

I. Pre-Test Considerations and Procedures

Per policy 207.00, an employee may be subject to initiation of the testing process if they have an accident, or you believe them to be under the influence of drugs or alcohol, or in possession of a prohibited substance. *Any questions regarding this policy should be directed to your HR Partner.*

Before confronting

Prior to confronting the employee who may be subject to the testing process, you should prepare yourself by doing the following:

- Review the Drug & Alcohol Testing Policy and Procedures
- If Reasonable Suspicion:
 - Complete the Reasonable Suspicion Determination Checklist
 - Confirm your suspicion with at least one other supervisor or other administrative official who has completed the required training under the Drug & Alcohol Testing policy by having them complete a Reasonable Suspicion Determination Checklist as well. Both individuals will need to discretely observe and separately document the behavior on the checklist.
 - Contact your HR Partner via telephone and fax or scan and email the checklists to them. Audrey O'Neal – 348-0801; Todd Copeland 348-5818; If your HR Partner is not available, call the main HR number at 348-6690. If after HR business hours (M-F 8 to 5) contact UAPD at 348-5454 and they will forward your call to an HR Partner.
 - If you receive verbal authorization to proceed, then meet with the employee.
- If Post-Accident, confirm that the accident meets the policy guidelines for testing.

Meeting With the Employee for Reasonable Suspicion

The following actions need to be taken by the supervisor prior to sending an employee for testing:

- Take the employee to a suitable location that will ensure privacy and no distractions. This conversation is strictly confidential and must remain as such. Information gathered during this conversation can only be released to those who have a business need to know.
- Advise the employee that the observed behaviors warrant the initiation of the testing policy. Describe the behavior observed and ask the employee to explain their behavior. Take notes. Ask as many questions as necessary to get the facts.
- If the employee refuses to cooperate, advise the employee that under the Drug & Alcohol Testing policy failure to cooperate will result in disciplinary action up to and including termination of employment.
- While interviewing the employee, note their behavior and appearance.
- If you do not have sufficient basis or "reasonable grounds" to believe a violation exists, do not proceed. Simply re-educate the employee as to the University's firm stance on its Drug & Alcohol testing policy and have them sign a copy of the policy. Continue to monitor the employee if needed.

II. Reasonable Suspicion

If you have established you have “reasonable suspicion” which includes having another official confirm that suspicion and HR’s authorization, you are required to have the employee submit to a substance screen on the University’s time and expense.

If the employee voluntarily agrees to the testing, take the employee to the lab which is available at that time with the University Medical Center (UMC) being the first choice.

If the incident occurs during UMC’s lab hours of operation, then take the employee to the UMC lab. Call 348-1228 to notify the lab you will be bringing an employee for testing.

Monday, Wednesday and Friday	7:30 a.m. – 5:30 p.m.
Tuesday and Thursday	7:30 a.m. – 8:30 p.m.
Monday and Wednesday*	7:30 a.m. – 8:00 p.m.*

*The extended hours on Mondays and Wednesdays only apply during the fall and spring semesters when classes are in session.

A supervisor or manager must drive the employee to the lab and wait for the initial results. If the initial results are negative, the employee can return to work. *If the initial results are positive or questionable, then:*

- The employee may not return to work and is placed on administrative leave.
- Do not allow the employee to drive a vehicle from the work premise; however, do not restrain or use force to prevent this either.
- It is ultimately the employee’s responsibility to arrange transportation home.
- If the employee refuses transportation, advise him/her that under the policy you are required to report him/her to the police if he/she attempts to drive a vehicle.
- Send the original checklists with all applicable documentation to the HR Partner within 48 hours after the incident. Do not retain a copy.

If the incident occurs outside of UMC’s lab hours, take the employee to the DCH Main Lab for testing. Because DCH does not provide immediate test results, in all cases involving reasonable suspicion the following steps must be followed:

- The employee may not return to work and is placed on administrative leave.
- Do not allow the employee to drive a vehicle from the work premise; however, do not restrain or use force to prevent this either.
- It is ultimately the employee’s responsibility to arrange transportation home.
- If the employee refuses transportation, advise him/her that under the policy you are required to report him/her to the police if he/she attempts to drive a vehicle.
- Send the original checklists with all applicable documentation to the HR Partner within 48 hours after the incident. Do not retain a copy.

If the employee refuses the request for testing, inform the employee once again of the Drug & Alcohol Testing Policy and that employment can be terminated for refusing to submit to the test.

1. If the employee continues to refuse, proceed as follows:
 - The employee must leave work and is placed on administrative leave.
 - Do not allow the employee to drive a vehicle from the work premise: however, do not restrain or use force to prevent this either.
 - It is ultimately the employee's responsibility to arrange transportation home.
 - If the employee refuses transportation, advise him/her that under the policy you are required to report him/her to the police if he/she attempts to drive a vehicle.
 - Contact your HR Partner to determine the appropriate disciplinary action.

III. Post-Accident

An employee who meets the Post-Accident testing guidelines as outlined in policy 207.00 will be subject to drug and alcohol testing.

If medical treatment is needed as a result of an accident:

- Follow normal protocol for getting medical treatment.
- If the employee goes to the Faculty-Staff Clinic at UMC the employee will be tested consistent with the policy.
- If the accident is after hours for the UMC Faculty-Staff Clinic, then the employee goes to the DCH Emergency Room and will be tested consistent with the policy.

If medical treatment is not needed:

- Employee will be tested at UMC Lab during stated hours of operation as listed on page 2.
- If the accident is after hours for the UMC Lab, the employee will be tested at the DCH Main Lab.

Post- testing steps for both UMC and DCH:

- If released by the physician or if medical treatment is not required the employee may immediately return to work while awaiting drug test results.
- *If the initial test results are positive or questionable, then:*
 - The employee may not return to work and is placed on administrative leave.
 - Do not allow the employee to drive a vehicle from the work premise; however, do not restrain or use force to prevent this either.
 - It is ultimately the employee's responsibility to arrange transportation home.
 - If the employee refuses transportation, advise him/her that under the policy you are required to report him/her to the police if he/she attempts to drive a vehicle.
 - Send the original checklists with all applicable documentation to the HR Partner within 48 hours after the incident. Do not retain a copy.

If the employee refuses the request for testing, inform the employee once again of the Drug & Alcohol Testing Policy and that employment can be terminated for refusing to submit to the test.

IV. Results of Investigation, Testing or Search

The results of the drug and alcohol test will be communicated to the appropriate HR Partner who will then relay it to the supervisor.

If there is NO violation:

If it is clear that no violation of our policy exists, either after the investigation, testing, or search, tell the employee that he/she was found not to be in violation of the policy.

If there is a violation:

If it is absolutely clear the employee has violated our policy, the supervisor and HR Partner will discuss the appropriate course of action. If needed, an Employee Corrective Counseling form will be completed. Once this is finalized, the supervisor will meet with the employee to communicate the outcome of the review.

V. Confidentiality

Keep all results of employee's tests, searches and investigations confidential. Keep all discussion confidential and limited to those who have a legitimate business need to know.

Supervisor Instructions for Reasonable Suspicion Checklist

1. Complete the Reasonable Suspicion Determination Checklist when an incident, report or observation has occurred that causes you to have a reasonable suspicion that an employee may be under the influence of drugs or alcohol.
2. Contact another official who has been trained and have them complete a Reasonable Suspicion Determination Checklist and return to you.
3. If both observers recommend an alcohol/drug test for the employee in question, contact your HR Partner. (Audrey O'Neal, 348-0801 or Todd Copeland, 348-5818) If your HR Partner is not immediately available, call the main HR number at 348-6690. If the incident is outside of HR business hours (M-F 8 to 5) contact UAPD switchboard at 348-5454 and they will forward your call to an HR Partner.
4. After contacting your HR Partner via telephone or in person, immediately fax, scan and email, or hand carry a copy of this checklist **and** that of the 2nd observer to the HR Partner, if possible.
5. If you receive verbal authorization from the HR Partner to proceed then meet with the employee to make a final determination.
6. If the final decision is that a drug and alcohol screen is warranted, contact the UMC Lab (348-1228) to notify them you are bringing someone for testing and then transport the employee to the UMC (hours of operation listed below) and wait for the initial results.

Monday, Wednesday and Friday	7:30 a.m. – 5:30 p.m.
Tuesday and Thursday	7:30 a.m. – 8:30 p.m.
Monday and Wednesday*	7:30 a.m. – 8:00 p.m.*

*The extended hours on Mondays and Wednesdays only apply during the fall and spring semesters when classes are in session.

 - If the initial results are negative, the employee can return to work.
 - If the initial results are positive or questionable, or if the employee refuses to submit to testing then:
 - The employee is sent home and is placed on administrative leave.
 - Do not allow the employee to drive a vehicle from the work premise; however, do not restrain or use force to prevent this either.
 - It is ultimately the employee's responsibility to arrange transportation home.
 - If the employee refuses transportation, advise him/her that under the policy you are required to report him/her to the police if he/she attempts to drive a vehicle.
7. If testing is needed outside of UMC Lab hours, take the employee to the DCH Lab. Since drug test results are not immediately available the employee: (1) may not return to work, (2) is placed on administrative leave and (3) must arrange for their own transportation home.
8. Send the **original** checklist with all applicable documentation to the HR Partner within 48 hours after the incident. Do not retain a copy.

Reasonable Suspicion Determination Checklist for Financial Affairs

Employee: _____

Date: _____

Observed by: _____

Time: _____

REASONABLE SUSPICION OBSERVATIONS

A. NATURE OF THE ACCIDENT OR INCIDENT/CAUSE FOR SUSPICION

- | | |
|---|--|
| <input type="checkbox"/> 1. Observed/reported possession or use of a controlled substance | <input type="checkbox"/> 4. Observed abnormal or erratic behavior |
| <input type="checkbox"/> 2. Observed/reported possession or consumption of alcohol while on the job | <input type="checkbox"/> 5. Arrest for a drug-related offense |
| <input type="checkbox"/> 3. Observed/reporting to work under the influence of alcohol as outlined in the policy | <input type="checkbox"/> 6. Other* (e.g., flagrant violation of safety regulations, serious fighting or argumentative/abusive language, refusal of supervisor instructions, unauthorized absence from work site) |

B. UNUSUAL BEHAVIOR

- | | |
|---|---|
| <input type="checkbox"/> 1. Verbal abusiveness | <input type="checkbox"/> 4. Withdrawal, depression, mood changes, or unresponsiveness |
| <input type="checkbox"/> 2. Physical abusiveness | <input type="checkbox"/> 5. Inappropriate verbal response to questioning or instructions |
| <input type="checkbox"/> 3. Extreme aggressiveness or agitation | <input type="checkbox"/> 6. Other erratic or inappropriate behavior* (e.g., hallucinations, disorientation, excessive euphoria, confusion). |

C. PHYSICAL SIGNS OR SYMPTOMS

- | | |
|--|--|
| <input type="checkbox"/> 1. Possessing, dispensing, or using controlled substance | <input type="checkbox"/> 11. Odor of alcohol |
| <input type="checkbox"/> 2. Slurred or incoherent speech | <input type="checkbox"/> 12. Odor of marijuana |
| <input type="checkbox"/> 3. Unsteady gait or other loss of physical control; poor coordination | <input type="checkbox"/> 13. Dry mouth (frequent swallowing/lip wetting) |
| <input type="checkbox"/> 4. Dilated or constricted pupils or unusual eye movement | <input type="checkbox"/> 14. Dizziness or fainting |
| <input type="checkbox"/> 5. Bloodshot or watery eyes | <input type="checkbox"/> 15. Shaking hands or body tremors/twitching |
| <input type="checkbox"/> 6. Extreme fatigue or sleeping on the job | <input type="checkbox"/> 16. Irregular or difficult breathing |
| <input type="checkbox"/> 7. Excessive sweating or clamminess to the skin | <input type="checkbox"/> 17. Runny nose and/or sores around nostrils |
| <input type="checkbox"/> 8. Flushed or very pale face | <input type="checkbox"/> 18. Inappropriate wearing of sunglasses |
| <input type="checkbox"/> 9. Highly excited or nervous | <input type="checkbox"/> 19. Puncture marks or "tracks" |
| <input type="checkbox"/> 10. Nausea or vomiting | <input type="checkbox"/> 20. Other* |

D. WRITTEN SUMMARY

Summarize the facts and circumstances of the accident or incident, employee response, supervisor actions, and any other pertinent information not previously noted on this form. Attach additional sheets as needed.

Based on my observations as noted on this checklist, I recommend that an alcohol/drug test be administered in accordance with FA's Drug and Alcohol Policy. Yes No

Signature of Observing Supervisor or Other Official

Date