

TO: James L. App, City Manager

FROM: Jim Throop, Director of Administrative Services

SUBJECT: Federal Transportation Administration Review Compliance - Adoption of Updated Drug and Alcohol Testing Policy.

DATE: November 2, 2010

NEEDS: For the City Council to consider approval of an updated Drug & Alcohol Testing Program.

FACTS:

1. The City currently receives approximately \$250,000 annually in 5307 funds from the Federal Transportation Administration. These funds are used for transit operating expenses, including fuel, maintenance of buses and bus stops, marketing, and the contract with the Transit provider.
2. Federal Transportation Administration (FTA) auditors conducted a Triennial review of the City's transit operations 5307 funds in July 2010.
3. The FTA auditors determined the City was not compliant in its Drug & Alcohol Testing Policy and reported the finding and corrective action in their August 2010 report.
4. The report detailed the corrective action to be taken by the City and the timeframe to complete the action in order to remain in good standing to receive 5307 funds.
5. The audit report requires the City to update its Drug and Alcohol Testing Policy in a manner that would comply with current Federal regulations.
6. The State Department of Transportation (DOT) published a final ruling, effective October 1, 2010, that affects the list of required substances and protocols for testing. The City's updated policy must also comply with State DOT regulations currently in effect.
7. The corrections to the drug & alcohol policy do not contain material changes from what the City already practices, except in the inclusion of additional specific federal laws and standards implemented since the Drug and Alcohol Testing Policy was last adopted (summary of changes in Attachment C).
8. The City is required under State law to meet and confer with its labor groups when considering programs or policies that may affect an employee's terms and conditions of employment. The modifications of the Drug & Alcohol Testing

Policy have been shared with SEIU labor group representative, as required, and no issues have been raised for implementation of the policy/program.

ANALYSIS &
CONCLUSION:

The FTA auditors conducted the triennial review of the City's transit operations of 5307 funds. It was determined the City was not in compliance with its Drug & Alcohol Testing Policy and the City must take corrective actions to remedy this deficiency.

Adoption of the attached City Council resolution would enact the aforementioned policy. Adoption of this policy change will assure compliance with the FTA audit findings and constitute the appropriate corrective action within the auditor's prescribed time frame. As such, the 5307 funding that the City receives annually from the FTA will still be available to fund City transit operations.

FISCAL
IMPACT:

No action, or failure to comply with the FTA review, would result in the loss of FTA 5307 funding (approximately \$260,000 annually) used to supplement the City's transit operations.

OPTIONS:

- a. Adopt Resolution No. 10-xxx approving the City's updated Drug & Alcohol Testing Policy; or
- b. Amend, modify or reject above option.

Attachments:

1. Resolution No. 10-XXX approving updates to the City's Drug and Alcohol Testing Policy
2. Updated Drug and Alcohol Testing Program

RESOLUTION NO. 10 - XXX

**A RESOLUTION OF THE CITY COUNCIL
OF THE CITY OF EL PASO DE ROBLES
APPROVING THE UPDATES TO THE CITY DRUG AND ALCOHOL TESTING
PROGRAM POLICIES FOR FEDERAL TRANSIT ADMINISTRATION REVIEW
COMPLIANCE**

WHEREAS, the Federal Transportation Administration (FTA) auditors conducted a Triennial review of the City's transit operations 5307 funds in July 2010; and

WHEREAS, the FTA auditors determined the City was not compliant in its Drug & Alcohol Testing Policy and reported the finding and corrective action in their August 2010 report; and

WHEREAS, the report detailed the corrective actions to be taken by the City and the timeframe to complete the actions in order to remain in good standing to receive 5307 funds; and

WHEREAS, the audit report requires the City to update its Drug and Alcohol Testing Policy in a manner that would comply with current Federal regulations; and

WHEREAS, the State Department of Transportation (DOT) published a final ruling, effective October 1, 2010, that affects the list of required substances and protocols for testing, and the City's updated policy must comply with State DOT regulations currently in effect; and

WHEREAS, the City has, as required under State law, met and conferred with its labor groups regarding the introduction of the updated Drug and Alcohol Testing Policy.

THEREFORE BE IT HEREBY RESOLVED that the City Council of the City of El Paso de Robles approves the updated Drug and Alcohol Testing program for transit support workers and any other employee who operates a non-revenue service vehicle when required to hold a Commercial Drivers License (CDL), attached herewith as exhibit "A".

PASSED AND ADOPTED by the City Council of the City of Paso Robles this 2nd day of November, 2010 by the following vote:

AYES:

NOES:

ABSTAIN:

ABSENT:

ATTEST:

Duane Picanco, Mayor

Caryn Jackson, Deputy City Clerk

Attachment C

Summary of Changes to the Drug and Alcohol Testing Policy

- **Section 6.4 Compliance with Testing Requirements**

In the existing policy this section lists separately what constitutes refusal to take a drug test and what constitutes refusal to take an alcohol test. The revised policy combines into one list what constitutes refusal to take a drug and alcohol test and provides an expanded description of the behavior and circumstances that constitute a refusal to take a drug and/or alcohol test.

- **Section 6.5 Dilute Test Results**

This section is new.

- **Section 6.6 Cancelled Tests**

This section is new.

- **Section 7.0 Testing for Prohibited Substances**

Added the drug MDMA (aka ecstasy).

- **Appendix B – Glossary of Terms**

Adulterated Specimen – modified
Confirmatory Drug Test – modified
Initial Drug Test – modified
Initial Validity Test – removed
Initial Specimen Validity Test – added
Invalid Drug Test – modified
Laboratory – modified
Limit of Detection (LOD) – added
Limit of Quantitation – added
Negative Result – added
Positive Result – added
Reconfirmed – added
Rejected for Testing – added
Split Specimen Collection – added

- **Appendix C – Minimum Threshold Levels**

Existing

Type of Drug or Metabolite	Initial Test	Confirmatory Test
Marijuana Metabolite	50	
Delta-9-tetrahydrocanna-binol-9-carboxylic acid (THC)	15
Cocaine Metabolites (Benzoylcegonine)	300 _L	150
Phencyclidine (PCP)	25	25
Amphetamines Amphetamine Methamphetamine	1000	— 500 500 (Specimen must also contain amphetamine at a concentration of greater than or equal to 200 ng/ml.)
Opiate metabolites	2000	
Codeine	2000
Morphine	2000
6-acetylmorphine (6-AM)	10 (test for 6-AM in the specimen. Conduct this test only when specimen contains morphine at a concentration greater than or equal to 2000 ng/ml.)

Revised

Initial Test Analyte	Initial Test Cutoff Concentration	Confirmatory Test Analyte	Confirmatory Test Cutoff Concentration
Marijuana metabolites	50 ng/mL	THCA1	15 ng/mL
Cocaine metabolites	150 ng/mL	Benzoylcegonine	100 ng/mL
Opiate metabolites			
Codeine/Morphine ²	2000 ng/mL	Codeine	2000 ng/mL
		Morphine	2000 ng/mL
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL
Amphetamines ³			
AMP/MAMP ⁴	500 ng/mL	Amphetamine	250 ng/mL
		Methamphetamine ⁵	250 ng/mL
MDMA ⁶	500 ng/mL	MDMA	250 ng/mL
		MDA ⁷	250 ng/mL
		MDEA ⁸	250 ng/mL
1Delta-9-tetrahydrocannabinol-9-carboxylic acid (THCA)			
2Morphine is the target analyte for codeine/morphine testing			
3Either a single initial test kit or multiple initial test kits may be used provided the single test kit detects each target analyte independently at the specified cutoff			
4Methamphetamine is the target analyte for amphetamine/methamphetamine testing			
5To be reported positive for methamphetamine, a specimen must also contain amphetamine at a concentration equal to or greater than 100 ng/mL			
6Methylenedioxymethamphetamine (MDMA)			
7Methylenedioxyamphetamine (MDA)			
8Methylenedioxyethylamphetamine (MDEA)			



CITY OF PASO ROBLES

DRUG AND ALCOHOL TESTING POLICY

ADOPTED

NOVEMBER 6, 2007

(updated November 2, 2010)



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1.0 POLICY

The City of Paso Robles is dedicated to providing safe, dependable, and economical transportation services to our passengers. It is our goal to provide a healthy, satisfying, and safe working environment. In meeting this goal, it is our policy

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

2.0 PURPOSE

The purpose of this policy is to assure worker fitness for duty and to protect our covered employees, passengers, and the public from risks posed by the misuse of alcohol and use of prohibited drugs. This policy is also intended to comply with all applicable Federal regulations governing workplace anti-drug programs in the transit industry. The Federal Transit Administration (FTA) of the U.S. Department of Transportation (DOT) has enacted Title 49 – Transportation, Code of Federal Regulations (CFR) Part 655 that mandates urine drug testing and breathalyzer alcohol testing for safety-sensitive positions and prohibits performance of safety-sensitive functions when there is a positive test result. The DOT has also enacted 49 CFR Part 40 that sets standards for the collection and testing of urine and breath specimens.

3.0 APPLICABILITY

This policy applies to all applicants and employees of The City of Paso Robles, who will or do perform safety-sensitive functions of the positions specified in Appendix A, which may be amended from time to time and is incorporated herein, contracted employees who perform safety-sensitive functions when they are on City property or when performing any transit-related business, and volunteers when required to hold a commercial driver's license to operate the vehicle or who perform a safety-sensitive function and receive remuneration in excess of his or her actual expenses incurred while engaged in the volunteer activity, collectively referred to hereinafter as covered employees. This policy applies to off-site lunch periods or breaks when a covered employee is scheduled to return to work.

A safety-sensitive function is any duty related to the safe operation of transit service including the operation, dispatch, and maintenance of a revenue service vehicle (whether or not the vehicle is in revenue service) and any other employee who operates a non-revenue service vehicle when required to hold a Commercial Driver's License (CDL). Supervisors are safety sensitive only if



they perform a safety-sensitive function. Covered employees who will or do perform safety-sensitive functions are subject to testing as specified in this policy. The City has reviewed the actual duties performed by covered employees to determine the performance of safety-sensitive functions and which job functions may require the performance of safety-sensitive duties.

Annual testing rates are equivalent to 50% of the number of covered employees for drug testing and 10% of the number of covered employees for alcohol testing or as may be annually required by the DOT, FTA.

4.0 DEFINITIONS

Appendix B, Glossary of Terms, defines specific terms governing this policy and is incorporated herein.

5.0 PROHIBITED SUBSTANCES

"Prohibited substances" addressed by this policy include the following:

5.1 Illegally-Used Controlled Substances or Drugs

Any illegal drug or any substance identified in Schedules I through V of the Controlled Substance Act (21 U. S. C. 812), and as further defined by 21 CFR 1308.11 through 1308.15 is a prohibited substance. This includes, but is not limited to: marijuana, amphetamines, opiates, phencyclidine (PCP), and cocaine, as well as any drug not approved for medical use by the U. S. Drug Enforcement Administration (DEA) or the U. S. Food and Drug Administration (FDA). Illegal use includes use of any illegal drug, misuse of legally prescribed drugs, and use of illegally obtained prescription drugs.

5.2 Legal Drugs

Legally prescribed drugs and non-prescription medications are not prohibited when used appropriately. However, the use of any substance which carries a warning label that indicates that mental functioning, motor skills, or judgment may be adversely affected should be reported by a covered employee to supervisory personnel, and medical advice should be sought, as appropriate, before performing work-related duties.

A legally prescribed drug means that the covered employee has a prescription or other written approval from a physician for the use of a drug in the course of medical treatment. It must include the patient's name, the name of the substance, quantity/amount to be taken, and the period of authorization. Legal drugs misused or abused while performing transit business are prohibited substances.



5.3 Alcohol

Beverages containing alcohol or substances, including any medication or other preparation such that alcohol is present in the body, that are used while performing transit business, are prohibited substances. The concentration of alcohol is expressed in terms of grams of alcohol per 210 liters of breath as measured by an evidential breath-testing (EBT) instrument.

6.0 PROHIBITED CONDUCT

“Prohibited conduct” by a covered employee as addressed in this policy includes the following:

6.1 Manufacture, Trafficking, Possession, and Use

Engaging in the manufacture, distribution, dispensation, possession, or use of prohibited substances on City premises, in transit vehicles, in uniform, or while on transit business is prohibited conduct as prohibited by the Drug Free Workplace Act of 1988. Law enforcement may be notified, as appropriate.

6.2 Intoxication/Using Prohibited Substances

Intoxication from, impairment by, or use of a prohibited substance while performing transit business is prohibited conduct. A drug or alcohol test is considered positive if the individual is found to have a quantifiable presence of a prohibited substance in the body above minimum thresholds defined in 49 CFR Part 40.

6.3 Alcohol Misuse

Reporting for duty within four hours of using alcohol; remaining on duty while adversely affected by alcohol or with a blood alcohol concentration of 0.04 or greater; using alcohol while on duty; or using alcohol up to eight hours following an accident or until undergoing a post/accident test, whichever occurs first, is prohibited conduct. Covered on-call employees are considered on-duty throughout their specified on-call hours. The consumption of alcohol for the specified on-call hours of each covered employee is prohibited. On-call covered employees shall have: 1) the opportunity to acknowledge the use of alcohol at the time he or she is called to report to duty and the inability to perform his or her safety-sensitive function; and 2) the requirement to take an alcohol test if the covered employee has acknowledged the use of alcohol but claims ability to perform his or her safety-sensitive function.

6.4 Compliance with Testing Requirements

A covered employee has refused to take a drug and or alcohol test if he or she:

- 1) Fails to appear for any test (except a pre-employment test) within a reasonable time, as determined by the City, consistent with applicable DOT agency regulations, after being directed to do so by the City ;



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- 2) Fails to remain at the testing site until the testing process is complete; provided, that a covered employee who leaves the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
- 3) Fails to provide a urine specimen for any drug test required by 49 CFR Part 40 or DOT agency regulation, provided that a covered employee who does not provide a urine specimen because he or she has left the testing site before the testing process commences for a pre-employment is not deemed to have refused to test.
- 4) In the case of a directly observed or monitored collection in a drug test, fails to follow the observer's instructions or raise your shirt or blouse, or dress/skirt, as appropriate, above the waist; and lower clothing and underpants to show the observer; by turning around, that you do not have prosthetic or other device that could be used to interfere with the collection process.
- 5) Fails to provide a sufficient amount of urine when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- 6) Fails, or declines, to take a second test the City or collector has directed a covered employee to take;
- 7) Fails to provide an adequate amount of breath for any alcohol test required by 49 CFR Part 40 or DOT agency regulation provided that a covered employee who does not provide an adequate amount of breath because he or she has left the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test
- 8) Fails to provide a sufficient breath specimen, and the physician has determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- 9) Fails to undergo a medical examination or evaluation, as directed by the Medical Review Officer (MRO) as part of the verification process, or as directed by the Designated Employer Representative (DER) under 49 CFR Part 40. In the case of a pre-employment drug test, the covered employee is deemed to have refused to test on this basis only if the pre-employment test is conducted following a contingent offer of employment; or
- 10) Fails to cooperate with any part of the testing process (e.g. refusal to empty pockets when so directed by the collector, behaving in a confrontational way that disrupts the collection process).
- 11) A medical review officer verifies adulterated or substituted sample;
- 12) Fails to remain at the scene of an accident without just cause prior to submitting to a test;
- 13) Possess or wear or prosthetic device that could be used to interfere with the collection process.
- 14) Admits to the collector or MRO that the employee adulterated or substituted the urine specimen.
- 15) Refusal to submit to a non-DOT alcohol or drug test or to sign a non-DOT test form.
- 16) Fails to sign the certification at Step 2 of the Alcohol Testing Form; or

Such a refusal constitutes a verified positive drug and or alcohol test result, and is prohibited conduct.



6.5 Dilute Results

- In the event of a negative dilute test result, the Company will require the employee to immediately provide another specimen. This will be an unobserved collection unless directed by the MRO to be collected under direct observation.
- If the employee declines to take another test, this is considered refusal to test and is equivalent to a positive test.
- If a second test is administered and the result of that test is also negative and dilute, the Company will accept the second test result as negative and the result of the record.
- The collection cannot be observed, unless the MRO requests so as a result of the specimen having a creatinine concentration greater than or equal to 2mg.dL but less than or equal to 5 mg/dL.
- If the result is cancelled/invalid, (with no medical explanation) the employee will need to undergo an immediate observed collection as directed by the MRO.
- A MRO verified Positive Dilute test will be treated as a position drug test result.

6.6 Cancelled tests

If the test is cancelled, immediate recollections are required for pre-employment, return-to-duty, or follow-up tests. Only the Laboratory or the MRO can cancel a test.

6.7 Treatment Requirements

Refusal or failure to comply with treatment, after care, or return-to-duty requirements of this policy is prohibited conduct. All covered employees are encouraged to make use of the available resources for treatment for alcohol and substance abuse problems. Under certain circumstances, covered employees may be required to undergo treatment for substance abuse.

6.8 Notifying the City of Paso Robles, of Criminal Drug Conviction

Failure to provide written notification to the Program Manager within five calendar days of any criminal drug-statute conviction for a violation occurring in the workplace is prohibited conduct.

7.0 TESTING FOR PROHIBITED SUBSTANCES

Analytical urine drug testing and breath testing for alcohol may be conducted while the covered employee is performing safety-sensitive functions, just before performing safety-sensitive functions, or just after ceasing performance of such functions, and as required by federal regulations. All covered employees shall be subject to testing prior to employment, for reasonable suspicion, and following an accident as defined in Section 7.3.1, 7.3.2, 7.3.3 and of this policy. Covered employees will be tested prior to and after return-to-duty from having failed a drug test and/or after completion of rehabilitation treatment. Covered employees shall also be subject to testing on a random, unannounced basis.



Testing shall be conducted in a manner that has been approved by the U. S. Department of Health and Human Services (DHHS). All testing will be conducted consistent with the procedures put forth in 49 CFR Part 40. Periodic reviews are conducted by the City to ensure that the laboratory utilized is DHHS certified and the evidential breath testing instruments utilized are on the National Highway Traffic Safety Administration's (NHTSA) Conforming Products List for Alcohol Screening Devices. The City has contracted for urine analysis services with a DHHS-certified laboratory. The laboratory is identified in Appendix D of this policy as may be amended from time to time and which is incorporated herein. A clear and well-documented procedure for collection, shipment, and accessioning of urine specimens is developed and maintained. The City affirms the need to protect individual dignity, privacy and confidentiality throughout the testing process. The drug testing laboratory utilized by the City is secure at all times. It has in place sufficient security measures to control access to the premises and to ensure that no unauthorized personnel handle specimens or gain access to the laboratory process or to areas where records are stored. The laboratory uses chain-of-custody procedures to maintain control and accountability of specimens from receipt through completion of testing, reporting of results during storage, and continuing until final disposition of specimens. The medical review officer utilized by the City keeps all records pertaining to results of drug and alcohol testing in a secure location at all times and ensures only authorized personnel have access. City copies of drug and alcohol test results are kept in a secure location at all times with access limited only to authorized personnel.

The drugs that will be tested for include

- Marijuana
- Cocaine
- Opiates
- Amphetamines
- Phencyclidine
- MDMA (aka ecstasy)

The collector will ensure that the donor is positively identified as the covered employee selected for urine drug testing (e.g., through presentation of photo identification or identification by the employer representative). A US DOT Chain of Custody and Control Form with a unique identification number will be utilized. Clean, single-use, securely wrapped specimen bottles will be unwrapped in the presence of the donor. The sample's temperature will be checked. The collector, in the presence of the donor, will pour 15 ml. of urine from the specimen bottle into the split specimen bottle, leaving the remaining 30 ml. or more in the collection bottle that will then be considered the primary specimen. The bottles will be sealed with tamperproof sealing and labeled with the Chain of Custody and Control Form unique identification number which the donor must initial. The bottles will be placed in the shipping container with a copy of the Chain of Custody and Control Form and sealed with tamperproof tape.

An initial drug screen will be conducted on the primary specimen. The initial test shall use an immunoassay which meets the requirements of the Food and Drug Administration for commercial distribution. For those specimens that are not negative on the initial test, as determined by a medical review officer, a confirmatory Gas Chromatography/Mass Spectrometry test will be performed on the primary specimen. The test will be considered positive if the amounts present are above minimum thresholds established in 49 CFR Part 40. Current cutoff limits for the



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screening and confirmation tests are attached in Appendix C of this policy as may be amended from time to time and which is incorporated herein.

This policy does not prohibit performing procedures reasonably incidental to analysis of the specimen for controlled substances (e.g., determination of PH levels or tests for specific gravity, creatinine concentration, or presence of adulterants). Laboratories may conduct specimen validity testing which is the evaluation of the specimen to determine if it is consistent with normal human urine. The purpose of validity testing is to determine whether certain adulterants or foreign substances were added to the urine, if the urine was diluted, or if the specimen was substituted. Any dilute positive drug test as reported by the medical review officer will be treated as a verified positive test. Any dilute negative drug test with a creatinine level greater than 5 mg/dl as reported by the medical review officer will not require a retest per City policy. Any dilute negative drug test with a creatinine level between 2 – 5 mg/dl as reported by the medical review officer will require a retest under direct observation. An analysis of the split specimen is described in Section 7.6 of this policy, *Employee-Requested Testing*.

Testing for alcohol concentration will be conducted utilizing an evidential breath testing instrument approved by the National Highway Traffic Safety Administration (NHTSA) and operated by a trained breath alcohol technician. The breath alcohol technician will ensure that the donor is positively identified as the covered employee selected for breath alcohol testing (e.g., through presentation of photo identification or identification by the City representative). The breath alcohol technician will utilize the US DOT Breath Alcohol Testing Form. The breath alcohol technician will select an individually sealed mouthpiece and will open it in full view of the covered employee and attach it to the evidential breath-testing instrument in accordance with the manufacturer's instructions.

The breath alcohol technician will instruct the covered employee to blow forcefully into the mouthpiece for at least six seconds or until the evidential breath testing instrument indicates that an adequate amount of breath has been obtained. The breath alcohol technician will affix the test result printout to the Breath Alcohol Test Form in the designated space. The result will be secured in such a manner that will provide clear evidence of removal, such as the use of tamper-evident tape. If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. A covered employee who has a confirmed alcohol concentration of greater than 0.02 but less than 0.04 will be removed from his or her position for eight hours unless a retest results in a concentration measure of less than 0.02. An alcohol concentration of 0.04 or greater will be considered a positive alcohol test and a violation of this policy.

The services of a medical review officer have been secured by the City. The medical review officer is identified in Appendix D of this policy as may be amended from time to time and which is incorporated herein. The medical review officer is a licensed physician responsible for receiving laboratory results generated by the City's drug testing program and who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant biomedical information.

If the laboratory results are confirmed positive the medical review officer will interview the



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covered employee and review all information provided by the covered employee to determine whether the results are indicative of illegal drug usage. If the covered employee provides an adequate explanation, the medical review officer will verify the test as negative with the Substance Abuse Program Manager and take no further actions.

In drug testing, a canceled test is a drug test that has been declared invalid by a medical review officer. A canceled test is neither a positive nor a negative test. For purposes of this part, a sample that has been rejected for testing by a laboratory is treated the same as a canceled test.

In alcohol testing a canceled test is a test that is deemed to be invalid under the following circumstances:

- 1) The next external calibration check of an evidential breath testing device produces a result that differs by more than the tolerance stated in the quality assurance plan from the known value of the test standard. In this event, every test result of 0.02 or above obtained on the device since the last valid external calibration check shall be invalid
- 2) The breath alcohol technician does not observe the minimum 15-minute waiting period prior to the confirmation test
- 3) The breath alcohol technician does not perform an air blank of the evidential breath testing device before the confirmation test, or an air blank does not result in a reading of 0.00 prior to the administration of the test
- 4) The breath alcohol technician does not sign the form as required
- 5) The breath alcohol technician has failed to note on the remarks section of the form that the covered employee has failed or refused to sign the form following the recording or printing on or attachment to the form of the test result
- 6) On a confirmation test and, where applicable, on a screening test, the sequential test number or alcohol concentration displayed on the evidential breath test is not the same as the sequential test number or alcohol concentration on the printed result. A canceled test is neither a positive nor a negative test.

Any covered employee who has a confirmed positive drug or alcohol test will be removed from his or her position, informed of educational and rehabilitation programs available, and evaluated by a substance abuse professional (SAP). The City provides a list of resources available in evaluating and resolving problems associated with prohibited drug use, including the names, addresses and telephone numbers of substance abuse professionals and counseling and treatment programs, which is identified in Appendix D of this policy as may be amended from time to time and which is incorporated herein. If a covered employee chooses to use the information provided, he or she must first contact a substance abuse professional who will perform an evaluation to determine whether the covered employee is in need of assistance in resolving problems associated with prohibited drug use. The substance abuse professional will then refer the covered employee to a counseling and treatment program. A positive drug and/or alcohol test will also result in disciplinary action, up to and including termination pursuant to Section 8.0 of this policy, *Consequences of Engaging in Prohibited Conduct*.



7.1 Pre-Employment Testing

All covered applicants and transfers for covered positions shall undergo urine drug testing prior to performing a safety-sensitive function. Receipt by the City of a verified negative test result is required prior to employment and failure of a drug test will disqualify an applicant for employment. If a pre-employment drug test is cancelled as determined by the medical review officer, the covered applicant is required to submit to and pass another test.

An employee transferring from a non-safety sensitive position to a safety-sensitive position will undergo urine drug testing with a verified negative test result prior to performing a safety sensitive function.

When a covered employee or applicant has previously failed or refused a pre-employment drug test administered under 49 CFR Part 655, the covered employee or applicant must provide the City proof of having successfully completed a referral, evaluation and treatment plan as described in Section 10.0 of this policy, *Substance Abuse Evaluation and Assessment*.

When a covered employee or applicant has not performed a safety-sensitive function for 90 consecutive calendar days regardless of the reason, and the covered employee has not been in the City's random selection pool, the City shall ensure that the covered employee takes a pre-employment test with a verified negative result. Applicants who have a DOT drug and alcohol regulation violation will be provided with a listing of substance abuse counseling and treatment resources.

7.2 Reasonable Suspicion Testing

All covered employees may be subject to a fitness for duty evaluation, to include appropriate urine and/or breath testing when a supervisor(s) or other City official(s) who is trained in detecting the signs and symptoms of prohibited drug use and alcohol misuse makes the required observations.

A trained supervisor's reasonable suspicion referral for testing will be made on the basis of documented specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, and/or body odor(s) of the covered employee which are consistent with the long- or short-term effects of substance abuse. Examples of reasonable suspicion include, but are not limited to, the following:

- 1) Adequate documentation of unsatisfactory work performance or on-the-job behavior
- 2) Physical signs and symptoms consistent with prohibited substance use
- 3) Evidence of the manufacture, distribution, dispensing, possession, or use of controlled substances, drug, alcohol, or other prohibited substances
- 4) Occurrence of a serious or potentially serious accident that may have been caused by human error



- 5) Physical or verbal assaults, and/or flagrant disregard or violations of established safety, security, or other operating procedures.

Alcohol testing as required by 49 CFR Part 655.43 *Reasonable Suspicion Testing* is authorized only if the required observations are made during, just preceding, or just after the period of the workday that a covered employee is required to be in compliance. The City may direct a covered employee to undergo reasonable suspicion testing for alcohol only while the covered employee is performing safety-sensitive functions; just before the covered employee is to perform safety-sensitive functions; or just after the covered employee has ceased performing such functions.

If a required alcohol test is not administered within two hours following the determination, the City shall prepare and maintain on file a record stating the reasons the alcohol test was not promptly administered. If a required alcohol test is not administered within eight hours following the determination, the City shall cease attempts to administer an alcohol test and shall state in the record the reasons for not administering the test.

7.3 Post-Accident Testing

7.3.1 When a Fatality Occurs

All surviving covered employees operating the vehicle will be required to undergo drug and alcohol testing if they are involved in an accident that results in a fatality with a City vehicle (regardless of whether or not the vehicle is in revenue service). The City shall also drug and alcohol test any other covered employee whose performance could have contributed to the accident as determined by the City using the best information available at the time of the decision.

7.3.2 Under Other Circumstances

Post-accident drug and alcohol tests will be conducted if an accident results in injuries requiring immediate transportation to a medical treatment facility or in which one or more vehicles incur disabling damage and require towing (unable to proceed in route after minor repairs) from the site unless the operator's conduct can be completely discounted as determined by the City using the best information available at the time of the decision. This includes all covered employees who are operating the vehicles, and any other covered employees whose performance could have contributed to the accident as determined by the City using the best information available at the time of the decision.

The decision not to administer a drug and/or alcohol test shall be based on the City's determination, using the best available information at the time of the determination that the covered employee's performance could not have contributed to the accident. Such a decision must be documented in detail, including the decision-making process used to reach the decision not to test.



7.3.3 Post-accident Procedures

When post-accident testing is required following an accident, the covered employee will be tested as soon as possible, but not to exceed eight hours for alcohol testing and 32 hours for drug testing.

The City will attempt to complete the alcohol test within two hours of the accident. If the City is not able to obtain a specimen within two hours, it will document why a specimen was not obtained and continue attempts. After eight hours, attempts will cease and the two-hour documentation will be updated.

Any covered employee involved in an accident must refrain from alcohol use for eight hours following the accident or until he or she undergoes a post-accident alcohol test whichever occurs first. Any covered employee who leaves the scene of an accident without appropriate authorization prior to submission to drug and alcohol testing will be considered to have refused the test. Accident drug and alcohol testing will be stayed while the covered employee assists in resolution of the accident or receives medical attention following the accident.

The results of a blood, urine, or breath test for the use of prohibited drugs or alcohol misuse, conducted by Federal, State, or local officials having independent authority for the test, shall be considered to meet the requirements of 49 CFR Part 655 provided such test conforms to the applicable Federal, State, or local testing requirements, and that the test results are obtained by the City. Such test results may be used only when the City is unable to perform a post-accident test within the required period noted in this section.

7.4 Random Testing

Covered employees will be subjected to random, unannounced immediate testing. The selection of covered employees shall be made by a scientifically valid method, such as a random-number table or a computer-based random number generator that is matched with covered employees' social security numbers, payroll identification numbers, or other comparable identifying numbers. Under the selection process used, each covered employee shall have an equal chance of being tested each time selections are made. There will be no discretion on the part of the City in the selection and notification of individuals for testing.

Covered employees will be notified of selection by the Program Manager or his or her designee and directed to the specimen collector. The City shall require that each covered employee who is notified of selection for random drug or random alcohol testing proceed to the test site immediately. If the covered employee is performing a safety-sensitive function at the time of notification, the City shall instead ensure that the covered employee ceases to perform the safety-sensitive function and proceeds to the testing site.



immediately. A covered employee shall only be randomly tested for alcohol misuse while the covered employee is performing safety-sensitive functions; just before the covered employee is to perform safety-sensitive functions; or just after the covered employee has ceased performing such functions. A covered employee may be randomly tested for prohibited drug use anytime while on duty. Testing will be continuous throughout the year on all days and hours during which the City is in operation.

7.5 Return-to-Duty Following a Positive Test Result and Follow-Up Testing

Covered employees who previously tested positive on a drug or alcohol test must test negative and be evaluated at their own expense and released to duty by an approved substance abuse professional pursuant to Section 10.0 of this policy, *Substance Abuse Evaluation and Assessment*, before a one-time return-to-employment opportunity may be considered. Such one-time opportunity is at the sole discretion of the City. If approved for return to work by the City, covered employees will be required to undergo frequent unannounced follow-up and random urine and breath tests during the period of their re-entry contract. Such follow-up tests will be subject to the minimums described in Section 10.0 of this policy, *Substance Abuse Evaluation and Assessment*.

7.6 Employee-Requested Testing

Any covered employee who questions the results of a required drug test under Sections 7.1 through 7.5 of this section may request that an additional test be conducted. This test must be conducted at a different testing laboratory. The test must be conducted on the split sample that was provided at the same time as the original sample. All costs for such testing shall be paid by the covered employee, unless the second test invalidates the original test. The method of collecting, storing, and testing the split sample will be consistent with the procedures set forth in 49 CFR Part 40. The covered employee's request for a re-test must be made to the medical review officer within 72 hours of notice of the initial test result. Requests after 72 hours will only be accepted by the medical review officer if the delay was due to documentable facts that were beyond the control of the covered employee. If the analysis of the split specimen fails to reconfirm the presence of the drug(s) or drug metabolites(s) found in the primary specimen, or if the split specimen is unavailable, inadequate for testing or untestable, the medical review officer shall cancel the test and report the cancellation and the reasons for it to the DOT, the City, and the covered employee. If the analysis of the split specimen is reconfirmed by the second laboratory for the presence of the drug(s) or drug metabolites(s), the medical review officer shall notify the City and covered employee of the results of the test.

8.0 CONSEQUENCES OF ENGAGING IN PROHIBITED CONDUCT

Per City policy, the consequence of engaging in conduct addressed in Section 6.0 of this policy, *Prohibited Conduct*, is termination from employment with the City. Prior to termination, a covered employee will be informed of educational and rehabilitation programs available and a list of substance abuse professionals. The covered employee has the right to review his or her drug and alcohol testing records, provide information to dispute the results, and have access to any



pertinent records such as equipment calibration records and records of laboratory certification.

Subject to all provisions of Section 10.0 of this policy, *Substance Abuse Evaluation and Assessment*, and Section 11.0 of this policy, *Re-Entry Contracts*, the City may rehire a terminated covered employee who at its sole discretion the City has determined will contribute to the mission, goals, cohesion, productivity, and esprit de corp of the City.

9.0 INFORMATION DISCLOSURE

Except as required by law, or expressly authorized or required below by 49 CFR Part 655.73 Access to Facilities and Records, the City may not release information pertaining to a covered employee that is contained in records required to be maintained.

- 1) A covered employee is entitled, upon written request, to obtain copies of any records pertaining to the covered employee's use of prohibited drugs or misuse of alcohol, including any records pertaining to his or her drug or alcohol tests;
- 2) The City shall permit access to all facilities utilized and records compiled in complying with the requirements of Part 655 to the Secretary of Transportation or any DOT agency with regulatory authority over the City or any of its covered employees or to a State oversight agency authorized to oversee rail fixed guideway systems;
- 3) The City shall disclose data for its drug and alcohol testing programs, and any other information pertaining to the City's anti-drug and alcohol misuse programs required to be maintained by this part to the Secretary of Transportation or any DOT agency with regulatory authority over the City or any of its covered employees or to a State oversight agency authorized to oversee rail fixed guideway systems, upon the Secretary's request or the respective agency's request;
- 4) When requested by the National Transportation Safety Board as part of an accident investigation, the City shall disclose information related to its drug or alcohol testing related to the accident under investigation;
- 5) Records shall be made available to a subsequent employer upon receipt of a written request from a covered employee. Subsequent disclosure by the City is permitted only as expressly authorized by the terms of the covered employee's request;
- 6) The City may disclose information required to be maintained under Part 655 pertaining to a covered employee to the decision-maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the covered employee, and arising from the results of a drug or alcohol test under this part (including, but not limited to, a worker's compensation, unemployment compensation, or other proceeding relating to a benefit sought by the covered employee);
- 7) The City shall release information regarding a covered employee's record as directed by the specific, written consent of the covered employee authorizing release of the information to an identified person.
- 8) The City may disclose drug and alcohol testing information required to be maintained under Part 655, pertaining to a covered employee, to the State oversight agency or grantee required to certify to FTA compliance with the drug and alcohol testing procedures of 49 CFR Parts 40 and 655.



10.0 SUBSTANCE ABUSE EVALUATION AND ASSESSMENT

Any covered employee who tests positive for the presence of illegal drugs or alcohol above the minimum thresholds set forth in 49 CFR Part 40 shall be evaluated by an approved substance abuse professional before returning to duty. The substance abuse professional will evaluate each covered employee to determine what assistance, if any, the covered employee needs in resolving problems associated with prohibited substance abuse or misuse. The substance abuse evaluation and assessment will be paid for by the covered employee. Assessment by a substance abuse professional does not shield a covered employee from disciplinary action or guarantee employment, reinstatement, or consideration for reinstatement. The City will determine the penalty for performance-based infractions and violation of policy provisions. Refer to Section 8 of this policy, *Consequences of Engaging in Prohibited Conduct*, for guidance on disciplinary measures associated with violations of this policy.

Prior to consideration to return to duty, a covered employee must properly follow and complete the rehabilitation program prescribed by the substance abuse professional, and pass a return-to-duty drug and/or alcohol test.

The substance abuse professional will recommend to the City the frequency and duration of follow-up testing. Federal regulations require a minimum of six unannounced follow-up tests with a verified negative result during the first 12 months after the covered employee returns to duty. The covered employee may be subject to follow-up testing for as long as 60 months after he or she returns to duty (labor agreements notwithstanding). The cost of any treatment or rehabilitation services will be paid directly by the covered employee or his or her insurance provider. Covered employees will be allowed to take accumulated sick leave and vacation leave to participate in the prescribed rehabilitation program.

11.0 RE-ENTRY CONTRACTS

Per City policy, covered employees approved by the City for a one-time opportunity to re-enter the workforce must agree to a re-entry contract. A refusal to test precludes a covered employee from this one-time opportunity. The re-entry contract shall include (but is not limited to):

- 1) A release to work statement from an approved substance abuse professional;
- 2) A negative test for drugs and/or alcohol;
- 3) A statement of expected work-related behaviors;
- 4) An agreement to unannounced frequent follow-up testing complying with this policy;
- 5) An agreement to follow specified after-care requirements prescribed by the approved substance abuse professional; and
- 6) An agreement that violation of any terms of the re-entry contract is grounds for immediate termination with no further reinstatement opportunities.



12.0 EDUCATION AND TRAINING

The City of Paso Robles has established a covered education and training program including:

- Education which includes display and distribution to every covered employee of informational material and a list of telephone numbers for assistance; and
- Training for:
 - 1) Covered employees which includes at least 60 minutes of training on the effects and consequences of prohibited drug use on personal health, safety, and the work environment, and on the signs and symptoms which may indicate prohibited drug use; and,
 - 2) Supervisors and/or other City officers authorized by the City to make reasonable suspicion determinations which includes at least 60 minutes of training on 1) the physical, behavioral, and performance indicators of probable drug use and at least 60 minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse, and 2) initiating, substantiating and documenting the referral, and covered employee intervention.

13.0 EFFECTS, SIGNS AND SYMPTOMS OF ALCOHOL MISUSE AND METHODS OF INTERVENTION

13.1 Effects on Health, Work and Personal Life:

- 1) Nutritional deficiencies and sleeping difficulty
- 2) Impaired short-term memory
- 3) Inability to concentrate
- 4) Physical and psychological dependence
- 5) Brain and nervous system damage
- 6) Liver damage
- 7) Digestive problems (gastric ulcer)
- 8) Higher likelihood of stroke, coronary problems in general, and several forms of cancer
- 9) Disease of pancreas and kidneys
- 10) Birth defects in children of heavy drinking women
- 11) Impaired reaction time and motor skills
- 12) Tendency to take unnecessary risks
- 13) Possibility of reacting with anger toward other motorists
- 14) Euphoric high followed by a period of stuporous inactivity
- 15) Impairment in social functioning
- 16) Low frustration tolerance
- 17) Anxiety
- 18) Isolation
- 19) Violent mood swings
- 20) Manipulation of others
- 21) Over-sensitivity



13.2 Signs and Symptoms:

- 1) Alcohol odor on breath
- 2) Initial stimulation followed by depressed nervous system
- 3) Flushed skin
- 4) Glazed appearance of eyes
- 5) Slowed reaction time
- 6) Confused or slurred speech
- 7) Swayed or staggered gait
- 8) Absenteeism, particularly at the beginning of the week

13.3 Methods of Intervention:

Supervisors are responsible and accountable for assuring that covered employees under their supervision are fit to perform their duties safely. Supervisors are trained to intervene by:

- 1) Identifying patterns of deteriorating job performance by the presence of progressive violations of policy
- 2) Documenting, in writing, the observed signs of change in a covered employee's work pattern as it relates to policy violations
- 3) Confirming a pattern of impaired judgment or performance over a period of time—all of which is documented
- 4) Confronting the covered employee by addressing his or her unacceptable work performance in a constructive way

Constructive confrontation includes the following and provides the covered employee with an opportunity to become productive again:

- 1) Documentation of what constitutes an acceptable level of performance
- 2) The amount of time to achieve improvement before disciplinary action is taken
- 3) A list of resources for the covered employee to use at his or her discretion which may provide assistance in improving performance
- 4) A progress review date



14.0 PROGRAM MANAGER

Anyone with questions regarding this policy should contact the following City representative who functions as the Program Manager and Designated Employer Representative (DER) for purposes of implementing and administering this policy:

Marlaine Sanders
Human Resources Manager
City of Paso Robles
1000 Spring Street
Paso Robles, CA 93446
Telephone: (805) 237-3962

15.0 CERTIFICATION OF TRAINING

The City of Paso Robles certifies that training conducted under the Federal Transit Administration (FTA) Drug and Alcohol Testing Regulations 49 CFR Parts 40 and 655 complies with the requirements for that training which includes:

- Education which includes display and distribution to every covered employee of informational material and a list of telephone numbers for employee assistance; and
- Training for:
 1. Covered Employees. The training shall include at least 60 minutes of training on:
 - a) The effects and consequences of prohibited drug use on personal health, safety, and the work environment
 - b) The signs and symptoms which may indicate prohibited drug use
 2. Supervisors and/or other City officers authorized by the City to make reasonable suspicion determinations. The training shall include:
 - a) At least 60 minutes of training on the physical, behavioral, and performance indicators of probable drug use
 - b) At least 60 minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse
 - c) Initiating, substantiating and documenting the referral, and employee intervention.



16.0

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING

I understand that my signature below indicates that I have received a copy of the City of Paso Robles Drug and Alcohol Testing Policy updated November 2, 2010. Further, I understand and acknowledge that it is my responsibility to read and understand the policies and procedures set forth.

Print Name

Date

Signature



APPENDIX A

Safety-Sensitive Positions

- Fleet Supervisor
- Equipment Mechanics
- Transit Coordinator
- W/WW Treatment Plant Operators
- Supervisor – Streets/Parks
- Maintenance Specialist I/II/III

Some positions in the Maintenance Specialist series do not require the incumbent to perform “safety sensitive functions,” as set forth in Section 3.0 of this Policy.



APPENDIX B

Glossary of Terms

ACCIDENT: An occurrence associated with the operation of a vehicle, if as a result:

1. An individual dies
2. An individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident
3. With respect to an occurrence in which the mass transit vehicle involved is a bus, electric bus, van, or automobile, one or more vehicles (including non-FTA funded vehicles) incurs disabling damage as the result of the occurrence and such vehicle or vehicles are transported away from the scene by a tow truck or other vehicle
4. With respect to an occurrence in which the mass transit vehicle involved is a rail car, trolley car, trolley bus, or vessel, the mass transit vehicle is removed from operation.

ADULTERATED SPECIMEN: A specimen that has been altered, as evidenced by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

ALCOHOL: The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl or isopropyl alcohol.

ALCOHOL CONCENTRATION: The alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by a breath test.

ALCOHOL CONFIRMATION TEST: A subsequent test using an EBT, following a screening test with a result of 0.02 or greater, that provides quantitative data about the alcohol concentration.

ALCOHOL SCREENING TEST: An analytic procedure to determine whether a covered employee may have a prohibited concentration of alcohol in a breath specimen.

ALCOHOL USE: The consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.

BREATH ALCOHOL TECHNICIAN (BAT): The breath alcohol technician shall be trained to proficiency in the operation of the Evidentiary Breath Test (EBT) instrument he or she is using, and in the alcohol testing procedures. BATs are the qualified personnel to administer the EBT test on covered employees.



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CANCELLED TEST: A drug or alcohol test that has a problem identified that cannot be or has not been corrected, or which 49 CFR Part 40 otherwise requires to be cancelled. A cancelled test is neither a positive nor a negative test.

CHAIN OF CUSTODY: Procedures to account for the integrity of each urine specimen by tracking its handling and storage from point of collection to final disposition.

COLLECTION SITE: A place designated by the City where individuals present themselves for the purpose of providing a specimen of either urine and/or breath. The collection site shall have all necessary personnel, materials, equipment, facilities and supervision to provide for the collection, security, temporary storage, and shipping or transportation of urine specimens to a certified drug testing laboratory.

CONFIRMATORY DRUG TEST: A second analytical procedure performed on a different aliquot of 49 the original specimen to identify and quantify the presence of a specific drug or drug metabolite.

CONFIRMED DRUG TEST: A confirmation test result received by a medical review officer from a laboratory.

CONFIRMATION VALIDITY TEST: A second test performed on a urine specimen to further support a validity test result.

COVERED EMPLOYEE: Any person, including a volunteer, applicant, or transferee, who is designated in a DOT agency regulation as subject to drug testing and/or alcohol testing. The term includes individuals currently performing safety-sensitive functions designated in DOT agency regulations and applicants for employment subject to pre-employment testing. A volunteer is a covered employee if: 1) the volunteer is required to hold a commercial driver's license to operate the vehicle; or 2) the volunteer performs a safety-sensitive function for an entity subject to 49 CFR Parts 40 and 655 and receives remuneration in excess of his or her actual expenses incurred while engaged in the volunteer activity.

DEPARTMENT OF TRANSPORTATION (DOT): This term encompasses all DOT agencies, including, but not limited to, the United States Coast Guard, the Federal Aviation Administration, the Federal Railroad Administration, the Federal Motor Carrier Safety Administration, the Federal Transit Administration, the National Highway Traffic Safety Administration, the Research and Special Programs Administration, and the Office of the Secretary. These terms include any designee of a DOT agency.

DESIGNATED EMPLOYER REPRESENTATIVE (DER): An employee authorized by the City to take immediate action(s) to remove covered employees from safety-sensitive duties or cause covered employees to be removed from these covered duties, and to make required decisions in the testing and evaluation process. The DER also receives test results and other communications for the City, consistent with the requirements of 49 CFR Parts 40 and 655.



DILUTE SPECIMEN: A specimen with creatinine and specific gravity values that are lower than expected for human urine.

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

1. Inclusion: Damage to a motor vehicle where the motor vehicle could have been driven, but would have been further damaged if so driven.
2. Exclusions:
 - a. Damage that can be remedied temporarily at the scene of the accident without special tools or parts.
 - b. Tire disablement without damage even if no spare tire is available.
 - c. Headlamp or tail light damage.
 - d. Damage to turn signals, horn or windshield wipers, which makes the vehicle inoperable

DRUG METABOLITE: The specific substance produced when the human body metabolizes a given prohibited drug as it passes through the body and is excreted in urine.

EVIDENTIAL BREATH TESTING INSTRUMENT (EBT): A device approved by the National Highway Traffic Safety Administration for the evidential testing of breath at the 0.02 and 0.04 alcohol concentrations, placed on NHTSA's Conforming Products List (CPL) for "Evidential Breath Measurement Devices" and identified on the CPL as conforming with the model specifications available from NHTSA's Traffic Safety Program.

FEDERAL TRANSIT ADMINISTRATION (FTA): An agency of the U. S. Department of Transportation.

FOLLOW-UP TEST: A minimum of six unannounced drug and/or alcohol tests in a 12-month period, as directed by a substance abuse professional, are required of each employee who returns to duty after a required evaluation. After that period of time, the substance abuse professional may recommend to the City the frequency and duration of follow-up testing, provided that the follow-up testing period ends 60 months after the covered employee returns to duty.

INITIAL DRUG TEST: (also known as a "Screening drug test"). The test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

INITIAL SPECIMEN VALIDITY TEST: The first test used to determine if a urine specimen is adulterated, diluted, substituted, or invalid.

INVALID DRUG TEST: The result reported by an HHS-certified laboratory in accordance with the criteria established by HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

LABORATORY: Any U.S. laboratory certified by HHS under the National Laboratory Certification Program as meeting the minimum standards of Subpart C of the HHS Mandatory



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Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.

LIMIT OF DETECTION (LOD): The lowest concentration at which a measure and can be identified, but (for quantitative assays) the concentration cannot be accurately calculated.

LIMIT OF QUANTITATION: For quantitative assays, the lowest concentration at which the identity and concentration of the measure and can be accurately established.

MEDICAL REVIEW OFFICER (MRO): A licensed physician responsible for receiving laboratory results generated by the City's drug testing program that has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant biomedical information.

NEGATIVE RESULT: The result reported by an HHS-certified laboratory to an MRO when a specimen contains no drug or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

POSITIVE RESULT: The result reported by an HHS-certified laboratory when a specimen contains a drug or drug metabolite equal to or greater than the cutoff concentrations.

POST ACCIDENT TEST: A prohibited substance test administered to a covered employee when a motor vehicle accident has occurred and the covered employee performed a function which either contributed to the accident or could not be completely discounted as a contributing factor in the accident.

PRE-EMPLOYMENT TEST: A prohibited substance test given to an applicant or a non covered employee who is being considered for a safety-sensitive position. The applicant or non covered employee must be informed of the purpose for the test prior to the actual event.

PRIMARY SPECIMEN: In drug testing, the urine specimen bottle that is opened and tested by a first laboratory to determine whether the covered employee has a drug or drug metabolite in his or her system, and for the purpose of validity testing. The primary specimen is distinguished from the split specimen.

PROGRAM MANAGER: The person designated by the City to answer covered employee questions about the anti-drug and alcohol misuse program.

PROHIBITED DRUG: Marijuana, cocaine, opiates, amphetamines, or phencyclidine.

PROHIBITED SUBSTANCE: Under this program "prohibited substance" shall be used synonymous to drug abuse and/or alcohol misuse and refers to the definition of the foregoing terms "Alcohol" and "Prohibited Drug."



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RANDOM TEST: A prohibited substance test given annually to a predetermined percentage of covered employees who perform in safety-sensitive functions and who are selected on a scientifically-defensible random and unannounced basis.

REASONABLE SUSPICION TEST: A prohibited substance test given to a current covered employee who is reasonably suspected by a trained supervisory employee of using prohibited drug or misusing alcohol.

RECONFIRMED: The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

REJECTED FOR TESTING: The result reported by an HHS-certified laboratory when no tests are performed for a specimen because of a fatal flaw or a correctable flaw that is not corrected.

RETURN-TO-DUTY TEST: An initial drug and/or alcohol test prior to return to duty given to eligible covered employees who previously tested positive. This test is also required prior to return to duty of an individual who has refused to take a test required by the FTA rule.

SAFETY-SENSITIVE EMPLOYEES: Those employees who perform safety-sensitive functions for the City.

SAFETY-SENSITIVE FUNCTION: Any of the following duties:

- 1) Operating a revenue service vehicle, including when not in revenue service
- 2) Operating a non-revenue service vehicle when required to be operated by a holder of a commercial driver's license
- 3) Controlling dispatch or movement of a revenue service vehicle
- 4) Maintaining a revenue service vehicle or equipment used in revenue service, unless the recipient receives FTA section 18 funding and contracts out such services

SPLIT SPECIMEN: In drug testing, a part of the urine specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the covered employee requests that it be tested following a verified positive test of the primary specimen or a verified adulterated or substituted test result.

SPLIT SPECIMEN COLLECTION: A collection in which the urine collected is divided into two separate specimen bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).

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

SUBSTANCE ABUSE PROFESSIONAL (SAP): A licensed physician (medical doctor or doctor of osteopathy); or a licensed or certified psychologist, social worker, or employee assistance professional; or addiction counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission or by the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse.) All must have knowledge



of and clinical experience in the diagnosis and treatment of alcohol and controlled substance-related disorders.

VERIFIED TEST: A drug test result or validity testing result from an HHS-certified laboratory that has undergone review and final determination by the Medical Review Officer.

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APPENDIX C

Minimum Threshold Levels

The Department of Health and Human Services establishes the minimum threshold levels for each of the five drugs tested for under USDOT testing programs including the FTA. Minimum levels are established for both the initial screening test and for the confirmatory test. The current cutoff levels are as follows:

Initial Test Analyte	Initial Test Cutoff Concentration	Confirmatory Test Analyte	Confirmatory Test Cutoff Concentration
Marijuana metabolites	50 ng/mL	THCA1	15 ng/mL
Cocaine metabolites	150 ng/mL	Benzoyllecgonine	100 ng/mL
Opiate metabolites			
Codeine/Morphine2	2000 ng/mL	Codeine	2000 ng/mL
		Morphine	2000 ng/mL
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL
Amphetamines3			
AMP/MAMP4	500 ng/mL	Amphetamine	250 ng/mL
		Methamphetamine5	250 ng/mL
MDMA6	500 ng/mL	MDMA	250 ng/mL
		MDA7	250 ng/mL
		MDEA8	250 ng/mL
1Delta-9-tetrahydrocannabinol-9-carboxylic acid (THCA)			
2Morphine is the target analyte for codeine/morphine testing			
3Either a single initial test kit or multiple initial test kits may be used provided the single test kit detects each target analyte independently at the specified cutoff			
4Methamphetamine is the target analyte for amphetamine/methamphetamine testing			
5To be reported positive for methamphetamine, a specimen must also contain amphetamine at a concentration equal to or greater than 100 ng/mL			
6Methylenedioxymethamphetamine (MDMA)			
7Methylenedioxyamphetamine (MDA)			
8Methylenedioxyethylamphetamine (MDEA)			

These cutoff levels are subject to change by the Department of Health and Human Services as advances in technology or other considerations warrant identification of these substances at other concentrations.



APPENDIX D

Resources

MEDICAL REVIEW OFFICER

Dr. Bruce Heischober
P.O. Box 8878
Redlands, California 92375
(909) 307-8200

LABORATORY

Addiction Medicine Consultants, Inc.
P.O. Box 8878
Redlands, California 92375
(909) 307-8200

Star Drug Testing
3850 Ramada Drive
Paso Robles, California 93446
(805) 434-1477

SUBSTANCE ABUSE PROFESSIONAL(S)

Steve Berg
SLO County Drug & Alcohol Services
2180 Johnson Ave.
San Luis Obispo, CA 93401
(805) 788-2057

Dominick Lacovara
11549 Los Osos Valley Road, Ste. 202
San Luis Obispo, CA 93405
(805) 543-7040

HOTLINES, SUPPORT GROUPS

Narcotics Information Helpline
(866) 675-4912

Alcoholics Anonymous
(805) 466-8175, 541-3211, or 927-0347

Al-Anon
(805) 534-9204, 549-8989, or 541-3211
(800) 344-2666

National Institute on Drug Abuse Hotline
(800) 662-HELP

SLO County Drug and Alcohol Services
2180 Johnson Ave.
San Luis Obispo, California 93401
(805) 781-4275

Narconon – Drug Addictions
(800) 556-8885

SUBSTANCE ABUSE COUNSELING AND TREATMENT RESOURCES

City of Paso Robles Employee Assistance Program (EAP)

MHN
(800) 327-0556

Lifestyle Recovery Center

715 24th Street
Paso Robles, CA 93446
(805) 238-2290

SLO County Drug & Alcohol Services

3556 El Camino Real
Atascadero, CA 93422
(805) 461-6080

Cottage Outpatient Center of SLO

1035 Peach Street
San Luis Obispo, CA 93401
(805) 541-9113

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