duty requirements. Blood/alcohol tests are unacceptable for DOT purposes.
- G. When testing under the Reasonable Suspicion Doctrine, prior to submitting to drug testing procedures, the employee will be advised in writing as to the basis for the reasonable suspicion upon which he/she is being ordered to submit to drug testing. If impractical to advise in writing, then the supervisor will advise the employee verbally and reduce to written form as soon as reasonable. Provided consent is

executed by the employee, a union/association representative will be contacted, and will be allowed up to an hour to arrive and up to one half hour to confer with the employee. This provision shall not be interpreted to delay the testing process beyond these time limits.

- H. The employee under suspicion will be transported to the designated City authorized testing facility, whose licensed medical staff will be responsible for obtaining the urine sample. Breath/alcohol tests will be obtained under federal DOT guidelines.
- I. The employee will furnish information necessary to complete all forms/documents required by the testing facility to comply with the drug testing procedures. Failure to provide appropriate information will be deemed a refusal to submit to drug testing.
- J. The employee designated to give a sample must be positively identified prior to any sample being obtained.
- K. All collections will be conducted in accordance with the D.H.H.S. mandatory guidelines issued April 11, 1988 and all amendments thereto. The sample collection for any employee regulated by federal DOT will be conducted in accordance with D.H.H.S. and any amendments thereto. Copies of these guidelines will be available in each department's administrative offices during business hours.
- L. Split specimen collection procedures must be utilized for all DOT regulated collections; however, the collection of all specimens for employees other than DOT regulated will also utilize a split specimen collection procedure as follows:
 - 1. The donor shall provide a urine specimen in the collection container, which the collection site person, in the presence of the donor, after determining the specimen temperature, pours into two specimen bottles.
 - 2. The first bottle is to be used for either the DOT mandated test or the test guidelines as outlined in this policy, and 45 ml of urine shall be poured into it. If there is no additional urine available for the second specimen bottle, the first specimen bottle shall nevertheless be processed for testing.
 - 3. Up to 45 ml of the remainder of the urine shall be poured into the second specimen bottle.
 - 4. All requirements of the collection procedure shall be followed with respect to both samples, including the requirement that a copy of the chain of custody form that accompanies each bottle processed under split sample procedures.
 - 5. Any specimen collected under split sample procedures must be stored in a secured, refrigerated environment and an appropriate entry made on the chain of custody form.
 - 6. If the test of the first bottle is positive, the employee may request that the MRO direct that the second bottle be tested in a D.H.H.S.-certified laboratory, of the employee's choosing and at the employee's expense, for the presence of the drug(s) for which a positive result was obtained in the test of the first bottle. The result of this test is transmitted to the MRO without regard to the cutoff levels previously outlined in this policy. The MRO shall honor such a request if it is made within 72 hours of the employee's having actual notice that he or she tested positive.
 - 7. Any general consequences or disciplinary procedure pending as the result of a positive test are not stayed pending the result of the second test.

8. If the result of the second test is negative, the MRO shall cancel the test.
- M. The room where the sample is obtained must be private and secure with documentation maintained that the area has been searched and is free of any possible contaminants or adulterates. The procedures used should not demean, embarrass or cause physical discomfort to the employee.
- N. Where the employee appears unable to give a specimen at the time of the test the collection site personnel or medical staff giving the test shall note this on the chart and the time of the test. The employee shall be permitted up to two (2) hours to give a sample during which time he/she shall remain in the testing area under observation. If the employee remains unable to provide a urine specimen, he/she may request upon written authorization to the testing facility, that blood be drawn.
- O. The taking of urine samples shall not be witnessed unless there is reasonable suspicion to believe the employee is tampering with the testing procedures. Failure to submit a sample shall be considered a refusal to submit to a drug test.
- P. Any employee medically incapable of providing a specimen; i.e., unconscious, is required to execute a release of information as soon as physically and mentally capable, which will allow the department to determine; 1. If a drug or alcohol test was conducted; and 2. The result of such test, if conducted. Refusal to execute such document will be considered a refusal to test.
- Q. The confirming supervisor will be responsible for securing appropriate transportation for the employee to their place of residence.

VI. Processing Urine and Breath/ Alcohol Tests

- A. The laboratory processing of urine specimens will be in accordance with D.H.H.S. guidelines. Breath/alcohol test results will be maintained in accordance with Federal and DOT guidelines.
- B. Based on the reasonable suspicion provision of this policy, employees tested will from the time of collection through the time of reporting results, receive regular earnings and be placed on paid administrative leave status, which will not affect the employees' sick leave balance. Employees being tested under all other provisions will be returned to duty following the collection process.

VII. Drug Test Results

- A. All records pertaining to an applicant or employee's drug test shall remain confidential, and shall not be provided to other employers, City departments or law enforcement agencies. All drug test results shall be stored and retained in compliance with D.H.H.S. standards.
- B. Only the Medical Review Officer will receive test results (positive and negative). Upon receipt, the M.R.O. will contact the tested employee and follow D.H.H.S. guidelines. The contact will be by telephone except in the case of an opiate positive. Only after such contact shall the M.R.O. release the results to the designated City representative. An employee's refusal to contact the M.R.O. or cooperate with the M.R.O. shall be considered the same as a refusal to submit to a test.
- C. If the M.R.O. concludes that there is a legitimate medical explanation for the positive test result, the test result will be reported to the employer as negative. No information that the test was reported positive by the lab will be reported to the employer.

VIII. Discipline

- A. All CDL drivers who test positive or refuse to test will have to comply with the prescribed DOT return to duty criteria set out in ADDENDUM A.
- B. Employees will be disciplined as follows: Subject to disciplinary action, which may include termination following a second confirmed positive.
- C. If after a first confirmed positive, an employee experiences a “relapse” and voluntarily reports that relapse, no disciplinary action will be taken and treatment where medically appropriate will be continued. If, however, within a five year period a second confirmed positive occurs, the employee may be subject to discipline up to and including termination.
- D. A second confirmed positive subjecting an employee to disciplinary proceedings must occur within 5 years of the first confirmed positive.
- E. No City employee shall be subject to discipline for violation of this order where the employee has unintentionally ingested, or been made to ingest a dangerous substance in a manner prohibited by this policy, providing the employee notifies a supervisor as soon as is reasonable. (Does not include passive inhalation or in contact skin).
- F. General Consequences
 - 1. All CDL drivers who test positive or refuse to test will have to comply with the prescribed DOT return to duty criteria set out in ADDENDUM A.
 - 2. Refusal to submit to a drug test as required by this policy, refusal to execute all necessary documents, or refusal to contact the M.R.O. or cooperate with the M.R.O. after a test has been done shall be grounds for immediate disciplinary action.
 - 3. All employee who voluntarily admits to having a drug problem and requests department help, or whose drug test indicates abuse of prescription or over-the-counter drugs shall be referred for drug treatment, and may be granted sick leave or time due as authorized by their department head.
 - 4. Except for voluntary referrals, failure to comply with the rules contained in this Policy may subject an employee to disciplinary action up to and including discharge, and may result in mandatory referral to the Employee Assistance Program (EAP), where appropriate. The City will provide diagnostic, referral and related services for employees with drug related problems under the provisions of the individuals’ health care program. Participation in the EAP, however, does not affect an employee’s obligations to comply with this Policy nor limit the City’s right to discipline an employee who has violated this Policy or other City rules or regulations. In certain circumstances the City may seek the employee’s discharge and there may be no referral to the Employee Assistance Program.
 - 5. Those employees whose drug tests have been confirmed as positive for illegal drug use or alcohol abuse shall be immediately relieved of duty or reassigned to a non-safety sensitive position pending administrative disciplinary proceedings.

G. Any employee who breaches the confidentiality of testing information shall be subject to discharge procedures.

IX. After Care

- A. All CDL drivers who test positive or refuse to test will have to comply with the proscribed DOT return to duty criteria set out in ADDENDUM A.
- B. All employees referred to drug treatment shall comply with all required procedures and recommendations of the after care facility, and will be required to execute a “last chance agreement”, setting forth the terms and conditions of: 1. after care; 2. Return to duty.
- C. If an employee disagrees with the E.A.P. provider or its recommendations, they are to consult with their department’s Drug Policy Coordinator (D.P.C.) who will confer with the City M.R.O. The employee will have the opportunity to participate in this conference. Once the matter has been reviewed, the joint decision of the D.P.C. and the M.R.O. will be final.
- D. The medical determination of returning an employee to full duty will be made by the City’s M.R.O.
- E. During the year following return to full duty after a confirmed positive test results, the employee will be subject to unannounced testing a maximum of three (3) times to insure that the employee remains substance free. A second confirmed positive test may result in termination.

**CITY SUBSTANCE ABUSE POLICY
APPENDIX A**

Definition: "Safety sensitive positions"

Jobs/job classifications involving duties at a high level of trust and confidence, jobs in which errors in judgment or diminished coordination or dexterity could result in mistakes posing real and/or imminent threat to the personal health and safety of the employee co-workers and/or the public.

These jobs/job classifications include:

(Chief) Building Official
Building Inspector
City Manager
Civil Engineer
Community & Economic Development Director
Community Service Officer
Community Service Officer Supervisor
Court Liaison
Crew Leader
Electrical Inspector
Engineering Inspector
Fire – All Sworn Officers
Housing Inspector
Lab/Property Specialist
Maintenance Operator
Mechanic
Plumbing Inspector
Police – All Sworn Officers
Principal Engineering Technician
Public Works Foreman
Public Health Nurse
Sanitarian
Senior Civil Engineer
Superintendent
Water Plant Operator

**ADDENDUM A
DRUG AND ALCOHOL TESTING POLICY
FOR DOT COMMERCIAL DRIVER'S LICENSE HOLDERS (PUBLIC WORKS)**

Section 1 – PURPOSE

This policy complies with the U.S. Department of Transportation 49 CFR Part 382, as amended and 49 CFR Part 40, as amended. Copies of Parts 382 and 40 are available in the employer's office and can be found on the internet at the Department of Transportation (DOT) Office of Drug and Alcohol Policy and Compliance website <http://www.dot.gov/odapc>. All drivers who hold commercial driver's license (CDL) are required to submit to drug and alcohol tests as a condition of employment in accordance to these regulations.

This policy supersedes any previous employer policy or agreement that may be in existence prior to the effective date of this policy. This policy becomes effective **March 2, 2020**.

Portions of the Policy in bold and underlined reflect the employer's independent authority. Any drug or alcohol test performed under the employer's independent authority will be conducted on non-DOT forms.

Any questions or assistance needed regarding the municipality's CDL drug & alcohol testing program should be directed to:

NAME(S): Tim Watkins/ Tom Bueser

OFFICE LOCATION: 1111 Joseph Schwab Rd., Des Plaines, IL 60016

PHONE (Tim): (847) 391-5468 (Tom): 847-391-5470

Section 2 – DEFINITIONS

ADULTERATED SPECIMEN is a specimen that has been altered, as evidenced by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

AIR BLANK is a reading by an evidential breath testing device (EBT) of ambient air containing no alcohol. (For EBTs that use gas chromatography technology, it is a reading of the device's internal standard).

ALCOHOL USE. The drinking or swallowing of any beverage, liquid mixture or preparation (including any medication), containing alcohol.

ALIQUOT – A fractional part of a specimen used for testing. It is taken as a sample representing the whole specimen.

ASD (ALCOHOL SCREENING DEVICE). A breath or saliva device, other than an EBT, that is approved by the National Highway Traffic Safety Administration and placed on the Conforming Products List for such devices.

BAT (BREATH ALCOHOL TECHNICIAN) is an individual who instructs and assists individuals in the alcohol testing process and operates an EBT. A BAT may also act as a Screening Test Technician (STT) who instructs and assists individuals in the alcohol testing process and operates an ASD.

CANCELED TEST is a drug or alcohol test that has a problem identified that cannot be or has not been corrected, or in which 49 CFR Part 40 otherwise requires a test to be cancelled. A cancelled test is neither a positive nor a negative test.

CDL (COMMERCIAL DRIVERS LICENSE) means a license issued by a State or other jurisdiction, in accordance with the standards contained in 49 CFR Part 383, to an individual which authorizes the individual to operate a class of commercial motor vehicle.

CMV (COMMERCIAL MOTOR VEHICLE) means a motor vehicle or combination of motor vehicles used in commerce to transport passengers or property if the motor vehicle --

- (1) Has a gross combination weight rating of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
- (2) Has a gross vehicle weight rating of 26,001 or more pounds; or
- (3) Is designed to transport 16 or more passengers, including the driver; or
- (4) Is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded under the Hazardous Materials Regulations.

COLLECTOR is a person who instructs and assists individuals at a collection site and who receives and makes an initial inspection of the specimen provided by those employees, and who initiates and completes the CCF.

CONFIRMATION (or confirmatory) TEST. In drug testing, a second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or drug metabolite. In alcohol testing, a second test, following a screening test with a result of 0.02 or higher that provides a quantitative data of alcohol concentration.

CONSORTIUM is the Mid-West Truckers Association Drug and Alcohol Testing Consortium (hereinafter called the Consortium). The Consortium is a service agent that provides and coordinates the provisions of a variety of drug and alcohol testing services through other service agents for its participants.

CONTROLLED SUBSTANCES means the same as Drugs.

DER (DESIGNATED EMPLOYER REPRESENTATIVE) is an employee authorized by the employer to take immediate action(s) to remove employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the employer, consistent with the requirements of Part 40.

DHHS (DEPARTMENT OF HEALTH AND HUMAN SERVICES) is the Department or any designee of the Secretary, Department of Health and Human Services.

DILUTE SPECIMEN A specimen with creatinine and specific gravity values that is lower than expected for human urine.

DOT means the U.S. Department of Transportation.

DRIVER means any person who operates any commercial motor vehicle. This includes, but is not limited to: full time, regularly employed drivers; casual, intermittent or occasional drivers; leased drivers and independent owner-operator contractors who are either directly employed by or under lease to an employer or who operate a commercial motor vehicle at the direction of or with the consent of an employer. Driver includes both applicants for employment (subject to pre-employment testing) and current drivers employed by this employer.

DRUGS – The drugs or classes of drugs for which tests are required under Parts 40 and 382.

EBT (EVIDENTIAL BREATH TESTING DEVICE) is a device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath at the .02 and .04 alcohol concentrations, placed on NHTSA's Conforming Products List (CPL) of Evidential Breath Measurement Devices, and identified on the CPL as conforming with model specifications available from NHTSA's Traffic Safety Programs.

EMPLOYEE means the same as Driver.

EMPLOYER means a person or entity employing one or more employees (including an individual who is self-employed) that is subject to 49 CFR Parts 382 and 40. The term employer includes an employer's officers, designated representatives or management personnel.

FMCSA (FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION) is the federal agency responsible for the administration of federal regulations for commercial motor vehicle drivers.

HHS means the same as the Department of Health and Human Services (DHHS).

INITIAL TEST (or screening test) - In drug testing, it is the test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites. In alcohol testing, it is an analytical procedure to determine whether an employee may have a prohibited concentration of alcohol in a breath or saliva specimen.

INVALID DRUG TEST is the result reported by an HHS-certified laboratory in accordance with the criteria established by HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

LABORATORY any U.S. laboratory certified by HHS under the National Laboratory Certification Program as meeting the minimum standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under Part 40.

MRO (MEDICAL REVIEW OFFICER) is a licensed physician (Medical Doctor or Doctor of Osteopathy) responsible for receiving and reviewing laboratory results generated by an employer's drug testing program and evaluating medical explanations for certain drug test results. The MRO must be knowledgeable of and have clinical experience in controlled substances abuse disorders, including detailed knowledge of alternative medical explanations for laboratory confirmed drug test results. The MRO must be knowledgeable of issues relating to adulterated and substituted specimens as well as the possible causes of specimens having an invalid result.

MUNICIPALITY means the same as Employer.

NEGATIVE RESULT The result reported by an HHS-certified laboratory to an MRO when a specimen contains no drug or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

POSITIVE RESULT The result reported by an HHS-certified laboratory when a specimen contains a drug or drug metabolite equal to or greater than the cutoff concentrations.

PRIMARY SPECIMEN In drug testing, it is the specimen bottle that is opened and tested by a first laboratory to determine whether the employee has a drug or drug metabolite in his or her system; and for the purpose of validity testing.

RECONFIRMED The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

REFUSAL TO TEST (alcohol or controlled substances) means that a driver:

- 1) Fails to show up for any test within a reasonable time after being directed to do so by the employer or to remain at the testing site until the testing process is complete. This includes the failure of a driver (including an owner/operator) to appear for a test when called by the Consortium;
- 2) Fails to provide a specimen or fails to attempt to provide a saliva or breath specimen for any drug or alcohol test as required by this policy and 49 CFR Parts 382 and 40;
- 3) In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring in providing a specimen;
- 4) Fails to sign the certification at Step 2 of the Alcohol Testing Form;
- 5) Fails to provide a sufficient amount of specimen or a sufficient amount of breath, when directed; unless it has been determined, through a required medical evaluation, that there was an adequate medical explanation for the failure;
- 6) Fails or declines to take an additional test the employer or collector has directed the driver to take;
- 7) Fails to undergo an additional medical examination or evaluation as directed by the MRO as part of the verification process, or as directed by the employer concerning the evaluation as part of the shy bladder or insufficient breath procedures;
- 8) Fails to cooperate with any part of the drug or alcohol testing process (e.g., refuses to empty pockets when directed by the collector, behaves in a confrontational way that disrupts the collection process, fails to wash hands after being directed to do so by the collector);
- 9) For an observed collection, fails to follow the observer's instructions to raise his/her clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if the driver has any type of prosthetic or other device that could be used to interfere with the collection process;
- 10) Possesses or wears a prosthetic or other device that could be used to interfere with the collection process; or
- 11) Admits to the collector or the MRO that the driver has adulterated or substituted the specimen.

It is also considered a refusal to test (which is the same as a positive test) when the driver refuses to test or when the MRO reports to the employer/Consortium that a driver has a verified adulterated or substituted drug test result.

REJECTED FOR TESTING The result reported by an HHS-certified laboratory when no tests are performed for a specimen because of a fatal flaw or a correctable flaw that is not corrected.

SAFETY SENSITIVE FUNCTION means the time period when a driver begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work.

Safety Sensitive Functions shall include:

- (1) All time at an employer or shipper plant, terminal, facility or other property, or any public property, waiting to be dispatched, unless the driver has been relieved from duty by the employer;
- (2) All time inspecting equipment as required by 49 CFR Parts 392.7 and 392.8 or otherwise inspecting, servicing or conditioning any commercial motor vehicle at any time;
- (3) All time spent at the driving controls of a commercial motor vehicle in operation;
- (4) All time, other than driving time, in or upon any commercial motor vehicle except time resting in a sleeper berth (a berth conforming to requirements of 49 CFR Part 393.76);
- (5) All time loading and unloading a vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded; and
- (6) All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

SAMHSA (SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION) is the federal agency under the Department of Health and Human Services (DHHS) responsible for the certification of laboratories used as part of the drug testing program.

SAP (SUBSTANCE ABUSE PROFESSIONAL) means a licensed physician (Medical Doctor or Doctor of Osteopathy); or a licensed or certified psychologist, licensed or certified social worker, or a licensed or certified employee assistance professional; or a state-licensed or certified marriage and family therapist; or addiction counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission; or by the International Certification Reciprocity Consortium/Alcohol & Other Drug Abuse; or by the National Board for Certified Counselors, Inc. and Affiliates/Master Addictions Counselor). A qualified SAP must be knowledgeable of and have clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders, must be knowledgeable of the SAP function as it relates to employer interests in safety-sensitive duties and, must be knowledgeable of 49 CFR Parts 382 and 40, the DOT SAP Guidelines and stay current on any changes to these materials.

SPLIT SPECIMEN A part of the specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests it to be tested following a verified positive, adulterated or substituted test of the primary specimen.

SPLIT SPECIMEN COLLECTION A collection in which the specimen collected is divided into two separate specimen bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

STT (SCREENING TEST TECHNICIAN) is a person who instructs and assists individuals in the alcohol testing process and operates an alcohol screening device (ASD).

SUBSTITUTED SPECIMEN is a specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

VERIFIED TEST is a drug test result or validity test result from a DHHS/SAMHSA-certified laboratory that has undergone review and final determination by the MRO.

Section 3 – PROHIBITED BEHAVIOR

49 CFR Parts 382 and 40 prohibit the use/misuse of controlled substances and/or alcohol by drivers of commercial motor vehicles.

No driver, at any work site, in any municipality vehicle or leased vehicle, will possess any quantity of any controlled substance or alcohol, lawful or unlawful, which in sufficient quantity could result in impaired performance.

The employer will maintain a pre-employment screening program designed to prohibit the hiring of anyone who uses any illegal drugs.

No driver will report for duty or remain on duty requiring the performance of safety-sensitive functions (including driving a CMV) when the driver uses any drug or substance identified in 21 CFR 1308.11 Schedule 1. No driver shall report for duty, remain on duty or perform safety-sensitive functions (including driving a CMV) if the driver tests positive or has adulterated or substituted a drug test. The employer having actual knowledge that the driver has tested positive or has adulterated or substituted a drug test, shall not permit the driver to perform or continue to perform safety-sensitive functions (including driving a CMV). The employer can obtain actual knowledge that a driver has used alcohol or drugs based on the employer's direct observation of the driver, information provided by the driver's previous employer(s), a traffic citation for driving a CMV while under the influence of alcohol or drugs or an driver's admission of alcohol or drug use.

The consumption of alcohol is prohibited while the driver is performing a safety-sensitive function. No driver shall report for duty or remain on duty, requiring the performance of safety-sensitive functions, while consuming or having consumed alcohol within four hours of reporting for such duties, or having a BAC of .04 or greater. The employer having knowledge of such conditions shall not allow a driver to perform or continue to perform safety-sensitive functions.

Any driver that has an alcohol concentration of .02 or greater, but less than .04, shall not perform or continue to perform safety-sensitive functions, nor shall the employer allow a driver to perform or continue to perform safety-sensitive functions, until the start of the driver's next regularly scheduled work period, but not less than 24 hours following the administration of the alcohol test.

No driver required to take a post-accident alcohol test shall use alcohol for up to eight hours after the accident or until a post-accident test is completed.

A driver who refuses to submit to a drug or alcohol test (see Refusal to Test definition in Section 2) when required in accordance with 49 CFR Parts 382 and 40 shall not perform or continue to perform safety-sensitive functions.

Any driver who has engaged in prohibited behavior in this Section (except when a driver has a BAC of .02 or greater, but less than .04), shall be advised by the employer of the resources available in evaluating and resolving problems associated with the misuse of alcohol and/or drugs by providing the driver with a listing of SAP's. **The driver will also be subject to the Disciplinary Action in this policy.**

Section 4 - TYPES OF TESTING

According to Part 382, drivers shall be subject to pre-employment, random, post-accident, reasonable cause, return-to-duty and follow-up drug and/or alcohol testing.

PRE-EMPLOYMENT TESTING - The driver shall be drug tested and the employer must receive the verified negative drug test result for the driver from the MRO/Consortium before allowing a driver to perform a safety-sensitive function for the first time (Attachment A must be completed by the driver).

RANDOM TESTING - Testing rates will meet or exceed the minimum annual percentage rate set each year by the FMCSA Administrator. The current year testing rates can be viewed online at <http://www.dot.gov/odapc/random-testing-rates>.

On a regular basis, the Consortium's service agent will, from the total group, randomly select by a computer-based random number generated program that is matched with the membership numbers, the drivers' names, their social security numbers or other comparable identifying numbers. Under the selection process used, each driver shall have an equal chance of being selected each time selections are made.

Once the Consortium's service agent makes the random selections, the random list will be forwarded to the Consortium. The Consortium will notify the employers of the drivers selected. The employer will be given a date before which the driver must be tested per the random selection process. The employer shall ensure that random drug and alcohol tests conducted under the random testing regulations are unannounced. A driver shall only be tested for alcohol while the driver is performing safety-sensitive functions, just before the driver is to perform safety-sensitive functions, or just after the driver has ceased performing such functions.

POST-ACCIDENT TESTING - As soon as possible following an accident involving a CMV on a public road, a post-accident drug and alcohol test shall be conducted when one of the three circumstances below applies:

1. If an accident involves a fatality;
2. If a driver receives a citation for a moving traffic violation and the accident involves bodily injury to a person who as a result of the accident immediately receives medical treatment away from the scene of the accident, or,
3. If a driver receives a citation for a moving traffic violation and one or more motor vehicles incur disabling damage as a result of the accident, requiring the motor vehicle(s) to be transported away from the scene by a tow truck or other motor vehicle.

If the alcohol test is not conducted within two hours following the accident, a record shall be prepared and maintained why the alcohol test was not promptly administered. If an alcohol test is not conducted within eight hours following the accident, the employer shall cease all attempts to complete the alcohol test and a record shall be prepared and maintained why the alcohol test was not promptly administered. (See Attachment C)

If a post-accident drug test is not conducted within 32 hours following the accident, the municipality shall cease all attempts to conduct the drug tests and prepare and maintain on file a record stating why the drug test was not promptly administered. (See Attachment C)

A driver who is subject to post-accident testing shall remain readily available for such testing or may be deemed by the employer as a refusal to test. Nothing in this Section shall be construed to require the delay of necessary medical attention for injured people following an accident or to prohibit a driver from leaving the scene of an

accident for the period necessary to obtain assistance in responding to the accident, or to obtain necessary medical care.

The employer shall provide the driver with necessary post-accident information, procedures and instructions prior to the driver operating a CMV, so that the driver will be able to comply with the requirements of this section. (See Attachment D)

Drug and/or breath or blood alcohol tests conducted by federal, state or local officials, having independent authority for the test, shall be considered to meet the post-accident testing requirements, provided such testing conforms to the applicable federal, state or local drug and/or alcohol testing requirements and that the results are obtained by the employer.

REASONABLE SUSPICION TESTING - When the employer's designated person(s) has reasonable suspicion that a driver has violated Section 3 of this Policy, the driver shall be required to submit to an alcohol and/or drug test. The employer's determination that reasonable suspicion exists to require the driver to undergo an alcohol and/or drug test must be based on specific contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odor of the driver. (See Attachment E)

Alcohol testing is authorized only when observations of the driver are made during, just before or just after the period of the work day the driver is required to be in compliance with Part 382. The driver may be required to undergo reasonable suspicion alcohol testing while the driver is performing safety-sensitive functions, just before the driver is to perform safety-sensitive functions, or just after the driver has ceased such functions.

If a reasonable suspicion alcohol test is not conducted within two hours after observing the driver, the employer shall prepare and maintain on file a record stating the reason why the test was not promptly administered. If the test is not conducted within eight hours after observing the driver, the employer shall cease attempts to conduct the test and prepare and maintain on file a record stating the reasons why the test was not administered.

No driver shall report for duty or remain on duty when the employer's designated person(s) has observed the driver using or under the influence of alcohol or impaired by alcohol. The employer shall not permit the driver to perform or continue to perform safety-sensitive functions until an alcohol test is conducted and the driver's alcohol test result is less than .02 or 24 hours have elapsed since the employer's first suspicion of the driver being under the influence of or impaired by alcohol.

The reasonable suspicion observation form must be completed and signed by at least one of the employer's designated person(s) who made the observations either within 24 hours of the observed behavior or before the drug test results are released, whichever is earlier. (See Attachment F)

RETURN TO DUTY TESTING – When a driver has violated a drug or alcohol regulation, the employer, before returning a driver to duty to perform safety-sensitive functions, shall ensure the driver has followed the procedures outlined in 49 CFR Part 40, Subpart O.

The SAP will provide a follow-up evaluation letter to the employer and clearly state the driver has complied with his/her recommendations for education/treatment. If the employer allows a driver to return to safety-sensitive functions, a return to duty test will be scheduled. The return to duty drug collection is conducted under direct observation.

FOLLOW-UP TESTING – If the employer allows a driver to return to safety-sensitive functions, follow up testing will be conducted as specified in 49 CFR Part 40, Subpart O and according to the SAP's follow up

evaluation letter. The employer will ensure that all follow up drug collections are conducted under direct observation.

Section 5 - DRUG TESTING - Drug testing procedures will be followed in accordance with 49 CFR Part 40.

When a driver arrives at the collection site, the testing process will begin without undue delay. To ensure the security during the testing process, only one collection will be conducted at a time. The driver must have positive identification either by photo identification or by the identification of the driver by the employer's designated representative. The collector will explain the basic collection procedures and show the driver the instructions on the back of the Federal Drug Testing Custody and Control Form (hereinafter called CCF). The driver will be instructed to remove and leave with the collector, or in a mutually agreeable location, any outer clothing along with any briefcase, purse or other personal belongings. The driver may retain his/her wallet.

The driver will be directed to empty his/her pockets and display the items in them. If the collector determines none of the items could adulterate the specimen, the driver may return the items into his/her pockets. If there is material that could adulterate a specimen, the collector must determine whether it was accidentally brought in or intentionally brought in to adulterate a specimen. If it was accidental, the collector will retain the material and return it when the testing process is complete. If it was intentional, a direct observation test will take place immediately.

The collector shall complete Step 1 of the CCF. The driver shall wash and dry his/her hands before providing the specimen, then will have no further access to water or other materials until the specimen is given to the collector. The driver will be instructed to provide at least 45 mL of urine, not flush the toilet and return to the collector with the specimen. The driver will provide the specimen in private, except in the case of an observed or monitored collection. Any conduct that clearly indicates an attempt to tamper with a specimen will cause a new collection under direct observation to take place immediately.

The collector will ensure there is at least 45 mL of urine in the collection container and the temperature of the specimen is within the range of 90-100 degrees. If the temperature is out of that range, a new collection under direct observation will take place immediately. The specimen will also be inspected for unusual color, the presence of foreign objects or material or for other signs of tampering. If it is apparent the driver has tampered with the specimen, a new collection under direct observation will take place immediately.

If a direct observation collection must take place, it must be conducted immediately. All direct observation collections are done without any advance notice to the driver. The collector shall explain to the driver the reason for the direct observation test, except when the employer is required to do so. The collector or an observer must be the same gender as the driver. The same gender collector or observer must request the driver to raise his or her shirt, blouse, or dress/skirt, as appropriate, above the waist; and lower his/her clothing and underpants to show the collector or observer, by turning around, that the driver does not have a prosthetic device. After the collector or observer has determined the driver does not have such a device; the driver may be permitted to return the clothing to its proper position for the observed urination. The collector or observer must watch the urine go from the driver's body into the collection container. An observer will continue to watch the specimen until it is given to the collector.

A monitored collection will only be conducted if a multi-stalled restroom is used and all sources of water or potential adulterants cannot be secured. The collector must be the same gender, unless he or she is a medical professional. An observer must be the same gender. A bluing agent shall be put in the toilet the driver will use. The driver shall provide the urine specimen behind a closed stall door with the collector/observer standing outside of the stall door listening to the driver urinate into the collection container. If the collector/observer hears sounds

or makes other observations of the driver attempting to tamper with a specimen, another collection will take place immediately under direct observation.

The tabs on the specimen bottles will be broken in front of the collector and the driver. The driver will give the specimen container to the collector and the collector will pour the urine specimen into the split specimen bottles. The primary specimen shall be at least 30 mL of urine and the split specimen shall be at least 15 mL of urine. The driver should observe the specimen at all times until the lids/caps are secured and the tamper-evident bottle seals are put over the lids/caps (this is for the driver's protection to ensure it is his/her specimen). The driver is to initial the tamper-evident bottle seals on the bottles for proof that it is her/her specimen. The driver will also be required to sign the CCF as proof that the specimen identified as having been collected is in fact the driver's. The collector will complete the CCF and place the specimen bottles and Copy 1 of the CCF in the pouches of the plastic bag and secure both pouches. The driver will then be dismissed from the collection site.

Both specimens will be sent by overnight delivery to the DHHS/SAMHSA-certified laboratory for testing of the drugs or classes of drugs as identified in 49 CFR Part 40.85.

Before a laboratory-confirmed positive test, adulterated test, substituted test or invalid test result will be released to the Consortium, the MRO will conduct a verification interview with the driver by telephone unless: the driver declines to discuss the test result; the MRO or the employer cannot make contact with the driver within 10 days of the MRO receiving the laboratory result; or more than 72 hours have passed since the employer has contacted the driver to call the MRO.

Before the start of the verification interview with the driver, the MRO will warn the driver that any information given to the MRO on the driver's use of legally valid prescription under the Controlled Substances Act will be provided to third parties if the MRO determines the information will likely result in the driver being medically unqualified to perform safety-sensitive functions, or is likely to pose a significant safety risk if the driver is allowed to continue performing safety-sensitive functions.

After informing any third party about the medication, the MRO will allow 5 days for the driver to have his/her prescribing physician contact the MRO to determine if the medication can be changed to one that does not make the driver medically unqualified or pose a safety risk. If the MRO receives such information from the physician, the MRO must inform any third party who he had previously provided information to about the safety risks of the driver's other medication.

During the verification process, if the driver can give the MRO a legitimate medical explanation for the positive, adulterated or substituted test result, the MRO will report the verified test result as negative. If the driver cannot give the MRO a legitimate medical explanation, the verified positive test result will be reported as positive and the verified adulterated or substituted test result will be reported as a refusal to test. If the test result is invalid or contains an unexplained interfering substance and the driver cannot give the MRO an acceptable explanation or a valid prescription and the driver does not admit to adulterating or substituting the specimen, the verified test result will be reported as a cancelled test with a second collection to take place immediately on the driver under direct observation. If the driver can give the MRO an acceptable explanation, the verified test result will be a cancelled test with no further testing needed unless a negative result is needed for pre-employment, return to duty or follow-up testing. If the driver admits to adulterating or substituting the specimen, the verified test result will be reported as a refusal to test.

All verified negative, refusal to test (adulterated or substituted), positive, canceled and invalid test results will be released by the MRO to the Consortium, who will forward the results to the employer.

Dilute Specimens: The employer has chosen not to conduct a second collection on negative dilute test results.

Shy Bladder: After a driver's first unsuccessful attempt to provide a minimum of 45 mL of urine, the shy bladder time starts. The collector will document on the remarks line of the CCF and inform the driver of the time in which the 3-hour period begins and ends. Any insufficient specimen shall be discarded. The driver will be urged to drink up to 40 oz. of fluids, reasonably through a period of up to 3 hours; however, it is not considered a refusal to test if the driver chooses not to drink fluids. If the driver does not provide a sufficient amount of specimen within 3 hours, the collection will be discontinued and the employer will be notified. The employer will consult with the MRO, then direct the driver to obtain, within 5 working days, an evaluation from a licensed physician, acceptable to the MRO, who has expertise in the medical issues associated with the driver's inability to provide an adequate amount of specimen. The physician must provide to the MRO a written statement of his/her recommendations and the basis for them. If the driver has a medical condition that could have prevented him/her from providing a sufficient amount of urine, and the MRO agrees with the physician's recommendation, the MRO will report the test result as a cancelled test. If the driver does not have a medical condition that could have prevented him/her from providing a sufficient amount of urine and the MRO agrees with the physician's recommendation, the MRO will report the test result as a refusal to test.

Split Specimen Testing: In the event of a verified positive, adulterated or substituted test result, the driver can request the MRO to send the split specimen to a second laboratory to be tested within 72 hours from the time the driver was notified of the result. **The driver shall reimburse the employer for the cost of the split specimen test.**

Section 6 - ALCOHOL TESTING - Alcohol testing procedures will be followed in accordance with 49 CFR Part 40.

If both a drug and alcohol test is to be conducted on the driver, the alcohol test must be completed before the urine collection process begins. A driver shall only be tested for alcohol while the driver is performing a safety-sensitive function, just before a driver is to perform a safety-sensitive function, or just after the driver has ceased performing a safety-sensitive function.

To ensure the security of the alcohol testing site, only authorized personnel shall be allowed to enter the testing site. The BAT/STT shall ensure that the driver is given privacy while an alcohol test is being conducted to prevent unauthorized persons from seeing or hearing the test result. Alcohol testing will be conducted on one driver at a time. The screening test and confirmation test, if needed, will be completed on a driver before the BAT/STT starts an alcohol test on another driver to be tested.

A driver shall appear at the collection site at the time specified by the employer. If the driver does not appear at the specified time, the BAT/STT shall notify the employer to determine how long it should take for the driver to arrive at the collection site. If the driver has not arrived by that time, the BAT/STT will contact the employer to inform him/her the driver has not reported for testing.

When the driver arrives at the collection site, the testing process will begin without undue delay. The driver must have positive identification either by photo identification or by the identification of the driver by the employer representative. The BAT/STT will explain the testing procedures and show the instructions on the back of the DOT Alcohol Testing Form (hereinafter called ATF) to the driver. The BAT/STT shall complete Step 1 on the ATF. The driver will then be directed to complete Step 2 on the ATF and sign the certification. If the driver refuses to sign the certification, the BAT/STT will document on the ATF that the driver has refused to test and the employer will be immediately notified.

If an ASD is used for the screening test, the BAT/STT will follow the manufacturer's directions for use. If the alcohol concentration is less than .02, The BAT/STT will sign and date Step 3 of the ATF and transmit the alcohol test result using Copy 1 of the ATF by telephone, electronic means, or in person to the employer. The ASD and materials used in the testing process shall be properly disposed of. If the alcohol concentration is greater than or equal to 0.02, the BAT will immediately conduct a confirmation test using an EBT.

If an EBT is used for the screening test, the BAT or the driver will select an individually sealed mouthpiece. The BAT will open the sealed mouthpiece in front of the driver and insert it into the EBT. The driver will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The driver will be shown the breath alcohol test result and the result will be affixed to the ATF with tamper-evident tape.

If the result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the ATF. The BAT must transmit the alcohol test result using Copy 1 of the ATF immediately by telephone, electronic means or in person to the employer. If the alcohol concentration is 0.02 or greater, a confirmation test shall be conducted with an EBT not less than 15 minutes nor more than 30 minutes after the completion of the screening test. During that time, the driver will be asked not to eat, drink, belch or put anything into his/her mouth to prevent an accumulation of mouth alcohol that could lead to an artificially high reading on the confirmation test. The BAT/S TT will note in the remarks on the ATF these instructions were given and will also note on the ATF if the driver chose to ignore the instructions. The confirmation test will still be conducted. If the confirmation test will be conducted at a different site, the BAT/ STT or the employer must transport the driver to the testing site. The driver will not be allowed to drive a motor vehicle.

If the confirmation test is conducted more than 30 minutes after the result of the screening test, the BAT shall note in the remarks on the ATF the reason the confirmation test could not be conducted within the 15-30 minute time frame. The confirmation test will still be conducted.

An individually sealed mouthpiece will be opened in front of the driver and attached to the EBT. The BAT and the driver shall read the sequential test number displayed on the EBT. The driver will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The driver will be shown the breath alcohol test result and the result will be affixed to the ATF with tamper-evident tape.

If the confirmation test result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the ATF. The BAT must transmit the alcohol test result using Copy 1 of the ATF immediately by telephone, electronic means or in person to the employer. If the confirmation test result is 0.02 or greater alcohol concentration, the driver shall be directed to sign Step 4 on the ATF. If the driver does not sign, the BAT will note in the remarks on the ATF of the driver's failure to sign Step 4. The driver's failure to sign Step 4 will not be considered a refusal to test. The BAT must immediately notify the employer by any means of an alcohol test result of 0.02 or greater to ensure the result is immediately received by the employer.

Inability to Provide an Adequate Amount of Breath: If a driver is unable, or alleges he/she is unable to provide an amount of breath sufficient to give a reading on the EBT, the BAT should again instruct the driver to attempt to provide an adequate amount of breath and the proper way to do so. If the driver refuses to make a second attempt, the BAT shall discontinue the test and immediately notify the employer.

If the driver fails to provide an adequate amount of breath, the BAT shall note the failure on the remarks of the ATF and immediately notify the employer. The employer will then direct the driver to obtain, within 5 days, an evaluation from a licensed physician who is acceptable to the employer and has expertise in the medical issues

associated with the driver's inability to provide a sufficient specimen. The employer will tell the physician the driver was required to take a DOT breath alcohol test but was unable to provide a sufficient amount of breath and the consequences for refusing to take the required alcohol test. If the physician determines the driver has a medical condition that could have prevented him/her from providing a sufficient amount of breath, the test will be cancelled. If the physician determines the driver does not have a medical condition that could have prevented him/her from providing a sufficient amount of breath, it will be considered a refusal to test. The employer shall notify the driver of the physician's conclusions.

Section 7 - ACCESS TO RECORDS

All records pertaining to the employer's drug and alcohol testing program shall be maintained in a secure location with controlled access. Access and release of drug and alcohol testing records shall be in accordance with 49 CFR Parts 382 and 40.

Upon written request, drivers are entitled to copies of their records pertaining to their use of drugs or alcohol, including any records pertaining to their drug and alcohol tests. Drivers are also entitled to have access to any pertinent records directly related to their given drug or alcohol specimen testing.

Records to subsequent employers shall be made available upon receipt of a specific written authorization from the driver. The employer will only disclose information that is expressly authorized by the terms of the driver's request. The employer shall provide such information and results requested promptly to the subsequent employer at no charge.

Records shall be made accessible pertaining to the employer's drug and alcohol testing program at all of the employer's facilities to the U.S. Secretary of Transportation, any DOT agency, or any state or local officials with regulatory authority over the employer's drivers.

Section 8 - EMPLOYEE ASSISTANCE PROGRAM & GENERAL INFORMATION

Each driver must sign an Acknowledgment (Attachment G) that they received a copy of the Drug & Alcohol Abuse Policy that complies with Part 382.601. Drivers shall be made aware of educational information concerning the effects and consequences of drug and alcohol use on the driver's personal health, safety and work environment, including signs and symptoms of a drug or alcohol problem.

It is the driver's responsibility to report to work fit for duty, and remain fit throughout the workday in order to perform in a safe, efficient and productive manner. The driver will also be made aware of the signs and symptoms of a drug and/or alcohol problem (his/hers or a co-worker's) and shall be made aware of ways to intervene when a problem is suspected, including referral to management, referral to an employee assistance program (if available from the employer), and referral to drug and/or alcohol abuse hotlines and help-lines, or local Alcoholics Anonymous or Narcotics Anonymous groups. Referrals to local Alcoholics Anonymous or Narcotics Anonymous groups or drug and/or alcohol abuse hotlines and help-lines are made available as a reference only: Alcoholics & Narcotics Help Line (888) 206-7272; Focus on Recovery Help-Line for Alcohol and Drug Abuse (800) 234-0286; or the Center for Substance Abuse Treatments Drug Information, Treatment, and Referral Hotline (800) 662- 4357.

A driver shall not report for duty or remain on duty requiring performance of safety-sensitive functions when the driver uses a non- Schedule I drug or substance that is identified in the other Schedules in 21 CFR Part 1308 except when the use is pursuant to the instruction of a licensed medical practitioner who is familiar with the

driver's medical history and has advised the driver that the substance will not adversely affect the driver's ability to safely operate a commercial motor vehicle (CMV). The employer may require the driver to inform them of any therapeutic drug use. **If the driver does not promptly provide verification from the medical practitioner that the substance will not adversely affect the driver's ability to safely operate the CMV, the employer will temporarily remove or reassign the driver from a safety-sensitive function, if deemed appropriate.**

A driver may come forward for assistance with a drug and/or alcohol use problem, as long as it is before a driver's notification of an impending drug and/or alcohol test and before the driver performs a safety-sensitive function. The employer shall provide the driver with referrals of where the driver can go for assistance and give the driver sufficient opportunity to complete the counseling, education or rehabilitation required by a drug and alcohol professional; e.g., a qualified drug and alcohol counselor or substance abuse professional. No adverse action will be taken against the driver. The driver will not perform safety-sensitive functions until the employer is satisfied that the employee has been evaluated and has successfully completed the counseling or treatment requirements and the driver tests negative on a return to duty drug and/or alcohol test. **The employer may require follow up testing after the driver returns to duty. All costs associated with the evaluation and rehabilitation will be the responsibility of the driver. The return to duty and any follow up testing conducted shall be pre-paid by the employer, to be immediately reimbursed by the driver.**

We may conduct reasonable searches for illegal drugs or alcohol on the employer's premises or in employer-owned or leased motor vehicles. Searches of drivers and their personal property may be conducted when there are reasonable grounds to believe the driver is in violation of this policy. All drivers are expected to cooperate in such searches. A driver's refusal to cooperate or consent to such searches may result in disciplinary action, including termination.

The unlawful manufacture, distribution, dispensation or possession of drugs are prohibited on all employer premises, at any location the driver is performing work for the employer or in any employer-owned or leased commercial motor vehicle. If the employer proves a driver is engaging in any of these activities, the driver shall be subject to termination. Any driver who faces criminal action as a result of engaging in these activities will be immediately suspended until the court makes a final determination. If the driver is convicted, the driver will be immediately terminated. If the driver is found not guilty, the driver will be placed back into a safety sensitive function.

Section 9 - INFORMATION CONCERNING THE EFFECTS OF ALCOHOL AND CONTROLLED SUBSTANCES USE ON AN INDIVIDUAL'S HEALTH, WORK & PERSONAL LIFE

Employees who abuse drugs and/or alcohol cause more absenteeism, loss in work productivity, more accidents and more medical claims. This results in a loss of \$140 billion to American businesses each year. Compared with the average employee, a typical drug-using employee in the workplace is:

- 2.5 times more likely to be absent 8 days or more each year; 3 times more likely to be late for work;
- 3.6 times more likely to be involved in workplace accidents;
- 5 times more likely to file a workers' compensation claim; and, Incur 300% higher medical claims.

Marijuana - The common name for the drug made from chopped leaves, stems and flowering tops of a cannabis plant. Some common street names for marijuana are "dope," "blunt," "joint," "pot," "reefer." Marijuana can be smoked or eaten. Marijuana is a depressant and mind-altering drug. It works on the brain and causes hallucinations. A person using marijuana is more than likely to experience slowed reaction time, reduced concentration, distorted vision and depth perception, is slower in making decisions, often drives slower than the speed limit, is unable to correctly measure distance and time, and has impaired short-term memory.

Some of the symptoms and signs of marijuana use are:

Short-term memory loss	reddened eyes	moodiness
Increased appetite	slowed thinking	loss of memory
Increased heart rate	dilated pupils	

Some visible signs noted for the presence of marijuana are:

Roach clips	bongs	Cigarette rolling papers
Small pipes	one hitters (usually metal - slim tubular device)	

The active ingredient in marijuana (THC) is stored in the body fat and could be retained for days or weeks, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Marijuana and alcohol together will magnify the effects of both many times. Chronic marijuana smoking could cause severe irritation of the lungs, heart problems, reduced immune system and possible brain damage.

Phencyclidine - It was developed originally as an anesthetic but was taken off the market because it sometimes caused hallucinations. The most common street names for phencyclidine are "PCP", "angel dust," "crystal" and "tea". Phencyclidine is sold in various forms, mainly as a white, off-white or brown crystal-like powder, tablet or capsule. It can be ingested by mouth, snorted or injected intravenously. It can also be smoked when combined with marijuana or tobacco. A person using phencyclidine is more than likely to experience impaired coordination and dulled senses, a sense of power, drowsiness, aggressive behavior, hallucinations and blurred or double-vision. In some cases a person could even experience convulsions, coma, ruptured blood vessels in the brain, heart and lung failure, or even death.

Some of the symptoms and signs of phencyclidine use are:

Confusion	increased blood pressure	anxiety
Panic	dizziness	drowsiness
Hallucinations	disorientation	sweating
Increased heart rate	aggressive behavior	

Some of the signs for the presence of phencyclidine are:

Needles	capsules	syringes
Plastic packets with powdery substance	tablets	

Phencyclidine is water soluble but still could be retained in the body's system for days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. P and alcohol together is dangerous and could cause an overdose. Chronic Phencyclidine use could cause hallucinations, psychosis, convulsions, coma or possible death.

Cocaine - Cocaine comes from the leaves of coca plants. Some common street names for cocaine are "coke," "crack," "rock," "snort," "toot," "blow," and "snow." Cocaine can be snorted, injected intravenously, smoked or free-based (heating the cocaine and inhaling the vapors). Cocaine stimulates the body's central nervous system. Psychological dependence on the drug can be high with repeated use. A person using cocaine is more than likely to experience impatience, anger, over stimulated reflexes, distorted vision and depth perception, slow reaction time and false sense of security and alertness. In some cases, a person could even experience seizures, heart attacks, convulsions, hallucinations and death.

Some of the symptoms and signs of cocaine use are:

Dilated pupils	nose bleeds	paranoia
Irritability	runny nose	needle marks
Increased blood pressure	hallucinations	restlessness
Talkativeness	anxiety	weight loss
Depression	nervousness	

Some of the signs for the presence of cocaine are:

Small spoons	mirrors	needles
Small plastic bags or vials	syringes	small drinking straws
Razor blades	rolled paper currency	small butane torch

Cocaine is water soluble but still could be retained in the body's system for several days, depending on the quality of the drug, the tolerance of the user and the dosage or amounts taken. Cocaine causes the most mental dependency of any known drug. Cocaine and depressants, taken together, can be very dangerous or even fatal. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic cocaine use could cause seizures, heart attacks, strokes, convulsions, depression or death.

Amphetamines- Amphetamines are manufactured central nervous system stimulants used most often by individuals to stay awake. Psychological dependence on the drug can be high with repeated use. Some common street names for amphetamines are "speed," "crank," "meth," "crystal," "diet pills," "bennies" and "uppers." In pure form, amphetamines are yellowish crystals in which some are made into tablets, pills or capsules. Amphetamines can be ingested in tablet, pill or capsule form, snorted, or injected intravenously if in powder or liquid form. A person using amphetamines is more than likely to experience delayed reaction time, over stimulated reflexes, anxiety, irritability, distorted vision and depth perception, and a false sense of security and alertness.

Some of the symptoms and signs of amphetamine use are:

Loss of appetite	weight loss	sweating
Paranoia	dilated pupils	increased blood pressure
Dry mouth	talkativeness	sleeplessness
Nervousness	needle marks	depression
Hallucinations	anxiety	

Some of the signs for the presence of amphetamines are:

Pills	small butane torch	tablets
Rolled paper currency	capsules	small drinking straws
Small plastic bags or vials	razor blades	needles
Syringes		

Amphetamines are water-soluble, but still could be retained in the body's system for several days depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Chronic amphetamine use could cause physical collapse, delusions, hallucinations, brain damage, heart damage, toxic psychosis or death.

Opioids - Some opioids come from the seed pod of the Asian poppy. Other opioids are synthesized or manufactured. Psychological dependence can be high with repeated use. Some common street names are "horse," "junk," "smack," "downers," "M," "yellow jackets," "blues" and "ludes." Opioids are in many different compounds and forms. The most common are the pills, tablets or capsules. Other compounds and forms are in liquid or powder form. Opioids can be injected, smoked or injected intravenously. A person using opioids is more

than likely to experience distorted sense of time and distance, slowed reflexes, difficulty focusing, drowsiness and little or no concentration.

Some of the symptoms and signs of opioid use are:

Nausea	needle marks	loss of appetite
Confusion	drowsiness	cold or moist skin
Depression	short attention span	reduced pain
Memory loss	constricted pupils	sweating
Diarrhea	vomiting	

Some of the signs for the presence of opioids are:

Pills	bottle caps	tablets
Small packets	capsules	eye droppers
Needles	small spoons	syringes

Opioids are water soluble, but still could be retained in the body's system for one to several days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Opioids taken with alcohol and other depressant drugs magnify the effects of the opioids and could lead to overdoses. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic opioid use could cause loss of consciousness, convulsions, coma or death.

Alcohol - Some common street names for alcohol are "booze," "juice," "brew," "sauce" and "hooch." As a rule, a drink or two will create a feeling of well-being. What determines the rate of metabolism in the body and how fast it dissipates the alcohol depends on the altitude, the individual's body weight, metabolism, stomach content, gender, and whether the individual is sick or healthy, rested or tired. After the first drink or two, impairment begins, depending on the factors stated above. When the individual consumes alcohol that produces physical or mood-altering effects, it becomes a substance of abuse. A person using alcohol is more than likely to experience blurred or distorted vision, impaired reaction time, impaired judgment, anger, nausea, drowsiness and aggressiveness.

Some of the symptoms and signs of alcohol use are:

Slurred speech	hostility	odor on breath
Insomnia	flushed skin	loss of concentration
Glazed eyes	unsteadiness	blackouts
Memory loss	drowsiness	incoherence

Chronic alcohol use could cause brain damage, neurological damage, liver damage, pancreas and kidney damage, heart problems, strokes, cancer, coma, toxic psychosis and possible death.

Section 10 - DISCIPLINARY ACTION

During the probationary period, if a driver violates a drug or alcohol regulation outlined in this policy, he or she will be terminated. The employer will provide the driver who has violated a drug and/or alcohol regulation with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver.

If the employer chooses to rehire the driver for safety-sensitive functions, the driver must follow the procedures outlined in 49 CFR Part 40. The driver must test negative on a return to duty drug test and/or less than 0.02 on a

breath alcohol test before returning to safety- sensitive functions. The employer shall conduct follow up testing on the driver as specified in SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

For non-probationary drivers, if the driver violates a drug or alcohol regulation outlined in this policy, he or she will be subject to discipline up to and including termination. If termination does not occur, the employer will provide the driver who has violated a drug and/or alcohol regulation with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the driver. The driver must follow the procedures outlined in 49 CFR Part 40. If applicable, the driver must test negative on a return to duty drug test and/or less than 0.02 on a breath alcohol test before returning to safety-sensitive functions. The employer shall conduct follow up testing on the driver as specified in SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

All costs associated with the SAP evaluations and rehabilitation will be the responsibility of the driver. The return to duty and follow up testing costs shall be paid by the employer.

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ADDENDUM TO THE DOT DRUG & ALCOHOL ABUSE POLICY

REQUIREMENTS AND PROCEDURES FOR THE COMMERCIAL DRIVER'S LICENSE DRUG & ALCOHOL CLEARINGHOUSE

The Drug & Alcohol Clearinghouse is effective January 6, 2020. The Clearinghouse regulations are found in 49 CFR Part 382, Subpart G, as amended.

Employers or consortium/third-party administrators (C/TPA) will be required to query the Clearinghouse for current and prospective employees' drug and alcohol violations before permitting those employees to operate a commercial motor vehicle (CMV) on public roads. Employers or C/TPA will be required to annually query the Clearinghouse for each driver they currently employ.

A full query must be conducted to obtain information on whether the driver has a drug or alcohol violation as described in Part 382, Subpart B. The driver must sign a consent in the Clearinghouse to allow the employer to conduct the query. Refusal to consent in the Clearinghouse for the query will result in the driver no longer being eligible for the driving position. Additionally, the driver will be subject to discipline up to and including termination.

A limited query will be conducted once a year to determine whether information exists in the Clearinghouse on the driver. The driver will provide written consent for limited queries to be in effect for the length of the driver's employment with the employer. Failure to sign the consent for the queries will result in the driver no longer being eligible to drive a commercial motor vehicle for the employer. Additionally, the driver will be subject to discipline up to and including termination. If a limited query shows information exists in the Clearinghouse about the driver, the employer will conduct a full query within 24 hours. The driver must consent in the Clearinghouse before the employer can conduct the full query. The driver's failure to provide written consent in the Clearinghouse will result in his or her removal from driving. Additionally, the driver will be subject to discipline up to and including termination.

The employer cannot allow a driver to perform any safety-sensitive function if the results of a Clearinghouse query demonstrates the driver has a drug or alcohol violation unless it states the driver has successfully completed the substance abuse professional (SAP) evaluation, referral, and education/treatment process. A driver must designate a SAP in the Clearinghouse before the SAP can enter any information about the driver's return to duty process into the Clearinghouse. The driver must test negative on a return to duty test which will be reported to the Clearinghouse. The employer or C/TPA will report the follow up testing plan when completed to the Clearinghouse.

Employers (or their C/TPA) must report Part 382 drug and alcohol testing information to the Clearinghouse using driver specific identification data including driver name, CDL license number and State of issuance, and driver date of birth. No driver consent is required for such reporting. The employer must report the following Part 382 drug and alcohol testing violation information to the Clearinghouse within 3 business days of obtaining the information:

- Alcohol confirmation test with a concentration of 0.04 or higher.
- Refusal to test (alcohol) as specified in 49 CFR 40.261.
- Refusal to test (drug) not requiring a determination by the medical review officer (MRO) as specified in 49 CFR 40.191.
- Actual knowledge, as defined in 49 CFR 382.107, that a driver has used alcohol on duty, used alcohol within four hours of coming on duty, used alcohol prior to post-accident testing, or has used a controlled substance.

- o Negative return-to-duty test results (drug and/or alcohol testing), as applicable.
- o Completion of follow-up testing requirements.

The employer's medical review officer (MRO) must report the following Part 382 violations to the Clearinghouse within 2 business days:

- o Verified positive, adulterated, or substituted drug test results.
- o Refusal to test (drug) requiring a determination by the MRO as specified in 49 CFR 40.191.

Substance abuse professionals (SAP) must report within one business day:

- o Driver information and date of initial evaluation.
- o Date of successful completion of treatment and/or education and the determination of eligibility for return-to-duty testing.

Drivers may review information in the Clearinghouse about himself or herself, except as restricted by regulation. A driver must register with the Clearinghouse before accessing his or her information. Employers, consortiums/third-party administrators, medical review officers and SAPs must register with the Clearinghouse.

Drivers may challenge the accuracy of information reporting, but not the accuracy of test results or refusals. Any driver may submit a petition to the FMCSA contesting the accuracy of information in the Clearinghouse. The petition must include the petitioner's name, address, telephone number, CDL number and state of issuance, a detailed description of the basis for the allegation that the information is not accurate, and evidence supporting the allegation that the information is not accurate. Failure to submit evidence is cause for dismissing the petition. A driver may request expedited treatment to correct inaccurate information in his or her Clearinghouse record if the inaccuracy is currently preventing him or her from performing safety-sensitive functions, or to remove an employer's report of actual knowledge that the driver received a traffic citation for driving a commercial motor vehicle while under the influence of alcohol or controlled substances if the citation did not result in a conviction. If the FMCSA granted expedited treatment, they will inform the driver of its decision in writing within 14 days of receipt of a complete petition. When information is corrected or removed, the FMCSA will notify the employer that accessed the incorrect information that a correction or removal was made.

The state driver's license facility will query the Clearinghouse prior to issuing, renewing or upgrading a CDL to determine if the driver is qualified to operate a commercial motor vehicle.

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