

LOTS – LEE-OGLE TRANSPORTATION SYSTEM 201 EAST PROGRESS DR DIXON, IL 61021

ANTI-DRUG & ALCOHOL-MISUSE POLICY

Section 1 – POLICY STATEMENT

This policy complies with the U.S. Department of Transportation 49 CFR Part 655, as amended, that mandates drug testing and alcohol testing for safety-sensitive positions, and with 49 CFR Part 40, as amended, that sets standards for the collection and testing of drug and alcohol specimens. A copy of 49 CFR Part 40 and Part 655 will be available for review upon request by a covered employee, or can be found on the internet at the Dept. of Transportation's Office of Drug and Alcohol Policy and Compliance website <http://www.transportation.gov/odapc>.

This policy applies to all safety-sensitive public transportation system employees and contractors when they are on public transportation property or when performing any public transportation-related safety-sensitive functions. All covered employees are required to submit to drug and alcohol tests as a condition of employment in accordance with 49 CFR Part 655.

The policy becomes effective MARCH 1, 2022.

Portions of this Policy in bold and underlined reflect the public transportation's independent authority. Any drug and/or alcohol test performed under the public transportation's authority will be conducted on non-DOT forms.

Any questions or assistance needed regarding the employer's FTA drug & alcohol testing program should be directed to:

NAME(S): GREG GATES

OFFICE LOCATION: 210 EAST PROGRESS DRIVE, DIXON, IL 61021

PHONE (DAY): (815) 944-4603

Section 2 - DEFINITIONS

ALCOHOL USE. The drinking or swallowing of any beverage, liquid mixture or preparation (including any medication), containing alcohol.

ASD (ALCOHOL SCREENING DEVICE). A breath or saliva device, other than an evidential breath testing device, that is approved by the National Highway Traffic Safety Administration (NHTSA) and appears on ODAPC's (Office of Drug & Alcohol Policy & Compliance) Web page for "Approved Screening Devices to Measure Alcohol in Bodily Fluids" because it conforms to the model specifications from NHTSA.

BAC means breath alcohol concentration.

BAT (BREATH ALCOHOL TECHNICIAN) is an individual who instructs and assists individuals in the alcohol testing process and operates an EBT. A BAT may also act as a Screening Test Technician (STT) who instructs and assists individuals in the alcohol testing process and operates an ASD.

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

COLLECTOR is a person who instructs and assists individuals at a collection site and who receives and makes a screen examination of the urine specimen provided by individuals.

CONFIRMATION (or confirmatory) TEST - In drug testing, a second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or drug metabolite. In alcohol testing, a second test, following a screening test with a result of 0.02 or higher that provides a quantitative data of alcohol concentration.

CONSORTIUM is the FTA Drug and Alcohol Testing Consortium (hereinafter called the Consortium) administered by the Mid-West Truckers Association. The Consortium is a service agent that provides and coordinates the provisions of a variety of drug and alcohol testing services through other service agents for its participants.

COVERED EMPLOYEE means a person, including an applicant or transferee, who performs or will perform a safety-sensitive function for an employer subject to the FTA regulations. A volunteer is a covered employee if the volunteer is required to hold a commercial driver's license to operate the vehicle or the volunteer performs a safety-sensitive function for this entity subject to the FTA regulations and receives remuneration in excess of his or her actual expenses incurred while engaged in the volunteer activity. (See Attachment 1 for listing of covered employee job titles.) Employee means the same as Covered Employee.

DER (DESIGNATED EMPLOYER REPRESENTATIVE) – An employee authorized by the public transportation to take immediate action to remove employees from safety-sensitive duties or cause employees to be removed from these covered duties and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the employer, consistent with the requirements of Part 40.

DISABLING DAMAGE means damage that precludes departure of a motor vehicle from the scene of the accident in its usual manner in daylight after simple repairs. Inclusion means damage to a motor vehicle, where the vehicle could have been driven, but would have been further damaged if so driven. Exclusions mean damage that can be remedied temporarily at the scene of the accident without special tools or parts; tire disablement without other damage even if no spare tire is available; headlamp or tail light damage; or damage to turn signals, horn, or windshield wipers, which makes the vehicle inoperable.

DOT means the U.S. Department of Transportation.

DRUGS – The drugs for which tests are required under Parts 40 and 655.

EMPLOYER means a recipient or other entity that provides public transportation service or which performs a safety-sensitive function for such recipient or other entity. This term includes sub-recipients, operators and contractors.

INITIAL TEST (or screening test) - In drug testing, the test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites. In alcohol testing, it is an analytical procedure to determine whether an employee may have a prohibited concentration of alcohol in a breath or saliva specimen.

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

LABORATORY – Any U.S. laboratory certified by HHS under the National Laboratory Certification Program as meeting the minimum standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under Part 40.

MRO (MEDICAL REVIEW OFFICER) is a licensed physician (Medical Doctor or Doctor of Osteopathy) responsible for receiving and reviewing laboratory results generated by an employer's drug testing program and evaluating medical explanations for certain drug test results. The MRO must be knowledgeable of and have clinical experience in controlled substances abuse disorders, including detailed knowledge of alternative medical explanations for laboratory confirmed drug test results. The MRO must be knowledgeable of issues relating to adulterated and substituted specimens as well as the possible causes of specimens having an invalid result. (The qualified MROs are listed in Attachment 1.)

PERFORMING A SAFETY SENSITIVE FUNCTION means a covered employee is considered to be performing a safety sensitive function and includes any period in which he or she is actually performing, ready to perform, or immediately available to perform such functions.

PRIMARY SPECIMEN - In drug testing, it is the urine specimen bottle that is opened and tested by a first laboratory to determine whether the employee has a drug or drug metabolite in his or her system; and for the purpose of validity testing.

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

REFUSAL TO TEST (alcohol or controlled substances) means that a covered employee:

- 1) Fails to show up for any test (except a pre-employment test) within a reasonable time after being directed to do so by the employer;
- 2) Fails to remain at the testing site until the testing process is complete, provided that an employee who leaves the testing site before the testing process commences for a pre-employment test is not considered to have refused to test;
- 3) Fails to provide a urine specimen or fails to attempt to provide a saliva or breath specimen for any drug or alcohol test as required by this policy and 49 CFR Parts 655 and 40, provided that an employee who does not provide a urine specimen because he or she has left the testing site before the testing process commences for a pre-employment test will not be considered to have refused to test;
- 4) In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring in providing a specimen;
- 5) Fails to sign the certification at Step 2 of the Alcohol Testing Form;
- 6) Fails to provide a sufficient amount of urine or a sufficient amount of breath, when directed; unless it has been determined, through a required medical evaluation, that there was an adequate medical explanation for the failure;

- 7) Fails or declines to take an additional test the employer or collector has directed the covered employee to take;
- 8) Fails to undergo a medical examination or evaluation as directed by the MRO as part of the verification process, or as directed by the employer concerning the evaluation as part of the shy bladder or insufficient breath procedures. In the case of a pre-employment drug test, the employee is deemed to have refused to test on this basis only if the pre-employment test is conducted following a contingent offer of employment;
- 9) Fails to cooperate with any part of the drug or alcohol testing process (e.g., refuses to empty pockets when directed by the collector, behaves in a confrontational way that disrupts the collection process, fails to wash hands after being directed to do so by the collector);
- 10) For an observed collection, fails to follow the observer's instructions to raise his/her clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if the covered employee has any type of prosthetic or other device that could be used to interfere with the collection process;
- 11) Possesses or wears a prosthetic or other device that could be used to interfere with the collection process;
- 12) Admits to the collector or the MRO that the covered employee has adulterated or substituted the specimen;

It is also considered a refusal to test (which is the same as a positive test) when the covered employee refuses to test or when the MRO reports to the employer/Consortium that a covered employee has a verified adulterated or substituted drug test result. A covered employee who has refused to test will be immediately removed from performing safety-sensitive functions. The employer will provide the employee with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the employee.

SAFETY SENSITIVE FUNCTION means any of the following duties:

- (1) Operating a revenue service vehicle, including when it is not in revenue service;
- (2) Operating a non-revenue service vehicle requiring a commercial driver's license;
- (3) Controlling the dispatch or movement of a revenue service vehicle;
- (4) Maintaining (including repairs, overhaul and rebuilding) a revenue service vehicle or equipment used in revenue service, unless the employer receives funding under 49 U.S.C. 5311 and contracts out such services; or
- (5) Carrying a firearm for security purposes.

SAMHSA (SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION) - The federal agency under the Department of Health and Human Services (DHHS) responsible for the certification of laboratories used as part of the drug-testing program. The Consortium has secured a contract with a DHHS/SAMHSA certified laboratory (see Attachment 1).

SAP (SUBSTANCE ABUSE PROFESSIONAL) is a person who evaluates employees who have violated a DOT drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing, and aftercare. (See Attachment 1 for listing of SAPs).

SUBSTITUTED SPECIMEN is a urine specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

VERIFIED TEST is a drug test result or validity test result from a DHHS/SAMHSA-certified laboratory that has undergone review and final determination by the MRO.

Section 3 - PROHIBITED BEHAVIOR

49 CFR (Code of Federal Regulations) Parts 655 and 40 prohibit the use/misuse of controlled substances and/or alcohol by covered employees regulated by the FTA.

No covered employee will consume any illegal drug at any time. All employees are prohibited from reporting for duty or remaining on duty any time there is a quantifiable presence of a prohibited drug in the body above the minimum thresholds defined in Part 40.

Prohibited drugs include:

- Marijuana
- Cocaine
- Phencyclidine (PCP)
- Opioids
- Amphetamines

Covered employees may be tested for drugs at any time during the workday. A covered employee shall be immediately removed from performing safety-sensitive functions after a positive, adulterated or substituted drug test result.

No covered employee shall refuse to submit to a drug or alcohol test (see Refusal to Test definition in Section 2) when required in accordance with 49 CFR Parts 655 and 40. A covered employee shall be immediately removed from performing safety-sensitive functions when he/she refuses to submit to a drug or an alcohol test.

The consumption of alcohol is prohibited while the covered employee is performing a safety-sensitive function. A covered employee shall be immediately removed from safety-sensitive functions while consuming or having consumed alcohol within four hours of reporting for such duties, or having a BAC of 0.04 or greater. No employer having knowledge of such conditions shall allow a covered employee to perform or continue to perform safety-sensitive functions.

No covered employee required to take a post-accident alcohol test shall use alcohol for up to eight hours after an accident or until the post-accident test is completed.

When a covered employee is on-call, the employer shall prohibit the covered employee from consuming alcohol for the specified on-call hours. On-call is defined as the covered employee being available by some means of a telecommunication device for a specified period of time, in order to report for duty if the need arises. The procedure shall include either the opportunity for the covered employee to acknowledge the use of alcohol at the time he/she is called to report to duty and his/her inability to perform his/her safety-sensitive function or the requirement that the covered employee take an alcohol test, if the covered employee has acknowledged the use of alcohol, but claims ability to perform his or her safety-sensitive function.

A covered employee tested under Section 4 of this policy who is found to have an alcohol concentration of 0.02 or greater, but less than 0.04, shall be immediately removed from performing safety-sensitive functions. The employer shall not allow a covered employee to perform or continue to perform safety-sensitive functions until the start of the covered employee's next regularly scheduled duty period, but not less than 8 hours following the administration of the alcohol test or, until another alcohol test is conducted on the employee and the result is less than 0.02. **Any covered employee who has an alcohol test result of 0.02 or greater, but less than 0.04, will be sent home.**

In addition, DOT has published 49 CFR Part 29, implementing the Drug-Free Workplace Act of 1988, which requires the establishment of drug-free workplace policies and the reporting of certain drug-related offenses to FTA. **All employees are subject to the provisions of the Drug-Free Workplace Act of 1988.**

The unlawful manufacture, distribution, dispensation, possession or use of a controlled substance is prohibited in the covered workplace. An employee who is convicted of any criminal drug statute for a violation occurring in the workplace shall notify the DER no later than five days after such conviction.

The employer will provide the covered employee who has violated a drug and/or alcohol regulation with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the employee.

Section 4 – CIRCUMSTANCES FOR TESTING

(A) PRE-EMPLOYMENT TESTING - Before allowing a covered employee or applicant to perform a safety-sensitive function for the first time, the employer must ensure the employee or applicant takes a pre-employment drug test and receives a verified negative result. Pre-employment alcohol testing will not be conducted.

If a covered employee has not performed a safety-sensitive function for 90 or more consecutive calendar days, and the covered employee has not been in the random selection pool during that time, the employee must take and pass a pre-employment test before he or she can return to a safety-sensitive function.

When a covered employee or applicant has previously failed or refused a pre-employment drug test administered under Part 655, the employee must provide the employer proof of having successfully completed a referral, evaluation and treatment plan as described in Part 655.62.

If an applicant or employee's pre-employment drug test is canceled, the applicant or employee must take another pre-employment test and pass before the applicant or employee will be hired or the transferee will start any safety-sensitive function.

(B) RANDOM TESTING – Testing rates will meet or exceed the minimum annual percentage rate set each year by the FTA Administrator. The current year testing rates can be viewed online at <http://www.dot.gov/odapc/random-testing-rates>.

On a regular basis, the Consortium's service agent will, from the total group, randomly select by a computer-based random number generated program, that is matched with the membership numbers, the covered employees' names and their social security numbers, or other comparable identifying numbers. Under the selection process used, each covered employee shall have an equal chance of being selected each time selections are made.

Once the Consortium's service agent generates the random selections, they will forward the random selections to the Consortium, who will notify the employers. If any of the employer's covered employees are selected, the employer will be given a date before which the covered employee must be tested per the random selection process. Failure of the employer to ensure the random testing is conducted within the time allotted will cause the employer to be out of compliance with the random testing requirement of 49 CFR Part 655.45.

The employer shall ensure that random drug and alcohol tests conducted under the random testing regulations are unannounced and immediate. The employer shall also ensure that the random tests are spread reasonably throughout the year. Testing shall start in January and shall be continuous throughout the year. There will be no period during which the testing is halted. Testing will be conducted on all days and hours during which the public transportation service is in operation.

A covered employee shall only be tested for alcohol while the covered employee is performing safety-sensitive functions, just before the covered employee is to perform safety-sensitive functions, or just after the covered employee has ceased performing such functions. A covered employee shall be tested for drugs anytime during the workday.

RANDOM TESTING AT END OF SHIFT – Random testing may occur anytime an employee is on duty so long as the employee is notified prior to the end of the shift. Employees who provide advance, verifiable notice of scheduled medical or child care commitments to the employer will be random drug tested no later than three hours before the end of their shift and random alcohol tested no later than 30 minutes before the end of their shift.

(C) POST-ACCIDENT TESTING - As soon as possible following an accident, a post-accident drug and alcohol test shall be conducted when the following circumstances apply:

1. In a fatal accident: If the accident involves a loss of a human life, any surviving operator shall be tested.
2. In a non-fatal accident: If the accident involves the employer's public transportation vehicle, each covered employee operating the public transportation vehicle shall be tested, unless the employer determines that the covered employee's performance can be completely discounted as a contributing factor to the accident. The employer shall also test any other covered employee whose performance could have contributed to the accident.

The non-fatal accident definition includes a person who as a result of the accident immediately receives medical treatment away from the scene of the accident or one or more vehicles incur disabling damage as a result of the accident, requiring the vehicle(s) to be transported away from the scene by tow truck or other motor vehicle.

A non-fatal accident may also include some accidents in the operation of a vehicle where an individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident even though there is no vehicle collision, unless the covered employee can be completely discounted as a contributing factor to the accident.

If a post-accident breath alcohol test is not conducted within two hours following the accident, the employer shall prepare and maintain on file a record stating why the breath alcohol test was not promptly administered. If the breath alcohol test is not conducted within eight hours following the accident, the employer shall cease all attempts to complete the alcohol test and shall prepare and maintain a record stating why the breath alcohol test was not promptly administered. (See [Attachment C](#))

If a post-accident drug test is not conducted within 32 hours following the accident, the employer shall cease all attempts to conduct the drug tests and prepare and maintain, on file, a record stating why the drug test was not promptly administered. (See [Attachment C](#))

A covered employee who is subject to post-accident testing shall remain readily available for such testing or it is considered a refusal to test. 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 medical care.

(D) REASONABLE SUSPICION TESTING - All covered employees shall be required to submit to an alcohol and/or drug test when the employer determines that reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse. A reasonable suspicion referral for testing will be made by a trained supervisor or other trained public transportation official based on specific contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the covered employee. (See [Attachment E](#))

An employer may direct a covered employee to undergo reasonable suspicion testing for alcohol only while the employee is performing safety-sensitive functions; just before the employee is to perform safety-sensitive functions; or just after the employee has ceased performing such functions.

If a reasonable suspicion alcohol test is not conducted within two hours after observing the covered employee, the employer shall prepare and maintain on file, a record stating the reason why the test was not promptly administered. If the test is not conducted within eight hours after observing the covered employee, the employer shall cease attempts to conduct the test and prepare and maintain on file a record stating the reasons why the test was not administered.

(E) RETURN TO DUTY TESTING – When a covered employee has violated a drug and/or alcohol regulation, the employer shall follow the procedures outlined in 49 CFR Part 40 before returning the employee to duty to perform a safety-sensitive function.

The SAP will provide a follow-up evaluation letter to the employer and clearly state the employee has complied with his/her recommendations for education/treatment. If the employer is ready for the covered employee to return to safety-sensitive functions, a return to duty test will be scheduled. The employer will ensure that the return to duty drug collection is conducted under direct observation.

(F) FOLLOW-UP TESTING – The employer shall conduct follow up testing of each employee who returns to duty, as specified in 49 CFR Part 40, Subpart O. The employer will ensure that all follow-up drug collections are conducted under direct observation.

The Consortium can assist the employer in ensuring that follow-up testing is conducted in accordance with the plan established by the SAP.

Section 5 - DRUG TESTING

(A) DRUG TESTING PROCEDURES: Drug testing procedures will be followed in accordance with 49 CFR Part 40.

When the covered employee arrives at the collection site, the testing process will begin without undue delay. To ensure the security during the testing process, only one collection will be conducted at a time. The covered employee must have positive identification either by photo identification or by the identification of the employee by the employer representative. The collector will explain the basic collection procedures and show the covered employee the instructions on the back of the Federal Drug Testing Custody and Control Form (hereinafter called CCF). The covered employee will be instructed to remove and leave with the collector, or in a mutually agreeable location, any outer clothing along with any briefcase, purse or other personal belongings. The employee may retain his/her wallet.

The covered employee will be directed to empty his/her pockets and display the items in them. If the collector determines none of the items could adulterate the specimen, the covered employee may return the items into his/her pockets. If there is any material that could adulterate a specimen, the collector must determine whether the material was accidentally brought in or intentionally brought in to adulterate the specimen. If it was accidental, the collector will retain the material and return it to the covered employee when the testing process is complete. If it was intentional, a direct observation test will take place immediately.

The collector shall complete Step 1 of the CCF. The covered employee shall wash and dry his/her hands before providing the specimen. Thereafter, the covered employee will have no further access to water or other materials until the specimen is given to the collector. The covered employee will be instructed to go into the room, provide at least 45 mL of urine, not flush the toilet and return to the collector with the specimen. The covered employee will provide the specimen in private, except in the case of an observed or monitored collection. Any conduct that clearly indicates an attempt to tamper with a specimen will cause a new collection under direct observation to take place immediately.

The collector will ensure there is at least 45 mL of urine in the collection container and the temperature of the specimen is within the range of 90-100 degrees. If the temperature is out of that range, a new collection under direct observation will take place immediately. The specimen will also be inspected for unusual color, the presence of foreign objects or material or for other signs of tampering. If it is apparent the covered employee has tampered with the specimen, a new collection under direct observation will take place immediately.

If a direct observation collection must take place, it must be conducted immediately. All direct observation collections are done without any advance notice to the covered employee. The collector shall explain to the covered employee the reason for the direct observation test, except when the employer is required to do so. The collector or an observer must be the same gender as the employee. The same gender collector or observer must request the covered employee to raise his or her shirt, blouse, or dress/skirt, as appropriate, above the waist; and lower his/her clothing and underpants to show the collector or observer, by turning around, that the covered employee does not have a prosthetic device. After the collector or observer has determined the covered employee does not have such a device; the employee may be permitted to return the clothing to its proper position for the observed urination. The collector or observer must watch the urine go from the employee's body into the collection container. An observer will continue to watch the specimen until it is given to the collector.

A monitored collection will only be conducted if a multi-stalled restroom is used and all sources of water or potential adulterants cannot be secured. The collector must be the same gender, unless he or she is a medical professional. An observer must be the same gender. A bluing agent shall be put in the toilet the covered employee will use. The covered employee shall provide the urine specimen behind a closed stall door with the collector/observer standing outside of the stall door listening to the covered employee urinate into the collection container. If the collector/observer hears sounds or makes other observations of the covered employee attempting to tamper with a specimen, another collection will take place immediately under direct observation.

The tabs on the specimen bottles will be broken in front of the collector and the covered employee. The employee will give the specimen container to the collector and the collector will pour the urine specimen into the split specimen bottles. The primary specimen shall be at least 30 mL of urine. The split specimen shall be at least 15 mL of urine. The covered employee should observe the specimen at all times until the lids/caps are secured and the tamper-evident bottle seals are put over the lids/caps (this is for the covered employee's protection to ensure it is his/her specimen). The covered employee is to initial the tamper-evident bottle seals on the bottles for proof that it is her/her specimen. The covered employee will also be required to sign the CCF as proof that the specimen identified as having been collected is in fact the covered employee's. The collector will complete the CCF and place the specimen bottles and Copy 1 of the CCF in the pouches of the plastic bag and secure both pouches. The covered employee will then be dismissed from the collection site.

Both specimens are then sent by overnight delivery to the DHHS/SAMHSA-certified laboratory for testing of the five drugs or classes of drugs and for validity testing.

Before informing any third party about any medication the employee is using pursuant to a legally valid prescription consistent with the Controlled Substances Act, the MRO will allow 5 business days from the date the MRO reported the verified negative result for the employee to have his/her prescribing physician contact the MRO to determine if the medication can be changed to one that does not make the employee medically unqualified or pose a significant safety risk. If, in the MRO's reasonable medical judgement, a medical qualification issue or a significant safety risk remains after communicating with the employee's prescribing physician or after 5 business days, whichever is shorter, the MRO will report to third parties the employee is medically unqualified or poses a significant safety risk if allowed to continue safety-sensitive functions.

Before a laboratory-confirmed positive test, adulterated test, substituted test or invalid test result will be released to the Consortium, the MRO will conduct a verification interview with the covered employee by telephone unless: the covered employee declines to discuss the

test result; the MRO or the employer cannot make contact with the covered employee within 10 days of the MRO receiving the laboratory result; or more than 72 hours have passed since the employer has contacted the covered employee to call the MRO.

During the verification process, if the covered employee can give the MRO a legitimate medical explanation for the positive, adulterated or substituted test result, the MRO will report the verified test result as negative. If the covered employee cannot give the MRO a legitimate medical explanation, the verified positive test result will be reported as positive and the verified adulterated or substituted test result will be reported as a refusal to test. If the test result is invalid or contains an unexplained interfering substance and the covered employee cannot give the MRO an acceptable explanation or a valid prescription and the covered employee does not admit to adulterating or substituting the specimen, the verified test result will be reported as a cancelled test with a second collection to take place immediately on the covered employee under direct observation. If the covered employee can give the MRO an acceptable explanation, the verified test result will be a cancelled test with no further testing needed unless a negative result is needed for pre-employment, return to duty or follow-up testing. If the covered employee admits to adulterating or substituting the specimen, the verified test result will be reported as a refusal to test.

All verified negative, positive, refusal to test (adulterated or substituted), and invalid and cancelled test results will be released by the MRO to the Consortium, who will forward the results to the employer.

(B) DILUTE SPECIMENS: The employer will not conduct second collections on negative dilute test results.

(C) SHY BLADDER: After a covered employee's first unsuccessful attempt to provide a minimum of 45 mL of urine, the shy bladder time starts. The collector will document on the remarks line of the CCF and inform the employee of the time in which the 3-hour period begins and ends. Any insufficient specimen shall be discarded. The covered employee will be urged to drink up to 40 oz. of fluids, reasonably through a period of up to 3 hours; however, it is not considered a refusal to test if the covered employee chooses not to drink fluids. If the covered employee does not provide a sufficient amount of specimen within 3 hours, the collection will be discontinued and the employer will be notified. The employer will consult with the MRO, then direct the covered employee to obtain, within 5 working days, an evaluation from a licensed physician, acceptable to the MRO, who has expertise in the medical issues associated with the covered employee's inability to provide an adequate amount of specimen. The physician must provide to the MRO a written statement of his/her recommendations and the basis for them. If the covered employee has a medical condition that could have prevented him/her from providing a sufficient amount of urine, and the MRO agrees with the physician's recommendation, the MRO will report the test result as a cancelled test. If the covered employee does not have a medical condition that could have prevented him/her from providing a sufficient amount of urine and the MRO agrees with the physician's recommendation, the MRO will report the test result as a refusal to test.

(D) SPLIT SPECIMEN TESTS: In the event of a verified positive test result, or a verified adulterated or substituted result, the employee can request that the split specimen be tested at a second laboratory. The employer guarantees that the split specimen test will be conducted in a timely fashion. **The employee shall reimburse the employer for the cost of the split specimen test.**

Section 6 - ALCOHOL TESTING

(A) ALCOHOL TESTING PROCEDURES: Alcohol testing procedures will be followed in accordance with 49 CFR Part 40.

If both a drug and alcohol test is to be conducted on the covered employee, the alcohol test must be completed before the urine collection process begins. A covered employee shall only be tested for alcohol while the covered employee is performing a safety-sensitive function, just before a covered employee is to perform a safety-sensitive function, or just after the covered employee has ceased performing a safety-sensitive function.

To ensure the security of the alcohol testing site, only authorized personnel shall be allowed to enter the testing site. The BAT/STT shall ensure that the covered employee is given privacy while an alcohol test is being conducted to prevent unauthorized persons from seeing or hearing the test result. Alcohol testing will be conducted on one covered employee at a time. The screening test and confirmation test, if needed, will be completed on a covered employee before the BAT/STT starts an alcohol test on another covered employee to be tested.

A covered employee shall appear at the collection site at the time specified by the employer. If the covered employee does not appear at the specified time, the BAT/STT shall notify the employer to determine how long it should take for the covered employee to arrive at the collection site. If the covered employee has not arrived by that time, the BAT/STT will contact the employer to inform him/her the covered employee has not reported for testing.

When the covered employee arrives at the collection site, the testing process will begin without undue delay. The employee must have positive identification either by photo identification or by the identification of the employee by the employer representative. The BAT/STT will explain the testing procedures and show the instructions on the back of the DOT Alcohol Testing Form (hereinafter called ATF) to the covered employee. The BAT/STT shall complete Step 1 on the ATF. The covered employee will then be directed to complete Step 2 on the ATF and sign the certification. If the covered employee refuses to sign the certification, the BAT/STT will document on the ATF that the covered employee has refused to test and the employer will be immediately notified.

If an ASD is used for the screening test, the BAT/STT will check the expiration date on the ASD and show it to the covered employee. If it is beyond the expiration date, the ASD shall be disposed of and a new ASD shall be used. The BAT or STT shall open an individually sealed package containing the ASD in view of the employee. The BAT/STT shall provide a small clean cup and have the donor spit into the cup. The BAT/STT shall ensure the test pad collects enough saliva to completely wet the test pad. The BAT/STT will immediately start the timer for 4 minutes. If a distinct colored line appears, the alcohol concentration is greater than or equal to 0.02. The BAT will then conduct a confirmation test using an EBT.

If a line does not appear, the alcohol concentration is less than .02. The BAT/STT would then sign and date Step 3 of the ATF. The BAT/STT must immediately transmit the alcohol test result using Copy 1 of the ATF by telephone, electronic means, or in person to the employer. The ASD and materials used in the testing process shall be properly disposed of.

If an EBT is used for the screening test, the BAT or the covered employee will select an individually sealed mouthpiece. The BAT will open the sealed mouthpiece in front of the covered employee and insert it into the EBT. The covered employee will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The covered employee will be shown the breath alcohol test result and the result will be affixed to the ATF with tamper-evident tape.

If the result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the ATF. The BAT must transmit the alcohol test result using Copy 1 of the ATF immediately by telephone, electronic means or in person to the employer. If the alcohol concentration is 0.02 or greater, a confirmation test shall be conducted with an EBT not less than 15 minutes nor more than 30 minutes after the completion of the screening test. During that time, the covered employee will be asked not to eat, drink, belch or put anything into his/her mouth to prevent an accumulation of mouth alcohol that could lead to an artificially high reading on the confirmation test. The BAT/STT will note in the remarks on the ATF these instructions were given and will also note on the ATF if the covered employee chose to ignore the instructions. The confirmation test will still be conducted. If the confirmation test will be conducted at a different site, the BAT/STT or the employer must transport the covered employee to the testing site. The covered employee will not be allowed to drive a motor vehicle.

If the confirmation test is conducted more than 30 minutes after the result of the screening test, the BAT shall note in the remarks on the ATF the reason the confirmation test could not be conducted within the 15-30 minute time frame. The confirmation test will still be conducted.

Before the confirmation test is conducted, the BAT must conduct an air blank test on the EBT that reads "0.00" and show the reading to the covered employee. An individually sealed mouthpiece will be opened in front of the covered employee and attached to the EBT. The BAT and the covered employee shall read the sequential test number displayed on the EBT. The covered employee will be requested to blow steadily and forcefully into the mouthpiece for at least six seconds or until the EBT indicates that enough breath has been obtained. The covered employee will be shown the breath alcohol test result and the result will be affixed to the ATF with tamper-evident tape.

If the confirmation test result is less than 0.02 alcohol concentration, the BAT shall sign and date Step 3 on the ATF. The BAT must transmit the alcohol test result using Copy 1 of the ATF immediately by telephone, electronic means or in person to the employer. If the confirmation test result is 0.02 or greater alcohol concentration, the covered employee shall be directed to sign Step 4 on the ATF. If the covered employee does not sign, the BAT will note in the remarks on the ATF of the covered employee's failure to sign Step 4. The covered employee's failure to sign Step 4 will not be considered a refusal to test. The BAT must immediately notify the employer by any means of an alcohol test result of 0.02 or greater to ensure the result is immediately received by the employer.

(B) INABILITY TO PROVIDE AN ADEQUATE AMOUNT OF BREATH: If a covered employee is unable, or alleges he/she is unable to provide an amount of breath sufficient to give a reading on the EBT, the BAT should again instruct the covered employee to attempt to provide an adequate amount of breath and the proper way to do so. If the covered employee refuses to make a second attempt, the BAT shall discontinue the test and immediately notify the employer.

If the covered employee does make an attempt again and fails to provide an adequate amount of breath, the BAT may provide another opportunity to the covered employee if the BAT feels there is a strong likelihood the covered employee could provide a sufficient amount of breath. If the covered employee fails to provide an adequate amount of breath, the BAT shall note the failure on the remarks of the ATF and immediately notify the employer. The employer will then direct the covered employee to obtain, within 5 days, an evaluation from a licensed physician who is acceptable to the employer and has expertise in the medical issues associated with the covered employee's inability to provide a sufficient specimen. The employer will tell the physician the covered employee was required to take a DOT breath alcohol test but was unable to provide a sufficient amount of breath and the consequences for refusing to take the required alcohol test. The employer must also tell the physician to provide to the employer a signed statement of the physician's conclusions and the basis for them. If the physician determines the covered employee has a medical condition that could have prevented him/her from providing a sufficient amount of breath, the test will be cancelled. No further testing will be required except when the covered employee needs a test result of less than 0.02 for a return to duty or a follow-up test. If the physician determines the covered employee does not have a medical condition that could have prevented him/her from providing a sufficient amount of breath, it will be considered a refusal to test. The employer shall notify the covered employee of the physician's conclusions.

Section 7 - ACCESS TO RECORDS

All records pertaining to the employer's drug and alcohol testing program shall be maintained in a secure location with controlled access. Access and release of drug and alcohol testing records shall be in accordance with 49 CFR Part 655.

Upon written request, covered employees are entitled to copies of their records pertaining to their use of drugs or alcohol, including any records pertaining to their drug and alcohol tests. Covered employees are also entitled to have access to any pertinent records directly related to their given urine or alcohol specimen testing. The employer shall promptly provide records requested by the covered employee.

Records to subsequent employers shall be made available upon receipt of a specific written authorization from the covered employee. The employer will only disclose information that is expressly authorized by the terms of the covered employee's request. The employer shall provide such information and results requested promptly to the subsequent employer at no charge.

The employer shall disclose drug and alcohol testing information required to be maintained under 49 CFR Part 655, pertaining to a covered employee, to the State oversight agency or grantee required to certify to FTA compliance with the drug and alcohol testing procedures of 49 CFR Parts 40 and 655.

Section 8 - EMPLOYEE ASSISTANCE PROGRAM AND GENERAL INFORMATION

Each covered employee will receive a copy of the Anti-Drug and Alcohol Misuse Policy and sign an Acknowledgement they received a copy of the Policy (Attachment G).

Each covered employee shall be given educational information concerning the effects and consequences of drug use on the covered employee's personal health, safety and work environment, including signs and symptoms of a drug problem. **The covered employee will be provided educational information concerning the effects and consequences of alcohol use on the covered employee's personal health, safety and work environment, including signs and symptoms of an alcohol problem.**

Each covered employee will receive at least 60 minutes of training on the effects and consequences of prohibited drug use on personal health, safety, and the work environment, and on the signs and symptoms which may indicate prohibited drug use. It is the covered employee's responsibility to report to work fit for duty, and remain fit throughout the workday in order to perform in a safe, efficient and productive manner. The covered employee will also be made aware of the signs and symptoms of a drug and/or alcohol problem (his/hers or a co-worker's) and shall be made aware of ways to intervene when a drug and/or alcohol problem is suspected, including referral to management, referral to an employee assistance program (if available from the employer), and referral to drug and/or alcohol abuse hotlines and help-lines as provided, or local Alcoholics Anonymous or Narcotics Anonymous groups. The hotline and help-line numbers are made available as a reference only: Alcoholics & Narcotics Help Line (888) 206-7272; Focus on Recovery Help-Line for Alcohol and Drug Abuse (800) 234-0286; or the Center for Substance Abuse Treatments Drug Information, Treatment, and Referral Hotline (800) 662-4357.

The employer will require the covered employee to inform them and promptly provide written verification from the licensed medical practitioner of any prescribed or over-the-counter substance that will adversely affect his/her ability to safely perform safety-sensitive functions. If the substance could adversely affect his/her ability to perform safety-sensitive functions, or the covered employee does not promptly provide written verification from the medical practitioner, the employer will temporarily remove or reassign the employee from a safety-sensitive function, if deemed appropriate.

A covered employee may come forward for assistance with a drug and/or alcohol use problem, as long as it is before a covered employee's notification of an impending drug and/or alcohol test. The employer shall provide the covered employee with referrals of where the covered employee can go for assistance. The covered employee will be removed from any safety sensitive function, and if no other position is available, will be put on a leave of absence until such time the covered employee has completed the evaluation and rehabilitation required by a drug and alcohol professional. All costs associated with the evaluations and rehabilitation will be the responsibility of the covered employee. Any testing conducted shall be pre-paid by the employer, to be immediately reimbursed by the covered employee.

Section 9 - INFORMATION CONCERNING THE EFFECTS OF ALCOHOL AND CONTROLLED SUBSTANCES USE ON AN INDIVIDUAL'S HEALTH, WORK & PERSONAL LIFE

Employees who abuse drugs and/or alcohol cause more absenteeism, loss in work productivity, more accidents and more medical claims. This results in a loss of \$140 billion to American businesses each year. Compared with the average employee, a typical drug-using employee in the workplace is:

- 2.5 times more likely to be absent 8 days or more each year;
- 3 times more likely to be late for work;
- 3.6 times more likely to be involved in workplace accidents;
- 5 times more likely to file a workers' compensation claim; and,
- Incur 300% higher medical claims.

Marijuana - The common name for the drug made from chopped leaves, stems and flowering tops of a cannabis plant. Some common street names for marijuana are "dope," "blunt," "joint," "pot," "reefer." Marijuana can be smoked or eaten. Marijuana is a depressant and mind-altering drug. It works on the brain and causes hallucinations. A person using marijuana is more than likely to experience slowed reaction time, reduced concentration, distorted vision and depth perception, is slower in making decisions, often drives slower than the speed limit, is unable to correctly measure distance and time, and has impaired short-term memory.

Some of the symptoms and signs of marijuana use are:

Short-term memory loss
Increased appetite
Increased heart rate

reddened eyes
slowed thinking
dilated pupils

moodiness
loss of memory

Some visible signs noted for the presence of marijuana are:

Roach clips	bongs
Cigarette rolling papers	small pipes
One hitters (usually metal - slim tubular device)	

The active ingredient in marijuana (THC) is stored in the body fat and could be retained for days or weeks, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Marijuana and alcohol together will magnify the effects of both many times. Chronic marijuana smoking could cause severe irritation of the lungs, heart problems, reduced immune system and possible brain damage.

Phencyclidine - It was developed originally as an anesthetic but was taken off the market because it sometimes caused hallucinations. The most common street names for phencyclidine are "PCP", "angel dust," "crystal" and "tea". Phencyclidine is sold in various forms, mainly as a white, off-white or brown crystal-like powder, tablet or capsule. It can be ingested by mouth, snorted or injected intravenously. It can also be smoked when combined with marijuana or tobacco. A person using phencyclidine is more than likely to experience impaired coordination and dulled senses, a sense of power, drowsiness, aggressive behavior, hallucinations and blurred or double-vision. In some cases a person could even experience convulsions, coma, ruptured blood vessels in the brain, heart and lung failure, or even death.

Some of the symptoms and signs of phencyclidine use are:

Confusion	increased blood pressure	anxiety
Panic	dizziness	drowsiness
Hallucinations	disorientation	sweating
Increased heart rate	aggressive behavior	

Some of the signs for the presence of phencyclidine are:

Needles	capsules	syringes
Plastic packets with powdery substance	tablets	

Phencyclidine is water soluble but still could be retained in the body's system for days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Phencyclidine and alcohol together is dangerous and could cause an overdose. Chronic Phencyclidine use could cause hallucinations, psychosis, convulsions, coma or possible death.

Cocaine - Cocaine comes from the leaves of coca plants. Some common street names for cocaine are "coke," "crack," "rock," "snort," "toot," "blow," and "snow." Cocaine can be snorted, injected intravenously, smoked or free-based (heating the cocaine and inhaling the vapors). Cocaine stimulates the body's central nervous system. Psychological dependence on the drug can be high with repeated use. A person using cocaine is more than likely to experience impatience, anger, over stimulated reflexes, distorted vision and depth perception, slow reaction time and false sense of security and alertness. In some cases, a person could even experience seizures, heart attacks, convulsions, hallucinations and death.

Some of the symptoms and signs of cocaine use are:

Dilated pupils	nose bleeds	paranoia
Irritability	runny nose	needle marks
Increased blood pressure	hallucinations	restlessness
Talkativeness	anxiety	weight loss
Depression	nervousness	

Some of the signs for the presence of cocaine are:

Small spoons	mirrors	needles
Small plastic bags or vials	syringes	small drinking straws
Razor blades	rolled paper currency	small butane torch

Cocaine is water soluble but still could be retained in the body's system for several days, depending on the quality of the drug, the tolerance of the user and the dosage or amounts taken. Cocaine causes the most mental dependency of any known drug. Cocaine and depressants, taken together, can be very dangerous or even fatal. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic cocaine use could cause seizures, heart attacks, strokes, convulsions, depression or death.

Amphetamines- Amphetamines are manufactured central nervous system stimulants used most often by individuals to stay awake. Psychological dependence on the drug can be high with repeated use. Some common street names for amphetamines are "speed," "crank," "meth," "crystal," "diet pills," "bennies" and "uppers." In pure form, amphetamines are yellowish crystals in which some are made into tablets, pills or capsules. Amphetamines can be ingested in tablet, pill or capsule form, snorted, or injected intravenously if in powder or liquid form. A person using amphetamines is more than likely to experience delayed reaction time, over stimulated reflexes, anxiety, irritability, distorted vision and depth perception, and a false sense of security and alertness.

Some of the symptoms and signs of amphetamine use are:

Loss of appetite	paranoia	increased blood pressure
Weight loss	sweating	dilated pupils
Dry mouth	talkativeness	sleeplessness
Nervousness	needle marks	depression
Hallucinations	anxiety	

Some of the signs for the presence of amphetamines are:

Pills	small butane torch	tablets
Rolled paper currency	capsules	small drinking straws
Small plastic bags or vials	razor blades	needles
Syringes		

Amphetamines are water-soluble, but still could be retained in the body's system for several days depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Chronic amphetamine use could cause physical collapse, delusions, hallucinations, brain damage, heart damage, toxic psychosis or death.

Opioids - Some opioids come from the seed pod of the Asian poppy. Other opioids are synthesized or manufactured. Psychological dependence can be high with repeated use. Some common street names are "horse," "junk," "smack," "downers," "M," "yellow jackets," "blues" and "ludes." Opioids are in many different compounds and forms. The most common are the pills, tablets or capsules. Other compounds and forms are in liquid or powder form. Opioids can be injected, smoked or injected intravenously. A person using opioids is more than likely to experience distorted sense of time and distance, slowed reflexes, difficulty focusing, drowsiness and little or no concentration.

Some of the symptoms and signs of opioid use are:

Nausea	needle marks	loss of appetite
Confusion	drowsiness	cold or moist skin
Depression	short attention span	reduced pain
Memory loss	constricted pupils	sweating
Diarrhea	vomiting	

Some of the signs for the presence of opioids are:

Pills	bottle caps	tablets
Small packets	capsules	eye droppers
Needles	small spoons	syringes

Opioids are water soluble, but still could be retained in the body's system for one to several days, depending on the quality of the drug, the tolerance of the user and the dosage or amount taken. Opioids taken with alcohol and other depressant drugs magnify the effects of the opioids and could lead to overdoses. Intravenous users have a high risk of contracting liver disease, tetanus, serum hepatitis and AIDS from the use of needles. Chronic opioid use could cause loss of consciousness, convulsions, coma or death.

Alcohol - Some common street names for alcohol are "booze," "juice," "brew," "sauce" and "hooch." As a rule, a drink or two will create a feeling of well-being. What determines the rate of metabolism in the body and how fast it dissipates the alcohol depends on the altitude, the individual's body weight, metabolism, stomach content, gender, and whether the individual is sick or healthy, rested or tired. After the first drink or two, impairment begins, depending on the factors stated above. When the individual consumes alcohol that produces physical or mood-altering effects, it becomes a substance of abuse. A person using alcohol is more than likely to experience blurred or distorted vision, impaired reaction time, impaired judgment, anger, nausea, drowsiness and aggressiveness.

Some of the symptoms and signs of alcohol use are:

<u>Slurred speech</u>	<u>hostility</u>	<u>odor on breath</u>
<u>Insomnia</u>	<u>flushed skin</u>	<u>loss of concentration</u>
<u>Glazed eyes</u>	<u>unsteadiness</u>	<u>blackouts</u>
<u>Memory loss</u>	<u>drowsiness</u>	<u>incoherence</u>

Chronic alcohol use could cause brain damage, neurological damage, liver damage, pancreas and kidney damage, heart problems, strokes, cancer, coma, toxic psychosis and possible death.

Section 10 - DISCIPLINARY ACTION

The employer will provide the covered employee who has violated a drug and/or alcohol regulation with names and phone numbers of SAP networks that will offer qualified SAPs available geographically to the employee. **The employee will be terminated.**

If the employer chooses to rehire the employee for safety-sensitive functions, the employee must follow the procedures outlined in 49 CFR Part 40. The covered employee must test negative on a return to duty drug test and/or less than 0.02 on a breath alcohol test before returning to safety-sensitive functions. The employer shall conduct follow up testing on the employee as specified in SAP follow up evaluation letter. The employer will ensure that the return to duty and all follow up drug collections are conducted under direct observation.

All costs associated with the SAP evaluations, rehabilitation, return to duty testing and follow up testing will be the responsibility of the covered employee. The return to duty and follow up testing costs shall be pre-paid by the employer, to be immediately reimbursed by the covered employee.

THIS IS NOT AN EMPLOYMENT CONTRACT



**FEDERAL TRANSIT ADMINISTRATION DRUG & ALCOHOL TESTING CONSORTIUM
INSTRUCTION SHEET
(ADMINISTERED BY MID-WEST TRUCKERS ASSOCIATION)**

Enclosed is the Anti-Drug and Alcohol-Misuse Policy and Attachments as follows:

Sample Anti-Drug & Alcohol-Misuse Abuse Policy	Attachment A
Pre-Employment Notification and Acknowledgement Form	Attachment B
Release of Drug & Alcohol Testing Information From Co/Previous Employer Form	Attachment C
Employer's Record of Post-Accident Test Form	Attachment D
Instructions to Covered Employee Involved in an Accident Form	Attachment E
Reasonable Suspicion Observation Form	Attachment G
Acknowledgement of Anti-Drug & Alcohol-Misuse Policy Form	Attachment M
Notice of Compassionate Use of Medical Cannabis Pilot Program Form	Attachment X
Employee Action Form	

The following steps must be completed in order to be included in the Consortium:

1. You will need to carefully review the Anti-Drug & Alcohol-Misuse Abuse Policy and let us know what changes you would like for us to revise to make it your transit's policy. Before you reproduce the Anti-Drug & Alcohol-Misuse Policy, complete the policy effective date, then make copies for each covered employee to initial and date, plus give them a copy to keep.
2. Each applicant/or employee transferring into a safety-sensitive position should complete Attachment A (Pre-Employment Notification and Acknowledgement Form).
3. Each applicant/transferred employee will need to sign Attachment B (Release of Drug & Alcohol Testing Information from Co/Previous Employer) for you to obtain drug and alcohol information from the co/previous employer(s) for the past 2 years.
4. Make 2 copies of Attachment G (Acknowledgement of Anti-Drug & Alcohol-Misuse Policy Form), to be completed by each covered employee. One copy will be kept in the employer's file, the other to be returned to the covered employee.
5. Medical cannabis is against federal law, therefore, covered employees are not allowed to use it (Attachment M). Have each covered employee sign an Attachment M and provide a copy to the employee. Retain a signed copy for your records.
6. You will need to complete Attachment X (Employee Action Form) in its entirety and send it to: Mid-West Truckers Association, 2727 N. Dirksen Parkway, Springfield, IL 62702, or, fax it to: (217) 525-0342.
7. Once Attachment X is received by MTA, the pre-employment tests will be scheduled unless you conduct the testing on your own. You will receive a phone call from the collector to confirm all the details (day, time & place) for the collection of the urine specimen.
8. We will also enter your applicant/transferred employee into the Consortium's random testing pool. Our MRO will select covered employees by a random computer program every two months.

All drug & alcohol records must be maintained in a secured location with controlled access. All negative drug test results and alcohol test results of less than .02 must be maintained in your file for a period of one year. All positive, adulterated and substituted drug test results, alcohol test results of .02 or higher, and refusals to test must be maintained for five years. The lab will provide us with the semi-annual drug testing statistical summaries (if you have enough testing activity) and our third-

party administrator will provide us with the annual drug and alcohol summaries, all of which must be kept for five years. We will provide you with those summaries. All other records concerning your program shall be maintained according to 49 CFR Part 655 and Part 40.

If a post-accident drug and alcohol test needs to be conducted, Attachment C (Employer's Record of Post-Accident Test) can be completed and kept for your records in case of a FTA or state Illinois DOT audit.

You should instruct each covered employee on the procedures to follow when an accident occurs (see Attachment D - Instructions to Covered Employee Involved in an Accident). It is your responsibility to let the covered employee know when a post-accident drug and alcohol test is required. It is also your responsibility to call the Consortium to get the post-accident test completed as soon as possible after the accident occurs. The Consortium is on-call 24 hours a day, 7 days a week to handle any post-accident tests.

A reasonable suspicion test needs to be conducted when you suspect a covered employee may be under the influence of drugs and/or alcohol that would be reflected by unusual actions. The employer's designated person who has been trained should complete Attachment E (Reasonable Suspicion Observation Form) as soon as possible. It is your responsibility to call the Consortium to get the reasonable suspicion test completed as soon as possible after you observe the covered employee to determine reasonable cause. The Consortium is on-call 24 hours a day, 7 days a week to handle any Reasonable Cause tests.

All persons designated by you to supervise the covered employees must complete at least 60 minutes of training on alcohol misuse and 60 minutes of training on drug abuse. Training needs to be conducted every 3 years, according to the IL DOT.

We must be informed immediately when you delete an applicant/employee. Attachment X (Employee Action Form) must be completed and faxed or mailed to us. You are not in compliance with 49 CFR Part 655 when your list of covered employees is not current.

When you receive a Random Drug and/or Alcohol Test Notice from the Consortium, you are required to complete the required tests before the end of the selection period in which the covered employee(s) was selected. No covered employee can be informed of the random test(s) except just prior to the actual test(s) being performed.

We will bill you for any pre-employment, post-accident, reasonable suspicion, return-to-duty, or follow-up testing that is conducted for your public transit. Also, if the applicant/employee requests a split-specimen test, you will be billed for that test which was conducted on his/her behalf. See the enclosed FTA Price sheet for Consortium charges. Please pay in full promptly upon receipt of invoice.

The annual billing for random drug and alcohol testing is done once a year, around the first of November of the preceding year. Payment is required by mid-December. If you add additional covered employees during the calendar year that require additional slots, you will be billed for them as needed. There will be no additional charge, however, when you replace terminated covered employees with an equal number of new covered employees.

PRE-EMPLOYMENT NOTIFICATION & ACKNOWLEDGMENT

I understand and acknowledge that I will be required to undergo a urine drug test under the authority of the U.S. Department of Transportation (DOT), Federal Transit Administration (FTA) prior to being hired or transferred into a safety-sensitive position as defined in 49 CFR Part 655*. I understand and acknowledge that I will not be assigned to perform a safety-sensitive function unless my urine drug test has a verified negative result.

Applicant's/Employee's signature: _____

Applicant's/Employee's printed name: _____ **Date** _____

Have you tested positive, or refused to test, on any DOT pre-employment drug or alcohol test administered by an employer to which you applied for, but did not obtain, a safety-sensitive position in the past two years? Please circle your response below:

YES

NO

If you answered YES, can you provide documentation that you successfully completed the DOT return to duty requirements described in 49 CFR Part 40, Subpart O? Please circle your response below:

YES

NO

Applicant's/Employee's signature: _____

Applicant's/Employee's printed name: _____ **Date** _____

* A safety-sensitive function, as described in 49 CFR Part 655 Section 655.4, includes: (1) operating a revenue service vehicle; (2) operating a non-revenue service vehicle, when required to be operated by a CDL holder; (3) controlling dispatch or movement of a revenue service vehicle; (4) maintaining (including repairs, overhaul and rebuilding) a revenue service vehicle or equipment used in revenue service; or (5) carrying a firearm for security purposes.

EMPLOYER'S RECORD OF POST-ACCIDENT TEST-FTA

Post Accident Test:

Date of Accident _____ Time of Accident _____ AM/PM

Location of Accident _____

Covered Employee's Name _____ Social Security Number _____

Call to Employer by Covered Employee:

Date _____ Time _____ AM/PM

Description of Accident Situation: _____

Request for Test: ☐ Drug & Alcohol ☐ Drug ☐ Alcohol

Date _____ Time _____ AM/PM Talked to _____

With _____

Location where test is to be performed _____

Time Promised _____ AM/PM

FAILURE TO COMPLETE TEST(S):

Alcohol (2 hours no test) Reason _____

Alcohol (8 hours no test) Reason _____

Drugs (32 hours no test) Reason _____

DO NOT WAIT ANY LONGER FOR TESTS!

Immediately call: _____ **at** _____
(NAME) (PHONE NUMBER)

or: _____ **at** _____
(NAME) (PHONE NUMBER)

1.) If an accident involves a fatality with this employer's mass transit vehicle. This employer shall also test any other covered employee whose performance could have contributed to the fatal accident; or

2.) In a non-fatal accident, if the accident involves this employer's mass transit vehicle, each covered employee operating the mass transit vehicle shall be tested unless this employer determines that the covered employee's performance can be completely discounted as a contributing factor to the accident. The non-fatal accident definition includes a person who as a result of the accident immediately receives medical treatment away from the scene of the accident or one or more vehicles incur disabling damage as a result of the accident, requiring the vehicle(s) to be transported away from the scene by tow truck or other motor vehicle.

A non-fatal accident may also include some incidents where an individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident even though there is no vehicle collision, unless the covered employee can be completely discounted as a contributing factor to the accident.

If #1 or #2 applies, you will be scheduled for a post-accident drug and alcohol test to be completed immediately, but no later than 8 hours from the time of the accident for the alcohol test or 32 hours for the drug test. You must remain readily available for the tests during the time frames or it will be considered a refusal to test which is the same as a positive test. You must not use alcohol for up to 8 hours after the accident or until a post-accident test is completed.

These instructions are not construed to require the delay of necessary medical attention for injured people following an accident or to prohibit you from leaving the scene of an accident for the time necessary to obtain assistance in responding to the accident, or to obtain necessary medical care.

REASONABLE SUSPICION OBSERVATION FORM-FTA

(EMPLOYER NAME)

(This form must be completed by this employer's designated person(s) any time a covered employee is suspected of drug or alcohol use by action, appearance, behavior or conduct when reporting for duty, while on duty, or at the conclusion of being on duty)

Covered Employee Name _____

Date Observed _____

Time Observed From _____ To _____

Location _____

Observed Behavior:

SPEECH

Normal _____

Slurred _____

Whispering _____

Silent _____

Confused _____

Incoherent _____

BALANCE

Normal _____

Falling _____

Staggering _____

Swaying _____

BODY ODORS

WALKING

Normal _____

Falling _____

Stumbling _____

Swaying _____

Arms Raised
for Balance _____

Reaching for
Support _____

AWARENESS

Normal _____

Confused _____

Paranoid _____

Sleepy _____

Stupor _____

Lack of
Coordination _____

APPEARANCE

Reddened Eyes _____

Runny Nose _____

Needle Marks _____

Nervousness _____

Constricted
Pupils _____

Dilated Pupils _____

Other Behaviors: _____

The above action witnessed by:

Signature

Date

Signature

Date

I certify that I have received 1 hour reasonable suspicion supervisory training for drugs and 1 hr. reasonable suspicion supervisory training for alcohol as per 49 CFR Part 655.

ACKNOWLEDGEMENT OF ANTI-DRUG & ALCOHOL-MISUSE POLICY

(to be completed by covered employee after receiving a copy
of the Anti-Drug & Alcohol-Misuse Policy)

I do hereby acknowledge that I have received a copy of the Anti-Drug & Alcohol Misuse Policy mandated by the U.S. Department of Transportation (DOT), Federal Transit Administration (FTA) for all covered employees who perform safety-sensitive functions. I understand that compliance with all provisions contained in the Policy is a condition of employment.

I further understand that the information contained in the Policy dated _____ is subject to change, and that any such changes shall be communicated in a manner consistent with the provisions of 49 CFR Part 655.

Print Employee Name

Employee Signature

Date

NOTICE OF COMPASSIONATE USE OF MEDICAL CANNABIS PILOT PROGRAM

I, _____, do hereby certify that
(Transit's Employee's Printed Name)

The Illinois state initiative will have no bearing on the Department of Transportation's regulated drug testing program. The Department of Transportation's Drug and Alcohol Testing Regulation - 49 CFR Part 40 - does not authorize the use of Schedule I drugs, including marijuana, for any reason.

Therefore, Medical Review Officers will not verify a drug test as negative based upon information that a physician recommended that the employee use "medical marijuana" when states have passed "medical marijuana" initiatives.

Please note that marijuana remains a drug listed in Schedule I of the Controlled Substances Act. It remains unacceptable for any safety-sensitive employee subject to drug testing under the Department of Transportation's drug testing regulations to use marijuana.

As a transit employee subject to 49 CFR Part 40, I understand that if I do not adhere to this Notice, I will be subject to the Disciplinary Action in Section 10 of the Anti-Drug & Alcohol Misuse Policy.

Effective Date of Notice: _____

Employee's Signature: _____

Employer's Printed Name: _____

EMPLOYEE ACTION FORM FOR TRANSIT EMPLOYEES ONLY

Employer Name: _____ Membership Number _____

Contact Person #1 _____ Phone Number _____

Contact Person #2 _____ Phone Number _____

Address: _____

City: _____ State _____ ZIP _____



By checking this box I am adding the applicant(s)/transferred employee(s) to my program. If the applicant(s)/employee(s) is not hired, transferred or retained, I will forward another Employee Action Form to the Consortium to delete the applicant(s)/employee(s).

Signature of contact person: _____

Please **ADD** the following to our Drug & Alcohol Testing Program effective _____ :
(DATE)

NOTE: A pre-employment test will be scheduled for the applicant(s)/transferred employee(s).

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Please **REMOVE** the following from our Drug & Alcohol Testing Program effective _____ :
(DATE)

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Name: _____ Social Security Number: _____

Contact Person's Signature: _____

PLEASE PRINT OR TYPE ALL NAMES & SOCIAL SECURITY NUMBERS