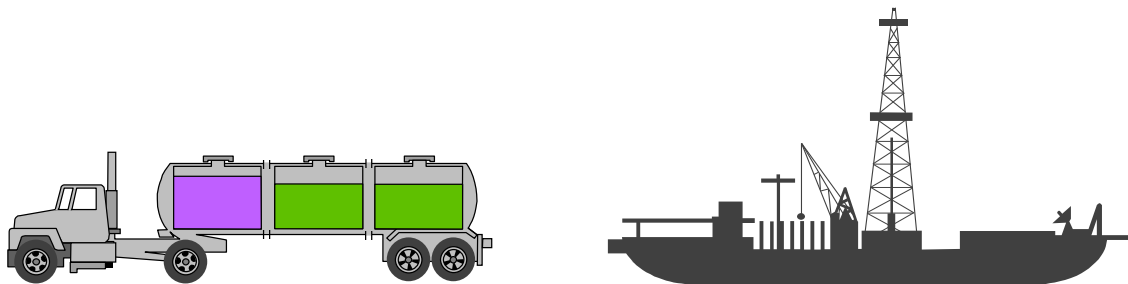


PHMSA



PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION

PHMSA DRUG AND ALCOHOL TESTING PROGRAM

SUBPART A - ANTI-DRUG PROGRAM

POLICY STATEMENT

The purpose of this subpart is to establish procedures for the administration of the Department of Transportation (DOT) anti-drug program pursuant to the Pipeline Safety Regulations, Code of Federal Regulations, Title 49 (49 CFR), Part 199, as amended or superseded, which, in turn, incorporates DOT Procedures for Transportation Workplace Drug Testing Programs, 49 CFR Part 40. Part 199 requires operators of gas systems to have an anti-drug program for persons who perform on these facilities operating, maintenance, or emergency-response functions covered by the DOT Pipeline Safety Standards in 49 CFR Part 192.

Any job applicant applying for a position covered in this policy who refuses or fails a pre-employment drug test will not be hired for the covered position. Any employee covered by this policy who refuses or fails a drug test will immediately be removed from duty. Any employee covered by this policy who refuses or fails a drug test may receive disciplinary action, up to and including termination.

INTRODUCTION

Unless the context clearly indicates otherwise, words and phrases utilized in this policy shall be defined and utilized as similar phrases are used in 49 CFR Part 40 and 49 CFR Part 191 and 199, as may be amended from time to time. In particular, the anti-drug program described herein shall utilize the concepts set forth in 49 CFR 191.3, 199.3, dealing with "accident," "DOT procedures," "fail a drug test," and "prohibited drug."

PROCEDURE

1. Employee Categories

- (a) Testing Program--Covered employee means a person who performs on a pipeline or at an LNG facility an operation, maintenance, or emergency-response function regulated by 49 CFR Parts 192, 193 or 195. Currently the following positions are covered employees and are subject to drug testing.

NOTE: See Attachment #1.

- (b) Employee Assistance Program (EAP) Training--Currently the following positions shall receive EAP training for detecting symptoms of drug use:

Gas Transmission and Distribution Manager
Engineer II/Utility Designer II
Gas and Electric Measurement Manager
Utility Field Services Manager
Lead Gas Worker

2. Types of Drug Testing

Employees/applicants subject to this drug testing program are required to be tested under the following circumstances:

(a) Pre-employment Testing

- (1) A pre-employment drug test will be conducted when an individual is offered employment in a position covered in this policy.
- (2) A pre-employment drug test will be conducted when a current employee transfers from a position not covered by this policy into a covered position.
- (3) Only applicants who are offered a position covered by this policy will be drug tested before being employed in a covered position. Pre-employment job applicants who test positive will not be hired. A valid negative test must be obtained. Employees transferring into a position requiring drug testing who test positive do have the right to have their split sample tested. Employees who fail a drug test will not be hired for the position requiring drug testing and are subject to disciplinary action up to and including dismissal.
- (4) An employee who transfers from one position covered by this policy to another covered by this policy does not require pre-employment drug testing.

(b) Random Testing

- (1) All employees working in a position covered by this policy are subject to unannounced drug testing based on random selection. This includes temporary employees performing work in a covered position.
- (2) The City will test at a rate equal to at least fifty percent (50%) of employees covered by this policy and the comparable CWA PHMSA Anti-Drug policy every twelve (12) months, divided on the basis set forth in paragraph six (6) below. All covered employees will be subject to be randomly picked for drug testing at each random testing date. A person may be randomly picked more than once or not picked at all during the annual period.
- (3) To assure that the selection process is random, all employees covered by this policy and the comparable CWA PHMSA Anti-Drug policy will be placed in a common pool. All permanent and temporary covered employees will be in this pool.
- (4) The random selection of employees will be determined using either a random number table or a computer-based number generator that is matched with the employee number.

- (5) The selection procedure will select sufficient additional numbers to be used to reach the appropriate testing level during the year.
- (6) Each month the department will drug test approximately 1/24 of the total number of employees in the pool at that time. The testing schedule will be determined each month by either Employee Health Services or the MRO.
- (7) An employee who fails a random drug test will be allowed a one-time opportunity for rehabilitation using a Substance Abuse Professional.

(c) Post-accident Testing

- (1) An "accident" on a gas pipeline or LNG facility is defined as an "incident" in 49 CFR, Section 191.3.
- (2) Employees working in positions covered by this policy whose performance either contributed to an accident or cannot be completely discounted as a contributing factor to the accident will be drug tested.
- (3) The employee will be tested as soon as possible, but no later than 32 hours after the accident. Because certain drugs or drug metabolites do not remain in the body for extended periods of time, testing should be as soon as possible.
- (4) All reasonable steps will be taken to obtain a urine sample from an employee after an accident. In case of a conscious but hospitalized employee, the hospital or medical facility will be requested to obtain a sample and, if necessary, reference will be made to the DOT drug testing requirements.
- (5) If an employee who is subject to post-accident testing is conscious, able to urinate normally (in the opinion of a medical professional) and refuses to be tested, that employee will be terminated.

(d) Reasonable Cause Testing

- (1) When there is reasonable cause to believe that an employee covered by this policy is using a prohibited drug, the employee will be required to take a drug test.
- (2) Two supervisors/managers from the department must agree to test an employee for reasonable cause. The supervisors/managers must be EAP trained in the symptoms of drug use.
- (3) A decision to test must be based on specific contemporaneous physical, behavioral, or performance indicators of probable drug use. Examples of this are evidence of repeated errors on the job;

regulatory, City, or department rule violations; or unsatisfactory time and attendance patterns; coupled with a specific contemporaneous event that indicates probable drug use.

- (4) Employees whose test results are negative will be allowed to return to work without loss of pay or benefits.
- (e) Return to Duty and Follow-up Testing
- (1) Return to duty testing. An employee who refuses to take or does not pass a drug test may not return to duty until the employee has been referred to a Substance Abuse Professional who shall determine the necessary treatment program and the return to duty and follow up testing requirement.. The requirement is for a negative test prior to returning to work and at least 6 follow up tests in the first 12 months following the employees return to duty. In addition, follow-up testing may include testing for up to 60 months as prescribed by the SAP.
 - (2) The time period for follow-up testing will not be more than 60 months. A reasonable minimum is 12 months. This period will be determined by the MRO/SAP.
 - (3) Follow-up testing will be conducted at daily, weekly, monthly or other basis at the discretion of the MRO/SAP.

3. Testing Procedures

- (a) Drug testing will be performed utilizing urine samples.
- (b) Tests for marijuana, cocaine, opiates, amphetamines, and phencyclidine will be performed.
- (c) An applicant who is offered a position covered by this policy will be required to report to the drug testing collection site specified in Section 6 of this policy within 24 hours of the job offer and provide a specimen of his/her urine.
- (d) Upon notification that a drug test is required, an employee will report within a reasonable amount of time after notification to the drug collection site and provide a specimen of his/her urine.
- (e) Refusal to take or submit to a DOT drug test means: As an employee/applicant, you have refused a drug test if you:
 - (1) Fail to appear for any test (except in the case of an applicant/pre-employment test) within a reasonable time, as determined by your employer, consistent with PHMSA regulations, after being directed to do so by the employer;
 - (2) Fail to remain at the testing site until testing process is completed; provided, that an applicant who leaves the testing

site before testing commences for a pre-employment test is not deemed to have refused a test:

- (3) Fail to provide a urine specimen for any drug test required by this part of PHMSA regulations; provided that an applicant who does not provide a urine specimen because he or she left the testing site before the testing process commences for a pre-employment test is not deemed to have refused to test;
- (4) In the case of a directly observed or monitored collection in a drug test, fail to permit the observation or monitoring of your provision of a specimen;
- (5) Fail to provide a sufficient amount of urine when directed, and has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- (6) Fail or decline to take a second test the employer or collector has directed you to take;
- (7) Fail to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER under 40.1930(d). In the case of a pre-employment test, the applicant is deemed to have refused to test on the basis only if the pre-employment test is conducted following a contingent offer of employment; or
- (8) Fail to cooperate with any part of the testing process (e.g. refuse to empty pockets when so directed by the collector, behaves in a confrontational way that disrupts the collection process).
- (9) As an employee, if you refuse to take a drug test you incur the same consequences specified under PHMSA regulations for a violation of those regulations.
 - a. As an employee when you refuse to take a non-DOT test or sign a non-DOT form, you have not refused to take a DOT test there are no consequences under PHMSA regulations for refusing to take a non DOT test.
 - b. Refusal to take an alcohol test means: As an employee applicant you have refused to take a test if you:
 - i. Fail to appear for any test (except in the case of an applicant or a pre-employment test) within a reasonable time as determined by the employer, consistent with the applicable PHMSA regulations, after being directed to do so by the employer:

- ii. Fail to remain at the testing site until the process is complete: provided that an applicant who leaves the testing site before the pre-employment testing process commences for a pre-employment test is not deemed to have refused to test;
- iii. Fail to provide amount of saliva or breath for any alcohol test required by this part or PHMSA regulations; provided that an applicant who does not provide an adequate amount of breath or saliva because he or she has left the testing site before the process commences for a pre-employment test is not deemed to have refused a test;
- iv. Fail to provide sufficient breath specimen and the physician has determined through a required medical evaluation, that there is no adequate explanation for failure;
- v. Fail to undergo a medical examination or evaluation, as directed by the employer as part of the insufficient breath procedures;
- vi. Fail to sign the certification at Step 2 of ATF;
- vii. Fail to cooperate with any part of the process;
- viii. As an employee, if you refuse to take an alcohol test you incur the same consequences specified under PHMSA regulations for a violation of those regulations.
- ix. As an employee, when you refuse to take a non-DOT form, you have not refused to take a DOT test and there are no consequences under PHMSA regulations for refusing to take a non-DOT test.

- (f) The collection agency shall adhere to all requirements outlined in 49 CFR Part 40, Procedures for Transportation Workplace Drug and Alcohol Testing Programs utilizing the split sample method of collection.

4. Medical Review Officer (MRO)

- (a) The name, address and phone number of the MRO for this policy is on file at Health Services.

NOTE: The MRO must be a licensed physician, with knowledge of drug abuse disorders. Reference U.S. Department of Health and Human Services Medical Review Officer Manual.

- (b) The MRO shall adhere to all requirements of 49 CFR Part 40 and 49 CFR 199.15, utilizing the split sample method.
- (c) The following is a general listing of the MRO's responsibilities.
 - (1) Receive positive confirmed results from laboratory.
 - (2) Request, if needed, a quantitative description of test results.
 - (3) Receive a certified copy of the original chain of custody.
 - (4) Review and interpret positive test results.
 - (5) Inform the tested individual and provide test results.
 - (6) Offer to conduct a medical interview with the tested individual.
 - (7) Review the individual's medical history or any other relevant biomedical factors.
 - (8) Give the individual an opportunity to discuss test results.
 - (9) Order an analysis of the split sample in a certified laboratory, if necessary.
 - (10) Consult with others if question of accuracy arises. Consistent with Part 10--Confidentiality.
 - (11) Consult with laboratory officials.
 - (12) Not confirm urinalysis results that do not comply with the Mandatory Guidelines.
 - (13) Not declare as positive an opiate-positive urine test without "clinical evidence."
 - (14) Determine whether a result is scientifically sufficient.
 - (15) Determine whether and when an employee who refused to take or did not pass a drug test administered under DOT procedures may be returned to duty.
 - (16) Determine whether a result is consistent with legal drug use.
 - (17) Advise Health Services of verified positive results.
 - (18) Maintain the required records to administer this program.

(Note: For additional details of responsibilities, see the U.S. Department of Health and Human Services (DHHS) Medical Review Officer Manual.)

5. Testing Laboratory

- (a) The testing laboratory for this policy is currently Doctors Laboratory, Inc. This laboratory may be changed in the future to another City-approved facility, providing advance notification is given.
- (b) The testing laboratory will comply with all methods and procedures of 49 CFR Part 40 and 49 CFR 199.13 and 199.17, utilizing split sample methods, and will provide annual reports to the City showing compliance.

6. Collection Agency

- (a) The collection agency for this policy is Doctors Laboratory, Inc. This collection agency may be changed in the future to another City-approved facility, provided advance notification is given.
- (b) The collection agency will comply with all methods and procedures of 49 CFR Part 40, utilizing the split sample method of collection, and will provide annual reports to the City showing compliance.

7. Employee Assistance Program (EAP)

- (a) Education--Every employee covered by this policy will receive the following drug use education.
 - (1) Drug information will be periodically distributed and displayed in the work areas.
 - (2) A copy of this policy will be given to each employee and displayed in the work area.
 - (3) The hot-line telephone number for employee assistance will be given to each employee and displayed in the work area.
- (b) Training--Every supervisor covered by this policy who will determine whether an employee must be drug tested based on reasonable cause, will receive the following drug use training:
 - (1) A 1-hour (minimum) training period on the specific, contemporaneous physical, behavioral, and performance indicators of probable drug use.
- (c) The City regards its employees as its most important asset. Accordingly, the City maintains an EAP which provides help to employees who suffer from alcohol or drug abuse and other personal or emotional problems. Employees with such problems should seek confidential assistance from the EAP or other community resources before drug or alcohol problems lead to disciplinary action. Employees may contact Employee Health Services for the name of the City's EAP. Information about a self-referred employee's contact with the EAP is confidential and will not be disseminated without the employee's permission. Further, an employee

is not subject to discipline solely as a result of a self-referral for treatment. However, use of the EAP or other community resources will not shield the employee from appropriate disciplinary action for violations of the City's Drug-Free Workplace Program if such violations come to the City's attention through other means, including but not limited to, reports from employees or outsiders, direct observation, or drug testing.

8. Discipline, Discharge, Return to Duty

- (a) Upon the City's receipt of a positive test result, an employee in a covered position shall be suspended with pay for five (5) working days or until the MRO determines whether or not a legitimate medical explanation exists for the confirmed positive test result. Employees must cooperate fully with the MRO. Failure to meet with the MRO upon his/her request, or to promptly provide requested information will result in the Employee immediately being placed upon suspension without pay, and may result in termination and discharge.
- (b) An employee who fails a random drug test will be allowed a one-time opportunity to participate in an Alcohol/Drug Rehabilitation Program or the City of Gainesville Employee Assistance Program (EAP) or other approved program as determined by the SAP, in lieu of being immediately discharged based upon such failure. Provided further, however, that allowing the Employee to participate in such program in lieu of being discharged is conditioned upon the Employee's execution of a written agreement describing his/her obligations under the program. Furthermore, such an opportunity will not be available to an employee who has previously participated in an Alcohol/Drug rehabilitation program, the City's EAP, or other approved similar program, as an alternative to discharge. Finally, employees allowed the rehabilitation opportunity described herein may still receive disciplinary action short of discharge in conjunction with the rehabilitation program.
- (c) Except as provided above, a covered employee's refusal to take or failure to pass a drug test is JUST CAUSE for dismissal.
- (d) Participation in a treatment program, be it entirely voluntary or pursuant to Section b, above, will not excuse work rule violations or poor performance and an employee may be disciplined or discharged for such offenses or failure to perform.

9. Record Keeping

- (a) The City will keep the following records for the period specified. The records described in subsections (1), (3), (4), and (5) below will be maintained in Employee Health Services. The records described in subsection (2) shall be maintained by the MRO.
 - (1) Records that demonstrate the collection process conforms to Part 199 will be kept for a minimum of 3 years.

- (2) Records of drug test results that show employees or applicants who failed a drug test, and the type of test failed and records that demonstrate employee rehabilitation, if any, will be kept for a minimum of 5 years, and as to employee records include the following information:
 - (i) The functions performed by each employee who fails the drug test.
 - (ii) The prohibited drugs which were used by each employee who fails the drug test.
 - (iii) The disposition of each employee who fails the drug test (e.g. termination, rehabilitation, leave without pay, etc.)
- (3) Records of employee drug test results that show employees passed a drug test will be kept for a minimum of 1 year.
- (4) A record of the number of employees tested by type of test (e.g., post-accident) will be kept for a minimum of 5 years.
- (5) Records confirming that supervisors and employees have been trained as required by this policy will be kept for a minimum of 3 years. Training records will include copies of all training materials.

10. Confidentiality

- (a) Each individual's record of testing and results under this policy will be maintained private and confidential to the extent allowed by law. With the exception of the testing laboratory, MRO, designated manager, and the Employee Health Services representative, and, if necessary, as part of a judicial or administrative proceeding, or upon request of PHMSA or State agency officials as part of an accident investigation, the results of individual drug tests will not be released to anyone without the expressed written authorization of the individual tested. Prior to testing, the individual will be informed about who will receive test data (e.g., testing laboratory, MRO, Human Resources Director).
- (b) All written records will be stored in locked containers or in a secure location with access available only by the individuals listed above.
- (c) To the extent allowed by law, unless an employee gives his or her written consent, the employee's drug testing and/or rehabilitation records will not be released to a subsequent employer.

ANTI-DRUG PROGRAM

ATTACHMENT #1

The following positions will be subject to drug testing:

- Measurement Technician
- Measurement Technician – Gas
- Measurement Technician Trainee - Gas
- Facilities Protection Technician – Gas
- Lead Gas Worker
- Office Assistant - Gas
- Gas Worker Apprentice
- Gas Worker Trainee
- Field Services Specialist
- Energy Delivery Facilities Specialist I
- Energy Delivery Facilities Specialist II
- Energy Delivery Specialist Senior
- Gas Transmission and Distribution Manager
- Gas and Electric Measurement Manager
- Field Service Technician Apprentice
- Meter Services Supervisor
- Meter Services Dispatcher
- Energy Services Supervisor
- Gas Measurement Technician
- Gas Measurement Supervisor
- Gas Operations Supervisor
- Utilities Location Supervisor
- Operations Assistant
- Location Technician
- System Operators
- Systems Operator I
- Systems Operator II
- Current Diversion Technician
- Utility Field Services Manager
- Field Services Technician
- Engineer II/Utility Designer II
- Line Technician
- Lead Line Technician

PHMSA DRUG AND ALCOHOL TESTING PROGRAM

SUBPART B - ALCOHOL MISUSE PREVENTION PROGRAM

1. Purpose

The purpose of this subpart is to establish programs designed to help prevent accidents and injuries resulting from the misuse of alcohol by employees who perform covered functions for operators of certain pipeline facilities.

2. Definitions

As used in this subpart:

Accident means an incident reportable under 49 CFR Part 191, involving gas pipeline facilities or LNG facilities, or an accident reportable under 49 CFR Part 195, involving hazardous liquid or carbon dioxide pipeline facilities.

Alcohol means the intoxicating agent in beverage alcohol, ethyl alcohol or other low molecular weight alcohols including methyl or isopropyl alcohol.

Alcohol concentration (or content) means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test under this subpart.

Alcohol use means the consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.

Confirmation test means a second test, following a screening test with a result 0.02 or greater, that provides quantitative data of alcohol concentration.

Covered employee means a person who performs on a pipeline or at an LNG facility an operation, maintenance, or emergency-response function regulated by 49 CFR Parts 192, 193, or 195. *Covered employee* and *individual* or *individual to be tested* have the same meaning for the purposes of this subpart. The term covered employee does not include clerical, truck driving, accounting, or other functions not subject to 49 CFR Parts 192, 193 or 195.

Covered function (safety-sensitive function) means an operation, maintenance, or emergency-response function that is performed on a pipeline or LNG facility and the function is regulated by 49 CFR Parts 192, 193, or 195, including, but not limited to, activities and operations described and dealt with in subparts F, H, L and M of 49 CFR Part 192.

On duty means all times from the time a covered employee begins to work or is required to be in readiness to work until the time he/she is relieved from work and all responsibility for performing work.

Performing (a covered function): An employee is considered to be performing a covered function (safety-sensitive function) during any period in which he or she is actually performing, reading to perform, or immediately available to perform such covered functions.

Refuse to submit (to an alcohol test) means that a covered employee fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement to be tested in accordance with the provisions of this subpart, or engages in conduct that clearly obstructs the testing process.

Screening test means an analytical procedure to determine whether a covered employee may have a prohibited concentration of alcohol in his or her system.

Substance abuse professional means a licensed physician (Medical Doctor or Doctor of Osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission), with knowledge of an clinical experience in the diagnosis and treatment of alcohol-related disorders.

3. Alcohol Prohibitions

- (a) No covered employee shall report for duty or remain on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.04 or greater.
- (b) No covered employee shall be on duty or perform a covered function while the covered employee possesses alcohol.
- (c) No covered employee shall use alcohol while on duty.
- (d) No covered employee shall perform safety-sensitive functions within four hours after using alcohol, or if called out, within the time period after the covered employee has been ordered to report to work.
- (e) No covered employee who would be required to take a post-accident alcohol test shall use alcohol for eight hours following the accident, or until he/she undergoes a post-accident alcohol test, whichever occurs first.

4. Refuse to Submit

No covered employee shall refuse to submit to a post-accident alcohol test required under this subpart, a reasonable suspicion alcohol test required under

this subpart, a return to duty alcohol test, or a follow-up alcohol/drug test required under this subpart.

5. Consequences

Any covered employee who violates any of the provisions of Subsections 3 or 4 of this subpart or whose positive test for alcohol is at a result of 0.04 or greater or who otherwise violates the provisions of this subpart will be removed immediately from safety sensitive functions and is subject to disciplinary action up to and including dismissal. Each covered employee who engages in conduct prohibited by subsection 3 or 4 or who tests positive for alcohol at 0.04 or greater shall be evaluated by a substance abuse professional who shall determine what assistance, if any, the employee needs in resolving problems associated with alcohol misuse. Dismissals for a first offense will be considered an appropriate penalty absent mitigating circumstances. Covered employees who test positive for alcohol with a concentration of 0.02 or greater but less than 0.04 shall be immediately removed from performance of safety sensitive functions for the remainder of their shift and that of the entire next scheduled shift if the next scheduled shift would begin in less than twenty four (24) hours after the test.

If the covered employee is suspended, vacation or sick leave may be used in lieu of being in a no pay status. Use of vacation with respect to this section (5) will be granted on a one time basis; up to a maximum of two (2) shifts. The covered employee may be subject to additional disciplinary action.

In the event that the City requires the employee's presence at the collection site outside normal working hours as part of the testing process and the employee passes the drug/alcohol test, such required time outside normal working hours shall be considered actual time worked for the purpose of Section 13.4 of the CWA labor agreement, if applicable.

6. Alcohol Tests Required

(a) Post-accident

(1) As soon as practicable following an accident, but no later than eight (8) hours following the accident, each surviving covered employee shall be tested for alcohol if that employee's performance of a covered function either contributed to the accident or cannot be completely discounted as a contributing factor to the accident.

(2) A covered employee who is subject to post-accident testing who fails to remain readily available for such testing, including notifying management of his/her location if he/she leaves the scene of the accident prior to submission to such test, may be deemed to have refused to submit to testing. Nothing in this section shall be

construed to require the delay of necessary medical attention for injured people following an accident or to prohibit a covered employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident or to obtain necessary emergency medical care.

(b) Reasonable Suspicion Testing

- (1) A covered employee shall be required to immediately submit to an alcohol test when the City has reasonable suspicion to believe that the employee has violated the prohibitions in this subpart.
- (2) The City's determination that reasonable suspicion exists to require the covered employee to undergo an alcohol test shall be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the employee. The required observations shall be made by a supervisor/manager who is trained in detecting the symptoms of alcohol misuse. The supervisor/manager who makes the determination that reasonable suspicion exists shall not conduct the breath alcohol test on that employee.
- (3) Alcohol testing is authorized by this subsection only if the observations required by paragraph (b)(2) of this subsection are made during, just preceding, or just after the period of the work day that the employee is required to be in compliance with this subpart. A covered employee may be directed to undergo reasonable suspicion testing for alcohol only while the employee is performing covered functions; just before the employee is to perform covered functions; or just after the employee has ceased performing covered functions. Notwithstanding the absence of a reasonable suspicion alcohol test under this section, a covered employee shall not report for duty or remain on duty requiring the performance of covered functions while the employee is under the influence of or impaired by alcohol, as shown by the behavioral, speech, or performance indicators of alcohol misuse.

(c) Return-To-Duty Testing

Before a covered employee returns to duty requiring the performance of a covered function after engaging in conduct prohibited by this subpart (except section 3(b)), the employee shall undergo a return-to-duty alcohol test with a result indicating an alcohol concentration of less than 0.02.

(d) Follow-up Testing

- (1) Following a determination under this subpart that a covered employee is in need of assistance in resolving problems associated with alcohol misuse, the employee shall be subject to unannounced follow-up alcohol and drug testing as directed by a substance abuse professional in accordance with the provisions of this subpart.
- (2) Follow-up testing shall be conducted when the covered employee is performing covered functions; just before the employee is to perform covered functions; or just after the employee has ceased performing such functions.

7. Testing Procedures

Testing procedures for alcohol tests required by this subpart shall be in conformance with 49 CFR Part 40, Subparts C and D, a copy of which is attached hereto, except as modified by this subpart. A summary of Subparts C and D of 49 CFR Part 40, prepared by J.J. Keller and Associates is available for review (but not copying since this is copyrighted material) at the Human Resources Department. The list of the covered employees is attached hereto and on file at the Human Resources Department. The Human Resources Director is the City official designated to answer questions about the testing procedures as well as any other matter covered in this program.

8. Handling of Test Results, and Confidentiality

- (a) Handling of test results and confidentiality shall be in accordance with 49 CFR Part 40, except as modified below.
 - (1) Except as required by law or expressly authorized or required in this section, the City shall not release covered employee information that is contained in records required to be maintained under 49 CFR §199.227.
 - (2) A covered employee is entitled, upon written request, to obtain copies of any records pertaining to the employee's use of alcohol, including any records pertaining to his or her alcohol tests. The City shall promptly provide the records requested by the covered employee. Access to a covered employee's records shall not be contingent upon payment for records other than those specifically requested.
 - (3) The City shall release information regarding a covered employee's records as directed by the specific, written consent of the covered employee authorizing release of the information to an identified

person. Release of such information is permitted only in accordance with the terms of the employee's consent.

- (4) Records shall be made available to a subsequent employer upon receipt of a written request from a covered employee.
- (5) The City may disclose information required to be maintained under 49 CFR 199, Subpart B, pertaining to a covered employee, to the decision-maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual, and arising from the results of an alcohol test administered under this subpart, or from the employers' determination that the covered employee engaged in conduct prohibited by Sections 3 or 4 (except 3(b) of this subpart (including but not limited to, a workers compensation, unemployment compensation, or other proceeding relating to a benefit sought by the covered employee)).
- (6) The City shall permit access to all facilities utilized in complying with the requirements of this part to the Secretary of Transportation, any DOT agency, or any state or local officials with regulatory authority over the employer or any of its covered employees.
- (7) The City shall make available copies of all results for City alcohol testing conducted under this subpart and any other information pertaining to this alcohol misuse prevention program, when requested by the Secretary of Transportation, any DOT agency, or any state or local officials with regulatory authority over the employer or any of its covered employees.
- (8) When requested by the National Transportation Safety Board as part of an accident investigation, the City shall disclose information related to its administration of a post-accident alcohol test administered following the accident under investigation.

9. Referral, Evaluation and Treatment

- (a) Each covered employee who has engaged in conduct prohibited by this subpart (except 3(b)) shall be advised of the resources available to the covered employee in evaluating and resolving problems associated with the misuse of alcohol, including the names, addresses, and telephone numbers of substance abuse professionals and counseling and treatment programs.
- (b) Each covered employee who engages in conduct prohibited under this subpart (except 3(b)) shall be evaluated by a substance abuse professional designated by the City, who shall determine what assistance,

if any, the employee needs in resolving problems associated with alcohol misuse.

- (c) In addition, each covered employee identified as needing assistance in resolving problems associated with alcohol misuse:
 - (1) Shall be evaluated by a substance abuse professional designated by the City, to determine that the employee has properly followed any rehabilitation program prescribed under paragraph (9)(b) of this subsection, and
 - (2) Shall be subject to unannounced follow-up alcohol tests administered by the City following the employee's return to duty. The number and frequency of such follow-up testing shall be determined by a substance abuse professional, but shall consist of at least six tests in the first 12 months following the employee's return to duty. In addition, follow-up testing may include testing for drugs, as directed by the substance abuse professional, to be performed in accordance with 49 CFR Part 40. Follow-up testing shall not exceed 60 months from the date of the employee's return to duty. The substance abuse professional may terminate the requirement for follow-up testing at any time after the first six tests have been administered, if the substance abuse professional determines that such testing is no longer necessary.

10. Notification of Alcohol Test Results

In accordance with the provisions of 49 CFR Part 40, the results of both the screening and confirmation of the breath alcohol test are displayed to the individual being tested immediately after the tests. The breath alcohol technician transmits the results to the City in a confidential manner, in writing, in person, or by telephone or electronic means. For more information, see 49 CFR Part 40, Subpart C.

11. Alcohol, Drug Effects and Symptoms, and Intervention Methods

(a) Symptoms and Effects of Alcohol

Alcohol or drug problems usually manifest themselves in an employee's work performance, behavior, and appearance. Some of the warning signs of any substance abuse are:

- Excessive absenteeism (especially after weekends and holidays)
- Frequent need to borrow money
- Avoidance of supervisors

Lack of concentration or decreased productivity after lunch or breaks
Unsatisfactory work performance
Drastic weight changes
Bloodshot eyes, runny nose
Deterioration in personal grooming and hygiene
Agitation, rapid or slurred speech, dilated pupils
Pattern of accidents
Wearing of sunglasses and long-sleeved shirts at inappropriate times

(1) Effects of Alcohol Use

The chronic use of alcohol [three servings per day of beer (12 ounces), whiskey (1 ounce) or wine (6 ounces)] may result in the following:

(i) Effects on Health:

Dependency
Kidney disease
Ulcers
Fatal liver diseases
Alcohol Related Birth Defects
Inflammation of the heart muscle
Permanent brain damage

(ii) Effects on Work:

Slows down physical responses
Progressively impairs mental functions
Slowed reaction times
More than 6 times more likely to have an accident
Confusion
Loss of memory, judgment and learning ability
Permanent brain damage

(iii) Effects on Personal Life:

Separation and divorce rate is 7 times the average
Two-thirds of all Americans will be involved in an alcohol-related vehicle accident
15 times more likely to commit suicide
Permanent brain damage

(2) Signs and Symptoms of Alcohol Use

Odor of alcohol on breath
Lack of coordination
Slurred speech
Sleepy or stuporous condition
Dulled mental process
(except for odor, these are signs and symptoms of any depressant substance)

(b) Symptoms and Effects of Drug Abuse

(1) Effects of Drug Abuse on Work, Health, and Personal Life

(i) Marijuana

Irritation to the lungs
Cancer
Delayed decision making
Impaired short-term memory
Impaired signal detection (risk for users operating machinery)
Long-term effect on performance

(ii) Cocaine

Strong psychological dependency
Strokes and heart attacks
Death
Paranoia and withdrawal causing unpredictable and violent behavior

(iii) Opiates

High risk for contracting hepatitis and AIDS due to sharing needles
Increased pain tolerance - failure to seek medical attention
Higher risk for accident caused by mental clouding and drowsiness
Financial problems

(iv) Amphetamines

Heart and brain damage
Heart attack and stroke
Withdrawal may cause severe physical and mental

depression
Toxic psychosis - resembles schizophrenia

(v) Phencyclidine (PCP)

Irreversible memory loss
Personality changes
Thought disorders
Death
Suicidal tendencies and mental dysfunction
Acute toxicity - possibly causing combativeness, catatonia, convulsions and coma

(2) Signs and Symptoms of Drug Abuse

(i) Marijuana

Reddened eyes
Distinctive odor on clothing
Chronic fatigue and lack of motivation
Chronic sore throat

(ii) Cocaine

Financial problems
Runny or irritated nose
Difficulty in concentration
Secretive behaviors, frequent non-business visitors, delivered packages, phone calls
Wide mood swings - unusual defensiveness, anxiety, agitation
Insomnia
Talkativeness
Forgetfulness, absenteeism, tardiness and missed assignments

(iii) Opiates

Mood changes
Nausea, vomiting, and constipation
Impaired mental functioning and alertness
Depression
Fatigue

(iv) Amphetamines

Increased heart rate and pupils
Confusion, panic
Inability to concentrate
Profuse sweating

(v) Phencyclidine (PCP)

Extreme mood shift
Muscle rigidity
Jerky eye movements
Confusion and agitation
Dizziness

(c) Intervention Methods

- (1) Participation in an employee assistance program or a drug rehabilitation program or other community assistance program shall be paid for to the extent authorized under the City's Health Insurance Program, whether the particular program is selected by the employee or the City. Information regarding the City's Health Insurance Program can be obtained from the Risk Management.
- (2) The following is a list of drug and alcohol treatment programs within the Alachua and Marion County areas. The City does not recommend or endorse any of the programs. This list is provided for information only.

**Alachua and Marion County
Drug and Alcohol Treatment Programs
and Employee Assistance Programs
Non-Blue Cross and Blue Shield Providers**

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
Charter Springs Hospital Inc. & Charter Counseling Center	2631 NW 41st Street Suite E-5, Foxbridge III Gainesville, FL 32606	(352) 371-2335
Mental Health Center, Inc. of North Florida	4300 SW 13th Street Gainesville, FL 32608	(352) 374-5600
Sid Martin Bridge House	4400 SW 13th Street Gainesville, FL 32608	(352) 374-5615 (800) 330-5616
Alachua Associates	3601 SW 2nd Avenue, Suite V Gainesville, FL 32607	(352) 335-4004
Vista Pavilion	8900 NW 39th Avenue Gainesville, FL 32606	(352) 338-0097
Charter Springs Hospital, Inc.	3130 SW 27th Avenue Ocala, FL 32674	(352) 237-7293
Fountain Ctr. of Ocala. Forest, Inc	25011 NE County Hwy. 314 Salt Springs, FL 32134	(352) 685-1010 (800) 762-3707
Marion-Citrus Mental Health Centers	717 SW Martin Luther King Jr. Avenue Ocala, FL 32674	(352) 629 8893
VA Hospital	1601 SW Archer Road Gainesville, FL 32608	(352) 376-1611

**Alachua and Marion County
Drug and Alcohol Treatment Programs
and Employee Assistance Programs
Blue Cross and Blue Shield Providers**

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
Clinical Psychology Associates of North Central Florida (EAP for employee and covered family members)	2121 NW 40th Terrace Gainesville, FL 32605	(352) 336-2888
City of Gainesville Employee Assistance Program (For City employees and covered family members)	3221 NW 13th Street Suite D-1 Gainesville, FL 32609	(352) 375-1414
Community Behavioral Service	1212 NW 12th Avenue Gainesville, FL 32601	(352) 372-6645
Corner Drug Store of Gainesville (CDS), Inc.	1300 NW 6th Street Gainesville, FL 32601	(352) 378-1588
Vista Pavilion	8900 NW 39th Avenue Gainesville, FL 32606	(352) 338-0097
Quad County Treatment Center	913 E Silver Springs Blvd Ocala, FL 34470	(352) 732-6565

NOTE: The City does not recommend or endorse any of the above programs. This list is provided for your information.

All Code of Federal Regulations or State Statutes addressed in this document are available for review in the City of Gainesville's Human Resources Office.