

PNT CONSULTING, LLC

DRUG-FREE WORKPLACE PROGRAM

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OVERVIEW

This manual is designed to provide your company's personnel with detailed information on your Drug-Free Workplace Program (DFWP). All parties involved in establishing a DFWP should read and understand this material to allow them to explain, manage, and enforce the policy.

The information in this manual is divided into five sections:

Section One

This provides the responsible parties with the basic information of what a DFWP is, the considerations involved creating one, and why it's important.

Section Two

Section two contains a copy of your Drug Free Workplace Program. This policy has been created for you based on the information you have provided.

It's important for you to review this policy to ensure it contains the correct information. While every effort has been made to provide you with a complete and accurate policy, variations, and changes in Federal, State, and local regulations can occur at any time.

For that reason, it's strongly recommended that you have your policy reviewed by a legal consultant, such as a labor/employment attorney, prior to distribution and implementation, and that you implement a regular review of your policy. This review will ensure that your DFWP will continue to be effective and legally defensible as company and legal requirements change.

Section Three

This part of the manual provides you with the information, procedures, and master copies of the documents you'll need to introduce and implement your DFWP to company employees. It also provides you with information about reviewing, maintaining, and/or modifying your DFWP.

Section Four

Section four supplies you with reference material to clarify any questions that may arise from employees about the policy. In order to develop and maintain an effective program for your company, those involved in its creation and enforcement must be familiar with the components of your policy.

The elements in this section will explain the purpose of each part of your DFWP and any conditions or requirements that may apply to your policy.

Section Five

Section five provides you with manager and employee training documents.

WHY HAVE A PLAN?

The Drug Free Workplace Act (DFWA) requires all federal employees (and contractors doing government jobs) to refrain from using illegal drugs on or off duty. This law recognized that alcohol and drug use is seriously impairing a portion of the national work force, resulting in the loss of billions of dollars each year. As the largest employer in the nation, the Federal Government has a major stake in creating reasonable conditions of employment. Prohibiting employee drug use is one such condition.

Many private employers are also developing and implementing programs for achieving a drug-free workplace. They're taking action because they now find themselves competing in a global marketplace while recognizing that this nation's rate of drug use is among the highest of any nation. A 2014 report from the United Nations Office of Drugs and Crime listed the U.S. as having the highest incidence of cocaine and marijuana use in the world. As the abuse of drugs and alcohol continues to grow, the need for effective drug policies in the workplace becomes more critical. A large number of private businesses have successfully incorporated components of the DFWA into their own workplace policies.

These materials are not intended to be, and do not constitute, legal advice. Federal, state, and local laws pertaining to Drug-Free Workplace Policies and Procedures are complex and subject to frequent changes by legislation and court decisions.

It's essential that you consult your attorney before implementing any policy or practice.

SUBSTANCE ABUSE

Substance abuse is a serious problem in the workplace. The National Institute on Drug Abuse (NIDA) reports that approximately 75 percent of all illegal drug users are employed either full or part time. The National Institute on Alcohol Abuse and Alcoholism reports that one in every 13 people in this country has an alcohol problem.

Employees don't leave their substance abuse problems at the door when they come to work. Workers who use alcohol and other drugs have the potential to affect everyone in the workplace. In fact, studies show that substance abusers:

- Are far less productive
- Miss more workdays
- Are more likely to injure themselves or someone else
- File more Workers' Compensation claims

BENEFITS AND COSTS

A DFWP, like any policy involving upfront costs and investments in employee benefits, are often subject to cost analysis review in addition to program evaluation. The costs of alcohol and drug abuse in both the workplace and society, though complex to compute, are routinely estimated and the numbers are alarming. Employers, unions, and employees generally agree that an effective DFWP yields significant returns on the investment and a reduction of costs of many types.

- **Administrative losses:** absenteeism, tardiness, overtime pay, sick leave abuse, health insurance claims, disability payments, and costs associated with accidents
- **Hidden losses:** diverted supervisory and managerial time, friction among workers, material waste, equipment damage, poor decision making, damage to public image, and costs associated with turnover
- **Losses with legal implications:** Workers' Compensation, drug trafficking on the job, disciplinary actions, grievances, threat to public safety, and worksite security
- **Costs of health and mental health care services:** Higher insurance rates due to increased claims

The cost-benefit/cost-effectiveness resulting from this research is that for every dollar a company spends on creating a DFWP, they will save four-to-six dollars in hidden costs.

Estimate the Costs and Benefits

Rising health care costs have put increased pressure on employers to monitor costs, cost effectiveness, and cost-benefit ratios for all health care services, including substance abuse-related services. Even though the exact costs and benefits of a DFWP can be difficult to measure, reasonable estimates can be calculated. On average, Return On Investment (ROI) numbers show a ratio of 12:1. The costs most programs addressed included injury, lost productivity, employee turnover, health care, workers' compensation, job dissatisfaction, litigation, and crime.

A DFWP can achieve multiple goals and outcomes; some are easier to measure than others are. The primary goal of the plan is to reduce or eliminate workplace drug use. Another may be to increase the safety of employees and the public. Others may be less obvious, but are just as important, such as promoting healthy behaviors at work, encouraging workers to develop a team focus, and creating a supportive work environment. Try to measure progress in as many, if not all, of these areas when you're evaluating the program's success.

Most of all, remember this: although it may take a while before some cost savings become visible, improvements in employee morale may be evident right away.

Describe the Process

Document the steps you take to develop and implement the policy and program. Recording this information can help you improve the process later on. Some steps you should document include creating and identifying a team to develop your company's policy, revising the policy based on feedback from others, addressing legal requirements, and assessing employees' strengths and areas needing improvement.

Find a Way to Compare

It can be helpful to compare what the workplace looked like before and after implementing the policy and program, as a way to show savings and costs. Another way to show change is to compare your company's efforts with those of another organization or compare your company's worksites. For example, examine one that has an extensive DFWP with another one that has only very basic drug-free workplace training.

Evaluation should be ongoing. Don't be discouraged if results aren't apparent right away. The ongoing evaluation of your plan allows you to reassess the goals, objectives, means for achieving those objectives, and ways of measuring processes and outcomes. Examining these results allows you to create a continuous improvement process for your program.

LEGAL REQUIREMENTS

In 1988, Congress passed the DFWA, which requires Federal grantees and recipients of Federal contracts of \$100,000 or more to comply with the following:

- Employers must have a written policy that explains what's prohibited, and the consequences of violating the policy
- Employees must read and agree in writing to the policy as a condition of employment on the project
- Employers must have an awareness program to educate employees about alcohol and drug abuse and addiction, the employer's policy, and available help, including counseling and other assistance
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within five days after such conviction
- Employers must disclose any conviction for a drug-related offense in the workplace to the Federal agency with which the employer has a grant or contract, within ten days after receiving notice from the employee or others
- Employers must make an ongoing effort to maintain a drug-free workplace

If you're a Federal contractor and don't have a DFWP, any contracts awarded to you by a Federal agency may be suspended, terminated, or both. You may become ineligible for consideration of any future contracts, and prohibited from participating in any future procurement by any Federal agency for up to five years.

SECTION ONE – DFWP BASICS

Some employers are also subject to the provisions of the 1991 Omnibus Transportation Employee Testing Act. This Act requires employees in certain safety-sensitive positions such as in the aviation, trucking, railroad, mass transit, and pipeline industries be tested for alcohol and drug use. The transportation industry has established additional policies on drug and alcohol testing to ensure workers who operate aircraft, trains, trucks, and buses do so in a safe and responsible manner.

If you have questions about whether you are required to have a program in your workplace, call the Substance Abuse and Mental Health Services Administration (SAMHSA) free and confidential Workplace Helpline at 1-800-WORKPLACE for assistance.

The Americans with Disabilities Act (ADA), prohibits discrimination against qualified people with disabilities and limits an employer's ability to inquire into an employee's or job applicant's medical history. It does however, allow drug testing, and doesn't bar employers from prohibiting alcohol abuse or illegal drug use in the workplace. Under the ADA, an employer may require job applicants and employees to pass a drug test as a condition of employment.

According to the ADA, an employer can't discriminate based on these characteristics:

- Illegal substance abusers and alcoholics who have successfully completed a rehabilitation program
- Those who are participating in a supervised rehabilitation program
- Those who, based on hearsay only, are believed to be an illegal drug user

Alcoholism is considered a disability. Alcoholics can't be discriminated against unless their alcohol use impairs performance or conduct to the extent that they are no longer performing their job at the required standard.

Although the Act doesn't protect certain illegal substance abusers and alcoholics who can't perform their jobs safely, it does protect those who have been rehabilitated or are participating in supervised rehabilitation programs and not currently using drugs.

State and Local Regulations

Many States and Municipalities have specific drug-free workplace regulations that define when and how employees can be tested for illegal drugs. Consult with your State or local government to identify these requirements and obtain any other regulations or assistance regarding drug-free workplace programs.

WIDESPREAD ABUSE

Substance abuse in the workplace is a widespread problem and it affects us all in many ways. Although national, state, and local efforts have begun to show encouraging results, the problem of alcohol and drug abuse remains a serious problem. No workplace is immune.

Some studies suggest that working alongside a substance abuser can reduce a non-abusers' morale and productivity. It's also common for substance-abusing workers involved in workplace accidents to injure other people, rather than themselves.

PLANNING

The first step in determining the type of DFWP to implement is to conduct a needs assessment. A needs assessment for a DFWP lets you analyze how things currently are and how the program can improve your company and help meet employees' needs.

NEEDS ASSESSMENT

When studying the components your program needs to have, look at the nature of your business. Factors such as the size of the company, its management structure, site location(s), environmental conditions, and job task differences can all affect what your program should contain. There's a good deal of information available to help employers identify programs and components that can be useful for their workplaces. However, these programs and components can be costly, so it makes sense to complete a needs assessment first.

In brief, a needs assessment can help you determine how much of your current costs relate to substance abuse. These costs can be caused by accidents, injuries, and high turnover rates. A needs assessment can also provide information on legal and executive mandates, as well as the company's mission, goals, and culture. In addition, the assessment can identify internal and external constraints created by facilities, resources, and knowledge base. By measuring the company's needs, you'll be able to identify the program components that will best meet your needs.

CONDUCTING THE NEEDS ASSESSMENT

Outside consultants are available to conduct needs assessments and evaluations. However, hiring outside help may not be an option for organizations with limited resources. Just as a policy and program doesn't have to be complex and costly to be effective, a needs assessment doesn't have to be complicated either. Anyone, from a business owner or organization head to an HR representative to an outside consultant, can conduct a basic needs assessment appropriate to the organization size. Tailor your needs assessment based on the resources you have available.

When starting your needs assessment, it's helpful to ask some key questions. For example:

- Is the organization required to meet any legislative or regulatory requirements regarding substance use and abuse?
- Are there employees in safety-sensitive roles? For example, are there employees who administer health advice, medicine, or services, or employees who drive vehicles, operate machinery, handle chemicals, or work with the public—particularly with children?
- Are there employees in jobs that are security-sensitive? For example, are there employees responsible for confidential ideas, products, plans, or documents; employees responsible for accounting, cash, inventory, or stock; or employees who work offsite, such as traveling salespersons, home workers, or home health care workers?
- Are there employees performing extremely important functions for the organization? For example, are there accountants who handle large sums of money, sales persons who represent the company to key buyers, employees who control hazardous material, or supervisors who manage many employees?

Involve Others

One key to the success of any DFWP is to involve employees and union officials (if applicable) in the needs assessment process. Employers whose workplaces are unionized may need to negotiate with the unions about the DFWP. Get input from both supervisory and non-supervisory employees to help you tailor a plan that's best for the company.

Gather this input from focus group meetings; consultations with key personnel; examination of work products; analysis of workplace administrative data; and employee, management, and union surveys.

Define the Mission and Goals

Success means different things to different people. Some employers' main objective is to meet the legal requirements, while others want to improve productivity and the return on their investment. Still others may want to change the lives of their workers and their workers' families.

Link Each Goal to Something Measurable

If one of your goals is to "have an employee who's drug-free", determine exactly what this means, and how you'll measure it. Creating measurable objectives, such as "increased volunteer use of the Employee Assistance Program (EAP)", can help clarify your high-level goals.

Get a Baseline

Document the status of your workplace before you implement the DFWP. Use this baseline information to compare the effectiveness of the program after your DFWP has been implemented. To develop a useful baseline for a DFWP, do the following:

Collect and Analyze Data on the Current Situation

Qualitative Data Examples:

- What do employees think about the safety, health, and productivity of the workplace?
- What's the morale of the company?
- What are other companies in the industry/area doing to promote health, safety, and productivity?
- What are the characteristics of your company (e.g., small business; employees who are home workers)?
- How well does management work with unions?
- What's the corporate culture toward alcohol and other drugs? Is alcohol served at company functions?
- What's the corporate position on health and wellness of employees?
- How supportive are supervisors and managers toward employees' work-life balance?
- Are employees fearful of colleagues who are abusing drugs?

Quantitative Data Examples:

- What are the numbers on turnover, absenteeism, tardiness, use of health care benefits, and workers' compensation claims?
- What is the percentage of loss, including theft, accidents, and poor-quality goods?

Understand Legal and Other Requirements

Review national, state, and local industry requirements for safety. Determine if there are any statutes offering financial benefits for having a DFWP. Some of these benefits include getting preference in contract bids, workers' compensation premium discounts, and tax deductions for some program expenses such as EAP and testing costs.

Identify Future Needs and Goals

What is your company's business development plan? How will the policy and program affect this?

Identify Resources

Look at internal and external resources you'll need to implement a policy and program, and find out what's available.

DFWP POLICY

The following pages contain your company's Drug Free Workplace Policy.

Copies of the policy must be provided to all employees when the plan is implemented, and to all new hires. Copies should also be posted in conspicuous employee areas or made available for review upon request.

PNT CONSULTING, LLC

DRUG-FREE WORKPLACE POLICY

PURPOSE AND GOAL

PNT CONSULTING, LLC is committed to protecting the safety, health, and wellbeing of all employees and other individuals in our workplace. We recognize that alcohol abuse and drug use pose a significant threat to our goals. We have established a drug-free workplace program that balances our respect for individuals with the need to maintain an alcohol and drug-free environment.

This policy recognizes that employee involvement with alcohol and other drugs can be very disruptive, adversely affect the quality of work and performance of employees, pose serious health risks to users and others, and have a negative impact on productivity and morale

This organization has no intention of interfering with the private lives of its employees unless involvement with alcohol and other drugs off the job affects job performance or public safety

As a condition of employment, this organization requires that employees adhere to a strict policy regarding the use and possession of drugs and alcohol

This organization encourages employees to voluntarily seek help with drug and alcohol problems

COVERED WORKERS

Any individual who conducts business for the organization, is applying for a position, or is conducting business on the organization's property is covered by our drug-free workplace policy. Our policy includes, but is not limited to:

- Other: all employees

APPLICABILITY

Our drug-free workplace policy is intended to apply whenever anyone is representing or conducting business for the organization. Therefore, this policy applies:

- At company-sponsored events
- While on company property
- While on call or paid standby
- Whenever conducting business or representing the organization
- During all working hours

PROHIBITED BEHAVIOR

It is a violation of our drug-free workplace policy to use, possess, sell, trade, and/or offer for sale alcohol, illegal drugs, or intoxicants.

PRESCRIPTION AND OVER-THE-COUNTER DRUGS

This policy allows the use of prescription and over-the-counter drugs when taken in standard dosage and/or according to a physician's prescription. Employees taking prescribed or over-the-counter medications will be responsible for consulting their physician and/or pharmacist to determine if their medication may interfere with safe performance of their job. If the use of a medication could compromise the safety of the employee, fellow employees or the public, it is the employee's responsibility to use appropriate personnel procedures (e.g., call in sick, use leave, request change of duty, notify supervisor, notify company doctor) to avoid unsafe workplace practices.

The illegal or unauthorized use of prescription drugs is prohibited. It is a violation of our drug-free workplace policy to intentionally misuse and/or abuse prescription medications. Appropriate disciplinary action will be taken if job performance deterioration and/or other accidents occur.

SEARCHES

Entering the organization's property constitutes consent to searches and inspections. If an individual is suspected of violating the drug-free workplace policy, he or she may be asked to submit to a search or inspection at any time. Searches can be conducted of:

- Vehicles and equipment

Under this company's drug testing policy, all current and prospective employees must submit to the drug testing policy. Prospective employees will only be asked to submit to a test once a conditional offer of employment has been extended and accepted.

An offer of employment by PNT Consulting, LLC is conditional on the prospective employee testing negative for illegal substances.

SAFEGUARDS

PNT CONSULTING, LLC policy is intended to comply with all state laws governing drug testing and is designed to safeguard employee privacy rights to the fullest extent of the law.

TESTING TERMS

The Company will conduct drug and/or alcohol testing under any of the following circumstances:

- Pre-employment
- Pre-duty (prior to start of shift)
- Random
- Post-accident
- Reasonable suspicion
- Follow-up (post-treatment)

TESTING SUBSTANCES

PNT CONSULTING, LLC drug and alcohol testing program is limited to testing for:

SAMHSA

Amphetamines

Cannabinoids (THC)

Cocaine

Opiates

Phencyclidine (PCP)

OTHERS

Alcohol

Barbiturates

Benzodiazepines

Methaqualone

Methadone

Propoxyphene

Other drug: _____

WRITTEN NOTICES

Before being asked to submit to a drug and/or alcohol test, the employee will receive written notice of the request or requirements.

LICENSED LABORATORIES

Any drug and/or alcohol testing required or requested by **PNT CONSULTING, LLC** will be conducted by a laboratory licensed by the state. The employee may obtain the name and location of the laboratory that will analyze the employee's test sample by calling DATCS at 9032341136 before the employee is scheduled to be tested.

NOTICE OF RESULTS

If the employee is asked to submit to a drug and/or alcohol test, Todd Harvy will notify the employee of the results within 24 hours after it receives them from the laboratory. To preserve confidentiality, Todd Harvy will notify By phone whether the test was negative or confirmed positive and, if confirmed positive, what steps will be taken next.

POSITIVE TEST RESULTS

If the employer receives notice that the employee's test was confirmed positive, the employee will be given the opportunity to explain the positive result following the employee's receipt of the test result. In addition, the employee may have the same sample retested at a laboratory of the employee's choice.

ADVERSE EMPLOYMENT ACTION

If there is reason to suspect the employee is working while under the influence of an illegal drug or alcohol, the employee will be suspended

- Without

pay until the result of a drug and alcohol test are made available to **PNT CONSULTING, LLC** by the testing laboratory. Where drug or alcohol testing is part of a routine physical or random screening, there will be no adverse employment action taken until the test results are in.

If an employee is tested for drugs or alcohol outside of the employment context and the results indicate a violation of this policy, or if an employee refuses a request to submit to testing under this policy, the employee may be subject to appropriate disciplinary action, up to and possibly including discharge from employment. In such a case, the employee will be given an opportunity to explain the circumstances prior to any final employment action becoming effective.

CONFIDENTIALITY

All testing results will remain confidential. Employee must sign a consent form prior to the release of results. Test results may be used in arbitration, administrative hearings, and court cases arising as a result of the employee's drug testing. Results will be sent to federal agencies as required by federal law. If the employee is to be referred to a treatment facility for evaluation, the employee's test results will also be made available to the employee's counselor.

COST

PNT CONSULTING, LLC will pay the cost of any drug and alcohol testing that it requires or requests employees to submit to, including retesting of confirmed positive results. Any additional tests that are employee requests will be paid for by the employee.

DRUGS AND ALCOHOL AT WORK

The Company explicitly prohibits:

The use, possession, solicitation for, or sale of narcotics or other illegal drugs, alcohol, or prescription medication without a prescription on Company or customer premises or while performing an assignment

Being impaired or under the influence of legal or illegal drugs or alcohol away from the Company or customer premises, if such impairment or influence adversely affects the employee's work performance, the safety of the employee or of others, or puts at risk the Company's reputation

Possession, use, solicitation for, or sale of legal or illegal drugs or alcohol away from the Company or customer premises, if such activity or involvement adversely affects the employee's work performance, the safety of the employee or of others, or puts at risk the Company's reputation

The presence of any detectable amount of prohibited substances in the employee's system while at work, while on the premises of the company or its customers, or while on company business.

"Prohibited substances" include illegal drugs, alcohol, or prescription drugs not taken in accordance with a prescription given to the employee

POSTING

Besides being outlined here, **PNT CONSULTING, LLC** drug policy is available for employee review upon request.

TESTING METHODS

Testing for the presence of drugs will be conducted by analysis of:

- Urine
- Hair

CONSEQUENCES

Any employee who tests positive will be immediately:

- Immediately removed from duty
- Terminated immediately

REFUSING TESTING

An employee will be subject to the same consequences of a positive test if he/she:

- Refuses to cooperate in the testing process in a way that prevents completion of the test
- Will not sign the required forms
- Substitutes the specimen with that from another person or sends an imposter
- Adulterates or dilutes the specimen
- Refuses the screening or the test

POLICY VIOLATIONS

One of the goals of our drug-free workplace program is to encourage employees to voluntarily seek help with alcohol and/or drug problems. If, however, an individual violates the policy, the consequences are serious.

In the case of applicants, if he or she violates the drug-free workplace policy, the offer of employment can be withdrawn. The applicant may:

- Reapply after one year provided he/she has successfully passed a specified pre-employment drug test

If an employee violates the policy, he or she will be:

- Terminated from employment

RETURN-TO-WORK AGREEMENTS

Following a violation of the drug-free workplace policy, an employee may be offered an opportunity to participate in rehabilitation. In such cases, the employee must sign and abide by the terms set forth in a Return-to-Work Agreement as a condition of continued employment.

ASSISTANCE

PNT CONSULTING, LLC recognizes that alcohol and drug abuse and addiction are treatable illnesses. We also realize that early intervention and support improve the success of rehabilitation. To support our employees, our drug-free workplace policy:

- Encourages employees 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

Treatment for alcoholism and/or other drug use disorders may be covered by the employee benefit plan. However, the ultimate financial responsibility for recommended treatment belongs to the employee.

CONFIDENTIALITY

All information received by the organization through the drug-free workplace program is confidential communication. Access to this information is limited to those who have a legitimate need to know in compliance with relevant laws and management policies.

SHARED RESPONSIBILITY

A safe and productive drug-free workplace is achieved through cooperation and shared responsibility. Both employees and management have important roles to play.

All employees are required to not report to work or be subject to duty while their ability to perform job duties is impaired due to on- or off-duty use of alcohol or other drugs.

In addition, employees are encouraged to:

- Be concerned about working in a safe environment
- Support fellow workers in seeking help
- Use the Employee Assistance Program
- Report dangerous behavior to their supervisor

It is the supervisor's responsibility to:

- Inform employees of the drug-free workplace policy
- Observe employee performance
- Investigate reports of dangerous practices
- Document negative changes and problems in performance
- Counsel employees as to expected performance improvement
- Refer employees to the Employee Assistance Program
- Clearly state consequences of policy violations

COMMUNICATION

Communicating our drug-free workplace policy to both supervisors and employees is critical to our success. To ensure all employees are aware of their role in supporting our drug-free workplace program:

- All employees will receive a written copy of the policy

SECTION THREE - ADMINISTRATION

ADMINISTRATIVE RELIEF

If an employee believes his or her position has been wrongly designated a Testing Designated Position, that employee may file an administrative appeal to the General Manager who has authority to remove the employee from the Testing Designated Position list. The appeal must be submitted by the employee to the General Manager in writing, within 15 days of notification, explaining why he/she believes the position should not be classified as a designated position. The General Manager and Drug Program Director shall review the appeal based upon the criteria used in designating that employee's position as a Testing Designated Position. The General Manager's decision is final and is not subject to further administrative review.

The following forms and documents are required to implement and manage the DFWP. These are your form master copies be sure to make sufficient copies.

Document	Page
LETTER TO ALL EMPLOYEES	27
ASSIGNMENT OF RESPONSIBLE PERSONNEL	29
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SECTION THREE - ADMINISTRATION

LETTER TO ALL EMPLOYEES

Date: _____

The illegal use of drugs and the abuse of alcohol are problems that invade the workplace, endangering the health and safety of the abusers and those who work around them. This company is committed to creating and maintaining a workplace free of substance abuse without jeopardizing valued employees' job security.

To address this problem, PNT CONSULTING, LLC has developed a policy regarding the illegal use of drugs and the abuse of alcohol that we believe best serves the interests of all employees. Our policy formally and clearly states that the illegal use of drugs or abuse of alcohol or prescription drugs will not be tolerated. As a means of maintaining our policy, we have implemented pre-employment and active employee drug testing. This policy was designed with two basic objectives in mind:

Employees deserve a work environment free from the effects of illegal drug use or alcohol abuse and the problems associated with it

This company has a responsibility to maintain a healthy and safe workplace

To assist us in maintaining a safe and healthful workplace, we have created an Employee Assistance Program (EAP), which provides employees confidential assessment, referral, and follow-up for personal or health problems.

An employee whose conduct violates PNT CONSULTING, LLC Drug-Free Workplace Policy (and who does not accept the help offered under EAP) will be disciplined up to and including termination.

I believe it is important that we all work together to make this company a drug-free workplace and a safe, rewarding place to work.

Sincerely,

President

ASSIGNMENT OF RESPONSIBLE PERSONNEL

To validate the implementation of this Drug-Free Workplace Program, the assignment of personnel to key positions responsible for supervising particular aspects of the program is required. (Smaller companies may combine several of the duties listed into a single position.)

PNT CONSULTING, LLC (hereafter referred to as the Company) identifies the following responsible personnel.

<u>Nicolaza Harvy</u>	
Name of President (or CEO)	Signature/Date
<u>Todd Harvy</u>	
Name of President (or CEO)	Signature/Date
<u>Paul Harvy</u>	
Name of President (or CEO)	Signature/Date
<u>DATCS</u>	<u>450 E. Loop 281 Suite C-12, Longview, TX 75606</u>
Name of Certified Specimen Collection Lab	Address

EMPLOYEE 60-DAY NOTICE OF DRUG TESTING

This is a notice from the company president announcing that a drug-testing program will be implemented 60 days from date of the notice as provided in the Drug-Free Workplace Program. It is the responsibility of all employees to familiarize themselves with the following drug-testing elements of said program:

- The purpose of the Drug-Free Workplace Program
- That the employee will have the opportunity to voluntarily admit to being a user of illegal drugs and to receive counseling or rehabilitation and shall not be subject to disciplinary action
- The availability and procedures necessary to obtain counseling and rehabilitation through the Employee Assistance Program (EAP)
- That the program includes both voluntary and mandatory testing
- The circumstances under which testing may occur
- That the employee's position may be designated a Testing Designated Position
- That the employee's position will be subject to random testing no sooner than 60 days following the notice
- That opportunity will be afforded to submit medical documentation of lawful use of an otherwise illegal drug
- That the laboratory assessment is a series of tests which are highly accurate and reliable, and that, as an added safeguard, laboratory results are reviewed by the Medical Review Officer
- That positive test results verified by the Medical Review Officer may only be disclosed to the employee, the appropriate EAP administrator, the appropriate management officials necessary to process an adverse action against the employee, or a court of law
- That all medical and rehabilitation records in an EAP will be deemed confidential patient records and may not be disclosed without the prior written consent of the patient, an authorizing court order, or otherwise as permitted by Federal law

This document serves as both General and Individual notice. It is the employee's responsibility to ensure that he/she understands company policy for drug testing. If you have questions or concerns, see your supervisor.

President/CEO

Date of NOTICE

EMPLOYEE CONSENT & COMPLIANCE STATEMENT ACKNOWLEDGEMENT & ACCEPTANCE OF “NOTICE”

Employee Name: _____ Job Title: _____
Supervisor Name: _____ Location: _____
Company Name: _____ Date: _____

I have read and understand the Company's Drug-Free Workplace Program.

I acknowledge that all required NOTICE is duly given, Including Testing Designated Position.

I understand that the unlawful manufacture, distribution, possession, or use of a controlled substance (or alcohol) at work is expressly prohibited by Company Policy.

As a condition of employment:

- I agree to abide by the company policy on alcohol and other drug use
- I will notify my employer of any criminal alcohol or drug conviction for a violation at the workplace no later than five days after conviction
- I understand this information will be reported to the federal agency under which my work group may be contracted
- As a result of a first conviction at work, I understand that I will be suspended from work without pay for a period of _____ * (at company discretion). A second offense will result in either my termination or successful participation in a substance abuse rehabilitation program
- Further, I understand that if I feel I have a problem with alcohol or other drugs, I may voluntarily seek rehabilitation counseling without negative consequences from my employer

I hereby certify that I have received and read the Company Drug-Free Workplace Policy and have had any questions explained to me. I understand that if my performance indicates it is necessary, I will submit to a substance abuse test. I also understand that failure to comply with a substance abuse test request or a positive test result may lead to termination of employment.

By accepting or continuing employment with this company, I waive, release, and hold harmless the company, any Client Company, and any testing laboratory and their agents and employees, from any claims or cause of action arising out of the taking of a sample of breath, blood, urine, hair, or other bodily fluids, arising out of the test, or arising out of the disclosure of drug test results.

My signature attests and verifies my understanding of, and agreement to comply with, all company Drug-Free Workplace Program policies and procedures. Nothing in this consent form is to be construed as a contract between the parties.

_____ Employee Name	_____ Signature	_____ Date
_____ Supervisor Name	_____ Signature	_____ Date

PRE-EMPLOYMENT DRUG TESTING

CONSENT & RELEASE FORM

I hereby consent to submit to urinalysis and/or other tests as shall be determined by **PNT CONSULTING, LLC** in the selection process of applicants for employment and vacancy announcement, for the purpose of determining the drug content thereof.

I agree that _____

(Name of physician or clinic)

may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the company for analysis.

I further agree to, and hereby authorize, the release of the results of said tests to the company.

I further agree to hold harmless the company and its agents (including the above-named physician or clinic) from any liability arising in whole or part, out of the collection of specimens, testing, and use of the information from said testing in connection with the company's consideration of my application of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing, and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant: Print Name _____ SSN: _____

Applicant: Signature _____ Date: _____

Witness Printed Name: _____

Witness Signature: _____

(This certificate becomes part of the active employee's personnel file.)

NOTICE OF APPOINTMENT DRUG & ALCOHOL TESTING/SCREENING

Employee Name			
Position			
You are hereby advised of the requirement to report as scheduled to the below-named authorized "Specimen Collection Center/Laboratory" and provide a designated sample.			
Appointment Date	Time	Other	
Drug Program Director's Name and Signature		Date	
Name of Collection Lab		Phone	
Address of Lab	City	State	Zip
Time/Date of Arrival			
Unusual Observations			
Collection Technician's Name and Signature			
I attest that the sample given is my own and has not been altered in any manner. My signature verifies my compliance and cooperation.			
Employee's Signature		Date	
<p>An employee selected for random drug testing may obtain a deferral of testing if the employee's first-line and higher-level supervisors concur that a compelling need necessitates a deferral.</p> <p>I do hereby authorize a deferral.</p>			
Employee Supervisor's Name and Signature		Time/Date	

INCIDENT REPORT

PNT CONSULTING, LLC

Incident Documentation Sheet

<i>Employee Name</i>		<i>Date</i>		<i>Time</i>	
<i>Location of Incident</i>					
<i>Description of Incident</i>					
<i>Observations (Check any that apply.)</i>					
<input type="checkbox"/> <i>Odor of Alcohol?</i> <input type="checkbox"/> <i>Odor of Marijuana?</i> <input type="checkbox"/> <i>Attempt to Conceal an Object?</i> <input type="checkbox"/> <i>Other?</i>					
<i>Behavior</i>		<i>Unusual Actions</i>		<i>Speech</i>	
	<i>Nervous</i>		<i>Sweating</i>		<i>Slurred</i>
	<i>Insulting</i>		<i>Slow Reactions</i>		<i>Slow</i>
	<i>Sleepy</i>		<i>Crying</i>		<i>Confused</i>
	<i>Confused</i>		<i>Fighting</i>		<i>Thick</i>
	<i>Excited</i>		<i>Tremors</i>		<i>Rambling</i>
	<i>Fatigued</i>		<i>Quick Moving</i>		<i>Pressured</i>
	<i>Poor Memory</i>	<i>Eye Witnesses/Other Employees Involved</i>			
	<i>Exaggerated Politeness</i>				
	<i>Combative</i>				
	<i>Quarrelsome</i>				
	<i>Uncooperative</i>				
	<i>Overly Talkative</i>				
<i>Supervisory Action Taken</i>					
<i>Consequences</i>					
<i>Follow Up</i>					
<i>Comments</i>					
<i>Person Making Report</i>				<i>Title</i>	
<i>Signature</i>				<i>Date</i>	

The following position titles have been designated for random drug testing due to risks of harm arising from illegal drug use by an employee occupying that position.

Number of Employees in Designated Position: _____

Justification:

Date _____

Date _____

DESIGNATED POSITION DRUG TESTING LOG

Designated Position Drug-Testing Log PNT CONSULTING, LLC	
A separate form must be filled out for each job category.	
Position title designated for random drug testing:	
Reasoning and justification applied in designating the position titles:	
Number of employees occupying this testing designated position:	
Name of each employee:	
1.	6.
2.	7.
3.	8.
4.	9.
5.	10.
"Drug impact statement" describing the duties of each testing designated position:	
Risks of harm arising from illegal drug use by an employee occupying that position:	
Other comments:	
Name of person completing form: Date:	

NOTICE TO ALL EMPLOYEES

PNT CONSULTING, LLC has instituted a

“Drug-Free Workplace Program”

After 60 days, all employees will be required to submit to drug & alcohol testing at the discretion of the PROGRAM DIRECTOR. Refusal to comply may result in TERMINATION of EMPLOYMENT.

DATE OF NOTICE: _____

NOTICE TO ALL EMPLOYEES

PNT CONSULTING, LLC enforces a
“Drug-Free Workplace Program”

which requires all designated
personnel to submit to drug & alcohol
testing at the discretion of the
PROGRAM DIRECTOR.

Refusal to comply may result in
TERMINATION of EMPLOYMENT.

NOTICE TO ALL APPLICANTS

PNT CONSULTING, LLC enforces a
“Drug-Free Workplace Program.”

This requires all designated personnel,
including new applicants, to submit to
drug & alcohol testing
at the discretion of the **PROGRAM
DIRECTOR.**

Refusal to comply may result
in being **declined employment.**

Return-to-Work Agreement

PNT CONSULTING, LLC

RETURN-TO-WORK AGREEMENT

This Return-to-Work Agreement is necessitated because:

The employee tested positive for drugs

A supervisor referred the employee to the EAP or treatment due to declining job performance

The employee has violated a work rule that could result in termination

The employer is giving the employee a "last chance" to work free of alcohol or drugs

The employee acknowledges receipt of the organization's drug and alcohol policy and agrees to comply with all provisions

The employee has voluntarily signed the Release of Information form allowing the organization to receive information from medical professionals regarding continuing care recommendations and compliance

The employee agrees to comply with all aspects of the medical professional's recommendations

The employee agrees to be subject to unannounced follow-up testing for a period of five years

The employee agrees the organization will monitor compliance by receiving updates from medical professionals regarding compliance with continuing care recommendations. The employee will maintain documentation of attendance

The employee agrees to abstain from the use of alcohol and/or other drugs except when prescribed by a physician who has been informed of the employee's difficulty with substance abuse

The employee agrees that all costs of treatment and monitoring not covered by the employee's insurance plan are the financial responsibility of the employee

If absence from work is required as part of rehabilitation, it will be regarded as family and medical leave, sick leave, vacation, personal leave, or some combination thereof, depending upon accrued leave

The employee agrees to comply with all organizational policies and procedures and understands that nothing in this agreement prohibits the organization from applying discipline for other violations

The employee understands this is his/her last chance to address his/her problem with alcohol and/or other drugs. The employee must satisfactorily meet the organization's expectations and standards. The employee understands that failure to comply fully with this agreement will result in IMMEDIATE termination

Other:

Signature of Employee

Signature of Supervisor

Signature of Union Representative

WORKPLACE SEARCH POLICY

To safeguard our employees, their property, **PNT CONSULTING, LLC** customers, company property, and to enforce the company's policies prohibiting misconduct, including theft and the unlawful use or sale of illegal drugs or alcohol, management may question employees and/or inspect any personal property or any area where the company conducts business, including any leased spaces, facilities, and/or vehicles. This includes, but is not limited to:

- Vehicles
- Brief cases
- Suitcases
- Tool boxes
- Computer bags
- Backpacks
- Lunch boxes
- Purses

brought to and from **PNT CONSULTING, LLC** offices, property, worksites, or company-sponsored functions whenever there is reasonable suspicion to believe that any company policy is being, or has been, violated.

PNT CONSULTING, LLC may provide offices, desks, vehicles, computers or computer containers, lockers, tools and other items for the use its' employees. At all times, these items remain the property of the company. These, along with any work area and/or item, may be subject to search whenever there is reasonable suspicion that a company policy is being, or has been, violated. Employees are expected to cooperate with the company's workplace searches.

Violations of this policy are subject to disciplinary action, including, in the discretion of the company, immediate termination.

Employees with questions regarding this policy should contact _____.

WHERE TO FIND HELP

National Hotlines: If you or someone you know has a problem with alcohol or other drugs, call these hotlines for free, confidential help.

Substance Abuse & Mental Health Services Administration (SAMHSA) Drug Information Treatment and Referral Hotline	(800)662-4357 (HELP)
The Center for Substance Abuse Treatment (CSAT)	(240) 276-1660
(CSAP) Workplace Help line	(800) WORKPLACE OR (800) 967-5752
Drug Abuse Hotline	(800) 378-4435
Employer Assistance Professionals Association (EAPA)	(703) 387-1000

(EAPA provides information on how to select an EAP and the value that they can provide.)

AIDS Treatment Information Service	(800) 448-0440
Al-Anon/Alateen	(800) 344-2666
Alateen/Family Groups	(800) 356-9996
Alcoholic Anonymous	(800) 315-2056
American Council on Alcoholism Help line	(800) 527-5344
800 Cocaine - (Information and Referral Hotline)	(800) COCAINE
Marijuana Hotline	(800) 766-6779
Families Anonymous	(800) 736-9805
MADD (Mothers Against Drunk Driving)	(877) 275-6233
Nar-Anon Family Group Headquarters	(310) 534-8188
Nar-Anon	(800) 477-6921
Narcotics Anonymous	(818) 773-9999
National Council on Alcoholism and Drug Dependency	(800) NCA-CALL
Parents Resource Institute for Drug-Free Education (PRIDE)	(800) 541-7946
Partnership for a Drug-Free America	(855) DRUGFREE (378-4373)

Local Resources: Look in your local telephone book for these numbers:

- Alcoholics Anonymous
- Alateen (for children of the user)
- Al-Anon (for family members and friends)
- Adult Children of Alcoholics (ACOA's)
- Narcotics Anonymous
- Nar-Anon (for family members and friends)
- Drug Treatment Center
- Cancer Society
- Lung Association
- County or State Addiction or Mental Health Agency
- County/Victim/Mental Health Hotline

Drug-Free Workplace Program Statistical Information

For PNT CONSULTING, LLC

The Drug Program Coordinator shall collect and compile anonymous statistical data for Program performance reporting.

The following information is compiled for the policy year
beginning on: _____ and ending on: _____

Type of Test Administered	Verified Positive Test Results				Negative Test Results			
Quarters	1	2	3	4	1	2	3	4
<i>Random tests</i>								
<i>Reasonable suspicion tests</i>								
<i>Post-accident or unsafe practice tests</i>								
<i>Follow-up tests</i>								
<i>Applicant tests</i>								
Tally totals for each category								Quarters
<i>Voluntary drug counseling referrals</i>								
<i>Involuntary drug counseling referrals</i>								
<i>Terminations or denial of employment offers resulting from refusal to submit to testing</i>								
<i>Terminations of employment offers resulting from alteration of specimens</i>								
<i>Terminations or denial of employment offers resulting from failure to complete a drug abuse counseling program</i>								
<i>Employees who successfully complete EAP</i>								
Other:								
Comments:								
Log maintained and completed by:								Date
<i>This data, along with other pertinent information, will be compiled for inclusion in the company's Program Performance Review and, if applicable, submission to the Workers' Compensation insurance carrier for premium discount.</i>								

PROGRAM MAINTENANCE

Your company has a Drug-Free Workplace Program (DFWP) in place, designed to help ensure a safe and healthy workplace. The benefits of a DFWP include financial benefits—increased productivity and reduced losses—but also include improved employee and customer satisfaction.

SUSTAINING THE PROGRAM

A successful DFWP is an ongoing and evolving one. Sustaining the program means integrating it into the workplace culture and environment. Keeping the program effective and responsive to change involves several steps:

- Ensure good communication. Effective ways to do this include written materials, meetings, question-and-answer sessions, and suggestion boxes. Employers who are successful at this know it's important to repeat the message periodically
- Conduct ongoing reviews and evaluations of your program's results. Keep track of how the program works on a day-to-day basis, invite feedback, and revise the program when necessary to meet the specific needs of the workplace
- Evaluate your performance against specific goals. If, for example, a program goal is to lower employee absenteeism, compare your employee absenteeism data against the information you collected before the program started, so you can measure the results
- Other types of data you might want to use include tardiness, health care benefit utilization, workers' compensation claims, theft, accidents, and turnover

COMPANY CHANGES

Begin the review of your company's DFWP by asking some simple questions:

- Have there been any changes in ownership or key personnel?
- Has there been a change in the number of employees?
- Have there been any changes in where the company is conducting business (relocation, new, or different sites)?
- Are there any changes to the parties responsible for managing the DFWP?

If the answer to any of these questions is yes, then your program may need revision.

REVIEW PROCESS

Take some time to establish a plan to evaluate your program on a regular basis (perhaps annually) and to assess the cost/benefits of continuing your DFWP.

Pay attention to how it works on a daily basis, invite feedback, and revise it as necessary to meet the needs of your workplace. Evaluate specific metrics. For example, if your program's goals was to lower employee absenteeism, tardiness, health care benefit utilization, workers' compensation claims, theft, accidents, and turnover, compare your latest data to the records collected to establish your baseline. Have there been any improvements? Also, reassess employee morale.

SECTION THREE - ADMINISTRATION

Determining the success of your program will depend on your original goals. Revisit your original goals. Ask employees and supervisors to provide feedback. Talk to employees and supervisors about their perceptions of the impact of the program. Cost savings may take some time to accumulate, but improved employee morale may be evident immediately.

Use the results to modify your program. Determine the steps needed in the next year to reach your program goals. Consider developing a committee of employees from all levels of the workforce to assist in both the ongoing evaluation and the implementation of program changes.

NEEDS ASSESSMENT

Just as when the program was being developed, you'll want to perform a needs assessment. You should begin by examining the data from your initial assessment to identify changes. Look specifically at the following items:

- Do you have any government contract obligations that may require modifying the DFWP?
- Have there been any changes in the DFWP designated responsible parties' jobs or personnel?

TESTING POLICY CHANGES

Over time, due to a number of factors, it may be necessary to revise your drug testing or search policies. The items you should consider when reviewing your policy are:

- Changes in your business
- Environmental or workforce changes
- New or revised laws or regulations
- Changes in the types of substances abused that require new or different testing

Based on any testing data you may have, and feedback gathered from employees, you might want to re-examine your testing conditions and/or search decisions.

EAP EXPANSION

When you created your DFWP, the EAP you defined may well have been a simple referral program. Now, based on employee feedback and the data you've collected, it may be time to consider enhancing your EAP. There are a number of options to examine when deciding which kind of EAP might work best for your company's needs.

If you decide to offer an enhanced assistance program, it's important to examine the type, cost, and level of services offered by various providers. Obtain as much information as you can, and weigh the costs against the expected return on investment.

MEDICAL MARIJUANA

Companies that must comply with the Drug Free Workplace Act are required to follow the Federal laws regardless of any statutes that may exist at the State or local level.

As of this writing, 23 states and the District of Columbia authorize the use of medical marijuana. SAMHSA has established cutoff limits for workplace testing of marijuana in urine samples for both initial and confirmatory tests.

There are no rulings by any court(s) to date that require employers to tolerate or condone the use of medical marijuana in the workplace.

RECREATIONAL MARIJUANA

A number of states have approved, or are considering the approval of, the use of recreational marijuana. It is important to remember that the legal use of recreational marijuana does not justify or allow employees to be under the influence of marijuana at the workplace. It is not clear at this point how the SAMHSA cut-off limits will apply to recreational use.

SECTION THREE - ADMINISTRATION

DFWP COMPONENTS

The following information explains the parts of your DFWP, and is provided as reference material.

STATEMENT OF PURPOSE

The first section of your policy should clearly state its purpose and goals. Your drug-free workplace policy, which serves as the foundation for your DFWP, should accomplish two things:

- Send a clear message that use of alcohol and drugs in the workplace is prohibited
- Encourage employees to voluntarily seek help with alcohol and drug problems

GOALS

The statement of purpose should contain the company's goals for the workplace policy and its definition of substance abuse. Some organizations may want the policy to have a very narrow goal, such as meeting the minimum requirements of a law, while others may prefer broader goals that go beyond minimum requirements.

- It's important to base the policy on defensible objectives such as:
 - Health and safety of employees, customers and the public
 - Protection of employer assets from theft and destruction
 - Protection of trade secrets
 - Maintenance of product quality and integrity
 - Compliance with applicable Federal and State regulations
- You should also pay close attention to the following legally sensitive areas:
 - Safeguarding employees' confidentiality
 - Communicating the policy to all employees
 - Establishing procedures to thoroughly investigate alleged violations
 - Providing due process and ample opportunity for employees to answer allegations
 - Ensuring quality control of the drug-testing process, including confirmation of positive tests if testing is used
 - Conforming to union contracts
 - Conforming to applicable Federal and State laws

COVERED WORKERS

This section of your policy identifies who will be subject to the requirements of the policy. It's important to consider the selections here to avoid the perception of singling out particular segments of the workforce. Your choices can be extensive, limited to safety and security sensitive positions, or you can choose not to test at all.

Employees in security or safety sensitive positions, or other designated employees are those identified as:

- Employees with keys and passwords to facilities and equipment who can pose an intentional or unintentional threat. Drug or alcohol use by personnel who handle confidential records and fiduciary or proprietary information could also pose a significant danger to company security and the confidentiality of corporate and individual records
- Key personnel, including officers of the company who are authorized to make legally binding contracts or commitments for the organization, and others who perform essential functions, maintain communication and computer systems, etc.
- Employees having access to classified company information or who may be granted access to classified company information based on a determination of trustworthiness by the company president
- Other positions the company president determines that involve company security, the protection of life and property, public health or safety, or other functions requiring a high degree of trust and confidence

You should also consider accident and absentee data, this size of the workforce, and the potential testing and/or assistance cost when deciding to whom the policy applies.

APPLICABILITY

WHEN YOUR POLICY WILL APPLY

It's important to set a clear and consistent policy regarding the use of alcohol and drugs. Determining exactly when the policy applies requires careful consideration of what constitutes "at work" or "on duty". It also requires that you consider whether use before work could have a negative impact on safety. Some employers adhere to the philosophy that off-duty use is a problem if it affects the employee's performance. Other employers take a "hands-off" approach.

You also should examine the policies surrounding your organization's sponsorship of any activities that involve alcohol and establish clear guidelines. Some companies require that the serving or consuming of alcoholic beverages at organization-sponsored events, whether on or off the premises, must have prior formal management approval.

PROHIBITED BEHAVIOR

WHAT BEHAVIOR IS PROHIBITED?

The statement included in your policy is the standard prohibition that's included in most company's policies. In addition, you may also choose to include the abuse of prescription and over-the-counter medications in your policy.

Because medications can affect an employee's ability to make decisions, exercise good judgment, and operate equipment, you may have a legitimate interest in addressing the use of both prescription and over-the-counter medications in your DFWP.

It's not recommended that you implement a blanket policy requiring all employees to disclose prescription drug use for legitimate medical purposes. The Americans with Disabilities Act and the Rehabilitation Act permits an employer to ask disability-related questions only if they are job related and consistent with business necessity.

However, employers may want to consider incorporating language regarding prescription and over-the-counter drug use by employees who perform jobs that directly affect public safety and health.

Because important privacy interests and non-discrimination protections must be balanced with the need to address workplace drug use, employers are strongly encouraged to consult with an attorney specializing in employment law before deciding to cover prescription and over-the-counter drug use in their drug-free workplace policy.

CONFIDENTIALITY

Confidentiality is a crucial component of your drug-free workplace. Employees often are reluctant to discuss problems with alcohol and/or drugs due to the stigma attached to the illnesses and the denial and minimization that are part of the problem. If employees feel that their confidentiality won't be protected, they are often more reluctant to seek help.

NOTIFICATION OF DRUG-RELATED CONVICTIONS (OPTIONAL)

Any employee who is convicted of a criminal drug violation in the workplace must notify the organization in writing within five calendar days of the conviction. The organization will take appropriate action within 30 days of notification. Federal contracting agencies will be notified when appropriate.

Note: Companies having contracts or grants covered by the Drug-Free Workplace Act should include this statement to cover those employees to which the act applies.

PROPERTY SEARCHES (*OPTIONAL*)

WILL YOUR DRUG-FREE WORKPLACE POLICY INCLUDE SEARCHES?

The DFWA **DOES NOT** require employers to perform searches. In addition, many states and some cities have legislation prohibiting or limiting searches. Therefore, **please seek legal consultation as to the limitations in your location**. If searches are to be a part of your program, it will be necessary to set clear guidelines in a separate document and train all supervisory and/or security personnel.

DRUG TESTING (*OPTIONAL*)

WILL YOUR PROGRAM INCLUDE DRUG TESTING?

The majority of employers across the United States are **NOT** required to drug test and many state and local governments have statutes that limit or prohibit workplace testing, unless required by state or Federal regulations for certain jobs. In addition, drug testing is **NOT** required under the DFWA. On the other hand, most private employers have the right to test for a wide variety of substances. Before including drug testing in your DFWP, It's important to familiarize yourself with the various state and Federal regulations that may apply to your organization.

While private employers are not required to follow SAMHSA guidelines, doing so will help you stay on safe legal ground. As a result, many employers choose to follow them.

Current laws in the private sector generally permit non-union companies to require applicants and/or employees to take drug tests. In unionized workforces, the implementation of testing programs must be negotiated. Even when testing is required by Federal regulations, certain aspects of how the policy is implemented must be agreed upon through collective bargaining.

If drug testing is to be a part of your program, you'll need to set clear procedures in a separate drug testing policy. The drug testing policy must be distributed to all employees and all supervisory and/or security personnel will need to be trained on proper testing procedures.

TESTING LABS

If you include drug testing in your policy, you will need to locate a certified testing facility near your workplace(s) and contract with them for sample collection and processing.

A list of certified testing facilities can found on the SAMHSA website at:

<http://www.samhsa.gov/workplace/lab-list>

Decide whether you'll have a trained collector come to your office to collect specimens, or send employees to the certified laboratory (assuming the laboratory is located within a reasonable distance of the workplace) to have their specimens collected.

TESTING COSTS

The cost of testing can vary dramatically by region, lab contract, the type of tests, and the number of employees being tested. It's recommended that you research the certified facilities in your area for cost information.

NOTIFICATION

The Drug-Free Workplace Act requires you to inform all employees of your creation and implementation of the DFWP 30-to-60 days before the testing program goes into effect. Employees must be notified in writing and notices posted in the workplace.

In order to define your drug-testing program and safeguard the needs of the employer with the rights of employees, you'll need to address the following questions:

- What safeguards will be built into the testing program?
- When will testing be performed?
- What substances will be detected?
- How will testing be conducted?
- What will the consequences be?
- What assistance will be offered? Where?

DRUG-TESTING SAFEGUARDS

Drug-testing information is sensitive and confidential. Here are several steps to help you make sure this information is handled properly:

- Collect samples in a private and unobtrusive manner
- Strictly limit access to drug-testing results to those who need the information to make safety and personnel decisions
- Keep drug-testing information, including test results, in files separate from the employee's personnel files
- Discuss positive test results and consequences with the employee in private

WHEN DRUG TESTING WILL BE CONDUCTED?

The first things employers need to decide if they are going to drug test are when and why tests will be conducted. This can be at any or all of the following:

- Pre-employment: Requires passing the testing before hire
- Pre-duty: Before starting work at the start of a job
- Periodic: This is usually done annually when employees are required to take an annual physical
- Random: Periodic testing of randomly selected employees
- Post-accident: Following any accident, injury, or near injury
- Reasonable suspicion: If an employee is suspected of being under the influence of drugs or alcohol
- Return-to-duty: After completion of abuse treatment, before returning to work
- Follow-up: Periodic testing after returning to work from treatment

WHAT SUBSTANCES WILL BE TESTED FOR?

Deciding what substances will be tested for when implementing drug testing is crucial. Many companies approach this by choosing to test for those substances tested for in Federal drug-testing programs referred to as the SAMHSA Five: amphetamines, cannabinoids (THC), cocaine, opiates, and phencyclidine (PCP).

The "SAMHSA-5" are considered "illegal" for the purposes of Federal drug-testing programs. If a drug laboratory is certified by SAMHSA, that certification applies to testing for these drugs only. For the purposes of its regulations, DOT requires testing for alcohol as well as the SAMHSA Five, and protocols for performing breathalyzers have been established. Non-regulated private employers have the option to test for other drugs, but the tests may be more vulnerable to legal challenge. This is the main reason many employers follow the Federal government model.

When deciding what substances to test for, employers also need to be aware of cut-off levels, which will need to be set prior to actually starting testing. Cut-off levels are the established levels used to determine a positive drug test result. There are two levels; one for initial tests and a second lower limit used for confirmatory tests. SAMHSA has established the limits for the drugs identified as the SAMHSA-Five. If your company wishes to test for other substances, you should discuss these with the laboratory you contract for testing.

TESTING METHODS AVAILABLE

There are a number of bodily specimens that can be tested to detect evidence of recent drug use. Although some state laws dictate which types of tests can be used, a number of options are technologically feasible. Urine is by far the most commonly used specimen for illicit drugs, and breath is the most common for alcohol. Other types of tests available consist of:

Blood: A blood test measures the actual amount of alcohol or other drugs in the blood at the time of the test. The major drawbacks of conducting blood tests are; they are invasive, and there is a very short detection period, as most drugs are quickly cleared from the blood and deposited into the urine.

Hair: Analysis of hair provides a much longer “testing window”, giving a more complete drug-use history going back as far as 90 days. Like urine testing however, hair testing doesn't provide evidence of current impairment, but only past drug use. Hair testing cannot be used to detect for alcohol use. Hair testing is the least invasive form of drug testing and therefore privacy issues are decreased.

Oral Fluids: Saliva, or oral fluids, collected from the mouth can be used to detect traces of drugs and alcohol. Oral fluids are easy to collect (a swab of the inner cheek is the most common collection method), harder to adulterate or substitute, and may be better at detecting specific drugs such as marijuana and cocaine. Because drugs don't remain in oral fluids as long as they do in urine, this method is time critical, which can present testing problems.

Sweat: A skin patch that measures drugs in sweat is applied to the skin and worn for some length of time. A gas-permeable membrane on the patch protects the tested area from dirt and other contaminants while collecting the sample. Although relatively easy to administer, this method is not widely used in workplaces.

CONFIDENTIALITY

A statement ensuring that information regarding drug testing will be kept confidential, follow SAMHSA guidelines, and will be maintained in separate confidential records.

PRESCRIPTION AND OVER-THE-COUNTER DRUG USE

If your DFWP will include limitations on the use of prescription and over-the-counter drugs, a statement defining those limitations and requirements must be included in the policy.

This statement could include any or all of the following:

- Prescription and over-the-counter drugs are not prohibited when taken in standard dosage and/or according to a physician's prescription
- Any employee taking prescribed or over-the-counter medications will be responsible for consulting the prescribing physician and/or pharmacist to determine whether the medication may interfere with safe performance of his/her job
- If the use of a medication could compromise the safety of the employee, fellow employees or the public, it is the employee's responsibility to use appropriate personnel procedures (e.g., call in sick, use leave, request change of duty, notify supervisor, notify company doctor) to avoid unsafe workplace practices
- The illegal or unauthorized use of prescription drugs is prohibited
- It is a violation of our drug-free workplace policy to intentionally misuse and/or abuse prescription medications. Appropriate disciplinary action will be taken if job performance deterioration and/or other accidents occur

CONSEQUENCES

The consequences of violating a drug-free workplace policy can range widely. Ideally, your program is designed to encourage those who use drugs or abuse alcohol to get help before it becomes a problem. Employees who have a problem with alcohol and drugs may have special protections under the ADA as well as under the Rehabilitation Act of 1973. They also may be eligible for Family and Medical Leave Act (FMLA) benefits. It's important to be aware of these regulations when determining consequences. Employers are encouraged to design a DFWP that deters drug and alcohol use and encourages rehabilitation.

RETURN TO WORK

A Return-to-Work Agreement (RTWA) is a written document that defines the expectations the employer and the employee assistance/medical professional have of an employee who has completed mandated treatment for alcohol and/or drug problems. It also sets the consequences if the expectations aren't met. This agreement should be used if an employee has violated the drug-free workplace policy and has been provided the opportunity to participate in rehabilitation as a condition of continued or re-employment.

ASSISTANCE

A drug-free workplace policy should encourage employees to seek assistance with alcohol and drug problems. Assistance can cover a broad range, from what's required by the ADA, the Rehabilitation Act of 1973, and FMLA to rehabilitation and reintegration into the workplace.

You should examine the insurance benefits offered by your company for the treatment of alcohol and drug problems when deciding the level and type of assistance to offer. It's recommended the benefits cover the full range of treatment options to ensure the most cost-effective use of the benefit dollar.

CONFIDENTIALITY

Confidentiality is a crucial component of your drug-free workplace. Employees often are reluctant to discuss problems with alcohol and/or drugs due to the stigma attached to the illnesses and the denial and minimization that are part of the problem. If employees feel that their confidentiality won't be protected, they are often more reluctant to seek help.

RESPONSIBILITY

It's common to include a summary section that covers the expectations of both employees and management in supporting a drug-free workplace.

Your policy should identify the expectations your company has for both employees and supervisors. In order to reinforce your DFWP, and maintain its visibility, it's a good idea to encourage employee involvement.

COMMUNICATION

How will your policy be communicated to employees?

A DFWP will not be successful unless all employees know it exists and understand it. To ensure this occurs there are a number of things your company must do.

Written copies of the DFWP should be given to all employees

Provide at least two hours of training per year regarding the hazards of drug and alcohol use, the consequences of workplace abuse, and the assistance available

Supervisors must be trained to understand the policy and their roles and responsibilities in enforcing it

Reinforcement of the DFWP is important either through meetings, flyers, posters, or other media that's effective for your workforce

NOTICES AND FORMS

There are certain documents and postings required when establishing a DFWP. Section two of this manual contains copies of common forms you'll need or want to have for your program.

These are your form master copies; be sure to make sufficient copies.

The information that follows provides you with some basic information regarding these forms

General Notice

A letter from the company president announcing the creation of a DFWP and a “General Notice” announcing the testing program will be provided to all employees at least sixty (60) days prior to the implementation date of the DFWP. The notices must explain:

- Purpose of the Drug-Free Workplace Program
- DFWP includes both voluntary and mandatory testing
- Those who hold positions selected for random testing will also receive an individual notice, prior to the commencement of testing, indicating their position has been designated a Testing-Designated Position
- Availability and procedures necessary to obtain counseling and rehabilitation through the EAP
- Circumstances under which testing may occur
- Employees will be given opportunity to provide documentation of lawful use of an otherwise illegal drug

The laboratory assessment is a series of tests which are highly accurate and reliable, and that, as an added safeguard, laboratory results are reviewed by the Medical Review Officer

Positive test results verified by the Medical Review Officer may only be disclosed to the employee, the appropriate EAP administrator, the appropriate management officials necessary to process an adverse action against the employee, or a court of law

All medical and rehabilitation records in an EAP will be deemed confidential patient records and may not be disclosed without the prior written consent of the patient, an authorizing court order, or otherwise as permitted by Federal law

An employee will have the opportunity to voluntarily admit to being a user of illegal drugs, and to receive counseling or rehabilitation, and not receive any disciplinary action if admission comes prior to a positive drug test result

Individual Notice

In addition to the information provided in the general notice, an individual notice will be distributed to all employees in Testing-Designated Positions explaining:

- The employee’s position has been designated a Testing-Designated Position
- The employee will be subject to random testing no sooner than 60 days following the notice

Signed Acknowledgement

Each employee in a Testing Designated Position shall be asked to acknowledge in writing the employee has received and read the notice. The notice states that the employee's position has been designated for random drug testing, and refusal to submit to testing will result in initiation of disciplinary action, up to and including dismissal.

If the employee refuses to sign the acknowledgement, the employee's supervisor shall note on the acknowledgement form that the employee received the notice. The Drug Program Director will centrally collect this acknowledgement, which is advisory only, for easy retrieval. An employee's failure to sign the notice shall not preclude testing that employee, or otherwise affect the implementation of this Program since the general 60-day notice will previously have notified all Company employees of the requirement to be drug-free.

SECTION FOUR - REFERENCE

TRAINING MATERIALS

This section contains four documents that provide training materials in two categories, Employee training and Supervisor training. Each category consists of two documents: an Instructors' guide and a Student guide.

The Instructors guides include training delivery information and highlighted answer keys for the quizzes and final exam. This material can be used to meet the training requirement defined in the Drug Free Workplace Act.

You can use some or all of the material provided as well as other topics you may wish to acquire or develop on your own,

**EMPLOYEE TRAINING
INSTRUCTOR GUIDE**

INSTRUCTIONS

Training Instructions

Before training and certifying your students, you should familiarize yourself with the content and structure of this program. This will make the training process easier to conduct. The purpose of this kit is twofold: it helps in the process of training your students, and serves as a “train the trainer” document.

As an instructor, you should be familiar with the health aspects associated with Drug Free Workplace Programs and the policies your company has implemented. If you’re not already familiar with the subject, this program will take you through the information.

Course Structure

This program is divided into two parts:

Part One provides an introduction and overview of the components of a Drug Free Workplace Program (DFWP), and is designed to inform employees of what the program is, and how it works.

Part Two of this training consists of a series of sessions that can be delivered separately. These will educate students on the hazards of drug and alcohol abuse, and provide information of the signs, symptoms, and effects of frequently abused substances.

It is recommended that you familiarize yourself with this material and have a thorough understanding of your company’s DFWP before beginning the training process for employees.

Classroom Training

Classroom training in this case is defined as both traditional, formal training held for multiple students in a room, but also as individual training available to your employees through interactive training software on the CD provided with this program.

To train an individual employee, simply have them use a computer to access the interactive training program on the CD and follow the instructions.

To train more than one employee and conduct formal classroom-style training, follow these steps:

1. In advance of the class, access the training kit CD on your computer and print copies of the training manual, student handbook, and tests required for your class participants.
2. Attach a projector or large monitor to your computer that will allow all participants to see the presentation in a classroom environment.
3. Conduct training following the steps in the interactive program. Reference printed materials as needed. Encourage participants to take notes and follow along in their student handbooks.

If computer access on the job is limited or unavailable, use the printed training manuals and student handbooks to lead your own training session. This documentation provides you with everything you need to deliver the classroom training.

EVALUATION

Once you feel students are ready, begin the evaluation phase. In this phase, some of the topics to evaluate them on are:

- The components of the company Drug Free Workplace Program
- The company policies regarding substance abuse in the workplace and the consequences for violating them
- The type of Employee Assistance Program the company offers and how to use it
- How to recognize the signs of substance abuse, and the procedures to address them

Your job will be to assess their performance and knowledge and decide whether they understand and can follow the company's policies.

Refresher Training and Evaluation

Refresher training, and an evaluation of the effectiveness of initial training, must be conducted in the following situations to ensure the employee has the knowledge and skills needed to follow the DFWP requirements.

- Employee has been observed not adhering to the DFWP policies
- Employee has been involved in an accident or near-miss incident
- Records indicate an annual refresher is due
- Changes in procedures or policies occur

Avoiding Duplication of Training

If an employee has previously received training on a topic covered in this program and a competent person has determined the training is adequate, additional training can be waived.

Certification

The employer will certify that each employee has been trained and evaluated on the DFWP. The certification will include the name of the employee, the date of the training, the date of the evaluation, and the identity of the person(s) performing the training or evaluation.

NOTE:

This training program focuses on general aspects of the company's' DFWP. If an employee's position includes supervision or DFWP responsibilities, additional training will be required.

PART ONE: DFWP TRAINING

INTRODUCTION

This training program is designed to tell you about Drug Free Workplace Programs, or DFWP, and how it affects you.

This program is divided into two parts. In part one, we'll look at the components of a DFWP, and how it works. Part two of this training provides information about the substances that are most commonly abused, and how to recognize the signs and symptoms of abuse.

The information in part two looks at the different types of substances that are abused, and can be completed separately.

Alcohol and drug abuse in today's workplace has reached epidemic proportions. It's widespread, touching every industry at every level, and it won't go away on its own.

More than one in ten workers have some kind of a drinking problem, and almost a third of those use illegal drugs.

The Center for Disease Control (CDC) estimated the loss in productivity, health care costs, and property damage at over \$200 billion.

The question you're tempted to ask yourself is "If it's not me, why do I care?"

The reason you should care is that it's not just someone else's problem; it could become yours as well. People who get drunk or high at work aren't just a threat to themselves; they're a threat to you too.

The toll on human life is equally shocking. Users often lose their jobs, families, health, and lives to the disease of addiction.

The topics we'll cover in this program are:

- What is a Drug Free Workplace Program
- Requirements, responsibilities, and rights
- The elements of the program
- How the DFWP is implemented
- Understanding drug testing
- Recognizing the signs and symptoms of abuse
- Prevention and Treatment

It's important to pay attention to the information on each of these topics. You'll be required to take a final exam with questions related to these topics at the end of the program.

GENERAL INFORMATION

What is a Drug Free Workplace Program?

Substance abuse is a serious problem in the workplace. The National Institute on Drug Abuse (NIDA) reports that approximately 75 percent of all illegal drug users are employed either full or part time.

Workers who use alcohol and other drugs can affect everyone in the workplace. Studies show that substance abusers:

- Are far less productive
- Miss more workdays
- Are more likely to injure themselves or someone else
- File more Workers' Compensation claims

In 1988, congress passed the Drug Free Workplace Act. Businesses that perform work for the federal government (contracts and grants) are required to have Drug Free Workplace programs in effect.

The transportation industry has established additional policies on drug and alcohol testing to ensure workers who operate aircraft, trains, trucks, and buses do so in a safe and responsible manner. In addition, the Nuclear Regulatory Commission (NRC), and The Pipeline and Hazardous Materials Safety Administration (PHMSA) require companies to implement drug and alcohol testing programs in the interest of public safety.

Many other companies, although not required by law, have or are implementing their own DFWP in order to protect the health and safety of their employees.

REQUIREMENTS

OSHA requires that all employers provide a safe working environment for their employees. Implementing a DFWP will improve safety, promote employee health, and reduce operating expenses.

The Drug-Free Workplace Act (DFWA) requires businesses with Federal grants and recipients of Federal contracts of \$100,000 or more to comply with the following:

- Employers must have a written policy that explains what's prohibited, and the consequences of violating the policy
- Employees must read and agree in writing to the policy as a condition of employment on the project
- Employers must educate employees about alcohol and drug abuse and addiction, the employer's policy, and available help, including counseling and other assistance
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within five days after such conviction
- Employers must disclose that conviction to the Federal agency with which the employer has a grant or contract, within ten days after receiving notice from the employee or others

The Americans with Disabilities Act (ADA) prohibits discrimination against qualified people with disabilities and limits an employer's ability to inquire into an employee's or job applicant's medical history. It does not prohibit drug testing, and doesn't bar employers from prohibiting alcohol abuse or illegal drug use in the workplace.

According to the ADA, an employer can't discriminate based on these characteristics:

- Illegal substance abusers and alcoholics who have successfully completed a rehabilitation program
- Those who are participating in a supervised rehabilitation program
- Those who, based on hearsay only, are believed to be an illegal drug user

Many states and municipalities have specific drug-free workplace regulations that define when and how employees can be tested for illegal drugs.

COMPANY RESPONSIBILITIES

When implementing a DFWP, the company must develop a written policy that identifies what's prohibited, and the consequences of violating the policy. This policy must be provided to all employees and prospective employees.

The company must:

- Explain the benefits and procedures of the DFWP to all employees
- Communicate the potential risks drug and alcohol abuse poses to the Company
- Who is covered by the policy?
- When the policy applies
- If you are required to notify the Company of drug-related convictions that occur in the workplace
- If the program includes drug testing and/or personal property searches
- Define if there are Return-to-Work Agreements
- How employee confidentiality will be protected
- Who is responsible for enforcing the policy?
- The type of assistance programs available
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately

EMPLOYEE RESPONSIBILITIES

In order to support these goals, all employees are required to:

- Read the DFWP policy provided
- Sign and return the required forms
- Understand the terms of the policy and the consequences for violating it
- Learn the signs and symptoms associated with drug and alcohol abuse
- Know what assistance is available and how to benefit from it
- Know who to contact if you have questions
- Refrain from any drug or alcohol use at work
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately

WHY HAVE A DFWP?

A Drug-Free Workplace Program accomplishes two major things: it sends a clear message that use of alcohol and drugs in the workplace is prohibited, and encourages employees who have problems with alcohol and other drugs to voluntarily seek help.

Substance abuse robs people of their good judgment, self-control, and steals their dignity. For these reasons, your employer has established a Drug-Free Workplace Program or DFWP. This program has been created to:

- Protect the health and safety of all employees, customers and the public
- Safeguard employer assets from theft and destruction
- Protect trade secrets
- Maintain product quality and company integrity and reputation
- Comply with the Drug-Free Workplace Act of 1988 or any other applicable federal, state or local laws

DRUG ABUSE COSTS

Drug and alcohol abuse in the workplace is costly, both to the company and to the employee.

Company Costs

The costs of drug and alcohol abuse in the workplace can cripple a company due to:

- Lost Productivity - Chronic Absenteeism and poor employee performance can ruin a company's bottom line
- Employee Turnover - Losing employees due to injury, illness or termination forces companies to frequently hire and train new employees, which is costly and time consuming
- Equipment and Material Losses - Companies that have workplace abuse problems often suffer losses of equipment or inventory, either due to theft or because of employee mistakes
- Worker Compensation Claims - because of increased claims resulting from injuries and accidents caused by impaired workers, companies are required to pay more in workers compensation
- Higher Insurance Bills - The cost of medical insurance for the company increases due to the increased use of medical coverage

Employee Costs

Drug and alcohol abuse costs are not just limited to the company; employees suffer as well.

Alcohol and other drugs cost money. However, the cost of the drug is only the beginning, and soon to follow are:

- Medical Bills - Medical costs increase because abusers get sick more often
- Lost Pay - Employees can suffer a loss of pay by losing their jobs to substance abuse
- Debts - Abusers often borrow to support their habit
- Legal Expenses - Legal expenses due to DUI arrests or accidents

QUIZ

1. The Drug Free Workplace Act requires all companies to have a Drug Free Workplace Program.
 - A) True
 - B) **False**
2. A DFWP is required to include drug testing.
 - A) True
 - B) **False**
3. What two things are the goals of a DFWP?
 - A) **Send a clear message that use of alcohol and drugs in the workplace is prohibited**
 - B) Justify termination of an employee
 - C) **Encourage employees who have problems with alcohol and other drugs to voluntarily seek help**
 - D) Violate employees privacy
4. A company DFWP is required to ensure an employee's privacy.
 - A) **True**
 - B) False
5. Businesses with Federal grants and recipients of Federal contracts of \$100,000 or more must have a DFWP.
 - A) **True**
 - B) False

ELEMENTS OF A DFWP

Basic Components

When implementing a DFWP, the company must clearly define the scope and limitations of the program. The company's DFWP has several required elements that are important to understand.

You will receive a written copy of the plan that defines:

- Why the plan exists
- Who the program covers - this could be all employees, or only workers who perform jobs designated as safety or security sensitive
- If the company determines that only positions affecting public safety, trade secrets, or national security will be subject to drug testing, employees performing those jobs must be notified of the requirement
- When and where the policy applies
- It may be in force only at the job site during working hours, or may include off-site locations and non-working hours such as on-call and stand-by hours
- The actions that are considered violations of the policy such as possessing, using, or selling alcohol or illegal drugs
- The DFWP may also limit the use of prescription and over the counter drugs
- The DFWP must define how the company will protect workers privacy, and identify who is responsible for managing the program

It will also explain the actions that can be taken for violating the policy

DFWP Options

There are optional elements that may be included in your company's DFWP, these include:

- Drug testing
- Property searches
- Notification
- Employee Assistance Programs
- Return to work agreements or RWTA's

Drug Testing

Except for government contract work, drug testing may or may not be required. It's important to understand the scope of what testing can involve.

The majority of employers across the United States are NOT required to drug test and many state and local governments have statutes that limit or prohibit workplace testing, unless required by state or Federal regulations.

If drug testing is included in your company's program, how it will be conducted, what tests will be performed, and who will perform the tests must be defined in the DFWP.

Current laws in the private sector generally permit non-union companies to require applicants and/or employees to take drug tests. In unionized workforces, the implementation of testing programs must be negotiated, even when testing is required by Federal regulations.

If it is part of your company's DFWP, there are things you need to know about the testing. In this section, we will examine:

- Is testing legal?
- When testing can occur
- Testing Methods
- Testing Parameters
- Testing Procedures

Is Drug Testing Legal?

In most cases and states, it's legal for an employer to test employees for drugs. No federal laws prohibit drug testing at this time; however, some states do prohibit or restrict certain types of drug testing.

When Testing Can Occur

Here are situations when your employer may ask employees to take a drug test:

- Pre-employment - To decrease the chance that a current drug user will be hired, some employers test job applicants at the time of a job offer. The job offer depends on a negative drug test result
- Reasonable Suspicion or For Cause - When an employee shows obvious signs of not being fit for duty (For Cause) or has a documented pattern of unsafe work behavior (Reasonable Suspicion), the employee may be asked to take a drug test
- Random Test - To discourage drug use among all employees, an employer may ask employees to take drug tests at random and unpredictable times
- Periodic Test - This is usually done when employees are required to take an annual physical, or can be part of a follow up program for employees after completion of a treatment program
- Post-Accident - An employer may test employees who are involved in an accident or unsafe incident to find out if alcohol or other drug use was a factor
- Post-Treatment Tests - When an employee has taken time off from work to go through an inpatient treatment program, or when an employee is participating in some form of outpatient treatment, an employer may arrange for random testing of that employee to ensure they remain sober

Testing Methods

Different types of drug testing/screening processes are available.

The most common way to test for drugs is a urine test. This involves giving a urine sample, which goes through a series of chemical tests. The results tell whether leftover traces of drugs are in your body. A urine test doesn't tell if you're under the influence of drugs at the time of the test, only that alcohol or drugs were used sometime recently.

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

There are a number of bodily specimens that can be tested for evidence of recent drug use. Although some state laws dictate the types of tests that can be used, a number of options are available. Urine is by far the most commonly used specimen for illicit drugs, and breath is the most common for alcohol.

Other types of tests available consist of:

- Blood
- Hair
- Oral fluids
- Sweat

Blood - Blood tests measure the amount of alcohol or other drugs in the blood at the time of the test. The major drawbacks of conducting blood tests are; they are invasive, and there is a very short detection period.

Hair - Analysis of hair provides a much longer "testing window", giving a more complete drug-use history going back as far as 90 days. Like urine testing however, hair testing doesn't provide evidence of current impairment, but only past drug use.

Oral Fluids - Saliva or oral fluids are easy to collect by using a swab of the inner cheek. These samples are harder to adulterate or substitute, and may be better at detecting specific drugs. There are currently no federally approved oral testing methods for marijuana.

Sweat - A skin patch that measures drugs in sweat is applied to the skin and worn for a length of time. A membrane on the patch protects the tested area from dirt and other contaminants while collecting the sample.

BREATH ALCOHOL TEST

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

All states have set an alcohol level of 0.08 percent as the definition of driving while intoxicated. The Department of Transportation Federal Motor Carrier Safety Administration has established a 0.04% alcohol level for commercial vehicle drivers and 0.01% for operators of common carriers.

Testing Parameters

Employers who require drug testing for applicants and/or employees are usually not required to follow the Substance Abuse and Mental Health Services Administration (SAMHSA) guidelines, but doing so helps to ensure the legality of testing.

The SAMHSA guideline for substance testing establishes limits for five specific categories of drugs, sometimes referred to as the “SAMHSA 5”:

- Marijuana
- Cocaine
- Opiates
- PCP
- Amphetamines

There are additional drugs beyond the “SAMHSA five” that can be included in a drug test. The decision on how extensive the testing is the company’s decision.

- Synthetic or designer drugs sometimes referred to as “party drugs” such as ketamine, ecstasy or molly
- Bath salts
- Barbiturates: tranquilizers such as phenobarbital, and seconal
- Inhalants: spray paints, paint thinners, cleaning fluids, and amyl nitrates

Although it’s a widely abused substance, alcohol is not included in the SAMHSA 5. This may be due to the specific testing requirements defined in the dot regulations. It is, however, commonly included in company drug testing programs

All of the drug categories mentioned here will be examined more closely in the second part of this program.

TESTING PROCEDURES

Drug testing must be done by a testing facility approved by SAMHSA. Test samples may be collected at the workplace, or you may be required to travel to the facility for testing. After you provide a urine sample, the bottle should not leave your sight until it is sealed with special “evidence” tape. You should sign the label on the container. You will then be asked to sign a record book stating that the sample collected was yours.

Testing Privacy

In most cases, employers ensure your privacy as you give your sample. In some cases, however, someone may need to see you give your sample. For example, if there’s reason to believe that an employee has tried to tamper with the sample, another specimen may be collected with someone of the same sex watching to ensure honesty.

Testing Accuracy

If conducted correctly using the guidelines of the Department of Health and Human Services (DHHS), drug tests are very accurate.

Chain of Custody

A chain of custody form is used to document the handling and storage of a urine specimen from the time it's collected until its disposal.

The chain of custody form is written proof of all that happens to the specimen while at the collection site and the laboratory.

Initial Screen

The first test done on a urine sample is called an initial screen. This test alone is not always accurate or reliable. If the initial screen is positive, a second test should be done.

Confirmation Test

A second confirmatory test, by gas chromatography/mass spectrometry (GC/MS), is highly accurate, and will eliminate any false positives from the initial screening. For a test result to be reported as positive, both test results must agree.

Medical Review Officer

A medical review officer (MRO) is a licensed medical doctor who has special training in the area of substance abuse.

If your drug test is positive, the MRO reviews the results, makes sure the chain of custody procedures were followed, and contacts you to make sure there are no medical or other reasons for the result.

Confidentiality

Confidentiality means that your drug test results are kept private, and that only persons who need to know will receive the drug test results. This might be the supervisor, manager, union representative, or someone in the medical or personnel department. You may be asked to sign a release form that states who will receive the test results.

A drug test is reported as positive or negative; the level of the drug(s) found is usually not reported. Confidentiality also means that drug test results won't be part of an employee's personnel file.

Refusing to Test

Employees are typically subject to the same consequences as a positive test if they:

- Refuse the screening or the test
- Adulterate or dilute the specimen
- Substitute the specimen
- That from another person or sends an imposter
- Refuses to sign the required forms
- Refuse to cooperate in the testing process in a way that prevents completion of the test

PROPERTY SEARCHES

The company can decide to require searches of work areas and/or personnel property. The DFWP can include searches of pockets and clothing, lockers, wallets and purses, briefcases and lunchboxes, desks and workstations, vehicles and equipment, and any other areas defined by the plan. Agreeing to property searches can be made a condition of employment for most private employers.

If searches are part of the company's DFWP, you'll be required to sign a consent form. If searches are permitted, they must be performed by trained supervisors or security personnel. Searches may be announced, where you are given advanced notice, or unannounced if the company decides it has reasonable cause.

NOTIFICATION OF CONVICTION

Notification of conviction is usually required as part of government contract work. It requires you and the company to notify the appropriate parties if you are convicted of a drug or alcohol related crime at the workplace.

EMPLOYEE ASSISTANCE

Employee assistance programs (EAP) are methods the company may provide to help employees deal with abuse or other personal issues. The company's DFWP should define the type of EAP the company offers. This can range from referring employees to established treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program.

It's important to know that an EAP provider is NOT a drug testing facility.

The EAP is responsible for providing counseling and assistance to employees who self-refer for treatment or whose drug tests have been verified positive and were not terminated.

An assistance program may include:

- Monitoring an employee's progress through treatment and rehabilitation
- Providing education and training to all levels of the company on types and effects of drugs, symptoms of drug use, and their impact on performance and conduct
- Explaining the relationship of the EAP to drug testing, treatment, rehabilitation, and confidentiality issues
- Ensuring the confidentiality of test results, medical, and rehabilitation records is maintained

The goal of an EAP is to assist employees who have personal problems affecting their job performance. An EAP reinforces three important ideas:

- Employees are a vital part of business and valuable members of the team
- It's better to offer employees facing personal problems assistance, instead of disciplining or firing them
- Recovering employees become productive, effective members of the workforce

EAP providers are often outside companies that offer counseling and assistance services to employees. It's important to know the type of assistance offered by your company.

Assistance programs can be separated into three basic categories:

Level One – Referral Only

These are basic programs providing employees with referrals to community resources, self-help options, and substance abuse treatment providers.

Level Two – Contract

This type of EAP involves contracting with an outside EAP provider, and uses a direct referral process.

Level Three – In House

Programs in this category offer the highest support to employees, and usually include services beyond drug and alcohol assistance as well as increased healthcare coverage.

The company should provide you with information about the assistance program. It should explain:

- Who is eligible for the program and what costs or insurance coverage is available
- What services are available from the EAP?
- Stress Management - Stress caused by work pressures, family or financial problems can affect your performance on the job and lead to substance abuse. Addressing these issues can prevent problems from worsening
- How certain drugs and alcohol can lower inhibitions and cause someone's dietary and exercise plans to run off the track and result in health problems

Employee Specific Assistance

The EAP may also provide health-related topics specifically for the workforce these may include:

- Age and gender programs
- Information on osteoporosis, and the increased risk due to substance abuse in middle-aged women
- The effects alcohol can have on the liver and colon and risks of prostate cancer in middle-aged men
- Information for younger workers on the increased risks of STD's, HIV, and aids due to drug and alcohol use

ROLES AND RESPONSIBILITIES

The information provided should:

- Define the relationship of an EAP to other organizational components, including roles and responsibilities of various personnel within the organization
- Make clear that participating in an EAP won't jeopardize future employment or advancement, but also won't protect workers from disciplinary action for continued poor job performance or rule infractions
- Identify the Medical Review Officer (MRO), and their function
- Outline procedures for supervisory referrals, voluntary referrals, and peer referrals

RETURN TO WORK AGREEMENT

A Return to Work Agreement (RTWA) is a process that may be established to allow employees who test positive for drugs or alcohol to return to work after successful completion of a treatment program.

The RTWA is a written document that defines the expectations the employer and the employee assistance/medical professional have of an employee who has completed treatment for alcohol and/or drug problems. It also sets the consequences if the expectations aren't met.

SHARED RESPONSIBILITY

A successful DFWP requires everyone's participation. Part of the company's policy will be the expectations for employees and management. It's important that all employees read and understand the company's DFWP. The more you know about the DFWP the better you'll be able to support it, and have it help protect you.

QUIZ

1. Which of the following is NOT a mandatory part of a DFWP?
 - A) Written Policy
 - B) Applicability
 - C) Enforcement
 - D) Assistance Program**
2. What government agency certifies drug testing facilities?
 - A) DOT
 - B) SAMHSA**
 - C) PMHSA
 - D) RTWA
3. What is the most common drug testing technique?
 - A) Blood
 - B) Urine**
 - C) Hair
 - D) Sweat
4. The primary function of an EAP is to conduct drug testing.
 - A) True
 - B) False**
5. An EAP may provide health-related topics specifically for the workforce.
 - A) True**
 - B) False

SUBSTANCE ABUSE

A drug-free workplace means no alcohol or drugs at work. Even painkillers and some prescription drugs can be a danger. Why is a drug-free workplace important? Because drugs keep you from doing your best on the job and the effects can be dangerous to yourself and others.

Recognizing abuse and dependency problems can be divided into two categories: do you have a problem, or does a co-worker have a problem?

Think about these 2014 Center for Disease Control facts:

- Approximately one out of every ten adults in the United States is already addicted to alcohol
- Because addiction runs in families, many children of addicts are likely to become addicted themselves
- Alcohol and other drug abuse can lead to unsafe sexual behaviors that possibly result in contracting the HIV virus or other sexually transmitted diseases (STDs)

Substance abuse can cause people to lose interest in hobbies, work, friends, and family and can cause loss of drive and motivation. Many abusers have slower reflexes, making on-the-job accidents more likely.

HAVE YOU CROSSED THE LINE?

Many people who use alcohol or other drugs think they can stop any time. However, before they know it, using drugs is a problem they can't quit. Before you say "not me," take this brief test:

Have you ever:

- Been questioned about your alcohol or other drug use?
- Used alcohol or other drugs when alone?
- Missed work because you were sick from using alcohol or drugs?
- Had trouble stopping once you started using alcohol or drugs?
- Had legal problems because of your alcohol or drug use?
- Become jumpy, shaky, cranky, nervous, or have cravings if you can't use alcohol or drugs?
- Gone into debt because of your alcohol or drug use?
- Had to use more alcohol or other drugs to get the same effect?
- Used alcohol or drugs in the morning?
- Been in the hospital because of your alcohol or drug use?
- Used alcohol or drugs at work?

If you answered "yes" to any of these questions, there may be reason for concern. It's important to notice the signs of abuse and addiction early so that you can seek help. Addiction to alcohol or other drugs is a serious disease. The longer you wait to find help, the harder it is to get better.

If you have never used them, don't start. If you think your use is causing problems, think about stopping. Get help now.

Addictions are chronic diseases. Chronic means that once you have the disease, you'll have to live with it for the rest of your life. If you think your alcohol or drug use is a problem, there are ways to get help. Some options cost money and others don't. Helping yourself is the best way to help create a drug-free workplace.

SIGNS OF CO-WORKER SUBSTANCE ABUSE

How can you spot abuse or addiction? Sometimes it's not easy. There are different patterns of abuse and addiction. A recent Department of Labor (DOL) report showed a person abusing drugs or alcohol in the workplace:

- Is five times more likely to file a workers' compensation claim
- Has twice as many unexcused absences
- Is late for work three times more often
- Requests early "quitting time" twice as frequently
- Is more likely to steal company property
- Is five times more likely to injure themselves or co-workers
- Causes 40 percent of all industrial accidents
- Is 33 percent less productive
- Exhibits unexplained mood swings and often overreacts to constructive criticism
- Is seven times more likely to have recurring financial problems and wage garnishment

Indications that a co-worker has a problem are that the co-worker who has always been a great employee—full of energy, happy, and a hard worker—is now:

- Late to work or out sick more often
- Blaming poor work performance on others
- Inattentive and forgetful
- Making and receiving a lot of personal calls
- Always tired
- Asking for help with work
- Avoiding old friends and co-workers on the job
- Been to the hospital three times over the last few months and has been reported for safety violations by the supervisor

The final and perhaps most subtle area is that of social functioning. Changes in lifestyle, a shift among friends, and a diminished ability to judge social cues are the most common.

Some people are "binge" users: they get into trouble by drinking alcohol or using drugs off and on, only on the weekends or maybe only once a week, as an escape.

Others are "maintenance" users: they use alcohol or drugs regularly, often every day, to feel "normal".

ENABLING

If someone you know shows signs of alcohol or drug abuse, you may want to help. First, you'll need to know how. The best way to help a user face an alcohol or other drug problem is to make sure you don't ignore or cover up their behaviors or mistakes resulting from the abuse or addiction.

When you cover up for someone, it's enabling. Enabling and co-dependency in the workplace include:

- You offer to take on more than your share of the work because a co-worker is "going through a rough time" and is finding it hard to get his own work done on time
- A co-worker, who you suspect is high, has caused an accident, again. You know if the boss finds out, he'll be fired. You feel sorry for him, so you cover by lying to the boss
- One of your co-workers seems to have a problem with alcohol; she's late a lot, and sometimes in the morning or after lunch she smells like alcohol. You convince yourself that it's just a stage. You don't want to get her in trouble; she has a family, and besides, she's a great worker when she shows up

CONFRONTATION

If you feel someone in your workplace has a substance abuse problem you need to tell a supervisor as soon as possible. You can do this privately or outside of work, if it makes you more comfortable. Confronting a co-worker can be frightening and potentially dangerous, if not handled properly. For that reason, unless you have been trained on confrontation techniques, it's best to leave it to professionals.

Even if you're prepared to confront someone, he/she may not be ready to listen. If an impaired co-worker threatens your safety, or you see a co-worker get high or deal drugs on the job, he or she is risking the safety and health of everyone around and you need to report it to your supervisor.

If your company has an employee assistance program (EAP), you may want to talk to an EAP counselor about how to handle the coworker's alcohol or other drug use.

COMMONLY ABUSED DRUGS

For decades, alcohol topped the list as the drug of choice that could adversely affect an employee's health. However, the increasing use of over-the-counter medications, as well as abuse of illicit or prescription drugs, poses a widespread problem in workplaces in the United States.

According to the National Council on Alcoholism and Drug Dependence, in addition to alcohol, the most commonly abused types of drugs found in today's workplace include:

- Marijuana
- Cocaine
- Prescription Drugs
- Stimulants
- Inhalants
- Depressants
- Hallucinogens
- Designer Drugs

Marijuana

Use of marijuana may impair or reduce short-term memory and comprehension, alter sense of time, and reduce a person's ability to perform tasks requiring concentration and coordination.

Cocaine

Cocaine is widely abused and very dangerous. A smokable derivative of cocaine called crack is also used, and is considered one of the most powerfully addictive drugs on the illegal market.

Prescription Drugs

Today some of the most widely abused prescription drugs are the ones used to treat Attention Deficit Hyperactivity Disorder or ADHD, such as Adderall, Ritalin, and Vyvanse.

Stimulants

Because of the stimulating effect these drugs have, they are often abused by people who need to stay awake for long periods, or want to enhance their attentiveness and performance.

Inhalants

Varieties of substances are inhaled as gases or liquids. Many commercial products, such as spray paints, paint thinners, and cleaning fluids, are mixtures of volatile substances making it difficult to be specific about their effects.

Depressants

The term "narcotic" is given to drugs of the opiate family. Heroin and other semi-synthetic drugs such as Oxycodone and Percodan are also opium derivatives and frequently abused.

Hallucinogens

Hallucinogens such as PCP, ketamine and LSD are common hallucinogens that produce behavioral alterations that can be dangerous. Because these drugs block pain receptors, violent episodes can result in injuries to the abuser or others.

Designer Drugs

A variety of synthetic drugs sometimes referred to as "party drugs" include amyl nitrates, Ecstasy or Molly (MDMA), and Bath Salts (MDPV). These drugs produce a range of symptoms, and due to their design can be difficult to test reliably.

In part two of this training, we'll look at the signs and symptoms of each of these drug categories to help you spot potential abuse. We'll also look at the health effects of these drugs so you can better understand the impact they can have on you or a co-worker.

SUMMARY

In part two of this training we'll look at the signs and symptoms of each of these drug categories to help you spot potential abuse.

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QUIZ

1. Approximately one out of every ten adults in the United States is addicted to alcohol.
 - A) **True**
 - B) False
2. According to a Department of Labor report, what percentage of all work related accidents are due to drug or alcohol abuse?
 - A) 10
 - B) 25
 - C) **40**
 - D) 60
3. Failure to report a co-worker with a substance abuse problem is a form of what?
 - A) Friendship
 - B) **Enabling**
 - C) Avoidance
 - D) Denial
4. After alcohol, what is the most commonly abused substance in the workplace?
 - A) **Marijuana**
 - B) Opiates
 - C) Prescription drugs
 - D) Depressants
5. Stimulants are frequently abused in the workplace to improve performance.
 - A) **True**
 - B) False

SECTION 2: SUBSTANCE ABUSE TRAINING

This part of your training contains eight training sessions that can be taken individually. These sessions will familiarize you with the dangers of drug and alcohol abuse, as well as the signs, symptoms, and effects of commonly-abused substances.

It's important that you understand these items. They will allow you to recognize substance abuse in the workplace, possibly prevent injuries, and ensure workplace safety.

ALCOHOL ABUSE

In 2013, over 10,000 people were killed in alcohol-impaired traffic crashes, accounting for 31 percent of all motor vehicle fatalities. Impaired driving continues to be a serious traffic safety and public health issue for states.

Drinking alcohol, or ethanol, is the most common form of drug abuse in the world. Addiction to alcohol is known as alcoholism. Alcohol is a depressant that produces a euphoric effect. Alcohol intoxication affects the brain, causing slurred speech, clumsiness, and slowed reflexes. Excessive consumption of alcohol leads to a delayed poisoning called a hangover.

The hangover starts after the euphoric effects of alcohol have worn off, typically in the night and morning after excessive drinking. However, the blood alcohol levels can still be above the legal limits imposed for drivers and operators of other dangerous equipment.

Alcohol stimulates insulin production, which speeds up the metabolism and can result in low blood sugar, causing irritability. Drinking alcohol in excess can lead to poisoning, which can be severe, even lethal.

A blood-alcohol content of .45 percent represents the amount that would kill half of the general population. This is about six times the .08 percent level, when people are considered legally drunk. Usually vomiting and/or unconsciousness occur before someone reaches the .45 level unless they have a high tolerance or a large amount of alcohol is consumed very quickly.

A chronic heavy drinkers' tolerance to alcohol may allow them to remain conscious at levels above .4 percent, despite the serious health dangers. Chronic consumption of alcohol can lead to an addiction that affects the liver and the brain. For example, cirrhosis, or scarring of the liver, is often found in heavy drinkers.

A 2014 World Health Organization report attributes over 300,000 deaths to alcohol in the U.S. alone, and over 3 million worldwide. Contrary to popular belief, drinking alcohol doesn't kill brain cells. Instead, it damages the ends of the nerve cells that bring messages to the cell, leading to a change in brain function. Most of this damage is temporary, but the recovery process changes nerve-cell structure permanently.

Excessive consumption of alcohol has been linked to some forms of cancer. An estimated 3.6 percent of all cancer cases worldwide are related to alcohol drinking, resulting in 3.5 percent of all cancer deaths.

Signs and Symptoms

The most common signs and symptoms of alcohol impairment are:

- Odor on breath
- Lack of coordination
- Euphoria
- Talkativeness and/or slurred speech
-

Alcohol is normally detectable by a breathalyzer for four to six hours. Alcohol will remain in your blood for about twelve hours, and can be detected in urine for up to five days.

It should be noted that the results detected by delayed blood or urine tests do not provide proof of impairment, only recent use.

It's estimated that close to 15 million workers in the U.S. are heavy drinkers resulting in high costs to companies as employees who drink a lot are often absent from work, suffer from more health problems, and are at a greater risk of harming themselves and others. In addition, people under the influence of alcohol commit a large portion of various violent crimes, including child abuse, homicide, and suicide.

Studies have shown that taking advantage of EAP services have helped millions of individuals and family members affected by alcohol problems. Alcohol treatment also improves an individual's functioning, leading to increased productivity at work.

QUIZ

1. Alcohol is classified as a _____.
 - A) Stimulant
 - B) **Depressant**
 - C) Schedule one drug
 - D) None of the above
2. Death from alcohol poisoning can occur at a blood alcohol content (BAC) of _____.
 - A) .08
 - B) .20
 - C) **.45**
 - D) .80
3. A hangover is an indication of mild alcohol poisoning.
 - A) **True**
 - B) False
4. Alcohol kills brain cells.
 - A) True
 - B) **False**
5. Alcohol can be detected by a urine test for _____.
 - A) 12 hours
 - B) 24 hours
 - C) 3 days
 - D) **5 days**

IMPAIRED DRIVING

Alcohol, drugs, and driving don't mix. Any driver who operates a vehicle while impaired increases the chance of accidents, injuries, and death. Driving is serious business that requires skill and judgment, both of which are diminished through consumption of alcohol and drugs.

Depending on where you are, if you're arrested for impaired driving, you may be charged with Driving While Intoxicated (DWI), Driving Under the Influence (DUI), or both. DWI usually refers to driving while intoxicated by alcohol, while DUI is used when the driver is charged with being under the influence of alcohol or drugs.

Both charges mean the arresting officer has reason to believe the driver is too impaired to continue to drive. In some jurisdictions, you can be charged with impaired driving (or driving under the influence) even if you do not meet the blood alcohol concentration levels for legal intoxication.

All 50 states and the District of Columbia have laws that specifically target drugged drivers. Almost one-third of states have adopted the per se standard. Per se means that any detectable amount of a controlled substance, other than a medicine prescribed by a doctor in a driver's body fluids, constitutes per se evidence of a "drugged driving" violation.

If a law enforcement officer administers an alcohol concentration (AC) test for driving under the influence and it shows an alcohol concentration of 0.08 percent or more (0.04 for commercial vehicle drivers and .01 for common carrier operators), your driving privileges will be suspended immediately.

A person with an alcohol concentration of 0.15 or higher is considered guilty of an extreme DUI. You, lose driving privileges with no eligibility for probation or suspended sentence, are subject to fines, and may be jailed. You may be required to undergo screening, education, or treatment and may be ordered to perform community service, and your vehicle may be equipped with a certified ignition interlock device.

Suspension

Your driving privileges will be suspended for anywhere from 30 days to two years following a conviction, or for refusing to submit to testing. Your license may also be suspended after a review of your driving record. If your license has been suspended, it will be automatically reinstated after your period of suspension is complete. You will have to pay a reinstatement fee as well as any applicable driver responsibility fees.

Revocation

A revoked driver's license is a more serious outcome than if your license has simply been suspended. If your license has been revoked, the only way to get your license back is to go through the driver's license restoration process, which will involve mountains of paperwork and reinstatement hearings. You could be denied a license or issued a restricted license instead of receiving a regular driver's license. You'll be required to pay the appropriate application fee and a reinstatement fee, and you may be required to file a Certificate of Insurance.

Insurance

If you're convicted of impaired driving your vehicle insurance may be cancelled, or the rate greatly increased. You will be classified as a high risk driver and may be required to file SR-22, proof of insurance, forms.

Most states require SR-22 certificates to be filed for a period of 3 years, and that you remain violation-free for that time.

Driver Improvement

Each time a person is convicted or forfeits bail for a moving traffic violation, points are assessed against their permanent driving record. If you accumulate too many points within a 12-month period, you may have to attend Traffic Survival School, or have your driving privilege suspended.

DUI convictions can greatly complicate a person's life. Along with the court-imposed fees, fines, and increased insurance rates, they can also impede one's ability to earn a living by not being able to drive.

Remember to use good sense and judgment when operating motor vehicles and if you're drinking or using controlled substances, don't drive!

QUIZ

1. If you are arrested for driving under the influence (DUI), your license will be suspended immediately.
A) **True**
B) False
2. You can be convicted of an extreme DUI if your blood alcohol content is above what level?
A) .08
B) .10
C) **.15**
D) .30
3. The driver of a commercial vehicle can be arrested for having a BAC of .04.
A) **True**
B) False
4. You can be charged with drugged driving for having any amount of a controlled substance in your body.
A) **True**
B) False
5. A driver's license suspension is more serious than a revocation.
A) True
B) **False**

MARIJUANA ABUSE

Marijuana, or cannabis, is the most frequently used illicit drug abused in the United States and worldwide. It's second only to alcohol as the most common cause seen in cases of driving under the influence of drugs. It's also the drug most often detected in workplace drug-testing programs.

The main active ingredient in marijuana is THC. The THC content in marijuana averaged 3% in the 1980s, but by 2012, it had increased to 12%. The US government classifies marijuana as a schedule one drug. A schedule one is defined as a drug with no currently accepted medical use and a high potential for abuse, and those who use or possess it are subject to prosecution.

Workers covered by federal drug testing programs are prohibited from using marijuana at any time. In addition, federal law allows employers in every state to prohibit employees from working while under the influence of marijuana and employers are permitted to discipline employees who violate this prohibition up to and including termination.

In 2009, the US Department of Justice introduced a change in its marijuana enforcement policy, issuing a memorandum encouraging federal prosecutors not to prosecute those who distribute marijuana for medical purposes in states where medical marijuana is legal.

However, as more states approve the recreational use of marijuana, the Department of Justice issued another memorandum reinforcing its right to contest state marijuana laws. This inconsistency about use, regulation, and legislation leaves employers in an unclear position of trying to maintain compliance with evolving legislation, while continuing to provide a safe workplace.

The majority of private employers across the U.S. are not required to drug test, and many state and local governments have statutes that limit or prohibit workplace testing unless required by state or federal regulations due to the nature of the job.

The US Department of Transportation (DOT), in its Drug and Alcohol Testing Regulations, state that marijuana use remains unacceptable for any safety-sensitive employee subject to drug testing under DOT regulations. This safety-sensitive category includes pilots, bus and truck drivers, locomotive engineers, subway operators, aircraft maintenance personnel, fire-armed security transit personnel, and ship captains, among others.

Federal agencies conducting drug testing must follow standardized procedures established by the Substance Abuse and Mental Health Services Administration (SAMHSA). Private non-union employers who require drug testing for applicants and/or employees are usually not required to follow SAMHSA's guidelines, but doing so helps to ensure the legality of testing. In unionized workforces, the implementation of testing programs must be negotiated through collective bargaining, even when federal regulations require testing.

The federal Drug-Free Workplace Act (DFWA), passed in 1988, requires all federal grantees to provide drug-free workplaces as a condition of receiving a federal contract of more than \$100,000 or a federal grant of any value. Employees who work for federal contractors may be subject to discipline, including termination if marijuana use is proven, regardless of whether its use is permitted by state law.

Marijuana Effects

Studies of marijuana's mental effects show the drug can:

- Impair or reduce short-term memory
- Alter sense of time
- Reduce one's ability to do things requiring concentration, swift reactions, and coordination, such as driving a car or operating machinery

Substances sold as THC on the street often turn out to be something else, such as PCP. When marijuana is smoked, the body absorbs the THC. When the body attempts to rid itself of the THC, it transforms it into metabolites. The effects of marijuana use last for at least 4-6 hours, long after the high is gone.

Abuse of multiple substances, such as drinking alcohol, along with using marijuana, increases the risk of accidents. Urine tests can detect THC metabolites for up to a week after people have ingested marijuana.

Using the 5 nanograms per milliliter cutoff for screening, as established by SAMHSA, takes into consideration all types of users. Given the correlation between a marijuana 4 nanogram level and a Blood Alcohol Content of approximately .04 to .05 percent, the 5 nanogram cutoff would roughly equal the current level of alcohol impairment for safety-sensitive workers under the DOT testing laws of .04 percent blood alcohol.

As a result, the 5-nanogram cutoff may be used to establish an initial presumption of impairment; however, the mere presence of this level of THC may not establish acute impairment in an individual worker. That can only be determined when a medical evaluation for impairment has been performed, and the behavior, which led to the testing is considered.

Fewer than 20 states explicitly address marijuana and driving; of these, 11 have zero tolerance for any level of THC. The consensus is that the 5 ng/ml level should be used to ensure a safe workplace.

Signs and Symptoms

Some immediate physical effects of marijuana include a faster heartbeat and pulse rate, bloodshot eyes, and a dry mouth and throat. There are no scientific indications that marijuana improves hearing, eyesight, and skin sensitivity.

A common reaction to marijuana is the "acute panic anxiety reaction". People describe this reaction as an extreme fear of losing control and paranoia, which causes panic. The symptoms usually depart within a few hours.

Long-term regular users of marijuana may become psychologically dependent. They may have a hard time limiting their use and may need larger doses of the drug to get the same effect. Users may develop social and personal problems affecting their employment.

A synthetic version of marijuana, commonly known as spice or K2, is becoming increasingly popular. “Synthetic” marijuana displays the same symptoms as marijuana, but because it’s synthetic, the effects can be more powerful and cause additional side effects. K2 products are smoked in joints or pipes, but some users make it into a tea.

Short-term effects include increased agitation, pale skin, seizures, vomiting, profuse sweating, uncontrolled spastic body movements, elevated blood pressure, heart rate, and palpitation. The onset of this drug is 3-5 minutes, and the duration of the high is 1-8 hours. In addition to physical signs of use, users may experience speech difficulties, severe paranoia, delusions, and hallucinations.

Marijuana is the second most widely abused drug after alcohol. Many people consider it less harmful than alcohol or tobacco, but like those, marijuana can be addictive and carries its own health risks. Chronic use can result in decreased mental capacity, reduced energy levels, and lung damage. The increased risks of injuries and accidents have led courts to rule that companies don’t have to tolerate medical or recreational marijuana use at the workplace, even if state law permits the use.

QUIZ

1. Marijuana is the most commonly detected drug in the workplace.
 - A) **True**
 - B) False
2. Marijuana is classified as a schedule one drug.
 - A) **True**
 - B) False
3. What government agency has established a cutoff limit for marijuana?
 - A) DOT
 - B) HHS
 - C) **SAMHSA**
 - D) OSHA
4. Synthetic marijuana (K2) is more potent than traditional marijuana, and the effects can last longer.
 - A) **True**
 - B) False
5. Which is NOT a symptom of marijuana use?
 - A) Bloodshot eyes
 - B) Dry mouth
 - C) **Improved hearing**
 - D) Slowed reflexes

DEPRESSANT ABUSE

Depressants sometimes referred to as sedatives, tranquilizers, or painkillers, fall into three categories: benzodiazepines, barbiturates, and opioids. These substances slow brain activity, making them useful for treating anxiety, sleep disorders and pain relief.

BENZODIAZEPINES

Drugs such as Valium and Xanax are sometimes prescribed to treat anxiety, acute stress, and panic attacks. The more powerful benzodiazepines, such as Halcion and ProSom, are prescribed for short-term treatment of sleep disorders. Usually benzodiazepines are not prescribed for long-term use because of the risk for developing tolerance, dependence, or addiction.

Other commonly abused drugs that can be grouped in this category include rohypnol and G-H-B. These are also described as designer drugs, and we'll discuss those in another module.

Signs and Symptoms

Effects of these types of depressants can include:

- Feelings of euphoria
- Lowered inhibitions
- Memory lapses
- Drowsiness
- Dizziness and headaches
- Tremors or uncontrolled shaking
- Decreased body temperature, blood pressure and heart rate

Side Effects

The abuse of these drugs can cause:

- Nausea
- Diarrhea
- Urinary incontinence

BARBITURATES

Barbiturates such as Mebaral, Luminal, and Nembutal, are used medically to reduce anxiety or to help with sleep problems. They are used less frequently because of their higher risk of overdose compared to benzodiazepines. Once addicted to barbiturates, users often seek out the drug to obtain the same kind of high as achieved before.

However, because users develop a tolerance to the drug and require more and more of it to achieve the same result, the risk of an overdose is increased. Barbiturate addicts abuse the drug to feel an extreme calm and contentedness.

Signs and Symptoms

Symptoms of barbiturate abuse include confusion, impaired judgment, sedation, and fatigue.

Side Effects

The side effects of barbiturate abuse include respiratory depression, nausea, headache, low blood pressure, and fever.

Opioids

The most well-known and a commonly abused opioid is heroin. Heroin can be injected, inhaled by snorting or sniffing, or smoked. It is highly addictive and has experienced a resurgence in popularity recently. After injecting heroin, users report feeling a surge of euphoria or a “rush”, along with a dry mouth, a warm flushing of the skin, heaviness of the extremities, and clouded mental functioning. Following this initial euphoria, the user goes “on the nod”, an alternately wakeful and drowsy state. Users who do not inject the drug may not experience the initial rush, but other effects are the same.

Heroin abuse continues to be a growing problem in the U.S. and around the world. A report by the CDC shows that over 8,200 died from heroin overdoses in 2013. It’s believed by some experts that the rise in popularity of heroin is because it provides similar effects to prescription opioids, but at a fraction of the cost.

A 2011 survey by SAMHSA estimated that 607,000 persons per year used heroin in the years 2009-2011, compared to 374,000 during 2002-2005. Heroin can provide a fast high, but it can take over your life, and become fatal just as quickly. Heroin addiction is treatable, but the path to recovery requires a commitment that can often last years or even decades.

Prescription Drugs

Medications that fall within the opioid class include Vicodin, OxyContin, Percocet, morphine and codeine. Opioids can produce drowsiness and mental confusion. Some people experience a euphoric response to opioid medications. Those who abuse opioids may seek to intensify their experience by taking the drug in ways other than those prescribed. For example, people who abuse OxyContin may snort or inject it, which increases their risk for serious medical complications, including overdose.

OTC Drugs

Over-the-counter (OTC) medications, such as certain cough suppressants, sleep aids, and antihistamines, can be abused for their psychoactive effects. Others, when taken for their “hallucinogenic” properties, can cause confusion, psychosis, coma, and even death.

Cough syrups and cold medications containing dextromethorphan, often referred to as dex or robo, were the most commonly abused OTC medications in 2010. At high doses, a key ingredient in cough syrup can act like PCP or ketamine.

Signs and Symptoms

The abuse of depressants, regardless of type, generally induces feelings of euphoria, relaxation, and reduced anxiety. These effects, along with its addictive qualities, make it one of the most commonly abused pharmaceutical drugs in the U.S.

The symptoms of abuse include:

- Dry Mouth
- Fatigue
- Constricted pupils
- Dizziness
- Nausea
- Hallucinations

Side Effects

Acute overdoses of depressants can produce:

- Drowsiness
- Respiratory depression or arrest
- Muscle weakness
- Cold and clammy skin
- Low blood pressure and heart rate
- Coma or death

Treatment

Recently an opioid overdose treatment has been approved for use involving the drug Naloxone. Naloxone is a medication that counters the effects of opioid overdose. It can reverse the depression of the central nervous system, respiratory system, and hypotension.

Products that provide a disposable injection system or a nasal spray are now being marketed and emergency responders are being trained on their use in many areas. Sold under names such as Narcan Nalone, and Evzio, it can be used to treat people who have overdosed on heroin or painkiller opiates, such as morphine, oxycodone, or Vicodin.

Depressant abuse can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to prevent accidents at the workplace.

CONCLUSION

Depressant abuse can cause serious health problems and safety issues. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to avoid accidents at the workplace

QUIZ

1. What are the three categories of depressants?
 - A) **Opioids**
 - B) **Benzodiazepines**
 - C) Hallucinogens
 - D) **Barbiturates**
2. Which drug listed is NOT considered a depressant?
 - A) Heroin
 - B) Oxycodone
 - C) Xanax
 - D) **MDMA**
3. What is NOT a symptom of depressant abuse?
 - A) Dry mouth
 - B) Dizziness
 - C) Dilated pupils
 - D) **Hallucinations**
4. Over the counter drugs can be abused and cause hallucinogenic effects.
 - A) **True**
 - B) False
5. How can treatments to counter the effects of depressant overdoses be administered (select all that apply)?
 - A) Orally
 - B) **Injection**
 - C) Ingestion
 - D) **Inhalation**

STIMULANT ABUSE

Stimulants, as the name suggests, increase alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration. Stimulants have traditionally been used to treat asthma and other respiratory problems, and a variety of other ailments. However, as their potential for abuse and addiction became apparent, the medical use of stimulants began to wane.

Signs and Symptoms

There are varieties of drugs, both legal and illegal, that are categorized as stimulants. Regardless of the substance, the symptoms of stimulant abuse are standard and include:

- Euphoria
- Hyperactivity and increased alertness
- Increased desire to talk
- Sensitivity to light and sound

Side Effects

Abusers of stimulants may experience the following problems:

- Dilated pupils
- Anxiety and paranoia
- Twitching
- Reduced appetite
- Increased heart rate, blood pressure, and body temperature
- Disturbed sleep patterns
- Nausea
- Panic and psychosis

Cocaine

The once popular cocaine is a powerful stimulant that causes euphoria, intense hikes in energy and heightened anxiety when it is smoked, eaten, injected, or snorted. The popularity of cocaine and its derivative, crack cocaine, has decreased recently as less costly and easier-to-obtain alternatives have become available. It is, however, still around and considered one of the most addictive substances available. The use of cocaine resulted in 4,300 deaths in 2013, up from 2,400 in 1990. While there are some medical applications for the use of cocaine such as a topical anesthetic for eye and nasal surgery, it's controlled internationally, and the majority of cocaine use is illegal.

Crack Cocaine

Crack is a powerful stimulant that is made of a mixture of cocaine and baking soda. When processed, it turns into a hardened, more potent mixture that can be smoked to produce intense effects. The name "crack", is given to the substance because of the crackling noise it makes when the drug is smoked.

The effects of crack cocaine are relatively short, ranging from thirty minutes to two hours if inhaled, and an even shorter period if smoked or injected. Crack is such a strong stimulant that it creates severe stresses on the heart, the vascular system, the lungs, and the brain. Blood vessels constrict from the stimulation of the drug and over time, can harden. Then when further stimulation occurs, these damaged blood vessels can rupture, leading to a stroke, a fatal heart attack, or cardiac arrest.

For a short time, performance and dexterity may improve. Users report an increasing sense of energy and alertness, an extremely elevated mood, and a feeling of supremacy. However, as soon as the high wears off, users will exhibit irritability, paranoia, restlessness, and anxiety. This can lead to accidents as drivers on crack can make unpredictable moves and lose control of their vehicles.

Methamphetamine

Methamphetamine is a psychostimulant that induces a sense of euphoria and heightened energy when it is smoked, injected, snorted, or consumed. This highly addictive drug is commonly abused and has significantly grown in popularity over the past ten years.

Crystal meth is short for crystal methamphetamine, which is just one form of the drug methamphetamine. Crystal meth is commonly used as a “club drug”, taken while partying in nightclubs or at raves. Its most common street names are ice or glass.

Signs and Symptoms

In addition to the short-term symptoms listed above, crystal meth symptoms can include:

- Bizarre, erratic, and sometimes violent behavior
- Hallucinations, hyper-excitability, and irritability
- Delusions (for example, the sensation of insects crawling under the skin)

Long Term Effects

High doses can cause convulsions, seizures, and death. Prolonged use of meth can cause:

- Permanent damage to the blood vessels of the heart and brain
- Liver, kidney, and lung damage
- Destruction of nasal tissues if snorted
- Breathing problems if smoked
- Infectious diseases and abscesses at injection sites or due to compulsive scratching
- Malnutrition and weight loss
- Severe tooth decay
- Disorientation, apathy, and confused exhaustion
- Psychological dependence
- Psychosis
- Depression
- Damage to the brain similar to Alzheimer’s disease, stroke, and epilepsy

Meth is a dangerous and potent chemical and, as with all drugs, a poison that first acts as a stimulant but then begins to destroy the body.

MDMA

MDMA, often referred to as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is taken orally, usually as a capsule or tablet. The popular term Molly (slang for “molecular”) refers to the pure crystalline powder form of MDMA, usually sold in capsules. The drug’s effects last approximately 3 to 6 hours, although it is not uncommon for users to take a second dose of the drug as the effects of the first dose begin to fade.

Signs and Symptoms

MDMA produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

Flakka

A potent new designer drug called flakka is making headlines across the United States. Flakka is similar to the bath salts drugs. Both are synthetic versions of naturally occurring amphetamine-like drugs. Flakka, also known as gravel, was banned by the U.S. in early 2014. Despite this, flakka's availability has been surging in parts of the U.S. Flakka is a potent stimulant at low doses, but can cause bizarre behavior if a user takes too much.

Flakka can be used many different ways, including swallowing, snorting, or injecting. It also can be dissolved into liquid and inhaled as e-cigarette vapor. Like other drugs of this type, flakka can cause a condition called “excited delirium” that includes hyper-stimulation, paranoia, and hallucinations that can lead to violent aggression and self-injury.

Some drug experts are suggesting that flakka may be the next drug epidemic because it’s more addictive than meth, more dangerous than cocaine, and the cheapest of the three.

Signs and Symptoms

Commonly observed symptoms of flakka abuse include bizarre behavior, agitation, paranoia, and delusions of superhuman strength.

Side Effects

The drug has been linked to deaths by suicide as well as heart attack. It can also dangerously raise body temperature and lead to kidney damage or kidney failure.

Legal Drugs

Most recently, there has been a significant increase of the abuse of prescription stimulants because they are often easier to get. The most popular of these are drugs used to treat ADHD, narcolepsy, and occasionally depression.

Signs and Symptoms

Stimulants, such as Dexedrine, Adderall, Ritalin, and Concerta can induce:

- A feeling of euphoria
- Increased blood pressure and heart rate
- Constricted blood vessels
- Increased blood sugar

The increased use of stimulant prescriptions over the last two decades has led to greater availability and increased risk for abuse. Due to the fact that these are prescription drugs, they are perceived by many to be generally safe and effective; prescription stimulants are increasingly being abused.

Because these drugs increase the availability of certain neurotransmitters and increase the blood flow to muscles, they are increasingly popular among some academic professionals, athletes, performers, older people, and both high school and college students. Users frequently report improvements in focus and concentration, and sports performance. This type of use poses potential health risks, including addiction, cardiovascular problems, and psychosis.

As with other drugs, it's easy for individuals to become dependent upon or addicted to stimulants. Withdrawal symptoms associated with discontinuing stimulant use include fatigue, depression, and disturbance of sleep patterns. The repeated abuse of some stimulants can lead to feelings of hostility or paranoia, even psychosis.

Further, taking high doses of a stimulant may result in dangerously high body temperature and an irregular heartbeat. There is also the potential for cardiovascular failure or seizures. According to results from the 2010 National Survey on Drug Use and Health, an estimated 2.4 million Americans used prescription drugs non-medically for the first time within the past year, which averages to approximately 6,600 new users per day.

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

CONCLUSION

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

QUIZ

1. Which of the following drugs is NOT considered a stimulant?
 - A) Cocaine
 - B) Ritalin
 - C) **DXM**
 - D) MDMA
2. Identify the common symptoms of stimulant abuse (select all that apply):
 - A) **Increased energy**
 - B) **Talkativeness**
 - C) **Twitching**
 - D) Loss of coordination
3. Which of the stimulants listed below are known to cause violent behavior (select all that apply)
 - A) Adderall
 - B) **Crystal Meth**
 - C) **Flakka**
 - D) Cocaine
4. The increase in the abuse of prescription stimulants is to improve mental and physical performance.
 - A) **True**
 - B) False
5. What are the side effects of stimulant abuse (select all that apply)?
 - A) **Nervousness**
 - B) **Weight loss**
 - C) Reduced blood pressure
 - D) Drowsiness

HALLUCINOGEN ABUSE

Hallucinogens are a class of drugs that cause distortions in a person's perceptions of reality. Hallucinogens exist as both plants and as synthetically made substances. Hallucinogens are divided into two categories: classic hallucinogenics, and dissociative.

CLASSIC HALLUCINOGENS

Classic hallucinogenics include:

- LSD
- Mescaline (Peyote)
- Psilocybin
- DMT

Under the influence of hallucinogens, people see images, hear sounds, and feel sensations that seem real but do not exist. Some hallucinogens also produce rapid, intense emotional swings.

LSD

Lysergic Acid Diethylamide, or LSD, was once one of the most popular hallucinogens, but has since been replaced in popularity, due in part to its limited availability.

Mescaline

Mescaline is a naturally occurring hallucinogen found in certain type of cacti. As with most hallucinogens, mescaline causes altered thought processes and visual delusions. The effects of mescaline can last in excess of 12 hours.

Psilocybin

Psilocybin is the active ingredient in what are known as Magic Mushrooms. Psilocybin is another naturally occurring hallucinogen found in many species of mushrooms. Psilocybin generally causes feelings of euphoria, a distorted sense of time, and visual and mental hallucinations. Consuming psilocybin mushrooms can cause pupil dilation, changes in heart rate and blood pressure, nausea, and panic attacks. The effects of psilocybin can last up to six hours.

DMT

Dimethyltryptamine is a hallucinogenic compound used in religious rituals in the Amazon, and is growing in popularity. DMT is a plant-based mixture that can be smoked, injected, or made into a tea.

A National Survey on Drug Use and Health found that the number of people in the U.S. who have used DMT in some form has been up almost every year since 2006 -- from an estimated 688,000 in 2006 to 1,475,000 in 2012. DMT can produce powerful psychedelic experiences including intense visuals, euphoria, and hallucinations when combined with certain other drugs

DISSOCIATIVE DRUGS

The drugs in the dissociative category are both illegal and popular with abusers. The most common are:

- PCP
- Ketamine
- MDMA
- DXM
- Salvia

PCP

PCP, also known as Angel Dust, was originally intended as an anesthetic, but was never approved because of its psychological effects. Today it's an illegally-produced synthetic drug sold as tablets, capsules, or white or colored powder. It can be snorted, smoked, or eaten. PCP is sometimes combined with marijuana to create what is known as supergrass or killer joints.

Signs and Symptoms

A moderate amount of PCP often causes users to feel detached, distant, and estranged from their surroundings. Numbness of the extremities, slurred speech, and loss of coordination may be accompanied by a sense of strength and invulnerability.

A blank stare, rapid and involuntary eye movements, and an exaggerated walk are among the more observable effects. Auditory hallucinations, image distortion, severe mood disorders, and amnesia may also occur. In some users, PCP may cause acute anxiety and a feeling of impending doom; in others, paranoia and violent hostility, and in some, it may produce a psychosis indistinguishable from schizophrenia.

Side Effects

The effects of PCP include a slight increase in breathing rate and a more pronounced rise in blood pressure and pulse rate. Respiration becomes shallow and flushing and profuse sweating can be evident.

At high doses of PCP, there is a drop in blood pressure, pulse rate, and respiration. Nausea, vomiting, blurred vision, uncontrolled eye movements, drooling, loss of balance, and dizziness may also occur. High doses of PCP can also cause seizures, coma, and death (though death more often results from accidental injury or suicide during PCP intoxication).

Ketamine

Ketamine, or Special-K, is an anesthetic used in veterinary medicine. Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

MDMA

MDMA, known as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. It produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

MDMA was initially popular among young adults in the nightclub scene or at raves, but the drug now affects a broader range of users. MDMA is usually taken as a capsule or tablet, with the effects lasting 3 to 6 hours.

DXM

DXM stands for Dextromethorphan, It's known as robo after a popular brand of cough syrup. DXM is a cough suppressant and expectorant ingredient in some over-the-counter cold and cough medications. Adolescents and young adults often abuse these. The most common sources of abused DXM are “extra-strength” cough syrup.

Salvia

Salvia is a fairly new addition to the list of hallucinogens. Salvia, also known as “magic mint”, is a member of the mint family, native to southern Mexico. Salvia can be smoked, chewed, or consumed by drinking the extracted juices.

Signs and Symptoms

The effects of salvia use are similar to other hallucinogens and have been described as intense but short-lived, appearing in less than 1 minute and lasting less than 30 minutes. The effects of hallucinogens are highly volatile in that there is no real way of knowing how the user will react from one use to the next. The reactions to salvia tend to be varied and unreliable, which is the primary concern when this drug is taken.

Different effects can be produced for different people and even for the same people at different times. The main reason for this is due to the variation in the active components of the drugs with each use.

The symptoms of hallucinogen use can vary by dosage:

- Low doses produce a numbness in the extremities and intoxication, characterized by staggering, unsteady gait, slurred speech, bloodshot eyes, and loss of balance.
- Moderate doses will produce a numbing effect similar to pain killers or anesthetics.
- High doses may lead to convulsions.
- Users can really never know how much of the drug they are taking, due to the tendency of the drug to be made illegally in uncontrolled conditions.

When ingested, users may experience any number of effects from hallucinogens, some of which include:

- Mood swings
- Disconnection from reality
- Tactile, visual, or auditory hallucinations

Side Effects

Taking hallucinogens can lead to the following serious side effects:

- Increased heart rate, blood pressure, and body temperature
- Tremors or shakes
- Sweating
- Nausea and vomiting
- Poisoning
- Shallow breathing
- Loss of muscle control

Using hallucinogenic drugs can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. Hallucinogen abuse can eventually disrupt normal chemical processes leaving the brain in a diminished state.

QUIZ

1. All hallucinogenic drugs are synthetically made substances.
 - A) True
 - B) **False**
2. What are the two categories of hallucinogenic drugs?
 - A) Visual
 - B) **Classic**
 - C) **Dissociative**
 - D) Synthetic
3. What is a common street name for MDMA?
 - A) Magic mint
 - B) **Ecstasy**
 - C) DXM
 - D) Gravel
4. Which of the following is NOT a symptom of hallucinogen abuse?
 - A) **Slurred speech**
 - B) Hyperactivity
 - C) Mood swings
 - D) Hearing things
5. Salvia is an organic hallucinogen from Mexico.
 - A) **True**
 - B) False

INHALANT ABUSE

Many products found in the home or workplace, such as spray paints, markers, glues, and cleaning fluids contain substances that have mind-altering properties when inhaled. People do not typically think of these products as drugs because they were never intended for that purpose.

These products are used as recreational drugs for their intoxicating effect. Inhaling these substances for this purpose is called huffing, sniffing, dusting, or bagging. Teens and young adults do this most often, but not exclusively.

Abusers of inhalants breathe them in from a container or dispenser directly into their nose or mouth, or place a chemical-soaked rag in their mouth. Abusers may also inhale fumes from a balloon or a plastic or paper bag. Because the high produced by inhalants usually lasts just a few minutes, abusers often try to prolong it by continuing to inhale repeatedly over several hours.

A wide range of substances are abused as inhalants, these include:

- Volatile solvents - liquids that vaporize at room temperature such as gasoline
- Industrial or household products, - These include paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, and lighter fluid
- Art or office supply solvents - Art or office supply solvents, including correction fluids, felt-tip marker fluid, electronic contact cleaners, and glue
- Aerosols - Sprays that contain propellants and solvents. These include aerosol propellants in items such as spray paints, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, and vegetable oil sprays
- Gases - These can be found in household or commercial products such as butane lighters and propane tanks, whipped cream aerosols or dispensers, called whippets, and refrigerant gases
- Medical anesthetics – These include ether, chloroform, halothane, and nitrous oxide
- Nitrites – These are used primarily as sexual enhancers such as amyl nitrites, commonly known as “poppers”

Amyl nitrite is still used in certain diagnostic medical procedures. Although not as widely used as in the past. When marketed for illicit use, organic nitrites are often sold in small brown bottles labeled as video head cleaner, room odorizer, leather cleaner, or liquid aroma.

Signs and Symptoms

The effects of solvent intoxication can vary widely depending on the dose, and the type of solvent or gas being inhaled. A person who has inhaled a small amount of rubber cement or paint thinner vapor may be impaired in a manner resembling being drunk.

A person, who has inhaled a larger quantity of solvents or gases, or a stronger chemical, may exhibit stronger effects such as slurred speech, euphoria, nausea, fainting, stupor, distortion in perceptions of time and space, hallucinations, and emotional disturbances. Most abused inhalants, other than nitrites, depress the central nervous system much like alcohol.

The effects are similar, including slurred speech, lack of coordination, euphoria, and dizziness. Inhalant abusers may also experience light-headedness, and delusions. With repeated inhalations, many users feel less inhibited and less in control. Some may feel drowsy for several hours and experience a lingering headache.

Side Effects

Regardless of which inhalant is used, abuse can lead to injury or death. When a gas that was stored under high pressure is released, it cools rapidly and can cause frostbite if it is inhaled directly from the container. Nitrous oxide, which can be used as an automotive power adder, is one such chemical. Its cooling effect is potentially lethal to a person.

Many inhalants are volatile chemicals and can catch fire or explode, especially when used where people are smoking. As with many other drugs, users may also injure themselves due to loss of coordination or impaired judgment, especially if they attempt to drive.

Solvents have many potential risks in common, including pneumonia, cardiac failure or arrest, and aspiration of vomit. The inhaling of some solvents can cause hearing loss, muscle spasms, and damage to the central nervous system and brain. Serious but potentially reversible effects include liver and kidney damage and blood-oxygen depletion.

Death from inhalants is usually caused by a very high concentration of fumes. Deliberately inhaling solvents from an attached paper or plastic bag or in a closed area greatly increases the chances of suffocation. Brain damage often occurs from chronic long-term use as opposed to short-term exposure.

Abusing inhalants can be lethal. Sniffing highly concentrated amounts of the chemicals in solvents or aerosol sprays can directly cause heart failure within minutes. This syndrome, known as “sudden sniffing death”, can result from a single session of inhalant use by an otherwise healthy person.

High concentrations of inhalants may also cause death from suffocation, especially when inhaled from a paper or plastic bag or in a closed area. Even when using aerosols or volatile products for their intended purposes like painting or cleaning, you should always do so in a well-ventilated room or outdoors.

VAPING

Electronic cigarettes, also called e-cigarettes, are battery-operated devices designed to deliver nicotine with flavorings and other chemicals to users in vapor instead of smoke. They can be manufactured to resemble traditional tobacco cigarettes, cigars or pipes, or even everyday items like pens or USB memory sticks. Newer e-cigarettes have refillable cartridges that can be filled with substances other than nicotine, providing a new way to deliver other drugs. This practice is often referred to as dabbing.

DABBING

The dab phenomenon is rapidly becoming popular. Dabs are forms of high-grade hash, usually made with a process involving butane or CO². BHO, or butane hash oil, is a marijuana product extracted from the plant and concentrated into a smokable gummy substance sometimes called "budder," "honeycomb", or "earwax".

It's widely believed that BHO has a higher concentration of THC, and is therefore much stronger than traditional marijuana or hashish. Vape pens, or vaporizer pens, usually consist of an electronic heating system and a cartridge holding hash oil. These provide a virtually smoke-free way to consume these concentrates, making the practice of dabbing that much more difficult to detect.

CONCLUSION

Huffing, sniffing, or bagging can cause serious health issues or death. Companies who employ teen workers where sources of inhalant materials are readily available need to be on the lookout for symptoms of abuse particularly in younger workers.

Companies and workers involved in air conditioning repair work should be aware of the signs of suspected refrigerant inhalant abuse. These situations can include:

- Frequent AC repair calls to the same home or neighborhood
- Refrigerant runs low prematurely
- Damaged AC units

If these signs are detected, workers should share that information with homeowners in a considerate manner. Remember, these signs don't confirm abuse, and inhalant abusers could be anyone, someone living in the home, or others in the neighborhood.

QUIZ

1. Which is NOT a term used to describe inhalant abuse?
 - A) Huffing
 - B) Bagging
 - C) Dusting
 - D) **Whiffing**
2. How long do the effects of abusing inhalants usually last?
 - A) **1 to 5 minutes**
 - B) 15 to 20 minutes
 - C) 30 to 60 minutes
 - D) 1 to 3 hours
3. Amyl nitrate that can be purchased for illegal purposes is referred to as (select all that apply):
 - A) **Video Head Cleaner**
 - B) Air Dusters
 - C) **Room Odorizer**
 - D) **Leather Cleaner**
4. When gases stored at high pressure are inhaled, they can cause injury due to frostbite.
 - A) **True**
 - B) False
5. Using e-cigarettes to inhale illegal substances is called what?
 - A) Dabbing
 - B) **Vaping**
 - C) Blasting
 - D) Snorting

DESIGNER DRUG ABUSE

The term “designer drugs” refers to drugs that are created in a laboratory. A designer drug is created by changing the properties of a drug that comes from a plant, such as cocaine, morphine, or marijuana, using chemistry. The resulting designer drugs typically have a new, different effect on the brain or behavior.

MDPV, Ecstasy, ketamine, MXE, GHB, Rohypnol, and bath salts are some examples of designer drugs.

MDPV

MDPV is the active ingredient found in many drugs labelled as plant food or bath salts. It acts as a stimulant, and has been reported to produce effects similar to those of cocaine and amphetamines. The effects of MDPV last 3 to 4 hours, with the after effects of high blood pressure and rapid heart rate lasting 6 to 8 hours.

Signs and Symptoms

Common symptoms of MDPV abuse include:

- Agitation
- Dilated pupils
- Hallucinations
- Confusion
- Paranoia
- Anxiety

Side Effects

Reported side effects for MDPV and other bath salts drugs include heart palpitations, high blood pressure, increased body temperature, nausea, and violent or suicidal behavior. Although efforts have been made to prohibit the sale of the chemicals used to make bath salts, new variations using alternate chemicals continue to appear, and these new formulas can still be bought at head shops and on the street around the country.

MDMA

MDMA, the active ingredient in Ecstasy, is a member of the amphetamine class of drugs, and falls under other broad categories of substances, including stimulants and psychedelics. MDMA is one of the most widely used illicit drugs in the world. MDMA is available in pill form, commonly known as Ecstasy, and more recently in crystalline form known as Molly, which is a purer form of the drug, which greatly increases the risk of overdose.

Ecstasy and Molly are popular with teenagers and young adults who are more likely to use it on weekends and at parties. The effects of MDMA are more consistent than those produced by most psychedelics, and its distinct euphoria is unlike other stimulants.

The recent growth in the popularity of Molly is due to the claims that it’s “pure”. While there’s no way to tell if that’s true, it’s almost certainly more potent than Ecstasy pills. Another factor is that it’s relatively cheap. Usually around \$30-\$40 for 100mg, which is typically enough for a first-time user.

Side Effects

Depression and loss of memory can occur more frequently in long-term MDMA users. A chronic user can suffer severe depression, fatigue, and hopelessness and have reported being extremely depressed after periods of prolonged use; this is sometimes referred to as suicide Tuesday. Suicide Tuesday is the name given to the trend for people who use ecstasy all weekend, then commit suicide when they fully come down from the high on Tuesday.

Due to its near-universal illegality, the purity of a substance sold as Ecstasy is unknown to the user. Pills may contain other active substances meant to stimulate in a way similar to MDMA, such as amphetamine, methamphetamine, ephedrine, or caffeine.

KETAMINE

Ketamine is an anesthetic used in veterinary medicine. Unlike the other drugs listed here, ketamine, or Special-K, is a dissociative hallucinogen. This means it causes a sense of detachment between a person's body and the external world.

The effects of ketamine are relatively short in nature, lasting about 30 to 60 minutes. Ketamine comes in a clear liquid and a white or off-white powder form, which can be injected, mixed in a drink, or combined with tobacco or marijuana and smoked.

Signs and Symptoms

Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

Side effects

Ketamine can cause serious bladder problems with severe pain and difficulty passing urine, and can lead to surgical removal of the bladder.

Detection

While most drug tests don't specifically look for ketamine, unlike other designer drugs, it can be detected in urine samples for two to four days after use.

MXE

Methoxetamine, or MXE, is a dissociative sedative similar to ketamine, but stronger and longer lasting. MXE is a white powder that has stimulant and dissociative effects, with the stimulant effects appearing at lower doses, and the dissociative effects at higher doses.

MXE can be ingested or injected. Users of lower doses of the drug report feeling calm, with an increase in energy, euphoria, and disconnection from problems and concerns. At higher doses, the effects are different and much more intense. At these higher levels, the effects are more similar to related drugs ketamine and PCP.

Signs and Symptoms

The effects of MXE include:

- Feelings of intense intoxication
- Involuntary eye movement
- Auditory and visual hallucinations
- A feeling of disconnection from your body

Side effects

Some of the side effects of MXE include paranoia, nausea, high blood pressure, and rapid heart rate. Injecting MXE can damage the veins and can cause serious problems such as abscesses and blood clots.

GHB

GHB is a depressant that is commonly referred to as a “club drug” or “date rape” drug that is often placed in alcoholic beverages. GHB, also known as G, liquid ecstasy, or liquid X, is a depressant used both as a prescription sleep-aid and as a recreational intoxicant. It's known for its ability to induce a short (several hour) coma-like sleep at high doses.

Due to the number of GHB-related deaths in combination with its addiction potential, it was categorized as a schedule one drug by Federal law in 1999. GHB that's bought illegally on the street or over the internet comes in liquid form or as a white powder, and is taken orally and frequently combined with alcohol.

Signs and Symptoms

The common symptoms of GHB use are:

- Euphoria
- Increased energy
- Dizziness
- Impaired coordination
- Hallucinations
- Confusion

Side effects

The side effects of GHB use include:

- Seizures
- Muscle twitches
- Tooth decay
- Insomnia
- Low blood pressure
- Rash

The combination of GHB and alcohol can result in a coma-like condition, and result in death due to depressed breathing conditions.

The production of GHB usually involves the use of lye or drain cleaner mixed with GBL, a chemical cousin of GHB and an industrial solvent often used to strip floors.

ROHYPNOL

Rohypnol is a drug with properties similar to those of Valium. It's used in the short-term treatment of insomnia, as a pre-medication in surgical procedures and for inducing anesthesia. The common street name for rohypnol is “roofies”. Rohypnol is sold in Europe and Latin America as a sleeping pill, but it is illegal in the United States.

Like Valium, Librium, and Xanax, Rohypnol's effects include sedation, muscle relaxation, reduction in anxiety, and prevention of convulsions. However, Rohypnol's sedative effects are approximately 7 to 10 times stronger than Valium. The effects of Rohypnol appear 15 to 20 minutes after administration and last approximately four to six hours.

While Rohypnol has become widely known for its use as a date-rape drug, it is abused more frequently for other reasons. It is abused by students, street gang members, rave attendees, and heroin and cocaine abusers to produce profound intoxication, boost the high of heroin, and control the effects of cocaine. Rohypnol causes partial amnesia, causing users to be unable to remember certain events that they experience while under the influence of the drug.

Signs and Symptoms

Common signs of Rohypnol use include loss of muscle control, confusion, drowsiness, and amnesia. A person can be so incapacitated (made unable to act) they collapse. They lie on the floor, eyes open, able to observe events but completely unable to move.

Side Effects

Rohypnol users often describe its effects as “paralyzing”. The effects start 20 to 30 minutes after taking the drug, peak within two hours and may persist for 8 to 12 hours.

In addition to the chemically induced amnesia, rohypnol often causes decreased blood pressure, drowsiness, visual disturbances, dizziness, confusion, digestive problems, and urinary problems.

BATH SALTS

The active ingredient in bath salts is called mephedrone a synthetic substance that is claimed to make users feel confident and energized and enhance musical experiences.

One package of these amphetamine-like drugs can contain several different substances, including mephedrone and MDPV. The powder is often marketed as a novelty bathing product, but it is not intended for use in baths. Bath salts can be swallowed, snorted, smoked, or injected.

Signs and Symptoms

The signs of bath salts use may include:

- Euphoria
- Increased alertness and awareness
- Abnormal pupil dilation
- Uncontrollable eye movement
- Increased energy and motivation
- Mental stimulation/increased concentration
- Confusion
- Hallucinations
- Talkativeness

The primary effects last roughly 3 to 4 hours, with after effects such as rapid heartbeat, high blood pressure, and mild stimulation lasting from 6 to 8 hours.

Side Effects

The side effects of bath salts use include:

- Agitation or severe rage
- Heart palpitations and chest pain
- Seizures and tremors
- Vomiting
- High body temperature
- Kidney or liver failure
- Excessive sweating and compulsive water drinking
- High blood pressure
- Compulsive teeth grinding
- Sleep deprivation
- Intense and prolonged panic attacks

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used Molly alone increased by 66 percent. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

DETECTION

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

CONCLUSION

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used molly alone increased by 66%. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

QUIZ

1. Designer drugs are chemically modified variations of organic drugs.
 - A) **True**
 - B) False
2. Which of the following is NOT defined as a designer drug?
 - A) MDMA
 - B) MDPV
 - C) MXE
 - D) **Salvia**
3. What drug is used as an animal anesthetic?
 - A) GHB
 - B) **Ketamine**
 - C) Rohypnol
 - D) MDPV
4. What are the common symptoms of designer drug abuse (indicate all that apply)?
 - A) Euphoria
 - B) **Hallucinations**
 - C) Drowsiness
 - D) Increased appetite
5. Which of the following are referred to “date rape” drugs (indicate all that apply)?
 - A) MXE
 - B) **Rohypnol**
 - C) Ketamine
 - D) **GHB**

SUMMARY

DRUG FREE WORKPLACE PROGRAM

The Drug Free Workplace Act requires all federal employees (and contractors doing government jobs) to refrain from using illegal drugs on or off duty. This law recognized that alcohol and drug use is seriously impairing a portion of the national work force, resulting in the loss of billions of dollars each year.

Because of the toll it takes on their employees and the costs associated with substance abuse in the workplace, many companies have implemented Drug Free Workplace Programs. A common reaction to a company's DFWP is one of skepticism and distrust.

Employees often view a DFWP as an invasion of privacy or a malicious way to penalize them. In reality, nothing is further from the truth. Businesses establish a DFWP for the following reasons:

- To comply with Federal or State laws
- To protect its workers, reputation and profitability
- To ensure a safe work environment
- To assist employees struggling with substance or personal problems

Successful companies understand that their employees are the most valuable asset they have, and ensuring their health and well-being is critical to the company's success. A DFWP is just another tool, like PPE, they can use to protect the overwhelming majority of their workforce.

In this program, we have attempted to help you understand the concepts and processes of your company's Drug Free Workplace Program.

You are strongly urged to learn more about the program by asking your supervisor or program administrators for more information.

You are also urged to learn more about available assistance programs and take advantage of the help available. An effective DFWP is not only a way for the company to protect you; it's a benefit that can save your job or your life.

FINAL EXAM

1. What government departments have stricter regulations for substance abuse than those established by the Drug Free Workplace Act (identify all that apply)?
 - A) OSHA
 - B) **DOT**
 - C) HHS
 - D) **PHMSA**
2. According to the National Institute on Drug Abuse, what percentage of illegal drug abusers are employed?
 - A) 25%
 - B) 40%
 - C) 50%
 - D) **75%**
3. Alcohol has been linked to certain types of cancer.
 - A) **True**
 - B) False
4. What companies are required to have a DFWP (identify all that apply)?
 - A) All companies
 - B) **Companies with government contracts or grants**
 - C) Private sector companies
 - D) **Transportation and freight carriers**
5. Which of the following are required elements of a DFWP (identify all that apply)?
 - A) **Who is covered by the program**
 - B) **When the policies apply**
 - C) Return to work agreements
 - D) Employee assistance programs
6. Drug Free Workplace Programs must include drug testing.
 - A) True
 - B) **False**
7. The consequences for violating the company DFWP can include (identify all that apply):
 - A) Referral to an assistance program
 - B) Suspension
 - C) Termination
 - D) **All of the above**

8. The SAMHSA guidelines include testing for all of the following substances EXCEPT:
- A) Marijuana
 - B) Cocaine
 - C) Opiates
 - D) Designer drugs**
9. When can drug testing occur (identify all that apply)?
- A) Pre-employment
 - B) Random
 - C) Reasonable suspicion
 - D) All of the above**
10. What is the most common drug testing method?
- A) Blood
 - B) Urine**
 - C) Hair
 - D) Saliva
11. What type of EAP uses public local services to help employees?
- A) Contract
 - B) Referral**
 - C) In-house
 - D) Insurance carrier
12. What is the function of a Medical Review Officer?
- A) Collecting drug testing specimens
 - B) Conducting drug tests
 - C) Analyzing positive test results**
 - D) Managing rehabilitation programs
13. What are the Indications that a co-worker may have an abuse problem (identify all that apply)?
- A) Late to work more often and out sick a lot
 - B) Blaming poor work performance on others
 - C) Inattentive and forgetful
 - D) All of the above**
14. A return to work agreement allows employees to return to their job after successful completion of a treatment program.
- A) True**
 - B) False

15. Failing to report a co-worker's abuse problem is considered what?
- A) Supporting
 - B) Enabling**
 - C) Denial
 - D) None of the above
16. Which is NOT a symptom of alcohol impairment?
- A) Odor on breath
 - B) Lack of coordination
 - C) Slurred speech
 - D) Increased energy**
17. K-2 is a synthetic version of what drug?
- A) Cocaine
 - B) Ketamine
 - C) Marijuana**
 - D) Heroin
18. Which of the following are common symptoms of depressant abuse (identify all that apply)?
- A) Memory lapses**
 - B) Drowsiness**
 - C) Hallucinations
 - D) Mood swings
19. Drugs that create a feeling of separation from your body are called what?
- A) Opioids
 - B) Benzodiazepines
 - C) Dissociative**
 - D) Stimulants
20. A Per Se law allows you to be arrested for having any level of an illegal drug in your system.
- A) True**
 - B) False

**EMPLOYEE TRAINING
STUDENT GUIDE**

SECTION 1: DFWP TRAINING

INTRODUCTION

This training program is designed to tell you about Drug Free Workplace Programs, or DFWP, and how it affects you.

This program is divided into two parts. In part one, we'll look at the components of a DFWP, and how it works. Part two of this training provides information about the substances that are most commonly abused, and how to recognize the signs and symptoms of abuse.

The information in part two looks at the different types of substances that are abused, and can be completed separately.

Alcohol and drug abuse in today's workplace has reached epidemic proportions. It's widespread, touching every industry at every level, and it won't go away on its own.

More than one in ten workers have some kind of a drinking problem, and almost a third of those use illegal drugs.

The Center for Disease Control (CDC) estimated the loss in productivity, health care costs, and property damage at over \$200 billion.

The question you're tempted to ask yourself is "If it's not me, why do I care?"

The reason you should care is that it's not just someone else's problem; it could become yours as well. People who get drunk or high at work aren't just a threat to themselves; they're a threat to you too.

The toll on human life is equally shocking. Users often lose their jobs, families, health, and lives to the disease of addiction.

The topics we'll cover in this program are:

- What is a Drug Free Workplace Program
- Requirements, responsibilities, and rights
- The elements of the program
- How the DFWP is implemented
- Understanding drug testing
- Recognizing the signs and symptoms of abuse
- Prevention and Treatment

It's important to pay attention to the information on each of these topics. You'll be required to take a final exam with questions related to these topics at the end of the program.

GENERAL INFORMATION

What is a Drug Free Workplace Program?

Substance abuse is a serious problem in the workplace. The National Institute on Drug Abuse (NIDA) reports that approximately 75 percent of all illegal drug users are employed either full or part time.

Workers who use alcohol and other drugs can affect everyone in the workplace. Studies show that substance abusers:

- Are far less productive
- Miss more workdays
- Are more likely to injure themselves or someone else
- File more Workers' Compensation claims

In 1988, congress passed the Drug Free Workplace Act. Businesses that perform work for the federal government (contracts and grants) are required to have Drug Free Workplace programs in effect.

The transportation industry has established additional policies on drug and alcohol testing to ensure workers who operate aircraft, trains, trucks, and buses do so in a safe and responsible manner. In addition, the Nuclear Regulatory Commission (NRC), and The Pipeline and Hazardous Materials Safety Administration (PHMSA) require companies to implement drug and alcohol testing programs in the interest of public safety.

Many other companies, although not required by law, have or are implementing their own DFWP in order to protect the health and safety of their employees.

REQUIREMENTS

OSHA requires that all employers provide a safe working environment for their employees. Implementing a DFWP will improve safety, promote employee health, and reduce operating expenses.

The Drug-Free Workplace Act (DFWA) requires businesses with Federal grants and recipients of Federal contracts of \$100,000 or more to comply with the following:

- Employers must have a written policy that explains what's prohibited, and the consequences of violating the policy
- Employees must read and agree in writing to the policy as a condition of employment on the project
- Employers must educate employees about alcohol and drug abuse and addiction, the employer's policy, and available help, including counseling and other assistance
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within five days after such conviction
- Employers must disclose that conviction to the Federal agency with which the employer has a grant or contract, within ten days after receiving notice from the employee or others

The Americans with Disabilities Act (ADA) prohibits discrimination against qualified people with disabilities and limits an employer's ability to inquire into an employee's or job applicant's medical history. It does not prohibit drug testing, and doesn't bar employers from prohibiting alcohol abuse or illegal drug use in the workplace.

According to the ADA, an employer can't discriminate based on these characteristics:

- Illegal substance abusers and alcoholics who have successfully completed a rehabilitation program
- Those who are participating in a supervised rehabilitation program
- Those who, based on hearsay only, are believed to be an illegal drug user

Many states and municipalities have specific drug-free workplace regulations that define when and how employees can be tested for illegal drugs.

COMPANY RESPONSIBILITIES

When implementing a DFWP, the company must develop a written policy that identifies what's prohibited, and the consequences of violating the policy. This policy must be provided to all employees and prospective employees.

The company must:

- Explain the benefits and procedures of the DFWP to all employees
- Communicate the potential risks drug and alcohol abuse poses to the Company
- Who is covered by the policy?
- When the policy applies
- If you are required to notify the Company of drug-related convictions that occur in the workplace
- If the program includes drug testing and/or personal property searches
- Define if there are Return-to-Work Agreements
- How employee confidentiality will be protected
- Who is responsible for enforcing the policy?
- The type of assistance programs available
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately

EMPLOYEE RESPONSIBILITIES

In order to support these goals, all employees are required to:

- Read the DFWP policy provided
- Sign and return the required forms
- Understand the terms of the policy and the consequences for violating it
- Learn the signs and symptoms associated with drug and alcohol abuse
- Know what assistance is available and how to benefit from it
- Know who to contact if you have questions
- Refrain from any drug or alcohol use at work
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately

WHY HAVE A DFWP?

A Drug-Free Workplace Program accomplishes two major things: it sends a clear message that use of alcohol and drugs in the workplace is prohibited, and encourages employees who have problems with alcohol and other drugs to voluntarily seek help.

Substance abuse robs people of their good judgment, self-control, and steals their dignity. For these reasons, your employer has established a Drug-Free Workplace Program or DFWP. This program has been created to:

- Protect the health and safety of all employees, customers and the public
- Safeguard employer assets from theft and destruction
- Protect trade secrets
- Maintain product quality and company integrity and reputation
- Comply with the Drug-Free Workplace Act of 1988 or any other applicable federal, state or local laws

DRUG ABUSE COSTS

Drug and alcohol abuse in the workplace is costly, both to the company and to the employee.

Company Costs

The costs of drug and alcohol abuse in the workplace can cripple a company due to:

- Lost Productivity - Chronic Absenteeism and poor employee performance can ruin a company's bottom line
- Employee Turnover - Losing employees due to injury, illness or termination forces companies to frequently hire and train new employees, which is costly and time consuming
- Equipment and Material Losses - Companies that have workplace abuse problems often suffer losses of equipment or inventory, either due to theft or because of employee mistakes
- Worker Compensation Claims - because of increased claims resulting from injuries and accidents caused by impaired workers, companies are required to pay more in workers compensation
- Higher Insurance Bills - The cost of medical insurance for the company increases due to the increased use of medical coverage

Employee Costs

Drug and alcohol abuse costs are not just limited to the company; employees suffer as well.

Alcohol and other drugs cost money. However, the cost of the drug is only the beginning, and soon to follow are:

- Medical Bills - Medical costs increase because abusers get sick more often
- Lost Pay - Employees can suffer a loss of pay by losing their jobs to substance abuse
- Debts - Abusers often borrow to support their habit
- Legal Expenses - Legal expenses due to DUI arrests or accidents

QUIZ

1. The Drug Free Workplace Act requires all companies to have a Drug Free Workplace Program.
 - A) True
 - B) False
2. A DFWP is required to include drug testing.
 - A) True
 - B) False
3. What two things are the goals of a DFWP?
 - A) Send a clear message that use of alcohol and drugs in the workplace is prohibited
 - B) Justify termination of an employee
 - C) Encourage employees who have problems with alcohol and other drugs to voluntarily seek help
 - D) Violate employees privacy
4. A company DFWP is required to ensure an employee's privacy.
 - A) True
 - B) False
5. Businesses with Federal grants and recipients of Federal contracts of \$100,000 or more must have a DFWP.
 - A) True
 - B) False

ELEMENTS OF A DFWP

BASIC COMPONENTS

When implementing a DFWP, the company must clearly define the scope and limitations of the program. The company's DFWP has several required elements that are important to understand.

You will receive a written copy of the plan that defines:

- Why the plan exists
- Who the program covers - this could be all employees, or only workers who perform jobs designated as safety or security sensitive
- If the company determines that only positions affecting public safety, trade secrets, or national security will be subject to drug testing, employees performing those jobs must be notified of the requirement
- When and where the policy applies
- It may be in force only at the job site during working hours, or may include off-site locations and non-working hours such as on-call and stand-by hours
- The actions that are considered violations of the policy such as possessing, using, or selling alcohol or illegal drugs
- The DFWP may also limit the use of prescription and over the counter drugs
- The DFWP must define how the company will protect workers privacy, and identify who is responsible for managing the program
- It will also explain the actions that can be taken for violating the policy

DFWP OPTIONS

There are optional elements that may be included in your company's DFWP, these include:

- Drug testing
- Property searches
- Notification
- Employee Assistance Programs
- Return to work agreements or RWTA's

DRUG TESTING

Except for government contract work, drug testing may or may not be required. It's important to understand the scope of what testing can involve.

The majority of employers across the United States are NOT required to drug test and many state and local governments have statutes that limit or prohibit workplace testing, unless required by state or Federal regulations.

If drug testing is included in your company's program, how it will be conducted, what tests will be performed, and who will perform the tests must be defined in the DFWP.

Current laws in the private sector generally permit non-union companies to require applicants and/or employees to take drug tests. In unionized workforces, the implementation of testing programs must be negotiated, even when testing is required by Federal regulations.

If it is part of your company's DFWP, there are things you need to know about the testing. In this section, we will examine:

- Is testing legal?
- When testing can occur
- Testing Methods
- Testing Parameters
- Testing Procedures

Is Drug Testing Legal?

In most cases and states, it's legal for an employer to test employees for drugs. No federal laws prohibit drug testing at this time; however, some states do prohibit or restrict certain types of drug testing.

When Testing Can Occur

Here are situations when your employer may ask employees to take a drug test:

- Pre-employment - To decrease the chance that a current drug user will be hired, some employers test job applicants at the time of a job offer. The job offer depends on a negative drug test result
- Reasonable Suspicion or For Cause - When an employee shows obvious signs of not being fit for duty (For Cause) or has a documented pattern of unsafe work behavior (Reasonable Suspicion), the employee may be asked to take a drug test
- Random Test - To discourage drug use among all employees, an employer may ask employees to take drug tests at random and unpredictable times
- Periodic Test - This is usually done when employees are required to take an annual physical, or can be part of a follow up program for employees after completion of a treatment program
- Post-Accident - An employer may test employees who are involved in an accident or unsafe incident to find out if alcohol or other drug use was a factor
- Post-Treatment Tests - When an employee has taken time off from work to go through an inpatient treatment program, or when an employee is participating in some form of outpatient treatment, an employer may arrange for random testing of that employee to ensure they remain sober

Testing Methods

Different types of drug testing/screening processes are available.

The most common way to test for drugs is a urine test. This involves giving a urine sample, which goes through a series of chemical tests. The results tell whether leftover traces of drugs are in your body. A urine test doesn't tell if you're under the influence of drugs at the time of the test, only that alcohol or drugs were used sometime recently.

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

There are a number of bodily specimens that can be tested for evidence of recent drug use. Although some state laws dictate the types of tests that can be used, a number of options are available. Urine is by far the most commonly used specimen for illicit drugs, and breath is the most common for alcohol.

Other types of tests available consist of:

- Blood
- Hair
- Oral fluids
- Sweat

Blood - Blood tests measure the amount of alcohol or other drugs in the blood at the time of the test. The major drawbacks of conducting blood tests are; they are invasive, and there is a very short detection period.

Hair - Analysis of hair provides a much longer "testing window", giving a more complete drug-use history going back as far as 90 days. Like urine testing however, hair testing doesn't provide evidence of current impairment, but only past drug use.

Oral Fluids - Saliva or oral fluids are easy to collect by using a swab of the inner cheek. These samples are harder to adulterate or substitute, and may be better at detecting specific drugs. There are currently no federally approved oral testing methods for marijuana.

Sweat - A skin patch that measures drugs in sweat is applied to the skin and worn for a length of time. A membrane on the patch protects the tested area from dirt and other contaminants while collecting the sample.

BREATH ALCOHOL TEST

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

All states have set an alcohol level of 0.08 percent as the definition of driving while intoxicated. The Department of Transportation Federal Motor Carrier Safety Administration has established a 0.04% alcohol level for commercial vehicle drivers and 0.01% for operators of common carriers.

Testing Parameters

Employers who require drug testing for applicants and/or employees are usually not required to follow the Substance Abuse and Mental Health Services Administration (SAMHSA) guidelines, but doing so helps to ensure the legality of testing.

The SAMHSA guideline for substance testing establishes limits for five specific categories of drugs, sometimes referred to as the “SAMHSA 5”:

- Marijuana
- Cocaine
- Opiates
- PCP
- Amphetamines

There are additional drugs beyond the “SAMHSA five” that can be included in a drug test. The decision on how extensive the testing is the company’s decision.

- Synthetic or designer drugs sometimes referred to as “party drugs” such as ketamine, ecstasy or molly
- Bath salts
- Barbiturates: tranquilizers such as phenobarbital, and seconal
- Inhalants: spray paints, paint thinners, cleaning fluids, and amyl nitrates

Although it’s a widely abused substance, alcohol is not included in the SAMHSA 5. This may be due to the specific testing requirements defined in the dot regulations. It is, however, commonly included in company drug testing programs

All of the drug categories mentioned here will be examined more closely in the second part of this program.

TESTING PROCEDURES

Drug testing must be done by a testing facility approved by SAMHSA. Test samples may be collected at the workplace, or you may be required to travel to the facility for testing. After you provide a urine sample, the bottle should not leave your sight until it is sealed with special “evidence” tape. You should sign the label on the container. You will then be asked to sign a record book stating that the sample collected was yours.

Testing Privacy

In most cases, employers ensure your privacy as you give your sample. In some cases, however, someone may need to see you give your sample. For example, if there’s reason to believe that an employee has tried to tamper with the sample, another specimen may be collected with someone of the same sex watching to ensure honesty.

Testing Accuracy

If conducted correctly using the guidelines of the Department of Health and Human Services (DHHS), drug tests are very accurate.

Chain of Custody

A chain of custody form is used to document the handling and storage of a urine specimen from the time it's collected until its disposal.

The chain of custody form is written proof of all that happens to the specimen while at the collection site and the laboratory.

Initial Screen

The first test done on a urine sample is called an initial screen. This test alone is not always accurate or reliable. If the initial screen is positive, a second test should be done.

Confirmation Test

A second confirmatory test, by gas chromatography/mass spectrometry (GC/MS), is highly accurate, and will eliminate any false positives from the initial screening. For a test result to be reported as positive, both test results must agree.

Medical Review Officer

A medical review officer (MRO) is a licensed medical doctor who has special training in the area of substance abuse.

If your drug test is positive, the MRO reviews the results, makes sure the chain of custody procedures were followed, and contacts you to make sure there are no medical or other reasons for the result.

Confidentiality

Confidentiality means that your drug test results are kept private, and that only persons who need to know will receive the drug test results. This might be the supervisor, manager, union representative, or someone in the medical or personnel department. You may be asked to sign a release form that states who will receive the test results.

A drug test is reported as positive or negative; the level of the drug(s) found is usually not reported. Confidentiality also means that drug test results won't be part of an employee's personnel file.

Refusing to Test

Employees are typically subject to the same consequences as a positive test if they:

- Refuse the screening or the test
- Adulterate or dilute the specimen
- Substitute the specimen
- That from another person or sends an imposter
- Refuses to sign the required forms
- Refuse to cooperate in the testing process in a way that prevents completion of the test

PROPERTY SEARCHES

The company can decide to require searches of work areas and/or personnel property. The DFWP can include searches of pockets and clothing, lockers, wallets and purses, briefcases and lunchboxes, desks and workstations, vehicles and equipment, and any other areas defined by the plan. Agreeing to property searches can be made a condition of employment for most private employers.

If searches are part of the company's DFWP, you'll be required to sign a consent form. If searches are permitted, they must be performed by trained supervisors or security personnel. Searches may be announced, where you are given advanced notice, or unannounced if the company decides it has reasonable cause.

NOTIFICATION OF CONVICTION

Notification of conviction is usually required as part of government contract work. It requires you and the company to notify the appropriate parties if you are convicted of a drug or alcohol related crime at the workplace.

EMPLOYEE ASSISTANCE

Employee assistance programs (EAP) are methods the company may provide to help employees deal with abuse or other personal issues. The company's DFWP should define the type of EAP the company offers. This can range from referring employees to established treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program.

It's important to know that an EAP provider is NOT a drug testing facility.

The EAP is responsible for providing counseling and assistance to employees who self-refer for treatment or whose drug tests have been verified positive and were not terminated.

An assistance program may include:

- Monitoring an employee's progress through treatment and rehabilitation
- Providing education and training to all levels of the company on types and effects of drugs, symptoms of drug use, and their impact on performance and conduct
- Explaining the relationship of the EAP to drug testing, treatment, rehabilitation, and confidentiality issues
- Ensuring the confidentiality of test results, medical, and rehabilitation records is maintained

The goal of an EAP is to assist employees who have personal problems affecting their job performance. An EAP reinforces three important ideas:

- Employees are a vital part of business and valuable members of the team
- It's better to offer employees facing personal problems assistance, instead of disciplining or firing them
- Recovering employees become productive, effective members of the workforce

EAP providers are often outside companies that offer counseling and assistance services to employees. It's important to know the type of assistance offered by your company.

Assistance programs can be separated into three basic categories:

Level One – Referral Only

These are basic programs providing employees with referrals to community resources, self-help options, and substance abuse treatment providers.

Level Two – Contract

This type of EAP involves contracting with an outside EAP provider, and uses a direct referral process.

Level Three – In House

Programs in this category offer the highest support to employees, and usually include services beyond drug and alcohol assistance as well as increased healthcare coverage.

The company should provide you with information about the assistance program. It should explain:

- Who is eligible for the program and what costs or insurance coverage is available
- What services are available from the EAP?
- Stress Management - Stress caused by work pressures, family or financial problems can affect your performance on the job and lead to substance abuse. Addressing these issues can prevent problems from worsening
- How certain drugs and alcohol can lower inhibitions and cause someone's dietary and exercise plans to run off the track and result in health problems

Employee Specific Assistance

The EAP may also provide health-related topics specifically for the workforce these may include:

- Age and gender programs
- Information on osteoporosis, and the increased risk due to substance abuse in middle-aged women
- The effects alcohol can have on the liver and colon and risks of prostate cancer in middle-aged men
- Information for younger workers on the increased risks of STD's, HIV, and aids due to drug and alcohol use

Roles and Responsibilities

The information provided should:

- Define the relationship of an EAP to other organizational components, including roles and responsibilities of various personnel within the organization
- Make clear that participating in an EAP won't jeopardize future employment or advancement, but also won't protect workers from disciplinary action for continued poor job performance or rule infractions
- Identify the Medical Review Officer (MRO), and their function
- Outline procedures for supervisory referrals, voluntary referrals, and peer referrals

RETURN TO WORK AGREEMENT

A Return to Work Agreement (RTWA) is a process that may be established to allow employees who test positive for drugs or alcohol to return to work after successful completion of a treatment program.

The RTWA is a written document that defines the expectations the employer and the employee assistance/medical professional have of an employee who has completed treatment for alcohol and/or drug problems. It also sets the consequences if the expectations aren't met.

SHARED RESPONSIBILITY

A successful DFWP requires everyone's participation. Part of the company's policy will be the expectations for employees and management. It's important that all employees read and understand the company's DFWP. The more you know about the DFWP the better you'll be able to support it, and have it help protect you.

QUIZ

1. Which of the following is NOT a mandatory part of a DFWP?
 - A) Written Policy
 - B) Applicability
 - C) Enforcement
 - D) Assistance Program
2. What government agency certifies drug testing facilities?
 - A) DOT
 - B) SAMHSA
 - C) PMHSA
 - D) RTWA
3. What is the most common drug testing technique?
 - A) Blood
 - B) Urine
 - C) Hair
 - D) Sweat
4. The primary function of an EAP is to conduct drug testing.
 - A) True
 - B) False
5. An EAP may provide health-related topics specifically for the workforce.
 - A) True
 - B) False

SUBSTANCE ABUSE

A drug-free workplace means no alcohol or drugs at work. Even painkillers and some prescription drugs can be a danger. Why is a drug-free workplace important? Because drugs keep you from doing your best on the job and the effects can be dangerous to yourself and others.

Recognizing abuse and dependency problems can be divided into two categories: do you have a problem, or does a co-worker have a problem?

Think about these 2014 Center for Disease Control facts:

- Approximately one out of every ten adults in the United States is already addicted to alcohol
- Because addiction runs in families, many children of addicts are likely to become addicted themselves
- Alcohol and other drug abuse can lead to unsafe sexual behaviors that possibly result in contracting the HIV virus or other sexually transmitted diseases (STDs)

Substance abuse can cause people to lose interest in hobbies, work, friends, and family and can cause loss of drive and motivation. Many abusers have slower reflexes, making on-the-job accidents more likely.

HAVE YOU CROSSED THE LINE?

Many people who use alcohol or other drugs think they can stop any time. However, before they know it, using drugs is a problem they can't quit. Before you say "not me," take this brief test:

Have you ever:

- Been questioned about your alcohol or other drug use?
- Used alcohol or other drugs when alone?
- Missed work because you were sick from using alcohol or drugs?
- Had trouble stopping once you started using alcohol or drugs?
- Had legal problems because of your alcohol or drug use?
- Become jumpy, shaky, cranky, nervous, or have cravings if you can't use alcohol or drugs?
- Gone into debt because of your alcohol or drug use?
- Had to use more alcohol or other drugs to get the same effect?
- Used alcohol or drugs in the morning?
- Been in the hospital because of your alcohol or drug use?
- Used alcohol or drugs at work?

If you answered "yes" to any of these questions, there may be reason for concern. It's important to notice the signs of abuse and addiction early so that you can seek help. Addiction to alcohol or other drugs is a serious disease. The longer you wait to find help, the harder it is to get better.

If you have never used them, don't start. If you think your use is causing problems, think about stopping. Get help now.

Addictions are chronic diseases. Chronic means that once you have the disease, you'll have to live with it for the rest of your life. If you think your alcohol or drug use is a problem, there are ways to get help. Some options cost money and others don't. Helping yourself is the best way to help create a drug-free workplace.

SIGNS OF CO-WORKER SUBSTANCE ABUSE

How can you spot abuse or addiction? Sometimes it's not easy. There are different patterns of abuse and addiction. A recent Department of Labor (DOL) report showed a person abusing drugs or alcohol in the workplace:

- Is five times more likely to file a workers' compensation claim
- Has twice as many unexcused absences
- Is late for work three times more often
- Requests early "quitting time" twice as frequently
- Is more likely to steal company property
- Is five times more likely to injure themselves or co-workers
- Causes 40 percent of all industrial accidents
- Is 33 percent less productive
- Exhibits unexplained mood swings and often overreacts to constructive criticism
- Is seven times more likely to have recurring financial problems and wage garnishment

Indications that a co-worker has a problem are that the co-worker who has always been a great employee—full of energy, happy, and a hard worker—is now:

- Late to work or out sick more often
- Blaming poor work performance on others
- Inattentive and forgetful
- Making and receiving a lot of personal calls
- Always tired
- Asking for help with work
- Avoiding old friends and co-workers on the job
- Been to the hospital three times over the last few months and has been reported for safety violations by the supervisor

The final and perhaps most subtle area is that of social functioning. Changes in lifestyle, a shift among friends, and a diminished ability to judge social cues are the most common.

Some people are "binge" users: they get into trouble by drinking alcohol or using drugs off and on, only on the weekends or maybe only once a week, as an escape.

Others are "maintenance" users: they use alcohol or drugs regularly, often every day, to feel "normal".

ENABLING

If someone you know shows signs of alcohol or drug abuse, you may want to help. First, you'll need to know how. The best way to help a user face an alcohol or other drug problem is to make sure you don't ignore or cover up their behaviors or mistakes resulting from the abuse or addiction.

When you cover up for someone, it's enabling. Enabling and co-dependency in the workplace include:

- You offer to take on more than your share of the work because a co-worker is "going through a rough time" and is finding it hard to get his own work done on time
- A co-worker, who you suspect is high, has caused an accident, again. You know if the boss finds out, he'll be fired. You feel sorry for him, so you cover by lying to the boss
- One of your co-workers seems to have a problem with alcohol; she's late a lot, and sometimes in the morning or after lunch she smells like alcohol. You convince yourself that it's just a stage. You don't want to get her in trouble; she has a family, and besides, she's a great worker when she shows up

CONFRONTATION

If you feel someone in your workplace has a substance abuse problem you need to tell a supervisor as soon as possible. You can do this privately or outside of work, if it makes you more comfortable. Confronting a co-worker can be frightening and potentially dangerous, if not handled properly. For that reason, unless you have been trained on confrontation techniques, it's best to leave it to professionals.

Even if you're prepared to confront someone, he/she may not be ready to listen. If an impaired co-worker threatens your safety, or you see a co-worker get high or deal drugs on the job, he or she is risking the safety and health of everyone around and you need to report it to your supervisor.

If your company has an employee assistance program (EAP), you may want to talk to an EAP counselor about how to handle the coworker's alcohol or other drug use.

COMMONLY ABUSED DRUGS

For decades, alcohol topped the list as the drug of choice that could adversely affect an employee's health. However, the increasing use of over-the-counter medications, as well as abuse of illicit or prescription drugs, poses a widespread problem in workplaces in the United States.

According to the National Council on Alcoholism and Drug Dependence, in addition to alcohol, the most commonly abused types of drugs found in today's workplace include:

- Marijuana
- Cocaine
- Prescription Drugs
- Stimulants
- Inhalants
- Depressants
- Hallucinogens
- Designer Drugs

Marijuana

Use of marijuana may impair or reduce short-term memory and comprehension, alter sense of time, and reduce a person's ability to perform tasks requiring concentration and coordination.

Cocaine

Cocaine is widely abused and very dangerous. A smokable derivative of cocaine called crack is also used, and is considered one of the most powerfully addictive drugs on the illegal market.

Prescription Drugs

Today some of the most widely abused prescription drugs are the ones used to treat Attention Deficit Hyperactivity Disorder or ADHD, such as Adderall, Ritalin, and Vyvanse.

Stimulants

Because of the stimulating effect these drugs have, they are often abused by people who need to stay awake for long periods, or want to enhance their attentiveness and performance.

Inhalants

Varieties of substances are inhaled as gases or liquids. Many commercial products, such as spray paints, paint thinners, and cleaning fluids, are mixtures of volatile substances making it difficult to be specific about their effects.

Depressants

The term "narcotic" is given to drugs of the opiate family. Heroin and other semi-synthetic drugs such as Oxycodone and Percodan are also opium derivatives and frequently abused.

Hallucinogens

Hallucinogens such as PCP, ketamine and LSD are common hallucinogens that produce behavioral alterations that can be dangerous. Because these drugs block pain receptors, violent episodes can result in injuries to the abuser or others.

Designer Drugs

A variety of synthetic drugs sometimes referred to as "party drugs" include amyl nitrates, Ecstasy or Molly (MDMA), and Bath Salts (MDPV). These drugs produce a range of symptoms, and due to their design can be difficult to test reliably.

In part two of this training, we'll look at the signs and symptoms of each of these drug categories to help you spot potential abuse. We'll also look at the health effects of these drugs so you can better understand the impact they can have on you or a co-worker.

SUMMARY

In part two of this training we'll look at the signs and symptoms of each of these drug categories to help you spot potential abuse.

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QUIZ

1. Approximately one out of every ten adults in the United States is addicted to alcohol.
 - A) True
 - B) False
2. According to a Department of Labor report, what percentage of all work related accidents are due to drug or alcohol abuse?
 - A) 10
 - B) 25
 - C) 40
 - D) 60
3. Failure to report a co-worker with a substance abuse problem is a form of what?
 - A) Friendship
 - B) Enabling
 - C) Avoidance
 - D) Denial
4. After alcohol, what is the most commonly abused substance in the workplace?
 - A) Marijuana
 - B) Opiates
 - C) Prescription drugs
 - D) Depressants
5. Stimulants are frequently abused in the workplace to improve performance.
 - A) True
 - B) False

SECTION 2: SUBSTANCE ABUSE TRAINING

This part of your training contains eight training sessions that can be taken individually. These sessions will familiarize you with the dangers of drug and alcohol abuse, as well as the signs, symptoms, and effects of commonly-abused substances.

It's important that you understand these items. They will allow you to recognize substance abuse in the workplace, possibly prevent injuries, and ensure workplace safety.

ALCOHOL ABUSE

In 2013, over 10,000 people were killed in alcohol-impaired traffic crashes, accounting for 31 percent of all motor vehicle fatalities. Impaired driving continues to be a serious traffic safety and public health issue for states.

Drinking alcohol, or ethanol, is the most common form of drug abuse in the world. Addiction to alcohol is known as alcoholism. Alcohol is a depressant that produces a euphoric effect. Alcohol intoxication affects the brain, causing slurred speech, clumsiness, and slowed reflexes. Excessive consumption of alcohol leads to a delayed poisoning called a hangover.

The hangover starts after the euphoric effects of alcohol have worn off, typically in the night and morning after excessive drinking. However, the blood alcohol levels can still be above the legal limits imposed for drivers and operators of other dangerous equipment.

Alcohol stimulates insulin production, which speeds up the metabolism and can result in low blood sugar, causing irritability. Drinking alcohol in excess can lead to poisoning, which can be severe, even lethal.

A blood-alcohol content of .45 percent represents the amount that would kill half of the general population. This is about six times the .08 percent level, when people are considered legally drunk. Usually vomiting and/or unconsciousness occur before someone reaches the .45 level unless they have a high tolerance or a large amount of alcohol is consumed very quickly.

A chronic heavy drinkers' tolerance to alcohol may allow them to remain conscious at levels above .4 percent, despite the serious health dangers. Chronic consumption of alcohol can lead to an addiction that affects the liver and the brain. For example, cirrhosis, or scarring of the liver, is often found in heavy drinkers.

A 2014 World Health Organization report attributes over 300,000 deaths to alcohol in the U.S. alone, and over 3 million worldwide. Contrary to popular belief, drinking alcohol doesn't kill brain cells. Instead, it damages the ends of the nerve cells that bring messages to the cell, leading to a change in brain function. Most of this damage is temporary, but the recovery process changes nerve-cell structure permanently.

Excessive consumption of alcohol has been linked to some forms of cancer. An estimated 3.6 percent of all cancer cases worldwide are related to alcohol drinking, resulting in 3.5 percent of all cancer deaths.

SIGNS AND SYMPTOMS

The most common signs and symptoms of alcohol impairment are:

- Odor on breath
- Lack of coordination
- Euphoria
- Talkativeness and/or slurred speech

Alcohol is normally detectable by a breathalyzer for four to six hours. Alcohol will remain in your blood for about twelve hours, and can be detected in urine for up to five days.

It should be noted that the results detected by delayed blood or urine tests do not provide proof of impairment, only recent use.

It's estimated that close to 15 million workers in the U.S. are heavy drinkers resulting in high costs to companies as employees who drink a lot are often absent from work, suffer from more health problems, and are at a greater risk of harming themselves and others. In addition, people under the influence of alcohol commit a large portion of various violent crimes, including child abuse, homicide, and suicide.

Studies have shown that taking advantage of EAP services have helped millions of individuals and family members affected by alcohol problems. Alcohol treatment also improves an individual's functioning, leading to increased productivity at work.

QUIZ

1. Alcohol is classified as a _____.
 - A) Stimulant
 - B) Depressant
 - C) Schedule one drug
 - D) None of the above
2. Death from alcohol poisoning can occur at a blood alcohol content (BAC) of _____.
 - A) .08
 - B) .20
 - C) .45
 - D) .80
3. A hangover is an indication of mild alcohol poisoning.
 - A) True
 - B) False
4. Alcohol kills brain cells.
 - A) True
 - B) False
5. Alcohol can be detected by a urine test for _____.
 - A) 12 hours
 - B) 24 hours
 - C) 3 days
 - D) 5 days

IMPAIRED DRIVING

Alcohol, drugs, and driving don't mix. Any driver who operates a vehicle while impaired increases the chance of accidents, injuries, and death. Driving is serious business that requires skill and judgment, both of which are diminished through consumption of alcohol and drugs.

Depending on where you are, you may be charged with Driving While Intoxicated (DWI), Driving Under the Influence (DUI), or both. DWI usually refers to driving while intoxicated by alcohol, while DUI is used when the driver is charged with being under the influence of alcohol or drugs.

Both charges mean the arresting officer has reason to believe the driver is too impaired to continue to drive. In some jurisdictions, you can be charged with impaired driving (or driving under the influence) even if you do not meet the blood alcohol concentration levels for legal intoxication.

All 50 states and the District of Columbia have laws that specifically target drugged drivers. Almost one-third of states have adopted the per se standard. Per se means that any detectable amount of a controlled substance, other than a medicine prescribed by a doctor in a driver's body fluids, constitutes per se evidence of a "drugged driving" violation.

If a law enforcement officer administers an alcohol concentration (AC) test for driving under the influence and it shows an alcohol concentration of 0.08 percent or more (0.04 for commercial vehicle drivers and .01 for common carrier operators), your driving privileges will be suspended immediately.

A person with an alcohol concentration of 0.15 or higher is considered guilty of an extreme DUI. You, lose driving privileges with no eligibility for probation or suspended sentence, are subject to fines, and may be jailed. You may be required to undergo screening, education, or treatment and may be ordered to perform community service, and your vehicle may be equipped with a certified ignition interlock device.

Suspension

Your driving privileges will be suspended for anywhere from 30 days to two years following a conviction, or for refusing to submit to testing. Your license may also be suspended after a review of your driving record. If your license has been suspended, it will be automatically reinstated after your period of suspension is complete. You will have to pay a reinstatement fee as well as any applicable driver responsibility fees.

Revocation

A revoked driver's license is a more serious outcome than if your license has simply been suspended. If your license has been revoked, the only way to get your license back is to go through the driver's license restoration process, which will involve mountains of paperwork and reinstatement hearings. You could be denied a license or issued a restricted license instead of receiving a regular driver's license. You'll be required to pay the appropriate application fee and a reinstatement fee, and you may be required to file a Certificate of Insurance.

Insurance

If you're convicted of impaired driving your vehicle insurance may be cancelled, or the rate greatly increased. You will be classified as a high risk driver and may be required to file SR-22, proof of insurance, forms.

Most states require SR-22 certificates to be filed for a period of 3 years, and that you remain violation-free for that time.

Driver Improvement

Each time a person is convicted or forfeits bail for a moving traffic violation, points are assessed against their permanent driving record. If you accumulate too many points within a 12-month period, you may have to attend Traffic Survival School, or have your driving privilege suspended.

DUI convictions can greatly complicate a person's life. Along with the court-imposed fees, fines, and increased insurance rates, they can also impede one's ability to earn a living by not being able to drive.

Remember to use good sense and judgment when operating motor vehicles and if you're drinking or using controlled substances, don't drive!

QUIZ

1. If you are arrested for driving under the influence (DUI), your license will be suspended immediately.
 - A) True
 - B) False
2. You can be convicted of an extreme DUI if your blood alcohol content is above what level?
 - A) .08
 - B) .10
 - C) .15
 - D) .30
3. The driver of a commercial vehicle can be arrested for having a BAC of .04.
 - A) True
 - B) False
4. You can be charged with drugged driving for having any amount of a controlled substance in your body.
 - A) True
 - B) False
5. A driver's license suspension is more serious than a revocation.
 - A) True
 - B) False

MARIJUANA ABUSE

Marijuana, or cannabis, is the most frequently used illicit drug abused in the United States and worldwide. It's second only to alcohol as the most common cause seen in cases of driving under the influence of drugs. It's also the drug most often detected in workplace drug-testing programs.

The main active ingredient in marijuana is THC. The THC content in marijuana averaged 3% in the 1980s, but by 2012, it had increased to 12%. The US government classifies marijuana as a schedule one drug. A schedule one is defined as a drug with no currently accepted medical use and a high potential for abuse, and those who use or possess it are subject to prosecution.

Workers covered by federal drug testing programs are prohibited from using marijuana at any time. In addition, federal law allows employers in every state to prohibit employees from working while under the influence of marijuana and employers are permitted to discipline employees who violate this prohibition up to and including termination.

In 2009, the US Department of Justice introduced a change in its marijuana enforcement policy, issuing a memorandum encouraging federal prosecutors not to prosecute those who distribute marijuana for medical purposes in states where medical marijuana is legal.

However, now that voters in Colorado, Washington, Oregon, and Alaska have approved the recreational use of marijuana, the Department of Justice issued another memorandum reinforcing its right to contest state marijuana laws. This inconsistency about use, regulation, and legislation leaves employers in an unclear position of trying to maintain compliance with evolving legislation, while continuing to provide a safe workplace.

The majority of private employers across the U.S. are not required to drug test, and many state and local governments have statutes that limit or prohibit workplace testing unless required by state or federal regulations due to the nature of the job.

The US Department of Transportation (DOT), in its Drug and Alcohol Testing Regulations, state that marijuana use remains unacceptable for any safety-sensitive employee subject to drug testing under DOT regulations. This safety-sensitive category includes pilots, bus and truck drivers, locomotive engineers, subway operators, aircraft maintenance personnel, fire-armed security transit personnel, and ship captains, among others.

Federal agencies conducting drug testing must follow standardized procedures established by the Substance Abuse and Mental Health Services Administration (SAMHSA). Private non-union employers who require drug testing for applicants and/or employees are usually not required to follow SAMHSA's guidelines, but doing so helps to ensure the legality of testing. In unionized workforces, the implementation of testing programs must be negotiated through collective bargaining, even when federal regulations require testing.

The federal Drug-Free Workplace Act (DFWA), passed in 1988, requires all federal grantees to provide drug-free workplaces as a condition of receiving a federal contract of more than \$100,000 or a federal grant of any value. Employees who work for federal contractors may be subject to discipline, including termination if marijuana use is proven, regardless of whether its use is permitted by state law.

Marijuana Effects

Studies of marijuana's mental effects show the drug can:

- Impair or reduce short-term memory
- Alter sense of time
- Reduce one's ability to do things requiring concentration, swift reactions, and coordination, such as driving a car or operating machinery

Substances sold as THC on the street often turn out to be something else, such as PCP. When marijuana is smoked, the body absorbs the THC. When the body attempts to rid itself of the THC, it transforms it into metabolites. The effects of marijuana use last for at least 4-6 hours, long after the high is gone.

Abuse of multiple substances, such as drinking alcohol, along with using marijuana, increases the risk of accidents. Urine tests can detect THC metabolites for up to a week after people have ingested marijuana.

Using the 5 nanograms per milliliter cutoff for screening, as established by SAMHSA, takes into consideration all types of users. Given the correlation between a marijuana 4 nanogram level and a Blood Alcohol Content of approximately .04 to .05 percent, the 5 nanogram cutoff would roughly equal the current level of alcohol impairment for safety-sensitive workers under the DOT testing laws of .04 percent blood alcohol.

As a result, the 5-nanogram cutoff may be used to establish an initial presumption of impairment; however, the mere presence of this level of THC may not establish acute impairment in an individual worker. That can only be determined when a medical evaluation for impairment has been performed, and the behavior, which led to the testing is considered.

Fewer than 20 states explicitly address marijuana and driving; of these, 11 have zero tolerance for any level of THC. The consensus is that the 5 ng/ml level should be used to ensure a safe workplace.

Signs and Symptoms

Some immediate physical effects of marijuana include a faster heartbeat and pulse rate, bloodshot eyes, and a dry mouth and throat. There are no scientific indications that marijuana improves hearing, eyesight, and skin sensitivity.

A common reaction to marijuana is the "acute panic anxiety reaction". People describe this reaction as an extreme fear of losing control and paranoia, which causes panic. The symptoms usually depart within a few hours.

Long-term regular users of marijuana may become psychologically dependent. They may have a hard time limiting their use and may need larger doses of the drug to get the same effect. Users may develop social and personal problems affecting their employment.

A synthetic version of marijuana, commonly known as spice or K2, is becoming increasingly popular. “Synthetic” marijuana displays the same symptoms as marijuana, but because it’s synthetic, the effects can be more powerful and cause additional side effects. K2 products are smoked in joints or pipes, but some users make it into a tea.

Short-term effects include increased agitation, pale skin, seizures, vomiting, profuse sweating, uncontrolled spastic body movements, elevated blood pressure, heart rate, and palpitation. The onset of this drug is 3-5 minutes, and the duration of the high is 1-8 hours. In addition to physical signs of use, users may experience speech difficulties, severe paranoia, delusions, and hallucinations.

Marijuana is the second most widely abused drug after alcohol. Many people consider it less harmful than alcohol or tobacco, but like those, marijuana can be addictive and carries its own health risks. Chronic use can result in decreased mental capacity, reduced energy levels, and lung damage. The increased risks of injuries and accidents have led courts to rule that companies don’t have to tolerate medical or recreational marijuana use at the workplace, even if state law permits the use.

QUIZ

1. Marijuana is the most commonly detected drug in the workplace.
 - A) True
 - B) False
2. Marijuana is classified as a schedule one drug.
 - A) True
 - B) False
3. What government agency has established a cutoff limit for marijuana?
 - A) DOT
 - B) HHS
 - C) SAMHSA
 - D) OSHA
4. Synthetic marijuana (K2) is more potent than traditional marijuana, and the effects can last longer.
 - A) True
 - B) False
5. Which is NOT a symptom of marijuana use?
 - A) Bloodshot eyes
 - B) Dry mouth
 - C) Improved hearing
 - D) Slowed reflexes

DEPRESSANT ABUSE

Depressants sometimes referred to as sedatives, tranquilizers, or painkillers, fall into three categories: benzodiazepines, barbiturates, and opioids. These substances slow brain activity, making them useful for treating anxiety, sleep disorders and pain relief.

BENZODIAZEPINES

Drugs such as Valium and Xanax are sometimes prescribed to treat anxiety, acute stress, and panic attacks. The more powerful benzodiazepines, such as Halcion and ProSom, are prescribed for short-term treatment of sleep disorders. Usually benzodiazepines are not prescribed for long-term use because of the risk for developing tolerance, dependence, or addiction.

Other commonly abused drugs that can be grouped in this category include rohypnol and G-H-B. These are also described as designer drugs, and we'll discuss those in another module.

Signs and Symptoms

- Effects of these types of depressants can include:
- Feelings of euphoria
- Lowered inhibitions
- Memory lapses
- Drowsiness
- Dizziness and headaches
- Tremors or uncontrolled shaking
- Decreased body temperature, blood pressure and heart rate

Side Effects

The abuse of these drugs can cause:

- Nausea
- Diarrhea
- Urinary incontinence

BARBITURATES

Barbiturates such as Mebaral, Luminal, and Nembutal, are used medically to reduce anxiety or to help with sleep problems. They are used less frequently because of their higher risk of overdose compared to benzodiazepines. Once addicted to barbiturates, users often seek out the drug to obtain the same kind of high as achieved before.

However, because users develop a tolerance to the drug and require more and more of it to achieve the same result, the risk of an overdose is increased. Barbiturate addicts abuse the drug to feel an extreme calm and contentedness.

Signs and Symptoms

Symptoms of barbiturate abuse include confusion, impaired judgment, sedation, and fatigue.

Side Effects

The side effects of barbiturate abuse include respiratory depression, nausea, headache, low blood pressure, and fever.

OPIOIDS

The most well-known and a commonly abused opioid is heroin. Heroin can be injected, inhaled by snorting or sniffing, or smoked. It is highly addictive and has experienced a resurgence in popularity recently. After injecting heroin, users report feeling a surge of euphoria or a “rush”, along with a dry mouth, a warm flushing of the skin, heaviness of the extremities, and clouded mental functioning. Following this initial euphoria, the user goes “on the nod”, an alternately wakeful and drowsy state. Users who do not inject the drug may not experience the initial rush, but other effects are the same.

Heroin abuse continues to be a growing problem in the U.S. and around the world. A report by the CDC shows that over 8,200 died from heroin overdoses in 2013. It’s believed by some experts that the rise in popularity of heroin is because it provides similar effects to prescription opioids, but at a fraction of the cost.

A 2011 survey by SAMHSA estimated that 607,000 persons per year used heroin in the years 2009-2011, compared to 374,000 during 2002-2005. Heroin can provide a fast high, but it can take over your life, and become fatal just as quickly. Heroin addiction is treatable, but the path to recovery requires a commitment that can often last years or even decades.

PRESCRIPTION DRUGS

Medications that fall within the opioid class include Vicodin, OxyContin, Percocet, morphine and codeine. Opioids can produce drowsiness and mental confusion. Some people experience a euphoric response to opioid medications. Those who abuse opioids may seek to intensify their experience by taking the drug in ways other than those prescribed. For example, people who abuse OxyContin may snort or inject it, which increases their risk for serious medical complications, including overdose.

OTC DRUGS

Over-the-counter (OTC) medications, such as certain cough suppressants, sleep aids, and antihistamines, can be abused for their psychoactive effects. Others, when taken for their "hallucinogenic" properties, can cause confusion, psychosis, coma, and even death.

Cough syrups and cold medications containing dextromethorphan, often referred to as dex or robo, were the most commonly abused OTC medications in 2010. At high doses, a key ingredient in cough syrup can act like PCP or ketamine.

Signs and Symptoms

The abuse of depressants, regardless of type, generally induces feelings of euphoria, relaxation, and reduced anxiety. These effects, along with its addictive qualities, make it one of the most commonly abused pharmaceutical drugs in the U.S.

The symptoms of abuse include:

- Dry Mouth
- Fatigue
- Constricted pupils
- Dizziness
- Nausea
- Hallucinations

Side Effects

Acute overdoses of depressants can produce:

- Drowsiness
- Respiratory depression or arrest
- Muscle weakness
- Cold and clammy skin
- Low blood pressure and heart rate
- Coma or death

Treatment

Recently an opioid overdose treatment has been approved for use involving the drug Naloxone. Naloxone is a medication that counters the effects of opioid overdose. It can reverse the depression of the central nervous system, respiratory system, and hypotension.

Products that provide a disposable injection system or a nasal spray are now being marketed and emergency responders are being trained on their use in many areas. Sold under names such as Narcan Nalone, and Evzio, it can be used to treat people who have overdosed on heroin or painkiller opiates, such as morphine, oxycodone, or Vicodin.

Depressant abuse can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to prevent accidents at the workplace.

CONCLUSION

Depressant abuse can cause serious health problems and safety issues. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to avoid accidents at the workplace

QUIZ

1. What are the three categories of depressants?
 - A) Opioids
 - B) Benzodiazepines
 - C) Hallucinogens
 - D) Barbiturates
2. Which drug listed is NOT considered a depressant?
 - A) Heroin
 - B) Oxycodone
 - C) Xanax
 - D) MDMA
3. What is NOT a symptom of depressant abuse?
 - A) Dry mouth
 - B) Dizziness
 - C) Dilated pupils
 - D) Hallucinations
4. Over the counter drugs can be abused and cause hallucinogenic effects.
 - A) True
 - B) False
5. How can treatments to counter the effects of depressant overdoses be administered (select all that apply)?
 - A) Orally
 - B) Injection
 - C) Ingestion
 - D) Inhalation

STIMULANT ABUSE

Stimulants, as the name suggests, increase alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration. Stimulants have traditionally been used to treat asthma and other respiratory problems, and a variety of other ailments. However, as their potential for abuse and addiction became apparent, the medical use of stimulants began to wane.

Signs and Symptoms

There are varieties of drugs, both legal and illegal, that are categorized as stimulants. Regardless of the substance, the symptoms of stimulant abuse are standard and include:

- Euphoria
- Hyperactivity and increased alertness
- Increased desire to talk
- Sensitivity to light and sound

Side Effects

Abusers of stimulants may experience the following problems:

- Dilated pupils
- Anxiety and paranoia
- Twitching
- Reduced appetite
- Increased heart rate, blood pressure, and body temperature
- Disturbed sleep patterns
- Nausea
- Panic and psychosis

COCAINE

The once popular cocaine is a powerful stimulant that causes euphoria, intense hikes in energy and heightened anxiety when it is smoked, eaten, injected, or snorted. The popularity of cocaine and its derivative, crack cocaine, has decreased recently as less costly and easier-to-obtain alternatives have become available. It is, however, still around and considered one of the most addictive substances available. The use of cocaine resulted in 4,300 deaths in 2013, up from 2,400 in 1990. While there are some medical applications for the use of cocaine such as a topical anesthetic for eye and nasal surgery, it's controlled internationally, and the majority of cocaine use is illegal.

Crack Cocaine

Crack is a powerful stimulant that is made of a mixture of cocaine and baking soda. When processed, it turns into a hardened, more potent mixture that can be smoked to produce intense effects. The name “crack”, is given to the substance because of the crackling noise it makes when the drug is smoked.

The effects of crack cocaine are relatively short, ranging from thirty minutes to two hours if inhaled, and an even shorter period if smoked or injected. Crack is such a strong stimulant that it creates severe stresses on the heart, the vascular system, the lungs, and the brain. Blood vessels constrict from the stimulation of the drug and over time, can harden. Then when further stimulation occurs, these damaged blood vessels can rupture, leading to a stroke, a fatal heart attack, or cardiac arrest.

For a short time, performance and dexterity may improve. Users report an increasing sense of energy and alertness, an extremely elevated mood, and a feeling of supremacy. However, as soon as the high wears off, users will exhibit irritability, paranoia, restlessness, and anxiety. This can lead to accidents as drivers on crack can make unpredictable moves and lose control of their vehicles.

METHAMPHETAMINE

Methamphetamine is a psychostimulant that induces a sense of euphoria and heightened energy when it is smoked, injected, snorted, or consumed. This highly addictive drug is commonly abused and has significantly grown in popularity over the past ten years.

Crystal meth is short for crystal methamphetamine, which is just one form of the drug methamphetamine. Crystal meth is commonly used as a “club drug”, taken while partying in nightclubs or at raves. Its most common street names are ice or glass.

Signs and Symptoms

In addition to the short-term symptoms listed above, crystal meth symptoms can include:

- Bizarre, erratic, and sometimes violent behavior
- Hallucinations, hyper-excitability, and irritability
- Delusions (for example, the sensation of insects crawling under the skin)

Long Term Effects

High doses can cause convulsions, seizures, and death. Prolonged use of meth can cause:

- Permanent damage to the blood vessels of the heart and brain
- Liver, kidney, and lung damage
- Destruction of nasal tissues if snorted
- Breathing problems if smoked
- Infectious diseases and abscesses at injection sites or due to compulsive scratching
- Malnutrition and weight loss
- Severe tooth decay
- Disorientation, apathy, and confused exhaustion
- Psychological dependence
- Psychosis
- Depression
- Damage to the brain similar to Alzheimer’s disease, stroke, and epilepsy

Meth is a dangerous and potent chemical and, as with all drugs, a poison that first acts as a stimulant but then begins to destroy the body.

MDMA

MDMA, often referred to as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is taken orally, usually as a capsule or tablet. The popular term Molly (slang for “molecular”) refers to the pure crystalline powder form of MDMA, usually sold in capsules. The drug’s effects last approximately 3 to 6 hours, although it is not uncommon for users to take a second dose of the drug as the effects of the first dose begin to fade.

Signs and Symptoms

MDMA produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

FLAKKA

A potent new designer drug called flakka is making headlines across the United States. Flakka is similar to the bath salts drugs. Both are synthetic versions of naturally occurring amphetamine-like drugs. Flakka, also known as gravel, was banned by the U.S. in early 2014. Despite this, flakka’s availability has been surging in parts of the U.S. Flakka is a potent stimulant at low doses, but can cause bizarre behavior if a user takes too much.

Flakka can be used many different ways, including swallowing, snorting, or injecting. It also can be dissolved into liquid and inhaled as e-cigarette vapor. Like other drugs of this type, flakka can cause a condition called “excited delirium” that includes hyper-stimulation, paranoia, and hallucinations that can lead to violent aggression and self-injury.

Some drug experts are suggesting that flakka may be the next drug epidemic because it’s more addictive than meth, more dangerous than cocaine, and the cheapest of the three.

Signs and Symptoms

Commonly observed symptoms of flakka abuse include bizarre behavior, agitation, paranoia, and delusions of superhuman strength.

Side Effects

The drug has been linked to deaths by suicide as well as heart attack. It can also dangerously raise body temperature and lead to kidney damage or kidney failure.

LEGAL DRUGS

Most recently, there has been a significant increase of the abuse of prescription stimulants because they are often easier to get. The most popular of these are drugs used to treat ADHD, narcolepsy, and occasionally depression.

Signs and Symptoms

Stimulants, such as Dexedrine, Adderall, Ritalin, and Concerta can induce:

- A feeling of euphoria
- Increased blood pressure and heart rate
- Constricted blood vessels
- Increased blood sugar

The increased use of stimulant prescriptions over the last two decades has led to greater availability and increased risk for abuse. Due to the fact that these are prescription drugs, they are perceived by many to be generally safe and effective; prescription stimulants are increasingly being abused.

Because these drugs increase the availability of certain neurotransmitters and increase the blood flow to muscles, they are increasingly popular among some academic professionals, athletes, performers, older people, and both high school and college students. Users frequently report improvements in focus and concentration, and sports performance. This type of use poses potential health risks, including addiction, cardiovascular problems, and psychosis.

As with other drugs, it's easy for individuals to become dependent upon or addicted to stimulants. Withdrawal symptoms associated with discontinuing stimulant use include fatigue, depression, and disturbance of sleep patterns. The repeated abuse of some stimulants can lead to feelings of hostility or paranoia, even psychosis.

Further, taking high doses of a stimulant may result in dangerously high body temperature and an irregular heartbeat. There is also the potential for cardiovascular failure or seizures. According to results from the 2010 National Survey on Drug Use and Health, an estimated 2.4 million Americans used prescription drugs non-medically for the first time within the past year, which averages to approximately 6,600 new users per day.

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

CONCLUSION

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps eliminate it from the workplace.

QUIZ

1. Which of the following drugs is NOT considered a stimulant?
 - A) Cocaine
 - B) Ritalin
 - C) DXM
 - D) MDMA
2. Identify the common symptoms of stimulant abuse (select all that apply):
 - A) Increased energy
 - B) Talkativeness
 - C) Twitching
 - D) Loss of coordination
3. Which of the stimulants listed below are known to cause violent behavior (select all that apply)
 - A) Adderall
 - B) Crystal Meth
 - C) Flakka
 - D) Cocaine
4. The increase in the abuse of prescription stimulants is to improve mental and physical performance.
 - A) True
 - B) False
5. What are the side effects of stimulant abuse (select all that apply)?
 - A) Nervousness
 - B) Weight loss
 - C) Reduced blood pressure
 - D) Drowsiness

HALLUCINOGEN ABUSE

Hallucinogens are a class of drugs that cause distortions in a person's perceptions of reality. Hallucinogens exist as both plants and as synthetically made substances. Hallucinogens are divided into two categories: classic hallucinogenics, and dissociative.

CLASSIC HALLUCINOGENS

Classic hallucinogenics include:

- LSD
- Mescaline (Peyote)
- Psilocybin
- DMT

Under the influence of hallucinogens, people see images, hear sounds, and feel sensations that seem real but do not exist. Some hallucinogens also produce rapid, intense emotional swings.

LSD

Lysergic Acid Diethylamide, or LSD, was once one of the most popular hallucinogens, but has since been replaced in popularity, due in part to its limited availability.

Mescaline

Mescaline is a naturally occurring hallucinogen found in certain type of cacti. As with most hallucinogens, mescaline causes altered thought processes and visual delusions. The effects of mescaline can last in excess of 12 hours.

Psilocybin

Psilocybin is the active ingredient in what are known as Magic Mushrooms. Psilocybin is another naturally occurring hallucinogen found in many species of mushrooms. Psilocybin generally causes feelings of euphoria, a distorted sense of time, and visual and mental hallucinations. Consuming psilocybin mushrooms can cause pupil dilation, changes in heart rate and blood pressure, nausea, and panic attacks. The effects of psilocybin can last up to six hours.

DMT

Dimethyltryptamine is a hallucinogenic compound used in religious rituals in the Amazon, and is growing in popularity. DMT is a plant-based mixture that can be smoked, injected, or made into a tea.

A National Survey on Drug Use and Health found that the number of people in the U.S. who have used DMT in some form has been up almost every year since 2006 -- from an estimated 688,000 in 2006 to 1,475,000 in 2012. DMT can produce powerful psychedelic experiences including intense visuals, euphoria, and hallucinations when combined with certain other drugs

DISSOCIATIVE DRUGS

The drugs in the dissociative category are both illegal and popular with abusers. The most common are:

- PCP
- Ketamine
- MDMA
- DXM
- Salvia

PCP

PCP, also known as Angel Dust, was originally intended as an anesthetic, but was never approved because of its psychological effects. Today it's an illegally-produced synthetic drug sold as tablets, capsules, or white or colored powder. It can be snorted, smoked, or eaten. PCP is sometimes combined with marijuana to create what is known as supergrass or killer joints.

Signs and Symptoms

A moderate amount of PCP often causes users to feel detached, distant, and estranged from their surroundings. Numbness of the extremities, slurred speech, and loss of coordination may be accompanied by a sense of strength and invulnerability.

A blank stare, rapid and involuntary eye movements, and an exaggerated walk are among the more observable effects. Auditory hallucinations, image distortion, severe mood disorders, and amnesia may also occur. In some users, PCP may cause acute anxiety and a feeling of impending doom; in others, paranoia and violent hostility, and in some, it may produce a psychosis indistinguishable from schizophrenia.

Side Effects

The effects of PCP include a slight increase in breathing rate and a more pronounced rise in blood pressure and pulse rate. Respiration becomes shallow and flushing and profuse sweating can be evident.

At high doses of PCP, there is a drop in blood pressure, pulse rate, and respiration. Nausea, vomiting, blurred vision, uncontrolled eye movements, drooling, loss of balance, and dizziness may also occur. High doses of PCP can also cause seizures, coma, and death (though death more often results from accidental injury or suicide during PCP intoxication).

Ketamine

Ketamine, or Special-K, is an anesthetic used in veterinary medicine. Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

MDMA

MDMA, known as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. It produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

MDMA was initially popular among young adults in the nightclub scene or at raves, but the drug now affects a broader range of users. MDMA is usually taken as a capsule or tablet, with the effects lasting 3 to 6 hours.

DXM

DXM stands for Dextromethorphan, It's known as robo after a popular brand of cough syrup. DXM is a cough suppressant and expectorant ingredient in some over-the-counter cold and cough medications. Adolescents and young adults often abuse these. The most common sources of abused DXM are "extra-strength" cough syrup.

Salvia

Salvia is a fairly new addition to the list of hallucinogens. Salvia, also known as "magic mint", is a member of the mint family, native to southern Mexico. Salvia can be smoked, chewed, or consumed by drinking the extracted juices.

Signs and Symptoms

The effects of salvia use are similar to other hallucinogens and have been described as intense but short-lived, appearing in less than 1 minute and lasting less than 30 minutes. The effects of hallucinogens are highly volatile in that there is no real way of knowing how the user will react from one use to the next. The reactions to salvia tend to be varied and unreliable, which is the primary concern when this drug is taken.

Different effects can be produced for different people and even for the same people at different times. The main reason for this is due to the variation in the active components of the drugs with each use.

The symptoms of hallucinogen use can vary by dosage:

- Low doses produce a numbness in the extremities and intoxication, characterized by staggering, unsteady gait, slurred speech, bloodshot eyes, and loss of balance.
- Moderate doses will produce a numbing effect similar to pain killers or anesthetics.
- High doses may lead to convulsions.

Users can really never know how much of the drug they are taking, due to the tendency of the drug to be made illegally in uncontrolled conditions.

When ingested, users may experience any number of effects from hallucinogens, some of which include:

- Mood swings
- Disconnection from reality
- Tactile, visual, or auditory hallucinations

Side Effects

Taking hallucinogens can lead to the following serious side effects:

- Increased heart rate, blood pressure, and body temperature
- Tremors or shakes
- Sweating
- Nausea and vomiting
- Poisoning
- Shallow breathing
- Loss of muscle control

Using hallucinogenic drugs can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. Hallucinogen abuse can eventually disrupt normal chemical processes leaving the brain in a diminished state.

QUIZ

1. All hallucinogenic drugs are synthetically made substances.
 - A) True
 - B) False
2. What are the two categories of hallucinogenic drugs?
 - A) Visual
 - B) Classic
 - C) Dissociative
 - D) Synthetic
3. What is a common street name for MDMA?
 - A) Magic mint
 - B) Ecstasy
 - C) DXM
 - D) Gravel
4. Which of the following is NOT a symptom of hallucinogen abuse?
 - A) Slurred speech
 - B) Hyperactivity
 - C) Mood swings
 - D) Hearing things
5. Salvia is an organic hallucinogen from Mexico.
 - A) True
 - B) False

INHALANT ABUSE

Many products found in the home or workplace, such as spray paints, markers, glues, and cleaning fluids contain substances that have mind-altering properties when inhaled. People do not typically think of these products as drugs because they were never intended for that purpose.

These products are used as recreational drugs for their intoxicating effect. Inhaling these substances for this purpose is called huffing, sniffing, dusting, or bagging. Teens and young adults do this most often, but not exclusively.

Abusers of inhalants breathe them in from a container or dispenser directly into their nose or mouth, or place a chemical-soaked rag in their mouth. Abusers may also inhale fumes from a balloon or a plastic or paper bag. Because the high produced by inhalants usually lasts just a few minutes, abusers often try to prolong it by continuing to inhale repeatedly over several hours.

A wide range of substances are abused as inhalants, these include:

- Volatile solvents - liquids that vaporize at room temperature such as gasoline
- Industrial or household products, - These include paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, and lighter fluid
- Art or office supply solvents - Art or office supply solvents, including correction fluids, felt-tip marker fluid, electronic contact cleaners, and glue
- Aerosols - Sprays that contain propellants and solvents. These include aerosol propellants in items such as spray paints, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, and vegetable oil sprays
- Gases - These can be found in household or commercial products such as butane lighters and propane tanks, whipped cream aerosols or dispensers, called whippets, and refrigerant gases
- Medical anesthetics – These include ether, chloroform, halothane, and nitrous oxide
- Nitrites – These are used primarily as sexual enhancers such as amyl nitrites, commonly known as “poppers”

Amyl nitrite is still used in certain diagnostic medical procedures. Although not as widely used as in the past. When marketed for illicit use, organic nitrites are often sold in small brown bottles labeled as video head cleaner, room odorizer, leather cleaner, or liquid aroma.

Signs and Symptoms

The effects of solvent intoxication can vary widely depending on the dose, and the type of solvent or gas being inhaled. A person who has inhaled a small amount of rubber cement or paint thinner vapor may be impaired in a manner resembling being drunk.

A person, who has inhaled a larger quantity of solvents or gases, or a stronger chemical, may exhibit stronger effects such as slurred speech, euphoria, nausea, fainting, stupor, distortion in perceptions of time and space, hallucinations, and emotional disturbances. Most abused inhalants, other than nitrites, depress the central nervous system much like alcohol.

The effects are similar, including slurred speech, lack of coordination, euphoria, and dizziness. Inhalant abusers may also experience light-headedness, and delusions. With repeated inhalations, many users feel less inhibited and less in control. Some may feel drowsy for several hours and experience a lingering headache.

Side Effects

Regardless of which inhalant is used, abuse can lead to injury or death. When a gas that was stored under high pressure is released, it cools rapidly and can cause frostbite if it is inhaled directly from the container. Nitrous oxide, which can be used as an automotive power adder, is one such chemical. Its cooling effect is potentially lethal to a person.

Many inhalants are volatile chemicals and can catch fire or explode, especially when used where people are smoking. As with many other drugs, users may also injure themselves due to loss of coordination or impaired judgment, especially if they attempt to drive.

Solvents have many potential risks in common, including pneumonia, cardiac failure or arrest, and aspiration of vomit. The inhaling of some solvents can cause hearing loss, muscle spasms, and damage to the central nervous system and brain. Serious but potentially reversible effects include liver and kidney damage and blood-oxygen depletion.

Death from inhalants is usually caused by a very high concentration of fumes. Deliberately inhaling solvents from an attached paper or plastic bag or in a closed area greatly increases the chances of suffocation. Brain damage often occurs from chronic long-term use as opposed to short-term exposure.

Abusing inhalants can be lethal. Sniffing highly concentrated amounts of the chemicals in solvents or aerosol sprays can directly cause heart failure within minutes. This syndrome, known as “sudden sniffing death”, can result from a single session of inhalant use by an otherwise healthy person.

High concentrations of inhalants may also cause death from suffocation, especially when inhaled from a paper or plastic bag or in a closed area. Even when using aerosols or volatile products for their intended purposes like painting or cleaning, you should always do so in a well-ventilated room or outdoors.

VAPING

Electronic cigarettes, also called e-cigarettes, are battery-operated devices designed to deliver nicotine with flavorings and other chemicals to users in vapor instead of smoke. They can be manufactured to resemble traditional tobacco cigarettes, cigars or pipes, or even everyday items like pens or USB memory sticks. Newer e-cigarettes have refillable cartridges that can be filled with substances other than nicotine, providing a new way to deliver other drugs. This practice is often referred to as dabbing.

DABBING

The dab phenomenon is rapidly becoming popular. Dabs are forms of high-grade hash, usually made with a process involving butane or CO². BHO, or butane hash oil, is a marijuana product extracted from the plant and concentrated into a smokable gummy substance sometimes called "budder," "honeycomb", or "earwax".

It's widely believed that BHO has a higher concentration of THC, and is therefore much stronger than traditional marijuana or hashish. Vape pens, or vaporizer pens, usually consist of an electronic heating system and a cartridge holding hash oil. These provide a virtually smoke-free way to consume these concentrates, making the practice of dabbing that much more difficult to detect.

CONCLUSION

Abuse of inhalants is most common in teens and young adults. Huffing, sniffing, or bagging can cause serious health issues or death. Companies who employ teen workers where sources of inhalant materials are readily available need to be on the lookout for symptoms of abuse particularly in younger workers.

Companies and workers involved in air conditioning repair work should be aware of the signs of suspected refrigerant inhalant abuse. These situations can include:

- Frequent AC repair calls to the same home or neighborhood
- Refrigerant runs low prematurely
- Damaged AC units

If these signs are detected, workers should share that information with homeowners in a considerate manner. Remember, these signs don't confirm abuse, and inhalant abusers could be anyone, someone living in the home, or others in the neighborhood.

QUIZ

1. Which is NOT a term used to describe inhalant abuse?
 - A) Huffing
 - B) Bagging
 - C) Dusting
 - D) Whiffing
2. How long do the effects of abusing inhalants usually last?
 - A) 1 to 5 minutes
 - B) 15 to 20 minutes
 - C) 30 to 60 minutes
 - D) 1 to 3 hours
3. Amyl nitrate that can be purchased for illegal purposes is referred to as (select all that apply):
 - A) Video Head Cleaner
 - B) Air Dusters
 - C) Room Odorizer
 - D) Leather Cleaner
4. When gases stored at high pressure are inhaled, they can cause injury due to frostbite.
 - A) True
 - B) False
5. Using e-cigarettes to inhale illegal substances is called what?
 - A) Dabbing
 - B) Vaping
 - C) Blasting
 - D) Snorting

DESIGNER DRUG ABUSE

The term “designer drugs” refers to drugs that are created in a laboratory. A designer drug is created by changing the properties of a drug that comes from a plant, such as cocaine, morphine, or marijuana, using chemistry. The resulting designer drugs typically have a new, different effect on the brain or behavior.

MDPV, Ecstasy, ketamine, MXE, GHB, Rohypnol, and bath salts are some examples of designer drugs.

MDPV

MDPV is the active ingredient found in many drugs labelled as plant food or bath salts. It acts as a stimulant, and has been reported to produce effects similar to those of cocaine and amphetamines. The effects of MDPV last 3 to 4 hours, with the after effects of high blood pressure and rapid heart rate lasting 6 to 8 hours.

Signs and Symptoms

Common symptoms of MDPV abuse include:

<ul style="list-style-type: none">• Agitation• Dilated pupils• Hallucinations	<ul style="list-style-type: none">• Confusion• Paranoia• Anxiety
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Side Effects

Reported side effects for MDPV and other bath salts drugs include heart palpitations, high blood pressure, increased body temperature, nausea, and violent or suicidal behavior. Although efforts have been made to prohibit the sale of the chemicals used to make bath salts, new variations using alternate chemicals continue to appear, and these new formulas can still be bought at head shops and on the street around the country.

MDMA

MDMA, the active ingredient in Ecstasy, is a member of the amphetamine class of drugs, and falls under other broad categories of substances, including stimulants and psychedelics. MDMA is one of the most widely used illicit drugs in the world. MDMA is available in pill form, commonly known as Ecstasy, and more recently in crystalline form known as Molly, which is a purer form of the drug, which greatly increases the risk of overdose.

Ecstasy and Molly are popular with teenagers and young adults who are more likely to use it on weekends and at parties. The effects of MDMA are more consistent than those produced by most psychedelics, and its distinct euphoria is unlike other stimulants.

The recent growth in the popularity of Molly is due to the claims that it's “pure”. While there's no way to tell if that's true, it's almost certainly more potent than Ecstasy pills. Another factor is that it's relatively cheap. Usually around \$30-\$40 for 100mg, which is typically enough for a first-time user.

Side Effects

Depression and loss of memory can occur more frequently in long-term MDMA users. A chronic user can suffer severe depression, fatigue, and hopelessness and have reported being extremely depressed after periods of prolonged use; this is sometimes referred to as suicide Tuesday. Suicide Tuesday is the name given to the trend for people who use ecstasy all weekend, then commit suicide when they fully come down from the high on Tuesday.

Due to its near-universal illegality, the purity of a substance sold as Ecstasy is unknown to the user. Pills may contain other active substances meant to stimulate in a way similar to MDMA, such as amphetamine, methamphetamine, ephedrine, or caffeine.

KETAMINE

Ketamine is an anesthetic used in veterinary medicine. Unlike the other drugs listed here, ketamine, or Special-K, is a dissociative hallucinogen. This means it causes a sense of detachment between a person's body and the external world.

The effects of ketamine are relatively short in nature, lasting about 30 to 60 minutes. Ketamine comes in a clear liquid and a white or off-white powder form, which can be injected, mixed in a drink, or combined with tobacco or marijuana and smoked.

Signs and Symptoms

Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

Side effects

Ketamine can cause serious bladder problems with severe pain and difficulty passing urine, and can lead to surgical removal of the bladder.

Detection

While most drug tests don't specifically look for ketamine, unlike other designer drugs, it can be detected in urine samples for two to four days after use.

MXE

Methoxetamine, or MXE, is a dissociative sedative similar to ketamine, but stronger and longer lasting. MXE is a white powder that has stimulant and dissociative effects, with the stimulant effects appearing at lower doses, and the dissociative effects at higher doses.

MXE can be ingested or injected. Users of lower doses of the drug report feeling calm, with an increase in energy, euphoria, and disconnection from problems and concerns. At higher doses, the effects are different and much more intense. At these higher levels, the effects are more similar to related drugs ketamine and PCP.

Signs and Symptoms

The effects of MXE include:

- Feelings of intense intoxication
- Involuntary eye movement
- Auditory and visual hallucinations
- A feeling of disconnection from your body

Side effects

Some of the side effects of MXE include paranoia, nausea, high blood pressure, and rapid heart rate. Injecting MXE can damage the veins and can cause serious problems such as abscesses and blood clots.

GHB

GHB is a depressant that is commonly referred to as a “club drug” or “date rape” drug that is often placed in alcoholic beverages. GHB, also known as G, liquid ecstasy, or liquid X, is a depressant used both as a prescription sleep-aid and as a recreational intoxicant. It's known for its ability to induce a short (several hour) coma-like sleep at high doses.

Due to the number of GHB-related deaths in combination with its addiction potential, it was categorized as a schedule one drug by Federal law in 1999. GHB that's bought illegally on the street or over the internet comes in liquid form or as a white powder, and is taken orally and frequently combined with alcohol.

Signs and Symptoms

The common symptoms of GHB use are:

- Euphoria
- Increased energy
- Dizziness
- Impaired coordination
- Hallucinations
- Confusion

Side effects

The side effects of GHB use include:

- Seizures
- Muscle twitches
- Tooth decay
- Insomnia
- Low blood pressure
- Rash

The combination of GHB and alcohol can result in a coma-like condition, and result in death due to depressed breathing conditions.

The production of GHB usually involves the use of lye or drain cleaner mixed with GBL, a chemical cousin of GHB and an industrial solvent often used to strip floors.

ROHYPNOL

Rohypnol is a drug with properties similar to those of Valium. It's used in the short-term treatment of insomnia, as a pre-medication in surgical procedures and for inducing anesthesia. The common street name for rohypnol is "roofies". Rohypnol is sold in Europe and Latin America as a sleeping pill, but it is illegal in the United States.

Like Valium, Librium, and Xanax, Rohypnol's effects include sedation, muscle relaxation, reduction in anxiety, and prevention of convulsions. However, Rohypnol's sedative effects are approximately 7 to 10 times stronger than Valium. The effects of Rohypnol appear 15 to 20 minutes after administration and last approximately four to six hours.

While Rohypnol has become widely known for its use as a date-rape drug, it is abused more frequently for other reasons. It is abused by students, street gang members, rave attendees, and heroin and cocaine abusers to produce profound intoxication, boost the high of heroin, and control the effects of cocaine. Rohypnol causes partial amnesia, causing users to be unable to remember certain events that they experience while under the influence of the drug.

Signs and Symptoms

Common signs of Rohypnol use include loss of muscle control, confusion, drowsiness, and amnesia. A person can be so incapacitated (made unable to act) they collapse. They lie on the floor, eyes open, able to observe events but completely unable to move.

Side Effects

Rohypnol users often describe its effects as "paralyzing". The effects start 20 to 30 minutes after taking the drug, peak within two hours and may persist for 8 to 12 hours.

In addition to the chemically induced amnesia, rohypnol often causes decreased blood pressure, drowsiness, visual disturbances, dizziness, confusion, digestive problems, and urinary problems.

BATH SALTS

The active ingredient in bath salts is called mephedrone a synthetic substance that is claimed to make users feel confident and energized and enhance musical experiences.

One package of these amphetamine-like drugs can contain several different substances, including mephedrone and MDPV. The powder is often marketed as a novelty bathing product, but it is not intended for use in baths. Bath salts can be swallowed, snorted, smoked, or injected.

Signs and Symptoms

The signs of bath salts use may include:

- Euphoria
- Increased alertness and awareness
- Abnormal pupil dilation
- Uncontrollable eye movement
- Increased energy and motivation
- Mental stimulation/increased concentration
- Confusion
- Hallucinations
- Talkativeness

The primary effects last roughly 3 to 4 hours, with after effects such as rapid heartbeat, high blood pressure, and mild stimulation lasting from 6 to 8 hours.

Side Effects

The side effects of bath salts use include:

- Agitation or severe rage
- Heart palpitations and chest pain
- Seizures and tremors
- Vomiting
- High body temperature
- Kidney or liver failure
- Excessive sweating and compulsive water drinking
- High blood pressure
- Compulsive teeth grinding
- Sleep deprivation
- Intense and prolonged panic attacks

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used Molly alone increased by 66 percent. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

DETECTION

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

CONCLUSION

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used molly alone increased by 66%. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace

QUIZ

1. Designer drugs are chemically modified variations of organic drugs.
 - A) True
 - B) False
2. Which of the following is NOT defined as a designer drug?
 - A) MDMA
 - B) MDPV
 - C) MXE
 - D) Salvia
3. What drug is used as an animal anesthetic?
 - A) GHB
 - B) Ketamine
 - C) Rohypnol
 - D) MDPV
4. What are the common symptoms of designer drug abuse (indicate all that apply)?
 - A) Euphoria
 - B) Hallucinations
 - C) Drowsiness
 - D) Increased appetite
5. Which of the following are referred to “date rape” drugs (indicate all that apply)?
 - A) MXE
 - B) Rohypnol
 - C) Ketamine
 - D) GHB

SUMMARY

DRUG FREE WORKPLACE PROGRAM

The Drug Free Workplace Act requires all federal employees (and contractors doing government jobs) to refrain from using illegal drugs on or off duty. This law recognized that alcohol and drug use is seriously impairing a portion of the national work force, resulting in the loss of billions of dollars each year.

Because of the toll it takes on their employees and the costs associated with substance abuse in the workplace, many companies have implemented Drug Free Workplace Programs. A common reaction to a company's DFWP is one of skepticism and distrust.

Employees often view a DFWP as an invasion of privacy or a malicious way to penalize them. In reality, nothing is further from the truth. Businesses establish a DFWP for the following reasons:

- To comply with Federal or State laws
- To protect its workers, reputation and profitability
- To ensure a safe work environment
- To assist employees struggling with substance or personal problems

Successful companies understand that their employees are the most valuable asset they have, and ensuring their health and well-being is critical to the company's success. A DFWP is just another tool, like PPE, they can use to protect the overwhelming majority of their workforce.

In this program, we have attempted to help you understand the concepts and processes of your company's Drug Free Workplace Program.

You are strongly urged to learn more about the program by asking your supervisor or program administrators for more information.

You are also urged to learn more about available assistance programs and take advantage of the help available. An effective DFWP is not only a way for the company to protect you; it's a benefit that can save your job or your life.

FINAL EXAM

1. What government departments have stricter regulations for substance abuse than those established by the Drug Free Workplace Act (identify all that apply)?
 - A) OSHA
 - B) DOT
 - C) HHS
 - D) PHMSA
2. According to the National Institute on Drug Abuse, what percentage of illegal drug abusers are employed?
 - A) 25%
 - B) 40%
 - C) 50%
 - D) 75%
3. Alcohol has been linked to certain types of cancer.
 - A) True
 - B) False
4. What companies are required to have a DFWP (identify all that apply)?
 - A) All companies
 - B) Companies with government contracts or grants
 - C) Private sector companies
 - D) Transportation and freight carriers
5. Which of the following are required elements of a DFWP (identify all that apply)?
 - A) Who is covered by the program
 - B) When the policies apply
 - C) Return to work agreements
 - D) Employee assistance programs
6. Drug Free Workplace Programs must include drug testing.
 - A) True
 - B) False

7. The consequences for violating the company DFWP can include (identify all that apply):
 - A) Referral to an assistance program
 - B) Suspension
 - C) Termination
 - D) All of the above
8. The SAMHSA guidelines include testing for all of the following substances EXCEPT:
 - A) Marijuana
 - B) Cocaine
 - C) Opiates
 - D) Designer drugs
9. When can drug testing occur (identify all that apply)?
 - A) Pre-employment
 - B) Random
 - C) Reasonable suspicion
 - D) All of the above
10. What is the most common drug testing method?
 - A) Blood
 - B) Urine
 - C) Hair
 - D) Saliva
11. What type of EAP uses public local services to help employees?
 - A) Contract
 - B) Referral
 - C) In-house
 - D) Insurance carrier
12. What is the function of a Medical Review Officer?
 - A) Collecting drug testing specimens
 - B) Conducting drug tests
 - C) Analyzing positive test results
 - D) Managing rehabilitation programs

SECTION FIVE – TRAINING

13. What are the Indications that a co-worker may have an abuse problem (identify all that apply)?
- A) Late to work more often and out sick a lot
 - B) Blaming poor work performance on others
 - C) Inattentive and forgetful
 - D) All of the above
14. A return to work agreement allows employees to return to their job after successful completion of a treatment program.
- A) True
 - B) False
15. Failing to report a co-worker's abuse problem is considered what?
- A) Supporting
 - B) Enabling
 - C) Denial
 - D) None of the above
16. Which is NOT a symptom of alcohol impairment?
- A) Odor on breath
 - B) Lack of coordination
 - C) Slurred speech
 - D) Increased energy
17. K-2 is a synthetic version of what drug?
- A) Cocaine
 - B) Ketamine
 - C) Marijuana
 - D) Heroin
18. Which of the following are common symptoms of depressant abuse (identify all that apply)?
- A) Memory lapses
 - B) Drowsiness
 - C) Hallucinations
 - D) Mood swings
19. Drugs that create a feeling of separation from your body are called what?
- A) Opioids
 - B) Benzodiazepines
 - C) Dissociative
 - D) Stimulants
20. A Per Se law allows you to be arrested for having any level of an illegal drug in your system.
- A) True
 - B) False

**SUPERVISOR DFWP TRAINING
INSTRUCTOR GUIDE**

TRAINING INSTRUCTIONS

Before training and certifying your students, you should familiarize yourself with the content and structure of this program. This will make the training process easier to conduct. The purpose of this kit is twofold: it helps in the process of training your students, and serves as a “train the trainer” document.

As an instructor, you should be familiar with basics of Drug Free Workplace Programs. If you’re not, this program will take you through the basic concepts and requirements of a DFWP. It’s important for you to be familiar with the specific details of the company’s’ Drug Free Workplace Program.

Once you’ve reviewed the course, you’re ready to start the supervisor training program.

COURSE STRUCTURE

This program is divided into two parts:

Part 1 provides an introduction and overview of the components of a Drug Free Workplace Program (DFWP), and is designed to inform the students of what the parts of a typical program are, and how they work.

Part 2 of this training consists of a series of sessions that can be delivered separately. These will educate students on

- The hazards of drug and alcohol abuse
- The signs, symptoms and effects of frequently abused substances
- How to deal with troubled employees
- How to handle potential crisis situations

It’s recommended that you familiarize yourself with this material and have a thorough understanding of your company’s’ DFWP before beginning the training process for employees.

CLASSROOM TRAINING

Classroom training in this case is defined as both traditional, formal training (held for multiple students in a room), as well as individual training available to your students through interactive training software on the CD provided with this program.

To train an individual, simply have them use a computer to access the interactive training program on the CD and follow the online instructions.

To train more than one employee and conduct formal classroom-style training, follow these steps:

- In advance of the class, access the training kit CD on your computer and print copies of the training manual, student handbook, and test required for your class participants.
- Attach a projector or large monitor to your computer that will allow all participants to see the presentation in a classroom environment.
- Conduct training following the steps in the interactive program. Reference printed materials as needed. Encourage participants to take notes and follow along in their student handbooks.

If computer access on the job is limited or unavailable, use the printed training manuals and student handbooks to lead your own training session. This documentation provides you with everything you need to deliver the classroom training.

Evaluation

Once you feel students are ready, begin the evaluation phase. In this phase, some of the topics to evaluate them on are:

- What are the components of the Drug Free Workplace Program (DFWP)?
- What are the requirements of the DFWP?
- Their knowledge of the DFWP, and their ability to explain it
- How to recognize impaired workers
- How to handle potential crisis situations

Your job will be to assess their performance and knowledge and decide whether they are able to work safely.

Refresher training

Refresher training, and an evaluation of the effectiveness of initial training, must be conducted in the following situations to ensure:

- Supervisor is unable to explain the DFWP
- Supervisor has been observed failing to enforce the DFWP effectively or fairly
- Records indicate an annual refresher is due
- Changes in the policy occur

Avoiding Duplication of Training

If a supervisor has previously received training on a topic covered in this program and a competent person has determined the training is adequate, additional training can be waived.

Certification

The employer will certify that each supervisor has been trained and evaluated. The certification will include the name of the supervisor, the date of the training, the date of the evaluation, and the identity of the person(s) performing the training or evaluation.

NOTE: This training program focuses on the general duties of a supervisor to enforce the Company's' DFWP. If additional training on company program specifics, crisis management, or confrontation techniques is needed, the company will provide that additional training.

DFWP SUPERVISOR TRAINING

INTRODUCTION

This training program is designed to prepare supervisors for explaining and enforcing our Drug Free Workplace Program (DFWP).

Alcohol and drug abuse in today's workplace has reached epidemic proportions. It's widespread, touching every industry at every level, and it won't go away on its own. More than one in ten employees have some kind of drinking problem, and almost a third of these use illegal drugs. A person who's impaired on the job due to substance abuse is a threat to the health and safety of his or her co-workers. The National Council on Alcohol and Drug Dependence (NCADD) reports that 70% of the estimated 14.8 million Americans who use illegal drugs are employed.

A 2006 report by the Center for Disease Control (CDC) estimated the loss in productivity, health care costs, and property damage at over \$200 billion.

The toll on human life is equally shocking. Users often lose their jobs, families, health, and lives to the disease of addiction. Their coworkers, families, and friends suffer as well. Substance abuse robs people of their good judgment, self-control, and steals their dignity.

Topics covered in this training program are:

- What is the Drug Free Workplace Program
- The supervisors Roles and Responsibilities
- Enforcing the DFWP
- How to recognize potential problems
- Dealing with a crisis situation

It's important to pay attention to the information on each of these topics. You'll be required to take a final exam with questions related to these topics at the end of the program.

You're encouraged to attend other training classes to further your knowledge. This can include additional training on substance abuse prevention as well as any additional training that may be required for your work and jobsite.

Remember, safety is serious, and should never be taken for granted.

DRUG FREE WORKPLACE PROGRAM

Substance abuse is a serious problem in the workplace. Employees don't leave their substance abuse problems at the door when they come to work. Workers who use alcohol and other drugs have the potential to affect everyone in the workplace. In fact, studies show that substance abusers:

- Are far less productive
- Miss more workdays
- Are more likely to injure themselves or someone else
- File more Workers' Compensation claims

Businesses that perform work for the federal government (contract and grants), are regulated by the Department of Transportation (DOT), or the Nuclear Regulatory Commission (NRC), are required to have Drug Free Workplace Programs in effect. The requirements by these agencies are more stringent than the ones defined by the Drug Free Workplace Act (DFWA) of 1988.

Many other companies, although not required by law, have (or are implementing) their own DFWP in order to protect the health and safety of its employees.

Although OSHA doesn't address substance abuse in the workplace, it does require that all employers provide a safe working environment for their employees. Implementing a DFWP will improve safety, promote employee health, and reduce operating expenses such as:

- Administrative losses caused by absenteeism, tardiness, overtime pay, sick leave abuse, health insurance claims, disability payments, and costs associated with accidents
- Hidden losses due to the diversion of supervisory and managerial time, friction among workers, material waste, equipment damage, poor decision making, damage to public image, and costs associated with turnover
- Losses with legal implications as a result of increased Workers' Compensation claims, drug trafficking on the job, disciplinary actions, grievances, threat to public safety, and worksite security
- Costs of health and mental health care services resulting in higher insurance rates due to increased claims

A DFWP can consist of many parts, and supervisors need to know the ones that apply to the company's program.

COMMUNICATING THE DFWP

It's important for employees to know that the company's DFWP is for everyone's benefit. It's essential, as a supervisor, that you communicate the goals of the drug-free workplace program to them. To promote compliance, you need to be able to inform employees of the company's goals, which are to:

- Improve the company's profitability
- Create a safer work environment
- Demonstrate the company's commitment to your health and well being

Parts of the DFWP

A DFWP can consist of many parts, and as a supervisor, you need to know the ones that apply to your company. A DFWP can include some or all of the following:

- Covered Workers
- Applicability
- Prohibited Behavior
- Notification of Conviction
- Property Searches
- Drug testing
- Return to Work Agreement
- Available Assistance
- Confidentiality
- Shared Responsibility

Covered Workers

This identifies the employees affected by the policy. This could be all employees or only workers who perform jobs designated as safety or security sensitive.

Sensitive jobs include, but are not limited to:

- Pipeline workers
- Transportation workers (airlines, railways, and trucking)
- Employees with access to sensitive or confidential information (either company trade secrets or government information)

Applicability

This defines when and where the policy applies. It may be in force only at the job site during working hours, or may include off-site locations and non-working hours. In some cases, these requirements are established to meet customer and contract requirements.

Prohibited Behavior

This part of the policy defines the actions that are considered violations of the policy, and may include the use of prescription and over the counter drugs, alcohol, and illegal drugs. It will also explain the consequences resulting from policy violations.

Supervisors should be prepared to deal with circumstances when an employee's assistance efforts are unsuccessful, or when someone is unwilling or unable to remedy his or her issues. Discuss alternatives and options with your manager and/or HR if you don't see the necessary improvements, or determine a lack of commitment of the part of the employee.

Notification of Conviction

This is usually required as part of government contract work. It requires employees to notify the company, and the company to notify the appropriate parties if an employee is convicted of a drug or alcohol related crime at the workplace.

Property Searches

The company can decide to require searches of work areas and/or personal property. If searches are part of the company's DFWP, employees will be required to sign a consent form. Some state and local regulations prohibit person and property searches. Check with the applicable authorities to see if searches are permissible. If searches are permitted, they must be performed by trained supervisory or security personnel.

Drug Testing

Except for government contract work, drug testing may or may not be required. If required, how it will be conducted, what tests will be performed, and who will perform the tests must be defined in the DFWP.

Return to Work Agreement

A Return to Work Agreement (RTWA) is a process that may be established to allow employees who test positive for drugs or alcohol and to return to work after successful completion of a treatment program.

Assistance

This section of the DFWP will define the type of Employee Assistance Programs (EAP) the company offers. Assistance programs are not a mandatory part of a DFWP, and supervisors need to understand what, if any, assistance is offered by the company.

This can range from referring employees to treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program. As a supervisor, it's important for you to be able to explain the program to your employees.

Employees participating in assistance programs should be monitored, encouraged, and supported during their treatment. It's important to meet with them regularly to review their progress, ensure they're adhering to the program requirements, and when appropriate provide positive reinforcement on their improvement. Workers successfully completing their assistance programs need to be congratulated on the accomplishment and assisted in refocusing on their job performance.

Confidentiality

Sensitivity and confidentiality when addressing the personal issues of employees is vital, and will greatly improve their trust in the system. The fewer people aware of an employee's assistance participation, the better. It's important to remember that if an employee chooses to discuss his or her situation with coworkers, that's their choice, and doesn't allow you to divulge information to others. In your company's DFWP is a section defining the procedures that will be used to protect all employees' information.

Shared Responsibility

A successful DFWP requires everyone's participation. Part of the company's policy will be the expectations for employees and management.

It's important that all employees read and understand the company's DFWP. The more you know about the DFWP the better you'll be able to explain it, and have it help protect your workers.

Contact your manager or DFWP director if you have any questions.

DFWP IMPLEMENTATION

A DFWP will not be successful unless all employees know it exists and understand it. To ensure this occurs there are a number of things your company must do:

- Provide written copies of the DFWP to all employees
- Identify those responsible for administration and enforcement of the DFWP and any EAP
- Provide at least two hours of training per year regarding the hazards of drug and alcohol use, the consequences of workplace abuse, and the assistance available
- If drug testing is part of the DFWP, the company must identify the name and location of the certified testing facility that will conduct any required tests
- Post notices that the company has a DFWP and inform employees and applicants that drug testing is a condition of employment

In addition, if only safety or security sensitive jobs will be subject to testing, your employer must identify those positions and notify the individuals in those positions of the requirement.

Supervisors must be trained to understand the policy and their roles and responsibilities in enforcing it.

RESISTANCE TO DFWP

A DFWP with a drug testing policy can be a very punitive program, having the ability to take a huge amount of coverage away from an employee. Workers compensation and insurance claims can be denied if employees are found to be impaired and cause accidents or injuries. Fear of discrimination, punishment, or financial consequences can also keep employees from seeking assistance even when they know they need it.

It's essential to make sure the employees under your supervision understand that the program is designed to create a safe work environment and assist workers in need of help. By reinforcing the ideas that the programs goals are workplace safety and abuse prevention, much of the distrust and fear of discrimination can be overcome.

It should always be the goal of the company to return an employee to being a productive member of the workforce, but it's not always possible. In those cases, disciplinary action may be required.

Consult with management and other appropriate personnel to determine the measures to be taken based on the company's DFWP. If a problem can't be corrected, it needs to be removed. The loss of a problem employee will ultimately improve the safety of the workplace and demonstrate the company's commitment to their program.

QUIZ

1. A DFWP option that allows workers to resume working after the successful completion of a drug treatment program is called:
 - A) An EAP
 - B) **A RTWA**
 - C) Shared Responsibility
 - D) Applicability
2. The part of a DFWP that defines when the program policies apply is called:
 - A) Covered Workers
 - B) Confidentiality
 - C) Assistance
 - D) **Applicability**
3. What part of a DFWP defines the consequences of violating the policy?
 - A) Notification of conviction
 - B) Return to Work Agreement
 - C) **Prohibited behavior**
 - D) Drug testing
4. Drug testing is required to be part of a DFWP When:
 - A) Performing government contract work
 - B) The business is regulated by the Department of Transportation (DOT)
 - C) The business is regulated by The Pipeline and Hazardous Materials Safety Administration (PHMSA)
 - D) **All of the above**
5. Which of the following statements about searches is false?
 - A) Prohibited in some jurisdictions
 - B) Must be conducted by trained personnel
 - C) Require your signed authorization
 - D) **A mandatory part of a DFWP**

REQUIREMENTS AND RESPONSIBILITIES

LEGAL REQUIREMENTS

In 1988, Congress passed the Drug-Free Workplace Act (DFWA), which requires Federal grantees and recipients of Federal contracts of \$100,000 or more to comply with the following:

- Employers must have a written policy that explains what's prohibited, and the consequences of violating the policy
- Employees must read and agree in writing to the policy as a condition of employment on the project
- Employers must have an awareness program to educate employees about alcohol and drug abuse and addiction, the employer's policy, and available help, including counseling and other assistance
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within five days after such conviction
- Employers must disclose any conviction for a drug-related offense in the workplace to the Federal agency with which the employer has a grant or contract, within ten days after receiving notice from the employee or others
- Employers must make an ongoing effort to maintain a drug-free workplace

If you're a Federal contractor and don't have a DFWP, any contracts awarded to you by a Federal agency may be suspended, terminated, or both. You may become ineligible for consideration of any future contracts, and prohibited from participating in any future procurement by any Federal agency for up to five years.

Some employers are also subject to the provisions of the 1991 Omnibus Transportation Employee Testing Act. This Act requires employees in certain safety-sensitive positions such as in the aviation, trucking, railroad, mass transit, and pipeline industries be tested for alcohol and drug use.

The transportation industry has established additional policies on drug and alcohol testing to ensure workers who operate aircraft, trains, trucks, and buses do so in a safe and responsible manner.

In addition, the Department of Transportation (DOT) and The Pipeline and Hazardous Materials Safety Administration (PHMSA) requires companies that supply or transport natural gas and other hazardous materials to implement drug and alcohol testing programs in the interest of public safety.

Limitations

While the Americans with Disabilities Act (ADA), prohibits discrimination against qualified people with disabilities and limits an employer's ability to inquire into an employee's or job applicant's medical history, it does not prohibit drug testing, and doesn't bar employers from prohibiting alcohol abuse or illegal drug use in the workplace. Under the ADA, an employer may require job applicants and employees to pass a drug test as a condition of employment.

According to the ADA, an employer can't discriminate based on these characteristics:

- Illegal substance abusers and alcoholics who have successfully completed a rehabilitation program
- Those who are participating in a supervised rehabilitation program
- Those who, based on hearsay only, are believed to be an illegal drug user

Alcoholism is considered a disability. Alcoholics can't be discriminated against unless their alcohol use impairs performance or conduct to the extent that they are no longer performing their job at the required standard.

Although the Act doesn't protect certain illegal substance abusers and alcoholics who can't perform their jobs safely, it does protect those who have been rehabilitated or are participating in supervised rehabilitation programs and not currently using drugs.

State and Local Regulations

Many states and municipalities have specific drug-free workplace regulations that define when and how employees can be tested for illegal drugs. Consult with your state or local government to identify these requirements and obtain any other regulations or assistance regarding drug-free workplace programs.

As a supervisor, it's important you understand the employees' rights and your responsibilities regarding the company's DFWP.

RESPONSIBILITIES

Employer Responsibilities

When implementing a DFWP, the company must develop a written policy that identifies what's prohibited, and the consequences of violating the policy.

The company must announce in a letter to all employees that having a drug-free workplace and preventing drug and alcohol problems among employees and their families are major corporate initiatives. In addition, the company must:

- Provide a written copy of the DFWP to all employees that defines:
 - Who is covered by the policy
 - When the policy applies
- Explain if the policy:
 - Requires the Company to be notified of any employee drug-related convictions
 - Includes drug testing and/or personal property searches
 - Includes Return-to-Work Agreements
- Explain how employee confidentiality will be protected
- Identify who is responsible for administering the policy
- Define The type of assistance programs available
- Communicate the potential risks drug and alcohol abuse poses to the company

Employers must make an ongoing effort to maintain a drug-free workplace, and have an awareness program for educating employees about alcohol and drug abuse and addiction.

Supervisor Responsibilities

- Maintain a safe, healthy, and productive environment
- Have a clear understanding of the DFWP
- Be an advocate for employees
- Enforce the DFWP evenly and fairly
- Understand the legal concerns relating to the DFWP

RIGHTS & REQUIREMENTS

When establishing a DFWP, both the company and its employees have certain rights regarding the enforcement of the program. It's important for everyone to know these rights to avoid any potential misunderstandings or conflicts.

Employer

When implementing a DFWP, the company must clearly define the scope and limitations of the program. A DFWP doesn't have to include drug testing or personal property searches, but these are options. Some states have limitations regarding the issues. State and local regulations should always be checked to determine these limits.

Employers may be permitted to conduct substance abuse testing in the following situations:

- Pre-employment
- For reasonable suspicion
- Randomly
- Periodically
- After an accident/incident
- Post-treatment
- On designated safety or security sensitive positions

Pre-employment

To decrease the chance that a current drug user will be hired, some employers test job applicants at the time of a job offer. The job offer depends on a negative drug test result.

Reasonable Cause

Reasonable Cause or suspicion is a reasonable good faith objective suspicion on the part of management that an employee has used drugs or alcohol prior to reporting to work or is impaired by drugs or alcohol. Reasonable Cause can be based upon an employee's performance, appearance, or conduct, including but not limited to any of the following:

- Odor of alcohol or other intoxicant about the employee or on the employee's breath
- Abnormally impaired speech, stumbling, weaving, or other loss of motor coordination
- Unexplained animated signs of intoxication or influence of drugs on the part of the employee
- Other discernible signs of intoxication or influence of drugs on the part of the employee
- Possession of alcohol, drugs or associated paraphernalia
- An employee's apparent lack of judgment, inattentiveness, or specific unsafe act that substantially contributes to the cause of an accident

Random Testing

Depending on state or local laws, random drug testing may be permissible. However, the DFWP must define who is subject to the testing, establish how the random selection process works, and define the notification time and process

Periodic

This is usually done when employees are required to take an annual physical, or can be part of a follow up program for employees after completion of a treatment program

Post-accident

Companies have the right to require testing after an accident or incident, whether the occurrence resulted in injury or property damage or not.

Post-treatment

When an employee has taken time off from work to go through an inpatient treatment program, or when an employee is participating in some form of outpatient treatment, an employer may arrange for random testing of that employee to ensure they remain sober

Sensitive Positions

If the company determines that only positions affecting public safety, trade secrets, or national security will be subject to drug testing, persons holding those positions must be notified of the requirement.

Employee

When working for a company that has, or is implementing, a DFWP employees need to understand what's required of them, and their rights under the program.

Requirements

As part of a company DFWP, employees are required to:

- Read the DFWP policy provided
- Sign and return the required forms
- Understand the terms of the policy and the consequences for violating it
- Learn the signs and symptoms associated with drug and alcohol abuse
- Know what assistance is available and how to benefit from it
- Know who to contact if they have questions
- Refrain from any drug or alcohol use at work.
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately.

Rights

Employees working for a company that has a DFWP must be:

- Given a written copy of the DFWP
- Receive training on the program
- Be notified of drug testing and/or property search requirements
- Have access to their drug testing records, if applicable

QUIZ

1. The Drug Free Workplace Act was passed in:
 - A) 1970
 - B) 1980
 - C) **1988**
 - D) 2006
2. The drug free workplace Act applies to:
 - A) All federal employees and contractors
 - B) Pipeline industries
 - C) Transportation workers
 - D) **All of the above**
3. All drug free programs must include mandatory drug and alcohol testing
 - A) True
 - B) **False**
4. DFWP requirements apply to:
 - A) All Employees
 - B) Non- management employees only
 - C) Safety sensitive jobs only
 - D) **Those identified as covered workers by the plan**
5. Part of the DFWP requires that an employee's drug and alcohol related information be kept confidential.
 - A) **True**
 - B) False

DFWP ENFORCEMENT

Substance abuse by employees can be a common occurrence, and supervisors must be prepared to address this matter in a safe, legal, and professional manner. To do so, supervisors need to be trained on how to handle substance-abuse issues in the workplace. This training should include:

- Recognizing symptoms of drug and alcohol abuse
- Understanding abuse treatment
- Employee Assistance
- Knowing the regulations and limitations of drug testing
- Referral procedures
- Handling barriers
- The proper techniques of intervention and confrontation
- Crisis management

A supervisor's job isn't to provide substance abuse counseling, nor should they try to diagnose alcohol or other drug problems. If a supervisor suspects a problem, particularly one associated with poor job performance or conduct, the employee should be referred to the appropriate resources for professional evaluation and assistance.

Each supervisor who will determine whether an employee must be drug tested and/or alcohol tested based on reasonable suspicion/cause will be trained in the "signs and symptoms" of each substance.

Each supervisor will receive training on the specific indicators of probable drug and alcohol use. The training will include, but is not limited to, physical, behavioral, speech and performance indicators of probable drug and/or alcohol misuse.

The training will also include information on dealing with troubled employee and the methods and options available for doing so.

Information on these topics will be covered in Part 2 of this program.

SUPERVISOR GUIDELINES

To maximize the effectiveness of a DFWP, customized supervisor training should take into account the particular characteristics of the workplace. Seven general guidelines have been found to be useful for many employers, supervisors, and HR staff:

- Know the organization's policy and program
- Be aware of legally sensitive areas
- Recognize potential problems
- Document
- Act
- Refer
- Reintegrate

Know the Organization's Policy and Program

Be familiar with the policy and the program along with the reasons for implementing them. Ensure that these are clearly communicated to all employees in a manner and language, and at a level they can understand. In some organizations, this may require bilingual, or trilingual, replication.

Be Aware of Legally Sensitive Areas

Due to variations in state and local regulations, it's important to be familiar with the conditions and limitations regarding drug testing and property searches in your area.

- Where applicable, follow union contracts
- Maintain confidentiality of all employees
- Follow the procedures and policy the same way for all
- Provide due process and opportunity for response to allegations
- If testing is a part of the policy, ensure quality control and confirmation of positive tests

Recognize Potential Problems

Many performance issues can be attributed to a combination of internal and external factors. In the workplace, however, a safe, healthy, productive employee is the expectation. Don't wait for a crisis. Being aware of potential issues before they become problems goes a long way toward creating a safe, healthy, and productive workplace.

There are at least six signs of possible substance abuse problems in the workplace. These signs alone do not indicate substance use. They do however; indicate that perhaps the employee is experiencing personal issues that may affect job performance.

- A change in work attendance or performance
- An alteration of personal appearance
- Mood swings or attitude changes
- Withdrawal from responsibility or associate contacts
- Unusual behavior patterns
- A defensive attitude concerning any problems

This subject will be examined further in Part 2 of this program.

Document

It's important to have a systematic, legally defensible appraisal and documentation system in place. The first line of defense should be a well-defined job description along with appropriate job training. In this way, supervisors can be explicit about the behaviors they expect.

Along with this, if a supervisor suspects an employee is under the influence, careful documentation should occur. It's recommended to ask a second supervisor to assess the situation to ensure fairness and impartiality.

NOTE: A supervisor's checklist for determining reasonable cause is included in Part 2 of this training.

Act

Constructive confrontation is a proven effective strategy for dealing with employees who have a performance problem that may be associated with substance abuse.

Constructive confrontation works particularly well for employers, supervisors, and employees who are heavily invested in their jobs.

We will examine constructive confrontation fully in Part 2 of this program.

Refer (to Appropriate Programs)

It's important for supervisors to send employees the message that the objective of a DFWP referral program is not to catch somebody and kick them out. The goal is to get them an assessment of where they are with their drug usage and allow them to get treatment.

A referral is not a disciplinary action. This may be the first step toward helping the employee get back on track. Referrals must be consistent with the specifics of the company's drug-free workplace policy, and the employee assistance the company provides.

Reintegrate

Recovery from alcohol or other drug problems can be a gradual, complex process. To prevent a relapse and to promote sustained recovery, follow-up and supportive re-entry are key. An ideal situation would be one in which a specialist is assigned to deliver supportive follow-up to the employee at the workplace for 36 months or longer.

Advocate for Employees

It's important for supervisors to develop and maintain a good working rapport with their employees. Not only does this promote good morale and productivity, it creates an environment of teamwork and trust.

A good working relationship allows supervisors to know the employees better, which aids in recognizing problems that may occur, and builds trust in the employees that will encourage them to share personal issues and report potential problems.

Supervisors can encourage employees to deal with work related problems that may or may not be connected with alcohol or other drug use. They can suggest sources of help and support, such as an EAP or a local treatment program.

Being an advocate for employees also means supporting treatment and recovery. There is a general stigma associated with addiction and a mistaken belief that substance abuse is a personal or moral failing. Viewing the employee as a person struggling with a chronic, treatable disease rather than as an offender is another way to be supportive of recovery. This does not mean *enabling*; it means *supporting*.

It's important to remember that you need to know your company's policies, the services available, and how to handle referrals. If you don't know the answer to a question, or how to handle a situation, ask your manager or EAP contact.

DFWP Procedures

In addition to being knowledgeable about the company's DFWP, supervisors need to know the procedures and management structure associated with the DFWP. These aspects of enforcement include knowing:

- The name of the DFWP administrator
- The EAP resources available
- The name and location of the authorized testing facility
- The procedures to be followed if DFWP violations occur

All of this information must be included in the DFWP, and supervisors should keep these names and phone numbers handy in case they're needed.

EAP services the employer may have in place can be internal or external. Information on the types of EAP's available will be covered in part 2 of this training.

The company should provide you, as the supervisor, the tools, and guidelines necessary to handle DFWP violations properly.

In the next section of this training, we'll examine the details of drug testing.

QUIZ

1. Which of the following is NOT a proper confrontation technique?
 - A) Organizing a confidential meeting
 - B) Including a union representative if applicable
 - C) Presenting the employee with documented evidence of performance deficits
 - D) **Letting everyone know the situation**
2. Supervisors must be trained on which of the following (select all that apply):
 - A) Constructive Confrontation
 - B) Substance abuse signs and symptoms
 - C) Company DFWP policy
 - D) **All of the above**
3. A supervisor should request the opinion of a second supervisor if they suspect an employee of being impaired.
 - A) **True**
 - B) False
4. Supervisors should be trained on all of the following except:
 - A) DFWP policy
 - B) EAP
 - C) **Substance abuse counseling**
 - D) Drug testing procedures
5. A supervisor's emphasis should be on improving a substance-abusing employee's job performance, not on judging the employee.
 - A) **True**
 - B) False

UNDERSTANDING DRUG TESTING

Aside from Federal requirements, drug testing is not a mandatory part of a DFWP. If it's part of your company's DFWP, supervisors need to be familiar with the testing process.

Basic information about drug testing includes:

- Understanding Drug Testing
- When testing can occur
- Testing methods
- What is included in the testing

Is Drug Testing Legal?

In most cases and states, it's legal for an employer to test employees for drugs. No Federal laws prohibit drug testing at this time; however, some states do prohibit or restrict certain types of drug testing. Employees have the right to know the details of the drug-testing policy at your workplace. Different types of drug testing/screening processes are available.

When Testing Can Occur

As mentioned earlier, drug testing can be required in any of the following situations:

- Pre-Employment Tests
- Reasonable Suspicion and For Cause Tests
- Random Tests
- Periodic Tests
- Post-Accident Tests
- Post-Treatment Tests

Testing Methods

Different types of drug testing/screening processes are available.

The most common way to test for drugs is a urine test. This involves giving a urine sample, which goes through a series of chemical tests. The results tell whether leftover traces of drugs are in a person's body. A urine test doesn't tell if an employee is under the influence of drugs at the time of the test, only that alcohol or drugs were used sometime recently.

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

There are a number of other bodily specimens that can be tested for evidence of recent drug use. Although some state laws dictate the types of tests that can be used, a number of options are available. Urine is by far the most commonly used specimen for illicit drugs, and breath is the most common for alcohol.

Other types of tests available consist of:

- Blood
- Hair
- Oral fluids
- Sweat

Blood - Blood tests measure the amount of alcohol or other drugs in the blood at the time of the test. The major drawbacks of conducting blood tests are; they are invasive, and there is a very short detection period.

Hair - Analysis of hair provides a much longer “testing window”, giving a more complete drug-use history going back as far as 90 days. Like urine testing however, hair testing doesn’t provide evidence of current impairment, but only past drug use.

Oral Fluids - Saliva or oral fluids are easy to collect by using a swab of the inner cheek. These samples are harder to adulterate or substitute, and may be better at detecting specific drugs. There are currently no federally approved oral testing methods for marijuana.

Sweat - A skin patch that measures drugs in sweat is applied to the skin and worn for some length of time. A membrane on the patch protects the tested area from dirt and other contaminants while collecting the sample.

Breath Alcohol Test

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

All states have set an alcohol level of 0.08 percent as the definition of driving while intoxicated. The Department of Transportation Federal Motor Carrier Safety Administration has established a 0.04% alcohol level for commercial vehicle drivers and 0.01% for operators of common carriers.

REASONS FOR DRUG TESTING

Employers set up drug testing programs for many reasons:

Federal or State Regulations: Some workplaces must comply with a Federal or State agency’s drug-testing requirements. For example, the Department of Transportation, the Department of Defense, and the Department of Energy are agencies that require contractors to set up drug-testing programs.

Safety Concerns: Use of alcohol or other drugs on the job can result in accidents, safety problems, and other costly mistakes. As a result, many employers choose to protect their employees and their workplace by starting a drug-testing program.

High Costs of Alcohol and Other Drug Abuse: Research has shown that drug and alcohol use at work costs money. Workplace drug abuse often results in lower productivity, higher Workers’ Compensation claims, more time away from work, and higher medical costs. There are also links between workplace drug use, workplace crime, and an employee’s mood and well-being.

Drug Testing Accuracy

If tests are conducted correctly using the guidelines of the Department of Health and Human Services (DHHS), drug tests are very accurate. These guidelines require that certain procedures be followed:

Chain of Custody: A chain of custody form is used to document the handling and storage of a urine specimen from the time it's collected until its disposal. The chain of custody form is written proof of all that happens to the specimen while at the collection site and the laboratory.

Initial Screen: The first test done on a urine sample is called an initial screen. This test alone is not always accurate or reliable. If the initial screen is positive, a second test should be done.

Confirmation Test: A second, confirmatory test using gas chromatography/mass spectrometry (GC/MS), is highly accurate, and will rule out any false positives from the initial screen. For a test result to be reported as positive, both test results must agree.

Medical Review Officer

A medical review officer (MRO) is a licensed medical doctor who has special training in the area of substance abuse. If your drug test is positive, the MRO reviews the results, makes sure the chain of custody procedures were followed, and contacts the employee to make sure there are no medical or other reasons for the result. It is only at this point that the MRO may report the positive test result to the employer. Medications can sometimes cause a positive test result. If this is the case, and if a doctor prescribed the medicine, the test is reported as negative.

DRUG TESTING PROCEDURES

When employees are required to take a drug test, this typical procedure will be used. These steps should be explained to the employee.

- They may be asked for picture identification
- After providing a urine sample, the bottle should not leave their sight until it is sealed with special "evidence" tape
- The employee must sign the label on the container, and sign a record book stating that the sample collected was theirs
- The specimen will then be shipped to a certified laboratory for testing
- If the seal is broken or the container isn't signed, the laboratory won't test the sample

Testing Privacy

In most cases, employees are ensured privacy when giving a sample. In some cases, however, someone may need to see them give the sample. For example, if there's reason to believe that an employee has tried to tamper with the sample, another specimen may be collected with someone of the same sex watching to ensure honesty.

Testing results

Confidentiality is very important. Confidentiality means that drug test results are kept private, and that only persons who need to know will receive the drug test results. This might be the supervisor, manager, union representative, or someone in the medical or personnel department. Often, employees are asked to sign a release form that identifies who will receive the test results. A drug test is reported as positive or negative; the level of the drug(s) found is usually not reported. Confidentiality also means that drug test results won't be part of an employee's personnel file.

TESTING PARAMETERS

Having a drug-free workplace protects everyone's health and safety. Employees who are impaired by alcohol or other drugs by while on the job are not a new phenomenon.

For decades, alcohol topped the list as the drug of choice that could adversely affect an employee's health. However, the increasing use of over-the-counter medications, as well as abuse of illicit or prescription drugs, poses a widespread problem in workplaces in the United States.

SAMHSA 5

The Substance Abuse and Mental Health Services Administration (SAMHSA), an agency within the U.S. Department of Health and Human Services, has identified a core set of five drugs that should be included in a drug test. SAMHSA has established "cut-off levels" for these drugs, and these are used to determine positive or negative test results. Test samples that contain substance levels below the cut-off levels are returned as negative, while those containing quantities above the level are reported as positive.

The core set drugs included in the SAMHSA 5 include:

- Marijuana
- Amphetamines
- Cocaine
- Opiates (Heroin, morphine, codeine, and oxycodone)
- Hallucinogens (PCP (angel dust), LSD, peyote, and mushrooms)

Other Testing

Other drugs besides the "SAMHSA 5" that can be included in a drug test. The decision on how extensive the drug testing will be is up to the company.

Other testing drugs:

- **Designer Drugs** (Synthetic drugs sometimes referred to as "party drugs" These include Ketamine, amyl nitrates, Ecstasy or Molly (MDMA), and Bath Salts (MDPV))
- **Barbiturates:** (tranquilizers and barbiturates, phenobarbital, seconal)
- **Inhalants:** (spray paints, paint thinners, and cleaning fluids)

NOTE: Although it is a widely abused substance, alcohol is not included in the SAMHSA 5. This may be due to the specific testing requirements defined in the DOT regulations. It is however commonly included in company drug testing programs.

CONSEQUENCES

The consequences of receiving a positive result from a drug test can vary, and are up to the company. The consequences can include:

- Immediate removal from duty
- Suspension without pay for 30 days
- Referral to a substance abuse professional for assessment and recommendations
- Mandatory successful completion of a recommended rehabilitation including continuing care
- Required to pass a Return-to-Duty Test and sign a Return-to-Work Agreement
- Subject to ongoing, unannounced, follow-up testing for a period of time
- Immediate termination for a second positive test result or violation of a Return-to-Work Agreement
- Immediate termination

Refusing to test

Employees are typically subject to the same consequences as a positive test if they:

- Refuse the screening or the test
- Adulterate or dilutes the specimen
- Substitute the specimen with that from another person or sends an imposter
- Will not sign the required forms
- Refuse to cooperate in the testing process in a way that prevents completion of the test

NOTE: Attached at the end of this section is a Reasonable Suspicion Checklist that can be used by supervisors as a reminder of things that should be considered when trying to determine if there is sufficient grounds information to request an employee to take a drug test. This is provided for informational purposes only, and may be modified to meet company specific requirements.

QUIZ

1. What is the most common method of drug testing?
 - A) Blood
 - B) Breath
 - C) **Urine**
 - D) Hair
2. Drug testing must be performed by:
 - A) The company
 - B) An employee assistance provider
 - C) **A certified laboratory**
 - D) Local health care provider
3. What agency is responsible for the creation of drug cut off limits?
 - A) **SAMHSA**
 - B) PHMSA
 - C) DOT
 - D) OSHA
4. When can drug testing be performed (select all that apply)?
 - A) Pre-employment
 - B) Post-accident
 - C) Reasonable cause
 - D) **All of the above**
5. Which of the following statements about drug testing confidentiality is false?
 - A) Test samples must be collected in private
 - B) Test results are only available to the employee and those who need to know
 - C) Chain of custody must be maintained
 - D) **Test record will be kept in the employees permanent personnel file**

SECTION FIVE – TRAINING

REASONABLE CAUSE OBSERVATION CHECKLIST

EMPLOYEE: _____ PERIOD OF EVALUATION _____

SUPERVISOR #1, NAME AND TELEPHONE: _____

SUPERVISOR #2, NAME AND TELEPHONE: _____

This checklist is to assist a supervisor in referring a person for drug testing. Has the employee manifested any of the following behaviors? Indicate (D) if documentation exists.

A. QUALITY AND QUANTITY OF WORK

YES NO

- | | | |
|-----|-----|---|
| ___ | ___ | 1. Refusal to do assigned tasks |
| ___ | ___ | 2. Significant increase in errors |
| ___ | ___ | 3. Repeated errors in spite of increased guidance |
| ___ | ___ | 4. Reduced quantity of work |
| ___ | ___ | 5. Inconsistent, "up and down" quantity/quality of work |
| ___ | ___ | 6. Behavior that disrupts workflow |
| ___ | ___ | 7. Procrastination on significant decisions or task |
| ___ | ___ | 8. More than usual supervision necessary |
| ___ | ___ | 9. Frequent, unsupported explanations for poor work performance |
| ___ | ___ | 10. Noticeable change in written or verbal communication |
| ___ | ___ | 11. Other (please specify) _____ |

B. INTERPERSONAL WORK RELATIONSHIPS

YES NO

- | | | |
|-----|-----|--|
| ___ | ___ | 1. Significant change in relations with co-workers, supervisors |
| ___ | ___ | 2. Frequent or intense arguments |
| ___ | ___ | 3. Verbal/Physical abusiveness |
| ___ | ___ | 4. Persistently withdrawn or less involved with people |
| ___ | ___ | 5. Intentional avoidance of supervisor |
| ___ | ___ | 6. Expressions of frustration or discontent |
| ___ | ___ | 7. Change in frequency or nature of complaints |
| ___ | ___ | 8. Complaints by co-workers or subordinates |
| ___ | ___ | 9. Cynical, "distrustful of human nature" comments |
| ___ | ___ | 10. Unusual sensitivity to advice or critique of work |
| ___ | ___ | 11. Unpredictable response to supervision |
| ___ | ___ | 12. Passive-aggressive attitude or behavior, doing things "behind your back" |

C. GENERAL JOB PERFORMANCE**YES NO**

- | | | |
|-----|-----|--|
| ___ | ___ | 1. Excessive unauthorized absences-number in last 12 months |
| ___ | ___ | 2. Excessive authorized absences-number in last 12 months |
| ___ | ___ | 3. Excessive use of sick leave in last 12 months |
| ___ | ___ | 4. Frequent Monday/Friday absence or other pattern |
| ___ | ___ | 5. Frequent unexplained disappearances |
| ___ | ___ | 6. Excessive "extension" of breaks or lunch |
| ___ | ___ | 7. Frequently leaves work early-number of days per week or month |
| ___ | ___ | 8. Increased concern about (actual incidents) safety offenses involving the employee |
| ___ | ___ | 9. Experiences or causes job accidents |
| ___ | ___ | 10. Major change in duties or responsibilities |
| ___ | ___ | 11. Interferes with or ignores established procedures |
| ___ | ___ | 12. Inability to follow through on job performance recommendation |

D. OTHER BEHAVIORS**YES NO**

- | | | |
|-----|-----|--|
| ___ | ___ | 1. Changes in or unusual personal appearance (dress, hygiene) |
| ___ | ___ | 2. Changes in or unusual speech (incoherent, stuttering, loud) |
| ___ | ___ | 3. Changes in or unusual physical mannerisms (gesture, posture) |
| ___ | ___ | 4. Changes in or unusual facial expressions |
| ___ | ___ | 5. Changes in or unusual level of activity-much reduced/increased |
| ___ | ___ | 6. Changes in or unusual topics of conversation |
| ___ | ___ | 7. Engages in detailed discussions about death, suicide, harming others |
| ___ | ___ | 8. Increasingly irritable or tearful |
| ___ | ___ | 9. Persistently boisterous or rambunctious |
| ___ | ___ | 10. Unpredictable or out-of-context displays of emotion |
| ___ | ___ | 11. Unusual fears or lacks appropriate caution |
| ___ | ___ | 12. Engages in detailed discussion about obtaining/using drugs/alcohol |
| ___ | ___ | 13. Has personal relationship problems (spouse, girl/boyfriend, children, in-laws) |
| ___ | ___ | 14. Has received professional assistance for emotional or physical problems |
| ___ | ___ | 15. Makes unfounded accusations toward others, i.e., has feelings of persecution |
| ___ | ___ | 16. Secretive or furtive |
| ___ | ___ | 17. Memory problems (difficulty recalling instructions, data, past behaviors) |
| ___ | ___ | 18. Frequent colds, flu, excessive fatigue, or other illnesses |

SECTION 2: SUBSTANCE ABUSE TRAINING

This portion of the Supervisor Training Program” is designed to make your job easier. It can be unpleasant to think about addressing substance abuse with the people you supervise, but you don’t need to worry, and you don’t have to be tough.

This part of your training contains information that will familiarize you with:

- The dangers of drug and alcohol abuse
- Recognizing the signs, symptoms, and effects of commonly abused substances
- How to deal with suspected impaired workers
- Handling potential crisis situations

It’s important that you understand these topics, as they will allow you to recognize substance abuse in the workplace, possibly prevent injuries, and ensure workplace safety.

Addressing substance abuse in the workplace is primarily a conduct and performance issue. An employee who uses or abuses alcohol or other drugs on the job may at some point become a hazard to themselves or others. This training will explain how to deal with these issues.

ALCOHOL ABUSE

In 2013, over 10,000 people were killed in alcohol-impaired traffic crashes, accounting for over 30 percent of all motor vehicle fatalities. Impaired driving continues to be a serious traffic safety and public health issue.

Drinking alcohol, or ethanol, is the most common form of drug abuse in the world. Addiction to alcohol is known as alcoholism. Alcohol is a depressant that produces a euphoric effect. Alcohol intoxication affects the brain, causing slurred speech, clumsiness, and slowed reflexes. Excessive consumption of alcohol leads to a delayed poisoning called a hangover.

The hangover starts after the euphoric effects of alcohol have worn off, typically in the night and morning after excessive drinking. However, even after the euphoria is gone, a person's blood alcohol level can still be above the legal limits imposed for drivers and operators of other dangerous equipment.

Alcohol stimulates insulin production, which speeds up the metabolism and can result in low blood sugar, causing irritability. Drinking alcohol in excess can lead to poisoning, which can be severe, even lethal.

A blood-alcohol content of .45 percent represents the amount that would kill half of the general population. This is about six times the .08 percent level, when people are considered legally drunk. Usually vomiting and/or unconsciousness occur before someone reaches the .45 level unless they have a low tolerance or a large amount of alcohol is consumed very quickly.

A chronic heavy drinker's tolerance to alcohol may allow them to remain conscious at levels above .4 percent, despite the serious health dangers.

Chronic consumption of alcohol can lead to an addiction and result in long-term health problems such as:

- Alcohol-related liver disease
- Heart disease
- Cancer of the esophagus, mouth, throat, and voice box
- Pancreatitis
- Birth defects

A 2014 World Health Organization report attributes over 300,000 deaths to alcohol in the U.S. alone, and over 3 million worldwide. Contrary to popular belief, drinking alcohol doesn't kill brain cells. Instead, it damages the ends of the nerve cells that bring messages to the cell, leading to a change in brain function. Most of this damage is temporary, but the recovery process changes nerve-cell structure permanently.

Excessive consumption of alcohol has been linked to some forms of cancer. An estimated 3.6% of all cancer cases worldwide are related to alcohol drinking, resulting in 3.5% of all cancer deaths.

Signs and Symptoms

The most common signs and symptoms of alcohol impairment are:

- Odor on breath
- Lack of coordination
- Euphoria
- Talkativeness and/or slurred speech

Alcohol is normally detectable by a breathalyzer for four to six hours. Alcohol will remain in your blood for about twelve hours, and can be detected in urine for up to five days.

It should be noted that the results detected by delayed blood or urine tests do not provide proof of impairment, only recent use.

Past government studies have found that:

- Over 7 percent of American workers drink during the workday, mostly at lunch. Even more, 9 percent, have nursed a hangover in the workplace
- Drinking does not have to occur on the job to affect the job. Hangovers account for many workplace productivity losses
- Workers in construction and mining, wholesale, and retail industries are 25 percent to 45 percent more likely to have a serious alcohol problem than the average U.S. worker
- Workplace alcohol use and impairment affect an estimated 15 percent of U.S. workers, or 19.2 million Americans

In addition, people under the influence of alcohol commit a large portion of various violent crimes, including child abuse, homicide, and suicide.

Studies have shown that taking advantage of EAP services have helped millions of individuals and family members affected by alcohol problems. Alcohol treatment also improves an individual's functioning, leading to increased productivity at work.

QUIZ

1. Alcohol is classified as a _____.
 - A) Stimulant
 - B) **Depressant**
 - C) Schedule one drug
 - D) None of the above
2. Death from alcohol poisoning can occur at a blood alcohol content (BAC) of _____.
 - A) .08
 - B) .20
 - C) **.45**
 - D) .80
3. A hangover is an indication of mild alcohol poisoning.
 - A) **True**
 - B) False
4. Alcohol kills brain cells.
 - A) True
 - B) **False**
5. Alcohol can be detected by a urine test for _____.
 - A) 12 hours
 - B) 24 hours
 - C) 3 days
 - D) **5 days**

MARIJUANA ABUSE

Marijuana, or cannabis, is the most frequently used illicit drug abused in the United States and worldwide. It's second only to alcohol as the most common cause seen in cases of driving under the influence of drugs. It's also the drug most often detected in workplace drug-testing programs.

The main active ingredient in marijuana is THC. The THC content in marijuana averaged 3% in the 1980s, but by 2012, it had increased to 12%. The US government classifies marijuana as a schedule one drug. A schedule one is defined as a drug with no currently accepted medical use and a high potential for abuse, and those who use or possess it are subject to prosecution.

Workers covered by federal drug testing programs are prohibited from using marijuana at any time. In addition, federal law allows employers in every state to prohibit employees from working while under the influence of marijuana and employers are permitted to discipline employees who violate this prohibition up to and including termination.

In 2009, the US Department of Justice introduced a change in its marijuana enforcement policy, issuing a memorandum encouraging federal prosecutors not to prosecute those who distribute marijuana for medical purposes in states where medical marijuana is legal.

However, as more and more states approve the recreational use of marijuana, the Department of Justice issued another memorandum reinforcing its right to contest state marijuana laws. This inconsistency about use, regulation, and legislation leaves employers in an unclear position of trying to maintain compliance with evolving legislation, while continuing to provide a safe workplace.

The majority of private employers across the U.S. are not required to drug test, and many state and local governments have statutes that limit or prohibit workplace testing unless required by state or federal regulations due to the nature of the job.

The US Department of Transportation (DOT), in its Drug and Alcohol Testing Regulations, state that marijuana use remains unacceptable for any safety-sensitive employee subject to drug testing under DOT regulations. This safety-sensitive category includes pilots, bus and truck drivers, locomotive engineers, subway operators, aircraft maintenance personnel, fire-armed security transit personnel, and ship captains, among others.

Federal agencies conducting drug testing must follow standardized procedures established by the Substance Abuse and Mental Health Services Administration (SAMHSA). Private non-union employers who require drug testing for applicants and/or employees are usually not required to follow SAMHSA's guidelines, but doing so helps to ensure the legality of testing. In unionized workforces, the implementation of testing programs must be negotiated through collective bargaining, even when federal regulations require testing.

The federal Drug-Free Workplace Act (DFWA), passed in 1988, requires all federal grantees to provide drug-free workplaces as a condition of receiving a federal contract of more than \$100,000 or a federal grant of any value. Employees who work for federal contractors may be subject to discipline, including termination if marijuana use is proven, regardless of whether its use is permitted by state law.

MARIJUANA EFFECTS

Studies of marijuana's mental effects show the drug can:

- Impair or reduce short-term memory
- Alter sense of time
- Reduce one's ability to do things requiring concentration, swift reactions, and coordination, such as driving a car or operating machinery

When marijuana is smoked, the body absorbs the THC. When the body attempts to rid itself of the THC, it transforms it into metabolites. The effects of marijuana use last for at least 4-6 hours, long after the high is gone.

Abuse of multiple substances, such as drinking alcohol, along with using marijuana, increases the risk of accidents. Urine tests can detect THC metabolites for up to a week after people have ingested marijuana.

Using the 5 nanograms per milliliter cutoff for screening, as established by SAMHSA, takes into consideration all types of users. Given the correlation between a marijuana 4 nanogram level and a Blood Alcohol Content of approximately .04 to .05 percent, the 5 nanogram cutoff would roughly equal the current level of alcohol impairment for safety-sensitive workers under the DOT testing laws of .04 percent blood alcohol.

As a result, the 5-nanogram cutoff may be used to establish an initial presumption of impairment; however, the mere presence of this level of THC may not establish acute impairment in an individual worker. That can only be determined when a medical evaluation for impairment has been performed, and the behavior, which led to the testing is considered.

Fewer than 20 states explicitly address marijuana and driving; of these, 11 have zero tolerance for any level of THC. The consensus is that the 5 ng/ml level should be used to ensure a safe workplace.

SIGNS AND SYMPTOMS

Some immediate physical effects of marijuana include a faster heartbeat and pulse rate, bloodshot eyes, and a dry mouth and throat. There are no scientific indications that marijuana improves hearing, eyesight, and skin sensitivity.

A common reaction to marijuana is the “acute panic anxiety reaction”. People describe this reaction as an extreme fear of losing control and paranoia, which causes panic. The symptoms usually depart within a few hours.

Long-term regular users of marijuana may become psychologically dependent. They may have a hard time limiting their use and may need larger doses of the drug to get the same effect. Users may develop social and personal problems affecting their employment.

A synthetic version of marijuana, commonly known as spice or K2, is becoming increasingly popular. “Synthetic” marijuana displays the same symptoms as marijuana, but because it’s synthetic, the effects can be more powerful and cause additional side effects. K2 products are smoked in joints or pipes, but some users make it into a tea.

Short-term effects include increased agitation, pale skin, seizures, vomiting, profuse sweating, uncontrolled spastic body movements, elevated blood pressure, heart rate, and palpitation. The onset of this drug is 3-5 minutes, and the duration of the high is 1-8 hours. In addition to physical signs of use, users may experience speech difficulties, severe paranoia, delusions, and hallucinations.

Marijuana is the most widely abused illegal drug in the workplace. Many people consider it less harmful than alcohol or tobacco, but like those, marijuana can be addictive and carries its own health risks. Chronic use can result in decreased mental capacity, reduced energy levels, and lung damage. The increased risks of injuries and accidents have led courts to rule that companies don’t have to tolerate medical or recreational marijuana use at the workplace, even if state law permits the use.

QUIZ

1. Marijuana is the most commonly abused illegal drug in the workplace.
 - A) **True**
 - B) False
2. Marijuana is classified as a schedule one drug.
 - A) **True**
 - B) False
3. What government agency has established a cutoff limit for marijuana?
 - A) DOT
 - B) NFPA
 - C) **SAMHSA**
 - D) OSHA
4. Synthetic marijuana (K2) is more potent than traditional marijuana, and the effects can last longer.
 - A) **True**
 - B) False
5. Which is NOT a symptom of marijuana use?
 - A) Bloodshot eyes
 - B) Dry mouth
 - C) **Improved hearing**
 - D) Slowed reflexes

DEPRESSANT ABUSE

Depressants sometimes referred to as sedatives, tranquilizers, or painkillers, fall into three categories: benzodiazepines, barbiturates, and opioids. These substances slow brain activity, making them useful for treating anxiety, sleep disorders and pain relief.

BENZODIAZEPINES

Drugs such as Valium and Xanax are sometimes prescribed to treat anxiety, acute stress, and panic attacks. The more powerful benzodiazepines, such as Halcion and ProSom, are prescribed for short-term treatment of sleep disorders. Usually benzodiazepines are not prescribed for long-term use because of the risk for developing tolerance, dependence, or addiction.

Other commonly abused drugs that can be grouped in this category include rohypnol and G-H-B. These are also described as designer drugs, and we'll discuss those in another module.

BARBITURATES

Barbiturates such as Mebaral, Luminal, and Nembutal, are used medically to reduce anxiety or to help with sleep problems. They are used less frequently because of their higher risk of overdose compared to benzodiazepines. Once addicted to barbiturates, users often seek out the drug to obtain the same kind of high as achieved before.

However, because users develop a tolerance to the drug and require more and more of it to achieve the same result, the risk of an overdose is increased. Barbiturate addicts abuse the drug to feel an extreme calm and contentedness.

OPIOIDS

The most well-known and a commonly abused opioid is heroin. Heroin can be injected, inhaled by snorting or sniffing, or smoked. It is highly addictive and has experienced a resurgence in popularity recently. After injecting heroin, users report feeling a surge of euphoria or a "rush", along with a dry mouth, a warm flushing of the skin, heaviness of the extremities, and clouded mental functioning. Following this initial euphoria, the user goes "on the nod", an alternately wakeful and drowsy state. Users who do not inject the drug may not experience the initial rush, but other effects are the same.

Heroin abuse continues to be a growing problem in the U.S. and around the world. A report by the CDC shows that over 8,200 died from heroin overdoses in 2013. It's believed by some experts that the rise in popularity of heroin is because it provides similar effects to prescription opioids, but at a fraction of the cost.

A 2011 survey by SAMHSA estimated that 607,000 persons per year used heroin in the years 2009-2011, compared to 374,000 during 2002-2005. Heroin can provide a fast high, but just as quickly, it can take over your life, and become fatal. Heroin addiction is treatable, but the path to recovery requires a commitment that can often last years or even decades.

PRESCRIPTION DRUGS

Medications that fall within the opioid class include Vicodin, OxyContin, Percocet, morphine and codeine. Opioids can produce drowsiness and mental confusion. Some people experience a euphoric response to opioid medications. Those who abuse opioids may seek to intensify their experience by taking the drug in ways other than those prescribed. For example, people who abuse OxyContin may snort or inject it, which increases their risk for serious medical complications, including overdose.

OTC DRUGS

Over-the-counter (OTC) medications, such as certain cough suppressants, sleep aids, and antihistamines, can be abused for their psychoactive effects. Others, when taken for their "hallucinogenic" properties, can cause confusion, psychosis, coma, and even death.

Cough syrups and cold medications containing dextromethorphan, often referred to as dex or robo, were the most commonly abused OTC medications in 2010. At high doses, a key ingredient in cough syrup can act like PCP or ketamine.

Signs and Symptoms

The abuse of depressants, regardless of type, generally induces feelings of euphoria, relaxation, and reduced anxiety. These effects, along with its addictive qualities, make it one of the most commonly abused pharmaceutical drugs in the U.S.

The symptoms of abuse include:

- Dry Mouth
- Fatigue
- Constricted pupils
- Dizziness
- Nausea
- Hallucinations

Side Effects

Acute overdoses of depressants can produce:

- Drowsiness
- Respiratory depression or arrest
- Muscle weakness
- Cold and clammy skin
- Low blood pressure and heart rate
- Coma or death

Treatment

Recently an opioid overdose treatment has been approved for use involving the drug Naloxone. Naloxone is a medication that counters the effects of opioid overdose. It can reverse the depression of the central nervous system, respiratory system, and hypotension.

Products that provide a disposable injection system or a nasal spray are now being marketed and emergency responders are being trained on their use in many areas. Sold under names such as Narcan Nalone, and Evzio, it can be used to treat people who have overdosed on heroin or painkiller opiates, such as morphine, oxycodone, or Vicodin.

Depressant abuse can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to prevent accidents at the workplace.

CONCLUSION

Depressant abuse can cause serious health problems and safety issues. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to avoid accidents at the workplace

QUIZ

1. What are the three categories of depressants?
 - A) **Opioids**
 - B) **Benzodiazepines**
 - C) Hallucinogens
 - D) **Barbiturates**
2. Which drug listed is NOT considered a depressant?
 - A) Heroin
 - B) Oxycodone
 - C) Xanax
 - D) **MDMA**
3. What is NOT a symptom of depressant abuse?
 - A) Dry mouth
 - B) Dizziness
 - C) **Dilated pupils**
 - D) Hallucinations
4. Over the counter drugs can be abused and cause hallucinogenic effects.
 - A) **True**
 - B) False
5. How can treatments to counter the effects of depressant overdoses be administered (select all that apply)?
 - A) Orally
 - B) **Injection**
 - C) Ingestion
 - D) **Inhalation**

STIMULANT ABUSE

Stimulants, as the name suggests, increase alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration. Stimulants have traditionally been used to treat asthma and other respiratory problems, and a variety of other ailments. However, as their potential for abuse and addiction became apparent, the medical use of stimulants began to wane.

Signs and Symptoms

There are varieties of drugs, both legal and illegal, that are categorized as stimulants. Regardless of the substance, the symptoms of stimulant abuse are standard and include:

- Euphoria
- Hyperactivity and increased alertness
- Increased desire to talk
- Sensitivity to light and sound

Side Effects

Abusers of stimulants may experience the following problems:

- Dilated pupils
- Anxiety and paranoia
- Twitching
- Reduced appetite
- Increased heart rate, blood pressure, and body temperature
- Disturbed sleep patterns
- Nausea
- Panic and psychosis

ILLEGAL DRUGS

Cocaine

The once popular cocaine is a powerful stimulant that causes euphoria, intense hikes in energy and heightened anxiety when it is smoked, eaten, injected, or snorted. The popularity of cocaine and its derivative, crack cocaine, has decreased recently as less costly and easier-to-obtain alternatives have become available. It is, however, still around and considered one of the most addictive substances available. The use of cocaine resulted in 4,300 deaths in 2013, up from 2,400 in 1990. While there are some medical applications for the use of cocaine such as a topical anesthetic for eye and nasal surgery, it's controlled internationally, and the majority of cocaine use is illegal.

Crack Cocaine

Crack is a powerful stimulant that is made of a mixture of cocaine and baking soda. When processed, it turns into a hardened, more potent mixture that can be smoked to produce intense effects. The name “crack”, is given to the substance because of the crackling noise it makes when the drug is smoked.

The effects of crack cocaine are relatively short, ranging from thirty minutes to two hours if inhaled, and an even shorter period if smoked or injected. Crack is such a strong stimulant that it creates severe stresses on the heart, the vascular system, the lungs, and the brain. Blood vessels constrict from the stimulation of the drug and over time, can harden. Then when further stimulation occurs, these damaged blood vessels can rupture, leading to a stroke, a fatal heart attack, or cardiac arrest.

For a short time, performance and dexterity may improve. Users report an increasing sense of energy and alertness, an extremely elevated mood, and a feeling of supremacy. However, as soon as the high wears off, users will exhibit irritability, paranoia, restlessness, and anxiety. This can lead to accidents as drivers on crack can make unpredictable moves and lose control of their vehicles.

Methamphetamine

Methamphetamine is a psychostimulant that induces a sense of euphoria and heightened energy when it is smoked, injected, snorted, or consumed. This highly addictive drug is commonly abused and has significantly grown in popularity over the past ten years.

Crystal meth is short for crystal methamphetamine, which is just one form of the drug methamphetamine. Crystal meth is commonly used as a “club drug”, taken while partying in nightclubs or at raves. Its most common street names are ice or glass.

Signs and Symptoms

In addition to the short-term symptoms listed above, crystal meth symptoms can include:

- Bizarre, erratic, and sometimes violent behavior
- Hallucinations, hyper-excitability, and irritability
- Delusions (for example, the sensation of insects crawling under the skin)

Long Term Effects

High doses can cause convulsions, seizures, and death. Prolonged use of meth can cause:

- Permanent damage to the blood vessels of the heart and brain
- Liver, kidney, and lung damage
- Destruction of nasal tissues if snorted
- Breathing problems if smoked
- Infectious diseases and abscesses at injection sites or due to compulsive scratching
- Malnutrition and weight loss
- Severe tooth decay
- Disorientation, apathy, and confused exhaustion
- Psychological dependence
- Psychosis
- Depression
- Damage to the brain similar to Alzheimer’s disease, stroke, and epilepsy

Meth is a dangerous and potent chemical and, as with all drugs, a poison that first acts as a stimulant but then begins to destroy the body.

MDMA

MDMA, often referred to as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is taken orally, usually as a capsule or tablet. The popular term Molly (slang for “molecular”) refers to the pure crystalline powder form of MDMA, usually sold in capsules. The drug’s effects last approximately 3 to 6 hours, although it is not uncommon for users to take a second dose of the drug as the effects of the first dose begin to fade.

Signs and Symptoms

MDMA produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

Flakka

A potent new designer drug called flakka is making headlines across the United States. Flakka is similar to the bath salts drugs. Both are synthetic versions of naturally occurring amphetamine-like drugs. Flakka, also known as gravel, was banned by the U.S. in early 2014. Despite this, flakka's availability has been surging in parts of the U.S. Flakka is a potent stimulant at low doses, but can cause bizarre behavior if a user takes too much.

Flakka can be used many different ways, including swallowing, snorting, or injecting. It also can be dissolved into liquid and inhaled as e-cigarette vapor. Like other drugs of this type, flakka can cause a condition called “excited delirium” that includes hyper-stimulation, paranoia, and hallucinations that can lead to violent aggression and self-injury.

Some drug experts are suggesting that flakka may be the next drug epidemic because it's more addictive than meth, more dangerous than cocaine, and the cheapest of the three.

Signs and Symptoms

Commonly observed symptoms of flakka abuse include bizarre behavior, agitation, paranoia, and delusions of superhuman strength.

Side Effects

The drug has been linked to deaths by suicide as well as heart attack. It can also dangerously raise body temperature and lead to kidney damage or kidney failure.

LEGAL DRUGS

Most recently, there has been a significant increase of the abuse of prescription stimulants because they are often easier to get. The most popular of these are drugs used to treat ADHD, narcolepsy, and occasionally depression.

Signs and Symptoms

Stimulants, such as Dexedrine, Adderall, Ritalin, and Concerta can induce:

- A feeling of euphoria
- Increased blood pressure and heart rate
- Constricted blood vessels
- Increased blood sugar

The increased use of stimulant prescriptions over the last two decades has led to greater availability and increased risk for abuse. Due to the fact that these are prescription drugs, they are perceived by many to be generally safe and effective; prescription stimulants are increasingly being abused.

Because these drugs increase the availability of certain neurotransmitters and increase the blood flow to muscles, they are increasingly popular among some academic professionals, athletes, performers, older people, and both high school and college students. Users frequently report improvements in focus and concentration, and sports performance. This type of use poses potential health risks, including addiction, cardiovascular problems, and psychosis.

As with other drugs, it's easy for individuals to become dependent upon or addicted to stimulants. Withdrawal symptoms associated with discontinuing stimulant use include fatigue, depression, and disturbance of sleep patterns. The repeated abuse of some stimulants can lead to feelings of hostility or paranoia, even psychosis.

Further, taking high doses of a stimulant may result in dangerously high body temperature and an irregular heartbeat. There is also the potential for cardiovascular failure or seizures. According to results from the 2010 National Survey on Drug Use and Health, an estimated 2.4 million Americans used prescription drugs non-medically for the first time within the past year, which averages to approximately 6,600 new users per day.

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

CONCLUSION

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

QUIZ

1. Which of the following drugs is NOT considered a stimulant?
 - A) Cocaine
 - B) Ritalin
 - C) **DXM**
 - D) MDMA
2. Identify the common symptoms of stimulant abuse (select all that apply):
 - A) **Increased energy**
 - B) **Talkativeness**
 - C) **Twitching**
 - D) Loss of coordination
3. Which of the stimulants listed below are known to cause violent behavior (select all that apply)
 - A) Adderall
 - B) **Crystal Meth**
 - C) **Flakka**
 - D) Cocaine
4. The abuse of prescription stimulants is to improve mental and physical performance.
 - A) **True**
 - B) False
5. What are the side effects of stimulant abuse (select all that apply)?
 - A) **Nervousness**
 - B) **Weight loss**
 - C) Reduced blood pressure
 - D) Drowsiness

HALLUCINOGEN ABUSE

Hallucinogens are a class of drugs that cause distortions in a person's perceptions of reality. Hallucinogens exist as both plants and as synthetically made substances. Hallucinogens are divided into two categories: classic hallucinogenics, and dissociative.

CLASSIC HALLUCINOGENS

Classic hallucinogenics include:

- LSD
- Mescaline (Peyote)
- Psilocybin
- DMT

Under the influence of hallucinogens, people see images, hear sounds, and feel sensations that seem real but do not exist. Some hallucinogens also produce rapid, intense emotional swings.

LSD

Lysergic Acid Diethylamide, or LSD, was once one of the most popular hallucinogens, but has since been replaced in popularity, due in part to its limited availability.

Mescaline

Mescaline is a naturally occurring hallucinogen found in certain type of cacti. As with most hallucinogens, mescaline causes altered thought processes and visual delusions. The effects of mescaline can last in excess of 12 hours.

Psilocybin

Psilocybin is the active ingredient in what are known as Magic Mushrooms. Psilocybin is another naturally occurring hallucinogen found in many species of mushrooms. Psilocybin generally causes feelings of euphoria, a distorted sense of time, and visual and mental hallucinations. Consuming psilocybin mushrooms can cause pupil dilation, changes in heart rate and blood pressure, nausea, and panic attacks. The effects of psilocybin can last up to six hours.

DMT

Dimethyltryptamine is a hallucinogenic compound used in religious rituals in the Amazon, and is growing in popularity. DMT is a plant-based mixture that can be smoked, injected, or made into a tea.

A National Survey on Drug Use and Health found that the number of people in the U.S. who have used DMT in some form has been up almost every year since 2006 -- from an estimated 688,000 in 2006 to 1,475,000 in 2012. DMT can produce powerful psychedelic experiences including intense visuals, euphoria, and hallucinations when combined with certain other drugs

DISSOCIATIVE DRUGS

The drugs in the dissociative category are both illegal and popular with abusers. The most common are:

- PCP
- Ketamine
- MDMA
- DXM
- Salvia

PCP

PCP, also known as Angel Dust, was originally intended as an anesthetic, but was never approved because of its psychological effects. Today it's an illegally produced synthetic drug sold as tablets, capsules, or white or colored powder. It can be snorted, smoked, or eaten. PCP is sometimes combined with marijuana to create what is known as supergrass or killer joints.

Signs and Symptoms

A moderate amount of PCP often causes users to feel detached, distant, and estranged from their surroundings. Numbness of the extremities, slurred speech, and loss of coordination may be accompanied by a sense of strength and invulnerability.

A blank stare, rapid and involuntary eye movements, and an exaggerated walk are among the more observable effects. Auditory hallucinations, image distortion, severe mood disorders, and amnesia may also occur. In some users, PCP may cause acute anxiety and a feeling of impending doom; in others, paranoia and violent hostility, and in some, it may produce a psychosis indistinguishable from schizophrenia.

Side Effects

The effects of PCP include a slight increase in breathing rate and a more pronounced rise in blood pressure and pulse rate. Respiration becomes shallow and flushing and profuse sweating can be evident.

At high doses of PCP, there is a drop in blood pressure, pulse rate, and respiration. Nausea, vomiting, blurred vision, uncontrolled eye movements, drooling, loss of balance, and dizziness may also occur. High doses of PCP can also cause seizures, coma, and death (though death more often results from accidental injury or suicide during PCP intoxication).

KETAMINE

Ketamine, or Special-K, is an anesthetic used in veterinary medicine. Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

MDMA

MDMA, known as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. It produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

MDMA was initially popular among young adults in the nightclub scene or at raves, but the drug now affects a broader range of users. MDMA is usually taken as a capsule or tablet, with the effects lasting 3 to 6 hours.

DXM

DXM stands for Dextromethorphan, It's known as robo after a popular brand of cough syrup. DXM is a cough suppressant and expectorant ingredient in some over-the-counter cold and cough medications. Adolescents and young adults often abuse these. The most common sources of abused DXM are “extra-strength” cough syrup.

SALVIA

Salvia is a fairly new addition to the list of hallucinogens. Salvia, also known as “magic mint”, is a member of the mint family, native to southern Mexico. Salvia can be smoked, chewed, or consumed by drinking the extracted juices.

Signs and Symptoms

The effects of salvia use are similar to other hallucinogens and have been described as intense but short-lived, appearing in less than 1 minute and lasting less than 30 minutes. The effects of hallucinogens are highly volatile in that there is no real way of knowing how the user will react from one use to the next. The reactions to salvia tend to be varied and unreliable, which is the primary concern when this drug is taken.

Different effects can be produced for different people and even for the same people at different times. The main reason for this is due to the variation in the active components of the drugs with each use.

The symptoms of hallucinogen use can vary by dosage:

- Low doses produce a numbness in the extremities and intoxication, characterized by staggering, unsteady gait, slurred speech, bloodshot eyes, and loss of balance.
- Moderate doses will produce a numbing effect similar to pain killers or anesthetics.
- High doses may lead to convulsions.

Users can really never know how much of the drug they are taking, due to the tendency of the drug to be made illegally in uncontrolled conditions.

When ingested, users may experience any number of effects from hallucinogens, some of which include:

- Mood swings
- Disconnection from reality
- Tactile, visual, or auditory hallucinations

Side Effects

Taking hallucinogens can lead to the following serious side effects:

- Increased heart rate, blood pressure, and body temperature
- Tremors or shakes
- Sweating
- Nausea and vomiting
- Poisoning
- Shallow breathing
- Loss of muscle control

Using hallucinogenic drugs can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. Hallucinogen abuse can eventually disrupt normal chemical processes leaving the brain in a diminished state.

QUIZ

1. All hallucinogenic drugs are synthetically made substances.
 - A) True
 - B) **False**
2. What are the two categories of hallucinogenic drugs?
 - A) Visual
 - B) **Classic**
 - C) **Dissociative**
 - D) Synthetic
3. What is a common street name for MDMA?
 - A) Magic mint
 - B) **Ecstasy**
 - C) DXM
 - D) Gravel
4. Which of the following is NOT a symptom of hallucinogen abuse?
 - A) Slurred speech
 - B) **Hyperactivity**
 - C) Mood swings
 - D) Hearing things
5. Salvia is an organic hallucinogen from Mexico.
 - A) **True**
 - B) False

INHALANT ABUSE

Many products found in the home or workplace, such as spray paints, markers, glues, and cleaning fluids contain substances that have mind-altering properties when inhaled. People do not typically think of these products as drugs because they were never intended for that purpose.

These products are used as recreational drugs for their intoxicating effect. Inhaling these substances for this purpose is called huffing, sniffing, dusting, or bagging. Teens and young adults do this most often, but not exclusively.

Abusers of inhalants breathe them in from a container or dispenser directly into their nose or mouth, or place a chemical-soaked rag in their mouth. Abusers may also inhale fumes from a balloon or a plastic or paper bag. Because the high produced by inhalants usually lasts just a few minutes, abusers often try to prolong it by continuing to inhale repeatedly over several hours.

A wide range of substances are abused as inhalants, these include:

- Volatile solvents - liquids that vaporize at room temperature such as gasoline
- Industrial or household products, - These include paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, and lighter fluid
- Art or office supply solvents - Art or office supply solvents, including correction fluids, felt-tip marker fluid, electronic contact cleaners, and glue
- Aerosols - Sprays that contain propellants and solvents. These include aerosol propellants in items such as spray paints, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, and vegetable oil sprays
- Gases - These can be found in household or commercial products such as butane lighters and propane tanks, whipped cream aerosols or dispensers, called whippets, and refrigerant gases
- Medical anesthetics – These include ether, chloroform, halothane, and nitrous oxide
- Nitrites – Amyl nitrites, used primarily as sexual enhancers, and commonly known as “poppers”

Amyl nitrite is still used in certain diagnostic medical procedures. Although not as widely used as in the past. When marketed for illicit use, organic nitrites are often sold in small brown bottles labeled as video head cleaner, room odorizer, leather cleaner, or liquid aroma.

Signs and Symptoms

The effects of solvent intoxication can vary widely depending on the dose, and the type of solvent or gas being inhaled. A person who has inhaled a small amount of rubber cement or paint thinner vapor may be impaired in a manner resembling being drunk.

A person, who has inhaled a larger quantity of solvents or gases, or a stronger chemical, may exhibit stronger effects such as slurred speech, euphoria, nausea, fainting, stupor, distortion in perceptions of time and space, hallucinations, and emotional disturbances. Most abused inhalants, other than nitrites, depress the central nervous system much like alcohol.

The effects are similar, including slurred speech, lack of coordination, euphoria, and dizziness. Inhalant abusers may also experience light-headedness, and delusions. With repeated inhalations, many users feel less inhibited and less in control. Some may feel drowsy for several hours and experience a lingering headache.

Side Effects

Regardless of which inhalant is used, abuse can lead to injury or death. When a gas that was stored under high pressure is released, it cools rapidly and can cause frostbite if it is inhaled directly from the container. Nitrous oxide, which can be used as an automotive power adder, is one such chemical. Its cooling effect is potentially lethal to a person.

Many inhalants are volatile chemicals and can catch fire or explode, especially when used where people are smoking. As with many other drugs, users may also injure themselves due to loss of coordination or impaired judgment, especially if they attempt to drive.

Solvents have many potential risks in common, including pneumonia, cardiac failure or arrest, and aspiration of vomit. The inhaling of some solvents can cause hearing loss, muscle spasms, and damage to the central nervous system and brain. Serious but potentially reversible effects include liver and kidney damage and blood-oxygen depletion.

Death from inhalants is usually caused by a very high concentration of fumes. Deliberately inhaling solvents from an attached paper or plastic bag or in a closed area greatly increases the chances of suffocation. Brain damage often occurs from chronic long-term use as opposed to short-term exposure.

Abusing inhalants can be lethal. Sniffing highly concentrated amounts of the chemicals in solvents or aerosol sprays can directly cause heart failure within minutes. This syndrome, known as “sudden sniffing death”, can result from a single session of inhalant use by an otherwise healthy person.

High concentrations of inhalants may also cause death from suffocation, especially when inhaled from a paper or plastic bag or in a closed area. Even when using aerosols or volatile products for their intended purposes like painting or cleaning, you should always do so in a well-ventilated room or outdoors.

VAPING

Electronic cigarettes, also called e-cigarettes, are battery-operated devices designed to deliver nicotine with flavorings and other chemicals to users in vapor instead of smoke. They can be manufactured to resemble traditional tobacco cigarettes, cigars or pipes, or even everyday items like pens or USB memory sticks. Newer e-cigarettes have refillable cartridges that can be filled with substances other than nicotine, providing a new way to deliver other drugs. This practice is often referred to as dabbing.

DABBING

The dab phenomenon is rapidly becoming popular. Dabs are forms of high-grade hash, usually made with a process involving butane or CO². BHO, or butane hash oil, is a marijuana product extracted from the plant and concentrated into a smokable gummy substance sometimes called "budder," "honeycomb", or "earwax".

It's widely believed that BHO has a higher concentration of THC, and is therefore much stronger than traditional marijuana or hashish. Vape pens, or vaporizer pens, usually consist of an electronic heating system and a cartridge holding hash oil. These provide a virtually smoke-free way to consume these concentrates, making the practice of dabbing that much more difficult to detect.

CONCLUSION

Huffing, sniffing, or bagging can cause serious health issues or death. Companies who employ teen workers where sources of inhalant materials are readily available need to be on the lookout for symptoms of abuse particularly in younger workers.

Companies and workers involved in air conditioning repair work should be aware of the signs of suspected refrigerant inhalant abuse. These situations can include:

- Frequent AC repair calls to the same home or neighborhood
- Refrigerant runs low prematurely
- Damaged AC units

If these signs are detected, workers should share that information with homeowners in a considerate manner. Remember, these signs don't confirm abuse, and inhalant abusers could be anyone, someone living in the home, or others in the neighborhood.

QUIZ

1. Which is NOT a term used to describe inhalant abuse?
 - A) Huffing
 - B) Bagging
 - C) Dusting
 - D) **Whiffing**
2. How long do the effects of abusing inhalants usually last?
 - A) **1 to 5 minutes**
 - B) 15 to 20 minutes
 - C) 30 to 60 minutes
 - D) 1 to 3 hours
3. Amyl nitrate that can be purchased for illegal purposes is referred to as (select all that apply):
 - A) **Video Head Cleaner**
 - B) Air Dusters
 - C) **Room Odorizer**
 - D) **Leather Cleaner**
4. When gases stored at high pressure are inhaled, they can cause injury due to frostbite.
 - A) **True**
 - B) False
5. Using e-cigarettes to inhale illegal substances is called what?
 - A) Dabbing
 - B) **Vaping**
 - C) Blasting
 - D) Snorting

DESIGNER DRUG ABUSE

The term “designer drugs” refers to drugs that are created in a laboratory. A designer drug is created by changing the properties of a drug that comes from a plant, such as cocaine, morphine, or marijuana, using chemistry. The resulting designer drugs typically have a new, different effect on the brain or behavior.

MDPV, Ecstasy, ketamine, MXE, GHB, Rohypnol, and bath salts are some examples of designer drugs.

MDPV

MDPV is the active ingredient found in many drugs labelled as plant food or bath salts. It acts as a stimulant, and has been reported to produce effects similar to those of cocaine and amphetamines. The effects of MDPV last 3 to 4 hours, with the after effects of high blood pressure and rapid heart rate lasting 6 to 8 hours.

Signs and Symptoms

Common symptoms of MDPV abuse include:

- Agitation
- Dilated pupils
- Hallucinations
- Confusion
- Paranoia
- Anxiety

Side Effects

Reported side effects for MDPV and other bath salts drugs include heart palpitations, high blood pressure, increased body temperature, nausea, and violent or suicidal behavior. Although efforts have been made to prohibit the sale of the chemicals used to make bath salts, new variations using alternate chemicals continue to appear, and these new formulas can still be bought at head shops and on the street around the country.

MDMA

MDMA, the active ingredient in Ecstasy, is a member of the amphetamine class of drugs, and falls under other broad categories of substances, including stimulants and psychedelics. MDMA is one of the most widely used illicit drugs in the world. MDMA is available in pill form, commonly known as Ecstasy, and more recently in crystalline form known as Molly, which is a purer form of the drug, which greatly increases the risk of overdose.

Ecstasy and Molly are popular with teenagers and young adults who are more likely to use it on weekends and at parties. The effects of MDMA are more consistent than those produced by most psychedelics, and its distinct euphoria is unlike other stimulants.

The recent growth in the popularity of Molly is due to the claims that it’s “pure”. While there’s no way to tell if that’s true, it’s almost certainly more potent than Ecstasy pills. Another factor is that it’s relatively cheap. Usually around \$30-\$40 for 100mg, which is typically enough for a first-time user.

Side Effects

Depression and loss of memory can occur more frequently in long-term MDMA users. A chronic user can suffer severe depression, fatigue, and hopelessness and have reported being extremely depressed after periods of prolonged use; this is sometimes referred to as suicide Tuesday. Suicide Tuesday is the name given to the trend for people who use ecstasy all weekend, then commit suicide when they fully come down from the high on Tuesday.

Due to its near-universal illegality, the purity of a substance sold as Ecstasy is unknown to the user. Pills may contain other active substances meant to stimulate in a way similar to MDMA, such as amphetamine, methamphetamine, ephedrine, or caffeine.

KETAMINE

Ketamine is an anesthetic used in veterinary medicine. Unlike the other drugs listed here, ketamine, or Special-K, is a dissociative hallucinogen. This means it causes a sense of detachment between a person's body and the external world.

The effects of ketamine are relatively short in nature, lasting about 30 to 60 minutes. Ketamine comes in a clear liquid and a white or off-white powder form, which can be injected, mixed in a drink, or combined with tobacco or marijuana and smoked.

Signs and Symptoms

Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

Side effects

Ketamine can cause serious bladder problems with severe pain and difficulty passing urine, and can lead to surgical removal of the bladder.

Detection

While most drug tests don't specifically look for ketamine, unlike other designer drugs, it can be detected in urine samples for two to four days after use.

MXE

Methoxetamine, or MXE, is a dissociative sedative similar to ketamine, but stronger and longer lasting. MXE is a white powder that has stimulant and dissociative effects, with the stimulant effects appearing at lower doses, and the dissociative effects at higher doses.

MXE can be ingested or injected. Users of lower doses of the drug report feeling calm, with an increase in energy, euphoria, and disconnection from problems and concerns. At higher doses, the effects are different and much more intense. At these higher levels, the effects are more similar to related drugs ketamine and PCP.

Signs and Symptoms

The effects of MXE include:

- Feelings of intense intoxication
- Involuntary eye movement
- Auditory and visual hallucinations
- A feeling of disconnection from your body

Side effects

Some of the side effects of MXE include paranoia, nausea, high blood pressure, and rapid heart rate. Injecting MXE can damage the veins and can cause serious problems such as abscesses and blood clots.

GHB

GHB is a depressant that is commonly referred to as a “club drug” or “date rape” drug that is often placed in alcoholic beverages. GHB, also known as G, liquid ecstasy, or liquid X, is a depressant used both as a prescription sleep-aid and as a recreational intoxicant. It's known for its ability to induce a short (several hour) coma-like sleep at high doses.

Due to the number of GHB-related deaths in combination with its addiction potential, it was categorized as a schedule one drug by Federal law in 1999. GHB that's bought illegally on the street or over the internet comes in liquid form or as a white powder, and is taken orally and frequently combined with alcohol.

Signs and Symptoms

The common symptoms of GHB use are:

- Euphoria
- Increased energy
- Dizziness
- Impaired coordination
- Hallucinations
- Confusion

Side effects

The side effects of GHB use include:

- Seizures
- Muscle twitches
- Tooth decay
- Insomnia
- Low blood pressure
- Rash

The combination of GHB and alcohol can result in a coma-like condition, and result in death due to depressed breathing conditions.

The production of GHB usually involves the use of lye or drain cleaner mixed with GBL, a chemical cousin of GHB and an industrial solvent often used to strip floors.

ROHYPNOL

Rohypnol is a drug with properties similar to those of Valium. It's used in the short-term treatment of insomnia, as a pre-medication in surgical procedures and for inducing anesthesia. The common street name for rohypnol is “roofies”. Rohypnol is sold in Europe and Latin America as a sleeping pill, but it is illegal in the United States.

Like Valium, Librium, and Xanax, Rohypnol's effects include sedation, muscle relaxation, reduction in anxiety, and prevention of convulsions. However, Rohypnol's sedative effects are approximately 7 to 10 times stronger than Valium. The effects of Rohypnol appear 15 to 20 minutes after administration and last approximately four to six hours.

While Rohypnol has become widely known for its use as a date-rape drug, it is abused more frequently for other reasons. It is abused by students, street gang members, rave attendees, and heroin and cocaine abusers to produce profound intoxication, boost the high of heroin, and control the effects of cocaine. Rohypnol causes partial amnesia, causing users to be unable to remember certain events that they experience while under the influence of the drug.

Signs and Symptoms

Common signs of Rohypnol use include loss of muscle control, confusion, drowsiness, and amnesia. A person can be so incapacitated (made unable to act) they collapse. They lie on the floor, eyes open, able to observe events but completely unable to move.

Side Effects

Rohypnol users often describe its effects as “paralyzing”. The effects start 20 to 30 minutes after taking the drug, peak within two hours and may persist for 8 to 12 hours.

In addition to the chemically induced amnesia, rohypnol often causes decreased blood pressure, drowsiness, visual disturbances, dizziness, confusion, digestive problems, and urinary problems.

BATH SALTS

The active ingredient in bath salts is called mephedrone a synthetic substance that is claimed to make users feel confident and energized and enhance musical experiences.

One package of these amphetamine-like drugs can contain several different substances, including mephedrone and MDPV. The powder is often marketed as a novelty bathing product, but it is not intended for use in baths. Bath salts can be swallowed, snorted, smoked, or injected.

Signs and Symptoms

The signs of bath salts use may include:

- Euphoria
- Increased alertness and awareness
- Abnormal pupil dilation
- Uncontrollable eye movement
- Increased energy and motivation
- Mental stimulation/increased concentration
- Confusion
- Hallucinations
- Talkativeness

The primary effects last roughly 3 to 4 hours, with after effects such as rapid heartbeat, high blood pressure, and mild stimulation lasting from 6 to 8 hours.

Side Effects

The side effects of bath salts use include:

- Agitation or severe rage
- Heart palpitations and chest pain
- Seizures and tremors
- Vomiting
- High body temperature
- Kidney or liver failure
- Excessive sweating and compulsive water drinking
- High blood pressure
- Compulsive teeth grinding
- Sleep deprivation
- Intense and prolonged panic attacks

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used Molly alone increased by 66 percent. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

DETECTION

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

CONCLUSION

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used molly alone increased by 66%. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

QUIZ

1. Designer drugs are chemically modified variations of organic drugs.
 - A) **True**
 - B) False
2. Which of the following is NOT defined as a designer drug?
 - A) MDMA
 - B) MDPV
 - C) MXE
 - D) **Salvia**
3. What drug is used as an animal anesthetic?
 - A) GHB
 - B) **Ketamine**
 - C) Rohypnol
 - D) MDPV
4. What are the common symptoms of designer drug abuse (indicate all that apply)?
 - A) **Euphoria**
 - B) **Hallucinations**
 - C) Drowsiness
 - D) Increased appetite
5. Which of the following are referred to “date rape” drugs (indicate all that apply)?
 - A) MXE
 - B) **Rohypnol**
 - C) Ketamine
 - D) **GHB**

DEALING WITH EMPLOYEE PERSONAL PROBLEMS

There's a naive belief among many managers and supervisors that employee personal problems are irrelevant to job performance, and therefore something they can ignore. We imagine that when employees walk through the door, all of their personal problems are left behind. Managers and supervisors who think this way believe employees are like robots: treat them all the same way and just focus on the work.

The reality is that people aren't robots. As much as we'd like to believe employees' personal lives don't affect their work, it does. Exhausted new parents suffering from lack of sleep due to a crying infant aren't able to be as creative as they'd like. Workers dealing with problems at home often find their minds wandering, and don't do their best work. Employees who are in pain, either physical or emotional, don't work at peak levels.

As supervisors, it's our job to get the best work out of our employees, but it's also part of our job to keep them motivated and happy so they'll continue to be contributing members of the company for the long term. To do that we need to know our employees as individuals, and to help them through any personal issues that interfere with their ability to do their best work.

Here are some tips on how to help employees with their personal problems:

Listen:

Sometimes it's enough to just listen to an employee. Be sympathetic and offer kind words of encouragement. However, make sure you know the difference between listening to an employee, and trying to solve his or her problem. Remember, it's up to the employee to solve his or her own problem. You can listen, but you shouldn't try to take charge of getting a solution.

Refer employees to appropriate resources:

As much as you'd like to give personal advice, it's usually a bad idea. It's better to refer employees to professional counselors or clergy, or at least encourage them to talk to understanding and sympathetic family and friends.

If you have personal experience with a similar problem, then you can tell your own story and describe your solution. Just be careful to keep the focus on the employee, remember, it's not about you, it's about them. Don't try to solve the employee's problem yourself, or try to force your own solution on the employee, just try to guide them toward finding their own personal solution.

Accommodate short-term needs:

Be as flexible as you can in making temporary accommodations to help the employee through a crisis, but make sure you communicate that these changes are in fact just temporary. Work out a date when the arrangement will end, or at least a date when you'll get together with the employee to reassess the situation.

Be flexible in working hours or working location:

This is usually one of the easiest accommodations to make. Give short-term time off if it's needed (use vacation or sick time if it's available). If the problem will continue for a while, then maybe work can continue as is but with a revised working schedule (e.g., come in an hour later, but leave an hour later to make up for it). Alternatively, perhaps the employee can work from home on certain days. Offer alternatives to meet the needs of the employee.

Temporarily assign an employee to different work that is better suited for the employee's current state of mind:

This is a more extreme accommodation but it may be required in certain situations. For example, you may temporarily assign a project manager to other work, putting someone else in place as temporary project manager. If an employee travels a lot for the company, you may want to temporarily assign the employee to a job with little or no travel.

Make it clear that these are short-term accommodations:

It's important to make sure the employee understands continuing these accommodations long-term may ultimately result in a change in job title and/or reduction in pay. Don't present this as a threat, just let the employee know that you're willing to let things slide for a while, but ultimately the employee will be expected to deliver the same level of performance as before.

Keep in touch with the employee during the crisis:

Monitor the employee's situation to ensure that he or she is in fact taking steps to resolve the situation. Provide encouragement and positive reinforcement along the way.

When the crisis has passed, refocus the employee on the steps needed for success and career advancement:

Congratulate the employee on making it through a difficult situation. Then provide assistance to help the employee reintegrate and get back the focus that they once had.

CONCLUSION

Every employee is an individual with his or her own personal strengths and issues. You can't expect to take advantage of an employee's strengths without occasionally running up against some of the issues. Management is about achieving business results by using resources effectively, and to do that, you'll need to deal with employee personal problems.

QUIZ

1. Supervisors should treat all employees (Select all that apply)
 - A) **Equally**
 - B) **Fairly**
 - C) The same
 - D) **As individuals**
2. Who is responsible for solving an employee's personal problem?
 - A) The company
 - B) The supervisor
 - C) The EAP
 - D) **The employee**
3. Supervisors should give personal advice to a troubled employee.
 - A) True
 - B) **False**
4. Accommodating an employee's short-term needs should include (select all that apply)
 - A) **Modifying their work hours**
 - B) **Changing job assignments**
 - C) **Establishing a time period for the accommodation**
 - D) Reducing their pay
5. The goal of successful supervision is to achieve the best performance possible from an employee.
 - A) **True**
 - B) False

ABUSE RECOGNITION

This company recognizes that employee involvement with alcohol and other drugs can adversely affect the quality of work and performance of employees, pose serious health risks to users and others, and have a negative impact on productivity and morale.

Because the company understands its employees are a valuable asset, every effort will be made to protect them from the hazards of drug and alcohol abuse by themselves and their co-workers.

In order to create and maintain a safe work environment, supervisors must be trained to recognize the symptoms of abuse, and know the procedures to deal with abuse incidents.

It's important to remember that diagnosing a substance-abuse problem isn't your job. However, remaining alert to changes in employee performance and working to improve employee productivity is a core component of every supervisor's job.

The following steps can help you identify and handle employee performance problems:

Be attentive: The sooner a problem is identified, the sooner it can be corrected, especially when dealing with substance abuse. It's important to remain alert to any job performance problems such as rising accident rates, increased absenteeism or tardiness, decreased productivity, and deteriorating co-worker relationships.

Although these problems can arise for many reasons, including a variety of personal problems, they may also be signs of substance abuse. Don't make assumptions about the reason for a problem; your job is to be aware of problems on the job, make sure tasks are completed, deadlines are met, and things are running smoothly.

Observe: If you see changes in an employee's work patterns or performance, watch more closely. For example: you know an employee is making a habit of arriving late, calling in sick a lot, or having mood swings. Has there also been a drop in productivity or an increase in accidents? Remember, it's not your job to figure out the cause of the problem. Your job is to observe employee behavior and determine the effects of those behaviors on job performance.

Changes in behavior may be related to substance abuse; they also may be the result of something else, such as a medical problem like diabetes or high blood pressure. Slurred speech or dizzy spells can be a sign of someone who is under the influence of some substance, in need of insulin, or has had a stroke.

Document: Job performance problems and other work-related conduct needs to be documented. The documentation should include the names of persons involved, the time, the date, what occurred, the names of witnesses, and what actions were taken. It should focus on job performance and should not include your opinions.

The following tables identify the performance and behavior signs, and physical symptoms commonly associated with individuals who abuse alcohol and/or other drugs. By familiarizing yourself with this information, you may be able to recognize possible abusers on the job, and prevent potential accidents or injuries.

Behavior Signs Commonly Associated With Substance Abuse

PHASE ONE			
Disease Progression	Impact	Visible Signs	
Uses to relieve tension Tolerance increases Memory black-outs Lies about use	Performance drops to 90% efficiency Criticism from boss Performance drops off more to 75% efficiency	Job Performance: Makes more mistakes Misses deadlines Attendance: Late/absent	General Behavior: Co-workers complain Overreacts to criticism Complains about being ill Lies
PHASE TWO			
Disease Progression	Impact	Visible Signs	
Sneaks use Guilty about use Tremors Depression Loss of interest in normal activities	Loss of job advancement Warnings from boss Family problems Financial problems Wage garnishment	Job Performance: Sporadic work pace Difficulty concentrating Attendance: More days off for vague reasons	General Behavior: Undependable Avoids associates Exaggerates Unreasonable resentments
PHASE THREE			
Disease Progression	Impact	Visible Signs	
Avoids discussion of problem Attempts to control use fail Neglects food Isolates self from others	Disciplinary action Trouble with the law Efficiency to 30% Serious family problems	Job Performance: Far below expectations Attendance: Frequent time off Doesn't return after lunch	General Behavior: Aggressive; belligerent Domestic problems interfere Loss of ethical values Won't talk about problem
PHASE FOUR			
Disease Progression	Impact	Visible Signs	
Believes that other activities interfere with use Blames people, places, and things for problems	Final warnings at work Termination Serious financial problems	Job Performance: Formal discipline No improvement Attendance: Prolonged unpredictable absences	General Behavior: Uses on the job Physical deterioration

Physical Symptoms Commonly Associated With Substance Abuse

	Alcohol	Tobacco	Marijuana	Inhalants	Stimulants	Depressants	Hallucinogens	Narcotics	PCP
Duration of Symptoms	App. 1 hour per each serving	20 minutes	2 to 4 hours	5 minutes to 8 hours	5 minutes to 12 hours	1 to 16 hours	5 minutes to 12 hours	4 to 24 hours	4 to 6 hours
Detectable by Drug Test	12 hours	17 hours	1 to 10 days	Not detectable	4 hours to 2 days	2 hours to 2 days	2 hours to 2 days	2 hours to 2 days	4 hours to 7 days
Pupil Size	Normal	Normal	Dilated*	Normal	Dilated	Normal	Dilated	Constricted	Normal
Lack of Convergence	Normal	Normal	Present	Present	Normal	Present	Normal	Normal	Present
Temperature	Normal	Normal	Normal	Varies	Higher	Normal	Higher	Lower	Higher
Pulse Rate	Higher	Higher	Higher	Higher	Higher	Lower	Higher	Lower	Higher
Blood Pressure	Higher	Higher	Higher	Higher	Higher	Lower	Higher	Lower	Higher
Time Estimation	Normal	Normal	Slower	Faster	Faster	Slower	Slower	Slower	Faster
Other Symptoms	Odor on breath Slurred speech Lack of coordination	Odor on breath or clothes Stained fingers or teeth	Red eyes Odor on breath or clothes Eyelid tremors Muscle tremors Increased appetite	Odor or residue on mouth or clothes Nausea Headache Disoriented	Jittery Talkative Runny nose or dry mouth	Disoriented Drowsy Uncoordinated Slow, slurred speech	Spacey Hallucinations Paranoia Memory loss Uncoordinated	Sleepiness Droopy eyelids Soft, low voice Euphoria	Confused Aggressive Sweaty Repetitive

It's important to remember that if an employee displays these symptoms, it doesn't necessarily mean he or she has a substance-abuse problem. When an employee's performance deteriorates, supervisors have an obligation to intervene. You don't need to be an expert on alcohol and drug abuse to do so. The intervention should be focused on the employee's performance problem.

ENABLING AND SUPERVISOR TRAPS

Enabling is actions you or coworkers take to protect an employee from the consequences of his/her behavior and actually helps them to NOT deal with the problem.

Examples of Enabling:

- **Covering Up:** Providing alibis, making excuses or even doing an impaired worker's work rather than confronting the issue that he/she is not meeting his/her expectations
- **Rationalizing:** Developing reasons why the person's continued substance abuse or behavior is understandable or acceptable
- **Withdrawing/Avoiding:** Avoiding contact with the person having the problem
- **Blaming:** Blaming yourself for the person's continued substance abuse or getting angry at the individual for not trying hard enough to control his/her use or to get help
- **Controlling:** Trying to take responsibility for the person by throwing out his/her drugs, cutting off the supply, or trying to minimize the impact by moving him/her to a less important job
- **Threatening:** Saying you'll take action (ceasing to cover up, taking formal disciplinary action) if the employee doesn't control his/her use, but not following through

Examples of Supervisor Traps

Supervisor traps are defensive mechanisms abusers use to avoid the consequences of their actions.

- **Sympathy:** Trying to get you involved in his/her personal problems
- **Excuses:** Having increasingly improbable explanations for everything that happens
- **Apology:** Being very sorry and promising to change (“It won’t happen again”)
- **Diversions:** Trying to get you to talk about other issues in life or in the workplace
- **Innocence:** Claiming he/she isn’t the cause of the problems you observe, but rather the victim
- **Anger:** Showing physically intimidating behavior, blaming others (“It’s your fault”)
- **Pity:** Using emotional blackmail to elicit your sympathy and guilt (“You know what I’m going through!”)
- **Tears:** Falling apart and expressing remorse upon confrontation

CONCLUSION

Remember, when dealing with an employee regarding suspected substance abuse, a supervisor should call in another supervisor or manager who can act as a reliable witness and always document the incident.

QUIZ

1. What steps should be taken to identify an employee's performance problem (select all that apply)
 - A) Be attentive
 - B) Observe
 - C) Document
 - D) **All of the above**
2. Doing part of a co-workers job because they're "going through a rough time" is called:
 - A) Being a friend
 - B) Being co-dependent
 - C) **Enabling**
 - D) Avoidance
3. If you see an employee who appears to be under the influence of drugs or alcohol, you should:
 - A) Ignore it
 - B) Avoid being around them
 - C) Terminate them
 - D) **Document the incident**
4. Which is NOT a symptom of stimulant abuse?
 - A) Nervous energy
 - B) Talkativeness
 - C) **Loss of coordination**
 - D) Dry mouth
5. Possible signs of substance abuse can also be caused by medical problems.
 - A) **True**
 - B) False

CRISIS SITUATIONS

Being familiar with the company's DFWP and being able to explain it is only part of the supervisors DFWP responsibilities. If a supervisor suspects a possible drug or alcohol problem, they need to investigate.

All supervisors should be prepared to deal with a crisis. When the situation involves alcohol and drugs, it's important to remember that an impaired person is not a rational one. Some crises that supervisors may have to face include:

- Violent, unpredictable behavior
- Threatening words and actions
- Illegal activity

HANDLING A CRISIS

Having a drug-free workplace program in place is the best line of defense against alcohol or drug related problems in your workplace.

Situations involving alcohol and other drugs can be difficult to manage, and it's important to proceed with caution and to document any actions you take.

For example, suppose a supervisor comes upon an employee who is disoriented and smells of alcohol. The following are some steps that the supervisor can take:

- Escort the employee to a private area to inquire about the behavior
- If possible, call in another supervisor or manager who can serve as a reliable witness
- Inform the employee of your concerns and get his or her explanation
- Notify senior management

Based upon the employee's response, it may be necessary to suspend the employee until a formal investigation takes place; and arrange for the employee to be escorted home.

Remember, if the employee is in no shape to work, he/she is in no shape to drive.

To investigate a potential drug/alcohol crisis, the supervisor should answer the following questions:

- What exactly do you see?
- Does there appear to be illegal activity, policy violations, or very unusual behavior taking place?
- Does the activity involve a group of people or a single employee?
- Are you the direct supervisor to anyone involved in the incident?
- Are reliable witnesses available?
- Is any physical danger involved in taking action or not taking action?
- Are there existing policies that apply to the situation?
- Does the situation require expert consultation from human resources, security, or law enforcement?
- Have you documented what you see and what you have done in response?

SECTION FIVE – TRAINING

In order to protect other employees, if there is possibility of a situation becoming violent, all necessary measures must be taken to remove the problem employee from the scene. This may require the assistance of security and/or local law enforcement.

If an employee is observed illegally, distributing, possessing, selling, transporting, or manufacturing controlled and dangerous substances on company property, local law enforcement should be contacted for assistance.

These situations usually result in a uniformed officer responding to conduct an investigation, make an arrest (if appropriate), and prepare a report. Due to the limited resources of most local law enforcement agencies, they may not have the resources to conduct lengthy undercover investigations. If such a response is necessary, the company has the option of contracting the services of a private security investigator.

Enforcement strategies should be well thought out and planned. Consistent, detailed documentation must be maintained in the event that criminal prosecution results from workplace behavior.

If substance abuse is contributing to an employee's poor performance, ignoring or avoiding the issue won't help the situation. When an employee's performance deteriorates for whatever reason, you as supervisor have an obligation to intervene. You don't need to be an expert on alcohol and drug abuse to do so. The intervention should be focused on the employee's performance problem.

QUIZ

1. Which of the following is NOT considered a crisis situation?
 - A) Violent, unpredictable behavior
 - B) Threatening words and actions
 - C) **Maintaining confidentiality**
 - D) Illegal activity
2. As a supervisor, it's not your job to determine whether alcohol or drug use is part of an employee's poor performance.
 - A) True
 - B) **False**
3. When holding an intervention meeting with an employee, which of these items should NOT be done?
 - A) **Discuss alcohol and drug use**
 - B) Use a formal yet considerate attitude
 - C) Prepare what you're going to say ahead of time
 - D) State your expectations for improved performance and/or conduct
4. Local law enforcement should be contacted if an employee is observed distributing, possessing, selling, transporting, or manufacturing illegal substances on company property.
 - A) **True**
 - B) False
5. In a potentially violent crisis, the problem employee should be removed from the scene.
 - A) **True**
 - B) False

INTERVENTION & CONFRONTATION

Most supervisors know not to involve themselves in the personal lives of employees, but since personal problems can affect all aspects of an employee's life, they can't park their problems at the door. As a result, their problems accompany them into the workplace.

When this happens and it affects job performance, it becomes a supervisory concern. Employees whose performance fails to meet expectations may have a serious personal problem that's impairing their performance. Perhaps it's a marital problem or financial trouble, or it could be signs of a developing alcohol or drug problem.

If substance abuse is contributing to an employee's poor performance, ignoring or avoiding the issue won't help the situation. When an employee's performance deteriorates for whatever reason, you as supervisor have an obligation to intervene. The intervention should be focused on the employee's performance problem.

Supervisors usually go through several phases when faced with an employee whose performance is declining as described below.

- **Uncertainty and denial:** The employee may give excuses to explain away the problems, such as sick kids, family emergencies, and car trouble. You have the natural and hopeful feeling that things will probably straighten themselves out. You may even have a "heart-to-heart" discussion with the employee at this point.
- **Anger, frustration, and exasperation:** As the problems continue or get worse, you move into the next phase, characterized by anger, frustration, and exasperation. There are broken promises from the employee, and you're finding it takes more time to double check and monitor the employee's performance. You begin to suspect that the employee is lying and just giving more excuses.
- **Self-doubt and guilt:** Next, you may go through a phase when you question your ability as a supervisor. You may experience some guilt about bending the rules for the employee or because you finally blew up at the employee.
- **Recognition:** This is when you recognize that normal efforts aren't correcting the problem or motivating the employee. Hopefully, this recognition leads to documentation, constructive confrontation and a referral to the EAP or other assistance.

When you've determined there are job performance problems and decided to address these with the employee, these are the steps you should take:

- Document the performance problem
- Get yourself ready
- Set the stage
- Use constructive confrontation
- Refer for assistance
- Follow up on progress towards meeting performance goals

Document the Problem

Discuss the matter with your supervisor and/or a Human Resources representative, always respecting privacy issues. If applicable, confer with the Employee Assistance Program (EAP) Administrator about the problem. Prepare what you're going to say in advance and make notes. Arrange to discuss the performance problem with the employee immediately, before it becomes more serious.

Documentation will clarify the situation, and help you communicate specifics to the employee. It also provides you legal protection. Supervisors should keep records of poor work performance incidents, including times and dates, attendance and/or attitude issues, problems with coworkers and any accidents or near misses.

It's important to remember that you're looking for trends or patterns, not individual occurrences. Anyone can have a bad day.

Use the following intervention principles when preparing to confront a staff member.

Get Yourself Ready

When you have observed and documented deteriorating job performance or work patterns, you may have several options:

- Discuss the matter with your immediate supervisor and/or the Human Resources (HR) representative
- Discuss performance difficulties with the individual employee before the problems become more serious. This discussion with the employee is called constructive confrontation
- Consult with someone who can give you professional guidance (HR or EAP if available). It's important to know what you are going to say
- Write notes that will help during your meeting with the employee. You don't need to follow these notes exactly, but they'll help you stay on track when talking to the employee

If EAP services are not available, it may be useful to consult with a community mental health professional or addiction treatment center. This may help you prepare for confronting an employee who's having performance problems. However, it is important to note that these professionals may not fully understand the limits of your workplace and the importance of keeping interventions focused on job performance matters only.

Set the Stage

- Hold any meeting with the employee in a private place where interruptions will be limited
- Identify the best time of day considering workload and the employee's behavior
- Allow sufficient time for the meeting and set a time limit
- Make an appointment with the employee to discuss the issues
- Allow for union representation, if appropriate

Constructive Confrontation

When using constructive confrontation, keep in mind that your primary objective, as a supervisor, is not to determine the employee's underlying problem. Your objective is to advise the employee of the specifics of his or her poor performance and to come to an agreement on the method for improvement.

DO:

Prepare what you're going to say ahead of time

Have a plan and stick to it. Say what you have to say directly and clearly

Find a place to meet that is private. What's said in the meeting must be kept confidential

Focus on job performance and conduct—not on suspected alcohol or other drug abuse, mental illness, or any other potential reason for performance problems

Treat all employees the same. Don't let age, seniority, friendship, or sympathy affect your evaluation or allow you to make exceptions for some employees and not others

Use a formal yet considerate attitude. If the interview becomes too casual, it will lessen the impact of your message

Emphasize that you're only concerned with work performance or conduct

Have written documentation of the job performance and/or conduct problems (late reports, absences, lower productivity, accidents, trouble with coworkers) in front of you when you talk with the employee

Remember that many problems get worse without assistance

State your expectations for improved performance and/or conduct and what will happen if the expectations aren't met within a specific period. Offer suggestions for improving performance and/or conduct

Offer available resources (EAP, hotlines, etc.) to help employees get back on track if they say they're having personal problems. Don't try to counsel the employee

If necessary, arrange for a second meeting to evaluate progress or to discuss disciplinary actions

DON'T:

Try to diagnose the cause of the employee's job performance or conduct problem.

Moralize or judge the employee. Limit comments to job performance and conduct issues only.

Discuss alcohol and drug use. Stick strictly to the topic of performance.

Be misled by sympathy-evoking tactics.

Cover up or accept repeated unlikely excuses. If you protect people, it enables them.

Threaten discipline unless you're willing and able to carry it out.

Be distracted by tears, anger, or other outbursts. (Stay focused on job performance and conduct.)

Back down. (Get a commitment for improved job performance and conduct.)

Argue with an employee. If the employee becomes resistant, reschedule the meeting instead.

Possible Meeting Outcomes

- Referring the employee to the EAP
- Placing the employee on suspension pending an investigation
- Providing for the employee to be escorted home
- Escorting the employee to a laboratory for analysis
- Calling local law enforcement if the situation is dangerous or illegal activity (such as distribution, possession, sale, or transportation of illegal substances) has been witnessed

Disciplinary Actions

- Verbal warning
- Written warning (Corrective Action Plan)
- Suspension
- Termination

Assistance

Employee Assistance Programs are company resources established for the identification, motivation, and treatment of substance abusing and other troubled employees.

EAP's use the Job Performance Standard to identify which employees with alcohol and other personal problems. This standard is based on the principle that employers have the right to intervene in an employee's personal life only when job performance is adversely affected.

If you decide an employee is in need of help, there are two options: recommendation or requirement. If an employee acknowledges that there is a problem, as a supervisor, you can encourage the employee to seek help from either the company's HR department or EAP program, if available, or refer them to a local assistance organization.

If the employee's situation has reached a level where workplace safety and/or the employee's well-being are at risk, it may be necessary to formally require the employee to participate in a treatment program. It's critical to discuss this decision with the HR department to determine if it's warranted and the steps that are required, before taking this action.

CONCLUSION

Be supportive, but avoid emotional involvement—offer help in resolving performance problems and identify resources for help in addressing personal problems. Advise the employee that it's his/her responsibility to consider whether or not his/her poor performance is caused by an underlying personal problem.

If your job consisted of managing machines, life would be simple. Supervising people can be far more difficult. When employee performance problems occur, communication skills and training are crucial to resolving issues. Like machines, people can be repaired, the difference is; it's more difficult than replacing a worn-out part.

QUIZ

1. The Job Performance Standard is based on the principle that employers have the right to intervene in an employee's personal life only when job performance is adversely affected.
 - A) **True**
 - B) False
2. Which of the following are constructive confrontation techniques you should use when meeting with a troubled employee (select all that apply)?
 - A) **Prepare what you're going to say ahead of time**
 - B) **State your expectations for improved performance and/or conduct**
 - C) Try to diagnose the cause of the employee's job performance or conduct problem.
 - D) Counsel the employee
3. Which of the following is NOT a step in addressing an employee's performance problem?
 - A) Document the performance problem
 - B) Use constructive confrontation
 - C) **Threaten discipline**
 - D) Follow up on progress towards meeting performance goals
4. When using constructive confrontation, your primary objective is to advise the employee of the specifics of his or her poor performance and agree on the method for improvement.
 - A) **True**
 - B) False
5. If appropriate, union representation should be present at any intervention meetings with an employee.
 - A) **True**
 - B) False

ABUSE TREATMENT

Although not everyone who uses alcohol or other drugs becomes addicted, it's impossible to determine who will and who won't. Alcohol and other drugs can affect any of us, in all economic groups, at any age, and in all types of jobs.

In addition to enforcing the company's DFWP, supervisors need to know how to recognize potential problems, how to handle them, and the procedures to address them.

Knowing the proper methods of dealing with an employee substance abuse issue includes:

- Fairness
- Confidentiality
- Documentation
- Resolution

A supervisor must ensure all reports and suspicions of drug or alcohol abuse in the workplace are investigated carefully. Before addressing a possible situation with an employee, a supervisor must obtain verifiable evidence and document the incident fully. Never make assumptions or rely on hearsay information. All employees must be treated fairly and given an opportunity to explain any concerns that have been raised.

When you feel there is enough evidence to warrant additional action, you need to take the following steps:

- Meet with the employee privately. This should be done in the presence of another supervisor, DFWP administrator, or HR representative.
- Present the documented information and give the employee an opportunity to respond
- Take notes of the meeting and make sure the information given by the employee is captured accurately.
- If it's determined that drug testing is warranted, the process must be explained to the employee, and the necessary testing personnel notified.

The DFWP director and/or an HR representative should oversee the testing process. Your job as a supervisor is to identify the problem, and remove this potentially hazardous situation from the workplace.

If there is any follow up action required, such as suspensions or treatment referral the DFWP administrator, EAP representative, or HR representative should keep you informed of the employees status, the expected outcome, and the timeline for resolution.

If an employee is entered into an assistance program, work schedule accommodations and return to work arrangements must be made. These should be discussed with the appropriate management personnel.

Supervisors should meet with employees returning from a leave of absence, to discuss work schedules and performance expectations. Accommodations must be made if the employee requires time off for follow up care. Make sure DFWP, EAP, and/or HR representative are included in this meeting. Remember, as a supervisor you are instrumental in the successful return and reintegration of the employee to the workplace.

QUIZ

1. It's important to get the opinion of another supervisor if you suspect possible substance abuse.
 - A) **True**
 - B) False
2. Reports of an employee's substance should be based on (select all that apply)
 - A) Rumor
 - B) Assumption
 - C) **Observation**
 - D) Association
3. When meeting with an employee to discuss a performance problem, at least one of the following persons should be present (Select all that apply)
 - A) **HR representative**
 - B) Coworker
 - C) **Another supervisor**
 - D) None of the above
4. It's a supervisors responsibility to identify the following (Select all that apply)
 - A) Alcohol abuse
 - B) Drug abuse
 - C) **Performance problems**
 - D) Stress
5. Thorough documentation is essential when addressing and employee's performance problem.
 - A) **True**
 - B) False

EMPLOYEE ASSISTANCE

Employee assistance programs (EAP) are methods the company may provide to help employees deal with abuse or other personal issues. The company's DFWP should define the type of EAP offered. This can range from referring employees to established treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program.

Know your EAP

It's important for supervisors to be familiar with the services the company's EAP offers and know the procedures allowing employees to take advantage of them. Recognizing an employee's performance problems is only the first step, supervisors need to know the process for connecting an employee with an assistance program, whether it's company directed, or an employee self-referral. Professionalism and confidentiality are essential in encouraging and supporting the employees' commitment to getting help.

If your company conducts drug testing and someone tests positive, they can be required to attend an abuse treatment program. This is an effort by the company get an employee help, and keep a valued worker.

Depending on the type of EAP the company offers, and the services provided there may be out-of-pocket costs involved. While some services may be available free of charge, others may be handled through your insurance by deductible or co-pay. Make sure to review the EAP program details and understand your coverage. If you have questions, ask your HR counselor or EAP representative for specifics.

The company EAP may offer assistance programs beyond drug and alcohol treatment such as financial planning, legal aid, fitness, family services, health, and weight management. Supervisors should know the services available and keep the necessary information handy.

It's important to know that an EAP provider is NOT a drug testing facility.

The EAP is responsible for providing counseling and assistance to employees who self-refer for treatment or whose drug tests have been verified positive and were not terminated.

An assistance program may include:

- Monitoring an employee's progress through treatment and rehabilitation
- Providing education and training to all levels of the company on types and effects of drugs, symptoms of drug use, and their impact on performance and conduct
- Explaining the relationship of the EAP to drug testing, treatment, rehabilitation, and confidentiality issues
- Ensuring the confidentiality of test results, medical, and rehabilitation records is maintained

The goal of an EAP is to assist employees who have personal problems affecting their job performance. An EAP reinforces three important ideas:

- Employees are a vital part of business and valuable members of the team
- It's better to offer employees facing personal problems assistance, instead of disciplining or firing them
- Recovering employees become productive, effective members of the workforce

EAP providers are often outside companies that offer counseling and assistance services to employees. It's important to know the type of assistance offered by your company.

Assistance programs can be separated into three basic categories:

Level One – Referral Only

These are basic programs providing employees with referrals to community resources, self-help options, and substance abuse treatment providers.

Level Two – Contract

This type of EAP involves contracting with an outside EAP provider, and uses a direct referral process.

Level Three – In House

Programs in this category offer the highest support to employees, and usually include services beyond drug and alcohol assistance as well as increased health-care coverage.

The company should provide you with information about the assistance program. It should explain:

- Who is eligible for the program and what costs or insurance coverage is available
- What services are available from the EAP? This can extend beyond drug and alcohol treatment and may include:
 - Stress Management - Stress caused by work pressures, family or financial problems can affect your performance on the job and lead to substance abuse. Addressing these issues can prevent problems from worsening
 - How certain drugs and alcohol can lower inhibitions and cause someone's dietary and exercise plans to run off the track and result in health problems

Employee Specific Assistance

The EAP may also provide health-related topics specifically for the workforce these may include:

- Age and gender programs
- Information on osteoporosis, and the increased risk due to substance abuse in middle-aged women
- The effects alcohol can have on the liver and colon and risks of prostate cancer in middle-aged men
- Information for younger workers on the increased risks of STD's, HIV, and aids due to drug and alcohol use

Company EAP

If your company operates or participates in an EAP, work with the representative. If an employee's performance is continuing to slide even though he or she has the equipment, materials and training to do the job, it's a good idea to refer him/her to the EAP. You need to focus on the performance problem. As a supervisor, it's not your job to determine whether alcohol or drug use is part of the cause.

When faced with an employee whose performance is declining, the EAP administrator will review the issues with you, discuss how you have already attempted to correct the problem and coach you through a referral based on declining job performance.

When referring an employee to the EAP, emphasize the confidential nature of the program. Be clear about your expectations of the employee's performance and his or her participation in the program. Also, assure the employee that you're not assuming there is any kind of problem. Acknowledge that personal issues sometimes cause performance problems, and it's the employee's responsibility to consider whether this is the case with him/her.

It's the employee's choice to follow through with an EAP referral, unless the employee is referred in lieu of termination. Most EAP participation is voluntary, and follow-through with a supervisory referral based on job performance indicates that the employee is concerned about the warning. A failure to follow through with the EAP should not be used as a basis for disciplinary action. Rather, any discipline should be the result of continued job performance problems.

When an employee follows through with a supervisory referral, the employee assistance professional will meet with the employee and assess the problem. The EAP will help the employee clarify the problem, direct him or her to appropriate resources, and follow his/her progress. The EAP policy should outline what information you are able to receive. Usually, you will be told whether the employee is working with the EAP, but you will not be informed as to the exact nature of the problem.

The employee's participation in the EAP in no way limits your ability to continue to monitor the employee's performance and apply progressive discipline as needed. In fact, the combination of progressive discipline with assistance works best. It is your responsibility to continue to monitor job performance and notify the EAP if there is again a decline in performance.

There are times when the employee will refuse the referral to the EAP or fail to accept the EAP representative's recommendations. It's important that you make it clear to the employee that you will proceed with standard corrective actions based on your company's policy if his or her performance does not improve.

The Americans with Disabilities Act, the Rehabilitation Act of 1973, and the Family and Medical Leave Act may dictate how you can respond to an impaired employee. It's important that you consult with your manager and the EAP mediator regarding these laws when determining your organization's policies.

No Company EAP

Companies without either a contract or in-house EAP aren't able to make formal or mandatory referrals unless there is an agreement with the company's insurance provider, or with a union. In the absence of a formal EAP, it is a good idea for an employer to maintain a list of therapists and treatment facilities that specialize in the treatment of alcoholism and drug addiction.

Supervisors should tell an employee that if they believe there's an underlying problem, help may be available. Supervisors should also emphasize that the employee's decision whether or not to seek help is a private one and it won't be made public.

QUIZ

1. The primary function of an EAP is to conduct drug testing.
 - A) True
 - B) **False**
2. An EAP may provide health-related topics specifically for the workforce.
 - A) **True**
 - B) False
3. What types of EAP are companies are required to offer?
 - A) Referral only
 - B) Contract
 - C) In-house
 - D) **None of the above**
4. An employees' failure to follow through with the company's EAP can be used as a basis for disciplinary action.
 - A) True
 - B) **False**
5. The services provided by an EAP may be (Select all that apply):
 - A) **Provided free of charge**
 - B) **Available through the company's' insurance by deductible or co-pay**
 - C) Paid for by the employee
 - D) All of the above

REFERRAL

When you've reached a decision to refer an employee to an assistance program, it's important to manage the situation. What you'll need to do depends on the resources and options you have available.

Once you've met with an employee, addressed the problem, and recommended they seek assistance, it's up to the employee to determine their next step. Assuming participation in a substance abuse program isn't mandatory, workers can choose to deal with the situation by themselves. If this occurs, make sure they understand the expectations about their performance, and understand his or her job performance will continue to be monitored and progressive discipline applied as needed.

Guidelines for making a referral, depending on the size and professional skills of your organization, should include the following:

- Assistance should be selected based on established effectiveness
- The referral should consider the particular employee's health insurance coverage
- The referral should be consistent with the employee's job demands and career goals
- Someone in management (e.g., an HR professional) should be directly involved in the process, monitoring compliance
- This same person should participate in easing the employee back into the workplace, involving the supervisor as appropriate
- The company should continue to be supportive of employees who have been referred for assistance because of problems related to alcohol or other drugs

Voluntary or Self-referral

Most employees seek assistance from the EAP on their own, for help with personal or family issues, work issues, and other concerns. This is called a *voluntary* or *self-referral*. Employees may contact the program at any time. You can encourage employees to seek help from the EAP by providing them with the program telephone number and contact information. Remind employees that the EAP is free and confidential.

Informal referral

An informal referral to the EAP may be used in cases involving work performance issues. Often, performance problems are the result of personal issues outside of work. With this type of referral, a manager or supervisor identifies the performance issue and reminds the employee that the EAP is available as a resource to help with personal issues that may be affecting performance.

Formal Referral

In some cases, managers formally refer employees to the EAP. A formal referral is used in cases where the employee's job may be in jeopardy because of a performance issue, attendance issue, or behavior issue at work. The manager documents that he or she referred the employee to the EAP.

One approach to referral is to say: "This isn't the first time that we have talked about these issues. Whatever you have been trying isn't working. I am going to formally refer you to the EAP to give you a chance to get some assistance. What you discuss with the EAP will be confidential. It is important to me that you realize that this is a serious issue so I will just be told whether or not you have followed through with the referral."

Steps to take when making a formal referral

When making a formal referral, supervisors should contact their HR representative to learn about your organization's policies and procedures. This is especially important if you're handling a difficult workplace issue.

If the company's EAP is a contract or in-house program, you should contact the program administrator before making a formal referral. Be sure to do this before you sit down to meet with the employee. That way, the administrator knows what your concerns are about the employee and is better able to offer help when the employee calls.

When making a formal referral to the EAP:

- Schedule a time to meet with the employee in a private place
- Express concern to the employee about continued productivity issues
- Explain that the EAP is available to assist the employee with work-related issues
- Emphasize that the performance issues must be resolved

Mandatory Referrals

If you decide to require that your employee consult with your company's EAP, you are making what is called a mandatory referral. You must document that you referred the employee to the EAP and must follow specific steps both before and after making a mandatory referral to protect yourself and your company from legal action. This type of referral is appropriate only for documented, on-the-job performance issues or violations of company policy; it's not appropriate if you think that an employee is under stress and you decide he needs help.

If EAP services are available:

Work with an EAP representative. If an employee's performance is continuing to slide even though he or she has the equipment, materials and training to do the job, it's a good idea to refer him/her to the EAP. You need to focus on the performance problem. As a supervisor, it's not your job to determine whether alcohol or drug use is part of the cause.

When faced with an employee whose performance is declining, the EAP will review the issues with you, discuss how you have already attempted to correct the problem and coach you through a referral based on declining job performance.

When referring an employee to the EAP, emphasize the confidential nature of the program. Be clear about your expectations of the employee's performance and his or her participation in the program. Also, assure the employee that you're not assuming there is any kind of problem. Acknowledge that personal issues sometimes cause performance problems, and it's the employee's responsibility to consider whether this is the case with him/her.

When an employee follows through with a supervisory referral, the employee assistance professional will meet with the employee and assess the problem. The EAP will help the employee clarify the problem, direct him or her to appropriate resources and follow his/her progress. The EAP policy should outline what information you are able to receive. Usually, you'll be told that the employee is working with the EAP, but you won't be told the exact nature of the problem.

The employee's participation in the EAP in no way limits your ability to continue to monitor the employee's performance and apply progressive discipline as needed. In fact, the combination of progressive discipline with assistance works best. It's your responsibility to continue to monitor job performance and notify the EAP if there is again a decline in performance.

There are times when the employee will refuse the referral to the EAP or fail to accept the EAP representative's recommendations. It's important that you make it clear to the employee that you will proceed with standard corrective actions based on your organization's policy their performance doesn't improve.

The Americans with Disabilities Act, the Rehabilitation Act of 1973, and the Family and Medical Leave Act may dictate how you can respond to an impaired employee. It's important that you consult with your manager and the EAP mediator regarding these laws when determining your organization's policies.

If your organization does not have an EAP:

Organizations that don't offer an EAP as part of their drug-free workplace program should still encourage employees to seek assistance. Employers can support employees by allowing a reasonable amount of time off the job to participate in treatment and offering benefit coverage for the treatment of addiction in health care plans.

Company's' without either a contract or in-house EAP aren't able to make formal or mandatory referrals unless there is an agreement with the company's insurance provider, or with a union. In the absence of a formal EAP, it is a good idea for an employer to maintain a list of therapists and treatment facilities that specialize in the treatment of alcoholism and drug addiction.

Supervisors should tell an employee that if they believe there's an underlying problem, and help may be available. Supervisors should also emphasize that the employee's decision whether or not to seek help is a private one and it won't be made public.

CONCLUSION

Whether you are making an informal or a formal referral to the EAP, don't avoid a problem or assume it will go away on its own. The sooner you encourage an employee who needs it to seek help, the better off you will be. The EAP is a valuable resource for addressing personal and work issues that may be affecting individual and group performance.

QUIZ

1. A mandatory EAP referral is an alternative to termination.
 - A) **True**
 - B) False
2. Which of the following are types of EAP referrals (Select all that apply)
 - A) Voluntary
 - B) Informal
 - C) Formal
 - D) **All of the above**
3. What type of EAP referral is appropriate if an employee violates company policy?
 - A) Self
 - B) Informal
 - C) Formal
 - D) **Mandatory**
4. You should always consult an HR representative or EAP administrator before making a formal or mandatory referral.
 - A) **True**
 - B) False
5. When referring an employee to an EAP, it's important to emphasize the programs: confidentiality.
 - A) **True**
 - B) False

HANDLING BARRIERS

Confronting an employee about a job performance or conduct problem isn't easy. No one can tell you how an employee will respond. Sometimes an employee may become upset with you, hoping this will make you back down from the confrontation. Being aware of potential barriers is the best way to decrease the chance of a negative reaction. Below are guidelines for how to respond to some of the most common barriers.

EMPLOYEE ACTION	RESPONSE
Denial: The employee denies that problems exist and insists that you or someone else in the company is out to get him or her.	How to Respond: Stay calm. Have the documentation of the employee's job performance and/or conduct handy and keep the conversation focused on performance issues.
Threats: The employee threatens you or the organization. "If you push me, I'll go to an attorney make a scene on the job ... quit here and now ..."	How to Respond: Remind the employee that he or she may do whatever he or she chooses; however, as a supervisor, your responsibility is to uphold the organization's policy and find a solution that will help both the organization and the employee. If you think you're losing your objectivity, or need help to resolve a conflict with a defensive employee, seek the help of another supervisor or manager.
Rationalization: The employee tries to avoid the issue by making excuses. "If this job wasn't so stressful, I wouldn't be making so many mistakes and wouldn't be late so often."	How to Respond: Stay focused on work performance. Don't be distracted by excuses; let the employee know that help is available.
Angry Outburst: The employee becomes angry. He or she may cry, yell, or scream. This emotional outburst is intended to scare off the supervisor and cause him or her to drop the whole affair. In a shouting voice with arms raised, "How dare you accuse me of being late to work and not getting my job done on time!"	How to Respond: Do not react! Wait until the employee has run out of steam and then continue where you left off. Keep the focus on performance issues. If the employee continues, reschedule the meeting.

When dealing with an employees performance problem it's important to:

Be Consistent: Regardless of your personal relationship with an employee, it's important to treat each person the same when addressing job performance and/or conduct problems. This isn't always easy to do. By following your organization's procedures, you avoid playing favorites. This protects you from being accused of discrimination and will help your relationship with the people you supervise.

Maintain Confidentiality: All discussions of an employee's job problems need to be kept private. No one else should be able to hear the conversation. If employees choose to tell coworkers about their private concerns (e.g., results of a drug test), that's their decision. However, when an employee tells you something in confidence, you are obligated to keep it between the two of you.

Be "Up Front:" If your employer requires you to report what will be said, it's important to inform the employee before you begin the meeting. Although not a common problem, you could be sued if you disclose what's said in the meeting without the permission of the employee. Respecting employee confidentiality is critical to developing a trusting relationship.

Follow-up

Taking follow-up action is a key part of your role in your organization's DFWP. Follow-up means that you continue to observe and document the employee's job performance and conduct. If the employee's job performance and/or conduct improve, no further action needs to be taken. If job performance or conduct hasn't improved as agreed, or if the employee refuses to acknowledge or correct his or her behavior, document these events and tell the employee what actions you will take next. Inform the employee that help is available. You may not know if an employee is in treatment for an alcohol or drug problem. However, if an employee tells you that he or she is seeking help, support the recovery process but don't enable.

CONCLUSION

Being in treatment isn't an excuse for poor job performance. Your responsibility is to make sure employees do a good job. Protect yourself and the employee's rights by consistently following your organization's disciplinary procedures if an employee's job performance or conduct does not improve.

QUIZ

1. What are the key elements when dealing with an employee's performance problem (Select all that apply)?
 - A) **Be Consistent**
 - B) **Maintain Confidentiality**
 - C) **Be Up Front**
 - D) Identify the cause of the problem
2. The employee becomes angry during a confrontation; you should (Select all that apply)
 - A) **Let the employee vent**
 - B) **Reschedule the meeting**
 - C) Suspend the employee
 - D) All of the above
3. All discussions of an employee's job problems need to be kept private.
 - A) **True**
 - B) False
4. Being in treatment isn't an excuse for poor job performance.
 - A) **True**
 - B) False
5. Which of the following are common employee barrier mechanisms (Select all that apply)?
 - A) Denial
 - B) Threats
 - C) Rationalization
 - D) **All of the above**

SUMMARY

In this program we've provided you with information on:

- The basics of Drug Free Workplace Programs
- Drug testing procedures
- Employee Assistance Programs
- How to recognize the signs and symptoms of drug or alcohol abuse
- How to deal with problem employees and potential crisis situation

You are encouraged to become familiar with your company's DFWP and meet with management, DFWP and/or EAP administrators, and HR personnel to understand their roles in managing the program. These resources can provide you with additional information and answer any questions you may have.

Ensuring a safe workplace is a fundamental OSHA requirement, and the existence of a DFWP is another tool to aid in maintaining that. It's essential that you, as a supervisor, fully understand

- The company's program
- The employees' rights
- Your responsibilities and authorities
- The programs procedures and options

No matter how well intentioned, a DFWP that's poorly designed or implemented is destined for problems. Employees must understand the policies and goals of the program, and supervisors must ensure fair and equal enforcement of it.

FINAL EXAM

1. A DFWP is required for all employers.
 - A) True
 - B) **False**
2. Implementing a DFWP is part of the Occupational Safety and Health Act.
 - A) True
 - B) **False**
3. A second testing of a drug test sample following a positive result is called a:
 - A) Second chance
 - B) Split test
 - C) **Confirmation test**
 - D) Chain of command
4. An employee who refuses to take a drug test will be subject to the same consequences as a positive test
 - A) **True**
 - B) False
5. Which of the following reasons is given for employees avoiding getting help through work-related services
 - A) **Denial**
 - B) Cost
 - C) Time
 - D) Inconvenience
6. A Physician responsible for examining drug test results is called an:
 - A) EAP provider
 - B) **Medical Review Officer**
 - C) DFWP director
 - D) None of the above
7. A DFWP requires employees to receive ____ hours of substance training per year.
 - A) 1
 - B) **2**
 - C) 4
 - D) 6

8. Which of the following would not be considered a safety or security sensitive position?
- A) Someone who is authorized to make legally binding contracts or commitments for the company
 - B) An employee having access to classified company information
 - C) Employees responsible for public safety
 - D) **An employee responsible for building maintenance**
9. Which substance listed in not part of the SAMHSA 5?
- A) Cocaine
 - B) Marijuana
 - C) PCP
 - D) **Alcohol**
10. A DFWP program is required to include a return to work agreement for employees who test positive for substance abuse.
- A) True
 - B) **False**
11. What organization does NOT require companies to have a DFWP?
- A) DOT
 - B) NRC
 - C) **OSHA**
 - D) PHMSA
12. Specific jobs that are subject to DFWP requirements are called covered positions.
- A) **True**
 - B) False

**SUPERVISORS DFWP TRAINING
STUDENT GUIDE**

SECTION 1: DFWP SUPERVISOR TRAINING

INTRODUCTION

This training program is designed to prepare supervisors for explaining and enforcing our Drug Free Workplace Program (DFWP).

Alcohol and drug abuse in today's workplace has reached epidemic proportions. It's widespread, touching every industry at every level, and it won't go away on its own. More than one in ten employees have some kind of drinking problem, and almost a third of these use illegal drugs. A person who's impaired on the job due to substance abuse is a threat to the health and safety of his or her co-workers. The National Council on Alcohol and Drug Dependence (NCADD) reports that 70% of the estimated 14.8 million Americans who use illegal drugs are employed.

A 2006 report by the Center for Disease Control (CDC) estimated the loss in productivity, health care costs, and property damage at over \$200 billion.

The toll on human life is equally shocking. Users often lose their jobs, families, health, and lives to the disease of addiction. Their coworkers, families, and friends suffer as well. Substance abuse robs people of their good judgment, self-control, and steals their dignity.

Topics covered in this training program are:

- What is the Drug Free Workplace Program
- The supervisors Roles and Responsibilities
- Enforcing the DFWP
- How to recognize potential problems
- Dealing with a crisis situation

It's important to pay attention to the information on each of these topics. You'll be required to take a final exam with questions related to these topics at the end of the program.

You're encouraged to attend other training classes to further your knowledge. This can include additional training on substance abuse prevention as well as any additional training that may be required for your work and jobsite.

Remember, safety is serious, and should never be taken for granted.

DRUG FREE WORKPLACE PROGRAM

Substance abuse is a serious problem in the workplace. Employees don't leave their substance abuse problems at the door when they come to work. Workers who use alcohol and other drugs have the potential to affect everyone in the workplace. In fact, studies show that substance abusers:

- Are far less productive
- Miss more workdays
- Are more likely to injure themselves or someone else
- File more Workers' Compensation claims

Businesses that perform work for the federal government (contract and grants), are regulated by the Department of Transportation (DOT), or the Nuclear Regulatory Commission (NRC), are required to have Drug Free Workplace Programs in effect. The requirements by these agencies are more stringent than the ones defined by the Drug Free Workplace Act (DFWA) of 1988.

Many other companies, although not required by law, have (or are implementing) their own DFWP in order to protect the health and safety of its employees.

Although OSHA doesn't address substance abuse in the workplace, it does require that all employers provide a safe working environment for their employees. Implementing a DFWP will improve safety, promote employee health, and reduce operating expenses such as:

Administrative losses caused by absenteeism, tardiness, overtime pay, sick leave abuse, health insurance claims, disability payments, and costs associated with accidents

Hidden losses due to the diversion of supervisory and managerial time, friction among workers, material waste, equipment damage, poor decision making, damage to public image, and costs associated with turnover

Losses with legal implications as a result of increased Workers' Compensation claims, drug trafficking on the job, disciplinary actions, grievances, threat to public safety, and worksite security

Costs of health and mental health care services resulting in higher insurance rates due to increased claims

A DFWP can consist of many parts, and supervisors need to know the ones that apply to the company's program.

COMMUNICATING THE DFWP

It's important for employees to know that the company's DFWP is for everyone's benefit. It's essential, as a supervisor, that you communicate the goals of the drug-free workplace program to them. To promote compliance, you need to be able to inform employees of the company's goals, which are to:

- Improve the company's profitability
- Create a safer work environment
- Demonstrate the company's commitment to your health and well being

Parts of the DFWP

A DFWP can consist of many parts, and as a supervisor, you need to know the ones that apply to your company. A DFWP can include some or all of the following:

- Covered Workers
- Applicability
- Prohibited Behavior
- Notification of Conviction
- Property Searches
- Drug testing
- Return to Work Agreement
- Available Assistance
- Confidentiality
- Shared Responsibility

Covered Workers

This identifies the employees affected by the policy. This could be all employees or only workers who perform jobs designated as safety or security sensitive.

Sensitive jobs include, but are not limited to:

- Pipeline workers
- Transportation workers (airlines, railways, and trucking)
- Employees with access to sensitive or confidential information (either company trade secrets or government information)

Applicability

This defines when and where the policy applies. It may be in force only at the job site during working hours, or may include off-site locations and non-working hours. In some cases, these requirements are established to meet customer and contract requirements.

Prohibited Behavior

This part of the policy defines the actions that are considered violations of the policy, and may include the use of prescription and over the counter drugs, alcohol, and illegal drugs. It will also explain the consequences resulting from policy violations.

Supervisors should be prepared to deal with circumstances when an employee's assistance efforts are unsuccessful, or when someone is unwilling or unable to remedy his or her issues. Discuss alternatives and options with your manager and/or HR if you don't see the necessary improvements, or determine a lack of commitment of the part of the employee.

Notification of Conviction

This is usually required as part of government contract work. It requires employees to notify the company, and the company to notify the appropriate parties if an employee is convicted of a drug or alcohol related crime at the workplace.

Property Searches

The company can decide to require searches of work areas and/or personal property. If searches are part of the company's DFWP, employees will be required to sign a consent form. Some state and local regulations prohibit person and property searches. Check with the applicable authorities to see if searches are permissible. If searches are permitted, they must be performed by trained supervisory or security personnel.

Drug Testing

Except for government contract work, drug testing may or may not be required. If required, how it will be conducted, what tests will be performed, and who will perform the tests must be defined in the DFWP.

Return to Work Agreement

A Return to Work Agreement (RTWA) is a process that may be established to allow employees who test positive for drugs or alcohol and to return to work after successful completion of a treatment program.

Assistance

This section of the DFWP will define the type of Employee Assistance Programs (EAP) the company offers. Assistance programs are not a mandatory part of a DFWP, and supervisors need to understand what, if any, assistance is offered by the company.

This can range from referring employees to treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program. As a supervisor, it's important for you to be able to explain the program to your employees.

Employees participating in assistance programs should be monitored, encouraged, and supported during their treatment. It's important to meet with them regularly to review their progress, ensure they're adhering to the program requirements, and when appropriate provide positive reinforcement on their improvement. Workers successfully completing their assistance programs need to be congratulated on the accomplishment and assisted in refocusing on their job performance.

Confidentiality

Sensitivity and confidentiality when addressing the personal issues of employees is vital, and will greatly improve their trust in the system. The fewer people aware of an employee's assistance participation, the better. It's important to remember that if an employee chooses to discuss his or her situation with coworkers, that's their choice, and doesn't allow you to divulge information to others. In your company's DFWP is a section defining the procedures that will be used to protect all employees' information.

Shared Responsibility

A successful DFWP requires everyone's participation. Part of the company's policy will be the expectations for employees and management.

It's important that all employees read and understand the company's DFWP. The more you know about the DFWP the better you'll be able to explain it, and have it help protect your workers. Contact your manager or DFWP director if you have any questions.

DFWP IMPLEMENTATION

A DFWP will not be successful unless all employees know it exists and understand it. To ensure this occurs there are a number of things your company must do:

- Provide written copies of the DFWP to all employees
- Identify those responsible for administration and enforcement of the DFWP and any EAP
- Provide at least two hours of training per year regarding the hazards of drug and alcohol use, the consequences of workplace abuse, and the assistance available
- If drug testing is part of the DFWP, the company must identify the name and location of the certified testing facility that will conduct any required tests
- Post notices that the company has a DFWP and inform employees and applicants that drug testing is a condition of employment
- In addition, if only safety or security sensitive jobs will be subject to testing, your employer must identify those positions and notify the individuals in those positions of the requirement.
- Supervisors must be trained to understand the policy and their roles and responsibilities in enforcing it.

RESISTANCE TO DFWP

A DFWP with a drug testing policy can be a very punitive program, having the ability to take a huge amount of coverage away from an employee. Workers compensation and insurance claims can be denied if employees are found to be impaired and cause accidents or injuries. Fear of discrimination, punishment, or financial consequences can also keep employees from seeking assistance even when they know they need it.

It's essential to make sure the employees under your supervision understand that the program is designed to create a safe work environment and assist workers in need of help. By reinforcing the ideas that the programs goals are workplace safety and abuse prevention, much of the distrust and fear of discrimination can be overcome.

It should always be the goal of the company to return an employee to being a productive member of the workforce, but it's not always possible. In those cases, disciplinary action may be required.

Consult with management and other appropriate personnel to determine the measures to be taken based on the company's DFWP. If a problem can't be corrected, it needs to be removed. The loss of a problem employee will ultimately improve the safety of the workplace and demonstrate the company's commitment to their program.

QUIZ

1. A DFWP option that allows workers to resume working after the successful completion of a drug treatment program is called:
 - A) An EAP
 - B) A RTWA
 - C) Shared Responsibility
 - D) Applicability
2. The part of a DFWP that defines when the program policies apply is called:
 - A) Covered Workers
 - B) Confidentiality
 - C) Assistance
 - D) Applicability
3. What part of a DFWP defines the consequences of violating the policy?
 - A) Notification of conviction
 - B) Return to Work Agreement
 - C) Prohibited behavior
 - D) Drug testing
4. Drug testing required to be part of a DFWP When:
 - A) Performing government contract work
 - B) The business is regulated by the Department of Transportation (DOT)
 - C) The business is regulated by The Pipeline and Hazardous Materials Safety Administration (PHMSA)
 - D) All of the above
5. Which of the following statements about searches is false?
 - A) Prohibited in some jurisdictions
 - B) Must be conducted by trained personnel
 - C) Require your signed authorization
 - D) A mandatory part of a DFWP

REQUIREMENTS AND RESPONSIBILITIES

LEGAL REQUIREMENTS

In 1988, Congress passed the Drug-Free Workplace Act (DFWA), which requires Federal grantees and recipients of Federal contracts of \$100,000 or more to comply with the following:

- Employers must have a written policy that explains what's prohibited, and the consequences of violating the policy
- Employees must read and agree in writing to the policy as a condition of employment on the project
- Employers must have an awareness program to educate employees about alcohol and drug abuse and addiction, the employer's policy, and available help, including counseling and other assistance
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within five days after such conviction
- Employers must disclose any conviction for a drug-related offense in the workplace to the Federal agency with which the employer has a grant or contract, within ten days after receiving notice from the employee or others
- Employers must make an ongoing effort to maintain a drug-free workplace

If you're a Federal contractor and don't have a DFWP, any contracts awarded to you by a Federal agency may be suspended, terminated, or both. You may become ineligible for consideration of any future contracts, and prohibited from participating in any future procurement by any Federal agency for up to five years.

Some employers are also subject to the provisions of the 1991 Omnibus Transportation Employee Testing Act. This Act requires employees in certain safety-sensitive positions such as in the aviation, trucking, railroad, mass transit, and pipeline industries be tested for alcohol and drug use.

The transportation industry has established additional policies on drug and alcohol testing to ensure workers who operate aircraft, trains, trucks, and buses do so in a safe and responsible manner.

In addition, the Department of Transportation (DOT) and The Pipeline and Hazardous Materials Safety Administration (PHMSA) requires companies that supply or transport natural gas and other hazardous materials to implement drug and alcohol testing programs in the interest of public safety.

Limitations

While the Americans with Disabilities Act (ADA), prohibits discrimination against qualified people with disabilities and limits an employer's ability to inquire into an employee's or job applicant's medical history, it does not prohibit drug testing, and doesn't bar employers from prohibiting alcohol abuse or illegal drug use in the workplace. Under the ADA, an employer may require job applicants and employees to pass a drug test as a condition of employment.

According to the ADA, an employer can't discriminate based on these characteristics:

- Illegal substance abusers and alcoholics who have successfully completed a rehabilitation program
- Those who are participating in a supervised rehabilitation program
- Those who, based on hearsay only, are believed to be an illegal drug user

Alcoholism is considered a disability. Alcoholics can't be discriminated against unless their alcohol use impairs performance or conduct to the extent that they are no longer performing their job at the required standard.

Although the Act doesn't protect certain illegal substance abusers and alcoholics who can't perform their jobs safely, it does protect those who have been rehabilitated or are participating in supervised rehabilitation programs and not currently using drugs.

State and Local Regulations

Many states and municipalities have specific drug-free workplace regulations that define when and how employees can be tested for illegal drugs. Consult with your state or local government to identify these requirements and obtain any other regulations or assistance regarding drug-free workplace programs.

As a supervisor, it's important you understand the employees' rights and your responsibilities regarding the company's DFWP.

RESPONSIBILITIES

Employer Responsibilities

When implementing a DFWP, the company must develop a written policy that identifies what's prohibited, and the consequences of violating the policy.

The company must announce in a letter to all employees that having a drug-free workplace and preventing drug and alcohol problems among employees and their families are major corporate initiatives. In addition, the company must:

- Provide a written copy of the DFWP to all employees that defines:
 - Who is covered by the policy
 - When the policy applies
- Explain if the policy:
 - Requires the Company to be notified of any employee drug-related convictions
 - Includes drug testing and/or personal property searches
 - Includes Return-to-Work Agreements
- Explain how employee confidentiality will be protected
- Identify who is responsible for administering the policy
- Define The type of assistance programs available
- Communicate the potential risks drug and alcohol abuse poses to the company

Employers must make an ongoing effort to maintain a drug-free workplace, and have an awareness program for educating employees about alcohol and drug abuse and addiction.

Supervisor Responsibilities

- Maintain a safe, healthy, and productive environment
- Have a clear understanding of the DFWP
- Be an advocate for employees
- Enforce the DFWP evenly and fairly
- Understand the legal concerns relating to the DFWP

RIGHTS & REQUIREMENTS

When establishing a DFWP, both the company and its employees have certain rights regarding the enforcement of the program. It's important for everyone to know these rights to avoid any potential misunderstandings or conflicts.

Employer

When implementing a DFWP, the company must clearly define the scope and limitations of the program. A DFWP doesn't have to include drug testing or personal property searches, but these are options. Some states have limitations regarding the issues. State and local regulations should always be checked to determine these limits.

Employers may be permitted to conduct substance abuse testing in the following situations:

- Pre-employment
- For reasonable suspicion
- Randomly
- Periodically
- After an accident/incident
- Post-treatment
- On designated safety or security sensitive positions

Pre-employment

To decrease the chance that a current drug user will be hired, some employers test job applicants at the time of a job offer. The job offer depends on a negative drug test result.

Reasonable Cause

Reasonable Cause or suspicion is a reasonable good faith objective suspicion on the part of management that an employee has used drugs or alcohol prior to reporting to work or is impaired by drugs or alcohol. Reasonable Cause can be based upon an employee's performance, appearance, or conduct, including but not limited to any of the following:

- Odor of alcohol or other intoxicant about the employee or on the employee's breath
- Abnormally impaired speech, stumbling, weaving, or other loss of motor coordination
- Unexplained animated signs of intoxication or influence of drugs on the part of the employee
- Other discernible signs of intoxication or influence of drugs on the part of the employee
- Possession of alcohol, drugs or associated paraphernalia
- An employee's apparent lack of judgment, inattentiveness, or specific unsafe act that substantially contributes to the cause of an accident

Random Testing

Depending on state or local laws, random drug testing may be permissible. However, the DFWP must define who is subject to the testing, establish how the random selection process works, and define the notification time and process

Periodic

This is usually done when employees are required to take an annual physical, or can be part of a follow up program for employees after completion of a treatment program

Post-accident

Companies have the right to require testing after an accident or incident, whether the occurrence resulted in injury or property damage or not.

Post-treatment

When an employee has taken time off from work to go through an inpatient treatment program, or when an employee is participating in some form of outpatient treatment, an employer may arrange for random testing of that employee to ensure they remain sober

Sensitive Positions

If the company determines that only positions affecting public safety, trade secrets, or national security will be subject to drug testing, persons holding those positions must be notified of the requirement.

Employee

When working for a company that has, or is implementing, a DFWP employees need to understand what's required of them, and their rights under the program.

Requirements

As part of a company DFWP, employees are required to:

- Read the DWFP policy provided
- Sign and return the required forms
- Understand the terms of the policy and the consequences for violating it
- Learn the signs and symptoms associated with drug and alcohol abuse
- Know what assistance is available and how to benefit from it
- Know who to contact if they have questions
- Refrain from any drug or alcohol use at work.
- Report any incidence of substance abuse, or suspected abuse by co-workers immediately.

Rights

Employees working for a company that has a DFWP must be:

- Given a written copy of the DFWP
- Receive training on the program
- Be notified of drug testing and/or property search requirements
- Have access to their drug testing records, if applicable

QUIZ

1. The Drug Free Workplace Act was passed in:
 - A) 1970
 - B) 1980
 - C) 1988
 - D) 2006
2. The drug free workplace Act applies to:
 - A) All federal employees and contractors
 - B) Pipeline industries
 - C) Transportation workers
 - D) All of the above
3. All drug free programs must include mandatory drug and alcohol testing
 - A) True
 - B) False
4. DFWP requirements apply to:
 - A) All Employees
 - B) Non- management employees only
 - C) Safety sensitive jobs only
 - D) Those identified as covered workers by the plan
5. Part of the DFWP requires that an employee's drug and alcohol related information be kept confidential.
 - A) True
 - B) False

DFWP ENFORCEMENT

Substance abuse by employees can be a common occurrence, and supervisors must be prepared to address this matter in a safe, legal, and professional manner. To do so, supervisors need to be trained on how to handle substance-abuse issues in the workplace. This training should include:

- Recognizing symptoms of drug and alcohol abuse
- Understanding abuse treatment
- Employee Assistance
- Knowing the regulations and limitations of drug testing
- Referral procedures
- Handling barriers
- The proper techniques of intervention and confrontation
- Crisis management

A supervisor's job isn't to provide substance abuse counseling, nor should they try to diagnose alcohol or other drug problems. If a supervisor suspects a problem, particularly one associated with poor job performance or conduct, the employee should be referred to the appropriate resources for professional evaluation and assistance.

Each supervisor who will determine whether an employee must be drug tested and/or alcohol tested based on reasonable suspicion/cause will be trained in the "signs and symptoms" of each substance.

Each supervisor will receive training on the specific indicators of probable drug and alcohol use. The training will include, but is not limited to, physical, behavioral, speech and performance indicators of probable drug and/or alcohol misuse.

The training will also include information on dealing with troubled employee and the methods and options available for doing so.

Information on these topics will be covered in Part 2 of this program.

SUPERVISOR GUIDELINES

To maximize the effectiveness of a DFWP, customized supervisor training should take into account the particular characteristics of the workplace. Seven general guidelines have been found to be useful for many employers, supervisors, and HR staff:

- Know the organization's policy and program
- Be aware of legally sensitive areas
- Recognize potential problems
- Document
- Act
- Refer
- Reintegrate

Know the Organization's Policy and Program

Be familiar with the policy and the program along with the reasons for implementing them. Ensure that these are clearly communicated to all employees in a manner and language, and at a level they can understand. In some organizations, this may require bilingual, or trilingual, replication.

Be Aware of Legally Sensitive Areas

Due to variations in state and local regulations, it's important to be familiar with the conditions and limitations regarding drug testing and property searches in your area.

- Where applicable, follow union contracts
- Maintain confidentiality of all employees
- Follow the procedures and policy the same way for all
- Provide due process and opportunity for response to allegations
- If testing is a part of the policy, ensure quality control and confirmation of positive tests

Recognize Potential Problems

Many performance issues can be attributed to a combination of internal and external factors. In the workplace, however, a safe, healthy, productive employee is the expectation. Don't wait for a crisis. Being aware of potential issues before they become problems goes a long way toward creating a safe, healthy, and productive workplace.

There are at least six signs of possible substance abuse problems in the workplace. These signs alone do not indicate substance use. They do however; indicate that perhaps the employee is experiencing personal issues that may affect job performance.

- A change in work attendance or performance
- An alteration of personal appearance
- Mood swings or attitude changes
- Withdrawal from responsibility or associate contacts
- Unusual behavior patterns
- A defensive attitude concerning any problems

This subject will be examined further in Part 2 of this program.

Document

It's important to have a systematic, legally defensible appraisal and documentation system in place. The first line of defense should be a well-defined job description along with appropriate job training. In this way, supervisors can be explicit about the behaviors they expect.

Along with this, if a supervisor suspects an employee is under the influence, careful documentation should occur. It's recommended to ask a second supervisor to assess the situation to ensure fairness and impartiality.

NOTE: A supervisor's checklist for determining reasonable cause is included in Part 2 of this training.

Act

Constructive confrontation is a proven effective strategy for dealing with employees who have a performance problem that may be associated with substance abuse.

Constructive confrontation works particularly well for employers, supervisors, and employees who are heavily invested in their jobs.

We will examine constructive confrontation fully in Part 2 of this program.

Refer (to Appropriate Programs)

It's important for supervisors to send employees the message that the objective of a DFWP referral program is not to catch somebody and kick them out. The goal is to get them an assessment of where they are with their drug usage and allow them to get treatment.

A referral is not a disciplinary action. This may be the first step toward helping the employee get back on track. Referrals must be consistent with the specifics of the company's drug-free workplace policy, and the employee assistance the company provides.

Reintegrate

Recovery from alcohol or other drug problems can be a gradual, complex process. To prevent a relapse and to promote sustained recovery, follow-up and supportive re-entry are key. An ideal situation would be one in which a specialist is assigned to deliver supportive follow-up to the employee at the workplace for 36 months or longer.

Advocate for Employees

It's important for supervisors to develop and maintain a good working rapport with their employees. Not only does this promote good morale and productivity, it creates an environment of teamwork and trust.

A good working relationship allows supervisors to know the employees better, which aids in recognizing problems that may occur, and builds trust in the employees that will encourage them to share personal issues and report potential problems.

Supervisors can encourage employees to deal with work related problems that may or may not be connected with alcohol or other drug use. They can suggest sources of help and support, such as an EAP or a local treatment program.

Being an advocate for employees also means supporting treatment and recovery. There is a general stigma associated with addiction and a mistaken belief that substance abuse is a personal or moral failing. Viewing the employee as a person struggling with a chronic, treatable disease rather than as an offender is another way to be supportive of recovery. This does not mean *enabling*; it means *supporting*.

It's important to remember that you need to know your company's policies, the services available, and how to handle referrals. If you don't know the answer to a question, or how to handle a situation, ask your manager or EAP contact.

DFWP Procedures

In addition to being knowledgeable about the company's DFWP, supervisors need to know the procedures and management structure associated with the DFWP. These aspects of enforcement include knowing:

- The name of the DFWP administrator
- The EAP resources available
- The name and location of the authorized testing facility
- The procedures to be followed if DFWP violations occur

All of this information must be included in the DFWP, and supervisors should keep these names and phone numbers handy in case they're needed.

EAP services the employer may have in place can be internal or external. Information on the types of EAP's available will be covered in part 2 of this training.

The company should provide you, as the supervisor, the tools, and guidelines necessary to handle DFWP violations properly.

In the next section of this training, we'll examine the details of drug testing.

QUIZ

1. Which of the following is NOT a proper confrontation technique?
 - A) Organizing a confidential meeting
 - B) Including a union representative if applicable
 - C) Presenting the employee with documented evidence of performance deficits
 - D) Letting everyone know the situation
2. Supervisors must be trained on which of the following (select all that apply):
 - A) Constructive Confrontation
 - B) Substance abuse signs and symptoms
 - C) Company DFWP policy
 - D) All of the above
3. A supervisor should request the opinion of a second supervisor if they suspect an employee of being impaired.
 - A) True
 - B) False
4. Supervisors should be trained on all of the following except:
 - A) DFWP policy
 - B) EAP
 - C) Substance abuse counseling
 - D) Drug testing procedures
5. A supervisor's emphasis should be on improving a substance-abusing employee's job performance, not on judging the employee.
 - A) True
 - B) False

UNDERSTANDING DRUG TESTING

Aside from Federal requirements, drug testing is not a mandatory part of a DFWP. If it's part of your company's DFWP, supervisors need to be familiar with the testing process.

Basic information about drug testing includes:

- Understanding Drug Testing
- When testing can occur
- Testing methods
- What is included in the testing

Is Drug Testing Legal?

In most cases and states, it's legal for an employer to test employees for drugs. No Federal laws prohibit drug testing at this time; however, some states do prohibit or restrict certain types of drug testing. Employees have the right to know the details of the drug-testing policy at your workplace. Different types of drug testing/screening processes are available.

When Testing Can Occur

As mentioned earlier, drug testing can be required in any of the following situations:

- Pre-Employment Tests
- Reasonable Suspicion and For Cause Tests
- Random Tests
- Periodic Tests
- Post-Accident Tests
- Post-Treatment Tests

Testing Methods

Different types of drug testing/screening processes are available.

The most common way to test for drugs is a urine test. This involves giving a urine sample, which goes through a series of chemical tests. The results tell whether leftover traces of drugs are in a person's body. A urine test doesn't tell if an employee is under the influence of drugs at the time of the test, only that alcohol or drugs were used sometime recently.

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

There are a number of other bodily specimens that can be tested for evidence of recent drug use. Although some state laws dictate the types of tests that can be used, a number of options are available. Urine is by far the most commonly used specimen for illicit drugs, and breath is the most common for alcohol.

Other types of tests available consist of:

- Blood
- Hair
- Oral fluids
- Sweat

Blood - Blood tests measure the amount of alcohol or other drugs in the blood at the time of the test. The major drawbacks of conducting blood tests are; they are invasive, and there is a very short detection period.

Hair - Analysis of hair provides a much longer “testing window”, giving a more complete drug-use history going back as far as 90 days. Like urine testing however, hair testing doesn’t provide evidence of current impairment, but only past drug use.

Oral Fluids - Saliva or oral fluids are easy to collect by using a swab of the inner cheek. These samples are harder to adulterate or substitute, and may be better at detecting specific drugs. There are currently no federally approved oral testing methods for marijuana.

Sweat - A skin patch that measures drugs in sweat is applied to the skin and worn for some length of time. A membrane on the patch protects the tested area from dirt and other contaminants while collecting the sample.

Breath Alcohol Test

A breath test is the most common test for finding out how much alcohol is in the blood. A breath alcohol test will tell if the person is impaired by alcohol at the time of the test.

All states have set an alcohol level of 0.08 percent as the definition of driving while intoxicated. The Department of Transportation Federal Motor Carrier Safety Administration has established a 0.04% alcohol level for commercial vehicle drivers and 0.01% for operators of common carriers.

Reasons for Drug Testing

Employers set up drug testing programs for many reasons:

Federal or State Regulations: Some workplaces must comply with a Federal or State agency’s drug-testing requirements. For example, the Department of Transportation, the Department of Defense, and the Department of Energy are agencies that require contractors to set up drug-testing programs.

Safety Concerns: Use of alcohol or other drugs on the job can result in accidents, safety problems, and other costly mistakes. As a result, many employers choose to protect their employees and their workplace by starting a drug-testing program.

High Costs of Alcohol and Other Drug Abuse: Research has shown that drug and alcohol use at work costs money. Workplace drug abuse often results in lower productivity, higher Workers’ Compensation claims, more time away from work, and higher medical costs. There are also links between workplace drug use, workplace crime, and an employee’s mood and well-being.

Drug Testing Accuracy

If tests are conducted correctly using the guidelines of the Department of Health and Human Services (DHHS), drug tests are very accurate. These guidelines require that certain procedures be followed:

Chain of Custody: A chain of custody form is used to document the handling and storage of a urine specimen from the time it's collected until its disposal. The chain of custody form is written proof of all that happens to the specimen while at the collection site and the laboratory.

Initial Screen: The first test done on a urine sample is called an initial screen. This test alone is not always accurate or reliable. If the initial screen is positive, a second test should be done.

Confirmation Test: A second, confirmatory test using gas chromatography/mass spectrometry (GC/MS), is highly accurate, and will rule out any false positives from the initial screen. For a test result to be reported as positive, both test results must agree.

Medical Review Officer

A medical review officer (MRO) is a licensed medical doctor who has special training in the area of substance abuse. If your drug test is positive, the MRO reviews the results, makes sure the chain of custody procedures were followed, and contacts the employee to make sure there are no medical or other reasons for the result. It is only at this point that the MRO may report the positive test result to the employer. Medications can sometimes cause a positive test result. If this is the case, and if a doctor prescribed the medicine, the test is reported as negative.

DRUG TESTING PROCEDURES

When employees are required to take a drug test, this typical procedure will be used. These steps should be explained to the employee.

- They may be asked for picture identification
- After providing a urine sample, the bottle should not leave their sight until it is sealed with special "evidence" tape
- The employee must sign the label on the container, and sign a record book stating that the sample collected was theirs
- The specimen will then be shipped to a certified laboratory for testing
- If the seal is broken or the container isn't signed, the laboratory won't test the sample

Testing Privacy

In most cases, employees are ensured privacy when giving a sample. In some cases, however, someone may need to see them give the sample. For example, if there's reason to believe that an employee has tried to tamper with the sample, another specimen may be collected with someone of the same sex watching to ensure honesty.

Testing results

Confidentiality is very important. Confidentiality means that drug test results are kept private, and that only persons who need to know will receive the drug test results. This might be the supervisor, manager, union representative, or someone in the medical or personnel department. Often, employees are asked to sign a release form that identifies who will receive the test results. A drug test is reported as positive or negative; the level of the drug(s) found is usually not reported. Confidentiality also means that drug test results won't be part of an employee's personnel file.

TESTING PARAMETERS

Having a drug-free workplace protects everyone's health and safety. Employees who are impaired by alcohol or other drugs by while on the job are not a new phenomenon.

For decades, alcohol topped the list as the drug of choice that could adversely affect an employee's health. However, the increasing use of over-the-counter medications, as well as abuse of illicit or prescription drugs, poses a widespread problem in workplaces in the United States.

SAMHSA 5

The Substance Abuse and Mental Health Services Administration (SAMHSA), an agency within the U.S. Department of Health and Human Services, has identified a core set of five drugs that should be included in a drug test. SAMHSA has established "cut-off levels" for these drugs, and these are used to determine positive or negative test results. Test samples that contain substance levels below the cut-off levels are returned as negative, while those containing quantities above the level are reported as positive.

The core set drugs included in the SAMHSA 5 include:

- Marijuana
- Amphetamines
- Cocaine
- Opiates (Heroin, morphine, codeine, and oxycodone)
- Hallucinogens (PCP (angel dust), LSD, peyote, and mushrooms)

Other Testing

Other drugs besides the "SAMHSA 5" that can be included in a drug test. The decision on how extensive the drug testing will be is up to the company.

Other testing drugs:

- **Designer Drugs** (Synthetic drugs sometimes referred to as "party drugs" These include Ketamine, amyl nitrates, Ecstasy or Molly (MDMA), and Bath Salts (MDPV))
- **Barbiturates:** (tranquilizers and barbiturates, phenobarbital, seconal)
- **Inhalants:** (spray paints, paint thinners, and cleaning fluids)

NOTE: Although it is a widely abused substance, alcohol is not included in the SAMHSA 5. This may be due to the specific testing requirements defined in the DOT regulations. It is however commonly included in company drug testing programs.

CONSEQUENCES

The consequences of receiving a positive result from a drug test can vary, and are up to the company. The consequences can include:

- Immediate removal from duty
- Suspension without pay for 30 days
- Referral to a substance abuse professional for assessment and recommendations
- Mandatory successful completion of a recommended rehabilitation including continuing care
- Required to pass a Return-to-Duty Test and sign a Return-to-Work Agreement
- Subject to ongoing, unannounced, follow-up testing for a period of time
- Immediate termination for a second positive test result or violation of a Return-to-Work Agreement
- Immediate termination

Refusing to test

Employees are typically subject to the same consequences as a positive test if they:

- Refuse the screening or the test
- Adulterate or dilutes the specimen
- Substitute the specimen with that from another person or sends an imposter
- Will not sign the required forms
- Refuse to cooperate in the testing process in a way that prevents completion of the test

NOTE: Attached at the end of this section is a Reasonable Suspicion Checklist that can be used by supervisors as a reminder of things that should be considered when trying to determine if there is sufficient grounds information to request an employee to take a drug test. This is provided for informational purposes only, and may be modified to meet company specific requirements.

QUIZ

1. What is the most common method of drug testing?
 - A) Blood
 - B) Breath
 - C) Urine
 - D) Hair
2. Drug testing must be performed by:
 - A) The company
 - B) An employee assistance provider
 - C) A certified laboratory
 - D) Local health care provider
3. What agency is responsible for the creation of drug cut off limits?
 - A) SAMHSA
 - B) PHMSA
 - C) DOT
 - D) OSHA
4. When can drug testing be performed (select all that apply)?
 - A) Pre-employment
 - B) Post-accident
 - C) Reasonable cause
 - D) All of the above
5. Which of the following statements about drug testing confidentiality is false?
 - A) Test samples must be collected in private
 - B) Test results are only available to the employee and those who need to know
 - C) Chain of custody must be maintained
 - D) Test record will be kept in the employees permanent personnel file

REASONABLE CAUSE OBSERVATION CHECKLIST**EMPLOYEE:** _____ **PERIOD OF EVALUATION** _____**SUPERVISOR #1, NAME AND TELEPHONE:** _____**SUPERVISOR #2, NAME AND TELEPHONE:** _____

This checklist is to assist a supervisor in referring a person for drug testing. Has the employee manifested any of the following behaviors? Indicate (D) if documentation exists.

A. QUALITY AND QUANTITY OF WORK**YES NO**

- | | | |
|-----|-----|---|
| ___ | ___ | 1. Refusal to do assigned tasks |
| ___ | ___ | 2. Significant increase in errors |
| ___ | ___ | 3. Repeated errors in spite of increased guidance |
| ___ | ___ | 4. Reduced quantity of work |
| ___ | ___ | 5. Inconsistent, "up and down" quantity/quality of work |
| ___ | ___ | 6. Behavior that disrupts workflow |
| ___ | ___ | 7. Procrastination on significant decisions or task |
| ___ | ___ | 8. More than usual supervision necessary |
| ___ | ___ | 9. Frequent, unsupported explanations for poor work performance |
| ___ | ___ | 10. Noticeable change in written or verbal communication |
| ___ | ___ | 11. Other (please specify) _____ |
-

B. INTERPERSONAL WORK RELATIONSHIPS**YES NO**

- | | | |
|-----|-----|---|
| ___ | ___ | 1. Significant change in relations with co-workers, supervisors |
| ___ | ___ | 2. Frequent or intense arguments |
| ___ | ___ | 3. Verbal/Physical abusiveness |
| ___ | ___ | 4. Persistently withdrawn or less involved with people |
| ___ | ___ | 5. Intentional avoidance of supervisor |
| ___ | ___ | 6. Expressions of frustration or discontent |
| ___ | ___ | 7. Change in frequency or nature of complaints |

SECTION FIVE – TRAINING

- | | | |
|-----|-----|--|
| ___ | ___ | 8. Complaints by co-workers or subordinates |
| ___ | ___ | 9. Cynical, "distrustful of human nature" comments |
| ___ | ___ | 10. Unusual sensitivity to advice or critique of work |
| ___ | ___ | 11. Unpredictable response to supervision |
| ___ | ___ | 12. Passive-aggressive attitude or behavior, doing things "behind your back" |

C. GENERAL JOB PERFORMANCE

YES NO

- | | | |
|-----|-----|--|
| ___ | ___ | 1. Excessive unauthorized absences-number in last 12 months |
| ___ | ___ | 2. Excessive authorized absences-number in last 12 months |
| ___ | ___ | 3. Excessive use of sick leave in last 12 months |
| ___ | ___ | 4. Frequent Monday/Friday absence or other pattern |
| ___ | ___ | 5. Frequent unexplained disappearances |
| ___ | ___ | 6. Excessive "extension" of breaks or lunch |
| ___ | ___ | 7. Frequently leaves work early-number of days per week or month |
| ___ | ___ | 8. Increased concern about (actual incidents) safety offenses involving the employee |
| ___ | ___ | 9. Experiences or causes job accidents |
| ___ | ___ | 10. Major change in duties or responsibilities |
| ___ | ___ | 11. Interferes with or ignores established procedures |
| ___ | ___ | 12. Inability to follow through on job performance recommendation |

D. OTHER BEHAVIORS

YES NO

- | | | |
|-----|-----|---|
| ___ | ___ | 1. Changes in or unusual personal appearance (dress, hygiene) |
| ___ | ___ | 2. Changes in or unusual speech (incoherent, stuttering, loud) |
| ___ | ___ | 3. Changes in or unusual physical mannerisms (gesture, posture) |
| ___ | ___ | 4. Changes in or unusual facial expressions |
| ___ | ___ | 5. Changes in or unusual level of activity-much reduced/increased |
| ___ | ___ | 6. Changes in or unusual topics of conversation |
| ___ | ___ | 7. Engages in detailed discussions about death, suicide, harming others |
| ___ | ___ | 8. Increasingly irritable or tearful |
| ___ | ___ | 9. Persistently boisterous or rambunctious |
| ___ | ___ | 10. Unpredictable or out-of-context displays of emotion |

SECTION FIVE – TRAINING

- | | | |
|-----|-----|--|
| ___ | ___ | 11. Unusual fears or lacks appropriate caution |
| ___ | ___ | 12. Engages in detailed discussion about obtaining/using drugs/alcohol |
| ___ | ___ | 13. Has personal relationship problems (spouse, girl/boyfriend, children, in-laws) |
| ___ | ___ | 14. Has received professional assistance for emotional or physical problems |
| ___ | ___ | 15. Makes unfounded accusations toward others, i.e., has feelings of persecution |
| ___ | ___ | 16. Secretive or furtive |
| ___ | ___ | 17. Memory problems (difficulty recalling instructions, data, past behaviors) |
| ___ | ___ | 18. Frequent colds, flu, excessive fatigue, or other illnesses |
| ___ | ___ | 19. Makes unreliable or false statements |
| ___ | ___ | 20. Unrealistic self-appraisal or grandiose statements |
| ___ | ___ | 21. Temper tantrums or angry outbursts |
| ___ | ___ | 22. Demanding, rigid, inflexible |
| ___ | ___ | 23. Major change in physical health |
| ___ | ___ | 24. Concerns about sexual behavior or sexual harassment |

Other information/observations (Please be specific, attach additional sheet as needed).

SUPERVISOR #2 – DATE

SUPERVISOR #1 - DATE

SECTION 2: SUBSTANCE ABUSE TRAINING

This “Supervisor Training Program” is designed to make your job easier. It can be unpleasant to think about addressing substance abuse with the people you supervise, but you don’t need to worry, and you don’t have to be tough.

This part of your training contains information that will familiarize you with:

- The dangers of drug and alcohol abuse
- Recognizing the signs, symptoms, and effects of commonly abused substances
- How to deal with suspected impaired workers
- Handling potential crisis situations

It’s important that you understand these topics, as they will allow you to recognize substance abuse in the workplace, possibly prevent injuries, and ensure workplace safety.

Addressing substance abuse in the workplace is primarily a conduct and performance issue. An employee who uses or abuses alcohol or other drugs on the job may at some point become a hazard to themselves or others. This training will explain how to deal with these issues.

ALCOHOL ABUSE

In 2013, over 10,000 people were killed in alcohol-impaired traffic crashes, accounting for over 30 percent of all motor vehicle fatalities. Impaired driving continues to be a serious traffic safety and public health issue.

Drinking alcohol, or ethanol, is the most common form of drug abuse in the world. Addiction to alcohol is known as alcoholism. Alcohol is a depressant that produces a euphoric effect. Alcohol intoxication affects the brain, causing slurred speech, clumsiness, and slowed reflexes. Excessive consumption of alcohol leads to a delayed poisoning called a hangover.

The hangover starts after the euphoric effects of alcohol have worn off, typically in the night and morning after excessive drinking. However, even after the euphoria is gone, a person's blood alcohol level can still be above the legal limits imposed for drivers and operators of other dangerous equipment.

Alcohol stimulates insulin production, which speeds up the metabolism and can result in low blood sugar, causing irritability. Drinking alcohol in excess can lead to poisoning, which can be severe, even lethal.

A blood-alcohol content of .45 percent represents the amount that would kill half of the general population. This is about six times the .08 percent level, when people are considered legally drunk. Usually vomiting and/or unconsciousness occur before someone reaches the .45 level unless they have a low tolerance or a large amount of alcohol is consumed very quickly.

A chronic heavy drinker's tolerance to alcohol may allow them to remain conscious at levels above .4 percent, despite the serious health dangers.

Chronic consumption of alcohol can lead to an addiction and result in long-term health problems such as:

- Alcohol-related liver disease
- Heart disease
- Cancer of the esophagus, mouth, throat, and voice box
- Pancreatitis
- Birth defects

A 2014 World Health Organization report attributes over 300,000 deaths to alcohol in the U.S. alone, and over 3 million worldwide. Contrary to popular belief, drinking alcohol doesn't kill brain cells. Instead, it damages the ends of the nerve cells that bring messages to the cell, leading to a change in brain function. Most of this damage is temporary, but the recovery process changes nerve-cell structure permanently.

Excessive consumption of alcohol has been linked to some forms of cancer. An estimated 3.6% of all cancer cases worldwide are related to alcohol drinking, resulting in 3.5% of all cancer deaths.

Signs and Symptoms

The most common signs and symptoms of alcohol impairment are:

- Odor on breath
- Lack of coordination
- Euphoria
- Talkativeness and/or slurred speech

Alcohol is normally detectable by a breathalyzer for four to six hours. Alcohol will remain in your blood for about twelve hours, and can be detected in urine for up to five days.

It should be noted that the results detected by delayed blood or urine tests do not provide proof of impairment, only recent use.

Past government studies have found that:

- Over 7 percent of American workers drink during the workday, mostly at lunch. Even more, 9 percent, have nursed a hangover in the workplace
- Drinking does not have to occur on the job to affect the job. Hangovers account for many workplace productivity losses
- Workers in construction and mining, wholesale, and retail industries are 25 percent to 45 percent more likely to have a serious alcohol problem than the average U.S. worker
- Workplace alcohol use and impairment affect an estimated 15 percent of U.S. workers, or 19.2 million Americans

In addition, people under the influence of alcohol commit a large portion of various violent crimes, including child abuse, homicide, and suicide.

Studies have shown that taking advantage of EAP services have helped millions of individuals and family members affected by alcohol problems. Alcohol treatment also improves an individual's functioning, leading to increased productivity at work.

QUIZ

1. Alcohol is classified as a _____.
 - A) Stimulant
 - B) Depressant
 - C) Schedule one drug
 - D) None of the above
2. Death from alcohol poisoning can occur at a blood alcohol content (BAC) of _____.
 - A) .08
 - B) .20
 - C) .45
 - D) .80
3. A hangover is an indication of mild alcohol poisoning.
 - A) True
 - B) False
4. Alcohol kills brain cells.
 - A) True
 - B) False
5. Alcohol can be detected by a urine test for _____.
 - A) 12 hours
 - B) 24 hours
 - C) 3 days
 - D) 5 days

MARIJUANA ABUSE

Marijuana, or cannabis, is the most frequently used illicit drug abused in the United States and worldwide. It's second only to alcohol as the most common cause seen in cases of driving under the influence of drugs. It's also the drug most often detected in workplace drug-testing programs.

The main active ingredient in marijuana is THC. The THC content in marijuana averaged 3% in the 1980s, but by 2012, it had increased to 12%. The US government classifies marijuana as a schedule one drug. A schedule one is defined as a drug with no currently accepted medical use and a high potential for abuse, and those who use or possess it are subject to prosecution.

Workers covered by federal drug testing programs are prohibited from using marijuana at any time. In addition, federal law allows employers in every state to prohibit employees from working while under the influence of marijuana and employers are permitted to discipline employees who violate this prohibition up to and including termination.

In 2009, the US Department of Justice introduced a change in its marijuana enforcement policy, issuing a memorandum encouraging federal prosecutors not to prosecute those who distribute marijuana for medical purposes in states where medical marijuana is legal.

However, as more and more states approve the recreational use of marijuana, the Department of Justice issued another memorandum reinforcing its right to contest state marijuana laws. This inconsistency about use, regulation, and legislation leaves employers in an unclear position of trying to maintain compliance with evolving legislation, while continuing to provide a safe workplace.

The majority of private employers across the U.S. are not required to drug test, and many state and local governments have statutes that limit or prohibit workplace testing unless required by state or federal regulations due to the nature of the job.

The US Department of Transportation (DOT), in its Drug and Alcohol Testing Regulations, state that marijuana use remains unacceptable for any safety-sensitive employee subject to drug testing under DOT regulations. This safety-sensitive category includes pilots, bus and truck drivers, locomotive engineers, subway operators, aircraft maintenance personnel, fire-armed security transit personnel, and ship captains, among others.

Federal agencies conducting drug testing must follow standardized procedures established by the Substance Abuse and Mental Health Services Administration (SAMHSA). Private non-union employers who require drug testing for applicants and/or employees are usually not required to follow SAMHSA's guidelines, but doing so helps to ensure the legality of testing. In unionized workforces, the implementation of testing programs must be negotiated through collective bargaining, even when federal regulations require testing.

The federal Drug-Free Workplace Act (DFWA), passed in 1988, requires all federal grantees to provide drug-free workplaces as a condition of receiving a federal contract of more than \$100,000 or a federal grant of any value. Employees who work for federal contractors may be subject to discipline, including termination if marijuana use is proven, regardless of whether its use is permitted by state law.

MARIJUANA EFFECTS

Studies of marijuana's mental effects show the drug can:

- Impair or reduce short-term memory
- Alter sense of time
- Reduce one's ability to do things requiring concentration, swift reactions, and coordination, such as driving a car or operating machinery

When marijuana is smoked, the body absorbs the THC. When the body attempts to rid itself of the THC, it transforms it into metabolites. The effects of marijuana use last for at least 4-6 hours, long after the high is gone.

Abuse of multiple substances, such as drinking alcohol, along with using marijuana, increases the risk of accidents. Urine tests can detect THC metabolites for up to a week after people have ingested marijuana.

Using the 5 nanograms per milliliter cutoff for screening, as established by SAMHSA, takes into consideration all types of users. Given the correlation between a marijuana 4 nanogram level and a Blood Alcohol Content of approximately .04 to .05 percent, the 5 nanogram cutoff would roughly equal the current level of alcohol impairment for safety-sensitive workers under the DOT testing laws of .04 percent blood alcohol.

As a result, the 5-nanogram cutoff may be used to establish an initial presumption of impairment; however, the mere presence of this level of THC may not establish acute impairment in an individual worker. That can only be determined when a medical evaluation for impairment has been performed, and the behavior, which led to the testing is considered.

Fewer than 20 states explicitly address marijuana and driving; of these, 11 have zero tolerance for any level of THC. The consensus is that the 5 ng/ml level should be used to ensure a safe workplace.

SIGNS AND SYMPTOMS

Some immediate physical effects of marijuana include a faster heartbeat and pulse rate, bloodshot eyes, and a dry mouth and throat. There are no scientific indications that marijuana improves hearing, eyesight, and skin sensitivity.

A common reaction to marijuana is the “acute panic anxiety reaction”. People describe this reaction as an extreme fear of losing control and paranoia, which causes panic. The symptoms usually depart within a few hours.

Long-term regular users of marijuana may become psychologically dependent. They may have a hard time limiting their use and may need larger doses of the drug to get the same effect. Users may develop social and personal problems affecting their employment.

A synthetic version of marijuana, commonly known as spice or K2, is becoming increasingly popular. “Synthetic” marijuana displays the same symptoms as marijuana, but because it’s synthetic, the effects can be more powerful and cause additional side effects. K2 products are smoked in joints or pipes, but some users make it into a tea.

Short-term effects include increased agitation, pale skin, seizures, vomiting, profuse sweating, uncontrolled spastic body movements, elevated blood pressure, heart rate, and palpitation. The onset of this drug is 3-5 minutes, and the duration of the high is 1-8 hours. In addition to physical signs of use, users may experience speech difficulties, severe paranoia, delusions, and hallucinations.

Marijuana is the most widely abused illegal drug in the workplace. Many people consider it less harmful than alcohol or tobacco, but like those, marijuana can be addictive and carries its own health risks. Chronic use can result in decreased mental capacity, reduced energy levels, and lung damage. The increased risks of injuries and accidents have led courts to rule that companies don’t have to tolerate medical or recreational marijuana use at the workplace, even if state law permits the use.

QUIZ

1. Marijuana is the most commonly abused illegal drug in the workplace.
 - A) True
 - B) False
2. Marijuana is classified as a schedule one drug.
 - A) True
 - B) False
3. What government agency has established a cutoff limit for marijuana?
 - A) DOT
 - B) NFPA
 - C) SAMHSA
 - D) OSHA
4. Synthetic marijuana (K2) is more potent than traditional marijuana, and the effects can last longer.
 - A) True
 - B) False
5. Which is NOT a symptom of marijuana use?
 - A) Bloodshot eyes
 - B) Dry mouth
 - C) Improved hearing
 - D) Slowed reflexes

DEPRESSANT ABUSE

Depressants sometimes referred to as sedatives, tranquilizers, or painkillers, fall into three categories: benzodiazepines, barbiturates, and opioids. These substances slow brain activity, making them useful for treating anxiety, sleep disorders and pain relief.

BENZODIAZEPINES

Drugs such as Valium and Xanax are sometimes prescribed to treat anxiety, acute stress, and panic attacks. The more powerful benzodiazepines, such as Halcion and ProSom, are prescribed for short-term treatment of sleep disorders. Usually benzodiazepines are not prescribed for long-term use because of the risk for developing tolerance, dependence, or addiction.

Other commonly abused drugs that can be grouped in this category include rohypnol and G-H-B. These are also described as designer drugs, and we'll discuss those in another module.

BARBITURATES

Barbiturates such as Mebaral, Luminal, and Nembutal, are used medically to reduce anxiety or to help with sleep problems. They are used less frequently because of their higher risk of overdose compared to benzodiazepines. Once addicted to barbiturates, users often seek out the drug to obtain the same kind of high as achieved before.

However, because users develop a tolerance to the drug and require more and more of it to achieve the same result, the risk of an overdose is increased. Barbiturate addicts abuse the drug to feel an extreme calm and contentedness.

OPIOIDS

The most well-known and a commonly abused opioid is heroin. Heroin can be injected, inhaled by snorting or sniffing, or smoked. It is highly addictive and has experienced a resurgence in popularity recently. After injecting heroin, users report feeling a surge of euphoria or a “rush”, along with a dry mouth, a warm flushing of the skin, heaviness of the extremities, and clouded mental functioning. Following this initial euphoria, the user goes “on the nod”, an alternately wakeful and drowsy state. Users who do not inject the drug may not experience the initial rush, but other effects are the same.

Heroin abuse continues to be a growing problem in the U.S. and around the world. A report by the CDC shows that over 8,200 died from heroin overdoses in 2013. It's believed by some experts that the rise in popularity of heroin is because it provides similar effects to prescription opioids, but at a fraction of the cost.

A 2011 survey by SAMHSA estimated that 607,000 persons per year used heroin in the years 2009-2011, compared to 374,000 during 2002-2005. Heroin can provide a fast high, but just as quickly, it can take over your life, and become fatal. Heroin addiction is treatable, but the path to recovery requires a commitment that can often last years or even decades.

PRESCRIPTION DRUGS

Medications that fall within the opioid class include Vicodin, OxyContin, Percocet, morphine and codeine. Opioids can produce drowsiness and mental confusion. Some people experience a euphoric response to opioid medications. Those who abuse opioids may seek to intensify their experience by taking the drug in ways other than those prescribed. For example, people who abuse OxyContin may snort or inject it, which increases their risk for serious medical complications, including overdose.

OTC DRUGS

Over-the-counter (OTC) medications, such as certain cough suppressants, sleep aids, and antihistamines, can be abused for their psychoactive effects. Others, when taken for their "hallucinogenic" properties, can cause confusion, psychosis, coma, and even death.

Cough syrups and cold medications containing dextromethorphan, often referred to as dex or robo, were the most commonly abused OTC medications in 2010. At high doses, a key ingredient in cough syrup can act like PCP or ketamine.

Signs and Symptoms

The abuse of depressants, regardless of type, generally induces feelings of euphoria, relaxation, and reduced anxiety. These effects, along with its addictive qualities, make it one of the most commonly abused pharmaceutical drugs in the U.S.

The symptoms of abuse include:

- Dry Mouth
- Fatigue
- Constricted pupils
- Dizziness
- Nausea
- Hallucinations

Side Effects

Acute overdoses of depressants can produce:

- Drowsiness
- Respiratory depression or arrest
- Muscle weakness
- Cold and clammy skin
- Low blood pressure and heart rate
- Coma or death

Treatment

Recently an opioid overdose treatment has been approved for use involving the drug Naloxone. Naloxone is a medication that counters the effects of opioid overdose. It can reverse the depression of the central nervous system, respiratory system, and hypotension.

Products that provide a disposable injection system or a nasal spray are now being marketed and emergency responders are being trained on their use in many areas. Sold under names such as Narcan Nalone, and Evzio, it can be used to treat people who have overdosed on heroin or painkiller opiates, such as morphine, oxycodone, or Vicodin.

Depressant abuse can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to prevent accidents at the workplace.

CONCLUSION

Depressant abuse can cause serious health problems and safety issues. The use of any drug can impair your judgment or actions. Always inform your supervisor of any medications you're taking, to avoid accidents at the workplace

QUIZ

1. What are the three categories of depressants?
 - A) Opioids
 - B) Benzodiazepines
 - C) Hallucinogens
 - D) Barbiturates
2. Which drug listed is NOT considered a depressant?
 - A) Heroin
 - B) Oxycodone
 - C) Xanax
 - D) MDMA
3. What is NOT a symptom of depressant abuse?
 - A) Dry mouth
 - B) Dizziness
 - C) Dilated pupils
 - D) Hallucinations
4. Over the counter drugs can be abused and cause hallucinogenic effects.
 - A) True
 - B) False
5. How can treatments to counter the effects of depressant overdoses be administered (select all that apply)?
 - A) Orally
 - B) Injection
 - C) Ingestion
 - D) Inhalation

STIMULANT ABUSE

Stimulants, as the name suggests, increase alertness, attention, and energy, as well as elevate blood pressure, heart rate, and respiration. Stimulants have traditionally been used to treat asthma and other respiratory problems, and a variety of other ailments. However, as their potential for abuse and addiction became apparent, the medical use of stimulants began to wane.

Signs and Symptoms

There are varieties of drugs, both legal and illegal, that are categorized as stimulants. Regardless of the substance, the symptoms of stimulant abuse are standard and include:

- Euphoria
- Hyperactivity and increased alertness
- Increased desire to talk
- Sensitivity to light and sound

Side Effects

Abusers of stimulants may experience the following problems:

- Dilated pupils
- Anxiety and paranoia
- Twitching
- Reduced appetite
- Increased heart rate, blood pressure, and body temperature
- Disturbed sleep patterns
- Nausea
- Panic and psychosis

ILLEGAL DRUGS

Cocaine

The once popular cocaine is a powerful stimulant that causes euphoria, intense hikes in energy and heightened anxiety when it is smoked, eaten, injected, or snorted. The popularity of cocaine and its derivative, crack cocaine, has decreased recently as less costly and easier-to-obtain alternatives have become available. It is, however, still around and considered one of the most addictive substances available. The use of cocaine resulted in 4,300 deaths in 2013, up from 2,400 in 1990. While there are some medical applications for the use of cocaine such as a topical anesthetic for eye and nasal surgery, it's controlled internationally, and the majority of cocaine use is illegal.

Crack Cocaine

Crack is a powerful stimulant that is made of a mixture of cocaine and baking soda. When processed, it turns into a hardened, more potent mixture that can be smoked to produce intense effects. The name "crack", is given to the substance because of the crackling noise it makes when the drug is smoked.

The effects of crack cocaine are relatively short, ranging from thirty minutes to two hours if inhaled, and an even shorter period if smoked or injected. Crack is such a strong stimulant that it creates severe stresses on the heart, the vascular system, the lungs, and the brain. Blood vessels constrict from the stimulation of the drug and over time, can harden. Then when further stimulation occurs, these damaged blood vessels can rupture, leading to a stroke, a fatal heart attack, or cardiac arrest.

For a short time, performance and dexterity may improve. Users report an increasing sense of energy and alertness, an extremely elevated mood, and a feeling of supremacy. However, as soon as the high wears off, users will exhibit irritability, paranoia, restlessness, and anxiety. This can lead to accidents as drivers on crack can make unpredictable moves and lose control of their vehicles.

Methamphetamine

Methamphetamine is a psychostimulant that induces a sense of euphoria and heightened energy when it is smoked, injected, snorted, or consumed. This highly addictive drug is commonly abused and has significantly grown in popularity over the past ten years.

Crystal meth is short for crystal methamphetamine, which is just one form of the drug methamphetamine. Crystal meth is commonly used as a “club drug”, taken while partying in nightclubs or at raves. Its most common street names are ice or glass.

Signs and Symptoms

In addition to the short-term symptoms listed above, crystal meth symptoms can include:

- Bizarre, erratic, and sometimes violent behavior
- Hallucinations, hyper-excitability, and irritability
- Delusions (for example, the sensation of insects crawling under the skin)

Long Term Effects

High doses can cause convulsions, seizures, and death. Prolonged use of meth can cause:

- Permanent damage to the blood vessels of the heart and brain
- Liver, kidney, and lung damage
- Destruction of nasal tissues if snorted
- Breathing problems if smoked
- Infectious diseases and abscesses at injection sites or due to compulsive scratching
- Malnutrition and weight loss
- Severe tooth decay
- Disorientation, apathy, and confused exhaustion
- Psychological dependence
- Psychosis
- Depression
- Damage to the brain similar to Alzheimer’s disease, stroke, and epilepsy

Meth is a dangerous and potent chemical and, as with all drugs, a poison that first acts as a stimulant but then begins to destroy the body.

MDMA

MDMA, often referred to as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. MDMA is taken orally, usually as a capsule or tablet. The popular term Molly (slang for “molecular”) refers to the pure crystalline powder form of MDMA, usually sold in capsules. The drug’s effects last approximately 3 to 6 hours, although it is not uncommon for users to take a second dose of the drug as the effects of the first dose begin to fade.

Signs and Symptoms

MDMA produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

Flakka

A potent new designer drug called flakka is making headlines across the United States. Flakka is similar to the bath salts drugs. Both are synthetic versions of naturally occurring amphetamine-like drugs. Flakka, also known as gravel, was banned by the U.S. in early 2014. Despite this, flakka's availability has been surging in parts of the U.S. Flakka is a potent stimulant at low doses, but can cause bizarre behavior if a user takes too much.

Flakka can be used many different ways, including swallowing, snorting, or injecting. It also can be dissolved into liquid and inhaled as e-cigarette vapor. Like other drugs of this type, flakka can cause a condition called "excited delirium" that includes hyper-stimulation, paranoia, and hallucinations that can lead to violent aggression and self-injury.

Some drug experts are suggesting that flakka may be the next drug epidemic because it's more addictive than meth, more dangerous than cocaine, and the cheapest of the three.

Signs and Symptoms

Commonly observed symptoms of flakka abuse include bizarre behavior, agitation, paranoia, and delusions of superhuman strength.

Side Effects

The drug has been linked to deaths by suicide as well as heart attack. It can also dangerously raise body temperature and lead to kidney damage or kidney failure.

LEGAL DRUGS

Most recently, there has been a significant increase of the abuse of prescription stimulants because they are often easier to get. The most popular of these are drugs used to treat ADHD, narcolepsy, and occasionally depression.

Signs and Symptoms

Stimulants, such as Dexedrine, Adderall, Ritalin, and Concerta can induce:

- A feeling of euphoria
- Increased blood pressure and heart rate
- Constricted blood vessels
- Increased blood sugar

The increased use of stimulant prescriptions over the last two decades has led to greater availability and increased risk for abuse. Due to the fact that these are prescription drugs, they are perceived by many to be generally safe and effective; prescription stimulants are increasingly being abused.

Because these drugs increase the availability of certain neurotransmitters and increase the blood flow to muscles, they are increasingly popular among some academic professionals, athletes, performers, older people, and both high school and college students. Users frequently report improvements in focus and concentration, and sports performance. This type of use poses potential health risks, including addiction, cardiovascular problems, and psychosis.

As with other drugs, it's easy for individuals to become dependent upon or addicted to stimulants. Withdrawal symptoms associated with discontinuing stimulant use include fatigue, depression, and disturbance of sleep patterns. The repeated abuse of some stimulants can lead to feelings of hostility or paranoia, even psychosis.

Further, taking high doses of a stimulant may result in dangerously high body temperature and an irregular heartbeat. There is also the potential for cardiovascular failure or seizures. According to results from the 2010 National Survey on Drug Use and Health, an estimated 2.4 million Americans used prescription drugs non-medically for the first time within the past year, which averages to approximately 6,600 new users per day.

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

CONCLUSION

Stimulant abuse can cause serious health issues and problems at home or on the job. It's important to be able to recognize the signs and symptoms of stimulant abuse and take the necessary steps to eliminate it from the workplace.

QUIZ

1. Which of the following drugs is NOT considered a stimulant?
 - A) Cocaine
 - B) Ritalin
 - C) DXM
 - D) MDMA
2. Identify the common symptoms of stimulant abuse (select all that apply):
 - A) Increased energy
 - B) Talkativeness
 - C) Twitching
 - D) Loss of coordination
3. Which of the stimulants listed below are known to cause violent behavior (select all that apply)
 - A) Adderall
 - B) Crystal Meth
 - C) Flakka
 - D) Cocaine
4. The increase in the abuse of prescription stimulants is to improve mental and physical performance.
 - A) True
 - B) False
5. What are the side effects of stimulant abuse (select all that apply)?
 - A) Nervousness
 - B) Weight loss
 - C) Reduced blood pressure
 - D) Drowsiness

HALLUCINOGEN ABUSE

Hallucinogens are a class of drugs that cause distortions in a person's perceptions of reality. Hallucinogens exist as both plants and as synthetically made substances. Hallucinogens are divided into two categories: classic hallucinogenics, and dissociative.

CLASSIC HALLUCINOGENS

Classic hallucinogenics include:

- LSD
- Mescaline (Peyote)
- Psilocybin
- DMT

Under the influence of hallucinogens, people see images, hear sounds, and feel sensations that seem real but do not exist. Some hallucinogens also produce rapid, intense emotional swings.

LSD

Lysergic Acid Diethylamide, or LSD, was once one of the most popular hallucinogens, but has since been replaced in popularity, due in part to its limited availability.

Mescaline

Mescaline is a naturally occurring hallucinogen found in certain type of cacti. As with most hallucinogens, mescaline causes altered thought processes and visual delusions. The effects of mescaline can last in excess of 12 hours.

Psilocybin

Psilocybin is the active ingredient in what are known as Magic Mushrooms. Psilocybin is another naturally occurring hallucinogen found in many species of mushrooms. Psilocybin generally causes feelings of euphoria, a distorted sense of time, and visual and mental hallucinations. Consuming psilocybin mushrooms can cause pupil dilation, changes in heart rate and blood pressure, nausea, and panic attacks. The effects of psilocybin can last up to six hours.

DMT

Dimethyltryptamine is a hallucinogenic compound used in religious rituals in the Amazon, and is growing in popularity. DMT is a plant-based mixture that can be smoked, injected, or made into a tea.

A National Survey on Drug Use and Health found that the number of people in the U.S. who have used DMT in some form has been up almost every year since 2006 -- from an estimated 688,000 in 2006 to 1,475,000 in 2012. DMT can produce powerful psychedelic experiences including intense visuals, euphoria, and hallucinations when combined with certain other drugs

DISSOCIATIVE DRUGS

The drugs in the dissociative category are both illegal and popular with abusers. The most common are:

- PCP
- Ketamine
- MDMA
- DXM
- Salvia

PCP

PCP, also known as Angel Dust, was originally intended as an anesthetic, but was never approved because of its psychological effects. Today it's an illegally produced synthetic drug sold as tablets, capsules, or white or colored powder. It can be snorted, smoked, or eaten. PCP is sometimes combined with marijuana to create what is known as supergrass or killer joints.

Signs and Symptoms

A moderate amount of PCP often causes users to feel detached, distant, and estranged from their surroundings. Numbness of the extremities, slurred speech, and loss of coordination may be accompanied by a sense of strength and invulnerability.

A blank stare, rapid and involuntary eye movements, and an exaggerated walk are among the more observable effects. Auditory hallucinations, image distortion, severe mood disorders, and amnesia may also occur. In some users, PCP may cause acute anxiety and a feeling of impending doom; in others, paranoia and violent hostility, and in some, it may produce a psychosis indistinguishable from schizophrenia.

Side Effects

The effects of PCP include a slight increase in breathing rate and a more pronounced rise in blood pressure and pulse rate. Respiration becomes shallow and flushing and profuse sweating can be evident.

At high doses of PCP, there is a drop in blood pressure, pulse rate, and respiration. Nausea, vomiting, blurred vision, uncontrolled eye movements, drooling, loss of balance, and dizziness may also occur. High doses of PCP can also cause seizures, coma, and death (though death more often results from accidental injury or suicide during PCP intoxication).

Ketamine

Ketamine, or Special-K, is an anesthetic used in veterinary medicine. Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

MDMA

MDMA, known as Ecstasy or Molly, is a synthetic drug that has similarities to both the stimulant amphetamine and the hallucinogen mescaline. It produces feelings of increased energy, euphoria, emotional warmth and empathy toward others, and distortions in sensory and time perception.

MDMA was initially popular among young adults in the nightclub scene or at raves, but the drug now affects a broader range of users. MDMA is usually taken as a capsule or tablet, with the effects lasting 3 to 6 hours.

DXM

DXM stands for Dextromethorphan, It's known as robo after a popular brand of cough syrup. DXM is a cough suppressant and expectorant ingredient in some over-the-counter cold and cough medications. Adolescents and young adults often abuse these. The most common sources of abused DXM are “extra-strength” cough syrup.

Salvia

Salvia is a fairly new addition to the list of hallucinogens. Salvia, also known as “magic mint”, is a member of the mint family, native to southern Mexico. Salvia can be smoked, chewed, or consumed by drinking the extracted juices.

Signs and Symptoms

The effects of salvia use are similar to other hallucinogens and have been described as intense but short-lived, appearing in less than 1 minute and lasting less than 30 minutes. The effects of hallucinogens are highly volatile in that there is no real way of knowing how the user will react from one use to the next. The reactions to salvia tend to be varied and unreliable, which is the primary concern when this drug is taken.

Different effects can be produced for different people and even for the same people at different times. The main reason for this is due to the variation in the active components of the drugs with each use.

The symptoms of hallucinogen use can vary by dosage:

- Low doses produce a numbness in the extremities and intoxication, characterized by staggering, unsteady gait, slurred speech, bloodshot eyes, and loss of balance.
- Moderate doses will produce a numbing effect similar to pain killers or anesthetics.
- High doses may lead to convulsions.

Users can really never know how much of the drug they are taking, due to the tendency of the drug to be made illegally in uncontrolled conditions.

When ingested, users may experience any number of effects from hallucinogens, some of which include:

- Mood swings
- Disconnection from reality
- Tactile, visual, or auditory hallucinations

Side Effects

Taking hallucinogens can lead to the following serious side effects:

- Increased heart rate, blood pressure, and body temperature
- Tremors or shakes
- Sweating
- Nausea and vomiting
- Poisoning
- Shallow breathing
- Loss of muscle control

Using hallucinogenic drugs can cause serious health issues and problems with family members, friends, coworkers, work, money, and the law. Hallucinogen abuse can eventually disrupt normal chemical processes leaving the brain in a diminished state.

QUIZ

1. All hallucinogenic drugs are synthetically made substances.
 - A) True
 - B) False
2. What are the two categories of hallucinogenic drugs?
 - A) Visual
 - B) Classic
 - C) Dissociative
 - D) Synthetic
3. What is a common street name for MDMA?
 - A) Magic mint
 - B) Ecstasy
 - C) DXM
 - D) Gravel
4. Which of the following is NOT a symptom of hallucinogen abuse?
 - A) Slurred speech
 - B) Hyperactivity
 - C) Mood swings
 - D) Hearing things
5. Salvia is an organic hallucinogen from Mexico.
 - A) True
 - B) False

INHALANT ABUSE

Many products found in the home or workplace, such as spray paints, markers, glues, and cleaning fluids contain substances that have mind-altering properties when inhaled. People do not typically think of these products as drugs because they were never intended for that purpose.

These products are used as recreational drugs for their intoxicating effect. Inhaling these substances for this purpose is called huffing, sniffing, dusting, or bagging. Teens and young adults do this most often, but not exclusively.

Abusers of inhalants breathe them in from a container or dispenser directly into their nose or mouth, or place a chemical-soaked rag in their mouth. Abusers may also inhale fumes from a balloon or a plastic or paper bag. Because the high produced by inhalants usually lasts just a few minutes, abusers often try to prolong it by continuing to inhale repeatedly over several hours.

A wide range of substances are abused as inhalants, these include:

- Volatile solvents - liquids that vaporize at room temperature such as gasoline
- Industrial or household products, - These include paint thinners or removers, degreasers, dry-cleaning fluids, gasoline, and lighter fluid
- Art or office supply solvents - Art or office supply solvents, including correction fluids, felt-tip marker fluid, electronic contact cleaners, and glue
- Aerosols - Sprays that contain propellants and solvents. These include aerosol propellants in items such as spray paints, hair or deodorant sprays, fabric protector sprays, aerosol computer cleaning products, and vegetable oil sprays
- Gases - These can be found in household or commercial products such as butane lighters and propane tanks, whipped cream aerosols or dispensers, called whippets, and refrigerant gases
- Medical anesthetics – These include ether, chloroform, halothane, and nitrous oxide
- Nitrites – Amyl nitrites, used primarily as sexual enhancers, and commonly known as “poppers”

Amyl nitrite is still used in certain diagnostic medical procedures. Although not as widely used as in the past. When marketed for illicit use, organic nitrites are often sold in small brown bottles labeled as video head cleaner, room odorizer, leather cleaner, or liquid aroma.

Signs and Symptoms

The effects of solvent intoxication can vary widely depending on the dose, and the type of solvent or gas being inhaled. A person who has inhaled a small amount of rubber cement or paint thinner vapor may be impaired in a manner resembling being drunk.

A person, who has inhaled a larger quantity of solvents or gases, or a stronger chemical, may exhibit stronger effects such as slurred speech, euphoria, nausea, fainting, stupor, distortion in perceptions of time and space, hallucinations, and emotional disturbances. Most abused inhalants, other than nitrites, depress the central nervous system much like alcohol.

The effects are similar, including slurred speech, lack of coordination, euphoria, and dizziness. Inhalant abusers may also experience light-headedness, and delusions. With repeated inhalations, many users feel less inhibited and less in control. Some may feel drowsy for several hours and experience a lingering headache.

Side Effects

Regardless of which inhalant is used, abuse can lead to injury or death. When a gas that was stored under high pressure is released, it cools rapidly and can cause frostbite if it is inhaled directly from the container. Nitrous oxide, which can be used as an automotive power adder, is one such chemical. Its cooling effect is potentially lethal to a person.

Many inhalants are volatile chemicals and can catch fire or explode, especially when used where people are smoking. As with many other drugs, users may also injure themselves due to loss of coordination or impaired judgment, especially if they attempt to drive.

Solvents have many potential risks in common, including pneumonia, cardiac failure or arrest, and aspiration of vomit. The inhaling of some solvents can cause hearing loss, muscle spasms, and damage to the central nervous system and brain. Serious but potentially reversible effects include liver and kidney damage and blood-oxygen depletion.

Death from inhalants is usually caused by a very high concentration of fumes. Deliberately inhaling solvents from an attached paper or plastic bag or in a closed area greatly increases the chances of suffocation. Brain damage often occurs from chronic long-term use as opposed to short-term exposure.

Abusing inhalants can be lethal. Sniffing highly concentrated amounts of the chemicals in solvents or aerosol sprays can directly cause heart failure within minutes. This syndrome, known as “sudden sniffing death”, can result from a single session of inhalant use by an otherwise healthy person.

High concentrations of inhalants may also cause death from suffocation, especially when inhaled from a paper or plastic bag or in a closed area. Even when using aerosols or volatile products for their intended purposes like painting or cleaning, you should always do so in a well-ventilated room or outdoors.

VAPING

Electronic cigarettes, also called e-cigarettes, are battery-operated devices designed to deliver nicotine with flavorings and other chemicals to users in vapor instead of smoke. They can be manufactured to resemble traditional tobacco cigarettes, cigars or pipes, or even everyday items like pens or USB memory sticks. Newer e-cigarettes have refillable cartridges that can be filled with substances other than nicotine, providing a new way to deliver other drugs. This practice is often referred to as dabbing.

DABBING

The dab phenomenon is rapidly becoming popular. Dabs are forms of high-grade hash, usually made with a process involving butane or CO². BHO, or butane hash oil, is a marijuana product extracted from the plant and concentrated into a smokable gummy substance sometimes called "budder," "honeycomb", or "earwax".

It's widely believed that BHO has a higher concentration of THC, and is therefore much stronger than traditional marijuana or hashish. Vape pens, or vaporizer pens, usually consist of an electronic heating system and a cartridge holding hash oil. These provide a virtually smoke-free way to consume these concentrates, making the practice of dabbing that much more difficult to detect.

CONCLUSION

Huffing, sniffing, or bagging can cause serious health issues or death. Companies who employ teen workers where sources of inhalant materials are readily available need to be on the lookout for symptoms of abuse particularly in younger workers.

Companies and workers involved in air conditioning repair work should be aware of the signs of suspected refrigerant inhalant abuse. These situations can include:

- Frequent AC repair calls to the same home or neighborhood
- Refrigerant runs low prematurely
- Damaged AC units

If these signs are detected, workers should share that information with homeowners in a considerate manner. Remember, these signs don't confirm abuse, and inhalant abusers could be anyone, someone living in the home, or others in the neighborhood.

QUIZ

1. Which is NOT a term used to describe inhalant abuse?
 - A) Huffing
 - B) Bagging
 - C) Dusting
 - D) Whiffing
2. How long do the effects of abusing inhalants usually last?
 - A) 1 to 5 minutes
 - B) 15 to 20 minutes
 - C) 30 to 60 minutes
 - D) 1 to 3 hours
3. Amyl nitrate that can be purchased for illegal purposes is referred to as (select all that apply):
 - A) Video Head Cleaner
 - B) Air Dusters
 - C) Room Odorizer
 - D) Leather Cleaner
4. When gases stored at high pressure are inhaled, they can cause injury due to frostbite.
 - A) True
 - B) False
5. Using e-cigarettes to inhale illegal substances is called what?
 - A) Dabbing
 - B) Vaping
 - C) Blasting
 - D) Snorting

DESIGNER DRUG ABUSE

The term “designer drugs” refers to drugs that are created in a laboratory. A designer drug is created by changing the properties of a drug that comes from a plant, such as cocaine, morphine, or marijuana, using chemistry. The resulting designer drugs typically have a new, different effect on the brain or behavior.

MDPV, Ecstasy, ketamine, MXE, GHB, Rohypnol, and bath salts are some examples of designer drugs.

MDPV

MDPV is the active ingredient found in many drugs labelled as plant food or bath salts. It acts as a stimulant, and has been reported to produce effects similar to those of cocaine and amphetamines. The effects of MDPV last 3 to 4 hours, with the after effects of high blood pressure and rapid heart rate lasting 6 to 8 hours.

Signs and Symptoms

Common symptoms of MDPV abuse include:

- Agitation
- Dilated pupils
- Hallucinations
- Confusion
- Paranoia
- Anxiety

Side Effects

Reported side effects for MDPV and other bath salts drugs include heart palpitations, high blood pressure, increased body temperature, nausea, and violent or suicidal behavior. Although efforts have been made to prohibit the sale of the chemicals used to make bath salts, new variations using alternate chemicals continue to appear, and these new formulas can still be bought at head shops and on the street around the country.

MDMA

MDMA, the active ingredient in Ecstasy, is a member of the amphetamine class of drugs, and falls under other broad categories of substances, including stimulants and psychedelics. MDMA is one of the most widely used illicit drugs in the world. MDMA is available in pill form, commonly known as Ecstasy, and more recently in crystalline form known as Molly, which is a purer form of the drug, which greatly increases the risk of overdose.

Ecstasy and Molly are popular with teenagers and young adults who are more likely to use it on weekends and at parties. The effects of MDMA are more consistent than those produced by most psychedelics, and its distinct euphoria is unlike other stimulants.

The recent growth in the popularity of Molly is due to the claims that it's “pure”. While there's no way to tell if that's true, it's almost certainly more potent than Ecstasy pills. Another factor is that it's relatively cheap. Usually around \$30-\$40 for 100mg, which is typically enough for a first-time user.

Side Effects

Depression and loss of memory can occur more frequently in long-term MDMA users. A chronic user can suffer severe depression, fatigue, and hopelessness and have reported being extremely depressed after periods of prolonged use; this is sometimes referred to as suicide Tuesday. Suicide Tuesday is the name given to the trend for people who use ecstasy all weekend, then commit suicide when they fully come down from the high on Tuesday.

Due to its near-universal illegality, the purity of a substance sold as Ecstasy is unknown to the user. Pills may contain other active substances meant to stimulate in a way similar to MDMA, such as amphetamine, methamphetamine, ephedrine, or caffeine.

KETAMINE

Ketamine is an anesthetic used in veterinary medicine. Unlike the other drugs listed here, ketamine, or Special-K, is a dissociative hallucinogen. This means it causes a sense of detachment between a person's body and the external world.

The effects of ketamine are relatively short in nature, lasting about 30 to 60 minutes. Ketamine comes in a clear liquid and a white or off-white powder form, which can be injected, mixed in a drink, or combined with tobacco or marijuana and smoked.

Signs and Symptoms

Ketamine is considered a club or party drug, and because of its anesthetic effect isn't normally abused in the workplace.

Side effects

Ketamine can cause serious bladder problems with severe pain and difficulty passing urine, and can lead to surgical removal of the bladder.

Detection

While most drug tests don't specifically look for ketamine, unlike other designer drugs, it can be detected in urine samples for two to four days after use.

MXE

Methoxetamine, or MXE, is a dissociative sedative similar to ketamine, but stronger and longer lasting. MXE is a white powder that has stimulant and dissociative effects, with the stimulant effects appearing at lower doses, and the dissociative effects at higher doses.

MXE can be ingested or injected. Users of lower doses of the drug report feeling calm, with an increase in energy, euphoria, and disconnection from problems and concerns. At higher doses, the effects are different and much more intense. At these higher levels, the effects are more similar to related drugs ketamine and PCP.

Signs and Symptoms

The effects of MXE include:

- Feelings of intense intoxication
- Involuntary eye movement
- Auditory and visual hallucinations
- A feeling of disconnection from your body

Side effects

Some of the side effects of MXE include paranoia, nausea, high blood pressure, and rapid heart rate. Injecting MXE can damage the veins and can cause serious problems such as abscesses and blood clots.

GHB

GHB is a depressant that is commonly referred to as a “club drug” or “date rape” drug that is often placed in alcoholic beverages. GHB, also known as G, liquid ecstasy, or liquid X, is a depressant used both as a prescription sleep-aid and as a recreational intoxicant. It's known for its ability to induce a short (several hour) coma-like sleep at high doses.

Due to the number of GHB-related deaths in combination with its addiction potential, it was categorized as a schedule one drug by Federal law in 1999. GHB that's bought illegally on the street or over the internet comes in liquid form or as a white powder, and is taken orally and frequently combined with alcohol.

Signs and Symptoms

The common symptoms of GHB use are:

- | | |
|--------------------|-------------------------|
| • Euphoria | • Impaired coordination |
| • Increased energy | • Hallucinations |
| • Dizziness | • Confusion |

Side effects

The side effects of GHB use include:

- | | |
|-------------------|----------------------|
| • Seizures | • Insomnia |
| • Muscle twitches | • Low blood pressure |
| • Tooth decay | • Rash |

The combination of GHB and alcohol can result in a coma-like condition, and result in death due to depressed breathing conditions.

The production of GHB usually involves the use of lye or drain cleaner mixed with GBL, a chemical cousin of GHB and an industrial solvent often used to strip floors.

ROHYPNOL

Rohypnol is a drug with properties similar to those of Valium. It's used in the short-term treatment of insomnia, as a pre-medication in surgical procedures and for inducing anesthesia. The common street name for rohypnol is "roofies". Rohypnol is sold in Europe and Latin America as a sleeping pill, but it is illegal in the United States.

Like Valium, Librium, and Xanax, Rohypnol's effects include sedation, muscle relaxation, reduction in anxiety, and prevention of convulsions. However, Rohypnol's sedative effects are approximately 7 to 10 times stronger than Valium. The effects of Rohypnol appear 15 to 20 minutes after administration and last approximately four to six hours.

While Rohypnol has become widely known for its use as a date-rape drug, it is abused more frequently for other reasons. It is abused by students, street gang members, rave attendees, and heroin and cocaine abusers to produce profound intoxication, boost the high of heroin, and control the effects of cocaine. Rohypnol causes partial amnesia, causing users to be unable to remember certain events that they experience while under the influence of the drug.

Signs and Symptoms

Common signs of Rohypnol use include loss of muscle control, confusion, drowsiness, and amnesia. A person can be so incapacitated (made unable to act) they collapse. They lie on the floor, eyes open, able to observe events but completely unable to move.

Side Effects

Rohypnol users often describe its effects as "paralyzing". The effects start 20 to 30 minutes after taking the drug, peak within two hours and may persist for 8 to 12 hours.

In addition to the chemically induced amnesia, rohypnol often causes decreased blood pressure, drowsiness, visual disturbances, dizziness, confusion, digestive problems, and urinary problems.

BATH SALTS

The active ingredient in bath salts is called mephedrone a synthetic substance that is claimed to make users feel confident and energized and enhance musical experiences.

One package of these amphetamine-like drugs can contain several different substances, including mephedrone and MDPV. The powder is often marketed as a novelty bathing product, but it is not intended for use in baths. Bath salts can be swallowed, snorted, smoked, or injected.

Signs and Symptoms

The signs of bath salts use may include:

- Euphoria
- Increased alertness and awareness
- Abnormal pupil dilation
- Uncontrollable eye movement
- Increased energy and motivation
- Mental stimulation/increased concentration
- Confusion
- Hallucinations
- Talkativeness

The primary effects last roughly 3 to 4 hours, with after effects such as rapid heartbeat, high blood pressure, and mild stimulation lasting from 6 to 8 hours.

Side Effects

The side effects of bath salts use include:

- Agitation or severe rage
- Heart palpitations and chest pain
- Seizures and tremors
- Vomiting
- High body temperature
- Kidney or liver failure
- Excessive sweating and compulsive water drinking
- High blood pressure
- Compulsive teeth grinding
- Sleep deprivation
- Intense and prolonged panic attacks

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used Molly alone increased by 66 percent. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

DETECTION

Many designer drugs are not detectable by a typical urinalysis, although they can be detected in urine and hair analyses using gas chromatography-mass spectrometry.

CONCLUSION

The use of designer drugs isn't slowing down, according to a SAMHSA survey, between 2005 and 2011, the number of people reporting to have used molly alone increased by 66%. While some are approved for limited medical use, most designer drugs are schedule one drugs, and the possession or use of them is illegal. Workers and supervisors alike need to be aware of the signs of abuse, and the potential dangers in the workplace.

QUIZ

1. Designer drugs are chemically modified variations of organic drugs.
 - A) True
 - B) False
2. Which of the following is NOT defined as a designer drug?
 - A) MDMA
 - B) MDPV
 - C) MXE
 - D) Salvia
3. What drug is used as an animal anesthetic?
 - A) GHB
 - B) Ketamine
 - C) Rohypnol
 - D) MDPV
4. What are the common symptoms of designer drug abuse (indicate all that apply)?
 - A) Euphoria
 - B) Hallucinations
 - C) Drowsiness
 - D) Increased appetite
5. Which of the following are referred to “date rape” drugs (indicate all that apply)?
 - A) MXE
 - B) Rohypnol
 - C) Ketamine
 - D) GHB

DEALING WITH EMPLOYEE PERSONAL PROBLEMS

There's a naive belief among many managers and supervisors that employee personal problems are irrelevant to job performance, and therefore something they can ignore. We imagine that when employees walk through the door, all of their personal problems are left behind. Managers and supervisors who think this way believe employees are like robots: treat them all the same way and just focus on the work.

The reality is that people aren't robots. As much as we'd like to believe employees' personal lives don't affect their work, it does. Exhausted new parents suffering from lack of sleep due to a crying infant aren't able to be as creative as they'd like. Workers dealing with problems at home often find their minds wandering, and don't do their best work. Employees who are in pain, either physical or emotional, don't work at peak levels.

As supervisors, it's our job to get the best work out of our employees, but it's also part of our job to keep them motivated and happy so they'll continue to be contributing members of the company for the long term. To do that we need to know our employees as individuals, and to help them through any personal issues that interfere with their ability to do their best work.

Here are some tips on how to help employees with their personal problems:

Listen:

Sometimes it's enough to just listen to an employee. Be sympathetic and offer kind words of encouragement. However, make sure you know the difference between listening to an employee, and trying to solve his or her problem. Remember, it's up to the employee to solve his or her own problem. You can listen, but you shouldn't try to take charge of getting a solution.

Refer employees to appropriate resources:

As much as you'd like to give personal advice, it's usually a bad idea. It's better to refer employees to professional counselors or clergy, or at least encourage them to talk to understanding and sympathetic family and friends.

If you have personal experience with a similar problem, then you can tell your own story and describe your solution. Just be careful to keep the focus on the employee, remember, it's not about you, it's about them. Don't try to solve the employee's problem yourself, or try to force your own solution on the employee, just try to guide them toward finding their own personal solution.

Accommodate short-term needs:

Be as flexible as you can in making temporary accommodations to help the employee through a crisis, but make sure you communicate that these changes are in fact just temporary. Work out a date when the arrangement will end, or at least a date when you'll get together with the employee to reassess the situation.

Be flexible in working hours or working location:

This is usually one of the easiest accommodations to make. Give short-term time off if it's needed (use vacation or sick time if it's available). If the problem will continue for a while, then maybe work can continue as is but with a revised working schedule (e.g., come in an hour later, but leave an hour later to make up for it). Alternatively, perhaps the employee can work from home on certain days. Offer alternatives to meet the needs of the employee.

Temporarily assign an employee to different work that is better suited for the employee's current state of mind:

This is a more extreme accommodation but it may be required in certain situations. For example, you may temporarily assign a project manager to other work, putting someone else in place as temporary project manager. If an employee travels a lot for the company, you may want to temporarily assign the employee to a job with little or no travel.

Make it clear that these are short-term accommodations:

It's important to make sure the employee understands continuing these accommodations long-term may ultimately result in a change in job title and/or reduction in pay. Don't present this as a threat, just let the employee know that you're willing to let things slide for a while, but ultimately the employee will be expected to deliver the same level of performance as before.

Keep in touch with the employee during the crisis:

Monitor the employee's situation to ensure that he or she is in fact taking steps to resolve the situation. Provide encouragement and positive reinforcement along the way.

When the crisis has passed, refocus the employee on the steps needed for success and career advancement:

Congratulate the employee on making it through a difficult situation. Then provide assistance to help the employee reintegrate and get back the focus that they once had.

CONCLUSION

Every employee is an individual with his or her own personal strengths and issues. You can't expect to take advantage of an employee's strengths without occasionally running up against some of the issues. Management is about achieving business results by using resources effectively, and to do that, you'll need to deal with employee personal problems.

QUIZ

1. Supervisors should treat all employees (Select all that apply)
 - A) Equally
 - B) Fairly
 - C) The same
 - D) As individuals
2. Who is responsible for solving an employee's personal problem?
 - A) The company
 - B) The supervisor
 - C) The EAP
 - D) The employee
3. Supervisors should give personal advice to a troubled employee.
 - A) True
 - B) False
4. Accommodating an employee's short-term needs should include (select all that apply)
 - A) Modifying their work hours
 - B) Changing job assignments
 - C) Establishing a time period for the accommodation
 - D) Reducing their pay
5. The goal of successful supervision is to achieve the best performance possible from an employee.
 - A) True
 - B) False

ABUSE RECOGNITION

This company recognizes that employee involvement with alcohol and other drugs can adversely affect the quality of work and performance of employees, pose serious health risks to users and others, and have a negative impact on productivity and morale.

Because the company understands its employees are a valuable asset, every effort will be made to protect them from the hazards of drug and alcohol abuse by themselves and their co-workers.

In order to create and maintain a safe work environment, supervisors must be trained to recognize the symptoms of abuse, and know the procedures to deal with abuse incidents.

It's important to remember that diagnosing a substance-abuse problem isn't your job. However, remaining alert to changes in employee performance and working to improve employee productivity is a core component of every supervisor's job.

The following steps can help you identify and handle employee performance problems:

Be attentive: The sooner a problem is identified, the sooner it can be corrected, especially when dealing with substance abuse. It's important to remain alert to any job performance problems such as rising accident rates, increased absenteeism or tardiness, decreased productivity, and deteriorating co-worker relationships.

Although these problems can arise for many reasons, including a variety of personal problems, they may also be signs of substance abuse. Don't make assumptions about the reason for a problem; your job is to be aware of problems on the job, make sure tasks are completed, deadlines are met, and things are running smoothly.

Observe: If you see changes in an employee's work patterns or performance, watch more closely. For example: you know an employee is making a habit of arriving late, calling in sick a lot, or having mood swings. Has there also been a drop in productivity or an increase in accidents? Remember, it's not your job to figure out the cause of the problem. Your job is to observe employee behavior and determine the effects of those behaviors on job performance.

Changes in behavior may be related to substance abuse; they also may be the result of something else, such as a medical problem like diabetes or high blood pressure. Slurred speech or dizzy spells can be a sign of someone who is under the influence of some substance, in need of insulin, or has had a stroke.

Document: Job performance problems and other work-related conduct needs to be documented. The documentation should include the names of persons involved, the time, the date, what occurred, the names of witnesses, and what actions were taken. It should focus on job performance and should not include your opinions.

The following tables identify the performance and behavior signs, and physical symptoms commonly associated with individuals who abuse alcohol and/or other drugs. By familiarizing yourself with this information, you may be able to recognize possible abusers on the job, and prevent potential accidents or injuries.

Behavior Signs Commonly Associated With Substance Abuse

PHASE ONE			
Disease Progression	Impact	Visible Signs	
Uses to relieve tension Tolerance increases Memory black-outs Lies about use	Performance drops to 90% efficiency Criticism from boss Performance drops off more to 75% efficiency	Job Performance: Makes more mistakes Misses deadlines Attendance: Late/absent	General Behavior: Co-workers complain Overreacts to criticism Complains about being ill Lies
PHASE TWO			
Disease Progression	Impact	Visible Signs	
Sneaks use Guilty about use Tremors Depression Loss of interest in normal activities	Loss of job advancement Warnings from boss Family problems Financial problems Wage garnishment	Job Performance: Sporadic work pace Difficulty concentrating Attendance: More days off for vague reasons	General Behavior: Undependable Avoids associates Exaggerates Unreasonable resentments
PHASE THREE			
Disease Progression	Impact	Visible Signs	
Avoids discussion of problem Attempts to control use fail Neglects food Isolates self from others	Disciplinary action Trouble with the law Efficiency to 30% Serious family problems	Job Performance: Far below expectations Attendance: Frequent time off Doesn't return after lunch	General Behavior: Aggressive; belligerent Domestic problems interfere Loss of ethical values Won't talk about problem
PHASE FOUR			
Disease Progression	Impact	Visible Signs	
Believes that other activities interfere with use Blames people, places, and things for problems	Final warnings at work Termination Serious financial problems	Job Performance: Formal discipline No improvement Attendance: Prolonged unpredictable absences	General Behavior: Uses on the job Physical deterioration

Physical Symptoms Commonly Associated With Substance Abuse

	Alcohol	Tobacco	Marijuana	Inhalants	Stimulants	Depressants	Hallucinogens	Narcotics	PCP
Duration of Symptoms	App. 1 hour per each serving	20 minutes	2 to 4 hours	5 minutes to 8 hours	5 minutes to 12 hours	1 to 16 hours	5 minutes to 12 hours	4 to 24 hours	4 to 6 hours
Detectible by Drug Test	12 hours	17 hours	1 to 10 days	Not detectable	4 hours to 2 days	2 hours to 2 days	2 hours to 2 days	2 hours to 2 days	4 hours to 7 days
Pupil Size	Normal	Normal	Dilated*	Normal	Dilated	Normal	Dilated	Constricted	Normal
Lack of Convergence	Normal	Normal	Present	Present	Normal	Present	Normal	Normal	Present
Temperature	Normal	Normal	Normal	Varies	Higher	Normal	Higher	Lower	Higher
Pulse Rate	Higher	Higher	Higher	Higher	Higher	Lower	Higher	Lower	Higher
Blood Pressure	Higher	Higher	Higher	Higher	Higher	Lower	Higher	Lower	Higher
Time Estimation	Normal	Normal	Slower	Faster	Faster	Slower	Slower	Slower	Faster
Other Symptoms	Odor on breath Slurred speech Lack of coordination	Odor on breath or clothes Stained fingers or teeth	Red eyes Odor on breath or clothes Eyelid tremors Muscle tremors Increased appetite	Odor or residue on mouth or clothes Nausea Headache Disoriented	Jittery Talkative Runny nose or dry mouth	Disoriented Drowsy Uncoordinated Slow, slurred speech	Spacey Hallucinations Paranoia Memory loss Uncoordinated	Sleepiness Droopy eyelids Soft, low voice Euphoria	Confused Aggressive Sweaty Repetitive

It's important to remember that if an employee displays these symptoms, it doesn't necessarily mean he or she has a substance-abuse problem. When an employee's performance deteriorates, supervisors have an obligation to intervene. You don't need to be an expert on alcohol and drug abuse to do so. The intervention should be focused on the employee's performance problem.

ENABLING AND SUPERVISOR TRAPS

Enabling is actions you or coworkers take to protect an employee from the consequences of his/her behavior and actually helps them to NOT deal with the problem.

Examples of Enabling:

- **Covering Up:** Providing alibis, making excuses or even doing an impaired worker's work rather than confronting the issue that he/she is not meeting his/her expectations
- **Rationalizing:** Developing reasons why the person's continued substance abuse or behavior is understandable or acceptable
- **Withdrawing/Avoiding:** Avoiding contact with the person having the problem
- **Blaming:** Blaming yourself for the person's continued substance abuse or getting angry at the individual for not trying hard enough to control his/her use or to get help
- **Controlling:** Trying to take responsibility for the person by throwing out his/her drugs, cutting off the supply, or trying to minimize the impact by moving him/her to a less important job
- **Threatening:** Saying you'll take action (ceasing to cover up, taking formal disciplinary action) if the employee doesn't control his/her use, but not following through

Examples of Supervisor Traps

Supervisor traps are defensive mechanisms abusers use to avoid the consequences of their actions.

- **Sympathy:** Trying to get you involved in his/her personal problems
- **Excuses:** Having increasingly improbable explanations for everything that happens
- **Apology:** Being very sorry and promising to change (“It won’t happen again”)
- **Diversions:** Trying to get you to talk about other issues in life or in the workplace
- **Innocence:** Claiming he/she isn’t the cause of the problems you observe, but rather the victim
- **Anger:** Showing physically intimidating behavior, blaming others (“It’s your fault”)
- **Pity:** Using emotional blackmail to elicit your sympathy and guilt (“You know what I’m going through!”)
- **Tears:** Falling apart and expressing remorse upon confrontation

CONCLUSION

Remember, when dealing with an employee regarding suspected substance abuse, a supervisor should call in another supervisor or manager who can act as a reliable witness and always document the incident.

QUIZ

1. What steps should be taken to identify an employee's performance problem (select all that apply)
 - A) Be attentive
 - B) Observe
 - C) Document
 - D) All of the above
2. Doing part of a co-workers job because they're "going through a rough time" is called:
 - A) Being a friend
 - B) Being co-dependent
 - C) Enabling
 - D) Avoidance
3. If you see an employee who appears to be under the influence of drugs or alcohol, you should:
 - A) Ignore it
 - B) Avoid being around them
 - C) Terminate them
 - D) Document the incident
4. Which is NOT a symptom of stimulant abuse?
 - A) Nervous energy
 - B) Talkativeness
 - C) Loss of coordination
 - D) Dry mouth
5. Possible signs of substance abuse can also be caused by medical problems.
 - A) True
 - B) False

CRISIS SITUATIONS

Being familiar with the company's DFWP and being able to explain it is only part of the supervisors DFWP responsibilities. If a supervisor suspects a possible drug or alcohol problem, they need to investigate.

All supervisors should be prepared to deal with a crisis. When the situation involves alcohol and drugs, it's important to remember that an impaired person is not a rational one. Some crises that supervisors may have to face include:

- Violent, unpredictable behavior
- Threatening words and actions
- Illegal activity

HANDLING A CRISIS

Having a drug-free workplace program in place is the best line of defense against alcohol or drug related problems in your workplace.

Situations involving alcohol and other drugs can be difficult to manage, and it's important to proceed with caution and to document any actions you take.

For example, suppose a supervisor comes upon an employee who is disoriented and smells of alcohol. The following are some steps that the supervisor can take:

- Escort the employee to a private area to inquire about the behavior
- If possible, call in another supervisor or manager who can serve as a reliable witness
- Inform the employee of your concerns and get his or her explanation
- Notify senior management

Based upon the employee's response, it may be necessary to suspend the employee until a formal investigation takes place; and arrange for the employee to be escorted home.

Remember, if the employee is in no shape to work, he/she is in no shape to drive.

To investigate a potential drug/alcohol crisis, the supervisor should answer the following questions:

- What exactly do you see?
- Does there appear to be illegal activity, policy violations, or very unusual behavior taking place?
- Does the activity involve a group of people or a single employee?
- Are you the direct supervisor to anyone involved in the incident?
- Are reliable witnesses available?
- Is any physical danger involved in taking action or not taking action?
- Are there existing policies that apply to the situation?
- Does the situation require expert consultation from human resources, security, or law enforcement?
- Have you documented what you see and what you have done in response?

SECTION FIVE – TRAINING

In order to protect other employees, if there is possibility of a situation becoming violent, all necessary measures must be taken to remove the problem employee from the scene. This may require the assistance of security and/or local law enforcement.

If an employee is observed illegally, distributing, possessing, selling, transporting, or manufacturing controlled and dangerous substances on company property, local law enforcement should be contacted for assistance.

These situations usually result in a uniformed officer responding to conduct an investigation, make an arrest (if appropriate), and prepare a report. Due to the limited resources of most local law enforcement agencies, they may not have the resources to conduct lengthy undercover investigations. If such a response is necessary, the company has the option of contracting the services of a private security investigator.

Enforcement strategies should be well thought out and planned. Consistent, detailed documentation must be maintained in the event that criminal prosecution results from workplace behavior.

If substance abuse is contributing to an employee's poor performance, ignoring or avoiding the issue won't help the situation. When an employee's performance deteriorates for whatever reason, you as supervisor have an obligation to intervene. You don't need to be an expert on alcohol and drug abuse to do so. The intervention should be focused on the employee's performance problem.

QUIZ

1. Which of the following is NOT considered a crisis situation?
 - A) Violent, unpredictable behavior
 - B) Threatening words and actions
 - C) Maintaining confidentiality
 - D) Illegal activity
2. As a supervisor, it's not your job to determine whether alcohol or drug use is part of an employee's poor performance.
 - A) True
 - B) False
3. When holding an intervention meeting with an employee, which of these items should NOT be done?
 - A) Discuss alcohol and drug use.
 - B) Use a formal yet considerate attitude.
 - C) Prepare what you're going to say ahead of time
 - D) State your expectations for improved performance and/or conduct
4. Local law enforcement should be contacted if an employee is observed distributing, possessing, selling, transporting, or manufacturing illegal substances on company property.
 - A) True
 - B) False
5. In a potentially violent crisis, the problem employee should be removed from the scene.
 - A) True
 - B) False

INTERVENTION & CONFRONTATION

Most supervisors know not to involve themselves in the personal lives of employees, but since personal problems can affect all aspects of an employee's life, they can't park their problems at the door. As a result, their problems accompany them into the workplace.

When this happens and it affects job performance, it becomes a supervisory concern. Employees whose performance fails to meet expectations may have a serious personal problem that's impairing their performance. Perhaps it's a marital problem or financial trouble, or it could be signs of a developing alcohol or drug problem.

If substance abuse is contributing to an employee's poor performance, ignoring or avoiding the issue won't help the situation. When an employee's performance deteriorates for whatever reason, you as supervisor have an obligation to intervene. The intervention should be focused on the employee's performance problem.

Supervisors usually go through several phases when faced with an employee whose performance is declining as described below.

- **Uncertainty and denial:** The employee may give excuses to explain away the problems, such as sick kids, family emergencies, and car trouble. You have the natural and hopeful feeling that things will probably straighten themselves out. You may even have a "heart-to-heart" discussion with the employee at this point.
- **Anger, frustration, and exasperation:** As the problems continue or get worse, you move into the next phase, characterized by anger, frustration, and exasperation. There are broken promises from the employee, and you're finding it takes more time to double check and monitor the employee's performance. You begin to suspect that the employee is lying and just giving more excuses.
- **Self-doubt and guilt:** Next, you may go through a phase when you question your ability as a supervisor. You may experience some guilt about bending the rules for the employee or because you finally blew up at the employee.
- **Recognition:** This is when you recognize that normal efforts aren't correcting the problem or motivating the employee. Hopefully, this recognition leads to documentation, constructive confrontation and a referral to the EAP or other assistance.

When you've determined there are job performance problems and decided to address these with the employee, these are the steps you should take:

- Document the performance problem
- Get yourself ready
- Set the stage
- Use constructive confrontation
- Refer for assistance
- Follow up on progress towards meeting performance goals

Document the Problem

Discuss the matter with your supervisor and/or a Human Resources representative, always respecting privacy issues. If applicable, confer with the Employee Assistance Program (EAP) Administrator about the problem. Prepare what you're going to say in advance and make notes. Arrange to discuss the performance problem with the employee immediately, before it becomes more serious.

Documentation will clarify the situation, and help you communicate specifics to the employee. It also provides you legal protection. Supervisors should keep records of poor work performance incidents, including times and dates, attendance and/or attitude issues, problems with coworkers and any accidents or near misses.

It's important to remember that you're looking for trends or patterns, not individual occurrences. Anyone can have a bad day.

Use the following intervention principles when preparing to confront a staff member.

Get Yourself Ready

When you have observed and documented deteriorating job performance or work patterns, you may have several options:

- Discuss the matter with your immediate supervisor and/or the Human Resources (HR) representative
- Discuss performance difficulties with the individual employee before the problems become more serious. This discussion with the employee is called constructive confrontation
- Consult with someone who can give you professional guidance (HR or EAP if available). It's important to know what you are going to say
- Write notes that will help during your meeting with the employee. You don't need to follow these notes exactly, but they'll help you stay on track when talking to the employee

If EAP services are not available, it may be useful to consult with a community mental health professional or addiction treatment center. This may help you prepare for confronting an employee who's having performance problems. However, it is important to note that these professionals may not fully understand the limits of your workplace and the importance of keeping interventions focused on job performance matters only.

Set the Stage

- Hold any meeting with the employee in a private place where interruptions will be limited
- Identify the best time of day considering workload and the employee's behavior
- Allow sufficient time for the meeting and set a time limit
- Make an appointment with the employee to discuss the issues
- Allow for union representation, if appropriate

Constructive Confrontation

When using constructive confrontation, keep in mind that your primary objective, as a supervisor, is not to determine the employee's underlying problem. Your objective is to advise the employee of the specifics of his or her poor performance and to come to an agreement on the method for improvement.

DO:

Prepare what you're going to say ahead of time

Have a plan and stick to it. Say what you have to say directly and clearly

Find a place to meet that is private. What's said in the meeting must be kept confidential

Focus on job performance and conduct—not on suspected alcohol or other drug abuse, mental illness, or any other potential reason for performance problems

Treat all employees the same. Don't let age, seniority, friendship, or sympathy affect your evaluation or allow you to make exceptions for some employees and not others

Use a formal yet considerate attitude. If the interview becomes too casual, it will lessen the impact of your message

Emphasize that you're only concerned with work performance or conduct

Have written documentation of the job performance and/or conduct problems (late reports, absences, lower productivity, accidents, trouble with coworkers) in front of you when you talk with the employee

Remember that many problems get worse without assistance

State your expectations for improved performance and/or conduct and what will happen if the expectations aren't met within a specific period. Offer suggestions for improving performance and/or conduct

Offer available resources (EAP, hotlines, etc.) to help employees get back on track if they say they're having personal problems. Don't try to counsel the employee

If necessary, arrange for a second meeting to evaluate progress or to discuss disciplinary actions

DON'T:

Try to diagnose the cause of the employee's job performance or conduct problem.

Moralize or judge the employee. Limit comments to job performance and conduct issues only.

Discuss alcohol and drug use. Stick strictly to the topic of performance.

Be misled by sympathy-evoking tactics.

Cover up or accept repeated unlikely excuses. If you protect people, it enables them.

Threaten discipline unless you're willing and able to carry it out.

Be distracted by tears, anger, or other outbursts. (Stay focused on job performance and conduct.)

Back down. (Get a commitment for improved job performance and conduct.)

Argue with an employee. If the employee becomes resistant, reschedule the meeting instead.

Possible Meeting Outcomes

- Referring the employee to the EAP
- Placing the employee on suspension pending an investigation
- Providing for the employee to be escorted home
- Escorting the employee to a laboratory for analysis
- Calling local law enforcement if the situation is dangerous or illegal activity (such as distribution, possession, sale, or transportation of illegal substances) has been witnessed

Disciplinary Actions

- Verbal warning
- Written warning (Corrective Action Plan)
- Suspension
- Termination

Assistance

Employee Assistance Programs are company resources established for the identification, motivation, and treatment of substance abusing and other troubled employees.

EAP's use the Job Performance Standard to identify which employees with alcohol and other personal problems. This standard is based on the principle that employers have the right to intervene in an employee's personal life only when job performance is adversely affected.

If you decide an employee is in need of help, there are two options: recommendation or requirement. If an employee acknowledges that there is a problem, as a supervisor, you can encourage the employee to seek help from either the company's HR department or EAP program, if available, or refer them to a local assistance organization.

If the employee's situation has reached a level where workplace safety and/or the employee's well-being are at risk, it may be necessary to formally require the employee to participate in a treatment program. It's critical to discuss this decision with the HR department to determine if it's warranted and the steps that are required, before taking this action.

CONCLUSION

Be supportive, but avoid emotional involvement—offer help in resolving performance problems and identify resources for help in addressing personal problems. Advise the employee that it's his/her responsibility to consider whether or not his/her poor performance is caused by an underlying personal problem.

If your job consisted of managing machines, life would be simple. Supervising people can be far more difficult. When employee performance problems occur, communication skills and training are crucial to resolving issues. Like machines, people can be repaired, the difference is; it's more difficult than replacing a worn-out part.

QUIZ

1. The Job Performance Standard is based on the principle that employers have the right to intervene in an employee's personal life only when job performance is adversely affected.
 - A) True
 - B) False
2. Which of the following are constructive confrontation techniques you should use when meeting with a troubled employee (select all that apply)?
 - A) Prepare what you're going to say ahead of time
 - B) State your expectations for improved performance and/or conduct
 - C) Try to diagnose the cause of the employee's job performance or conduct problem.
 - D) Counsel the employee
3. Which of the following is NOT a step in addressing an employee's performance problem?
 - A) Document the performance problem
 - B) Use constructive confrontation
 - C) Threaten discipline
 - D) Follow up on progress towards meeting performance goals
4. When using constructive confrontation, your primary objective is to advise the employee of the specifics of his or her poor performance and agree on the method for improvement.
 - A) True
 - B) False
5. If appropriate, union representation should be present at any intervention meetings with an employee.
 - A) True
 - B) False

ABUSE TREATMENT

Although not everyone who uses alcohol or other drugs becomes addicted, it's impossible to determine who will and who won't. Alcohol and other drugs can affect any of us, in all economic groups, at any age, and in all types of jobs.

In addition to enforcing the company's DFWP, supervisors need to know how to recognize potential problems, how to handle them, and the procedures to address them.

Knowing the proper methods of dealing with an employee substance abuse issue includes:

- Fairness
- Confidentiality
- Documentation
- Resolution

A supervisor must ensure all reports and suspicions of drug or alcohol abuse in the workplace are investigated carefully. Before addressing a possible situation with an employee, a supervisor must obtain verifiable evidence and document the incident fully. Never make assumptions or rely on hearsay information. All employees must be treated fairly and given an opportunity to explain any concerns that have been raised.

When you feel there is enough evidence to warrant additional action, you need to take the following steps:

- Meet with the employee privately. This should be done in the presence of another supervisor, DFWP administrator, or HR representative.
- Present the documented information and give the employee an opportunity to respond
- Take notes of the meeting and make sure the information given by the employee is captured accurately.
- If it's determined that drug testing is warranted, the process must be explained to the employee, and the necessary testing personnel notified.

The DFWP director and/or an HR representative should oversee the testing process. Your job as a supervisor is to identify the problem, and remove this potentially hazardous situation from the workplace.

If there is any follow up action required, such as suspensions or treatment referral the DFWP administrator, EAP representative, or HR representative should keep you informed of the employees status, the expected outcome, and the timeline for resolution.

If an employee is entered into an assistance program, work schedule accommodations and return to work arrangements must be made. These should be discussed with the appropriate management personnel.

Supervisors should meet with employees returning from a leave of absence, to discuss work schedules and performance expectations. Accommodations must be made if the employee requires time off for follow up care. Make sure DFWP, EAP, and/or HR representative are included in this meeting. Remember, as a supervisor you are instrumental in the successful return and reintegration of the employee to the workplace.

QUIZ

1. It's important to get the opinion of another supervisor if you suspect possible substance abuse.
 - A) True
 - B) False
2. Reports of an employee's substance should be based on (select all that apply)
 - A) Rumor
 - B) Assumption
 - C) Observation
 - D) Association
3. When meeting with an employee to discuss a performance problem, at least one of the following persons should be present (Select all that apply)
 - A) HR representative
 - B) Coworker
 - C) Another supervisor
 - D) None of the above
4. It's a supervisors responsibility to identify the following (Select all that apply)
 - A) Alcohol abuse
 - B) Drug abuse
 - C) Performance problems
 - D) Stress
5. Thorough documentation is essential when addressing and employee's performance problem.
 - A) True
 - B) False

EMPLOYEE ASSISTANCE

Employee assistance programs (EAP) are methods the company may provide to help employees deal with abuse or other personal issues. The company's DFWP should define the type of EAP offered. This can range from referring employees to established treatment programs for drug and alcohol problems or other personal issues, to a company operated assistance program.

Know your EAP

It's important for supervisors to be familiar with the services the company's EAP offers and know the procedures allowing employees to take advantage of them. Recognizing an employee's performance problems is only the first step, supervisors need to know the process for connecting an employee with an assistance program, whether it's company directed, or an employee self-referral. Professionalism and confidentiality are essential in encouraging and supporting the employees' commitment to getting help.

If your company conducts drug testing and someone tests positive, they can be required to attend an abuse treatment program. This is an effort by the company get an employee help, and keep a valued worker.

Depending on the type of EAP the company offers, and the services provided there may be out-of-pocket costs involved. While some services may be available free of charge, others may be handled through your insurance by deductible or co-pay. Make sure to review the EAP program details and understand your coverage. If you have questions, ask your HR counselor or EAP representative for specifics.

The company EAP may offer assistance programs beyond drug and alcohol treatment such as financial planning, legal aid, fitness, family services, health, and weight management. Supervisors should know the services available and keep the necessary information handy.

It's important to know that an EAP provider is NOT a drug testing facility.

The EAP is responsible for providing counseling and assistance to employees who self-refer for treatment or whose drug tests have been verified positive and were not terminated.

An assistance program may include:

- Monitoring an employee's progress through treatment and rehabilitation
- Providing education and training to all levels of the company on types and effects of drugs, symptoms of drug use, and their impact on performance and conduct
- Explaining the relationship of the EAP to drug testing, treatment, rehabilitation, and confidentiality issues
- Ensuring the confidentiality of test results, medical, and rehabilitation records is maintained

The goal of an EAP is to assist employees who have personal problems affecting their job performance. An EAP reinforces three important ideas:

- Employees are a vital part of business and valuable members of the team
- It's better to offer employees facing personal problems assistance, instead of disciplining or firing them
- Recovering employees become productive, effective members of the workforce

EAP providers are often outside companies that offer counseling and assistance services to employees. It's important to know the type of assistance offered by your company.

Assistance programs can be separated into three basic categories:

Level One – Referral Only

These are basic programs providing employees with referrals to community resources, self-help options, and substance abuse treatment providers.

Level Two – Contract

This type of EAP involves contracting with an outside EAP provider, and uses a direct referral process.

Level Three – In House

Programs in this category offer the highest support to employees, and usually include services beyond drug and alcohol assistance as well as increased health-care coverage.

The company should provide you with information about the assistance program. It should explain:

Who is eligible for the program and what costs or insurance coverage is available

What services are available from the EAP? This can extend beyond drug and alcohol treatment and may include:

- Stress Management - Stress caused by work pressures, family or financial problems can affect your performance on the job and lead to substance abuse. Addressing these issues can prevent problems from worsening
- How certain drugs and alcohol can lower inhibitions and cause someone's dietary and exercise plans to run off the track and result in health problems

Employee Specific Assistance

The EAP may also provide health-related topics specifically for the workforce these may include:

- Age and gender programs
- Information on osteoporosis, and the increased risk due to substance abuse in middle-aged women
- The effects alcohol can have on the liver and colon and risks of prostate cancer in middle-aged men
- Information for younger workers on the increased risks of STD's, HIV, and aids due to drug and alcohol use

Company EAP

If your company operates or participates in an EAP, work with the representative. If an employee's performance is continuing to slide even though he or she has the equipment, materials and training to do the job, it's a good idea to refer him/her to the EAP. You need to focus on the performance problem. As a supervisor, it's not your job to determine whether alcohol or drug use is part of the cause.

When faced with an employee whose performance is declining, the EAP administrator will review the issues with you, discuss how you have already attempted to correct the problem and coach you through a referral based on declining job performance.

When referring an employee to the EAP, emphasize the confidential nature of the program. Be clear about your expectations of the employee's performance and his or her participation in the program. Also, assure the employee that you're not assuming there is any kind of problem. Acknowledge that personal issues sometimes cause performance problems, and it's the employee's responsibility to consider whether this is the case with him/her.

It's the employee's choice to follow through with an EAP referral, unless the employee is referred in lieu of termination. Most EAP participation is voluntary, and follow-through with a supervisory referral based on job performance indicates that the employee is concerned about the warning. A failure to follow through with the EAP should not be used as a basis for disciplinary action. Rather, any discipline should be the result of continued job performance problems.

When an employee follows through with a supervisory referral, the employee assistance professional will meet with the employee and assess the problem. The EAP will help the employee clarify the problem, direct him or her to appropriate resources, and follow his/her progress. The EAP policy should outline what information you are able to receive. Usually, you will be told whether the employee is working with the EAP, but you will not be informed as to the exact nature of the problem.

The employee's participation in the EAP in no way limits your ability to continue to monitor the employee's performance and apply progressive discipline as needed. In fact, the combination of progressive discipline with assistance works best. It is your responsibility to continue to monitor job performance and notify the EAP if there is again a decline in performance.

There are times when the employee will refuse the referral to the EAP or fail to accept the EAP representative's recommendations. It's important that you make it clear to the employee that you will proceed with standard corrective actions based on your company's policy if his or her performance does not improve.

The Americans with Disabilities Act, the Rehabilitation Act of 1973, and the Family and Medical Leave Act may dictate how you can respond to an impaired employee. It's important that you consult with your manager and the EAP mediator regarding these laws when determining your organization's policies.

No Company EAP

Companies without either a contract or in-house EAP aren't able to make formal or mandatory referrals unless there is an agreement with the company's insurance provider, or with a union. In the absence of a formal EAP, it is a good idea for an employer to maintain a list of therapists and treatment facilities that specialize in the treatment of alcoholism and drug addiction.

Supervisors should tell an employee that if they believe there's an underlying problem, help may be available. Supervisors should also emphasize that the employee's decision whether or not to seek help is a private one and it won't be made public.

QUIZ

1. The primary function of an EAP is to conduct drug testing.
 - A) True
 - B) False
2. An EAP may provide health-related topics specifically for the workforce.
 - A) True
 - B) False
3. What types of EAP are companies are required to offer?
 - A) Referral only
 - B) Contract
 - C) In-house
 - D) None of the above
4. An employees' failure to follow through with the company's EAP can be used as a basis for disciplinary action.
 - A) True
 - B) False
5. The services provided by an EAP may be (Select all that apply):
 - A) Provided free of charge
 - B) Available through the company's' insurance by deductible or co-pay
 - C) Paid for by the employee
 - D) All of the above

REFERRAL

When you've reached a decision to refer an employee to an assistance program, it's important to manage the situation. What you'll need to do depends on the resources and options you have available.

Once you've met with an employee, addressed the problem, and recommended they seek assistance, it's up to the employee to determine their next step. Assuming participation in a substance abuse program isn't mandatory, workers can choose to deal with the situation by themselves. If this occurs, make sure they understand the expectations about their performance, and understand his or her job performance will continue to be monitored and progressive discipline applied as needed.

Guidelines for making a referral, depending on the size and professional skills of your organization, should include the following:

- Assistance should be selected based on established effectiveness
- The referral should consider the particular employee's health insurance coverage
- The referral should be consistent with the employee's job demands and career goals
- Someone in management (e.g., an HR professional) should be directly involved in the process, monitoring compliance
- This same person should participate in easing the employee back into the workplace, involving the supervisor as appropriate
- The company should continue to be supportive of employees who have been referred for assistance because of problems related to alcohol or other drugs

Voluntary or Self-referral

Most employees seek assistance from the EAP on their own, for help with personal or family issues, work issues, and other concerns. This is called a *voluntary* or *self-referral*. Employees may contact the program at any time. You can encourage employees to seek help from the EAP by providing them with the program telephone number and contact information. Remind employees that the EAP is free and confidential.

Informal referral

An informal referral to the EAP may be used in cases involving work performance issues. Often, performance problems are the result of personal issues outside of work. With this type of referral, a manager or supervisor identifies the performance issue and reminds the employee that the EAP is available as a resource to help with personal issues that may be affecting performance.

Formal Referral

In some cases, managers formally refer employees to the EAP. A formal referral is used in cases where the employee's job may be in jeopardy because of a performance issue, attendance issue, or behavior issue at work. The manager documents that he or she referred the employee to the EAP.

One approach to referral is to say: "This isn't the first time that we have talked about these issues. Whatever you have been trying isn't working. I am going to formally refer you to the EAP to give you a chance to get some assistance. What you discuss with the EAP will be confidential. It is important to me that you realize that this is a serious issue so I will just be told whether or not you have followed through with the referral."

STEPS TO TAKE WHEN MAKING A FORMAL REFERRAL

When making a formal referral, supervisors should contact their HR representative to learn about your organization's policies and procedures. This is especially important if you're handling a difficult workplace issue.

If the company's EAP is a contract or in-house program, you should contact the program administrator before making a formal referral. Be sure to do this before you sit down to meet with the employee. That way, the administrator knows what your concerns are about the employee and is better able to offer help when the employee calls.

When making a formal referral to the EAP:

- Schedule a time to meet with the employee in a private place
- Express concern to the employee about continued productivity issues
- Explain that the EAP is available to assist the employee with work-related issues
- Emphasize that the performance issues must be resolved

Mandatory Referrals

If you decide to require that your employee consult with your company's EAP, you are making what is called a mandatory referral. You must document that you referred the employee to the EAP and must follow specific steps both before and after making a mandatory referral to protect yourself and your company from legal action. This type of referral is appropriate only for documented, on-the-job performance issues or violations of company policy; it's not appropriate if you think that an employee is under stress and you decide he needs help.

If EAP services are available:

Work with an EAP representative. If an employee's performance is continuing to slide even though he or she has the equipment, materials and training to do the job, it's a good idea to refer him/her to the EAP. You need to focus on the performance problem. As a supervisor, it's not your job to determine whether alcohol or drug use is part of the cause.

When faced with an employee whose performance is declining, the EAP will review the issues with you, discuss how you have already attempted to correct the problem and coach you through a referral based on declining job performance.

When referring an employee to the EAP, emphasize the confidential nature of the program. Be clear about your expectations of the employee's performance and his or her participation in the program. Also, assure the employee that you're not assuming there is any kind of problem. Acknowledge that personal issues sometimes cause performance problems, and it's the employee's responsibility to consider whether this is the case with him/her.

When an employee follows through with a supervisory referral, the employee assistance professional will meet with the employee and assess the problem. The EAP will help the employee clarify the problem, direct him or her to appropriate resources and follow his/her progress. The EAP policy should outline what information you are able to receive. Usually, you'll be told that the employee is working with the EAP, but you won't be told the exact nature of the problem.

The employee's participation in the EAP in no way limits your ability to continue to monitor the employee's performance and apply progressive discipline as needed. In fact, the combination of progressive discipline with assistance works best. It's your responsibility to continue to monitor job performance and notify the EAP if there is again a decline in performance.

There are times when the employee will refuse the referral to the EAP or fail to accept the EAP representative's recommendations. It's important that you make it clear to the employee that you will proceed with standard corrective actions based on your organization's policy their performance doesn't improve.

The Americans with Disabilities Act, the Rehabilitation Act of 1973, and the Family and Medical Leave Act may dictate how you can respond to an impaired employee. It's important that you consult with your manager and the EAP mediator regarding these laws when determining your organization's policies.

If your organization does not have an EAP:

Organizations that don't offer an EAP as part of their drug-free workplace program should still encourage employees to seek assistance. Employers can support employees by allowing a reasonable amount of time off the job to participate in treatment and offering benefit coverage for the treatment of addiction in health care plans.

Company's' without either a contract or in-house EAP aren't able to make formal or mandatory referrals unless there is an agreement with the company's insurance provider, or with a union. In the absence of a formal EAP, it is a good idea for an employer to maintain a list of therapists and treatment facilities that specialize in the treatment of alcoholism and drug addiction.

Supervisors should tell an employee that if they believe there's an underlying problem, and help may be available. Supervisors should also emphasize that the employee's decision whether or not to seek help is a private one and it won't be made public.

CONCLUSION

Whether you are making an informal or a formal referral to the EAP, don't avoid a problem or assume it will go away on its own. The sooner you encourage an employee who needs it to seek help, the better off you will be. The EAP is a valuable resource for addressing personal and work issues that may be affecting individual and group performance.

QUIZ

1. A mandatory EAP referral is an alternative to termination.
 - A) True
 - B) False
2. Which of the following are types of EAP referrals (Select all that apply)
 - A) Voluntary
 - B) Informal
 - C) Formal
 - D) All of the above
3. What type of EAP referral is appropriate if an employee violates company policy?
 - A) Self
 - B) Informal
 - C) Formal
 - D) Mandatory
4. You should always consult an HR representative or EAP administrator before making a formal or mandatory referral.
 - A) True
 - B) False
5. When referring an employee to an EAP, it's important to emphasize the programs: confidentiality.
 - A) True
 - B) False

HANDLING BARRIERS

Confronting an employee about a job performance or conduct problem isn't easy. No one can tell you how an employee will respond. Sometimes an employee may become upset with you, hoping this will make you back down from the confrontation. Being aware of potential barriers is the best way to decrease the chance of a negative reaction. Below are guidelines for how to respond to some of the most common barriers.

EMPLOYEE ACTION	RESPONSE
Denial: The employee denies that problems exist and insists that you or someone else in the company is out to get him or her.	How to Respond: Stay calm. Have the documentation of the employee's job performance and/or conduct handy and keep the conversation focused on performance issues.
Threats: The employee threatens you or the organization. "If you push me, I'll go to an attorney make a scene on the job ... quit here and now ..."	How to Respond: Remind the employee that he or she may do whatever he or she chooses; however, as a supervisor, your responsibility is to uphold the organization's policy and find a solution that will help both the organization and the employee. If you think you're losing your objectivity, or need help to resolve a conflict with a defensive employee, seek the help of another supervisor or manager.
Rationalization: The employee tries to avoid the issue by making excuses. "If this job wasn't so stressful, I wouldn't be making so many mistakes and wouldn't be late so often."	How to Respond: Stay focused on work performance. Don't be distracted by excuses; let the employee know that help is available.
Angry Outburst: The employee becomes angry. He or she may cry, yell, or scream. This emotional outburst is intended to scare off the supervisor and cause him or her to drop the whole affair. In a shouting voice with arms raised, "How dare you accuse me of being late to work and not getting my job done on time!"	How to Respond: Do not react! Wait until the employee has run out of steam and then continue where you left off. Keep the focus on performance issues. If the employee continues, reschedule the meeting.

When dealing with an employees performance problem it's important to:

Be Consistent: Regardless of your personal relationship with an employee, it's important to treat each person the same when addressing job performance and/or conduct problems. This isn't always easy to do. By following your organization's procedures, you avoid playing favorites. This protects you from being accused of discrimination and will help your relationship with the people you supervise.

Maintain Confidentiality: All discussions of an employee's job problems need to be kept private. No one else should be able to hear the conversation. If employees choose to tell coworkers about their private concerns (e.g., results of a drug test), that's their decision. However, when an employee tells you something in confidence, you are obligated to keep it between the two of you.

Be "Up Front:" If your employer requires you to report what will be said, it's important to inform the employee before you begin the meeting. Although not a common problem, you could be sued if you disclose what's said in the meeting without the permission of the employee. Respecting employee confidentiality is critical to developing a trusting relationship.

Follow-up

Taking follow-up action is a key part of your role in your organization's DFWP. Follow-up means that you continue to observe and document the employee's job performance and conduct. If the employee's job performance and/or conduct improve, no further action needs to be taken. If job performance or conduct hasn't improved as agreed, or if the employee refuses to acknowledge or correct his or her behavior, document these events and tell the employee what actions you will take next. Inform the employee that help is available. You may not know if an employee is in treatment for an alcohol or drug problem. However, if an employee tells you that he or she is seeking help, support the recovery process but don't enable.

CONCLUSION

Being in treatment isn't an excuse for poor job performance. Your responsibility is to make sure employees do a good job. Protect yourself and the employee's rights by consistently following your organization's disciplinary procedures if an employee's job performance or conduct does not improve.

QUIZ

1. What are the key elements when dealing with an employee's performance problem (Select all that apply)?
 - A) Be Consistent
 - B) Maintain Confidentiality
 - C) Be Up Front
 - D) Identify the cause of the problem
2. The employee becomes angry during a confrontation; you should (Select all that apply)
 - A) Let the employee vent
 - B) Reschedule the meeting
 - C) Suspend the employee
 - D) All of the above
3. All discussions of an employee's job problems need to be kept private.
 - A) True
 - B) False
4. Being in treatment isn't an excuse for poor job performance.
 - A) True
 - B) False
5. Which of the following are common employee barrier mechanisms (Select all that apply)?
 - A) Denial
 - B) Threats
 - C) Rationalization
 - D) All of the above

SUMMARY

In this program we've provided you with information on:

- The basics of Drug Free Workplace Programs
- Drug testing procedures
- Employee Assistance Programs
- How to recognize the signs and symptoms of drug or alcohol abuse
- How to deal with problem employees and potential crisis situation

You are encouraged to become familiar with your company's DFWP and meet with management, DFWP and/or EAP administrators, and HR personnel to understand their roles in managing the program. These resources can provide you with additional information and answer any questions you may have.

Ensuring a safe workplace is a fundamental OSHA requirement, and the existence of a DFWP is another tool to aid in maintaining that. It's essential that you, as a supervisor, fully understand

- The company's program
- The employees' rights
- Your responsibilities and authorities
- The programs procedures and options

No matter how well intentioned, a DFWP that's poorly designed or implemented is destined for problems. Employees must understand the policies and goals of the program, and supervisors must ensure fair and equal enforcement of it.

FINAL EXAM

1. A DFWP is required for all employers.
 - A) True
 - B) False
2. Implementing a DFWP is part of the Occupational Safety and Health Act.
 - A) True
 - B) False
3. A second testing of a drug test sample following a positive result is called a:
 - A) Second chance
 - B) Split test
 - C) Confirmation test
 - D) Chain of command
4. An employee who refuses to take a drug test will be subject to the same consequences as a positive test
 - A) True
 - B) False
5. Which of the following reasons is given for employees avoiding getting help through work-related services
 - A) Denial
 - B) Cost
 - C) Time
 - D) Inconvenience
6. A Physician responsible for examining drug test results is called an:
 - A) EAP provider
 - B) Medical Review Officer
 - C) DFWP director
 - D) None of the above
7. A DFWP requires employees to receive ____ hours of substance training per year.
 - A) 1
 - B) 2
 - C) 4
 - D) 6

SECTION FIVE – TRAINING

8. Which of the following would not be considered a safety or security sensitive position?
- A) Someone who is authorized to make legally binding contracts or commitments for the company
 - B) An employee having access to classified company information
 - C) Employees responsible for public safety
 - D) An employee responsible for building maintenance
9. Which substance listed in not part of the SAMHSA 5?
- A) Cocaine
 - B) Marijuana
 - C) PCP
 - D) Alcohol
10. A DFWP program is required to include a return to work agreement for employees who test positive for substance abuse.
- A) True
 - B) False
11. What organization does NOT require companies to have a DFWP?
- A) DOT
 - B) NRC
 - C) OSHA
 - D) PHMSA
12. Specific jobs that are subject to DFWP requirements are called covered positions.
- A) True
 - B) False