

LINCOLN UNIVERSITY

Procedure: Confirmatory Testing for Substance Abuse
Procedure Number: HRM – 113p
Effective Date: October 2008
Revisions:
Review Officer: Chief Human Resources Officer

1. Purpose

- 1.1. It is the intent of Lincoln University (“University”) to define and describe the standards governing its substance abuse detection and employee assistance program.

2. Reference

- 2.1. Policy 113, Substance Abuse Prevention

3. Applicability

- 3.1. The procedure shall be applicable to all University employees.

4. Definitions

- 4.1. *Chain of Custody:* The written guidelines and documentation which account for the identification and integrity of specimen provided by an employee by tracking its handling and storage from point of specimen collection to final disposition of the specimen.
- 4.2. *Confirmatory Testing:* A second analytical test to identify the presence of a specific drug or metabolite.
- 4.3. *Medical Review Officer:* A licensed physician with knowledge of substance abuse disorders who performs a final review of all drug test results in order to determine whether there is a possible alternate medical explanation of a confirmed, positive drug test result.
- 4.4. *Positive Test:* Any specimen which, upon laboratory analysis, is found to contain an amount of an illegal drug greater than or equal to an established threshold level for that drug or drug metabolite.

5. Procedure

- 5.1. Confirmatory testing will be conducted according to the Substance Abuse and Mental Health Services Administration (SAMHSA) guidelines where applicable and will include a screening test; a confirmation test; the opportunity for a split sample; review by a Medical Review Officer (“MRO”), including the opportunity for employees who test positive to provide a legitimate medical explanation, such as a physician's prescription, for the positive result; and a documented chain of custody.
- 5.2. Types of Confirmatory Testing:
 - 5.1.1. *Pre-employment:* Testing that is part of the application process before an offer of employment is made, but before hiring actually occurs (a so-called “conditional offer of employment”); or testing that occurs sometime soon after the individual begins work, but passing the drug test is made a condition of employment (i.e., even though the individual is already working, his or her hiring will not become final unless the individual passes the required drug test).
 - 5.1.2. *Post-Accident:* This testing of an employee who is involved in an on-the-job accident or work-related injury (vehicle or otherwise) which may have involved human error, and which causes a fatality, a serious injury, lost work time, or significant property damage.
 - 5.1.3. *For-Cause:* This is synonymous with “probable cause” and “reasonable suspicion” testing. Typically, the “cause” required is an objective, factual, individualized basis for testing, such as when an employee’s behavior or physical appearance suggests drug or alcohol use or possession of drugs or alcohol, or there are other indications of a violation of the University’s substance-abuse prevention Policy 702.
- 5.2. The supervisor who determines that there is cause for testing an employee shall notify promptly the Chief Human Resources Officer or designee and prepare a written report listing the objective factors which support the supervisor’s determination.
- 5.3. When an employee is tested for cause or post-accident, the employee shall be suspended with pay pending the results of the test. There shall be no discipline imposed against the employee in the absence of confirmatory testing results.

- 5.4. The substances that will be tested for are: Amphetamines, Cannabinoids (THC), Cocaine, Opiates, Phencyclidine (PCP), Alcohol, Barbiturates, Benzodiazepines, Methaqualone, Methadone and Propoxyphene.
- 5.5. Testing for the presence of alcohol shall be conducted by analysis of breath or saliva.
- 5.6. Testing for the presence of the metabolites of drugs shall be conducted by the analysis of urine.
- 5.7. Documents containing employee testing information shall be maintained in separate confidential personnel records.

6. Consequences

- 6.1. An employee who tests positive will be immediately removed from duty, referred to a substance abuse professional for assessment and recommendations, required to successfully complete recommended rehabilitation. An employee shall be subject to termination of his/her employment if he/she tests positive a second time or violates the terms and conditions for returning to work.
- 6.2. An employee will be subject to the same consequences of a positive test if he/she refuses the screening or the test, adulterates or dilutes the specimen, substitutes the specimen with that from another person or sends an imposter, will not sign the required forms or refuses to cooperate in the testing process in such a way that prevents completion of the test.
- 6.3. Nothing in this procedure prohibits the employee from being disciplined or discharged for other violations and/or performance problems.

7. Employee Assistance for Substance Abuse

- 7.1. The University recognizes that substance abuse and alcohol and drug addiction are treatable illnesses. Further, the University realizes that early intervention and support improve the success of rehabilitation. Whenever feasible, the University will assist current employees in overcoming drug or alcohol addiction and/or abuse. However, the decision to seek diagnosis and accept treatment is primarily the employee's responsibility. Employees with alcohol or drug abuse problems may request the confidential assistance of a Human Resources Department Administrator who will refer the employee to the appropriate counseling and treatment services through the University's employee assistance program.

- 7.2. Employees are encouraged to utilize the services of qualified professionals in the community to assess the seriousness of suspected drug or alcohol problems and identify appropriate sources of help. Employees may seek help without the approval of their supervisor. Employees who voluntarily request assistance in dealing with an alcohol or drug abuse problem may do so without jeopardizing their continued employment. Information disclosed in the process of seeking assistance will not serve as a basis of a disciplinary action.
- 7.3. Employees may be authorized to use accrued paid leave while seeking treatment for alcohol and other drug problems. For regular full-time or part-time benefited employees, treatment for alcoholism and/or other drug use disorders may be covered by the University's employee benefit plan in which the employee is enrolled. However, the ultimate financial responsibility for recommended treatment belongs to the employee.
- 7.4. If an employee seeks assistance (beyond merely asking for a referral to appropriate counseling or treatment services), and is referred to a rehabilitation program, the employee must provide proof of enrollment in an approved alcohol or drug abuse rehabilitation program and attendance at all required sessions, and pay for all costs of rehabilitation, which are not covered by the employee's health insurance plan. However, if an employee fails to complete a prescribed program for substance abuse / addiction treatment by an approved provider, the employee will be subject to disciplinary action or termination of employment. Disciplinary action for violation of this policy will not be reduced if an employee requests assistance after being asked to submit to confirmatory testing.
- 7.5. Employees with substance abuse problems that have not resulted in and/or are not the immediate subject of, disciplinary action may request approval to take unpaid time off to participate in a rehabilitation or treatment program. Leave may be granted if the employee agrees to abstain from use of the problem substance; complies with all Lincoln policies, rules, and prohibitions relating to conduct in the workplace; and if granting the leave will not cause Lincoln any undue hardship.

8. Confidentiality

- 8.1. All information received by the University as a result of Policy 702 is confidential communication. Access to or disclosure of this information shall be limited to those who have a legitimate need to know in or to comply with relevant laws and University policies.

Lincoln University
Department of Human Resources

**GENERAL GUIDELINES, CONFIDENTIAL MEDICAL QUESTIONNAIRE AND
VERIFICATION OF CONSENT FOR SUBSTANCE ABUSE CONFIRMATORY TESTING**

GENERAL GUIDELINES

Right to a Representative

An employee has the right to request an opportunity to talk to a representative prior to signing this consent. However, the University will wait no more than 30 minutes for such a representative to appear. If the presence of another employee is requested, then the University will provide coverage so that the employee is available within 30 minutes.

Providing the Specimen

The Supervisor or designee will transport the employee to the collection site. NOTE: The cost associated with confirmatory testing and results reporting shall be paid by the University. An employee must provide a specimen as required and specified by the University's designated test collector.

Accuracy of Test Results

The University has retained the alcohol and drug testing services of a testing laboratory that it meets the highest professional standards according to the Substance Abuse and Mental Health Services Administration (SAMHSA). The scientific and medical communities uniformly agree that the combination of tests and the chain of custody used by the test collector preserve the integrity of the specimen and produces extremely accurate results.

Confidentiality

Test results are highly confidential and are only disclosed to the Chief Human Resources Officer or designee. In the event of positive confirmatory test results, the employee's immediate supervisor and/or department administrator will be notified and personnel action will be taken against the employee.

Refusal to Submit to Confirmatory Test

If an employee refuses to sign the consent form and/or submit to the confirmatory test, appropriate personnel action shall be taken against the employee.

CONFIDENTIAL MEDICAL QUESTIONNAIRE

If you have taken any prescription or over-the-counter medication in the last thirty (30) days, please list the name and indicate whether or not your healthcare provider has prescribed such medication:

Exact Name of Medication	Name of Healthcare Provider if Medication is a Prescription

Addiction to a controlled substance(s) may be a legally protected handicap under federal, state or local laws. Are you addicted to alcohol or drugs? Check one: Yes No

VERIFICATION OF CONSENT

The information I have provided on this form is accurate to the best of my knowledge and may be verified by the University. I hereby consent to provide blood and urine specimens, and consent to the testing of specimens by the University's designated collector. I further authorize the release of the test results and any other related medical information to the physician retained by the University to review the test results.

Employee's Name

Employee's Signature

Date

Witness Verification

I verify that I read to and reviewed this consent form with _____.
Employee's Name

Witness' Name and Title

Witness Signature

Date