

PERSONNEL AND NEGOTIATIONSSTAFF CONDUCTDrug and Alcohol Testing and the Omnibus Transportation
Employee Testing Act of 1991

The West Genesee Central School District acknowledges its commitment to the community and the children they serve, and its responsibility to assure that the children and employees of the District are transported in a safe and responsible manner. West Genesee Central School District will implement a District-based alcohol and drug testing program to help prevent accidents and injuries resulting from the misuse of alcohol and drugs by covered drivers of commercial motor vehicles, and develop District regulations including but not limited to compliance with the Department of Transportation (DOT) Regulations codified at 49 CFR Part 40, and 49 CFR Part 382, and pursuant to The Omnibus Transportation Act of 1991, enacted October 28, 1991.

This policy applies to all District employees who operate commercial motor vehicles and are subject to the commercial drivers license (CDL) requirements established by the DOT and by the District as a condition of employment.

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First
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WEST GENESEE CENTRAL SCHOOL DISTRICT
REGULATIONS ON DRUG AND ALCOHOL TESTING

I. Purpose

To establish a District-based alcohol and drug testing program to help prevent accidents and injuries resulting from the misuse of alcohol and drugs by covered drivers of commercial motor vehicles in compliance with the Department of Transportation Regulations codified at 49 CFR Part 40, and 49 CFR Part 382, and pursuant to The Omnibus Transportation Employee Testing Act of 1991, enacted October 28, 1991.

II. Applicability

These District Regulations apply to all District employees who operate commercial motor vehicles and are subject to the commercial driver's license (CDL) requirements established by the DOT.

III Objectives

To establish rules and procedures to deter all illegal drug use and deter on-duty, pre-duty and post-accident alcohol use, as well as on-duty alcohol impairment stemming from pre-duty use, for all covered drivers who perform safety sensitive functions;

To detect and eliminate the possibility that District covered drivers will perform safety-sensitive functions after testing positive for alcohol or drugs;

To comply with applicable federal and state laws, including the Omnibus Transportation Employee Testing Act of 1991;

To provide reasonable measures for the early detection of personnel not fit to perform activities within the scope of these District Regulations;

To maintain a workplace free of drugs and alcohol; and

To inform employees through education, in service training and other appropriate forums, about illegal drugs, and alcohol abuse, their use, possession, distribution, and the effects of such substances.

IV. Testing

There are several occasions when an individual will be subject to drug and alcohol screening tests pursuant to these District Regulations. Prior to the administration of the following tests, the District or its testing agent will notify the covered driver that the test is required under the Code of Federal Regulations. Costs for collecting and testing pre-duty, random, reasonable suspicion and post-accident testing, including third party consultants, if any, will be the responsibility of the District. Costs for any other tests, including all split sample tests requested by the covered driver, will be borne by the covered driver.

To the extent possible, testing will be performed during normal working hours. Outside of pre-duty testing, if drug and/or alcohol testing requires time in addition to any driver's normal workday, the District will pay the covered driver their regular/layover rate for that time, including traveling to and from the test site, if away from the District. The testing occasions shall include:

a. **Pre-duty testing**

Pre-duty testing is testing for drugs and independent of the Omnibus Transportation Employee Testing Act and the regulations promulgated thereunder, testing for alcohol, that the District will administer after a conditional offer of employment has been extended and prior to any covered driver's performance of a safety-sensitive function unless the alcohol testing reveals an alcohol concentration of less than .04, the covered driver will not be allowed to perform safety sensitive functions for 24 hours following the administration of the test. In addition, independent of the requirements of the Omnibus Transportation Employee Testing Act of 1991 and the regulations promulgated thereunder, if the pre-duty alcohol test reveals an alcohol concentration of .02 or greater, it will result in a revocation of the conditional offer of employment. Also independent of the Omnibus Transportation Employee Testing Act of 1991 and the regulations thereunder, if the pre-duty drug testing reveals a presence of drugs, it will result in the revocation of the conditional offer of employment. The District may, in its sole discretion, forego pre-duty testing where the exceptions promulgated at DOT 49 CFR §382.301 (b) or (c), relating to drug and alcohol testing of covered drivers by their previous employers, are satisfied.

b. **Reasonable Suspicion testing**

Reasonable suspicion testing is alcohol and drug testing that the District will conduct when it has reasonable suspicion to believe that a covered driver has engaged in conduct prohibited by these District Regulations. (Reasonable suspicion testing will not be conducted based upon the suspicion that a covered driver has violated the provision of these District Regulations prohibiting covered drivers from being on-duty or operating commercial motor vehicles while the driver possesses unmanifested alcohol). Reasonable suspicion must be based upon specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of a covered driver by a District supervisor who is specially trained to recognize alcohol misuse or drug use.

The District shall not administer a reasonable suspicion alcohol test more than eight (8) hours following a determination that reasonable suspicion exists to believe that the alcohol prohibitions of these District Regulations have been violated. Notwithstanding the absence of a reasonable suspicion alcohol test, the District will not permit any covered driver to report for duty or remain on duty requiring the performance of a safety-sensitive function while the driver is under the influence of, or impaired by, alcohol as shown by the behavioral, speech, and performance indicators of alcohol misuse, until an alcohol test is administered and the driver's alcohol concentration measures less than .02 or 24 hours have elapsed following a determination that reasonable suspicion exists to believe that the alcohol prohibitions of these District Regulations have been violated.

A written record shall be made of observations leading to reasonable suspicion, signed by the supervisor or person who made the observations, within twenty-four (24) hours of the observed behavior or before the results of drugs test are released, whichever is earlier.

Covered drivers are subject to reasonable suspicion alcohol testing as follows: Immediately prior to performing safety sensitive functions, while performing safety sensitive functions, or immediately following the performance of safety sensitive functions. Reasonable suspicion drug testing may be conducted at any time the covered driver is on duty for the District.

c. Random testing

Random testing is unannounced testing for alcohol and drugs administered in a statistically random manner throughout the year to covered drivers employed by the District in ratios as required by the DOT regulations, so that all covered drivers have an equal probability of selection each time a random test is administered.

Covered drivers are subject to random alcohol testing as follows: Immediately prior to performing safety sensitive functions, while performing safety sensitive functions, or immediately following the performance of safety sensitive functions. Random drug testing may be conducted at any time the covered driver is on duty for the district.

d. Post Accident testing

A post-accident test is a test for alcohol and drugs administered following an accident involving a commercial motor vehicle to each surviving covered driver:

- (i) who was performing safety sensitive functions with respect to the vehicle, if the accident involved the loss of human life;
- (ii) who receives a citation under state or local law for a moving violation arising from the accident, if the accident resulted in bodily injury to a person who as a result of the injury immediately receives medical treatment away from the scene of the accident; or
- (iii) who receives a citation under state or local law for a moving violation arising from the accident, if the accident resulted in one or more motor vehicles incurring disabling damages as a result of the accident requiring the vehicle(s) to be transported away from the scene by a tow truck or other vehicle;

The District will not administer a post-accident alcohol test more than eight hours following that accident and will not administer a post-accident drug test more than 32 hours following the accident. A covered driver who is subject to post-accident testing shall remain readily available for such testing or may be deemed by the District to have refused to submit to testing. This shall not be construed to require the delay of necessary medical attention for injured individual following an accident or to prohibit a covered driver 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.

The results of a breath or blood test for the use of alcohol or a urine test for the use of drugs, conducted by federal, state, or local officials having independent authority for the test, shall be considered to meet the requirements of these District Regulations concerning post-accident testing, provided such tests conform to applicable federal, state, or local requirements and that the results of the test are obtained by the District.

e. **Return to duty testing**

Return to duty testing is alcohol and drug testing conducted after a covered driver has engaged in prohibited conduct under these District Regulations, completed counseling prescribed by a substance abuse professional, if any, and prior to his return to the performance of a safety-sensitive function. Before a covered driver may return to the performance of safety sensitive functions, he/she must undergo return to duty testing with an alcohol test result indicating an alcohol concentration of less than .02 and/or a drug test indicating a verified negative result for illegal drugs.

f. **Follow-up testing**

Follow-up tests are given following a determination by the Substance Abuse Professional (SAP) that a driver is in need of assistance in resolving problems associated with misuses of alcohol and/or drugs. This is an unannounced test, given at least six (6) times within twelve (12) months with the actual frequency and number of tests determined by the substance abuse professional (SAP), but in no event may the follow up testing continue for a period beyond 60 months from the covered driver's return to duty. The substance abuse professional may terminate the requirement of the follow-up testing at any time after the first six (6) tests have been administered if (s)he determines that follow-up testing is no longer necessary.

Covered drivers are subject to follow-up alcohol testing as follows: Immediately prior to performing safety sensitive functions, or while performing safety sensitive functions, or immediately following the performance of safety sensitive functions. Follow-up drug testing may be conducted at any time the covered driver is on duty for the district.

V. **Definitions**

See Appendix A.

VI **Drug & Alcohol Testing Procedures**

Alcohol:

Alcohol testing will be administered by a Breath Alcohol Technician (BAT) who has completed the equivalent of the DOT's model course, as determined by the National Highway Traffic Safety Administration, and who is trained in utilizing an evidential breath testing device (EBT) that conforms to the DOT requirements. The EBT used for testing shall meet the standards promulgated by the DOT and have a quality assurance plan (QAP) developed by the manufacturer to insure proper calibration. Testing will be conducted in a location that affords visual and aural privacy to individuals being tested.

If the initial test reveals an alcohol concentration of .02 or greater, a confirmation test must be performed. The confirmation test result is the final test result for the purposes of these District Regulations. If the final test result reveals an alcohol concentration greater than .02 but less than .04, the covered driver will be suspended from performing safety-sensitive functions for 24 hours. If the alcohol concentration is .04 or greater the covered driver will be suspended from the performance of safety sensitive functions for an indefinite period. (For an in depth explanation of alcohol testing procedures please refer to Appendix B. For an in depth explanation of the consequences of positive alcohol test results, see Section X of these District Regulations).

Drugs:

A Department of Health and Human Services certified laboratory will perform drug testing on urine samples provided by covered drivers. The drugs for which tests will be conducted are:

- a. Marijuana (THC)
- b. Cocaine
- c. Phencyclidine (PCP)
- d. Opiates
- e. Amphetamines
- f. MDMA (aka. Ecstasy) (effective date 10-1-2010)

The cutoff levels for these drugs will be those set forth in the DOT regulation.

The District will contract with the certified laboratory to insure that the collection, shipment, testing and chain of custody procedures insure the integrity of the testing process in accordance with the procedures set forth in the regulations.

The split sample urine testing will be utilized. This method requires that the urine specimen be divided into two samples providing one sample for preliminary screening and initial confirmation, and a second sample for the second test if needed at a later date. Independent of the requirements of the Omnibus Transportation Employee Testing Act of 1991 and the regulations promulgated thereunder, the District requires that the cost for testing this split sample will be the covered driver's responsibility if the covered driver elects to have the second sample tested. In the event that the results of the split sample test invalidate the original positive test, the covered driver will be made whole for the cost of the split sample test.

The MRO will conduct a final review of all positive test results to assess possible alternative medical explanation for the positive test results. (For an in depth explanation of the drug testing procedures please refer to Appendix B).

Alcohol and Drug:

1. The District will ensure that alcohol and drug test information is maintained in a confidential manner in conformity with the Department of Transportation Rule **49 CFR Part 40**.
2. The District will ensure that all contracts between the District and any other entity involved in the alcohol and drug testing program will comply with the procedures set forth in the Department of Transportation Rule **49 CFR Part 40**.
3. The District will conform to the requirements in the Department of Transportation Rule **49 CFR Part 40** in all aspects.

Uncompleted testing

If a screening or confirmation test cannot be completed, or if an event occurs that would invalidate the test, the BAT, shall, if practicable begin a new screening or confirmation test, as applicable, e.g., using a new breath alcohol testing form with a new sequential test number (in the case of a screening test conducted on an EBT that meets the requirements of 40.53 (b) or in the case of a confirmation test.)

VII. Refusal to Submit to testing

A covered driver shall not refuse to submit to a post-accident alcohol or drugs test required under these District Regulations, a random alcohol or drug test required under these District Regulations, a reasonable suspicion alcohol or drug test required under these District Regulations, or a follow-up alcohol or drug test required under these District Regulations. The District will not permit any covered driver to perform safety sensitive functions subsequent to a refusal to submit to a test required under the regulation until the individual is evaluated by a substance abuse professional and completes a substance abuse program designed by a substance abuse professional, if any, and undergoes a return to duty alcohol test revealing an alcohol concentration of less than .02 and a drug test with a verified negative result. In other words, a refusal to submit to testing is the equivalent of an alcohol test revealing an alcohol concentration of .04 or greater or a drug test with a positive result.

A refusal to be tested shall be defined as a refusal by an employee to complete and sign the breath alcohol test form, to complete the drug screening chain of custody form, to provide breath, to provide an adequate amount of breath, to provide an adequate amount of urine or otherwise to cooperate with the testing process in a way that prevents the completion of the test. The BAT or collector shall record such refusal in the remarks section of the form. The testing process shall then be terminated and the BAT or collector shall immediately notify the District.

VIII. Prohibited Conduct**A. Alcohol**

1. No covered driver 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. The District shall not permit a covered driver to perform or continue to perform safety-sensitive functions if it has actual knowledge that a driver has an alcohol concentration of 0.04 or greater.
2. A covered driver shall not be on duty or operate a commercial motor vehicle while the covered driver possesses alcohol, unless the alcohol is manifested and transported as part of a shipment. The District shall not permit covered driver to drive or continue to drive a commercial motor vehicle if it has actual knowledge that a driver possesses unmanifested alcohol.
3. A covered driver shall not use alcohol while performing safety sensitive functions. The District shall not permit a driver to perform or continue to perform safety-sensitive functions if it has actual knowledge that a driver is using alcohol while performing safety-sensitive functions.

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4. No covered driver shall perform safety-sensitive functions within six (6) hours after using alcohol. The District shall not permit a driver to perform or continue to perform safety-sensitive functions if it has actual knowledge that a driver has used alcohol within six (6) hours.¹
5. A covered driver required to take a post accident alcohol test shall not use alcohol for eight (8) hours following the accident, or until he/she undergoes a post accident alcohol test, whichever is first.

B. Drugs

1. A covered driver shall not report for duty or remain on duty requiring the performance of safety sensitive functions when the driver is using drugs, except when the use is pursuant to the instructions of a physician who has advised the driver that the drug does not affect the driver's ability to safely operate a commercial motor vehicle. The District shall not permit a covered driver to report for duty or remain on duty requiring the performance of safety sensitive functions if the District has actual knowledge that the driver is using drugs, except when the use is pursuant to the instructions of a physician who has advised the driver that the drug does not affect the driver's ability to safely operate a commercial motor vehicle.
2. Independent of the requirements of the Omnibus Transportation Employee Testing Act of 1991 and the regulations promulgated thereunder, the covered driver must notify the District that he/she is using controlled substances pursuant to the instructions of the physician who has advised the driver that the substance does not adversely affect the driver's ability to safely operate a commercial motor vehicle.

IX. Referral, evaluation, and treatment.

1. The District shall make available to the covered driver information regarding the resources available for evaluating and resolving problems associated with the misuse of alcohol and use of drugs, including the names, addresses, and telephone numbers of substance abuse professionals and counseling and treatment programs.

2. The District requires that each covered driver who engages in conduct prohibited by these District Regulations 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 and drug use. Any covered driver who engages in prohibited conduct shall have access to the services of any Employee Assistance Plan in which the District is a participant at the time of the violation. The costs associated with this evaluation shall be the responsibility of the covered driver.

¹ New York Vehicle and Traffic Law section 509-I (1)(a) provides that "No person shall consume a drug, controlled substance, or an intoxicating liquor, regardless of its alcoholic content, or be under the influence of an intoxicating liquor or drug, within six hours before going on duty or operating, or having physical control of a bus." These District Regulations does not allow covered drivers to consume alcoholic beverages in violation of the requirements of New York law, which are stricter than the DOT regulations in this particular instance and should not be construed to authorize such conduct.

3. Before a covered driver returns to duty requiring the performance of a safety-sensitive function after engaging in conduct prohibited by these District Regulations, the covered driver shall undergo a return to duty alcohol test with a result indicating an alcohol concentration of less than 0.02 if the conduct involved alcohol, or a drug test with a verified negative result if the conduct involved drugs.

4. Each covered driver identified as needing assistance in resolving problems associated with alcohol misuse or drug use shall;

a. be evaluated by a substance abuse professional to determine if the covered driver has properly followed any rehabilitation program prescribed under paragraph 2 of these District Regulations;

b. shall be subjected to unannounced follow-up alcohol and drug tests administered by the District following the covered driver's return to duty. The number and frequency of the follow-up tests shall be as directed by the substance abuse professional, and consist of at least six (6) tests in the first twelve (12) months following the covered driver's return to duty. The District may direct the covered driver to undergo return-to-duty and follow-up testing for both alcohol and drugs, if the substance abuse professional determines that return-to-duty and follow-up testing for both alcohol and drugs is necessary for that particular covered driver. Such testing shall be in conformance with these District Regulations and the DOT regulations. Follow-up testing shall not exceed sixty (60) months from the date of the covered driver's return to duty. The substance abuse professional may terminate the requirement at any time after the first six (6) tests have been administered, if the substance abuse profession determines that such testing is no longer necessary.

c. The evaluation and rehabilitation may be provided by the District, by a substance abuse professional under contract with the District or by a substance abuse professional not affiliated with the District.

The choice of a substance abuse professional shall be that of the District and costs affiliated with evaluation and treatment shall be the responsibility of the covered driver.

d. The District requires that a substance abuse professional who determines that a covered driver requires assistance in resolving problems with alcohol misuse or drug use does not refer the covered driver to the substance abuse professional's private practice, or to a person or organization from which the substance abuse professional receives remuneration, or in which the substance abuse professional has a financial interest.

e. The requirements of this section with respect to referral, evaluation and rehabilitation do not apply to applicants who refuse to submit to a pre-duty alcohol or drug test or who have a pre-duty alcohol test with a result indicating an alcohol concentration of 0.04 or a drug test with a verified positive test result.

X. **Consequences for covered drivers**

A covered driver shall not perform safety-sensitive functions, including driving a commercial motor vehicle, if the covered driver has engaged in conduct prohibited by these District Regulations or an alcohol or drug rule of any DOT agency.

The District will not permit any driver to perform safety-sensitive functions, including driving a commercial motor vehicle, if said driver has tested positive for alcohol and/or drugs. The District will not permit any covered driver found to have an alcohol concentration of at least .02 and less than .04 to perform safety-sensitive functions for 24 hours following the administration of the test. A covered driver found to have an alcohol concentration of .02 or greater but less than .04 shall receive a 24 hour suspension from the performance of a safety-sensitive functions.

Covered drivers who violate these District Regulations will be suspended from the performance of safety-sensitive functions, and referred to a substance abuse professional. Before a covered driver may resume the performance of safety sensitive functions for the District, a substance abuse professional must certify that the covered driver has completed a prescribed substance abuse program, if any. In addition the covered driver must pass an alcohol test with an alcohol concentration of less than .02 and/or a drug test prior to the return to the performance of safety-sensitive functions.

Independent of the requirements of the Omnibus Transportation Employee Testing Act of 1991 and the regulations promulgated thereunder, covered drivers who have been found to have violated the prohibited conduct under this policy will be disciplined in accordance with the provisions of the applicable collective bargaining agreement, or S 75 of the Civil Service Law, whichever is applicable.

XI. **Employee Notification**

The District shall provide a copy of these District Regulations to each covered driver and to his/her collective bargaining agent. Each covered driver is required to sign a statement certifying that (s)he has received this information. The District shall maintain the original signed certification for a minimum of two (2) years. The District will provide a copy of the certification to the covered driver upon request.

XII. **Savings Clause**

If any provision of these regulations is determined in a tribunal of competent jurisdiction to be inconsistent with any superseding legal requirements, that provision shall be considered modified or deleted so as to comply with the superseding legal requirements, without any effect on the remaining District Regulations provisions.

APPENDIX A**DEFINITIONS**

- a. **Alcohol**
The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols, including methyl and isopropyl alcohol.
- b. **Alcohol use**
The consumption of any beverage, mixture, or preparation, including any medication containing alcohol.
- c. **Breath Alcohol Technician (BAT)**
An individual who operates an evidential breath testing device and instructs and assists individuals in the alcohol testing process.
- d. **BAC**
Breath Alcohol Concentration (BAC) or alcohol concentration, is the amount of alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath indicated by an evidential breath test.
- e. **Commercial Motor Vehicle**
A motor vehicle or a combination of motor vehicles used in commerce to transport passengers or property if the motor vehicle:
1. has a gross combination weight of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
 2. has a gross vehicle weight rating of 26,001 or more pounds; or
 3. is designed to transport 16 or more passengers, including the driver; or
 4. is of any size and is used in the transportation of materials found to be hazardous for the purposes of the Hazardous Materials Transportation Act and which require the motor vehicle to be placarded under the Hazardous Material Regulations. (49 CFR PART 172, SUBPART F)
- f. **Confirmation test**
In drug testing, a second analytical procedure to identify the presence of a specific drug or metabolite that is independent of the screening test and that uses a different technique and chemical principle from that of a screening test in order to ensure reliability and accuracy. Gas chromatography/mass spectrometry (GC/MS) is the only authorized confirmation method for cocaine, marijuana, opiates, amphetamines, and phencyclidine. In alcohol testing, a second test following a screening test with a result of .02 or greater, that provides quantitative data of alcohol concentration.

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- g. **Covered driver**
Any person who operates a commercial motor vehicle for the District. This includes, but is not limited to: full time, regularly employed drivers; casual, intermittent or occasional drivers; leased drivers and independent, owner operator contractors who are either directly employed by or under lease to the District or who operate a commercial motor vehicle at the direction of or with the consent of the District. For the purposes of pre-duty testing only, the term covered driver includes an individual applying for a position with the District requiring the applicant to drive a commercial motor vehicle.
- h. **Drug and Alcohol Coordinator**
The Drug and Alcohol Coordinator shall be the OCM BOCES Drug and Alcohol Coordinator, Cynde Isgar, who shall be located at 6820 Thompson Road, Syracuse, N.Y. 13221 and may be reached at 431-8544.
- i. **Evidential breath testing device (EBT)**
A device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and placed on NHTSA's Conforming Product's List of Evidential Breath Measurement Devices. (CPL)
- j. **Medical Review Officer (MRO)**
A licensed physician responsible for receiving laboratory results generated by the District's drug test program, who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's positive test result together with his or her medical history and any other relevant biomedical information.
- k. **Refusal to submit**
A covered driver who (1) fails to provide adequate breath for testing without a valid medical explanation after he or she has received a notice of the requirement for the breath testing; (2) fails to provide adequate urine for drug testing without a valid medical explanation after he or she has received notice of the requirement for urine testing; (3) engages in conduct that clearly obstructs the testing process; or (4) otherwise refuses to submit, will be classified as having refused to submit to an alcohol or drug test. A refusal to submit to either an alcohol or drug test will carry the same consequences as a failure of a required test.
- l. **Screening test**
In alcohol testing, means an analytical procedure to determine whether a driver may have prohibited concentration of alcohol in his or her system. In drug testing, an immunoassay procedure to eliminate "negative" urine specimens from further consideration.

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m. Safety sensitive function

Any of those on-duty functions (promulgated at 49 CFR §395.2 On-Duty time) as listed below:

1. All time at a carrier or shipper plant, terminal, facility, or other property, waiting to be dispatched, unless the driver had been relieved from duty by the District.
2. All time inspecting equipment as required by the Federal Motor Carrier Safety Regulations (FMCSR'S), or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time.
3. All time spent at the driving controls of a commercial motor vehicle in operation.
4. All time, other than driving time, spent on or in a commercial motor vehicle (except for time spent resting in the sleeper berth.)
5. All time spent loading or unloading a commercial motor vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded.
6. All time spent performing the driver's requirements associated with an accident promulgated at 49 CFR §§392.40 AND 392.41.
7. All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

n. Substance Abuse Professional

A 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 and clinical experience in the diagnosis and treatment of alcohol and drugs-related disorders.

APPENDIX B Procedures for Testing

Alcohol:

- a. Preparation for testing
 1. The BAT will request photo identification from the covered driver. This may be either a District identification badge photo or a driver's license with a photo. If no photo identification is presented, the identification by a District official who can positively identify the covered driver may be used.
 2. The BAT will provide identification if requested.
 3. The BAT will explain the procedures for screening for and confirmation testing to the covered driver.

- b. Procedures for screening
 1. The BAT will complete section 1 of the test form.
 2. The covered driver will complete section 2 of the test form. Refusal of the covered driver to sign the form will be considered a refused test.
 3. An individually sealed mouthpiece is unwrapped in full view of the covered driver and placed on the EBT.
 4. The BAT will instruct the covered driver to blow into the mouthpiece for at least six (6) seconds.
 5. The BAT will show the covered driver the test results from the display on the EBT.
 6. The BAT will affix the printed test results to the alcohol test form with evidence tape.

- c. If the test result identifies a BAC of less than .02.
 1. The BAT will date and sign the form.
 2. The covered driver will date and sign the form. If the covered driver does not date and sign the form it will be considered a refusal to be tested and the BAT will note this in the remarks section of the form.
 3. No further testing is authorized and the BAT will transmit the results to the District representative in a confidential manner to be stored in a secured place.

- d. If the printed test result does not match the displayed result
 1. The BAT will note this in the remarks section of the form.
 2. Both the BAT and the covered driver will initial the note.
 3. The test will be considered invalid and the District representative and the covered driver will be notified.

- e. If the screening test result identifies a BAC of greater than .02 a confirmation test will be ordered. The confirmation test is deemed to be the final result upon which action will be taken.

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1. The BAT will instruct the covered driver not to eat, drink, belch or put anything into their mouth.
 2. The waiting time between tests will be at least 15 minutes and the confirmation test will commence within 20 minutes of the screening test. The test will proceed even if the covered driver does not comply with instructions. Any non-compliance will be noted in the remarks section of the test form.
 3. The BAT shall perform an air clank on the EBT with a reading of .00 prior to the confirmation test and will have three tries to get a .00 reading. If on the third try the reading is greater than .00 the testing will not proceed using that EBT, another EBT that meets the mandated requirements will be used. If an EBT is taken out of service for failing to register no more than .00 after air blanks it must not be used until the calibration is checked and certified as meeting the standards of the mandate.
 4. The procedures for the confirmation test will be the same as for the screening test. (a, b, d. and d of this section) A new mouthpiece must be used.
 5. The BAT will transmit the results confidentially to a designated District representative and ensure immediate contact of positive tests. The transmission may be made in writing, in person, by telephone or electronic means. If the initial transmission is not in writing there will be a mechanism in place to assure the District Representative can verify the identity of the BAT.
 6. The BAT shall follow up the initial contact by providing a copy of the form to the District Representative to be stored in a secure and confidential place.
- f. Refusals to test and uncompleted tests
1. A refusal by a covered driver to complete and sign the test form to provide breath, or to otherwise cooperate with the testing process shall be noted by the BAT in the remarks section of the form. The testing process will be terminated and the BAT will notify the District Representative.
 2. If the screening or confirmation test can not be completed, or an event occurs that would invalidate the test, the BAT shall if practical, begin a new test, using a new test form and sequential number.
- g. "Shy Lung" situations
1. The BAT will again instruct the covered driver to attempt to provide a breath sample. If the covered driver refuses to make the attempt the BAT will immediately notify the District Representative.

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2. If the covered driver attempts and fails to provide an adequate sample, the BAT will note it in the remarks section of the test form, and notify the District Representative.
3. If the covered driver attempts and fails to provide an adequate sample, the MRO will refer the covered driver to a physician to obtain an evaluation concerning the covered driver's medical ability to provide an adequate sample of breath. The physician will provide a written statement explaining his/her findings. If the physician determines that medical conditions could have precluded the covered driver from providing an adequate sample, the test shall not be deemed a refusal. If the physician is unable to find a medical reason for not providing an adequate sample the test will be deemed a refusal.

h. Invalid tests

1. If the external calibration check of an EBT produces a result that is outside the tolerances as stated in the quality assurance plan (QAP), every test of .02 or above obtained on the device since the last calibration check will be invalid.
2. If the BAT does not observe the minimum 15 minute waiting period prior to the confirmation test, the test will be invalid.
3. If the BAT does not perform an air blank of the EBT prior to the confirmation test or an air blank does not produce a reading of .00 prior to the confirmation test the test will be invalid.
4. If the BAT does not sign the test form the test will be invalid.
5. If the BAT fails to note in the remarks section of the test form that the covered driver has failed or refused to sign the test form following the attachment of results the test will be invalid.
6. If the EBT fails to print a test result, the test will be invalid.
7. If the displayed sequence number or alcohol test result differ from the printed result the test will be invalid.

Drugs:**a. Preparation for collection**

1. A dry room will be used for all drug screen collections.
2. Toilet blue agent will be placed in the toilet bowl.
3. No soap or other substances that could be used to alter the sample will be allowed in the dry room.
4. The collector shall request photo identification from the covered driver. This may be either a District identification badge photo or a driver's license with a photo. If no photo ID is presented, the identification by a District official who can positively identify the covered driver may be used.
5. The collector will ask the covered driver to remove unnecessary outer garments such as coats or jackets and to empty pockets.

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6. All personal belongings such as purses or brief cases shall remain with outer garments.

b. Collection procedure

1. The covered driver will be asked to wash and dry his/her hands prior to collection.
2. The covered driver will remain in the presence of the collector and will not have access to fountains, faucets, soap, dispensers or any other materials that could be used to adulterate the specimen.
3. The covered driver will be provided a sterile collection container capable of holding at least 60 ml. of fluid.
4. The covered driver will be instructed to provide a urine specimen of at least 45 ml. while in the dry room. The maximum time allowed to provide a urine specimen will be 4 minutes.
5. The collector, in the presence of the covered driver, will pour the urine into two separate specimen bottles. Thirty ml. will be poured into one bottle to be used as the primary specimen. At least 15 ml. will be poured into the second specimen and used as the split specimen.
6. The temperature of the specimen will be recorded by the collector from the temperature strip attached to either the collection container or primary specimen bottle. The temperature must fall between 90 and 100 degrees F.

c. After collection

1. The collector will inspect the specimen's color and look for any sign of contaminants.
2. The collector and covered driver shall keep the specimen in view at all times prior to its being sealed and labeled.
3. The covered driver will initial 2 tamper proof seals, and the collector will place one over each specimen bottles cap and down its sides.
4. The covered driver will be encouraged to wash his/her hands after providing the specimen.
5. The covered driver will check the chain-of-custody form for completeness and correctness. Ex. (correct social security number or employee ID number, make sure the specimen ID numbers on the chain-of-custody form match the ID numbers on the specimen bottle labels).
6. The collector will complete the chain of custody block on the form and check for completeness and correctness.

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7. The covered driver will be instructed to complete the MRO copy of the chain-of-custody form which will include printing his/her first and last name, day-time phone number and the covered driver's signature.
8. The collector will then package both specimen bottles, along with copies 1, 2 and the split specimen copy of the chain-of-custody form, for shipment to the laboratory and seal the package in the presence of the covered driver.
9. The covered driver will be given the donor copy of the chain-of-custody form.

d. Adulterate samples

1. If the specimen temperature is outside the range of 90 to 100 degrees F. and the oral temperature of the covered driver varies more than 1.8 degrees F. from the specimen an observed collection will be ordered.
2. If the collector views visible adulterants or is able to sense adulterants, an observed collection will be ordered.
3. If the covered driver's last provided specimen was determined by the laboratory to have a creatinine concentration greater than or equal to 2 mg/dL but less than 5mg/dL an observed collection will be ordered by the MRO.

e. Observed collections

1. The specimen suspected of being adulterated will be sent to the laboratory to be processed.
2. Another specimen under direct observation will be collected and shipped to the laboratory for processing.
3. The direct observers will be a collector or supervisor of the same gender as the covered driver.

f. "Shy Bladder" situations

1. If the covered driver is unable to provide 45 ml. of urine the collector will discard the specimen.
2. The covered driver will be encouraged to drink fluids (one 8 oz. cup every 30 minutes not to exceed 24 ozs.) and remain at the collection site.
3. After a reasonable time, the covered driver will be directed to attempt to provide another specimen.
4. If the covered driver is still unable to provide an adequate specimen after three (3) hours, the collection process will be discontinued and the district so notified. The MRO will refer the individual to a professional for a medical evaluation to determine whether the covered driver's inability to provide a specimen is

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genuine or constitutes a refusal to test. With regard to pre-duty testing, if the district does not wish to hire the individual, the MRO will not be required to make a referral. Upon completion of the examination, the MRO's conclusions will be reported to the District.

g. Security

1. A collection site totally dedicated to urine collection for drug testing will be secure at all times.
2. A facility that is not totally dedicated to urine collection for drug testing will be secured for the periods necessary for the collection of urine for drug testing.
3. The specimen shall remain under the direct control of the collector or designated personnel from the time it is received from the covered driver until the time it is picked up by laboratory courier.

APPENDIX C

Drinks	Body Weight in Pounds							
	100	120	140	160	180	200	220	240
1	0.04	0.03	0.03	0.02	0.02	0.02	0.02	0.02
2	0.08	0.06	0.05	0.05	0.04	0.04	0.03	0.03
3	0.11	0.09	0.08	0.07	0.06	0.06	0.05	0.05
4	0.15	0.12	0.11	0.09	0.08	0.08	0.07	0.06
5	0.19	0.16	0.13	0.12	0.11	0.09	0.09	0.08
6	0.23	0.19	0.16	0.14	0.13	0.11	0.10	0.09
7	0.26	0.22	0.19	0.16	0.15	0.13	0.12	0.11
8	0.30	0.25	0.21	0.19	0.17	0.15	0.14	0.13
9	0.34	0.28	0.24	0.21	0.19	0.17	0.15	0.14
10	0.38	0.31	0.27	0.23	0.21	0.19	0.17	0.16

Approximate Alcohol Concentration*

*Subtract 0.01 for each hour of drinking. When you stop drinking your body will process approximately 1 drink per hour. Alcohol concentrations of different individuals may vary, and factors such as food in the stomach, medication, mood and fatigue can effect an individual's tolerance to alcohol.

(Bold numbers identify Alcohol Concentrations greater than or equal to a DWAI violation while driving a Commercial Motor Vehicle)

A 12-ounce beer, five ounces of wine or a nine ounce wine cooler, 1 ½ ounces of liquor or two cordials **all** contain approximately the same amount of alcohol (0.6 ounces).

Effects of Use

- *Greatly impaired driving ability
- *Reduced coordination and reflex action
- *Impaired vision time & distance judgment
- *"Hangovers" from over indulgence

Symptoms

Slurred speech, bloodshot and/or watery eyes, poor balance, odor on breath, spasmodic movement of the eyes.

Dangers

- *Neglect of proper diet
- *Amnesia or "blackouts" lasting from a few minutes to a few days
- *Increased risk of miscarriages and premature birth
- *Impotency

Physical Dangers of Prolonged Use

Ruptured veins, heart problems (high blood pressure and hypertension), stomach inflammation, poisonous relation of the pancreas, permanent loss of brain cells, cancer of the esophagus, death from cirrhosis of the liver.

Drug Name	Interference	Symptoms	Dangers	Detectable in Urine
<u>Amphetamines</u> Uppers, Speed, Meth, Black Beauties, Crank	Cold Medication	Pills of varying colors, loss of appetite, anxiety, irritability, rapid speech.	Disorientation, severe depression, paranoia, hallucinations, fatigue, increased blood pressure.	1-2 days
<u>Cocaine</u> Coke, Crack, Toot, Blow, Nose Candy	None	Small envelopes, razors, small spoons. Nervousness, irritability.	Shallow breathing, fever, anxiety, tremors, possible death from convulsions or respiratory arrest.	12-48 hours
<u>Marijuana</u> Dope, Pot, Reefer, Joint, Grass	None	Baggies, rolling papers. Altered perception, dilated pupils, increased appetite, neglect of appearance.	Psychological dependence. Impaired short-term memory, lung damage, psychosis with chronic use.	Occasional use: 1-7 days Chronic use: 1-4 weeks
<u>Opiates</u> Codeine, Heroin, Morphine, Opium	Codeine, Chlorpromazine, Dextromethorphan	Small envelopes, burnt spoons, needles, needle marks in arms. Insensitivity to pain, sedation, watery eyes.	Lethargy, weight loss, hepatitis, slow and shallow breathing, death from overdose.	1-3 days
<u>Phencyclidine</u> PCP, Dummy Dust, Angel Dust	P-Nitrophenol Acid	May be injected. Mood and perception alteration, paranoia, panic, anxiety, nausea, tremors, suicidal urges.	Unpredictable behavior, flashbacks, possible emotional instability and psychosis, hallucinations.	Occasional use: 1-8 days Chronic use: up to 30 days
<u>MDMA- aka ecstasy</u> Adam, E, Roll, X, XTC.	Synthetic drug with amphetamine-like properties Methylenedioxymethamphetamine	Involuntary teeth clenching, transfixion of sights and sounds, nausea, blurred vision, chills and/or sweating	Severe dehydration and hyperthermia, dramatic increases in body temps, Leads to muscle breakdown and kidney, liver and cardiovascular failure.	3 to 5 days depending on weight and age

Drug Abuse and Alcoholism Treatment Facilities

Alcohol Services, Inc.
247 West Fayette Street
Syracuse, NY 13202
(315) 471-2885

Conifer Park Regional Office
An Meliplex Group
5415 West Genesee Street
Camillus, NY 13031
(315) 488-0303

Recovery Counseling Services
508 State Tower Building
Syracuse, NY 13208
(315) 475-1771

Benjamin Rush Center/Rush
Recovery
614 South Salina Street
Syracuse, NY 13202
(315) 476-2185 Admissions Dept.

Family Services Associates
7445 Morgan Road
Liverpool, NY 13090
(315) 451-2161

Rescue Mission
120 Gifford Street
Syracuse, NY 13202
(315) 472-6251

Catholic Charities
1654 West Any Street Syracuse,
NY 13204
(315) 424-1840

Any Council on
Alcoholism/Addictions
716 East Washington Street
Syracuse, NY 13210
(315) 471-1359
(Information Only)

Syracuse Brick House, Inc.
Any Hill S.-1 Bldg. at
Van Duyn
P.O. Box 479
Syracuse, NY 13215-0479
(315) 492-1184

Center for Human Services
Dr. Alan Etkind
1100 State Tower Building
Syracuse, NY 13202
(315) 472-1212

Any Pastoral Counseling
Center, Inc.
324 University Avenue
Syracuse, NY 13210
(315) 472-4471

Syracuse Brick House, Inc.
Alcoholism Outpatient Clinic
716 James Street
Syracuse, NY 13203
(315) 471-1564 Outpatient Clinic
(315) 474-5506 Administration

CIM Chemical Dependency
Treatment Services
410 South Crouse Ave.
Syracuse, NY 13210
(315) 470-7111 CIM Hospital
(315) 470-7381 Admission Team

Pelion Prescription Drug Abuse
Program, Inc.
500 South Salina Street, Suite 218
Syracuse, NY 13202
(315) 476-5103

Syracuse Community Health
Center
Alcoholism Outpatient Clinic
819 South Salina Street
Syracuse, NY 13202
(315) 476-7921

Clinical Counseling Services
Alcoholism Outpatient Programs
600 East Genesee Street
Syracuse, NY 13202
(315) 422-2168

Chronic Disorders Outpatient
Program, Inc./Alcoholism
Outpatient Clinic
500 South Salina Street, Suite 218
Syracuse, NY 13202
(315) 476-5103

Syracuse V.A. Medical Center
Alcohol Outpatient Clinic
800 Irving Avenue
Syracuse, NY 13210
(315) 477-4550

Commonwealth Place
6012 East Molloy Road
P.O. Box 540
Syracuse, NY 13211
(315) 470-7314

Professional Counseling Services
5099 West Genesee Street
Camillus, NY 13202
(315) 488-1641

Tully Hill
Routes 11 & 80
Tully, NY 13159
(315) 696-6114

8-31-2010

To All employees working in a Safety Sensitive position

On August 16, 2010, the Department of Transportations final rule was published in the Federal Register. There are changes in DOT drug testing that go into effect October 1, 2010. The following information will be a change to your Drug and Alcohol testing policies that you received when you were either hired or when it went into effect in 1991.

Effective October 1, 2010 the Department of Transportation has issued the following changes.

- Testing of MDMA (aka ecstasy). This will be in addition to the 5 panels of testing we have done in the past. DOT will now be testing for Marijuana, Cocaine, Amphetamines, PCP, Opiates, and MDMA.
- Lowering cutoff levels for cocaine and amphetamines (refer to levels set forth in DOT regulations).
- Conducting mandatory initial testing for heroin.

Attached you will find the update to the District policy regarding the change for the testing of MDMA along with information regarding this drug.

West Genesee Central School District
 Receipt of an **update** to the Districts Drug & Alcohol Testing Policy and Regulations
 Regarding Department of Transportation Drug & Alcohol Testing

Print Driver's Name _____

I acknowledge that I have received the update to the District's Policy regarding Drug and Alcohol testing, and The Ominbus Transportation Employee Testing Act of 1991

I understand that a violation of this Policy may be grounds for disciplinary action, up to and including termination of my employment in a manner consistent with the District's policy, regulations, and any applicable laws and the collective bargaining agreement.

Drivers Signature _____

Copy for drivers file.