

Reasonable Suspicion Drug and Alcohol Testing

NOTE: You must document defensible reasons you have reasonable suspicion to send someone for a reasonable suspicion drug or alcohol screen. Employees may not be impaired at work per Hilltop's policies and must be able to perform all job duties while at work.

Grand Junction Availability:

Mesa County Consortium (MCC) Drug Screening

1330 North 12th Street

(970) 256-7772

(970) 234-4538 – After Hours

Monday through Thursday from 8 AM to 5 PM

Friday from 8 AM to PM

MCC has after hour and weekend capability. Call the after-hours number and it will connect you to some one on-call.

Montrose Availability:

Drug Testing Inc. (DTI)

26 South Stough

(970) 249-1113

(970) 497-4595 – After Hours (On-Call 24-Hour Pager)

Monday through Friday 8 AM to 5 PM

Saturday from 9 AM to 11 AM

DTI has after-hour and weekend capability. Call the after-hours number and it will connect you to someone on-call.

ASK FOR BOTH THE REASONABLE SUSPICION DRUG SCREEN TEST AND BREATHALYZER TEST TO BE DONE. THIS WILL TEST FOR DRUGS AND ALCOHOL.

BREATHALYZER TESTING:

If there is alcohol on the breath, a second test will be done prior to that individual leaving the facility 15 minutes after the first test is done. This confirms alcohol as a metabolite in the system and rules out things like mouth wash, gum etc. that may show up as alcohol in the first test.

Employee must take a picture ID with them for all drug/alcohol screens. If they don't have their ID with them, you can verify who they are as their supervisor. Don't let this stop you from taking them to the facility to be tested.

If sending some one for a reasonable suspicion drug/alcohol screen, a supervisor must accompany them to and from the testing site for liability reasons. Notify the testing facility that this is a reasonable suspicion screen and they will increase their security measures during the specimen collection. Supervisors must remain at the testing facility while the test is being performed. You may not let them leave any of Hilltop's facilities if you suspect reasonable suspicion. You can be held liable for any incidents that occur on or off the property if they are impaired and leave the facility. When you return from testing you must take the employee home after testing. The employee must make arrangements for their vehicle to be picked up from Hilltop property.

Drug testing: Currently, a rapid urine test is done on 5 substances. The specimen is “split” and if something shows up on the rapid test, the remaining specimen is sent for confirmation to another laboratory for analysis. Results of the rapid test will be negative or non-negative.

Results considered non-negative will be identified as Pending results. These results are sent out for confirmation and generally back with in 48-72 hours. The employee is placed on administrative leave until the results are finalized. The physician (Medical Review Officer, or MRO) evaluates the results and calls the individual before making a final determination of the screen results. Extra charges apply for each positive substance which requires an MRO to review and respond to the results.

If results come back positive, this generally results in a termination issue. You must have documentation to HR and involve the program director and HR.

If results are negative, pay back the employee for lost time. **You are not done with this process even if it comes back negative. You must still deal with the performance issues/concerns that created the reasonable suspicion testing in the first place.**

Signs/symptoms of possible substance abuse at work:

- *attendance
- *quality of work done
- *personality changes like sudden anger outbursts
- *Deterioration of physical appearance and grooming
- *wearing sunglasses and long sleeve shirts frequently or at inappropriate times
- *secretive or suspicious behaviors
- *asking others for money, stealing

Use the Reasonable Suspicion Drug/Alcohol Suspicion Observation form to begin your documentation.

Use the Administrative leave Form to place employees on administrative leave.

Always refer to Hilltop’s policies/procedures regarding Drug and Alcohol use and testing.

It is always best to deal with **performance issues** before substance abuse is suspected.

Reasonable Suspicion: Drug or Alcohol Test Request – Grand Junction

1. Contact Mesa County Consortium (MCC) to make an appointment for testing. A certified tech must administer the test. Notify the facility that the screen is for reasonable suspicion and they will increase their security measures during the specimen collection.
2. Ask for both drug and alcohol testing to be done. One is a urine drug screen, the other a Breathalyzer test.

Location:

MCC

1330 North 12th Street

Grand Junction, CO 81501

970-256-7772

970-234-4538 – After Hours

Regular Business Hours:

Monday through Thursday 8 AM to 5 PM

Friday 8 AM to 4 PM

3. Supervisor must accompany employee to and from the testing for liability reasons.
4. Employee must take picture ID with them for testing.
5. Supervisor must remain at MCC or Community while test is being performed.
6. Results that are non-negative are pending. These results are sent out for confirmation and generally are back within 48-72 hours. The employee is placed on leave until the results are finalized.
7. If results are positive, disciplinary action will be taken, up to and including immediate termination.
8. Supervisor needs drive employee home. Employee will need to make arrangement to have their vehicle picked up from Hilltop's property.
9. Contact Human Resources Director or Business Partner as soon as possible.

Reasonable Suspicion: Drug or Alcohol Test Request – Montrose

1. Contact Drug Testing Inc. (DTI) to make an appointment for testing. A certified tech must administer the test. Notify the facility that the screen is for reasonable suspicion and they will increase their security measures during the specimen collection.
2. Ask for both a urine drug screen test and Breathalyzer test to be done. This will test for drugs and alcohol.

Location:

DTI

26 South Stough
Montrose, CO 81401
970-249-1113
970-497-4595 – After Hours

Regular Business Hours:

Monday-Friday 8:00 AM to 5:00 AM

Saturday 9:00 AM - 11:00 AM

2. Supervisor must accompany employee to and from the testing for liability reasons.
3. Employee must take picture ID with them for testing.
4. Supervisor must remain at DTI while test is being performed.
5. Results that are non-negative are pending. These results are sent out for confirmation and generally are back within 48-72 hours. The employee is placed on leave until the results are finalized.
6. If results are positive, disciplinary action will be taken, up to and including immediate termination.
7. Supervisor needs to take employee home. The employee will need to make arrangement for their vehicle to be picked up from Hilltop's property.
8. Contact Human Resources Director or Business Partner as soon as possible.

REASONABLE SUSPICION OBSERVATION FORM

Supervisors should use this form to document all reasonable suspicion drug or alcohol testing to be performed.

Employee's Name: _____

Employee's #: _____

Department: _____

Position: _____

Manager's Name: _____

Manager's Ph #: _____

Date of Observation: _____

Time of Observation: _____

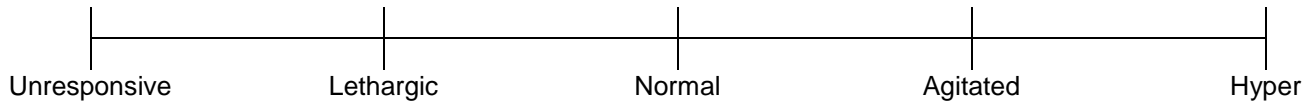
Describe what first let you to believe that this employee should have a drug or alcohol test, attach additional sheet if necessary.

Please check ALL the factors that describe the employee's behavior or characteristics.

BEHAVIOR:

- | | | |
|--|---|--|
| <input type="checkbox"/> Withdrawn | <input type="checkbox"/> Drowsy/Sleeping | <input type="checkbox"/> Forgetful |
| <input type="checkbox"/> Mood Swings | <input type="checkbox"/> Inappropriate Laughter | <input type="checkbox"/> Crying |
| <input type="checkbox"/> Aggressive/Combative/Fighting | <input type="checkbox"/> Uncooperative | <input type="checkbox"/> Glaring/Threatening |
| <input type="checkbox"/> Damaged/Destroyed Property | <input type="checkbox"/> Risk Taking | <input type="checkbox"/> Bizarre/Irrational |
| <input type="checkbox"/> Unresponsive, distracted | <input type="checkbox"/> Suspicious/ Paranoid | <input type="checkbox"/> Hostile/Withdrawn |

ALERTNESS:



SPEECH:

- | | | |
|---|--|--|
| <input type="checkbox"/> Shouting/Loud | <input type="checkbox"/> Rambling/Confused | <input type="checkbox"/> Slowed Speech |
| <input type="checkbox"/> Incomplete Sentences | <input type="checkbox"/> Incoherent | <input type="checkbox"/> Slurred Speech |
| <input type="checkbox"/> Profanity/Verbal Abuse | <input type="checkbox"/> Rapid Speech | <input type="checkbox"/> Cotton Mouth/Mush Mouth |

WALKING/COORDINATION:

- | | | |
|---|---|---|
| <input type="checkbox"/> Awkward/Unsteady | <input type="checkbox"/> Staggering | <input type="checkbox"/> Slowed Reaction Time |
| <input type="checkbox"/> Loss of Coordination | <input type="checkbox"/> Cannot walk unassisted | <input type="checkbox"/> Stumbled |
| <input type="checkbox"/> Clumsy | <input type="checkbox"/> Twitching | <input type="checkbox"/> Swaying |

PHYSICAL SIGNS/ APPEARANCE:

- | | | |
|---|---|--|
| <input type="checkbox"/> Change in appearance | <input type="checkbox"/> Hygiene Issues | <input type="checkbox"/> Trembling/Shaky |
| <input type="checkbox"/> Smell of alcohol | <input type="checkbox"/> Smell of marijuana | <input type="checkbox"/> Disheveled |
| <input type="checkbox"/> Needle tracks | <input type="checkbox"/> Vomiting | <input type="checkbox"/> Nose sores/Excessive nose rubbing |

EYES:

- Bloodshot
- Stares Blankly

- Unusual eye movement
- Enlarged or Tiny Pupils

- Glassy Eyes
- Watery Eyes

MISCELLANEOUS:

- Presences of alcohol and/or drugs in associates possession or vicinity.
- Employee admission concerning alcohol use and/or drug use or possession.

Were there any witnesses to the employee's behavior? (PRINT Names or have witness complete a copy of this form.)

1) _____ EE #: _____ Dept: _____

2) _____ EE #: _____ Dept: _____

Other Observations

Employee's explanation of reasons for his/her conduct:

Once above portion of form has been completed by you and a witness, you are now ready to take a position with the employee. Be certain to follow company procedures as outlined in our drug-free policy. (Check one)

- Employee has agreed to testing.
- Employee has refused testing.

Supervisor Signature

Date

Witness Signature

Date

BA Results (1)	_____
Time (1)	_____
BA Results (2)	_____
Time (2)	_____