

Ark Tex Council of Governments

Drug and Alcohol Testing Policy & Procedures

This policy applies to all employees of

Ark Tex Council of Governments

**to meet the qualifications outlined in Title
49 Code of Federal Regulation Part 655 and
Part 40**

The following policy is designed to comply with
U. S. Department of Transportation, Federal Transit Administration Regulations
Concerning Drug and Alcohol Testing.

Any provisions set forth in this policy that are included under the sole authority of Ark
Tex COG and are not provided under the authority of the above named Federal
regulations are underlined. Any tests conducted under the sole authority of Ark Tex
COG will be performed on NON-USDOT forms and will be separate from USDOT
testing in all respects

This policy in no way supersedes any of the Department of Transportation
regulations governing drug and alcohol testing.

Program and policy sponsored by:

Allied Compliance Services, Inc. ®

2827 74th St, Lubbock, TX
800.411.6906

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For the purpose of this policy, ARK TEX COUNCIL OF GOVERNMENTS will hereafter be referred to as “The Transit Agency” or as the “Employer”.

Date of Board Approval for Revised Policy **March 25, 2021**

655.15 The Designated Employee Representative (DER will be responsible to answer employee questions about the drug and alcohol testing program

The duties of the DER are as follows:

- To manage the drug and alcohol testing program in conjunction with the Third Party Provider, Medical Review Officer and Substance Abuse Professional
- To maintain test records in a secured location apart from personnel files and medical records
- To disseminate informational materials to all employees on the requirements of this Policy and Procedures
- To provide information, and otherwise answer any questions an employee may have regarding applicable state and federal drug and alcohol testing laws, what rights each employee has, and what responsibilities each employee must follow to participate in this drug and alcohol testing program

DER for this Transit Agency: Transportation Director
Address of DER: P O Box 5307, Texarkana, TX 75505
Phone number of DER: 903.255.3546

A. Purpose of Employee Drug and Alcohol Testing

655.1 The purpose of this part is to establish a drug and alcohol testing program designed to help prevent accidents, injuries and fatalities resulting from the misuse of alcohol and use of prohibited drugs by employees who perform safety-sensitive functions.

The use of illegal drugs and alcohol is prohibited at all times and employees in safety-sensitive positions may be tested for drugs anytime while on duty.

655.11 This document provides a uniform procedure concerning the testing of employees or applicants for employment to detect individuals having drugs or alcohol in their systems.

The purpose of such testing is to provide, in the interest of the safety of employees, passengers, and the general public, work and service environments that are free from the effects of drug and alcohol abuse. THE TRANSIT AGENCY is committed to providing a safe work place for its employees that is free of the effects of substance abuse. Since THETRANSIT AGENCY is involved in public service, the community depends on careful attention by all employees. Such attention cannot be affected by the use of drugs and/or alcohol.

The Federal Transit Administration of the U.S. Department of Transportation has published 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions and prohibits performance of safety-sensitive functions when there is a positive test result, or refusal to test. The USDOT has also published 49 CFR Part 40, as amended that sets standards for the collection and testing of urine and breath specimens.

THE TRANSIT AGENCY expects employees to report for work in condition to perform their duties. On-the-job involvement with drugs and/or alcohol is a violation of THE TRANSIT AGENCY's policy and Federal law. THE TRANSIT AGENCY also recognizes that employee off-the-job involvement with drugs and alcohol can have an impact on the work place and our ability to accomplish the goal of a safe, effective, drug and alcohol-free work environment.

B. Applicability

655.3 The Federal Transit Administration requires a Drug and Alcohol testing program to each recipient and subrecipient receiving Federal assistance under: 49 U.S.C. 5307, 5309 or 5311 or 23 U.S.C. 103 (e) (4) and any contractor of a recipient or subrecipient of Federal assistance under: 49 U.S.C. 5307, 5309 or 5311 or 23 U.S.C. 103 (e) (4). Drug and alcohol testing will be conducted in accordance with 49 CFR Part 40.

A drug and alcohol testing program applies to:

These procedures apply to all safety-sensitive employees, including paid part-time employees, temporary employees, volunteers, contract employees and contractors who perform safety-sensitive functions.

The use of illegal drug is prohibited at all times and employees may be tested for drugs anytime while on duty.

Covered employees are:

- *Operate a revenue vehicle, in or out of revenue service*
- *Operate a non-revenue vehicle requiring a CDL*
- *Control movement or dispatch of a revenue service vehicle (determined by the employer)*
- *Maintenance of a revenue service vehicle, or equipment used in revenue service*

They also apply to off-site lunch periods or breaks when an employee is scheduled to return to work. Under the sole authority of the Transit Agency, visitors, vendors, and contractor employees who may not perform safety-sensitive duties, may also be subject to NON-DOT procedures while on THE TRANSIT AGENCY premises and will not be permitted to conduct THE TRANSIT AGENCY business if found to be in violation of these procedures.

Notice of Testing

655.7

This procedure will act as notice of Drug and Alcohol Testing as prescribed in the Omnibus Transportation Employee Testing Act of 1991 and Department of Transportation (DOT) regulations. These regulations are 49 CFR Part 655, "Prevention of Prohibited Drug Use in Transit Operations", and 49 CFR Part 655, "Prevention of

Alcohol Misuse in Transit Operations" and 49 CFR Part 40, "Procedures for Transportation Workplace Drug and Alcohol Testing Programs".

In addition, the Federal government published 49 CFR Part 29, "The Drug-Free Workplace Act of 1983", which requires the establishment of drug free workplace policies and the reporting of certain drug-related offenses to the Federal Transit Administration (FTA). These procedures incorporate those requirements for safety-sensitive employees and others when so noted.

655.6: Part 655 preempts any state or local law, rule, regulation or order.

Intent

THE TRANSIT AGENCY is dedicated to providing safe and dependable transportation services to our passengers. THE TRANSIT AGENCY's employees are our most valuable resource and it is our goal to provide a healthy, satisfying working environment, which promotes personal opportunities for growth. In meeting these goals, it is our intent to:

- Assure that employees are not impaired in their ability to perform assigned duties in a safe, productive, and healthy manner
- Create a workplace environment free from the adverse effects of drug abuse and alcohol misuse
- Prohibit the unlawful manufacture, distribution, dispensing, possession, or use of controlled substances
- To encourage employees to seek professional assistance anytime personal problems, including alcohol or drug dependency, adversely affects their ability to perform their assigned duties

655.4 A safety-sensitive function is any duty related to the safe operation of a THE TRANSIT AGENCY, as defined below.

Functions performed by employees in a safety sensitive function include one or more of the following:

- Operate revenue service vehicles, including when not in revenue service
- Operate non-revenue service vehicles for which drivers are required to hold a commercial driver's license (CDL)
- Dispatch or control movement of revenue service vehicles
- Perform maintenance on transit vehicles and equipment used in revenue service (except for maintenance contractors for Section 5311 transit agencies) unless the agency is an area less than 200,000 in population and contracts out such services.
- Provide security and carry a firearm

Condition of Employment

655.41 All applicants and potential employees shall be notified of THE TRANSIT AGENCY's drug and alcohol testing policy and shall be advised that they will be required to submit to and pass a drug test prior to employment. Employment of any person is contingent upon passing a drug test.

All applicants and potential employees shall be required to acknowledge and sign THE TRANSIT AGENCY's policy. Failure to submit to the drug test by the applicant shall result in the immediate elimination of the individual from any further consideration for employment.

655.15 Participation in THE TRANSIT AGENCY drug and alcohol testing program is a requirement of all safety-sensitive employees and therefore, is a condition of employment.

Changes or Modifications

THE TRANSIT AGENCY reserves the right to change the provisions of this testing procedure. All personnel will be notified of changes prior to instituting the changes.

C. Definitions

655.4

Accident - An occurrence associated with the operation of a transit vehicle in and out of service, if as a result:

- A fatality
- An individual suffers a bodily injury and immediately receives medical treatment away from the scene of the accident
- A transit vehicle involved that is a bus, electric bus, or automobile, and one or more vehicles (including non-FTA funded vehicles) incurs disabling damage as the result of the occurrence and is transported away from the scene by a tow truck or other vehicle

Administrator - Administrator of the Federal Transit Administration or the Administrator's designee

Air Blank - A reading by an EBT of ambient air containing no alcohol

Alcohol - The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl or isopropyl alcohol. References to use or possession of any beverage, mixture or preparation containing ethyl alcohol (including any medication containing *alcohol*)

Alcohol Test - A test conducted by a Breath Alcohol Technician, or any other person approved by the DOT rules, using an Evidential Breath Testing Device to measure the amount of alcohol concentration in a volume

Of breath, or any other test used to detect the presence of alcohol that is approved by the Department of Transportation

Alcohol Use - The consumption of any beverage, mixture, or preparation, including any medication, containing alcohol

Anti-Drug program - a program to detect and deter the use of prohibited drugs as required by this part

Breathe Alcohol Technician (BAT) - An individual trained to proficiency and certified in the use of an evidential breath testing device

CDL - Commercial Driver's License

Certification - a recipient's written statement, authorized by the organization's governing board or other authorizing official that the recipient has complied with the revisions of this part (655.82 and 655.83)

Confirmation Test - For alcohol testing, a confirmation test means a second test following a screening test with a result of 0.02 or greater that provides a quantitative data of alcohol concentration. Confirmation of the screening test must be by an Evidential Breath Testing (EBT) device that appears on ODAPC's Web page for "Approved Evidential Breath Measurement Devices" because it conforms with the model specifications available from NHTSA.

For controlled substances testing, a confirmation test means a second analytical procedure to identify the presence of a specific drug metabolite which is independent of the screen test and which uses a different technique and chemical principle from that of the screen test in order to ensure reliability and accuracy. Gas Chromatography/Mass Spectrometry (GC/MS) or Liquid Chromatography/Mass Spectrometry (LC/MS) is the authorized confirmation method for cocaine, marijuana, opioids, amphetamines, and phencyclidine

Controlled Substance - For purposes of these procedures, controlled substances or drugs are cocaine, marijuana, opioids, amphetamines, phencyclidine and any other substance determined by the U.S. Department of Transportation to be a controlled substance

Controlled Substance Test - A method for determining the presence of controlled substances in a urine sample using a scientifically reliable method performed in accordance with procedures specified in 49 CFR Part 40

Covered employee - a person, including an applicant or transferee, who performs or will perform a safety-sensitive function for an entity subject to this part.

A volunteer is a covered employee if:

- They are required to hold a CDL to operate the vehicle

- They perform a safety-sensitive function for an entity subject to this part and receive remuneration in excess of their actual expenses incurred while engaged in the volunteer activity

Covered Position - Any person, including an applicant, or transferee, who performs, or could potentially perform any safety-sensitive function

Cut-Off Limit - The quantitative level that determines whether a controlled substance or drug is positive or negative, as listed in 49 CFR Part 40, as amended

DHHS - United States Department of Health & Human Services

DOT, The Department, DOT Agency - These terms encompass all DOT agencies, including, but not limited to, the Federal Aviation Administration (FAA), the Federal Railroad Administration (FRA), the Federal Motor Carrier Safety Administration (FMCSA), the Federal Transit Administration (FTA), the National Highway Traffic Safety Administration (NHTSA), the Pipeline and Hazardous Materials Safety Administration (PHMSA), and the Office of the Secretary (OST). For purposes of 49 CFR Part 40, the United States Coast Guard (USCG), in the Department of Homeland Security, is considered to be a DOT agency for drug testing purposes. These terms include any designee of a DOT agency.

Disabling Damage - Damage that precludes departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs.

- Inclusion: Damage to motor vehicles that could have been driven, but would have been further damaged if so driven
- Exclusion: Damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available or damage to headlights, taillights, turn signals, horn, or windshield wipers that make them inoperative

Employee - Any person employed by THE TRANSIT AGENCY or referred to as the Donor on testing forms

Employer - a recipient or other entity that provides mass transportation service or which performs a safety-sensitive function for such recipient or other entity.

EBT - A device approved by the NHTSA for the evidential testing of breath at the 0.02 and the 0.04 alcohol concentrations, and appears on ODAPC's Web page for "Approved Evidential Breath Measurement Devices" because it conforms with the model specifications available from NHTSA.

FTA - Federal Transit Administration

Gas Chromatography/Mass Spectrometry (GC/MS) - A type of chemical analysis used to perform the confirmation of a drug test

Immunoassay Technology - One type of chemical analysis used to perform the initial or first test of a drug screen

MRO - Medical Review Officer - A licensed physician (medical doctor or doctor of osteopathy) responsible for

receiving laboratory results generated by the drug testing program who 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 or her medical history and any other relevant biomedical information

Non-negative Test Result - An alcohol breath test result equal to or greater than 0.02, but less than 0.04

On Premises - Any work location, revenue service vehicle, property, or office or work stations/areas, which is owned, serviced or used by THE TRANSIT AGENCY personnel, or its clients or contractors

Performing a Safety-Sensitive Function - An employee is considered to be performing a safety-sensitive function during any period in which he or she is actually performing, ready to perform, or immediately available to perform any safety-sensitive function

Positive rate - the sum of the annual number of positive results for random drug tests conducted under this part plus the annual number of refusals to submit to a random drug test authorized under this part divided by the sum of the annual number of random drug tests conducted under this part plus the annual number of refusals to submit to a random drug test authorized under this part

Recipient - an entity receiving Federal financial assistance under 49 U.S.C. 5307, 5309, 5311 or under 23 U.S.C 103 (e) (4)

Refuse to submit - any circumstance outlined in 49 CFR 40.191 and 40.261, or other DOT agency regulation, as defined below:

1. Fail to appear for any test (except a pre-employment test) within a reasonable time, as determined by the employer.
2. Fail to remain at the testing site until the testing process is complete. An employee who leaves the testing site before the testing process commences for a pre-employment test has not refused to test.
3. Fail to attempt to provide a breath or urine specimen. An employee who does not provide a urine or breath specimen because he or she has left the testing site before the testing process commenced for a pre-employment test has not refused to test.
4. In the case of a directly-observed or monitored urine drug collection, fail to permit monitoring or observation of your provision of a specimen.
5. Fail to provide a sufficient quantity of urine or breath without a valid medical explanation.
6. Fail or decline to take a second test as directed by the collector or the employer for drug testing.
7. Fail to undergo a medical evaluation as required by the MRO or the employer's Designated Employer Representative (DER).
8. Fail to cooperate with any part of the testing process.
9. Fail to follow an observer's instructions to raise and lower clothing and turn around during a directly-observed test.
10. Possess or wear a prosthetic or other device used to tamper with the collection process.
11. Admit to the adulteration or substitution of a specimen to the collector or MRO.
12. Refuse to sign the certification at Step 2 of the Alcohol Testing Form (ATF).
13. Fail to remain readily available following an accident.
14. As a covered employee, if the MRO reports that you have a verified adulterated or substituted test result, you have refused to take a drug test.

Revenue Service Vehicle All transit vehicles that are used for passenger transportation service.

Safety-Sensitive Function - Any of the following duties:

- Operating a revenue service vehicle, including when not in revenue service (drivers and others required to operate revenue vehicles as part of their job duties)
- Operating a non-revenue service vehicle, when required to be operated by a holder of a Commercial Driver's License
- Controlling dispatch or movement of a revenue service vehicle (dispatchers or those who as part of their job duties fill in for a dispatcher or cross-train)
- Maintaining a revenue service vehicle or equipment used in revenue service (mechanics, service mechanics, service helpers, and vehicle washers)

Split Sample - The dividing of a urine specimen into two specimen bottles. The primary specimen bottle shall contain thirty (30 ml) milliliters of urine, with the secondary, or split specimen containing at least fifteen (15 ml) milliliters of urine. The additional sample is collected with the original specimen, to be tested in the event the original specimen tests positive

SAP - Substance Abuse Professional - A licensed physician (medical doctor or doctor of osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, state-licensed or certified marriage and family therapist, or drug and alcohol counselor (certified by an organization listed at <https://www.transportation.gov/odapc/sap>), with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol-related disorders. Reference Part 40.281

Third Party Administrator - Any company, consortium, corporation, or other entity designated by the employer to administer or provide chemical or drug testing services or programs. Reference Part 40 Subpart Q **Vehicle** - a bus, electric bus, van, automobile, rail car, trolley car, trolley bus or vessel used as a mass transit vehicle for mass transportation or for ancillary services.

Verified Negative Drug Test Result - A drug test result reviewed by a Medical Review Officer and determined to have no evidence of prohibited drug use.

Verified Positive Drug Test Result - A drug test result reviewed by a Medical Review Officer and determined to have evidence of prohibited drug use.

Violation rate - The sum of the annual number of results from random alcohol tests conducted under this part that have alcohol concentration of .04 or greater plus the annual number of refusals to submit to an alcohol test authorized under this part, divided by the sum of the annual number of random alcohol tests conducted under this part plus the annual number of refusals to submit to a drug test authorized under this part.

D. Prohibited Substances

655.21 and **655.31** Prohibited substances addressed by these procedures include the following:

- **Illegally Used Controlled Substances or Drugs**
655.21

Substances which include, but are not limited to, any form of alcohol, dangerous drug, controlled substance, prescriptive, inhalant, illegal drugs, or combination thereof. Any illegal drug or substance identified in Schedules I through V Section 202 of the Controlled Substance Act (21 U.S.C. 812), as further defined by 21 CFR 1300.11 through 1300.15. **This includes: Marijuana, Amphetamines, Opioids, Phencyclidine (PCP), Cocaine** as well as any drug not approved for medical use by the U.S. Drug Enforcement Administration or the U.S. Food and Drug Administration. Illegal use includes the use of any illegal drug, misuse of legally prescribed drugs, and use of illegally obtained prescription drugs.

- **Legal Drugs**

The appropriate use of legally prescribed drugs and non-prescription medications is not prohibited. However, under the sole authority of ATCOG (and not required by the USDOT or DOT Agency federal regulations), the use of any medication which carries a warning label that indicates that mental functioning, motor skills, or judgment may be adversely affected must be reported to a ATCOG. The employee is required to provide a written release from his/her doctor or pharmacist indicating whether or not the employee can continue to perform his/her safety-sensitive functions while still taking this medication."

- **Alcohol**

The use of beverages containing alcohol or substances including any medication, mouthwash, food, candy, or any other substance containing alcohol in a manner which violates the conduct listed in this policy is prohibited. The concentration of alcohol is expressed in terms of grams of alcohol per 210 liters of breath as measured by an evidential breath testing device, as defined in 49 CFR Part 40, as amended.

E. Prohibited Behavior 655.31 and 655.33

Alcohol Testing

- Employees will be removed immediately from safety sensitive duties if their breath alcohol test is 0.04 or above
- If a safety-sensitive employee has a breath alcohol concentration of 0.02-0.039, USDOT-FTA regulations require the employee to be removed from the performance of safety-sensitive duties until:
 - The employee's alcohol concentration measures less than 0.02; or
 - The start of the employee's next regularly scheduled duty period, but not less than eight hours following administration of the test.
- Safety-sensitive and non-safety-sensitive employees under company policy shall not possess alcohol while on duty or operating a commercial motor vehicle
- The use of alcohol while performing their safety-sensitive or non-safety-sensitive job functions is prohibited
- Performing safety-sensitive and non-safety-sensitive functions within four hours of having used alcohol is prohibited.
- The use of alcohol by safety-sensitive and non-safety-sensitive employees within eight hours following an accident, or before undergoing a post-accident alcohol test, whichever comes first is prohibited.

- Employees are prohibited from consuming alcohol while on call.
- Employees on call will be given the opportunity to acknowledge the use of alcohol and the inability to perform safety sensitive functions.

The Transit Agency has a zero tolerance policy and consequences for a positive test result is termination of employment.

Referral Resources

Any covered employee that has a verified positive drug test, an alcohol test of 0.04 BAC or above, or test refusal, will be removed from his/her safety-sensitive position, informed of educational and rehabilitation programs available, and will be provided with a list of at least two (2) USDOT qualified SAPs. The SAP must follow guidelines according to Part 40 Subpart 0.

655.21 Drug Testing

- Reporting for duty, remaining on duty, or performing safety-sensitive and non-safety-sensitive functions after having tested positive for a controlled substance is prohibited
- Using, manufacturing, distributing, dispensing or possessing controlled substances is prohibited
- Failure by a safety-sensitive or non-safety-sensitive employee to submit immediately to a chemical or alcohol test when requested is prohibited and will be considered equivalent to a positive test result

Supervisors and managers are directed to use and apply all aspects of this procedure in an unbiased and impartial manner. Any supervisor or manager who knowingly disregards the requirements of this procedure, or who is found to deliberately misuse the procedure in regard to subordinates, shall be subject to disciplinary action, up to and including termination.

The Transit Agency has a zero-tolerance policy and consequences for a positive test result is termination of employment.

Drug Statute Conviction Consistent with the Drug Free Workplace Act of 1998, all employees are required to notify THE TRANSIT AGENCY of any criminal drug statute conviction for a violation occurring in the workplace within five days after such conviction. Failure to comply with this provision shall result in disciplinary action including termination.

E. Required Testing

655.41 Pre-employment Testing:

All safety-sensitive applicants shall undergo urine drug testing immediately following the offer of employment or transfer into a safety-sensitive position.

It is allowed to hire an applicant and assign non-safety-sensitive duties until the test result is received. An employer may not transfer an employee from a non-safety-sensitive position into a safety sensitive until a verified negative test result is received.

Receipt of a negative drug test result is required prior to the performance of safety-sensitive functions. If an individual refused to be tested or fails the pre-employment drug test, they will be provided with a list of at least two (2) USDOT qualified Substance Abuse Professionals (SAPs). The applicant will be disqualified for employment for a period of six months. Any applicant who has previously had a USDOT positive drug or alcohol test, or test refusal, must provide the employer proof of having successfully completed a referral, evaluation, and treatment plan as described in Section 655.62.

A pre-employment test is required for an employee who has been removed from safety sensitive duties and removed from the random testing pool for more than 90 days.

Applicants are required (even if ultimately not hired) to provide the Employer with signed written releases requesting USDOT drug and alcohol records from all previous, USDOT-covered, employers that the applicant has worked for within the last two years. Failure to do so will result in the employment offer being rescinded. The Employer is required to ask all applicants (even if ultimately not hired) if they have tested positive or refused to test on a pre-employment test for a USDOT covered employer within the last two years. Failure to do so will result in the employment offer being rescinded.

If a pre-employment test is canceled, The Employer will require the applicant to take and pass another pre-employment drug test.

Pre-employment testing will be conducted in accordance with procedures established in 49 CFR Parts 655 and 40 or as amended.

655.34 and 655.44 Post-Accident Testing:

- **FATAL ACCIDENTS** – A covered employee will be required to undergo urine and breath testing if they are involved in an accident with a transit vehicle, whether or not the vehicle is in revenue service at the time of the accident, when a fatality occurs. This includes all surviving covered employees that are operating the vehicle at the time of the accident and any other whose performance could have contributed to the accident, as determined by the employer using the best information available at the time of the decision.
- **NON FATAL ACCIDENTS** – A post-accident test of the employee operating the public transportation vehicle will be conducted if an accident occurs and at least one of the following conditions is met:
 1. The accident results in injuries requiring immediate medical treatment away from the scene, unless the covered employee can be completely discounted as a contributing factor to the accident.
 - . One or more vehicles incurs disabling damage as a result of the occurrence where a vehicle must be transported from the scene, unless the covered employee can be completely discounted as a contributing factor to the accident.

Any other safety-sensitive or non-safety-sensitive employee under company policy whose performance could have contributed to the accident, as determined by THE TRANSIT AGENCY using the best information available at the time of the accident, will also be given a drug and alcohol test.

Post-accident drug and alcohol tests must be conducted as soon as possible after the accident. Rev 3/21

- Drug tests must be performed within 32 hours after the accident
- Alcohol tests should be performed within 2 hours after the accident. If an alcohol test required by this part is not administered within 2 hours of the accident, documentation shall be prepared and maintained on file stating the reasons the test was not promptly administered.
- If an alcohol test required by this part is not administered within 8 hours following the accident, all attempts to administer the test shall cease and documentation shall be maintained.

A covered employee who is subject to post-accident testing who fails to remain readily available for such testing, including notifying THE TRANSIT AGENCY of his or her location if he or she leaves the scene of the accident prior to submission to testing, may be deemed by THE TRANSIT AGENCY to have refused to submit to testing.

Nothing in this section shall be construed to require the delay of necessary medical attention for the injured following an accident or to prohibit a covered employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident or to obtain necessary emergency medical care.

Post-accident testing will be conducted in accordance with procedures established in 49 CFR Parts 655 and 40 or as amended.

ATCOG reserves the right to conduct NON-USDOT drug and/or alcohol testing under the sole authority of ATCOG following an accident/incident which does not meet the USDOT-FTA post-accident testing thresholds discussed above in this section. This testing would be completely separate from all USDOT testing in every respect and would be conducted on NON-USDOT / NON-FEDERAL testing forms.

655.43 Reasonable Suspicion Testing: All safety-sensitive employees may be subject to a fitness for duty evaluation, and urine and/or breath testing when there are reasons to believe that drug or alcohol use is adversely affecting job performance. A reasonable suspicion referral for testing will be made on the basis of documented objective facts and circumstances which are consistent with the short-term effects of drug use and/or alcohol misuse.

Reasonable suspicion referrals must be made by a supervisor who is trained to detect the signs and symptoms of drug and alcohol use and who reasonably concludes that an employee may be adversely affected or impaired in his/her work performance due to possible drug use and/or alcohol misuse. An employer's determination that reasonable suspicion exists shall be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the covered employee. The questioned conduct must be witnessed and documented in writing

Alcohol testing is authorized only if the observations of this section are made during, just preceding, or just after the performance of safety-sensitive functions. An employer may only direct a covered employee to undergo reasonable suspicion testing for alcohol while the employee is performing safety-sensitive functions, just before the employee is to perform safety-sensitive functions, or just after the employee has ceased performing such functions.

Alcohol tests must be performed within 2 hours after the determination reasonable suspicion testing is required. If a test required by this part is not administered within 8 hours of the determination, documentation shall be prepared and maintained on file stating the reasons the test was not promptly administered. If a test required by this part is not administered within eight hours following the determination, all attempts to administer an

alcohol test shall cease and documentation shall be maintained.

Transit Agency officials other than supervisors may also make reasonable suspicion determinations as long as they have received reasonable suspicion training.

Reasonable Suspicion testing will be conducted in accordance with procedures established in 49 CFR Part 655.14(b) (2) and Part 40, as amended.

655.45 Random Testing: Conducted on employees who perform safety-sensitive functions. Random testing will be conducted on an unannounced basis, spread reasonably throughout the calendar year, day of the week, and hours of the day. The number of employees randomly selected for drug/alcohol testing during the calendar year shall be not less than the percentage rates set each year by the FTA administrator. Current Random Testing rates can be viewed online at <https://www.transportation.gov/odapc/random-testing-rates>.

The employer will ensure that the random computer program used is monitored to achieve the annual testing rates. *Under the scientific method* for selection process used, each covered employee shall have an equal chance of being tested each time selections are made.

All random drug and alcohol testing shall be unannounced, and the dates of testing shall be spread reasonably throughout the year. Selected employees will report for random testing immediately after notification. Prior notice will not be given to the contact person or DER selected for Random testing.

The testing will be conducted during all hours and days when safety-sensitive duties are performed. Testing can occur during the beginning, middle, or end of an employee's shift.

Random tests can be conducted at any time during an employee's shift for drug testing. Alcohol random tests can only be performed just before, during, or just after the performance of a safety sensitive duty. However, under the employer's authority, a non-DOT random alcohol test may be performed any time the covered employee is on duty.

In instances where a covered employee is not performing safety-sensitive functions for a period of 90 days or more regardless of reason, and is removed from the random testing pool during that time, the employee will be required to take a pre-employment drug test and have a negative test results prior conducting safety-sensitive functions.

Dilute Negative Test Results

40.197

The Medical Review Officer will require a recollection under direct observation if the creatinine level is greater than or equal to 2 mg/dl but less than or equal to 5 mg/dl based on the creatinine level found in the specimen.

If the creatinine level is >5 mg/dl, a recollection is not required by the Agency for a negative dilute test and the test will be considered a negative result. No additional testing will be required unless directed to do so by the MRO.

Random testing will be conducted in accordance with procedures established in 49 CFR Parts 655 and 40, as amended.

655.46 , 655.52 and 655.62 Return-to-duty Testing ATCOG will terminate the employment of any employee that tests positive or refuses to test as specified in this policy. However, in the rare event an employee is reinstated with court order or other action beyond the control of the transit agency, the employee must complete the return-to-duty process prior to the performance of safety-sensitive functions. All covered safety-sensitive employees (or applicants) who have previously tested positive or refused to take a drug or alcohol USDOT test shall be tested for prohibited drug and/or alcohol use before they return to duty to meet DOT requirements. It is a requirement for the employee to have an evaluation from the Substance Abuse Professional and documented evidence of completed treatment before a Return to Duty test may be completed.

Any employee who tests positive on an alcohol or drug test or has refused such testing must be evaluated by a Substance Abuse Professional (SAP) who shall determine what assistance the employee needs in resolving problems associated with alcohol or drug use.

Return-to-duty testing will be conducted in accordance with procedures established in 49 CFR Parts 655 and Part 40, or as amended.

655.47 Follow-up Testing: If allowed to return to duty, safety-sensitive employees shall be subject to unannounced follow-up testing for at least 12 but not to exceed 60 months. Follow-up testing is separate from and in addition to the random testing program. The employer is responsible for determining the unannounced dates for testing.

Follow-up testing will be conducted in accordance with procedures established in 49 CFR Parts 655 and 40, or as amended. Follow-up alcohol testing must only be conducted just before, during, or just after the performance of safety-sensitive functions.

F. Drug Testing Procedures

Part 40 Subpart D & Subpart E 655.51

All collections of urine samples shall be according to the rules established by the Department of Health & Human Services and will be conducted in accordance with procedures established in 49 CFR Part 655 and 40, as amended.

The procedures will be performed in a private, confidential manner and every effort will be made to protect the employee, the integrity of the drug testing procedure and the validity of the test result.

The procedure:

- Donor identity is checked with a photo identification
- A urine specimen will be collected using the split specimen collection method described in 49 CFR Part 40 as amended.
- Each specimen will be accompanied by a DOT Custody and Control Form with a unique ID number for the specimen to the correct individual
- A DHHS certified laboratory will conduct the specimen analysis
- The initial test will be conducted on the primary urine specimen
- Non negative specimens will be confirmed by Gas Chromatography/Mass Spectrometry (GC/MS) or Liquid Chromatography/Mass Spectrometry (LC/MS)
- A positive test result will be reported if the amounts of the drug and/or its metabolites identified by the confirmation test are above the confirmation limits
- The MRO receives and reviews the test result from the certified lab
- The MRO ensures the validity of the test and determines whether there is a medical explanation for a confirmed positive, substitute or adulterated test result
- The MRO will attempt to contact the donor to verify a legitimate medical reason for the test result
- The test will be verified positive or refusal to test if there is not a legitimate medical reason for the result
- The test result will be reported.

The DER or verified contact person will be notified immediately of the positive test result and documentation of time, date and name of person receiving the information will be made on the test result. The hard copy will be mailed.

- The test will be reported to the DER as a negative if there is a legitimate explanation for the result
- A retest will be conducted under direct observation if the test is invalid without a medical explanation

the collection site person and the employee shall be present at the same time during the following:

- The collection site person shall place securely on the bottle an identification label that contains the date, the individual's specimen number, and any other identifying information provided or required by the employer. If separate from the label, the tamper-proof seal shall also be applied.
- The individual shall initial the identification label on the specimen bottle for the purpose of certifying that it is the specimen collection from the donor.
- The collection site person shall enter on the drug testing CCF form all information identifying the specimen. The collection site person shall sign the drug testing CCF form certifying that the collection was accomplished according to the applicable Federal requirements.

Confirmation Test

All specimens identified as positive on the initial test shall be confirmed using gas chromatography/mass spectrometry (GC/MS) or Liquid Chromatography/Mass Spectrometry (LC/MS) techniques adhering to the most current DHHS cutoff levels or as amended

Split Sample Testing

40.171

If the employee questions the results of a drug test result of the primary specimen, the employee may request that the MRO direct that the split specimen be tested in a different DHHS certified laboratory. The MRO shall honor such a request if it is made within 72 hours of the employee having been notified of a verified positive test result. Employees do not have access to a test of their split specimen following an invalid result.

If the result of the test of the split specimen fails to reconfirm the presence of the drug(s) or drug metabolite(s) found in the primary specimen, the MRO shall cancel the test, and report the cancellation and the reasons for it to the DOT, the employer and the employee.

I. Alcohol Testing Procedures

655.31& Part 40 Subpart J

All alcohol testing shall be performed according to the rules established by the Department of Health & Human Services and will be conducted in accordance with procedures established in 49 CFR Parts 655 and 40. Testing must occur before, during or immediately after performing a safety-sensitive duty.

Breath Tests must be conducted by a Breath Alcohol Technician trained to operate a Evidential Breath Testing device (EBT). A list of approved EBTs can be found on ODAPC's Web page for "Approved Evidential Breath Measurement Devices".

Alcohol screening tests may be performed with alcohol screening devices found on ODAPC's Web page for "Approved Screening Devices to Measure Alcohol in Bodily Fluids".

Alcohol Testing Form Part 40.225 and 40.227

The alcohol testing form must comply with the provisions as contained in 49 CFR Part 40, or as amended, with regard to the information that must be contained on the form. The form must address the specific requirements contained in 49 CFR Part 40. The form may not be modified or revised.

Screening Test Procedures 655.48 & 40 Subpart L

The procedure will follow the guidelines of Part 40.241 through 40.247.

If the result of the screening test is less than 0.02, the BAT shall date the form and sign the certification. If the test is equal to or above 0.02 a confirmation test must then be taken.

Confirmation Test Procedures & Part 40 Subpart M

The procedure must follow the guidelines of Part 40.251 through 40.255.

The BAT shall transmit all alcohol testing results to the Designated Employee Representative (DER) in a confidential manner. All communications by BATs shall be to the DER only and may be provided in writing, in person, or by telephone or electronic means. The BAT shall ensure that immediate transmission of test result to THE TRANSIT AGENCY is conducted in order for THE TRANSIT AGENCY to prevent the employee from performing any covered functions if necessary.

If the screening test is performed with a DOT approved saliva test and requires a Breath Alcohol confirmation test, the supervisor on duty will immediately accompany the donor to the nearest facility with an approved EBT and a BAT to administer the test.

Refusal to Test and Uncompleted Tests

655.48 & Part 40 Subpart N

Refusal to test includes:

- Fail to appear for any test (except a pre-employment test) within a reasonable time, as determined by the employer.
- Fail to remain at the testing site until the testing process is complete. An employee who leaves the testing site before the testing process commences for a pre-employment test has not refused to test.
- Fail to attempt to provide a breath or urine specimen. An employee who does not provide a urine or breath specimen because he or she has left the testing site before the testing process commenced for a pre-employment test has not refused to test.
- In the case of a directly observed or monitored urine drug collection, fail to permit monitoring or observation of your provision of a specimen.
- Fail to provide a sufficient quantity of urine or breath without a valid medical explanation.
- Fail or decline to take a second test as directed by the collector or the employer for drug testing.
- Fail to undergo a medical evaluation as required by the MRO or the employer's Designated Employer Representative (DER).
- Fail to cooperate with any part of the testing process.
- Fail to follow an observer's instructions to raise and lower clothing and turn around during a directly-observed test.
- Possess or wear a prosthetic or other device used to tamper with the collection process.
- Admit to the adulteration or substitution of a specimen to the collector or MRO.
- Refuse to sign the certification at Step 2 of the Alcohol Testing Form (ATF).
- Fail to remain readily available following an accident

As a covered employee, if the MRO reports that you have a verified adulterated or substituted test result, you have refused to take a drug test.

J. Education and Training

655.14

Every covered employee will receive a copy of this policy and will have ready access to the corresponding federal regulations including 49 CFR Parts 655 and 40, as amended.

Every covered employee will receive a copy of this policy and will have ready access to the corresponding federal regulations including 49 CFR Parts 655 and 40, as amended. In addition, all covered employees will undergo a minimum of 60 minutes of training on the signs and symptoms of drug use including the effects and consequences of drug use on personal health, safety, and the work environment. The training also includes manifestations and behavioral cues that may indicate prohibited drug use.

In addition, all supervisory personnel shall receive an additional minimum of one hour's education and training on the manifestations of and the behavioral, physical and performance indicators that may indicate drug use and an additional minimum of one hour's education and training on the manifestations of and the behavioral, physical and performance indicators that may indicate alcohol misuse.

Transit Agency officials other than supervisors may also make reasonable suspicion determinations as long as they have received reasonable suspicion training.

K. Education

655.14

The following information is to be used for the education of all employees in the manifestations and behavioral cues that may indicate prohibited drug use.

Types and Effects of Drugs

Cocaine (Stimulants/Uppers)

Signs and Symptoms

Physical

- Congested nose as if a common cold
- Mood swings
- Superabundant energy
- Hyperactivity
- Extended wakefulness
- Loss of appetite
- Difficulty in concentration
- Dilated pupils and vision problems
- High blood pressure, chest pains with palpitations
- Excessive sweating
- Vomiting, stomach cramps
- Irritability, anxiety, apprehension

Withdrawal Symptoms

- Apathy
- Long periods of sleep
- Irritability
- Depression
- Disorientation

Work Related

- Isolation and withdrawal from others
- Excess absences
- Poor work product
- Financial problems
- Secretive behavior

Amphetamines (Stimulant)

Signs and Symptoms

- Sweating
- Dilated pupils
- Restlessness
- Panic
- Confusion/Cannot concentrate
- Irregular heart beats
- Fatigue from hangover effects

Withdrawal Symptoms

- Apathy
- Long periods of sleep
- Depression
- Disorientation

Work Related

- Avoids others
- Excessive absences
- Financial problems
- High rate of accidents

Opioids (Narcotic) Signs

and Symptoms

- Constricted pupils
- Euphoria
- Respiratory depression
- Slow mental functions
- Drowsiness
- Nausea

Withdrawal Symptoms

- Watery eyes
- Runny nose
- Loss of appetite
- Tremors
- Panic
- Cramps and nausea
- Chills and sweating

Work Related

- Financial problems
- Excessive absences
- High rate of accidents
- Avoids others

PCP (Hallucinogens)

Phencyclidine

Signs and Symptoms

- Dilated pupils
- Illusions
- Hallucination
- Poor perception of time
- Poor perception of distance
- Extreme mood swings
- Confusion and agitation

Withdrawal Symptoms

- None known

Work Related

- Financial problems
- Cannot understand instructions
- Avoids others
- Excessive absences

Marijuana (Hallucinogen and/or Depressant)

THC

Signs and Symptoms

Low doses

- Bloodshot eyes (often masked by eye drops)
- Distinctive odor on clothing
- Lack of motivation
- Restlessness
- Increased sense of well being
- Dreamy state of relaxation
- Frequently hungry, especially for sweets

High doses

- Bloodshot eyes
- Distinctive odor on clothing
- Lack of motivation
- Rapidly fluctuating emotions
- Impaired memory
- Loss of personal identity

Withdrawal Symptoms

- Insomnia
- Hyperactivity
- Decreased Appetite

Work Related

- Isolation and withdrawal from others
- Excess absences
- Financial problems

Effects of Alcohol

Alcohol is a non-illegal drug that has been consumed throughout the world for centuries. It is considered a recreational beverage when consumed in moderation for enjoyment during social gatherings. However, when consumed primarily for its physical and mood altering effects, it is a substance of abuse. As a depressant, it slows down physical response and progressively impairs mental functions.

Signs and Symptoms of Use

- Dulled mental process
- Lack of coordination
- Odor of alcohol on breath
- Possible constricted pupils
- Sleepy or stuporous condition
- Slowed reaction time
- Slurred speech

Health Effects

The chronic consumption of alcohol (average of three servings per day of beer (12 ounces), whiskey (1ounce), or wine (6 ounce glass) over time may result in the following health hazards:

- Decreased sexual functioning
- Dependency
- Fatal liver diseases
- Increased cancers of the mouth, tongue, pharynx, esophagus, rectum, breast, and malignant melanoma
- Kidney disease
- Pancreatitis
- Spontaneous abortion and neonatal mortality

- Ulcers
- Birth defects (up to 54% of all birth defects are alcohol related)
- Forty percent of family court cases are alcohol problem related
- Alcoholics are 15 times more likely to commit suicide than are other segments of the population
- More than 60 percent of burns, 40 percent of falls, 69 percent of boating accidents, and 76 percent of private aircraft accidents are alcohol related

K. Positive Test/Refusal to Test

655.61, 655.62

A positive drug test, an alcohol test result of 0.04 BAC or higher, or refusal to test is a violation of THE TRANSIT AGENCY's policy and FTA regulations. The employee will immediately be removed from safety-sensitive duties and will be provided with a list of USDOT qualified SAPs.

A safety-sensitive or non-safety-sensitive employee who refuses to submit to a drug and/or alcohol test, will be considered to have failed the test. Failure to comply with request for drug/alcohol testing will result in disciplinary action including termination.

THE TRANSIT AGENCY employees with positive drug/alcohol screens will be informed in a meeting with their supervisor and/or department manager. If the employee is a member of a union, a Union Representative may be present, if requested by the employee.

L. Reference List for Employee Assistance Program

655.53

The following resources are available to employees of THE TRANSIT AGENCY. These facilities have qualified Substance Abuse Professionals on staff that may be used in evaluating and resolving problems associated with the misuse of alcohol and use of controlled substances. The SAP must follow guidelines according to Part 40 Subpart 0.

The DAPM or DER will confirm that the facility has a specific name of a Substance Abuse Professional to use as a reference for the employee.

American Substance Abuse Professionals (ASAP) 888-792-2727

www.SAPlist.com

www.SAPreferralservice.com

M. Record Keeping

655.71

The DER shall maintain all drug and alcohol testing results in secured files that will be separate from personnel files and medical records. Only the DER, and those personnel who are authorized by the DER to be directly involved in the drug testing program, will have access to the secured files.

Records shall be maintained:

- Five years - Records of non-negative drug or alcohol test results
Documentation of refusals to test
Referrals to the SAP
Annual MIS reports
- Two years - Records related to the collection process and employee training
- One year - Records of negative drug and alcohol test results

Types of Records:

- Records related to the collection process
- Test result records
- Records of employee training

655.72 An employee is entitled, upon written request, to obtain copies of any records pertaining to his or her use of alcohol or controlled substances, including any records pertaining to his/her alcohol or controlled substances tests. THE TRANSIT AGENCY shall promptly provide the records requested by the employee. Records may be released to other authorized persons only as directed by law or written consent of the employee.

Monitoring Program

THE TRANSIT AGENCY shall audit all contractor drug and alcohol testing programs to determine compliance. Auditing may occur by (but is not limited to):

- Require an affidavit of compliance from the contractor
- Review the contractor's Drug and Alcohol testing program
- Require the contractor to allow access to property and records by THE TRANSIT AGENCY, the DER's Auditor and any federal or state official as required by the regulations

N. Personnel and Services

Q. Consortium Information

Allied Compliance Services, Inc.
2827 74th Street 951 W. Pipeline, Ste. 320
Lubbock, TX 79423 806.748.1120 Hurst, TX 76053
Fax 806.748.7096 817.589.9998

1-800-411-6906 Fax 817. 589.0809

- Laboratory Information- DHHS Certified laboratories list attached
MedTox
402 W County Rd D
St. Paul, MN 55112
800.832.3244
Or any DHHS certified laboratory ACS assigns as recipient for specimens
- Medical Review Officer- Effective 11-3-06
Dr. Neil J. Dash
D.R.S.
546 Franklin Ave.
Massapequa, NY 11758
PH 800-526-9341 FX 516-797-1293

- **Collection Facility**
On site at each agency location
- Qualified local clinic collection site
- Emergency room at each local community hospital facility for after hours or as needed

P. Forms

- | | |
|---|---|
| (1) Policy Acknowledgment | To be signed by each regulated employee stating that he/she has read and understands the Drug and Alcohol Testing Policy of THE TRANSIT AGENCY |
| (2) Employee Add or Delete Form | This form must be completed and sent to Allied Compliance Services, Inc. ® as soon as an employee is added to or deleted from a covered position to maintain the integrity of the pool |
| (3) Pre-employment Drug Test Acknowledge | Must be completed by each prospective employee prior to pre-employment drug test |
| (4) Drug Tests Results | Use by the DER to inform employees of test results |
| (5) Reasonable Suspicion Record | Must be completed by a supervisor who suspects alcohol misuse or use of controlled substances before requiring a reasonable suspicion test |
| (6) Post Accident Decision Report Form & Post Accident Decision Tree | Must be completed by a Supervisor when a Safety Sensitive employee is involved in an accident on a public roadway. |
| (7) Substance Abuse Referral Forms Present & Not Present | Must be completed by Employer and Employee |
| (8) Testing Authorization Form | <u>Send</u> a copy with the Donor to the collection site to ensure correct type of test to be done, <u>fax</u> a copy to ACS and <u>keep</u> a copy for your documentation of the request |

Policy Acknowledgment

THE TRANSIT AGENCY does not approve of or allow the use of illegal drugs and/or the use of alcohol while performing the duties of THE TRANSIT AGENCY.

In an effort to provide a safe and healthful work environment and to comply with the U. S. Department of Transportation 49 CFR Part 655, THE TRANSIT AGENCY has implemented a Drug and Alcohol Testing Program.

This program will include, but is not limited to:

- Supervisor Training
- Employee Education
- Pre-employment Drug Testing
- Random Drug and Alcohol Testing
- Post Accident Drug and Alcohol Testing
- Reasonable Suspicion Drug and/or Alcohol Testing
- Return to Duty Testing
- Follow-up Testing

A copy of the complete policy and procedures for this program is made available to all employees covered by this policy. These employees include all persons who meet the requirements of 49 CFR Part 655 and Part 40.

Employee name - print

Date

Employee Signature

Date

By signing this document I am stating that I have been given and understand the drug and alcohol policy of THE TRANSIT AGENCY.

Allied Compliance Services, Inc.
800.411.6906
Form 1

Rev 1-18



Add / Delete Form

Date: _____

Company Name: _____

Contact Person: _____

Add the following employees to the Random Testing Program
(All employees added to the Random Program throughout the year must have a pre-employment test on file)

Name of <u>Employee</u>	<u>Employee</u> ID # Number	Job <u>Description</u>	TDLR Non-Reg	DOT
_____	_____	_____	D <input type="checkbox"/>	D
_____	_____	_____	D D	D
_____	_____	_____	<input type="checkbox"/> <input type="checkbox"/>	D
_____	_____	_____	D <input type="checkbox"/>	D
_____	_____	_____	D D	D
_____	_____	_____	D <input type="checkbox"/>	D

Delete the following employees from the Random Testing Program
(Caution! These employees will be permanently deleted; a pre-employment test will be required to add back to program)

Name of <u>Employee</u>	<u>Employee</u> ID# Number	Job <u>Description</u>	TDLR Non-Reg	DOT
_____	_____	_____	D D	<input type="checkbox"/>
_____	_____	_____	D <input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	D <input type="checkbox"/>	D
_____	_____	_____	D <input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	D D	D
_____	_____	_____	D D	D

Authorized signature required

Return completed form to: **Allied Compliance Services, Inc.®**
2827 74th Street, Lubbock, TX 79423
PH: 800-411-6906 FAX: 806-748-7096
Email - mail@alliedcompliance.com

Pre-employment Drug Test Acknowledgement

I understand that as required by the Federal Transit Administration Regulation, Title 49 Code of Federal Regulations, Section 655, all applicants of this Transit Agency must be tested for controlled substances as a pre-condition for employment.

I acknowledge the requirement for the urine sample collection and testing for controlled substances.

I understand that a positive test result for controlled substances will render me disqualified for employment with this Transit Agency.

The Medical Review Officer will maintain the results of my test. Negative and positive results will be reported to the Transit Agency. **If** the results are positive, the controlled- substance will be identified. The results will not be released to any other parties without my written authorization.

I understand the above conditions and hereby agree to comply with them.

(Applicant's Name - print)

(Month) (Day) (Year)

(Applicant's Signature)

Allied Compliance Services, Inc. •

800.411.6906

Form 4

Drug Test Results

The controlled substance testing regulations require notification of an employee's positive test result following a random, reasonable suspicion, or post-accident drug test. In the case of pre-employment drug test, an applicant requesting results within 60 days of notification of the disposition of his or her employment application must be notified of the results by the Transit Agency.

Employer - Complete the following:

_____		_____	
(Name of Employee - Print)		(Month) (Day) (Year)	
Type of Test:	<input type="checkbox"/> Pre-employment	<input type="checkbox"/> Random	
	<input type="checkbox"/> Reasonable Suspicion	<input type="checkbox"/> Post-accident	
Test Results:	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive	

If the employee has tested positive, indicate the drug identified:

<input type="checkbox"/> Marijuana	<input type="checkbox"/> Cocaine	<input type="checkbox"/> Opioids
<input type="checkbox"/> Amphetamines	<input type="checkbox"/> Phencyclidine (PCP)	

I have received the above results.

_____	_____
(Employee's Signature)	(Month) (Day) (Year)

Witnessed by:

_____	_____
(Signature of Employer)	(Month) (Day) (Year)

(Title)

**Allied Compliance Services, Inc. •
800.411.690**

REASONABLE SUSPICION INCIDENT CHECKLIST

Employee's Full Name

Date / Time of Observation

Supervisor's Full Name & Telephone

Date of Supervisor's Reasonable Suspicion Decision Training

This checklist is to be completed when a supervisor – trained in accordance with USDOT Agency regulations for reasonable suspicion/cause determination requirements – determines that an incident has occurred which provides reasonable suspicion that an employee is exhibiting behaviors consistent with the symptoms of drug use and / or alcohol misuse. Mark each applicable item on this form and add any additional facts or circumstances which you have observed.

A. Nature of Incident / Cause for Suspicion

- ___1. Observed/reported possession or use of a prohibited substance (including passenger complaint).
- ___2. Apparent drug or alcohol intoxication.
- ___3. Observed drug or alcohol intoxication.
- ___4. Arrest for drug-related offense
- ___5. Other (e.g. flagrant violation of safety or serious misconduct, accident or 'near miss,' fighting or argumentative/abusive language, refusal of supervisor instruction, unauthorized absence on the job) Please specify:

B. Behavioral Indicators

- ___1. Verbal abusiveness
- ___2. Physical abusiveness
- ___3. Extreme aggressiveness or agitation
- ___4. Withdrawal, depression, tearfulness, or responsiveness
- ___5. Inappropriate verbal responses to questioning or instruction
- ___6. Other erratic or inappropriate behavior (e.g. hallucinations, disoriented, confused) Please specify:

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C. Physical Signs and Symptoms

- 1. Possession, dispensing, or using prohibited substance
 - 2. Slurred or incoherent speech
 - 3. Unsteady gait or other loss of physical control, poor conditioning
 - 4. Dilated or constricted pupils or unusual eye movement
 - 5. Bloodshot or watery eyes
 - 6. Extreme aggressiveness or agitation
 - 7. Excessive sweating or clamminess of skin
 - 8. Flushed or very pale face
 - 9. Highly excited or nervous
 - 10. Nausea or vomiting
 - 11. Disheveled appearance or out of uniform
 - 12. Odor of alcohol
 - 13. Odor of Marijuana
 - 14. Dry mouth (frequent swallowing/lip wetting)
 - 15. Shaking hands or body tremors/twitching
 - 16. Dizziness or fainting
 - 17. Breathing irregularity or difficulty breathing
 - 18. Runny nose or sores around nostrils
 - 19. Inappropriate wearing of sunglasses
 - 20. Puncture marks or "tracks"
 - 21. Other (Specify) _____
-
-
-

D. Written Summary

Please summarize the facts and circumstances surrounding the incident. The observations must be specific, contemporaneous, and articulable regarding the appearance, behavior, speech, or body odors of the safety-sensitive employee. Attach additional sheets as needed.

The above document of physical, behavioral, and performance indicators of the named employee were observed by:

Supervisor's Full Name

Signature

Date

POST ACCIDENT TESTING DECISION REPORT

A separate sheet must be filled out for each covered employee that contributed to the accident

System Name: _____ Date of Accident: _____

Time of Accident: _____ Time Employer was notified: _____

Location of Accident: _____

Safety-Sensitive Employee: _____ Position: _____
i.e. Driver, Dispatcher, etc.

- 1. Did the accident involve a public transit vehicle? Yes No
- 2. Did the accident involve the operation of the vehicle? Yes No
- 3. Was there loss of life as a result of the accident? * Yes No
- 4. Did an individual suffer a bodily injury and immediately receive medical treatment away from the scene? * Yes No
- 5. Was there disabling damage to any of the involved vehicles? * Yes No
- 6. a) Did you perform a drug and/or alcohol test?
(Use Decision Tree on back of this form) Yes DOT-FTA Authority Yes (NON-DOT) Company Authority No

b) If no, why not? _____

- c) For a non-fatal accident, can the covered employee(s) performance be completely discounted as a contributing factor to the accident? Yes No

- 7. a) Was an alcohol test performed within 2 hours? N/A Yes No

b) If no, why: _____

8. If no alcohol test occurred, and more than 8 hours elapsed from the time of the accident, please explain: _____

- 9. a) Was a drug test performed within 32 hours? N/A Yes No

b) If no, why: _____

- 10. a) Did the employee leave the scene of the accident without a reasonable explanation? Yes No

b) If Yes, please explain: _____

Test Determination:

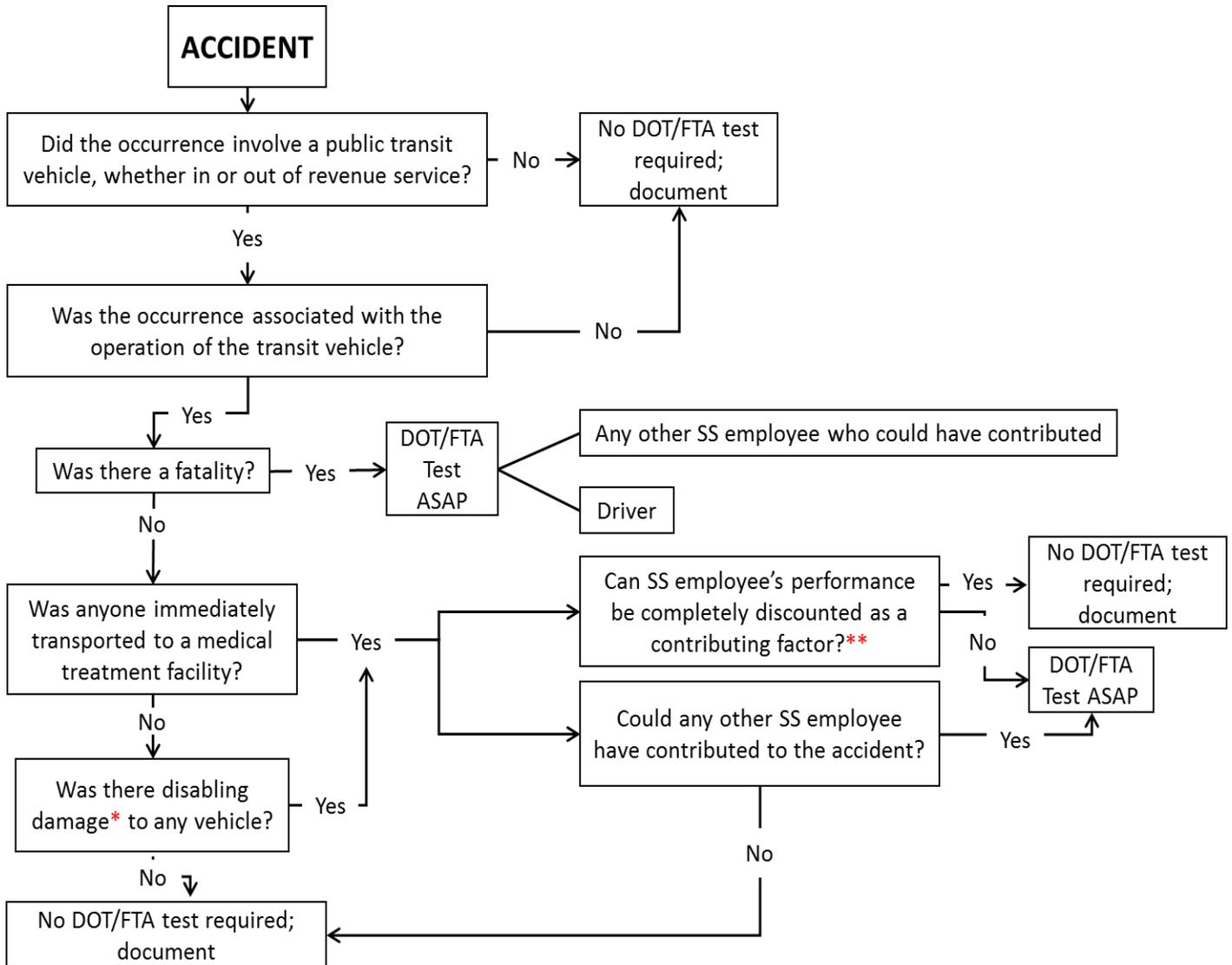
Name of supervisor making determination: _____

Time employee was informed of determination: _____

Signature & Title _____

Date _____

Post Accident Decision Tree



* **Disabling Damage:** Damage that precludes departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs.

(1) **Inclusion:** Damage to a motor vehicle, where the vehicle could have been driven, but would have been further damaged if so driven.

(2) **Exclusions:**

A. Damage that can be remedied temporarily at the scene of the accident without special tools or parts.

B. Tire replacement without other damage even if no spare tire is available.

C. Headlamp or tail light damage.

D. Damage to turn signals, horn, or windshield wiper, which makes the vehicle inoperable.

** **Contributing Factor:** The determination of whether or not a safety-sensitive employee's performance was a contributing factor should be the decision of the company official investigating the accident; not based on the police officer's accident fault determination. This decision should not be made hastily. The company official's determination must be based on the best available information at the time of the accident.

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**SUBSTANCE ABUSE PROFESSIONAL REFERRAL
EMPLOYEE NOT PRESENT**

*If the employee **is not present** to sign the Substance Abuse Professional Referral letter, send this form to the employee utilizing **certified mail**.*

Employee/Applicant Full Name: _____

Employee/Applicant Identification Number: _____

This letter serves to notify that the aforementioned individual was in violation of DOT drug and alcohol regulations (49 CFR Part 655 and/or 40) on _____ . In accordance
Date
with 49 CFR Part 655.62, this agency is required to advise the individual of the resources available for evaluating and resolving problems associated with prohibited drug use and/or alcohol misuse.

The following Substance Abuse Professional(s) is available for the individual:

Name: _____

Address: _____

City/State: _____

Phone: _____

Alternate Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

Agency Representative Full Name, Title

Telephone Number

Agency Name

Agency Representative Signature

Date

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SUBSTANCE ABUSE PROFESSIONAL REFERRAL

I acknowledge that I have received a referral to a Substance Abuse Professional in accordance with 49 CFR Part 655.62.

The cost of this service will be paid by: _____.

Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

Alternate Substance Abuse Professional Referral:

Name: _____

Address: _____

City/State: _____

Phone: _____

I, _____, have received a copy of this referral.
Employee/Applicant Full Name

Employee/Applicant Signature

Date

Agency Representative Full Name, Title

Telephone Number

Agency Name

Agency Representative Signature

Date



Test Authorization Form

Send this completed form at the time the Donor is notified to take the test(s) to
FAX: 806-748-7096 or EMAIL: mail@alliedcompliance.com.

Send a copy of this form with the Donor to the collection site to ensure accurate testing.
 This information documents your request and helps us report test results more efficiently.

Date of Test(s): _____ Notification Date: _____ and Time: _____ AM PM
 Name of Collection Site: _____
 Collection Site Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Collection Days and Hours: _____
 Fax or Email: _____
 Company Name: _____
 Authorized by: _____
 (Printed Name of DER) (Signature of DER or ACS Representative) (Phone Number)
 Donor's ID#: _____ Donor's Name: _____

Use ACS CCF on file at your site Donor will have CCF Alter CCF to match attached example FormFox authorization eChain authorization

This section must be completed by Collection Site Personnel upon arrival at site and this form must be returned to the Employer.

_____ Date Time Collection Site Personnel's Initials Collection Site Personnel's Name

Request for FEDERAL Collection:

CHECK FEDERAL DOT Mode:	CHECK Service(s) to perform:	CHECK Reason to test:	CHECK for FMCSA Clearinghouse:
<input type="checkbox"/> FAA	<input type="checkbox"/> DOT U/A Drug Test	<input type="checkbox"/> Pre-employment	Is ACS your full-service Clearinghouse provider?
<input type="checkbox"/> FMCSA	<input type="checkbox"/> DOT Alcohol Test	<input type="checkbox"/> Random	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> FRA	<input type="checkbox"/> Pre-employment Full Query	<input type="checkbox"/> Reasonable Cause	Is ACS assigned as your TPA?
<input type="checkbox"/> FTA	<input type="checkbox"/> DOT Physical Authorization (Lubbock only)	<input type="checkbox"/> Post Accident	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> PHMSA	<input type="checkbox"/> Observed Collection	<input type="checkbox"/> Return to Duty – MUST BE OBSERVED	Are you an Owner-Operator without other drivers?
<input type="checkbox"/> USCG		<input type="checkbox"/> Follow-up – MUST BE OBSERVED	<input type="checkbox"/> Yes <input type="checkbox"/> No

Request for NON-FEDERAL Collection:

CHECK Classification:	CHECK Test(s) to perform:	CHECK Reason to test:
<input type="checkbox"/> Non-Federal	<input type="checkbox"/> U/A 5-panel Lab Test	<input type="checkbox"/> Pre-employment
<input type="checkbox"/> TDLR-Towing	<input type="checkbox"/> U/A 5-panel Instant Screening Test	<input type="checkbox"/> Random
<input type="checkbox"/> TDLR-VSF	<input type="checkbox"/> U/A 10-panel Lab Test	<input type="checkbox"/> Reasonable Cause
<input type="checkbox"/> TDLR-Towing and VSF	<input type="checkbox"/> U/A 10-panel Instant Screening Test	<input type="checkbox"/> Post Accident
<input type="checkbox"/> Personal	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Return to Duty
<input type="checkbox"/> Sub-Contractor _____	<input type="checkbox"/> Hair	<input type="checkbox"/> Follow-up
	<input type="checkbox"/> Oral Fluids	<input type="checkbox"/> Annual
	<input type="checkbox"/> Nails	<input type="checkbox"/> Pre-placement
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

ALLIED COMPLIANCE SERVICES, Inc.®

Notes: _____

Please **FAX: 806-748-7096 or EMAIL:**

mail@alliedcompliance.com this completed form.

ADMINISTRATION and BILLING: ACS; 2827 74th Street; Lubbock, Texas 79423

QUESTIONS? Call us TOLL FREE 1-800-411-6906