

# County of Tuolumne

## Alcohol & Drug Abuse Policy



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## **COUNTY OF TUOLUMNE ALCOHOL AND DRUG ABUSE POLICY**

### **I. PURPOSE**

It is the intention of this policy to eliminate substance abuse and its effects in the workplace. While Tuolumne County has no intention of intruding into the private lives of its employees, involvement with drugs and alcohol can take its toll on job performance and employee safety. Our objective is to insure that employees are in a position to perform their duties safely and efficiently in the interests of their fellow workers and the public as well as themselves. The presence of drugs and alcohol on the job, and the influence of these substances on employees during working hours, are inconsistent with this objective.

Employees who think they may have an alcohol or drug abuse problem are urged to voluntarily seek confidential assistance from the Employee Assistance Program. While the County will be supportive of those who seek help voluntarily, the County will be equally firm in identifying and disciplining those who continue to be substance abusers and do not seek help.

Alcohol or drug abuse will not be tolerated, and disciplinary action, up to and including termination, will be used as necessary to achieve this goal.

This policy provides guidelines for the detection and deterrence of alcohol and drug abuse. It also outlines the responsibilities of County managers and employees. To that end, the County will act to eliminate any substance abuse (alcohol, illegal drugs, prescription drugs or any other substance which could impair an employee's ability to safely and effectively perform the functions of their particular job) which increases the potential for accidents, absenteeism, substandard performance, poor employee morale or damage to the County's reputation. All persons covered by this policy should be aware that violations of the policy may result in discipline, up to and including termination, or in not being hired.

In recognition of the public service responsibilities entrusted to the employees of Tuolumne County, and that drug and alcohol usage can hinder a person's ability to perform duties safely and effectively, the following policy against drug and alcohol abuse is hereby adopted by the Tuolumne County Board of Supervisors.

### **II. POLICY**

It is County policy that employees:

- (i) shall not be under the influence of alcohol or drugs while on duty;
- (ii) nor possess alcohol or drugs while on County property or at work locations or while in uniform;
- (iii) nor sell, manufacture, or provide drugs or alcohol to any other employee or to any person while such employee is on duty;
- (iv) nor have their ability to work impaired as a result of the use of alcohol or drugs when reporting for work.

While use of medically prescribed medications and drugs is not (per se) a violation of this policy, attempting to work while taking medications or drugs which could interfere with the safe and effective performance of duties or operation of County equipment may result in discipline, up to and including termination. In the

event there is a question regarding an employee's ability to safely and effectively perform assigned duties while using such medications or drugs, clearance from a qualified medical practitioner may be required.

The County reserves the right to search, without employee consent, all areas and property in which the County maintains control or joint control with the employee. Employee safeguards will be the same as applies to the Peace Officer's Bill of Rights\*. Alternatively, the County may notify the appropriate law enforcement agency that an employee may have illegal drugs in his/her possession or in an area not jointly or fully controlled by the County.

Employees reasonably believed to be under the influence of alcohol or drugs shall be prevented from engaging in further work and shall be detained until he/she can be safely transported from the work site to their home or other appropriate location.

The County has established a voluntary Employee Assistance Program (EAP) to assist those employees who voluntarily seek help for alcohol or drug problems. Employees should contact their supervisors or the EAP for additional information.

**\* Government Code §3309: "No public safety officer (read employee) shall have his locker, or other space for storage that may be assigned to him searched except in his presence, or with his consent, or unless a valid search warrant has been obtained or where he has been notified that a search will be conducted. This section shall apply only to lockers or other space for storage that are owned or leased by the employing agency (read County)."**

### III. APPLICATION

This policy applies to all employees of and to all applicants for positions with the County. This policy applies to alcohol and to all substances, drugs, or medications, legal or illegal, which could impair an employee's ability to effectively and safely perform the functions of the job.

### IV. ALCOHOL AND DRUG-FREE AWARENESS TRAINING PROGRAM

The County shall develop and implement an on-going Alcohol and Drug Awareness Training Program for all supervisors. The County shall distribute and explain this Policy to all current and future County employees. Each employee will be asked to sign a receipt acknowledging receipt of a copy of this policy and their understanding of its contents (Attachment "A"). The purpose of the Alcohol and Drug-Free Awareness Training Program is that all County employees acknowledge & support the intent & provisions of this Policy.

### V. EMPLOYEE'S RESPONSIBILITIES

An employee must:

- A. Not report to work while his/her ability to perform job duties is impaired due to on or off duty alcohol or drug use.
- B. Not possess or use alcohol or impairing drugs during working hours or at any time while on County property or while in uniform.
- C. Not directly or through a third party sell, manufacture, or provide drugs or alcohol to any

person, including any employee, while either employee or both employees are on duty;

- D. Provide, as soon as practical, but no later than 72 hours, a bona fide verification of a current valid prescription for any potentially impairing drug or medication. The prescription must be in the employee's name.
- E. Notify his/her supervisor of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after conviction.

## VI. MANAGEMENT RESPONSIBILITIES AND GUIDELINES

- A. Managers and supervisors are responsible for reasonable enforcement of this policy and insuring that each employee under their direction has received a copy of this Policy.
- B. Managers and supervisors may require that an employee submit to a drug and/or alcohol test when a manager or supervisor has a reasonable suspicion that an employee is intoxicated or under the influence of drugs or alcohol while on the job or standby duty, such test shall be performed in the Emergency Room at Tuolumne General Hospital. "Reasonable suspicion" is a belief based on objective facts sufficient to lead a reasonably prudent person to suspect that an employee is under the influence of drugs or alcohol so that the employee's ability to perform the functions of the job is impaired or so that the employee's ability to perform his/her job safely is reduced. For examples of behavior which alone or in combination may constitute reasonable suspicion, see Attachment G, "Drug and Alcohol Effect Facts".

The following factors in combination with one or more of the behaviors listed in Attachment G may constitute reasonable suspicion:

- 1. An accident involving County property where employee is deemed to be at fault.
  - 2. Unprovoked physical altercation;
  - 3. Unprovoked verbal altercation;
  - 4. Deviation from regular behavior;
  - 5. Possession of alcohol or drugs;
  - 6. Information obtained from a reliable person with personal knowledge.
- C. Any manager or supervisor, prior to requiring an employee to submit to a drug and/or alcohol test shall document in writing the facts constituting reasonable suspicion that the employee in question is intoxicated or under the influence of drugs. Attachment "B" is to be used for this purpose. It shall then be routed to their department head or designee with a copy to the employee. Except in situations to avert harm to the County or to the public, an employee shall have the right to representation and shall be informed thereof; provided, in no event shall said test be delayed for more than two (2) hours awaiting representation. Attachments "C, D, and E" shall be provided to the employee for signatures prior to the testing.
  - D. Where there is reasonable suspicion that the employee is then under the influence of alcohol or drugs, the manager or supervisors should not direct the employee to go home, but should

ask the employee to remain for a reasonable time until the employee can be safely transported home or to another appropriate location.

- E. Managers and supervisors shall not physically search the person of employees, nor shall they search the personal possessions of employees without the freely given consent of, and in the presence of, the employee (see II. Policy). This consent is authorized only when the employee has signed Attachment B.
- F. Managers and supervisors shall notify the appropriate law enforcement agency when they have reasonable suspicion to believe that a County employee may have illegal drugs in his/her possession or in an area not jointly or fully controlled by the County.
- G. Managers and supervisors shall notify their department head or designee when they have reasonable suspicion to believe that an employee may have illegal drugs in his/her possession or in area not jointly or fully controlled by the County. If the department or designee concurs that there is reasonable suspicion of illegal drug possession, the department head shall notify the Human Resources Office.
- H. If the employee has been convicted of a criminal drug occurrence in the workplace and the employee is working under a Federal grant, the supervisor shall notify the grant agency within 10 days after receiving notice of the conviction and shall take appropriate personnel action against such employee within 30 days.

## VII. CHEMICAL DEPENDENCY AS A DISABILITY

Title I of the American's with Disabilities Act (ADA) protects qualified individuals with disabilities from employment discrimination. Under the ADA, a person has a disability if he has a physical or mental impairment that substantially limits a major life activity. The ADA also protects individuals who have a record of a substantially limiting impairment, and people who are regarded as having a substantially limiting impairment.

To be protected under the ADA, an individual must have, have a record of, or be regarded as having a substantial, as opposed to a minor, impairment. A substantial impairment is one that significantly limits or restricts a major life activity such as hearing, seeing, speaking, breathing, performing manual tasks, walking, learning or working. The ADA allows that an employer can test applicants or employees for current illegal drug use, can make employment decisions based upon verifiable test results, refuse to hire an individual or terminate a current employee who uses drugs illegally. Individuals who currently use drugs illegally are specifically excluded from the ADA's protection. The ADA does not encourage, authorize, or prohibit drug tests and therefore does not interfere with the County's authority to do so. However, the ADA may protect a person who has successfully completed or is currently in a rehabilitation program and no longer illegally using drugs; if all other provisions of the Act are also met.

Chemical dependency may or may not be considered a disability, then, based upon that dependency's degree of impact upon the major life activities of the employee in question. Any employee who thinks they can be helped by entering a treatment program will be granted a special leave of absence under the terms and conditions of their applicable MOU, so long as they voluntarily seek that treatment and request the leave.

Help in finding an appropriate program is available through the County's EAP.

### VIII. DEPARTMENT OF TRANSPORTATION REGULATIONS

Effective January 1, 1996, the County of Tuolumne must comply with the United States Department of Transportation regulations implementing the Federal Omnibus Transportation Employee Testing Act of 1991. Specifically, the County must comply with the regulations of the Federal Highway Administration (FHWA). Adoption of a policy is one of the County's obligations under the regulations. This policy sets forth the rights and obligations of covered employees. If you are an employee covered by these new requirements (see Section A below) you should familiarize yourself with the provision of this policy **because compliance with this policy is a condition of your employment.**

If you are an employee covered by this policy, you should be aware that you are still required to comply with the provisions of the County's overall Alcohol and Drug Abuse Policy. The obligations and requirements set forth below are in addition to existing obligations and requirements set forth in the overall policy.

An employee should refer any questions regarding his/her rights and obligations under the new regulations to the Human Resources Office at #5566.

#### A. Covered Employees:

Employees in the following job classifications have been determined to be "covered employees" because they perform "safety sensitive functions" as described in Section B below, and they are subject to all of the provisions of this policy. Please note that any classification that meets the definition described in Section B will be determined to be a "covered employee," irregardless of whether that classification's title appears below.

☞ Road Worker I	☞ Senior Road Worker	☞ Road Supervisor
☞ Road Worker II	☞ Road Crew Leadworker	☞ Recreation Bus Driver
☞ Equipment Mechanic I		☞ Equipment Mechanic II
☞ Sr. Equipment Mechanic		☞ Fleet Supervisor
☞ Assistant Public Works Director - Road Operations		

#### B. Safety-Sensitive Functions

Covered employees may not be under the influence or in possession of controlled substances or alcohol during work hours. Further, the regulations of the FHWA prohibit certain conduct (see Section C below) while performing and prior to performing safety sensitive functions. A safety sensitive function is driving one of the following vehicles:

1. a vehicle with a gross combination weight of at least 26,001 pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds;
2. a vehicle with a gross vehicle weight of at least 26,001 pounds;

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3. a vehicle designed to transport 16 or more passengers, including the driver; or
4. a vehicle used to transport those hazardous materials found in the Hazardous Materials Transportation Act.

C. Prohibitions

The following conduct will be considered cause for discipline, up to and including termination, as defined in the applicable Memorandum of Understanding between the County and its employees. Specific examples include but are not limited to:

1. Reporting for duty or remaining on duty requiring the performance of safety sensitive functions while having an alcohol concentration level of 0.04 or greater;
2. Performing a safety sensitive function within four hours of using alcohol;
3. Being on duty or operating a vehicle described in Section C above, while possessing alcohol;
4. Using alcohol while performing a safety sensitive function;
5. Reporting for duty or remaining on duty requiring the performance of safety sensitive functions when the employee used any controlled substances, except if the use is pursuant to the instructions of a physician who has advised the employee that the substance does not adversely affect the employee's ability to safely operate a vehicle (see V(D) for further discussion);
6. Reporting for duty or remaining on duty requiring the performance of safety sensitive functions if the employee tests positive for controlled substances;
7. Refusing to submit to any alcohol or controlled substances test required by this Policy. A covered employee who refuses to submit to a required drug/alcohol test will be treated in the same manner as an employee who tested 0.04 or greater on an alcohol test or tested positively on a controlled substance test;

A refusal to submit to an alcohol or controlled substance test required by this Policy includes, but is not limited to:

- a. A refusal to provide a urine sample for a drug test;
- b. An inability to provide a urine sample without a valid medical explanation;
- c. A refusal to complete and sign the breath alcohol testing form, or otherwise to cooperate with the testing process in a way that prevents the completion of the test;
- d. An inability to provide breath or to provide an adequate amount of breath without a valid medical explanation;

- e. Tampering with or attempting to adulterate the urine specimen or collection procedure;
- f. Not reporting to the collection site in the time allotted by the supervisor or manager who directs the employee to be tested;
- g. Leaving the scene of an accident without a valid reason as to why authorization from a supervisor or manager who shall make a determination whether to send the employee for a post-accident drug and/or alcohol test was not obtained.
- h. Consuming alcohol or ingesting a controlled substance during the eight hours immediately following an accident, unless the employee has been informed that his/her actions have been discounted as a contributing factor, or if the employee has already been tested.

In addition to the above prohibitions, employees are reminded of their obligations under the Federal Drug Free Workplace Act of 1988. All employees covered by this Policy have previously been provided with a copy of the County's Alcohol and Drug Abuse Policy, and have been asked to sign an acknowledgement that they have read the Statement and agreed to comply with it.

D. Consequences for Employees Found to Have Alcohol Concentration Levels of 0.02 or Greater But Less Than 0.04

An employee whose alcohol test indicates an alcohol concentration level between 0.02 and 0.04 will be removed from his or her safety sensitive position for at least eight hours. Such an employee may be subject to discipline up to and including termination. The County will then re-test the employee. Before the employee may be returned to his/her safety sensitive position, the employee's alcohol concentration must indicate a concentration below 0.02.

E. Circumstances Under Which Drug and Alcohol Testing Will be Imposed on Covered Employees

1. Pre-Employment Testing:

All applicants for classifications which are covered by the DOT regulations (see Section A) as well as all employees who transfer from classifications which are not covered to classifications which are covered will be required to submit to pre-employment/pre-duty drug testing. Applicants will not be assigned to a safety sensitive position if they do not pass the tests.

2. Post-Accident Testing:

Post-Accident drug and alcohol testing will be conducted on employees following an accident where the employee's performance cannot be discounted as a contributing factor.

The decision as to whether or not to test the employee will be left to a supervisory or management employee. The presumption is for testing. The only reason an employee will not be tested following an accident is if a determination is made that the employee's ***performance could not*** have been a contributing factor. If a fatality occurs, the employee will be tested irrespective of whether his/her involvement may be discounted.

Post-accident alcohol tests shall be administered within two hours following an accident and no test may be administered after eight hours. A post-accident drug test shall be conducted within 32 hours following the accident. Attachments "C, D, and E" shall be provided to the employee for signature prior to testing.

An **accident** also occurs (as defined by the FHWA) when as a result of an occurrence involving the vehicle an individual dies or when a State or local law enforcement authority issues a citation to the covered employee for a moving violation arising from the accident.

3. Random Testing:

Covered employees will be subject to random alcohol and drug testing as follows:

A random alcohol test will be administered just prior to the employee performing a safety sensitive function (i.e. driving) while the employee is performing a safety-sensitive function, or just after the employee has stopped performing a safety-sensitive function. The County will, as a part of a multi-jurisdiction consortium, subject at least 25% of the total number of its covered employees to random alcohol testing per year.

A random drug test will be administered to at least 50% of the total number of covered employees in the consortium per year. Some employees may be tested more than once in a year, while others are not tested at all depending on the random selection.

On the date an employee is selected for random drug testing, his/her supervisor will ensure his/her duties are covered. The employee will receive a written notice in the morning indicating the time he/she is to report to the lab for testing. Attachments "C, D, and E" shall be provided to the employee for signature prior to testing.

4. Reasonable Suspicion Testing:

Managers and supervisors may require that an employee submit to a drug and/or alcohol test when a manager or supervisor has a reasonable suspicion that an employee is intoxicated or under the influence of drugs or alcohol while on the job or standby duty, such test shall be performed in the Emergency Room at Tuolumne General Hospital. "Reasonable suspicion" is a belief based on objective facts sufficient to lead a reasonably prudent person to suspect that an employee is under the influence of drugs or alcohol so that the employee's ability to perform the functions of the job is impaired or so that the employee's ability to perform his/her job safely is reduced (see VI(B) for further discussion). Attachments "C, D, and E" shall be provided to the employee for signature prior to testing.

5. Return To Duty/Follow-up Testing:

A covered employee who has violated any of the prohibitions of this policy (See Section C) must submit to a return to duty test before he/she may be returned to his/her position. The test result must indicate an alcohol concentration of less than 0.02 or a verified negative result on a controlled substances test. In addition, because studies have shown that the relapse rate is highest during the first year of recovery, the

employee will be subject to follow-up testing which is separate from the random testing obligation. The employee will be subject to at least six unannounced drug/alcohol tests during the first year back to the safety-sensitive position following the violation. Attachments "C, D, and E" shall be provided to the employee for signature prior to each test.

F. Procedures to Be Used for Detection of Drugs and Alcohol

1. Alcohol testing:

Alcohol testing will be conducted by using an evidential breath testing device (EBT) approved by the National Highway Traffic Safety Administration.

A screening test will be conducted first. If the result is an alcohol concentration level of less than 0.02, the test is considered a negative test. If the alcohol concentration level is 0.02 or more, a second confirmation test will be conducted.

The procedures that will be utilized by the lab for collection and testing of the specimen are attached hereto as Attachment F, "Drug and Alcohol Testing Procedures"..

2. Drug Testing:

Drug testing will be conducted pursuant to the procedures set forth in Attachment F.

- a. The urine specimen will be split into two bottles labeled as "primary" and "split" specimen. Both bottles will be sent to the lab;
- b. If the urinalysis of the primary specimen tests positive for the presence of illegal, controlled substances, the employee has 72 hours to request that the split specimen be analyzed by a different certified lab;
- c. The urine sample will be tested for the following: marijuana, cocaine, opiates, amphetamines, and phencyclidine;
- d. If the test is positive for one or more of the drugs, a confirmation test will be performed using gas chromatography/mass spectrometry analysis;
- e. All drug test results will be reviewed and interpreted by a physician before they are reported to the employee and then to the County;
- f. With all positive drug tests, the physician (a.k.a. medical review officer, or "MRO") will first contact the employee to determine if there is an alternative medical explanation for the positive test result. If documentation is provided and the MRO determines that there was a legitimate medical use for the prohibited drug, the test result may be reported to the County as "negative."

G. Refusal to Submit to an Alcohol and/or Drug Test

A covered employee who refuses to submit to any required drug/alcohol testing will be treated in the same manner as an employee who tested 0.04 or greater on an alcohol test or tested positively on a controlled substances test.

#### H. Consequences of Failing an Alcohol and/or Drug Test

A positive result from a drug or alcohol test may result in disciplinary action as established under the terms of the appropriate Memorandum of Understanding between the County and its employee associations, or the applicable Personnel Rule.

If a covered employee is not terminated, the employee:

1. Must be removed from performing any safety-sensitive function;
  2. Must submit to an examination by a substance abuse professional. Upon a determination by the substance abuse professional, the employee may be required to undergo treatment to cure his/her alcohol or drug abuse. The County is not required to pay for this treatment;
  3. May not be returned to his/her former safety-sensitive position until the employee submits to a return-to-duty controlled substance and/or alcohol test (depending on which test the employee failed) which indicates an alcohol concentration level of less than 0.02 or a negative result on a controlled substance test;
  4. Will be required to submit to unannounced follow-up testing after he/she has been returned to his/her safety-sensitive position. See Section F(5) above.
- I. Information Concerning the Effects of Alcohol and Controlled Substances and Available Methods of Intervention

Attached to this Policy as Attachment G are Fact Sheets published by the Federal Transit Administration, addressing the effects of alcohol and various controlled substances which are tested for under this Policy.

You should also be aware that the County has established an Employee Assistance Program to help employees who need assistance with alcohol and controlled substance abuse. Contact the Human Resources Office for confidential referral or call the EAP at (800)227-1060 (TDD for hearing impaired = (800)327-0801). The County's plan number is #639. As an eligible employee of Tuolumne County, you and your eligible family members are each entitled to receive three (3) sessions per benefit period through the program. If extended counseling is needed, the charges will become the responsibility of the employee.

**ATTACHMENT "A"**

**ALCOHOL AND DRUG ABUSE POLICY  
Employee Acknowledgment Form**

As a condition of employment, I hereby certify that I have received a copy of the TUOLUMNE COUNTY ALCOHOL AND DRUG ABUSE POLICY. I agree that as a County employee I,

- (i) shall not be under the influence of alcohol or drugs while on duty;
- (ii) nor possess alcohol or drugs while on County property or at work locations or while in uniform;
- (iii) nor sell, manufacture or provide drugs or alcohol to any other employee or to any person while on duty;
- (iv) nor have my ability to work impaired as a result of the use of alcohol or drugs when reporting for work.

I acknowledge if I violate this policy I will be subject to disciplinary action up to and including immediate termination. I understand that I have to notify my immediate supervisor of any criminal drug statute conviction for a violation occurring at my workplace no later than five days after such conviction.

(This form will be placed into my official personnel file at the Human Resources Office)

Print Last Name:

Department: \_\_\_\_\_

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_

I certify that a copy of the County's Alcohol and Drug Abuse Policy was given to the above named employee (please complete "Print Last Name" above) by me and that, in my presence, the employee refused to sign this acknowledgment form:

\_\_\_\_\_ (signature) \_\_\_\_\_ (date)

\_\_\_\_\_ (print your last name)

**ATTACHMENT "B"**

**ALCOHOL AND DRUG ABUSE POLICY  
Reasonable Suspicion Report Form**

This is to certify that \_\_\_\_\_ (supervisor) has reasonable suspicion to believe that on \_\_\_\_\_(date) at \_\_\_\_\_ a.m./p.m. (employee) was:

- in possession of a substance or substances in violation of Tuolumne County's Alcohol and Drug Abuse Policy, or
- under the influence of a substance or substances in violation of Tuolumne County's Alcohol and Drug Abuse Policy.

The following are the specific facts that have led me to suspect that the above-named employee has violated the County's Alcohol and Drug Abuse Policy (attach additional page(s) as needed).

Date

Supervisor's Signature

Date

Department Head Signature

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**Employee Consent for Search of Personal Possessions**

I, \_\_\_\_\_, (employee) do voluntarily and of my own free will hereby give permission to my department head and/or supervisor to search my personal possessions on \_\_\_\_\_ (date).

Date

Employee Signature

Witness

**ATTACHMENT "C"**

**ALCOHOL AND DRUG ABUSE POLICY  
Employee Consent to Submit to Drug and/or Alcohol Testing**

**I have been requested by Tuolumne County to submit to drug and/or alcohol testing. I understand that the testing is voluntary on my part and that I may refuse to submit, but that such refusal may be grounds for discipline up to and including termination. I further understand that, if authorized, the test results may be released to Tuolumne County, and that the results may be used as cause for disciplinary action up to and including termination.**

**I have listed below any and all prescription and/or "over the counter" medications I have taken within the last 72 hours.**

**(list here):**

**With full knowledge of the foregoing, I voluntarily agree to submit to drug and/or alcohol testing by Tuolumne County.**

**Print Last Name:**

**Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

**ATTACHMENT "D"**

**ALCOHOL AND DRUG ABUSE POLICY  
Employee Authorization for Release of Medical Information**

I have been requested by Tuolumne County to submit to a drug an/or alcohol test to be administered by a licensed laboratory designated by the County. I authorize the laboratory to disclose all pertinent medical information and all laboratory results to an authorized representative of Tuolumne County. This information shall include, but not be limited to, medical information and reports, laboratory, scientific and other reports and/or tests, analyses of my condition and substances and/or chemicals which are causal factors for my condition, diagnoses and prognosis.

The release of the information and its use by Tuolumne County is to give the County an opportunity to evaluate the information and results in determining whether I ingested drugs or alcohol, have been impaired on the job and whether I am fit to perform my job. The information may be released any time within 180 days from the date next to my signature.

I have signed this authorization voluntarily, and I know that I have the right to receive a copy of this authorization if I request one.

**Print Last Name:**

**Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

**ATTACHMENT "E"**

**ALCOHOL AND DRUG ABUSE POLICY  
Employee Refusal to Submit to Drug and/or Alcohol Testing**

**I have been requested by Tuolumne County to submit to drug and/or alcohol testing. I understand that testing is voluntary on my part and that I may refuse to submit, but that such refusal may be cause for disciplinary action up to and including termination under Personnel Rule 9(B)10 and under the terms of the applicable MOU.**

**With full knowledge of the foregoing, I refuse to submit to drug and/or alcohol testing.**

**Print Last Name:**

**Signature:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

**Witness Signature:** \_\_\_\_\_

**I certify that this employee (please complete "Print Last Name" above) verbally refused to submit to any drug and/or alcohol test and also refused, in my presence, to sign this form:**

\_\_\_\_\_ **(signature)**

\_\_\_\_\_ **(date)**

\_\_\_\_\_ **(print your last name)**

## ATTACHMENT "F"

### ALCOHOL AND DRUG ABUSE POLICY Drug and Alcohol Testing Procedures

#### Collection Site Checklist To Be Used by Specimen Collection Personnel

— Verify the identity of the employee through the use of an official picture identification or verification by a transit official. Notify the transit agency if the employee fails to report or arrives late.

— If the employee providing the specimen requests it, present your identification as well.

— Request that the employee check his/her belongings, including unnecessary garments, purses and briefcases. The employee may retain his/her wallet. If the employee requests it, provide a receipt for his/her personal belongings.

— Request the employee to rinse his/her hands with water and dry them.

— Provide the employee with a specimen bottle and direct him/her to the privacy enclosure. Do not enter the enclosure. You should not observe the specimen collection unless special circumstances exist. Instruct the employee that at least 45 milliliters of urine are required and that the temperature will be taken to ensure the integrity of the sample.

— If the employee refuses to provide a specimen, or otherwise fails to cooperate with the process, inform the employer and document the refusal on the custody and control form.

— If the employee is unable to provide at least 45 milliliters, the original specimen shall be discarded and the employee will be instructed to drink not more than 24 ounces of fluid in a period of up to two hours. If 45 milliliters cannot be provided within the two-hour limit, notify the transit agency.

— After providing the specimen, allow the employee to wash his/her hands.

— Measure the temperature of the specimen. If the temperature of the specimen is outside the acceptable range (90.5 to 99.8 F), the collection site person will require the employee to have his/her oral temperature taken to counter any suspicion of tampering with or substitution of the specimen. Note the temperature in the appropriate place on the custody and control form.

— If there is any reason to suspect adulteration or substitution, notify a higher level supervisor, have a same-gender technician directly observe the collection of a second specimen, note the unusual behavior on the custody and control form, and submit both specimens for testing.

— Pour the first 30 ml of urine into the specimen bottle for the original specimen, Up to 15 ml is to be used for the split specimen.

— Keep the specimens in view at all times prior to sealing and labeling. The specimen must also be in view of the employee.

— Seal and label the specimens in view of the employee. Record the date on the specimen label. Have the employee initial the label verifying that the specimens are his/hers.

— Complete the custody and control form ensuring that you and the employee have signed the appropriate certification statements. Document receipt and release of specimen and shipment courier in chain of custody section of the form.

— Place the specimens and the copies of the custody and control form in a container suitable for shipment and seal. Initial the seal and record the time and date of enclosure for shipment.

- Store all specimens in a secure location until shipment.
- Ship the specimens to the laboratory using the designated courier.

### **Employee Specimen Collection Checklist** **For Employees Required to Provide Urine Specimens for Drug Testing**

— Report to the specimen collection site as soon as possible after notification to report. Refusal to report for collection or refusal to cooperate with the collection process will result in a determination of a refusal to provide a specimen.

— Show the collection site personnel an official photo identification card.

— Check your outer garments with the collection site personnel for safekeeping. You have the right to retain your wallet and to ask for a receipt for your belongings.

— Rinse and dry your hands.

— Obtain a wrapped specimen container from the specimen collection personnel.

— Proceed to the privacy enclosure and provide a specimen in the collection container. At least 45 milliliters of urine are required for analysis. If an insufficient amount of urine is provided, the original specimen will be discarded and you will be required to consume not more than 24 ounces of fluids in two hours to provide another specimen. Do not tamper with the specimen or make substitutions. The specimen will be visually inspected for unusual color and sediment.

— The temperature of the specimen will be measured and must fall within an acceptable range. If the temperature falls outside the acceptable range, you will be required to provide an oral temperature to counter any suspicion of tampering.

— Give the specimen to the specimen collection personnel and watch the sealing and labeling of the bottles. Initial the labels verifying that the specimen is yours.

— You may wish to indicate on the back of your copy of the custody and control form any medications you are currently using. This list may serve as a memory jogger in the event a Medical Review Officer calls you to discuss the results of your test.

— The results of the laboratory analysis will be forwarded to your employer's Medical Review Officer. If the results are negative (no drugs detected), the MRO will notify your employer. If the laboratory confirms a positive result (drugs detected), the MRO will contact you at the telephone number you provided to give you the opportunity to discuss the test results and to submit information demonstrating authorized use of the drugs in question.

## ATTACHMENT "G"

### ALCOHOL AND DRUG ABUSE POLICY Drug and Alcohol Effect Fact Sheet

#### Alcohol Facts

Alcohol is a socially acceptable drug that has been consumed throughout the world for centuries. It is considered a recreational beverage when consumed in moderation for enjoyment and relaxation 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 responses and progressively impairs mental functions.

**Signs and Symptoms of Use:** Except for the odor, the following signs are also general signs and symptoms of any depressant substance.

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

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

- ⊗ Decreased sexual functioning
- ⊗ Dependency (up to 10 percent of all people who drink alcohol become physically and/or mentally dependent on alcohol and can be termed “alcoholic”)
- ⊗ 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 percent of all birth defects are alcohol related)

**Social Issues:**

- Two-thirds of all homicides are committed by people who drink prior to the crime.
- Two to three percent of the driving population is legally drunk at any one time. This rate is doubled at night and on weekends.
- Two-thirds of all Americans will be involved in an alcohol-related vehicle accident during their lifetimes.
- The rate of separation and divorce in families with alcohol dependency problems is 7 times the average.
- 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.

**The Annual Toll:**

- \_ 24,000 people will die on the highway due to the legally impaired driver
- \_ 12,000 more will die on the highway due to the alcohol-affected driver
- \_ 15,800 will die in non-highway accidents
- \_ 30,000 will die due to alcohol-caused liver disease
- \_ 10,000 will die due to alcohol-induced brain disease or suicide
- \_ Up to another 125,000 will die due to alcohol-related conditions or accidents

**Workplace Issues:**

- \_ It takes one hour for the average person (150 pounds) to process one serving of an alcoholic beverage from the body.
- \_ Impairment in coordination and judgment can be objectively measured with as little as two drinks in the body.
- \_ A person who is legally intoxicated is 6 times more likely to have an accident than a sober person.

**Amphetamine Facts**

Amphetamines are central nervous system stimulants that speed up the mind and body. The physical sense of energy at lower doses and the mental exhilaration at higher doses are the reasons for their abuse. Although widely prescribed at one time for weight reduction and mood elevation, the legal use of amphetamines is now limited to a very narrow range of medical conditions. Most amphetamines that are abused are illegally manufactured in foreign countries and smuggled into the U.S. or clandestinely manufactured in crude laboratories.

**Description:**

- ➔ Amphetamine is sold in counterfeit capsules or as white, flat, double-scored “mini-bennies.” It is usually taken by mouth.
- ➔ Methamphetamine is often sold as a creamy white and granular powder or in lumps and is packaged in aluminum foil wraps or sealable plastic bags. Methamphetamine may be taken orally, injected or snorted into the nose.
- ➔ Trade/street names include Biphphetamine, Delcobese, Desotyn, Detedrine, Chetrol, Ritalin, Speed, Meth, Crank, Crystal, Monster, Black Beauties and Rits.

**Signs and Symptoms of Use:**

- |   |                                  |
|---|----------------------------------|
| _ Hyperexcitability, restlessness         | _ Profuse sweating               |
| _ Dilated Pupils                          | _ Rapid respiration              |
| _ Increased heart rate and blood pressure | _ Panic & Confusion              |
| _ Heart palpitations and irregular beats  | _ Heightened aggressive behavior |
| _ Talkativeness                           | _ Inability to concentrate       |

**Health Effects:**

- ⊗ Regular use produces strong psychological dependence and increasing tolerance to drug.
- ⊗ High doses may cause toxic psychosis resembling schizophrenia.
- ⊗ Intoxication may induce a heart attack or stroke due to spiking of blood pressure.
- ⊗ Chronic use may cause heart and brain damage due to severe constriction of capillary blood vessels.
- ⊗ The euphoric stimulation increases impulsive and risk-taking behaviors, including bizarre and violent acts.
- ⊗ Withdrawal from the drug may result in severe physical and mental depression.

**Workplace Issues:**

- \_ Since amphetamines alleviate the sensation of fatigue, they may be abused to increase alertness because of unusual overtime demands or failure to get rest.
- \_ Low-dose amphetamine use will cause a short-term improvement in mental and physical functioning. With greater use or increasing fatigue, the effect reverses and has an impairing effect. Hangover effect is characterized by physical fatigue and depression, which may make operation of equipment or vehicles dangerous.

**Cocaine Facts**

Cocaine is used medically as a local anesthetic. It is abused as a powerful physical and mental stimulant. The entire central nervous system is energized. Muscles are more tense, the heart beats faster and stronger, and the body burns more energy. The brain experiences an exhilaration caused by a large release of neurohormones associated with mood elevation.

**Description:**

- ➔ The source of cocaine is the coca bush, grown almost exclusively in the mountainous regions of northern South America.
- ➔ Cocaine Hydrochloride - "snorting coke" is a white to creamy granular or lumpy powder that is chopped into a fine powder before use. It is snorted into the nose, rubbed on the gums, or injected in veins. The effect is felt within minutes and lasts 40 to 50 minutes per "line" (about 60 to 90 milligrams). Common paraphernalia include a single-edged razor blade and a small mirror or piece of smooth metal, a half straw or metal tube, and a small screw cap vial or folded paper packet containing the cocaine.
- ➔ Cocaine base - a small crystalline rock about the size of a small pebble. It boils at a low temperature, is not soluble in water, and is up to 90 percent pure. It is heated in a glass pipe and the vapor is inhaled. The effect is felt within seven seconds. Common paraphernalia includes a "crack pipe" (a small glass smoking device for vaporizing the crack crystal) and a lighter, alcohol lamp, or small butane torch for heating.
- ➔ Trade/street names include Coke, Rock, Crack, Free Base, Flake, Snow, Smoke, and Blow.

**Signs and Symptoms of Use:**

- \_ Financial problems
- \_ Wide mood swings/Restlessness

–	Frequent and extended absences from meetings or work assignment	–	Runny or irritated nose
–	Increased physical activity and fatigue	–	Difficulty in concentration
–	Isolation and withdrawal from friends and normal activities	–	Defensiveness, anxiety, agitation
–	Secretive behaviors, frequent nonbusiness visitors, delivered packages, phone calls	–	Dilated pupils/visual impairment
–	Formication (sensation of bugs crawling on skin)	–	Hallucinations
–	High blood pressure, heart palpitations, and irregular rhythm	–	Insomnia
		–	Paranoia and hallucinations
		–	Profuse sweating and dry mouth
		–	Talkativeness
		–	Hyperexcitability

### Health Facts:

- ⊗ Research suggests that regular cocaine use may upset the chemical balance of the brain. As a result it may speed up the aging process by causing irreparable damage to critical nerve cells. The onset of nervous system illnesses such as Parkinson's disease could also occur.
- ⊗ Cocaine use causes the heart to beat faster and harder and rapidly increases blood pressure. In addition, cocaine causes spasms of blood vessels in the brain and heart. Both effects lead to ruptured vessels causing strokes or heart attacks.
- ⊗ Strong psychological dependency can occur with one "hit" of crack. Usually, mental dependency occurs within days (crack) or within several months (snorting coke). Cocaine causes the strongest mental dependency of any known drug.
- ⊗ Treatment success rates are lower than for other chemical dependencies.
- ⊗ Cocaine is extremely dangerous when taken with depressant drugs. Death due to overdose is rapid. The fatal effects of an overdose are not usually reversible by medical intervention. The number of cocaine overdose deaths has tripled in the last four years.
- ⊗ Cocaine overdose was the second most common drug emergency in 1986 - up from 11th place in 1980.

### Workplace Issues:

- Extreme mood and energy swings create instability. Sudden noises can cause a violent reaction.
- Lapses in attention and ignoring warning signals greatly increase the potential for accidents.
- The high cost of cocaine frequently leads to workplace theft and/or dealing.
- A developing paranoia and withdrawal create unpredictable and sometimes violent behavior.
- Work performance is characterized by forgetfulness, absenteeism, tardiness, and missed assignments.

## Cannabinoids (Marijuana) Facts

Marijuana is one of the most misunderstood and underestimated drugs of abuse. People use marijuana for the mildly tranquilizing and mood/perception-altering effects it produces.

### Description:

- ➔ Usually sold in plastic sandwich bags, leaf marijuana will range in color from green to light

tan. The leaves are usually dry and broken into small pieces. The seeds are oval with one slightly pointed end. Less prevalent, hashish is a compressed, sometimes tar like substance ranging in color from pale yellow to black. It is usually sold in small chunks wrapped in aluminum foil. It may also be sold in a oily liquid.

- ➔ Marijuana has a distinctly pungent aroma resembling a combination of sweet alfalfa and incense.
- ➔ Cigarette papers, roach clip holders, and small pipes made of bone, brass, or glass are commonly found. Smoking "bongs" (large bore pipes for inhaling large volumes of smoke) can easily be made from soft drink cans and toilet paper rolls.
- ➔ Trade/street names include Marinol, THC, Pot, Grass, Joints, Reefer, Acapulco Gold, Panamanian Red, Sinsemilla, Thai sticks, Hash, and Hash Oil

### Signs and Symptoms of Use:

—	Reddened eyes (often masked by eyedrops)	—	Slowed speech
—	Distinctive odor on clothing	—	Lackadaisical "I don't care" attitude
—	Chronic fatigue and lack of motivation	—	Irritating cough, chronic sore throat

### Health Effects (General):

- ⊗ When marijuana is smoked, it is irritating to the lungs. Chronic smoking causes emphysema-like conditions.
- ⊗ One joint causes the heart to race and be overworked. People with undiagnosed heart conditions are at risk.
- ⊗ Marijuana is commonly contaminated with the fungus *Aspergillus*, which can cause serious respiratory tract and sinus infections.
- ⊗ Marijuana smoking lowers the body's immune system response, making users more susceptible to infection. The U.S government is actively researching a possible connection between marijuana smoking and the activation of AIDS in positive human immunodeficiency virus (HIV) carriers.

### Health Effects (Pregnancy Problems and Birth Defects):

- ⊗ The active chemical, tetrahydrocannabinol (THC) and 60 other related chemicals in marijuana concentrate in the ovaries and testes.
- ⊗ Chronic smoking of marijuana in males causes a decrease in sex hormone, testosterone, and an increase in estrogen, the female sex hormone. The result is a decrease in sperm count, which can lead to temporary sterility. Occasionally, the onset of female sex characteristics including breast development occurs in heavy users.
- ⊗ Chronic smoking of marijuana in females causes a decrease in fertility and an increase in testosterone.
- ⊗ Pregnant women who are chronic marijuana smokers have a higher than normal incidence of stillborn births, early termination of pregnancy, and higher infant mortality rate during the first few days of life.
- ⊗ In test animals, THC causes birth defects, including malformations of the brain, spinal cord, forelimbs, and liver and water on the brain and spine.
- ⊗ Offspring of test animals who were exposed to marijuana have fewer chromosomes than normal, causing gross birth defects or death of the fetus. Pediatricians and surgeons are concluding that the use of marijuana by either or both parents, especially during pregnancy,

- leads to specific birth defects of the infant's feet and hands.
- ⊗ One of the most common effects of prenatal cannabinoid exposure is underweight newborn babies.
- ⊗ Fetal exposure may decrease visual functioning and causes other ophthalmic problems.

**Health Effects (Mental Function):** Regular use can cause the following effects...

- ⊗ Delayed decision-making
- ⊗ Diminished concentration
- ⊗ Impaired short-term memory, interfering with learning
- ⊗ Impaired signal detection (ability to detect a brief flash of light), a risk for users who are operating machinery
- ⊗ Impaired tracking (the ability to follow a moving object with the eyes) and visual distance measurements.
- ⊗ Erratic cognitive function
- ⊗ Distortions in time estimation
- ⊗ Long-term negative effects on mental function known as "acute brain syndrome," which is characterized by disorders in memory, cognitive function, sleep patterns, and physical condition.

**Health Effects (Mental Functions):** acute effects of cannabinoid use

- |                     |  |                  |
|---------------------|--|------------------|
| ⊗ Aggressive urges  | ⊗ Anxiety                              | ⊗ Confusion      |
| ⊗ Fearfulness       | ⊗ Hallucinations                       | ⊗ Heavy sedation |
| ⊗ Immobility        | ⊗ Mental dependency                    | ⊗ Panic          |
| ⊗ Paranoid reaction | ⊗ Unpleasant distortions in body image |                  |

**Workplace Issues:**

- The active chemical, THC, stores in body fat and slowly releases over time. Marijuana smoking has a long-term effect on performance.
- A 500 to 800 percent increase in THC concentration in the past several years makes smoking three to five joints a week today equivalent to 15 to 40 joints a week in 1978.
- Combining alcohol or other depressant drugs and marijuana can produce a multiplied effect, increasing the impairing effect of both the depressant and marijuana.

## Opiates (Narcotic) Facts

Opiates, also called narcotics, are drugs that alleviate pain, depress body functions and reactions, and, when taken in large doses, cause a strong euphoric feeling.

**Description:**

- ➔ Natural and natural derivatives - opium, morphine, codeine, and heroin
- ➔ Synthetics - meperidien (Demerol), oxymorphone (Numorphan), and oxycodone (Percodan)
- ➔ May be taken in pill form, smoked, or injected, depending upon the type of narcotic used.
- ➔ Trade/street names include Smack, Horse, Emma, Big D, Dollies, Juice, Syrup, and China White.

**Signs and Symptoms of Use:**

–	Mood changes	–	Impaired mental functioning and alertness
–	Constricted pupils	–	Depression and apathy
–	Impaired coordination	–	Physical fatigue and drowsiness
–	Nausea, vomiting, and constipation	–	Impaired respiration

**Health Effects:**

- ⊗ IV needle users have a high risk for contracting hepatitis and AIDS due to the sharing of needles.
- ⊗ Narcotics increase pain tolerance. As a result, people could more severely injure themselves or fail to seek medical attention after an accident due to the lack of pain sensitivity.
- ⊗ Narcotics effects are multiplied when used in combination with other depressant drugs and alcohol, causing increased risk for an overdose.

**Social Issues:**

- There are over 500,000 heroin addicts in the U.S., most of whom are IV needle users.
- An even greater number of medicinal narcotic-dependent persons obtain their narcotics through prescriptions.
- Because of tolerance, there is an ever-increasing need for more narcotics to produce the same effect.
- Strong mental and physical dependency occurs.
- The combination of tolerance and dependency creates an increasing financial burden for the user. Costs for heroin can reach hundreds of dollars a day.

**Workplace Issues:**

- Unwanted side effects such as nausea, vomiting, dizziness, mental clouding, and drowsiness place the legitimate user and abuser at higher risk for an accident.
- Narcotics have a legitimate medical use in alleviating pain. Workplace use may cause impairment of physical and mental functions.

**Phencyclidine (PCP) Facts**

Phencyclidine (PCP) was originally developed as an anesthetic, but the adverse side effects prevented its use except as a large animal tranquilizer. Phencyclidine acts as both a depressant and a hallucinogen, and sometimes as a stimulant. It is abused primarily for its variety of mood-altering effects. Low doses produce sedation and euphoric mood changes. The mood can change rapidly from sedation to excitation and agitation. Larger doses may produce a coma-like condition with muscle rigidity and a blank stare with the eyelids half closed. Sudden noises or physical shocks may cause a "freak out" in which the person has abnormal strength, extremely violent behavior, and an inability to speak or comprehend communication.

**Description:**

- ➔ PCP is sold as a creamy, granular powder and is often packaged in one-inch square aluminum foil or folded paper "packets"

- ➔ It may be mixed with marijuana or tobacco and smoked. It is sometimes combined with procains, a local anesthetic, and sold as imitation cocaine.
- ➔ Trade/street names include Angel Dust, Dust, and Hog.

### Signs and Symptoms of Use:

- |                                   |                                  |
|-----------------------------------|----------------------------------|
| – Impaired coordination           | – Severe confusion and agitation |
| – Extreme mood shifts             | – Muscle rigidity                |
| – Nystagmus (jerky eye movements) | – Dilated pupils                 |
| – Profuse sweating                | – Rapid heartbeat                |
| – Dizziness                       |                                  |

### Health Effects:

- ☹ The potential for accidents and overdose emergencies is high due to the extreme mental effects combined with the anesthetic effect on the body.
- ☹ PCP is potentiated by other depressant drugs, including alcohol, increasing the likelihood of an overdose reaction.
- ☹ Misdiagnosing the hallucinations as LSD induced, and then treating with Thrazine, can cause a fatal reaction.
- ☹ Use can cause irreversible memory loss, personality changes, and thought disorders.
- ☹ There are four phases to PCP abuse. The first phase is acute toxicity. It can last up to three days and can include combativeness, catatonia, convulsions, and coma. Distortions of size, shape, and distance perception are common. The second phase, which does not always follow the first, is a toxic psychosis. Users may experience visual and auditory delusions, paranoia, and agitation. The third phase is a drug-induced depression. Suicidal tendencies and mental dysfunction can last for months.

### Workplace Issues:

- PCP abuse is less common today than in recent years. It is also not generally used in a workplace setting because of the severe disorientation that occurs.