

DIABLO WATER DISTRICT

REGULATION NO. 123

DRUG AND ALCOHOL POLICY

Section I. Purpose of Policy

- A. The purpose of this policy is to assure worker fitness for duty and to protect our employees and the public from risks posed by the use of drugs and/or alcohol. This policy is intended to comply with all state laws governing drug testing and is designed to safeguard employee privacy rights to the fullest extent of the law.
- B. Diablo Water District realizes that the use of drugs and/or alcohol in the workplace is not conducive to safe working conditions. In order to promote a safe, healthy and productive work environment for all employees, it is the objective of the District to have a work force that is free from the influence of drugs and/or alcohol.
- C. Included within this policy, the District has established a Drug-Free Awareness Program to inform employees about the following:
1. The dangers and effects of drug and/or alcohol abuse in the workplace (See Appendix B – “Alcohol and Drug Effects”).
 2. The District’s policy of maintaining a drug-free workplace.
 3. Information on available drug and/or alcohol counseling, rehabilitation, and employee assistance programs.
 4. Consequences that may be imposed upon employees for drug abuse violations.

- D. Any drug and alcohol testing required by Diablo Water District will be conducted by a laboratory licensed by the State of California. All expenses related to the test will be incurred by the District. This policy will be strictly enforced. Violations of this policy will be cause for disciplinary action, up to and including termination from District employment.
- E. The District is committed in helping its employees with admitted substance abuse problems to overcome these problems, and encourages the use of treatment and rehabilitation, when possible.

Section II. Acronyms

CEAP	Certified Employee Assistance Professional
DER	Designated Employer Representative
EAP	Employee Assistance Professional
EBT	Evidential Breath Testing Device
MRO	Medical Review Officer
NAADAC	National Association of Alcoholism and Drug Abuse Counselors
SAP	Substance Abuse Professional

Section III. Designated Employer Representative (DER)

- A. The Designated Employer Representative (DER) who is to answer employee questions about drug and alcohol policies and procedures is:

Name: Sophia Gonzales
Title: Human Resources Manager
Phone Number: 925-625-6586

Section IV. Applicability

- A. Under Diablo Water District’s Drug and Alcohol Policy, all current and prospective employees must submit to drug and alcohol testing in accordance with this policy. Prospective employees will be asked to submit to a test once a conditional offer of employment has been extended and accepted. An offer of employment by Diablo Water District is conditioned on the prospective employee testing negative for illegal substances. All current employees will be given a copy of this policy and as a condition of continued employment, the employee agrees to abide by the terms of this policy as acknowledged by signing the attached Appendix H, “Drug and Alcohol Policy Acknowledgment Form”.
- B. This policy applies to all District employees when they are on District property or when performing any District-related business including operating District vehicles or equipment. It applies to off-site lunch periods and breaks when an employee is scheduled to return to work.
- C. The District will comply with the requirements of the Drug-Free Workplace Act of 1990 (Government Code Section 8350 et seq.) (See Appendix C). This applies to any District employee or contractor directly engaged in the performance of work pursuant to a State or Federal grant or contract.
- D. Visitors, vendors, and contracted employees violating this policy will not be permitted to conduct business on District property or projects and will be ordered off District property.

Section V. Proper Application of the Policy

- A. The District is dedicated to assuring fair and equitable application of this policy. Therefore, managers are required to administer all aspects of the policy in an unbiased and impartial manner. Any manager who knowingly disregards the requirements of this policy, or who is found to deliberately misuse the policy with respect to their subordinates may be subject to disciplinary action, up to and including termination.

Section VI. Prohibited Substances

- A. Prohibited substances covered under this policy:
1. Alcoholic beverages of any kind. Alcohol is defined as the intoxicating agent in beverage alcohol.
 2. Controlled or illegal drugs or substances, which include but are not limited to, all forms of narcotics, hallucinogens, depressants, stimulants, and other drugs whose use, possession, or transfer is restricted or prohibited by law.

Section VII. Prescription and Non-Prescription Substances

- A. Using or being under the influence of any legally obtained drug by an employee while performing District business, while on District property, or while on standby is prohibited if such use or influence may affect the safety of the employee, co-workers, members of the public, the employee's job performance, or the safe or efficient operation of the District's business. This applies to both medications prescribed by a physician and over-the-counter medications.
- B. An employee may continue to work, even though under the influence of a legal substance, if District management has determined, after consulting with a

competent medical authority, that the employee does not pose a threat to their own safety or their co-workers and that the employee's job performance is not significantly affected by the legal drug. Otherwise, the employee may be reassigned to an alternative position, if available, or be required to take a leave of absence or comply with other appropriate action as determined by the District's General Manager.

- C. Each employee is obligated to inform their immediate manager, Human Resources, or the General Manager of the use of any such medications, formally prescribed or not. Failure to report the use of such drugs or failure to provide proper evidence of medical authorization may result in disciplinary action.

Section VIII. Prohibited Conduct

- A. As a Drug-Free Workplace, Diablo Water District prohibits the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance as defined in Schedules I through V of Section 202 of the Controlled Substances Act (21 United States Code, Section 812) (See Appendix D). As such, if an employee comes to work under the influence of a controlled substance or uses a controlled substance during work time, the employee will be disciplined in accordance with this policy, up to and including termination.

Section IX. Prohibited Conduct Outside of the District

- A. The following actions, even if not occurring on District premises or during working hours are considered to endanger the District's reputation for honesty, integrity and safety.

1. Indictment or conviction for criminal offenses related to the manufacture, possession, use, sale, distribution, dispensation, receipt, or transportation of any controlled substances or illegal drugs.
 2. Any other actions involving alcohol or controlled or illegal substances that, in the opinion of management, endanger the company's reputation for honesty, integrity, and safety.
- B. An employee who engages in these activities may be subject to disciplinary action, up to and including an unpaid suspension or immediate dismissal. Employees who are convicted of controlled substances-related violations under state or federal law or who plead guilty or nolo contendere (i.e., no contest) to such charges must inform the District in writing within five days of the conviction or plea. Failure to do so will result in disciplinary action, up to and including an unpaid suspension or termination from employment.

Section X. Notification of Criminal Drug Conviction

- A. All employees must, as a condition of employment, abide by the terms of this policy and report any conviction under a criminal drug statute for violations occurring on or off District premises while conducting District business. A report of conviction must be made to the human resources contact within five days after conviction, as mandated by the Federal Drug-Free Workplace Act of 1988 and the California Drug-Free Workplace Act of 1990. Failure to report such convictions may subject the employee to disciplinary action, up to and including termination.

Section XI. Voluntary Admittance

- A. Employees who believe they may have a substance abuse problem are encouraged to seek assistance for resolving that problem. An employee voluntarily seeking help can make a confidential request for assistance to their manager or the General Manager. The employee will be referred to a Substance Abuse Professional (SAP) for assessment and rehabilitation recommendations.
- B. Prior to the assessment, the employee must sign a release of information that will enable the Designated Employer Representative (DER) to receive the results of the assessment, and to receive subsequent reports related to the assessment, and the employee's successful completion of all recommendations for assistance.
- C. Employees may use accumulated sick leave, vacation time, or compensatory time to participate in a rehabilitation program. The District will not be responsible for program costs.
- D. Employees who admit to alcohol misuse or controlled substances use are not subject to disciplinary measures provided that the employee does not self-identify in order to avoid testing under the requirements of this program.
- E. After approval from the SAP, the employee may return to work and may be subject to unannounced follow up testing, based on the SAP's recommendations. Any employee failing to complete the program will be subject to termination.

- F. NOTE: Health insurance plans may provide coverage for rehabilitation costs. Health benefits information can be obtained from the District's human resources contact.
- G. The following conditions must apply to the employee's self-admission:
1. The employee's admission cannot be made during their on-duty time. It must occur prior to the employee's reporting for duty on any particular day.
 2. The employee's admission cannot be made in an attempt to avoid a required drug and/or alcohol test.
 3. The employee is to be removed from safety-sensitive functions, including driving.
 4. When the DER is satisfied that the employee has successfully complied with the SAP's recommendations for assistance, the employee's manager may return the employee to duty, including safety-sensitive functions, provided that:
 - (a) Prior to returning to safety-sensitive functions, the employee will be required to provide a negative drug and/or alcohol test result, and
 - (b) An employee who self-identifies under this policy, and who then fails to comply with the SAP's recommendations will be considered to have engaged in conduct prohibited by this policy.
- H. Diablo Water District will adhere to the following terms, in accordance with its policy:

1. No adverse action will be taken against an employee who admits to drug and/or alcohol use under the terms above, provided they cooperate with the assessment and recommendations for treatment.
 2. An employee who self-identifies under this program will be given reasonable time to obtain the required assessment and assistance.
 3. An employee, who complies with all requirements and the SAP's recommendations for assistance, will be permitted to return to duty.
 4. An employee who fails to comply with treatment recommendations, either under this provision, or as recommended by an SAP, will be subject to disciplinary action up to and including termination of employment.
- I. Testing will be conducted in a manner to assure a high degree of accuracy and reliability, using techniques, equipment, and laboratory facilities approved by the State of California.

Section XII. Testing for Prohibited Substances

- A. Reasonable Suspicion Testing:
1. A drug and/or alcohol test must be conducted when a manager has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse.
 2. The determination that reasonable suspicion exists must be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the covered employee. A manager who is trained in detecting the signs and symptoms of drug use and alcohol misuse must make the required observations.

3. If an alcohol test is not administered within two hours following the determination to conduct a reasonable suspicion test, the manager must prepare and maintain on file a record stating the reasons the alcohol test was not promptly administered. If an alcohol test is not administered within eight hours following the determination to test, cease attempts to administer an alcohol test and update the record with the reasons for not administering the test.
4. A written record must be made of the observations leading to an alcohol or controlled substances reasonable suspicion test, and signed by the manager who made the observations, within 24 hours of the observed behavior or before the results of the alcohol or controlled substances tests are released, whichever is earlier.
5. Reasonable suspicion testing may be based upon, among other things:
 - (a) Observable phenomena, such as direct observation of drug use or possession and/or the physical symptoms of being under the influence of a drug.
 - (b) A pattern of abnormal conduct or erratic behavior.
 - (c) Arrest or conviction for a drug-related offense, or the identification of an employee as the focus of a criminal investigation into illegal drug possession, use, or trafficking.
 - (d) Adequate documentation of unsatisfactory work performance or on-the-job behavior.

- (e) Physical signs and symptoms consistent with prohibited substance use.
- (f) Occurrence of a serious or potentially serious accident that may have been caused by human error.
- (g) Fights (to mean physical contact), assaults and flagrant disregard or violations of established safety, security, or other operation procedures.

B. Reasonable suspicion determinations will be made by a manager who is trained to detect the signs and symptoms of controlled substance and alcohol use and who reasonably concludes that an employee may be adversely affected or impaired in their work performance due to prohibited substance abuse or misuse. (See Appendix E – “Reasonable Suspicion Documentation Form”).

1. Employees reasonably believed to be under the influence of drugs or alcohol will not be permitted to engage in further work. In addition, such employees will not be permitted to drive themselves from the worksite. A manager will see that the employee is transported to the designated collection center (See Appendix F – “Collection Center Location”).

- (a) A controlled substance test is considered positive when a verified confirmation test indicates specimens have concentrations of a particular class of drug above the specified concentration levels. Drug classes and threshold concentration levels are listed in the “Controlled Substance (Drug) Test” Definition Section of this policy (See Appendix A – “Definitions”).

- (b) An alcohol test is considered positive when a verified confirmation test indicates a breath alcohol content greater than 0.04. “Alcohol Concentration Level” is defined in the Definition Section of this policy (See Appendix A – “Definitions”).

C. Post-Accident Testing:

1. A manager must be notified immediately following an accident to ensure proper post-accident instructions. The manager will determine if a test is necessary (See Appendix G – Post-Accident Drug and Alcohol Testing Decision Form). If a test is necessary, the manager will see that the driver is transported to the appropriate collection center (See Appendix F – “Collection Center Location”).
2. As soon as practicable following an occurrence involving a motor vehicle operating on a public road, each employer must test for alcohol for each of its surviving drivers:
 - (a) Who was performing safety-sensitive functions with respect to the vehicle, if the accident involved the loss of human life; or
 - (b) Who receives a citation within 8 hours of the occurrence under State or local law for a moving traffic violation arising from the accident, if the accident involved:
 - (i) Bodily injury to any person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident; or

- (ii) One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.
3. As soon as practicable following an occurrence involving a motor vehicle operating on a public road, each employer must test for controlled substances for each of its surviving drivers:
- (a) Who was performing safety-sensitive functions with respect to the vehicle, if the accident involved the loss of human life; or
 - (b) Who receives a citation within thirty-two hours of the occurrence under State or local law for a moving traffic violation arising from the accident, if the accident involved:
 - (i) Bodily injury to any person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident; or
 - (ii) One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle to be transported away from the scene by a tow truck or other motor vehicle.

The following table notes when a post-accident test is required to be conducted.

Type of accident involved	Citation issued to Licensed Motor Vehicle Driver?	Alcohol and controlled substance test required
i. Human fatality	Yes	Yes
	No	Yes

ii. Bodily injury and immediate medical treatment away from the scene.	Yes	Yes
	No	No
iii. Disabling damage to any motor vehicle requiring tow away	Yes	Yes
	No	No

- (i) If a post-accident alcohol test is not administered within two (2) hours following an accident, the manager of the employee must prepare and maintain on file a record stating the reasons the test was not properly administered. If a test is not administered within eight (8) hours after the accident, the manager must cease attempts to have the alcohol test administered and prepare and maintain on file a record stating the reasons the test was not done within said eight (8) hours.
- (ii) If a post-accident-controlled substances test is not administered within 32 hours of the accident, the manager must cease attempts to have the controlled substances test administered and prepare and maintain on file a record stating the reasons the test was not done within said 32 hours.
- (iii) An employee subject to post-accident testing must remain readily available for such testing, including notifying their manager of their location if they leave the accident scene.

An employee who fails to do so will be deemed to have refused to submit to testing.

- (iv) An employee who knowingly, willingly, or purposely evades a post-accident alcohol or controlled substance test will be subject to termination under “Refusal to Submit” guidelines as outlined under definitions in this policy.
- (v) Nothing herein will be construed to require the delay of necessary medical attention for the injured or to prohibit an employee from leaving the accident scene for the time period required to obtain emergency assistance.
- (vi) In lieu of administering a post-accident test, the District may substitute a test administered by on-site police or public safety officials under separate authority. The District may substitute a blood or breath alcohol test and a urine drug test performed by such local officials, using procedures required by their jurisdictions. The District will obtain a copy of these test results and keep them on file.

D. Manager Training:

1. Managers will receive at least 60 minutes of training on alcohol misuse and at least 60 minutes of training on controlled substances use, every two years or as otherwise required by law. The training will be used by the managers to determine whether reasonable suspicion exists to require an employee to undergo testing. The training will include the physical, behavioral, speech,

and performance indicators of probable alcohol misuse and use of controlled substances.

Section XIII. Refusal to Submit

- A. Any employee who refuses to submit to a drug or alcohol test immediately when requested by a manager or law enforcement personnel will be treated in the same manner as an employee who has failed an alcohol or controlled substance test, as defined in this policy. No applicant who refuses to be tested will be extended an offer of employment. Attempts to alter or substitute the specimen provided will be deemed a refusal to take the drug test when required.

Section XIV. Failure to Appear for Testing

- A. Failure to appear for testing without a deferral from the General Manager of the District will be considered refusal to participate in testing and will subject an employee to the range of disciplinary actions, including termination of employment, and an applicant to the cancellation of an offer of employment. If an individual fails to appear at the collection site at the assigned time, the collector will contact the Designated Employer Representative (DER).

Section XV. Violation of Policy and Disciplinary Consequences

- A. If an employee is tested for drugs or alcohol and the results indicate a violation of this policy, the employee may be subject to appropriate disciplinary action, up to and possibly including discharge from employment. In such a case, the employee will be given an opportunity to explain the circumstances prior to any final employment action becoming effective.

Section XVI. Employee Rights

- A. Upon request, the employee will receive a full copy of any test results and related documentation of the testing process.
- B. All confirmed positive samples will be retained by the testing laboratory in secure frozen storage for one year following the test or until the sample is no longer needed for appeal proceedings or litigation, whichever is longer.

Section XVII. Treatment/Rehabilitation Program

- A. An employee with a controlled substance and/or alcohol problem will be afforded an opportunity for treatment in accordance with the following provisions:

1. Positive Controlled Substance and/or Alcohol Test:

- (a) A rehabilitation program is an option for employees who have tested positive for a prohibited substance on a one-time basis only. The employee will be immediately terminated on the occurrence of a second verified positive test result. Program costs and subsequent controlled substance and/or alcohol testing costs will be paid by the employee. When recommended by the Employee Assistance Professional (EAP), participation and completion of the rehabilitation program is mandatory. Failure of an employee to attend and/or complete a prescribed program will result in termination from employment. Prior to being permitted to return to duty, an employee must follow the rehabilitation program recommended by the EAP and agree to and sign a Return-To-

Duty Agreement. The duration and frequency of any follow-up testing will be determined by the EAP.

Section XVIII. Return to Duty Testing

- A. All covered employees who previously tested positive on a controlled substance test must test negative and be evaluated and released to duty by the Employee Assistance Professional (EAP) before returning to duty. Such employees will be required to undergo unannounced follow-up controlled substance testing following returning to duty.
- B. They will not be permitted to perform any work until they:
 - 1. No longer use controlled substances;
 - 2. Test negative for use of controlled substances;
 - 3. Are medically re-certified as being “drug-free”;
 - 4. Continue to participate in any drug rehabilitation program of after-care required by District;
 - 5. Agree to be subject to follow-up testing for up to 60 months after returning to duty.
- C. No employee who tests positive for drug use has an automatic right to be offered an opportunity for rehabilitation.
- D. If an employee is using an “over the counter” (or other medication under the supervision of a licensed physician) that causes a positive result on a drug test, the District will ask to have their Medical Review Officer (MRO) consult with the employee’s physician. The employee must take all necessary steps to authorize their physician to discuss medication usage with the District. The

District has -- as an integral part of our overall Employee Assistance Program -
- developed a plan for providing drug education and training for all employees,
including management.

Section XIX. Follow-up Testing

- A. After the return-to-duty test, employees will be subject to unannounced follow-up testing. ASAP will determine the number and frequency of tests, but at least six tests will be performed during the first 12 months following the employee's return to duty. Follow-up testing may be extended up to 60 months from the date of the employee's return to duty, but the SAP can terminate the requirement after the first six tests, if they determine that testing is no longer necessary. The SAP, in coordination with the Drug Program Administrator, will conduct tracking and monitoring of follow-up tests.

Section XX. Recordkeeping

- A. Maintenance of Records:
1. The District will maintain records of its alcohol misuse and controlled substances use prevention programs. The records will be maintained in a secure location with controlled access. The District will maintain the records in accordance with the following schedule:
 - (a) One Year – Records of negative and cancelled controlled substances test results and alcohol test results with a concentration of less than 0.02.
 - (b) Two Years – Records relating to the alcohol and controlled substances collection process.

- (c) Five Years – The following records will be maintained for a minimum of five years:
 - (i) Alcohol results indicating an alcohol concentration of 0.02 or greater.
 - (ii) Records of verified positive controlled substances test results.
 - (iii) Documentation of refusals to take required alcohol and/or controlled substances tests.
 - (iv) Driver evaluation and referrals.
 - (v) A copy of each annual calendar year summary.

B. Confidentiality:

1. The District will maintain records of the circumstances and results of any employee testing under this policy. These records, and any other information pertaining to an employee's drug or alcohol test, will be considered confidential and will be released only to:
 - (a) The employee who was tested or other individuals designated in writing by that employee;
 - (b) The Medical Review Officer; or
 - (c) Individuals who need the records or information to:
 - (i) Properly supervise or assign the employee;
 - (ii) Determine, or assist in determining, what action the District should take in response to the test results; or

(iii) Respond to appeals or litigation arising from the drug or alcohol test or related actions.

C. Employees who use controlled substances -- on a chronic or recreational basis -- are encouraged to speak confidentially to their manager or to any other member of management so the District can deal with drug problems on a discreet, confidential basis. Once again, this is a major operating policy of the District and we expect the full cooperation of all employees in maintaining our drug-free workplace.

APPENDICES

- A. Definitions**
- B. Alcohol and Drug Effects**
- C. California Drug-Free Workplace Act of 1990**
- D. Schedules I through V of Section 202 of the Controlled Substances Act (Title 21, United States Code, Section 812)**
- E. Reasonable Suspicion Documentation Form**
- F. Collection Center Locations**
- G. Post-Accident Drug and Alcohol Testing Decision Form**
- H. Drug and Alcohol Policy Acknowledgement Form**

APPENDIX A

DEFINITIONS

Alcohol means the intoxicating agent in beverage alcohol.

Alcohol Concentration means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test under this regulation. For example, 0.02 means 0.02 grams of alcohol in 210 liters of expired deep lung air. Blood tests will not be used to determine alcohol concentration, unless administered by on-site police or public safety officials in a post-accident situation.

Breath Alcohol Technician (BAT) means a person trained to operate the Evidential Breath Testing (EBT) device that the technician is using in the alcohol testing procedures. BATs are the only qualified personnel to administer the EBT tests.

Chain of Custody means the procedures to account for the integrity of each urine specimen by tracing its handling and storage from point of collection to final disposition.

Collection Site means a place designated by the District where individuals present themselves for the purpose of providing a specimen of either urine and/or breath.

Confirmation Test for alcohol testing means a second test, following a screening test with a result of 0.02 or greater that provides quantitative data of alcohol concentration. For controlled substances testing, it means a second analytical procedure to identify the presence of a specific drug or metabolite which is independent of the screen test and which uses a different technique and chemical principle from that of the screen test, in order to ensure reliability and accuracy. Gas Chromatography/Mass Spectrometry (GC/MS) is the only authorized confirmation method of cocaine, marijuana, opiates, amphetamines, and phencyclidine.

Controlled Substance (Drug) Test is a method of detecting and measuring the presence of controlled substances, whether legal or illegal, in a person's body. A controlled substance test may be either an initial test or a confirmation test. An initial controlled substance test is designed to identify specimens having concentrations of a particular class of drug above a specific concentration level. It eliminates negative specimens from further consideration. A confirmation drug test is a second analytical procedure to detect the presence of a specific drug or its metabolite. The confirmation procedure is conducted independent of the initial test and uses a different technique and chemical principal in order to confirm reliability and accuracy.

Controlled substances will be tested under the State of California guidelines and pursuant to legal requirements. The cutoff concentrations below are for initial and confirmation drug tests, as applicable; however the quantified concentrations below may differ if modified time to time by the State of California, with the State's guidelines governing the concentration cutoff levels and superseding any discrepancy that might exist below:

Initial Test Analyte	Initial Test Cutoff Concentration	Confirmatory Test Analyte	Confirmatory Test Cutoff Concentration
Marijuana metabolites	50 ng/mL	THCA ¹	15 ng/mL.
Cocaine metabolites	150 ng/mL	Benzoylcegonine	100 ng/mL.
Opiate metabolites			
Codeine/Morphine ²	2000 ng/mL	Codeine	2000 ng/mL.
		Morphine	2000 ng/mL.
6–Acetylmorphine	10 ng/mL	6–Acetylmorphine	10 ng/mL.
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL.
Amphetamines ³			
AMP/MAMP ⁴	500 ng/mL	Amphetamine	250 ng/mL.
		Methamphetamine ⁵	250 ng/mL.
MDMA ⁶	500 ng/mL	MDMA	250 ng/mL.
		MDA ⁷	250 ng/mL.
		MDEA ⁸	250 ng/mL

¹Delta-9-tetrahydrocannabinol-9-carboxylic acid (THCA).

²Morphine is the target analyte for codeine/morphine testing.

³Either a single initial test kit or multiple initial test kits may be used provided the single test kit detects each target analyte independently at the specified cutoff.

⁴Methamphetamine is the target analyte for amphetamine/methamphetamine testing.

⁵To be reported positive for methamphetamine, a specimen must also contain amphetamine at a concentration equal to or greater than 100 ng/mL.

⁶Methylenedioxyamphetamine (MDMA).

⁷Methylenedioxyamphetamine (MDA).

⁸Methylenedioxyethylamphetamine (MDEA).
ng/mL – nanogram/mililitre

Employee Assistance Program (EAP) means a counseling program that offers assessment, short-term counseling, and referral services to employees for a wide range of drug, alcohol, and mental health problems, and monitors the progress of employees while in treatment.

Evidential Breath Testing Device (EBT) means the device to be used for breath alcohol testing.

Medical Review Officer (MRO) means the individual responsible for receiving laboratory results generated from the District’s Drug and Alcohol Program who is a licensed physician with knowledge of substance abuse disorders and the appropriate medical training to interpret

and evaluate all positive test results together with an individual's medical history and any other relevant biomedical information.

Illegal Drugs means a controlled substance included in Schedule I or II, as defined by section 802(6) of Title 21 of the United States Code, the possession of which is unlawful under chapter 13 of that Title. The term "illegal drugs" does not mean the use of a controlled substance pursuant to a valid prescription or other uses authorized by law.

Performing Safety Sensitive Function means an employee is considered to be performing a safety sensitive function in any period in which they are actually performing, ready to perform, or immediately available to perform such functions.

Post-Accident Alcohol and/or Controlled Substance Testing is testing performed on all employees following an accident involving a motor vehicle where:

1. The accident involved a fatality; or
2. The driver receives a citation under state or local law for a moving traffic violation arising from an accident that involved:
 - a. injury requiring medical treatment away from the scene; or
 - b. one or more vehicles having to be towed from the scene.

Pre-Employment Controlled Substance Testing is conducted before applicants begin work, but after an offer to hire.

Reasonable Suspicion Controlled Substance and/or Alcohol Testing is conducted when a trained manager has a good faith belief based on specific, contemporaneous, and articulable facts or evidence that an employee may have violated the prohibitions set forth this policy.

Refusal to Submit means failing to provide an adequate breath or urine sample for testing without a valid medical explanation or engaging in conduct that clearly obstructs the testing process (i.e., verbal declarations, obstructive behavior, or physical absence resulting in the inability to conduct the test.)

Substance Abuse Professional (SAP) means a licensed physician (medical doctor or doctor of osteopathy), or a licensed or certified psychologist, social worker (with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol related disorders (the license alone does not authorize this), Certified Employee Assistance Professional (CEAP), or addiction counselor certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission (NAADAC) with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances related disorders.

Trained Manager means a person in authority who received at least one hour of training on the signs and symptoms of alcohol abuse and at least one hour of training on the signs and symptoms of controlled substance abuse.

APPENDIX B

ALCOHOL AND DRUG EFFECTS

The California Drug-Free Workplace Act of 1990 (Government Code Section 8350 et seq.) requires that the District provides all employees with information on the effects of alcohol and controlled substance use.

This attachment is intended to help individuals understand the personal consequences of substance abuse in the workplace and personal life.

ALCOHOL

Although used routinely as beverage for enjoyment, alcohol can also have negative physical and mood-altering effects when abused. These physical or mental alterations in a driver may have serious personal and public safety risks.

Health Effects

An average of three or more servings per day of beer (12 ounces), whiskey (1 ounce), or wine (6 ounces) over time, may result in the following health hazards:

- * Dependency
- * Fatal liver diseases
- * Kidney failure
- * Pancreatitis
- * Ulcers
- * Decreased sexual function
- * Increased cancers of the mouth, pharynx, esophagus, rectum, breast, and malignant melanoma
- * Spontaneous abortion and neonatal mortality
- * Birth defects

Social Issues

- * 2/3 of all homicides are committed by people who drink prior to the crime.
- * 2 - 3% of the driving population are legally drunk at any one time. This rate doubles at night and on weekends.
- * 2/3 of all Americans will be involved in an alcohol-related vehicle accident during their lifetime.
- * The separation and divorce rate in families with alcohol dependency problems is 7 times the average.
- * 40% of family court cases are alcohol related.
- * Alcoholics are 15 times more likely to commit suicide.
- * More than 60% of burns, 40% of falls, 69% of boating accidents, and 76% of private aircraft accidents are alcohol related.

- * Over 17,000 fatalities occurred in 1993 in highway accidents, which were alcohol related. This was 43% of all highway fatalities.
- * 30,000 people will die each year from alcohol-caused liver disease.
- * 10,000 people will die each year due to alcohol-related brain disease or suicide.
- * Up to 125,000 people die each year due to alcohol-related conditions or accidents.

Workplace Issues

- * It takes one hour for the average person (150 pounds) to process one serving of alcohol from the body.
- * Impairment can be measured with as little as one serving in the body.
- * A person who is legally intoxicated is 6 times more likely to have an accident than a sober person.

ALCOHOL'S TRIP THROUGH THE BODY

Mouth and Esophagus: Alcohol is an irritant to the delicate linings of the throat and food pipe. It burns as it goes down.

Stomach and Intestines: Alcohol has an irritating effect on the stomach's protective lining, resulting in gastric or duodenal ulcers. This condition, if it becomes acute, can cause peritonitis, or perforation of the stomach wall. In the small intestine, alcohol blocks absorption of such substances as thiamine, folic acid, fat, vitamin B1, vitamin B12, and amino acids.

Bloodstream: 95% of the alcohol taken into the body is absorbed into the bloodstream through the lining of the stomach and duodenum. Once in the bloodstream, alcohol quickly goes to every cell and tissue in the body. Alcohol causes red blood cells to clump together in sticky wads, slowing circulation and depriving tissues of oxygen. It also causes anemia by reduction of red blood cell production. Alcohol slows the ability of white cells to engulf and destroy bacteria and degenerates the clotting ability of blood platelets.

Pancreas: Alcohol irritates the cells of the pancreas, causing them to swell, thus blocking the flow of digestive enzymes. The chemicals, unable to enter the small intestine, begin to digest the pancreas, leading to acute hemorrhagic pancreatitis. One out of five patients who develop this disease dies during the first attack. Pancreatitis can destroy the pancreas and cause a lack of insulin, thus resulting in diabetes.

Liver: Alcohol inflames the cells of the liver, causing them to swell and block the tiny canal to the small intestines. This prevents bile from being filtered properly through the liver. Jaundice develops, turning the whites of the eyes and skin yellow. Each serving of alcohol increases the number of live cells destroyed, eventually causing cirrhosis of the liver. This disease is eight times more frequent among alcoholics than among non-alcoholics.

Heart: Alcohol causes inflammation of the heart muscle. It has a toxic effect on the heart and causes increased amounts of fat to collect, thus disrupting its normal metabolism.

Urinary Bladder and Kidneys: Alcohol inflames the lining of the urinary bladder making it unable to stretch properly. In the kidneys, alcohol causes increased loss of fluids through its irritating effect.

Sex Gland: Swelling of the prostate gland caused by alcohol interferes with the ability of the male to perform sexually. It also interferes with the ability to climax during intercourse.

Brain: The most dramatic and noticed effect of alcohol is on the brain. It depresses brain centers, producing progressive lack of coordination: confusion, disorientation, stupor, anesthesia, coma, death. Alcohol kills brain cells and brain damage is permanent. Drinking over a period of time causes loss of memory, judgment and learning ability.

DRUGS

Marijuana

Health Effects

- * Emphysema-like conditions.
- * One joint of marijuana contains cancer-causing substances equal to 1/2 pack of cigarettes.
- * One joint causes the heart to race and be overworked. People with heart conditions are at risk.
- * Marijuana is commonly contaminated with the fungus *Aspergillus* which can cause serious respiratory tract and sinus infections.
- * Marijuana lowers the body's immune system response, making users more susceptible to infection.
- * Chronic smoking causes changes in brain cells and brain waves. The brain does not work as efficiently or effectively. Long-term brain damage may occur.
- * Tetrahydrocannabinol (THC) and 60 other chemicals in marijuana concentrate in the ovaries and testes.
- * Chronic smoking of marijuana in males causes a decrease in testosterone and an increase in estrogen, the female hormone. As a result, the sperm count is reduced, leading to temporary sterility.
- * Chronic smoking of marijuana in females causes a decrease in fertility.
- * A higher than normal incidence of stillborn babies, early termination of pregnancy, and higher infant mortality rate during the first few days of life is common in pregnant marijuana smokers.
- * THC causes birth defects including brain damage, spinal cord, forelimbs, liver and water on the brain and spine in test animals.
- * Prenatal exposure may cause underweight newborn babies.
- * Fetal exposure may decrease visual functioning.

- * User's mental function can display the following effects:
 - delayed decision making
 - diminished concentration
 - impaired short-term memory
 - impaired signal detection
 - impaired tracking
 - erratic cognitive function
 - distortion of time estimation

Workplace Issues

- * THC is stored in body fat and slowly released.
- * Marijuana smoking has long-term effects on performance.
- * Increased THC potency in modern marijuana dramatically compounds the side effects.
- * Combining alcohol or other depressant drugs with marijuana increases the impairing effects of both.

Cocaine

Used medically as a local anesthetic. When abused, it becomes a powerful physical and mental stimulant. The entire nervous system is energized. Muscles tense, heart beats faster and stronger, and the body burns more energy. The brain experiences an exhilaration caused by a large release of neurohormones associated with mood elevation.

Health Effects

- * Regular use may upset the chemical balance of the brain. As a result, it may speed up the aging process by causing damage to critical nerve cells. Parkinson's disease could also occur.
- * Cocaine causes the heart to beat faster, harder, and rapidly increases blood pressure. It also causes spasms of blood vessels in the brain and heart. Both lead to ruptured vessels causing strokes and heart attacks.
- * Strong dependence can occur with one "hit" of cocaine. Usually mental dependency occurs within days for "crack" or within several months for snorting coke. Cocaine causes the strongest mental dependency of all the drugs.
- * Treatment success rates are lower than with any other chemical dependency.
- * Extremely dangerous when taken with other depressant drugs. Death due to overdose is rapid. Fatal effects are usually not reversible by medical intervention.

Workplace Issues

- * Extreme mood and energy swings create instability. Sudden noise causes a violent reaction.
- * Lapses in attention and ignoring warning signals increases probability of accidents.
- * High cost frequently leads to theft and/or dealing.
- * Paranoia and withdrawal may create unpredictable or violent behavior.

- * Performance is characterized by forgetfulness, absenteeism, tardiness, and missing assignments.

Opiates

Narcotic drugs which alleviate pain and depress body functions and reactions.

Health Effects

- * IV needle users have a high risk of contracting hepatitis or AID when sharing needle.
- * Increased pain tolerance. As a result, people may more severely injure themselves and fail to seek medical attention as needed.
- * Narcotic effects are multiplied when combined with other depressants causing an increased risk for overdose.
- * Because of tolerance, there is an ever-increasing need for more.
- * Strong mental and physical dependency occurs.
- * With increased tolerance and dependency combined, there is a serious financial burden for the users.

Amphetamines

Central nervous system stimulant that speeds up the mind and body.

Health Effects

- * Regular use causes strong psychological dependency and increased tolerance.
- * High doses may cause toxic psychosis resembling schizophrenia.
- * Intoxication may induce a heart attack or stroke due to increased blood pressure.
- * Chronic use may cause heart or brain damage due to severe constriction of capillary blood vessels.
- * Euphoric stimulation increases impulsive and risk-taking behavior, including bizarre and violent acts.
- * Withdrawal may result in severe physical and mental depression.

Workplace Issues

- * Since the drug alleviates the sensation of fatigue, it may be abused to increase alertness during periods of overtime or failure to get rest.
- * With heavy use or increasing fatigue, the short-term mental or physical enhancement reverses and becomes impairment.

Phencyclidine (PCP)

Often used as a large animal tranquilizer and abused primarily for its mood-altering effects. Low doses produce sedation and euphoric mood changes. Mood can rapidly change from sedation to excitation and a blank stare. Sudden noises or physical shocks may cause a "freak out" in which the person has abnormal strength, violent behavior, and an inability to speak or comprehend.

Health Effects

- * The potential for accidents and overdose emergencies is high due to the extreme mental effects combined with the anesthetic effect on the body.
- * PCP, when combined with other depressants, including alcohol, increases the possibility of an overdose.
- * If misdiagnosed as LSD induced, and treated with Thorazine, can be fatal.
- * Irreversible memory loss, personality changes, and thought disorders may result.

Workplace Issues

- * Not common in workplace primarily because of the severe disorientation that occurs.
- * There are four phases to PCP abuse:
 - Acute toxicity causing combativeness, catatonia, convulsions, and coma.
Distortions of size, shape, and distorted perception are common.
 - Toxic psychosis with visual and auditory delusions, paranoia, and agitation.
 - Drug induced schizophrenia.
 - Induced depression which may create suicidal tendencies and mental dysfunction.

APPENDIX C

GOVERNMENT CODE

SECTION 8350-8351

8350. This chapter shall be known, and may be cited, as the Drug-Free Workplace Act of 1990.

8351. As used in this chapter:

(a) "Drug-free workplace" means a site for the performance of work done in connection with a specific grant or contract described in Article 2 (commencing with Section 8355) of an entity at which employees of the entity are prohibited from engaging in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance in accordance with the requirements of this chapter.

(b) "Employee" means the employee of a grantee or contractor directly engaged in the performance of work pursuant to the grant or contract described in Article 2 (commencing with Section 8355) .

(c) "Controlled substance" means a controlled substance in schedules I through V of Section 202 of the Controlled Substances Act (21 U.S.C. Sec. 812).

(d) "Grantee" means the department, division, or other unit of a person or organization responsible for the performance under the grant.

(e) "Contractor" means the department, division, or other unit of a person or organization responsible for the performance under the contract.

APPENDIX D

Due to the changing nature of drug scheduling, a list is not published here. However, Schedules I through V of Section 202 of the Controlled Substances Act (Title 21, United States Code, Section 812) are listed on the United States Drug Enforcement Agency webpage: <https://www.dea.gov/>

APPENDIX E

REASONABLE SUSPICION DOCUMENTATION FORM

 Employee is reporting for duty

 Employee is already on duty

EMPLOYEE NAME:	DATE OF OBSERVATION:
LOCATION:	TIME OF OBSERVATION <div style="display: flex; justify-content: space-between; font-size: small;"> AM AM </div> <div style="display: flex; justify-content: space-between; font-size: small;"> FROM PM TO PM </div>

OBSERVED PERSONAL BEHAVIOR (CHECK ALL APPROPRIATE ITEMS)

BREATH: (Odor of alcoholic beverage)	<input type="checkbox"/> Strong <input type="checkbox"/> None	<input type="checkbox"/> Faint	<input type="checkbox"/> Moderate
EYES:	<input type="checkbox"/> Bloodshot <input type="checkbox"/> Clear <input type="checkbox"/> Dilated Pupils	<input type="checkbox"/> Glassy <input type="checkbox"/> Heavy Eyelids	<input type="checkbox"/> Normal <input type="checkbox"/> Fixed Pupils
SPEECH:	<input type="checkbox"/> Confused <input type="checkbox"/> Slurred <input type="checkbox"/> Stuttering <input type="checkbox"/> Not Understandable	<input type="checkbox"/> Mumbling <input type="checkbox"/> Good <input type="checkbox"/> Cotton Mouthed	<input type="checkbox"/> Thick Tongued <input type="checkbox"/> Fair <input type="checkbox"/> Mush Mouthed
ATTITUDE:	<input type="checkbox"/> Excited <input type="checkbox"/> Indifferent <input type="checkbox"/> Carefree <input type="checkbox"/> Cooperative	<input type="checkbox"/> Combative <input type="checkbox"/> Talkative <input type="checkbox"/> Cocky <input type="checkbox"/> Profane	<input type="checkbox"/> Hilarious <input type="checkbox"/> Insulting <input type="checkbox"/> Sleepy <input type="checkbox"/> Polite
UNUSUAL ACTION:	<input type="checkbox"/> Hiccoughing <input type="checkbox"/> Fighting <input type="checkbox"/> Other:	<input type="checkbox"/> Belching <input type="checkbox"/> Crying	<input type="checkbox"/> Vomiting <input type="checkbox"/> Laughing
BALANCE:	<input type="checkbox"/> Falling <input type="checkbox"/> Swaying	<input type="checkbox"/> Needs Support <input type="checkbox"/> Other:	<input type="checkbox"/> Wobbling
WALKING:	<input type="checkbox"/> Falling <input type="checkbox"/> Swaying	<input type="checkbox"/> Staggering	<input type="checkbox"/> Stumbling
TURNING:	<input type="checkbox"/> Falling <input type="checkbox"/> Swaying	<input type="checkbox"/> Staggering <input type="checkbox"/> Hesitant	<input type="checkbox"/> Stumbling

ANY OTHER UNUSUAL ACTIONS OR STATEMENTS:

SIGNS OR COMPLAINTS OF ILLNESS OR INJURY:

MANAGER'S OPINION

EFFECTS OF ALCOHOL/DRUG INTOXICATION	<input type="checkbox"/> NONE <input type="checkbox"/> SLIGHT <input type="checkbox"/> OBVIOUS <input type="checkbox"/> EXTREME
OPERATION OF EQUIPMENT	<input type="checkbox"/> YES <input type="checkbox"/> NO COMMENTS:
ADDITIONAL COMMENTS:	

Reasonable Suspicion Test Refused Yes No Date _____ Time _____

Reasonable Suspicion Test Performed Yes No Date _____ Time: _____

Clinic: _____

Manager: _____ Signature of Manager _____

Date _____ Time _____

Witness: _____ Signature _____

(if available and trained in Reasonable Suspicion)

Date _____ Time _____

APPENDIX F

Collection Center Location for Random Testing

Muir Diablo Occupational Medicine
2400 Balfour Road, Suite 230, 2nd Floor
Brentwood, CA 94561
925-626-3801

Collection Center Location for Post-Accident Testing

Muir Diablo Occupational Medicine
2400 Balfour Road, Suite 230, 2nd Floor
Brentwood, CA 94561
925-626-3801

APPENDIX G

Post-Accident Drug and Alcohol Testing Decision Form

Accident Information:

Date of Accident _____ Time of Accident: _____

Location of Accident _____

Employee Name: _____

Decision Questions:

1. Was the employee operating a motor vehicle or piece of equipment?

Yes _____ No _____

2. Was there a **fatality**? Yes _____ No _____**If yes, drug and alcohol testing required**If there was **NO fatality**, answer the following questions:3. Did the person performing safety-sensitive functions with respect to the vehicle **receive a citation** under State or local law for a moving traffic violation arising from the accident?

Yes _____ No _____

4. Did the accident involve **bodily injury** to any person who, as a result of the injury, immediately received medical treatment away from the scene of the accident?

Yes _____ No _____

Did one or more motor vehicles incur **disabling damage** as a result of the accident **requiring transportation away from the scene** by a tow truck or other motor vehicle?

Yes _____ No _____

- **If there was NO fatality AND you checked YES for QUESTION 3 AND either or both of the answers to QUESTION 4, a Post-Accident DRUG and ALCOHOL test IS REQUIRED.**

- **If there was NO fatality AND you checked NO for QUESTION 3, a Post-Accident DRUG and ALCOHOL test should not be administered.**

If **ALCOHOL testing is not conducted within 2 hours after the accident**, document the reason for the delay on the reverse side of this form. If no alcohol test is administered **within 8 hours**, cease all efforts to have the test administered and **update the documentation.**

If **DRUG test is not conducted within 32 hours after the accident**, cease all efforts to administer the drug test and document the reason why the test was not administered.

APPENDIX H

**DRUG AND ALCOHOL TESTING PROGRAM
ACKNOWLEDGMENT FORM**

I, _____, have received a copy, read and understand Diablo Water District's Drug and Alcohol Program policy and its supporting documents. I consent to submit to the drug and alcohol testing program as required by the Drug and Alcohol Program policy, its supporting documents and the law.

ANY EMPLOYEE WHO REFUSES TO COMPLY WITH THE REQUIREMENTS OF THE DRUG & ALCOHOL TESTING POLICY MAY BE SUBJECT TO DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION.

DO NOT SIGN THIS ACKNOWLEDGEMENT FORM UNTIL YOU HAVE READ, UNDERSTAND, AND AGREE TO COMPLY WITH THE POLICY PROVISIONS LISTED ABOVE.

Employee's
Signature: _____ Date: ____/____/____