

ALLIED CONSTRUCTION INDUSTRIES (ACI)

in alliance with

**THE CONSTRUCTION OWNERS
ASSOCIATION OF THE TRI-STATE
(COATS)**

Substance Abuse Prevention and
Drug Testing Policy



February 2007

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**ALLIED CONSTRUCTION INDUSTRIES AND THE CONSTRUCTION
OWNERS ASSOCIATION OF THE TRI-STATES
February 2007**

SUBSTANCE ABUSE PREVENTION AND DRUG TESTING POLICY

OBJECTIVE

Allied Construction Industries (ACI) has formed an alliance with the Construction Owners Association of the Tri-States (COATS) and has adopted the COATS program as their substance abuse prevention and drug testing program.

To provide a safe and healthful work environment for the safety of the general public, members of ACI are committed to maintaining drug and alcohol free work places. Consequently, all contractors and subcontractors are encouraged to adopt the ACI/COATS "Substance Abuse Prevention and Drug Testing Policy" as a minimum standard and require their employees/workers and agents to comply with its provisions. The provisions in this policy are considered minimum standards. Adoption of this policy shall not prevent any Contractor from implementing stricter substance abuse prevention or drug testing standards or provisions.

ACI and COATS has developed this program to provide the following benefits to the local construction industry:

- Minimize the duplication of effort created by the multiple substance abuse programs currently in place in the area.
- Set the minimum standard for substance abuse policy in the area.
- Improve construction safety performance.
- Encourage the adoption of this substance abuse policy by owners, contractors and other industry participants as a condition of employment on the owner's site.

This program was originally developed by construction industry owners representing major construction consumers in the greater Cincinnati area. A number of existing and proposed programs both nationally and regionally were consulted in the development of this policy. The result is a core program which can be supplemented if desired, but forms a common basis for establishing substance abuse programs in our area.

DEFINITIONS

To insure common understanding of terms, the following definitions should be consistently used.

Accredited Laboratory (SAMHSA): A facility certified by the Department of Health and Human Services (DHHS) for testing of prohibited items and substances.

Accident/Incident: Any event caused by an employee, either directly or indirectly, that results in treatment by a health care provider, or that resulted in damage to property. This would also include any serious near-miss incidents.

Adulterated Specimen: A specimen that contains a substance that is not expected to be present in human urine, or contains a substance expected to be present but is at a concentration so high that it is not consistent with human urine.

Annual: Each employee's obligation to be tested at least every 12 months.

Cancelled Test: A drug or alcohol test that has a problem identified that cannot be or has not been corrected. A cancelled test is neither a positive nor negative test.

Chain of Custody: The procedures used to document the handling of the urine specimen from the time the employee gives the specimen to the collector until the specimen is destroyed. This program will use a non-regulated custody and control form (CCF) that captures all elements of a Federal Drug Testing Custody and Control Form (CCF).

Controlled Substances: Includes all illegal drugs as listed in this policy and per the Department of Transportation (DOT) limits, (including controlled substances, look alike drugs and designer drugs), prescription drugs used by one for whom they were not prescribed, overuse of prescription drugs prescribed for the user, drug paraphernalia, and alcoholic beverages in the personal possession of or being used by an employee on the premises or while assigned to work off premises.

Confirmation Test: In drug testing, a second analytical procedure to identify and quantify the presence of a specific drug or metabolite that is independent of the screening test and that uses a different technique and chemical principle from that of the screening test in order to ensure reliability and accuracy.

Contractor: The corporation, company, or entity that performs construction or maintenance work either directly with its own employees or indirectly with employees of subcontractors.

Counterfeit Drug Card: A drug card is considered counterfeit if it is modified in any manner without authorization from ACI/COATS, or if it was not issued by an ACI/COATS representative to the person using it to verify that he has a current valid drug test, to gain entry on a jobsite, or for any other such reason.

DER (Designated Employer Representative): A person authorized by the employer (contractor, subcontractor) to receive drug and alcohol test results and manage aspects of the substance abuse testing program.

Diluted Test: A specimen with creatinine and specific gravity values that is lower than expected for human urine. A specimen is deemed dilute if the creatinine is less than 20 ml/dl and the specific gravity is less than 1.003.

He/His: As used in this program, the terms “he or his” or similar masculine pronouns shall be construed to include the feminine alternatives of such pronouns. Such terms are used solely for grammatical purposes and shall not be construed to limit this program or its application on the basis of gender.

Initial Screening Test: In drug testing, the test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

MRO (Medical Review Officer): A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by an employer’s 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.

Negative Test: A negative test is obtained if: (1) the screen test indicated the absence of legal or illegal substance in excess of the screen limit, or (2) the screen test indicates the presence of legal or illegal substance in excess of the screen limit but the confirming test indicates the absence of legal or illegal substance in excess of the confirmation limits.

Positive Alcohol Test: A positive alcohol test result is obtained if the breathalyzer test, or equivalent test, indicates the presence of alcohol that meets or exceeds the confirmation limits of the DOT regulations. A .04% is considered positive.

Positive Drug Test: A positive test result is obtained if the result indicates the presence of an illegal substance that meets or exceeds the confirmation limits listed in this policy, as verified by a Medical Review Officer (MRO), and the MRO has determined that the test results do not stem from use of prescription medicines, over the counter medicines, food, or any cause other than the use of illegal substances. This would also include the illegal use of prescription drugs.

Pre-employment/Pre-Job Site Entry: Screening of prospective employees to ascertain whether an applicant is capable of safely performing his/her duties and of meeting the pre-requisites for employment contained herein.

Random Testing: An unannounced, unscheduled drug and/or alcohol test, pursuant to an objective method for random selection of employees to be tested. The selection must be truly random without discrimination or arbitrary selection. Upon notification the employee must immediately report to the testing facility.

Reasonable Suspicion: Reasonable suspicion shall be defined as those circumstances, based on objective evidence about the worker’s conduct in the workplace that would cause a reasonable person to believe that the worker is demonstrating signs of impairment due to alcohol or other drugs.

Substance Abuse Professional (SAP): A person who provides substance abuse evaluations on employees who have tested positive or refused to test in violation of company policy and makes recommendations concerning education, treatment, follow-up testing, and aftercare. A SAP must hold one of the following credentials: A licensed physician (Medical Doctor or Doctor of Osteopathy), a licensed or certified psychologist, a licensed or certified social worker, a licensed or certified employee assistance professional or an alcohol and drug abuse counselor certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission [NAADAC] or by the International Certification Reciprocity Consortium/Alcohol & Other Drug Abuse [ICRC]). All must have knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.

Substituted Specimen: A specimen with creatinine and specific gravity values that are so diminished that they are not consistent with human urine.

POLICY

The use, possession, distribution, sale and/or manufacture of substances of abuse, alcohol, or drug paraphernalia, or legal drugs being used for illegal purposes while on the job or on company and/or client property is prohibited and will be considered a violation for this program.

The off the job use, possession, distribution, sale and/or manufacture of substances of abuse including alcohol which adversely affect an employee's job performance and has an adverse effect on safety will not be tolerated.

Testing of contractors' employees will be conducted under conditions of strict confidentiality and with the utmost regard for the dignity of individual employees.

Violation of this policy is grounds for disciplinary action up to and including termination.

DRUG AND ALCOHOL TESTING

Types and Circumstances for Testing:

A. Pre-employment Testing

1. An employee must have been tested within 12 months prior to hiring. Any individual that fails to pass his/her substance test will be denied employment. See Appendix B on identity of tested substances.

B. Current Employees/Workers Test

1. All current employee/workers will be required to successfully pass a substance test as a condition to being scheduled for work.

C. Annual Testing

1. Upon successfully passing the drug test, the employee/worker will be issued an ID card (with photograph). As a condition of being scheduled to work the employee/worker must submit to the test and pass the annual testing as required to keep their ID card valid.

D. Random Testing

1. All employees are subject to all random drug testing required by an owner or contractor.
2. The policy requires only a minimum 5% annual random testing rate but highly recommends a greater percentage. For contractors that must meet the Ohio BWC random testing requirements it is recommended they implement those specific random percentages.
3. The selection process shall be truly random i.e. pursuant to an objective method for random selection. The selection must be without discrimination or arbitrary selection. Upon notification, the employee must immediately proceed to the testing facility.
4. Alcohol testing will be required in situations where the random test can be done immediately while the worker is on duty.

E. Reasonable Suspicion Test

1. A drug and/or alcohol test will be required of an employee/worker if there is documented evidence or reasonable suspicion as defined below.
2. Reasonable suspicion shall be defined as those circumstances, based on objective evidence about the worker's conduct in the workplace, that would cause a reasonable person to believe that the worker is demonstrating signs of impairment due to alcohol or other drugs. Examples of objective evidence include when a worker shows signs of impairment such as difficulty in maintaining balance, slurred speech, or erratic or atypical behavior. Such observations will be documented in writing by the supervisor(s) making the observation(s). This information will be made available to the individual upon request to the appropriate company official.
3. If possible, two (2) or more supervisors (the employee's immediate supervisor and an additional management representative) will make the determination as to when there is reasonable suspicion to test. The parties recognize that in certain circumstances, the observation may be made by only one individual. The determination to require a reasonable suspicion test should only be made by a supervisor who has received documented training. The contractor employer must make arrangements for the employee to be escorted directly to the testing facility. The contractor (or subcontractor) is required to submit all reasonable suspicion test results to the database.

F. Post Accident/Incident Test

1. A drug and alcohol test of an onsite contractor/subcontractor employee is required when they are involved in any accident/incident or event, caused by them either directly or indirectly, that results in treatment by a health care provider, or that resulted in damage to property, including any serious near-miss incident. Testing should also be performed after any other incident, unless it is determined that the incident was not the result of reasonable suspicion on the part of an employee/worker involved in the incident.
2. The drug test is to be done at the time of the first physician visit, or on the day of the incident/property damage, whichever the case may be. The contractor/subcontractor is responsible to make sure the employee proceeds directly for testing, or as soon as possible, and before the employee returns to

- the job site. It is the contractor/subcontractors responsibility to see that testing is done within the required time frames.
3. The alcohol test should be administered within two (2) hours of the incident/accident if possible. If it can't be administered within eight (8) hours of the incident/accident, it should not be done and written documentation should explain why the test wasn't able to be administered.
 4. The contractor/or subcontractor is required to submit all post accident/incident test results to the database.

G. Return-to-Duty Test

1. A drug and/or alcohol test required after an SAP has determined the employee/worker is fit for duty and eligible to return to work after a positive test or a refusal to test.

H. Follow-up Test

1. A drug and/or alcohol test required after an employee has been successfully returned to work. The SAP must require a minimum of three (3) follow-up tests to be completed within one year (12 months) after returning to duty. Follow-up test will be unannounced and at the will of the program administrator or the employer. The purpose of follow-up tests is to monitor progress on the employee/worker's success with rehabilitation. Payment arrangements for a return to duty tests shall be the responsibility of the employee/worker.

**SANCTIONS (CONSEQUENCES) IMPOSED FOR FAILING
A DRUG OR ALCOHOL TEST**

- A. Failure to pass a required drug or alcohol test is grounds for disciplinary action up to and including termination. In addition, the employee/worker will be required to complete all steps outlined in B. below to become complaint with the ACI/COATS program again.
- B. Any employee/worker testing positive or refusing to test will be suspended from working on any contractor or owner site until the he/she has completed a program of rehabilitation to include the following steps:
 1. The employee/worker must arrange for an evaluation with a SAP (Substance Abuse Professional)
 2. The SAP must prescribe a program of either education or treatment depending on the findings of the evaluation. The employee will not be allowed to take a return-to-duty test for at least 14 days from the date of the first positive test. Additionally the employee must have started their rehabilitation (education or treatment) before the SAP can release them to take the return-to-duty test.
 3. The employee/worker must complete all on-going treatment and/or education recommended by the SAP to stay compliant with this program.
 4. The employee/worker must present a letter from the SAP to the program administrator (Midwest Toxicology Services) that states the individual is fit for duty, can be returned to work and is eligible for the return to duty test prior to taking a return-to-duty test.
 5. The employee/worker must receive a negative result on the return-to-duty test and have it entered into the database.

6. The employee/worker must complete all follow-up tests required by the SAP. Not less than three (3) follow-up tests will be required to be completed within 12 months after returning to work. The SAP may recommend more than three (3) follow-up tests and may extend the time for longer than 12 months.
 - a. The length of time designated by the SAP for follow-up tests may be extended by the program administrator for any of the following situations:
 1. The employee becomes non-compliant for failure to report timely for a follow-up test.
 2. The employee does not provide accurate and current contact information to the program administrator (address, phone, etc.).
 3. The employee does not report for their follow-up test within a reasonable length of time as determined by the program administrator.
 7. All the costs associated with completing the SAP evaluation, rehabilitation, and the return-to-duty and follow-up tests will be the responsibility of the employee/worker or their employer/contractor.
- C. The sale, distribution or manufacture of illegal drugs or alcohol at the job site by the employee/worker will result in permanent termination and the employee must surrender their ID Card.
- D. An employee/worker testing positive three (3) times within a twelve (12) period will not be eligible to retest or obtain an ACI/COATS Substance Abuse Testing Card for a period of one year. A positive alcohol test shall also be considered a test positive.

The imposition of any of the above sanctions shall result in the employee/worker surrendering his/her ACI/COATS Substance Abuse Testing Card. The employee's card shall be rendered "invalid" in the database.

DRUG TESTING PROCEDURES

Specimens will be tested for the presence of the compounds, as listed in Appendix B. Using the standardized cutoff limits listed. This program will follow, in general, the regulatory requirements of DOT (Department of Transportation) as outlined in 49 CFR Part 40.

Specimen Collection

Specimen collection will be conducted in accordance with applicable state and federal law. The collection procedures will be designed to ensure the security and integrity of the specimen provided by each employee/worker, and those procedures will strictly follow accepted federal DOT chain-of-custody guidelines. Moreover, every reasonable effort will be made to maintain the dignity of each employee/worker submitting a specimen for analysis in accordance with these procedures.

Collection Procedures:

1. A urine specimen will be required for the drug test. The only exception to urine would be if a worker presents written documentation from a medical doctor for his inability to provide an approved specimen. In situations where the worker/employee is not physically able to produce a proper urine sample for testing a test may be done using a different testing method (hair, saliva, etc.), if approved by the program administrator. The worker/employee or company must contact the program administrator for authorization to test by an alternate method.

2. A photo ID must be presented at the time of collection to ensure proper identity.
3. At the completion of the collection, the donor will receive a copy of the CCF.
4. The donor will have up to 2 hours to provide a specimen. If no specimen is provided within 2 hours, it will be considered a “refusal to test” unless a medical evaluation validates a legitimate medical explanation for the inability to provide a specimen.
5. The donor will be afforded privacy for the urine collection unless any of the situations listed below occurs, and then the donor will be required to submit to an immediate second collection under direct observation.
 - a. The collector observes evidence of an employee’s attempt to tamper with a specimen, (e.g., collector observes materials brought to the collection site or the employee’s conduct clearly indicates an attempt to tamper with a specimen).
 - b. The temperature on the original specimen was out of range.
 - c. The original specimen appeared to have been tampered with.
 - d. The specimen was determined invalid by the laboratory and there is no adequate medical explanation as determined by the MRO.
6. Observed collections will be permitted but not required on return-to-duty and/or follow-up tests.
7. Consent Form: Contractors (subcontractors) will be required to have each employee/worker sign a consent form to initiate the testing requirements of this program prior to any testing. Refusal to sign the consent form will prevent the employee/worker from being eligible to work on a participating ACI/COATS owner site. (See Appendix A for consent form.)

Laboratory Testing Procedures

All substance analysis will be done in SAMHSA laboratories certified by DHHS (Department of Health and Human Services). A list of SAMHSA laboratories is published in the Federal Register and is updated monthly. Laboratory Procedures will include:

1. Perform an initial screening on each specimen. In the event that the initial test is positive, a confirmation test will automatically be performed by GC/MS. A test is considered positive if the detected level of the drug is at or above the cutoff level listed in Appendix B.
2. Validity testing on each specimen will automatically be performed. Each specimen is measured for creatinine level, specific gravity, and pH. The purpose of validity testing is to determine whether any of the following occurred:
 - a. Adulterants or foreign substances were added to the urine,
 - b. Determine if the specimen was substituted, or
 - c. The urine was diluted.
3. The laboratory will report all results to the MRO (Medical Review Officer). The MRO will make a final determination as to the verified result and report the result to the DER (Designated Employer Representative) of the contractor or subcontractor.

MRO Procedures

The MRO is a licensed physician and is responsible for receiving and reviewing laboratory results. The MRO provides a medical review on all test results issued by the laboratory as follows:

1. If the laboratory result is negative, the MRO will issue a negative result.
2. If the laboratory result is positive, adulterated, substituted, or invalid, the MRO will follow the following protocol:

- a. Try to contact the donor by telephone for the purpose of informing the donor of the result and complete an interview to determine whether a legitimate medical explanation exists for the result reported by the lab.
- b. If the MRO is unable to reach the donor after one attempt, the MRO will call the Designated Employer Representative (DER) of the contractor or subcontractor to assist with locating the donor to resolve the issue. If a verified result can be determined without the donor interview, the result will be reported to the DER at this time. The MRO will complete the verification process as quickly as possible and issue a result to the DER in cases where prescription or medical treatment must be evaluated.

No adverse action shall be taken against any worker or employee on the basis of any “unconfirmed positive” result of a substance abuse test.

Where use of a legal, mood altering substance or drug is detected, applicants, and/or employee/workers may be required to offer proof that the drug has been prescribed by a physician. If the applicant and/or employee/worker are unable to provide such proof, employment may be denied, suspended or terminated. Access may also be denied, suspended, or terminated where future or continued use of the prescribed drug poses a potential safety risk or would impair job performance.

Every reasonable effort will be made to keep test results confidential.

DRUG TEST RESULTS

Negative Result - A result is considered negative if the laboratory finds no drug metabolite levels over the confirmed cutoff values.

Negative but Diluted Result – A diluted specimen will require a retest. The program administrator will report the dilute to the DER. Before retesting takes place the program administrator or the contractor/subcontractor will provide specific instruction to the employee/worker on fluid intake prior to retesting to prevent another diluted specimen. These instructions are included in Appendix C. The collection for another test must be done the following morning of the workday after the employee/contractor has been notified unless there are extenuating circumstances communicated and approved by the program administrator. The program administrator may at its discretion reject the explanation. If the two parties cannot agree, ACI and COATS will be contacted for resolution. A second diluted test carries the same consequences as testing positive unless a medical evaluation validates a legitimate medical explanation for the diluted test.

Positive Test Result – a result is considered positive if the presence of the drug meets or exceeds both the screening and confirmation levels listed in Appendix B, as verified by a MRO, and the MRO has determined that the test results do not stem from use of prescription medications, over the counter medication, food, or any cause other than the use of illegal substances or controlled substances used illegally.

Refusals to Test – Refusal to submit to a test is considered the same as a positive test and is grounds for disciplinary action up to and including termination. The following situations are considered a refusal to test:

1. Failing to appear for any test within a reasonable time if directed to report for the test,

2. Failing to sign the Consent Form,
3. Refusing to provide a urine specimen for any drug test required (donor flat out says he/she isn't taking the test),
4. Refusing to permit an observed collection if required,
5. Failing to remain at the testing site until the testing process is complete,
6. Failing to provide a sufficient amount of urine within the required time, (2 hours) unless a legitimate medical explanation exists. This determination of whether a valid medical explanation exists rests with the Medical Review Officer,
7. Failing to undergo a medical examination or evaluation to meet medical explanation requirements in number 6 above,
8. Failing to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behaves in a confrontational way that disrupts the collection process),
9. Receiving notification by the MRO of a verified adulterated or substituted test result.

Specimen Retest Protocol:

When the MRO has informed the employee/worker of a verified "positive drug test" or "refusal to test" because of adulteration or substitution, the employee/worker has 72 hours from the time of notification to request a retest of his/her specimen at a different SAMHSA laboratory. The cost of the test will be the responsibility of the employee/worker. The employee/worker may make the request verbally or in writing and make proper arrangements for payment with the MRO service. If the result of the retest is different from the original result, the test will be cancelled.

ALCOHOL TESTING PROCEDURES

Employees/workers involved in an accident/incident, or who are demonstrating reasonable suspicion, as defined in an earlier section of this policy, shall be required to take an alcohol test. Random alcohol testing shall also be required if the owner/contractor performs immediate on-site random testing.

Tests for alcohol shall be performed using a Breathalyzer instrument to determine a BAC (blood alcohol content). If possible, a Breathalyzer type instrument conforming to DOT standards should be used. If that is not available, then an equivalent test may be used.

Failure to provide a sufficient breath sample to complete a breath test or refusing to provide a sample for an equivalent test will be considered a "refusal to test" and have the same consequences as a positive test.

A test is considered positive if the BAC is at or above a .04%.

ACI/COATS ID CARD AND DATABASE PROTOCOL

Test results from all required testing will be entered into the ACI/COATS database. The employee's annual test date will automatically be updated with the entry of a negative result. An ID card will be issued to each person with the first qualifying test. The card shall be valid as long as the person meets the testing requirements of this program.

Contractors are required to send testing results to the database for tests taken for post accident, annual, probable cause/reasonable suspicion, random, follow-up, and return to duty testing.

The card will display the tested person's photo, name and a computer assigned identification number. Cards that were previously issued without a photo will be replaced with a photo on the card the next time the person takes a test for the program. The card will state that the test meets the minimum requirements of the ACI/COATS Substance Abuse Prevention and Drug Testing Program. The card certifies that the employee/worker's name is now in the ACI/COATS database.

All cards issued will be entered into the ACI/COATS database.

Cards will be issued to each above-mentioned employee at a cost per card to be determined by the program administrator. If an employee's ID card is lost, stolen or damaged, a new card can be issued for a cost per card to be determined by the program administrator. Necessary verification will be required.

The ACI/COATS Substance Abuse Card is the property of ACI/COATS and contractors are asked to make every effort to retrieve the card of any person whose card has become invalid.

If an employee or a pre-hire employee presents a current ID card, the validity of that card and the employee/worker's current status must be verified with the ACI/COATS database by the owner/contractor.

The use of a counterfeit drug card will render the employee's status as non-compliant and their ID card must be rescinded. Any contractor and/or subcontractor employee possessing a counterfeit drug card will be treated as one who has tested positive.

EMPLOYEE RESPONSIBILITIES

The contractor and/or subcontractor employee shall report to work fit for duty, including being in the appropriate mental and physical condition necessary to perform work in a safe, competent manner, free of the influence of drugs and alcohol.

An employee has the obligation of reporting to his employer any medications that may impair his job performance and his or others safety.

Provide documentation of a drug test within the past 12 months at the time of hire and on a continuous basis while employed.

Consent to and participate in owner/employer required testing and consent to the release of drug screen results to the employer, and to the ACI/COATS database, or for specific purposes as permitted by law.

EDUCATION AND TRAINING

The DER (Designated Employer Representative) shall communicate the substance abuse prevention policy of the employer to the employee/worker. It is strongly encouraged that the employer require the employee/worker to acknowledge such orientation through careful documentation of the policy orientation. Contractors shall provide employee education on this program to employees and supervisor training to employees who are responsible for making the determination for reasonable suspicion

testing. ACI will provide opportunities for Training and Education to meet the required employee and supervisor training. (Details of this Training can be found in Appendix D of this policy.)

The ACI/COATS Safety Committee reserves the right to change this policy to reflect changing standards, trends, regulations and laws.

REHABILITATION

The DER (Designated Employer Representative) will be prepared to advise any employee/worker of any and all agencies, services, counselors, or medical facilities that are currently available for anyone seeking rehabilitation help or advice.

SPECIFIC INCLUSIONS OF THE OWNER'S POLICY

This is intended to be a policy of minimum required standards. Other elements of an owner's specific safety program may be required.

AUDITING

The owner or the owner designee may, at their discretion, require an unannounced audit of the contractor's and subcontractor's drug and alcohol program records. Owners may also audit by furnishing the ACI/COATS database a listing of contractor's and/or subcontractor's on site employee names or identification numbers to verify testing.

APPENDIX A

EXAMPLE OF EMPLOYEE/APPLICANT CONSENT FORM

I, _____, _____
(Printed Name) (SS or ID Number)

do hereby give my consent to _____
(Your Company Name)

to have a specimen or sample collected from me and further give my consent to forward the sample(s) to a SAMHSA certified laboratory for its performance of appropriate test thereon to identify the presence of drugs and alcohol.

II. I furthermore authorize the release the results of such test to the DER (Designated Employer Representative) and/or the employer's designated Medical Review Officer (MRO).

III. I furthermore authorize the Medical Review Officer (MRO) to release the final results of such test to the DER (Designated Employer Representative) and the ACI/COATS database.

IV. Failure to sign this consent form may be considered a test positive and subject the employee/worker to disciplinary procedures by his or her employer as outlined in this policy.

V. By signing this consent form I acknowledge that I have been informed of the substance abuse prevention policy and understand its terms and provisions.

VI. If necessary, I authorize an MRO to contact my physician(s), dentist(s) and/or pharmacist(s) to confirm medical prescriptions and I authorize an MRO to provide the results of this substance test to any medical examiner who may qualify by medical qualifications/certifications as required by this policy.

Employee/Worker Signature Date

Employee/Worker Address

Employee/Worker Phone Number

Witness Date

APPENDIX B

5 Panel Test - Drugs and Cut-off Levels

The 5 panel test drug screen components and cut-off levels are listed below. In addition to these levels and substances the creatinine level and specific gravity of the specimen will be measured. If the creatinine is less than 20 ml/dl and the specific gravity is less than 1.003, the sample will be considered dilute and another collection will be required. The second sample will be requested to be collected the following morning from the time of notification of a diluted sample. Those samples containing adulterants or considered substituted as determined by the lab will be considered test positives.

Substances	Screening Cut-off Levels	GC/MS Confirmation Cut-off Levels
Amphetamine Methamphetamines	1000 (ng/ml)	500 (ng/ml)
Cannabinoids (THC)	50 (ng/ml)	15 (ng/ml)
Cocaine/Metabolites	300 (ng/ml)	150 (ng/ml)
Opiates Codeine, Morphine	2000 (ng/ml)	2000 (ng/ml)
Phencyclidine (PCP)	25 (ng/ml)	25 (ng/ml)

ALCOHOL TESTING LEVELS

All alcohol test results with a confirmation test BAC level of .04 or higher will be considered positive and will require the employee/worker to be removed from owner property immediately. This result will also invalidate the employee/workers current ACI/COATS card and the individual will have to complete the required program of rehabilitation outlined by this policy to become eligible for an ACI/COATS card again.

All alcohol test results with a confirmation test BAC level of .020 through .039 will require the worker/employee to be removed from the owner site for twenty-four (24) hours or until his/her next scheduled on-duty time, whichever is longer. Additional sanctions regarding this level will be left to owner and/or contractor.

APPENDIX B (Alternative)

9 Panel Test - Drugs and Cut-off Levels

Note: This alternate panel may be used instead of the Appendix A (5 panel) if you want to qualify your testing to meet the requirements of owners who may require a 9-panel test.

The 9 panel test drug screen components and cut-off levels are listed below. In addition to these levels and substances the creatinine level and specific gravity of the specimen will be measured. If the creatinine is less than 20 ml/dl and the specific gravity is less than 1.003, the sample will be considered dilute and another collection will be required. The second sample will be requested to be collected the following morning from the time of notification of a diluted sample. Those samples containing adulterants or considered substituted as determined by the lab will be considered test positives.

Substances	Screening Cut-off Levels	GC/MS Confirmation Cut-off Levels
Amphetamine Methamphetamines	1000 (ng/ml)	500 (ng/ml)
Barbiturates	300 ng/ml	150 ng/ml
Benzoydiazepines	300 ng/ml	150 ng/ml
Cannabinoids (THC)	50 (ng/ml)	15 (ng/ml)
Cocaine/Metabolites	300 (ng/ml)	150 (ng/ml)
Methadone	300 ng/ml	300 ng/ml
Opiates Codeine, Morphine	2000 (ng/ml)	2000 (ng/ml)
Phencyclidine (PCP)	25 (ng/ml)	25 (ng/ml)
Propoxyphene	300 ng/ml	150 ng/ml

ALCOHOL TESTING LEVELS

All alcohol test results with a confirmation test BAC level of .04 or higher will be considered positive and will require the employee/worker to be removed from owner property immediately. This result will also invalidate the employee/workers current status and ID card and the individual will have to complete the required program of rehabilitation outlined by this policy to become eligible for a current status and valid ID card again.

All alcohol test results with a confirmation test BAC level of .020 through .039 will require the worker/employee to be removed from the job site for twenty-four (24) hours or until his/her next scheduled on-duty time, whichever is longer. Additional sanctions regarding this level will be left to an owner and/or contractor.

APPENDIX C

INSTRUCTIONS FOR DILUTED SPECIMEN RETEST

A diluted test result will require a retest, and a second diluted test result, without a medical reason, will result in the same consequences as a positive test result. The ACI/COATS program administrator will report the diluted result to the employer's representative. The employee is to be provided with specific instructions on fluid intake prior to retesting, to prevent another diluted specimen.

The collection for another test must be done the following morning of the workday after the employee /contractor has been notified, unless there are reasonable circumstances communicated and approved by the program administrator. The program administrator may at its discretion reject the explanation. If the employee or contractor disputes the decision of the program administrator the employee/contractor can contact ACI or COATS for assistance in resolving the matter.

INSTRUCTIONS TO BE GIVEN TO EMPLOYER PRIOR TO RETESTING

1. Consume no fluids after 9:00 PM the night before collection.
2. Limit fluid intake to a minimum the day of collection.
3. Supervisor will advise the time and location of testing.
4. It is the employee's responsibility to monitor their intake of fluids to prevent another dilute specimen.

If the employee has a medical condition that will cause a dilute specimen he will need to have his physician provide medical information to the MRO for evaluation. His physician must provide this information in writing to the MRO for evaluation at Midwest Toxicology Services Inc. The MRO will, after reviewing the information from the physician, issue a final report to his employer.

Medical Review Officer
FAX 317-262-2222
Midwest Toxicology Services Inc.
603 E. Washington St., Suite 200
Indianapolis, IN. 46204

APPENDIX D

Employee Education and Supervisor Training

The following training requirements will be implemented by contractors for their employees:

Employee Education for Small Contractors (25 employees or less)

The following education will be provided for all employees:

- 1) At least one hour of education each program year. The written substance policy will be discussed prior to starting the program.
- 2) Ensure every employee has received the written policy, has had the opportunity to ask questions and have these answered by the presenter and/or by the qualified substance professional. All employees will execute a signed acknowledgment of receiving the policy.
- 3) All new employees will receive education on the written policy within the first six weeks of employment which may also include the written substance educational awareness materials disseminated to employees by the substance professional.
- 4) In subsequent years, provide an hour of refresher education to all employees.
- 5) Stress management's commitment to the program.
- 6) A qualified person will explain why and how substance use is a workplace problem, the effects, signs and symptoms of substance use/misuse, and effects of commonly used drugs that affect the workplace and how to get help. Training of trainers for education may be used to allow the employer to do its own employee education.
- 7) Information about community resources where employees can go for help for themselves or family members will be provided.

Employee Education for Contractors with more than 25 Employees

The following education will be provided for all employees:

- 1) At least two hours of education each program year. The written substance policy will be discussed prior to starting the program.
- 2) Ensure every employee has received the written policy, has had the opportunity to ask questions and have these answered by the presenter and/or by the qualified substance professional. All employees will execute a signed acknowledgment of receiving the policy.
- 3) All new employees will receive education on the written policy within the first six weeks of employment.
- 4) In subsequent years, provide an hour of refresher education to all employees.
- 5) Stress management's commitment to the program.
- 8) A qualified person will explain why and how substance use is a workplace problem, the effects, signs and symptoms of substance use/misuse, and effects of commonly used drugs that affect the workplace and how to get help. Training of trainers for education may be used to allow the employer to do its own employee education.
- 6) Information about community resources where employees can go for help for themselves or family members will be provided.

Supervisor Training for Small Contractors (25 employees or less)

- 1) At least 2 initial hours of information and skill-building sessions will be provided for all current supervisors. This will be in addition to the hour of employee education that supervisors must attend.
- 2) All supervisors who received the initial training will attend a one-hour refresher course in addition to the one-hour employee education refresher.
- 3) All new supervisors will receive at least one hour of training within 6 weeks of becoming a supervisor. They will not be involved with testing responsibilities until trained.
- 4) Supervisor training will cover the following:
 - a) How to recognize a possible alcohol/drug problem.
 - b) How to confront behaviors that demonstrate an alcohol/drug problem.
 - c) How to confront an employee's substance problem privately and professionally.
 - d) How to initiate reasonable suspicion testing.
 - e) How to make appropriate referrals for assessment or assistance.
 - f) How to follow up with employees who are returning to duty with a negative test after an earlier positive test.
 - g) How to operate consistently with collective-bargaining agreements, if applicable.
- 5) The training will be conducted by a qualified trainer or a person supervised by a qualified trainer.

Supervisor Training for Contractors with more than 25 employees

- 1) At least 4 initial hours of information and skill-building sessions will be provided for all current supervisors. This will be in addition to the two hours of employee education that supervisors must attend.
- 2) All supervisors who received the initial training will attend a two-hour refresher course in addition to the two-hour employee education refresher.
- 3) All new supervisors will receive at least two hours of training within six weeks of becoming a supervisor. They will not be involved with testing responsibilities until trained.
- 4) Supervisor training will cover the following:
 - a) How to recognize a possible alcohol/drug problem.
 - b) How to confront behaviors that demonstrate an alcohol/drug problem.
 - c) How to confront an employee's substance problem privately and professionally.
 - d) How to initiate reasonable suspicion testing.
 - e) How to make appropriate referrals for assessment or assistance.
 - f) How to follow up with employees who are returning to duty with a negative test after an earlier positive test.
 - g) How to operate consistently with collective-bargaining agreements, if applicable.
- 5) The training will be conducted by a qualified trainer or a person supervised by a qualified trainer.