

HUMAN RESOURCES SUBCOMMITTEE BOARD OF DIRECTORS MEETING



Meeting Notice:

The next meeting of this subcommittee of the TARC Board of Directors will be held at:

**TARC's Headquarters, Board Room
1000 W. Broadway, Louisville, KY 40203**

Wednesday, June 21 at 1:30 p.m.

This meeting is also being held via teleconference as permitted by KRS 61.826.

Pursuant to the Americans with Disabilities Act, persons with a disability may request a reasonable accommodation for assistance with the meeting or meeting materials. Please contact Stephanie Isaacs at 502.561.5103. Requests made as early as possible will allow time to arrange accommodation.

HUMAN RESOURCES SUBCOMMITTEE BOARD OF DIRECTORS MEETING



Agenda

- | | | | |
|------|---|----------------|------|
| I. | Quorum Call/Call to Order | Tawanda Owsley | 1:30 |
| II. | Staff Reports and Presentations | | 1:35 |
| | a. Revisions to TARC Employee Handbook | Pat Mulvihill | |
| | b. Revisions to TARC's Drug and Alcohol Policy | Susan Kinnett | |
| | c. Update on Employee Child Care Assistance Program | Melissa Fuqua | |
| | d. Human Resources Reports | Melissa Fuqua | |
| III. | Discussion and Updates | Carrie Butler | |
| IV. | Adjournment | Tawanda Owsley | 2:30 |



**HUMAN RESOURCES COMMITTEE
TARC BOARD OF DIRECTORS**

JUNE 21, 2023





EMPLOYEE HANDBOOK

UPDATED IN 2020

- See proposed changes as follows



EMPLOYEE HANDBOOK

TRANSIT AUTHORITY OF RIVER
CITY

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 2 – TARC CODE OF CONDUCT AND POLICIES

Section 2.1

- Modified to include a new paragraph, as follows: 19. Employees shall honestly report and account for their time, including reasons for unavailability or missing work.

Section 2.2

- New Mission Statement and Values

Mission – Making your journey our priority.

Vision – To be the trusted and reliable mobility choice.

Values – Excellence: I will be resilient and tenacious as we strive to deliver excellence;

Appreciation: I will appreciate and value my colleagues;

Inclusivity: I will maintain an environment that values equity and an open diversity of thought;

Accountability: I will foster a culture of ownership;

Integrity: I will approach my work with integrity;

Respect: I will show respect in my interactions with both colleagues and our community;

Reliability: I will execute on the commitments I make;

Collaboration: I will be transparent in my communication with others.



AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 2 – TARC CODE OF CONDUCT AND POLICIES

New Section 2.4, Employee Protections

- TARC has implemented a new Policy on Gender Identity and Expression.

TARC strives to promote an accommodating, nondiscriminatory environment for employees and the public regardless of their gender identity or expression, or perceived gender non-conformity.

A transgender individual shall be supported in dressing consistently with their gender identity or expression and shall have access to restrooms and sanitary facilities consistent with their gender identity or expression.

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 3 – HIRING AND ORIENTATION POLICIES

Section 3.3

- Adds that employees have to complete 6 months of employment in their current position to meet the minimum job requirements to apply for a position in a different department. The requirement does not apply to interdepartmental promotions.

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 4 – WAGE AND HOUR POLICIES

Section 4.1

- Adds that departments may have their own Attendance Policy and their call-in procedure.

Section 4.9

- Reflects that the Board approved a Resolution to adopt an updated Financial Management Policy that lay out the rules for the use of the credit card.

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 5 – PERFORMANCE, DISCIPLINE, LAYOFF AND TERMINATION

Section 5.5

- Adds that employees must report arrests and convictions of criminal activity.

Section 5.8

- Updates personal appearance standards to add that employees can be sent home on personal time to groom or change clothes.

Section 5.9

- Adds that performances reviews only apply to administrative, non-union employees.

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 6 – GENERAL POLICIES

Section 6.3

- Adds that TARC verify and monitor compliance by employees to maintain CDLs.

Section 6.9

- Clarifies that TARC employees are responsible for content post on their personal social media accounts.

Section 6.10

- Clarifies that only members of the Executive Department and Marketing Department have permission to speak on behalf of TARC or grant approval for others to do so with respect to official business.

Section 6.11 - Teleworking

- Grants right of TARC to have an on-site investigation as needed for any claim made in order to investigate a Workers' Comp claim.



AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 7 - BENEFITS

Section 7.8

- Adds Juneteenth to the TARC's paid holiday list.

Section 7.10

- Changes that the maximum of hours that will be paid as compensation for vacation leave from 80 to 40, and adds that if vacation time is not taken and the employee leaves prior to 90 days of employment, the employee will forfeit any vacation benefit they have been given.

Section 7.11

- Adds that the two retirement options for unused sick leave offered by TARC are available only if the employee meets the KPPA qualifications:
 1. TARC will buy back up to a maximum of 145 sick days or no more than 1160 hours at 100% of the team members pay rate.
 2. The unused sick leave can be used to advance a normal retirement date. However, any unused vacation time must be used before sick time.



AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 7 - BENEFITS

Section 7.13

- Amends Workers' Comp Policy to require that after being out for 12 months for a work-related injury or illness, the employee either comes back to work or shall be administratively separated; also, the section is modified to exclude workers' comp benefits if an employee gets injured while attending on-site yoga classes, using the on-site gym equipment, or while exercising on TARC property.

Section 7.15

- This section is new and entitled "Family and Medical Leave (FMLA) Policy".

AMENDMENT NO.1 TO EMPLOYEE HANDBOOK 2021

SECTION 8 – SAFETY AND LOSS PREVENTION

Section 8.4

- Specifies that a report of First Report of Injury must be completed within 24 hours of reported injury or as soon as reasonably practicable due to severe illness, injury or hospitalization.

Section 8.7

- Adds that employees are responsible for reviewing their job description with their medical provider to ensure they can perform their job safely while taking any medication.



DRUG AND ALCOHOL POLICY

ORIGINAL 1994, MULTIPLE REVISIONS

- Revisions included in attached document
- State Safety Sensitive positions
- Confirm actions on post accident drug and alcohol screen
- Update Employee Assistance Program information
- Medication Approval Form
- Reference to Medical Marijuana

Drug and Alcohol Policy



Adopted 10/17/1994
Revised 2003, & 2008
Updated 2009, 2010, 2014, 2017, 2023

EMPLOYEE CHILD CARE ASSISTANCE PARTNERSHIP OPPORTUNITY

- House Bill 499 established the Employee Child Care Assistance Partnership (ECCAO) Program
- Beginning July 1, 2023, the Commonwealth of Kentucky will match an employer's contribution to an employee's child care costs on a sliding income scale. Employees with KY based childcare making \$77,700 or less per year would receive 100% match.
- Childcare providers must be a licensed participant in the KY All STARS program.
- Employer is responsible for submitting the individual 3-part (ER, EE, child care provider) applications to the Cabinet for Health and Family Services.

- Benefit to some TARC employees ~ 40 dependents under age 5; 150 dependents under age
- Weekly payments means heavy administrative burden
- Estimate 20 to 25 participants with a heavy use of home or family childcare due to TARC employee work schedules
- Estimated cost for 25 participants: \$13,000 annual cost (TARC could fund from Employee Engagement)



WELCOME NEW TEAM MEMBERS AND NEW ROLES

Welcome Alex Posorske our new Director of Marketing and Communications!

Alex has a bachelor's in journalism from Webster University and a master's in public administration from Tulane University. Alex has worked as a transportation planner, a transit and community advocate, a communications director, a campaign manager, and a journalist.

Alex is very passionate about helping transit riders better use the system and attracting new riders to TARC services. His best problem to solve is making communications more clear and understandable.

Alex believes transit is the great equalizer in transportation and a core part of a thriving city. He is excited to do his part to make TARC the logical choice for more and more residents.



Congratulations Melissa Fuqua our new Director of Human Resources!

Melissa joined the TARC team over 20 years ago. She started her career at TARC as Senior Accounting Clerk. From there Melissa joined the HR team, where she has excelled and demonstrated impeccable skills, knowledge, and dedication.

Her knack for establishing and strengthening HR and HR related services within the transit industry makes her a natural choice for this position. She has led TARC's benefits program for many years and oversaw the transition to self insurance. Melissa's demonstrated proven leadership abilities over the years and she previously served as the Assistant Director of Human Resources and since October 2022 as the interim Director.





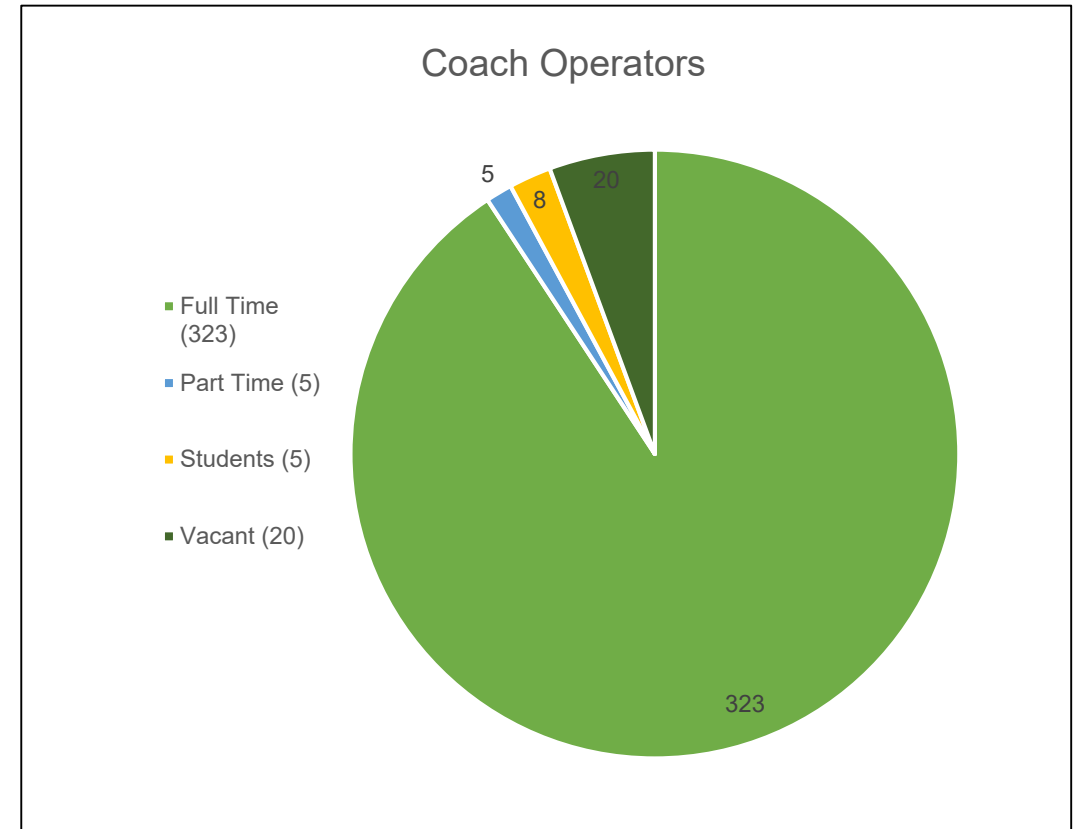
NOW HIRING

Since January 1, 2023, we have hired:

- ✓ 51 Total Employees – 21 since our last meeting
- ✓ 30 Coach Operators
- ✓ 5 Maintenance employees
- ✓ 16 Administrative employees

Vacant Positions:

- Coach Operator - 20
- Mechanic - 12
- Business Development Manager
- Control Center Manager
- Contract Coordinator
- Project Manager – Technology Implementation
- Call Center Supervisor - currently interviewing
- Radio Operator - currently interviewing
- Transit Security Specialist - currently interviewing
- Transportation Supervisor – currently interviewing
- Executive Department Administrator – possible temp to hire



RECRUITING, RECRUITING, RECRUITING

- Job Fairs
 - Job News Job Fair – Quarterly
 - Portland Community Center – May
 - Kentucky Center for the Arts – June
 - KY Career Center - July
- Social Media
 - Zip Recruiter
 - Indeed
 - LinkedIn
 - Facebook
 - Handshake (local college job boards)
- Transit Talent - Industry specific job listing
- Ivy Tech Car show planned for October

<https://www.ridetarc.org/about-us/careers/>

tarC

Join Our Talent Community

We are looking for enthusiastic individuals who want to help us get people where they need to go. We are looking for staff who are dedicated to making Louisville a more accessible place to live and work. If that is you, apply now.

Current Openings (8 of 8)

e.g., Jobs in California, Jobs posted last month, Sales Manager, etc.

<p>Project Manager -Technology Implementation UNION STATION, LOUISVILLE, KY, US 7 days ago, Full-time Regular</p>	<p>Contract Coordinator UNION STATION, LOUISVILLE, KY, US 10 days ago, Full-time Regular</p>
<p>Transit Security Specialist LOUISVILLE, KY, US 22 days ago, Full-time Regular</p>	<p>Call Center Supervisor LOUISVILLE, KY, US 30+ days ago</p>
<p>HOSTLER-3 UNION STATION, LOUISVILLE, KY, US 30+ days ago, Full-time Regular</p>	<p>MECHANIC HELPER UNION STATION, LOUISVILLE, KY, US 30+ days ago, Full-time Regular</p>
<p>MECHANIC A UNION STATION, LOUISVILLE, KY, US 30+ days ago, Full-time Regular</p>	<p>Coach Operator UNION STATION, LOUISVILLE, KY, US 30+ days ago, Full-time Regular</p>



EMPLOYEE ENGAGEMENT

TARC for the WIN at Louisville Corporate Games!

Approximately 50 TARC team members participated in the Corporate games. Eight teams participated and the results were:

- Event Champion – Corn Hole Tournament
- Event Co-Champion – Lacrosse Shot
- 2nd Place, Division 2 - Wellness Walk
- 2nd Place, Division 2 – Tail Gate Competition
- 3rd Place, Division 2 – Team T-Shirt Contest



EMPLOYEE ENGAGEMENT

Employee Communication: Retirement Benefits

- Scheduling first quarterly workshop on retirement benefits
- Overview of the Kentucky Public Pension Authority (KPPA) website and portal New retention effort –
- First session in the Training Annex
- Allows employees access to their benefits and participation in the system

 <p>Tier 1</p> <p>Participation before September 1, 2008</p> <p>LEARN MORE ></p>	 <p>Tier 2</p> <p>Participation September 1, 2008 - December 31, 2013</p> <p>LEARN MORE ></p>	 <p>Tier 3</p> <p>Participation January 1, 2014 and after</p> <p>LEARN MORE ></p>
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Food Truck Social on Thursday, June 8th

- Social event with food trucks from Dino's C-Food & More and Boss Hog's BBQ
- Information about Fund for the Arts and YMCA
- Raffle for the Health & Safety Committee





HUMAN RESOURCE COMMITTEE

June 2023

Drug and Alcohol Policy



Adopted 10/17/1994
Revised 2003, & 2008
Updated 2009, 2010, 2014, 2017, 2023

**TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM**

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**TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM**

Regulatory Overview

This Substance Abuse Policy complies with:

- Federal Transit Administration (FTA) regulations mandating drug and alcohol testing for employees performing safety-sensitive functions (49 CFR Part 655);
- U.S. Department of Transportation (DOT) Procedures for Transportation Workplace Drug Testing Programs (49 CFR Part 40);

TARC has established additional requirements under this policy for both safety sensitive and non-safety sensitive employees.

DRAFT

**TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM**

**Part 1 – Policy Statement
Drug Abuse and Alcohol Misuse**

I. Introduction

The Transit Authority of River City (TARC) is dedicated to providing safe, dependable, and economical transportation services to our transit system passengers. TARC is also dedicated to protecting its most valuable asset, its employees, by providing a healthy and safe working environment. In meeting these goals it is our policy to:

- **Ensure that employees are not impaired in their ability to perform assigned duties in a safe, healthy and productive manner;**
- **Create a workplace free from the adverse effects of drug abuse and alcohol misuse;**
- **Prohibit the unlawful manufacture, distribution, dispensing, possession, or use of controlled substances.**

TARC cares about the health and well being of its employees. Any employee who believes they are having an alcohol or drug dependency problem should seek treatment before their job performance is affected. TARC and ATU 1447 have been committed to working on drug abuse and alcohol misuse issues for several years and adopted a “Joint Policy Statement on Alcohol/Drug Abuse” on June 20, 1988. A copy of that statement is attached as Appendix A. Additionally, on a related topic, the Drug Free Workplace Act applies to TARC and its employees as the recipient of federal grant funds. TARC’s policy relative to the Drug Free Workplace Act is attached as Appendix B.

Any questions about the policy or testing program may be addressed to the Director of Human Resources at (502) 561-5141.

A. Purpose

The purpose of this policy is to ensure worker fitness for duty and to protect our employees, passengers, and the public from the risks posed by the misuse of alcohol and use of prohibited drugs. This policy is also intended to comply with all applicable Federal regulations governing workplace anti-drug and alcohol misuse programs in the transit industry. The Federal Transit Administration (FTA) of the U.S. Department of Transportation has published 49 CFR Part 655, that mandates urine drug testing and breath alcohol testing for individuals in safety-sensitive positions and prohibits performance of safety-sensitive functions when there is a positive test result. The U.S. Department of Transportation (DOT) has also published 49 CFR Part 40, as amended, which sets standards for the collection and testing of urine and breath specimens.

B. Applicability

This policy applies in general to all transit system employees, including contract employees and contractors when they are on transit property performing a safety sensitive function or when performing transit-related business off property involving a safety sensitive function; and supervisors when performing a safety sensitive function. Employees and contractor’s who perform safety-sensitive functions, will be subject to alcohol and drug testing as required by Federal regulations. Participation in TARC’s drug abuse and alcohol misuse testing program is a requirement for each covered employee, contractor or volunteer, and therefore is a condition of employment

Employees performing non-safety sensitive functions may be subject to pre-employment, reasonable suspicion, and post-accident testing. This is a TARC, but not federal, requirement.

**TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM**

Generally, a safety-sensitive function occurs when an employee is performing, ready to perform or immediately available to perform any duty related to the operation of public transportation services. The following are safety-sensitive functions:

- Operating a revenue service vehicle, whether or not such vehicle is in revenue service.
- Controlling dispatch or movement of a revenue service vehicle.
- Maintaining a revenue service vehicle or equipment used in revenue service.
Maintenance functions include the repair, overhaul, and rebuild of engines, vehicles and/or equipment.
- Operating a non-revenue service vehicle when required to be operated by a holder of a Commercial Drivers License (CDL).
- Carrying a firearm for security purposes.
- Supervising, where the supervisor performs any functions listed in items above.

Those positions determined to be Safety Sensitive are:

Transportation Department:

<u>Coach Operator</u>	<u>Dispatch Supervisor</u>
<u>Full Time Clerk</u>	<u>Dispatch Manager</u>
<u>Part Time Clerk</u>	<u>Operations Supervisor</u>
<u>Full Time Radio Operator</u>	<u>Control Center Manager</u>
<u>Part Time Radio Operator</u>	<u>Relief Supervisor</u>
<u>Part Time Training Instructor</u>	<u>Data Analyst Manager</u>
<u>_____</u>	<u>Operations Manager</u>
<u>_____</u>	<u>Control Center Manager</u>
<u>_____</u>	<u>Transportation Training Manager</u>
<u>_____</u>	<u>Training Supervisor</u>
<u>_____</u>	<u>Assistant Director of Transportation</u>
<u>_____</u>	<u>Director of Transportation</u>

Maintenance Department:

<u>Technical Group I</u>	<u>Division Maintenance Supervisor</u>
<u>Technical Group II</u>	<u>Vehicle Maintenance Supervisor</u>
<u>_____</u>	<u>General Maintenance Supervisor</u>
<u>Non-Tech Group III</u>	<u>Service Maintenance Supervisor</u>
<u>_____</u>	<u>Maintenance Training Manager</u>
<u>_____</u>	<u>Assistant Director of Maintenance</u>
<u>_____</u>	<u>Director of Maintenance</u>

Other:

All contract service providers including but not limited to Armed Security Police, Tire Employees, Paratransit Provider.

Transportation

Coach Operator
Clerk (Part Time Clerk, Full Time Clerk and Clerk/Radio Operator)
Dispatch Coordinator
Dispatch Manager
Radio Operator

**TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM**

- ~~Relief Supervisor~~
- ~~Road Supervisor~~
- ~~Supervisor of Radio Operations~~
- ~~Supervisor of Road Operations~~
- ~~Transportation Supervisor~~

Maintenance

- ~~Assistant Director of Maintenance~~
- ~~Division Maintenance Supervisor (all)~~
- ~~Non-Technical Group III~~
- ~~Non-Technical Group IV~~
- ~~Service Maintenance Supervisor~~
- ~~Technical Group I~~
- ~~Technical Group II~~
- ~~Vehicle Maintenance Supervisor (all)~~

Other

- ~~Transportation Training Manager~~
- ~~Armed Contract Security Police~~
- ~~Contracted Tire Employees~~
- ~~Other Contract Carriers' Operators, Mechanics, and Dispatchers~~
- ~~Paratransit Contract Operators, Mechanics, and Dispatchers~~

C. Prohibited Substances and Behavior

Prohibited drugs are defined as: illegal controlled substance including, but not limited to, marijuana, amphetamines, opiates, phencyclidine (PCP), and cocaine, as well as any drug not approved for medical use by the USDEA or the USFDA. Illegal use includes use of any illegal drug, misuse of legally prescribed or over the counter drugs, or illegally obtained prescription drugs.

The use of any beverage or mixture, including any medication, containing alcohol while on call, for 4 hours prior to, or while performing a safety-sensitive function, or for up to 8 hours following an accident is also prohibited.

The appropriate use of legally prescribed drugs and non-prescription medication is not prohibited. However, the use of any substance which carries a warning label indicating that mental functioning, motor skills, or judgment will or may be adversely affected must be reported to supervisory personnel prior to performing safety-sensitive duties. However, employees are required to inform medical professionals of the nature of their job functions so as to determine whether prescribed medications or treatment may adversely affect job performance. It is the responsibility of employees to remove themselves from service if they are experiencing any adverse effects from medication.

A legally prescribed drug means that an individual has a prescription or other written approval from a physician for the use of a drug in the course of medical treatment. The misuse or abuse of legal drugs while performing TARC business is prohibited. For DOT drug testing, if the MRO determines that an employee has a legitimate medical reason for the presence of a prohibited drug in their urine specimen, the MRO will report the test result as negative to TARC. However, the MRO may also medically disqualify an employee from performing safety-sensitive duties because of medication use. For further information, see 49 CFR 40.135 (d).

TRANSIT AUTHORITY OF RIVER CITY DRUG AND ALCOHOL POLICY/PROGRAM

Pursuant to the Drug-Free Workplace Act of 1988, all transit system employees are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of prohibited substances on Authority premises, in Authority vehicles, or while on Authority business. **Employees who violate this provision will be immediately terminated. Law enforcement will be notified, as appropriate, where criminal activity is suspected.**

Any safety-sensitive or non-safety-sensitive employee, who is reasonably suspected of being intoxicated, impaired, or not fit for duty shall be suspended without pay from job duties pending an investigation and verification of condition. **Employees who fail to pass a drug and/or alcohol test shall be removed from duty immediately and terminated.** A drug or alcohol test is considered positive if the individual is found to have a quantifiable presence of a prohibited substance in the body above the minimum thresholds defined in 49 CFR Part 40, as amended.

All safety-sensitive and non-safety-sensitive employees are prohibited from reporting for duty or remaining on duty any time there is a quantifiable presence of a prohibited substance in the body above the minimum thresholds defined in 49 CFR Part 40, as amended. **Employees violating these provisions will be terminated.** Any safety-sensitive and non-safety-sensitive employees with a confirmatory breath alcohol test result of 0.02 or greater will be immediately removed from duty. Under TARC policy, a safety-sensitive or non-safety-sensitive employee with a confirmatory breath alcohol test result with a concentration of .02 or greater, but less than .04 will be immediately removed without pay for the remainder of their shift and will be suspended without pay for three (3) days upon a first offense. A second offense will result in termination. Prior to returning to work, the safety-sensitive employee must submit to and pass a DOT breath alcohol retest and the non-safety-sensitive employee must submit to pass a Non-DOT breath alcohol retest (concentration of .02 or less).

II. Testing for Prohibited Substances

The Federal Transit Administration (FTA) of the U.S. Department of Transportation has published 49 CFR Part 655, that mandates urine drug testing and breath alcohol testing for individuals in safety-sensitive positions and prohibits performance of safety-sensitive functions when there is a positive test result.

All employees, contractors and volunteers performing safety-sensitive functions will be subject to testing prior to employment or transfer to a safety-sensitive function; for reasonable suspicion; on a random basis; or following an accident. Non-safety-sensitive employees are subject to pre-employment, reasonable suspicion, and post-accident testing per TARC policy.

Any bargaining unit employee requested to take a test under this program shall be able to request union representation. TARC will attempt to contact a union representative, but such effort shall not delay the testing.

A. Confidentiality

TARC affirms the need to protect individual dignity, privacy and confidentiality throughout the testing process. Results shall not appear in an employee's general personnel file. A covered employee is entitled, upon written request, to obtain copies of any records pertaining to the covered employee's use of prohibited drugs or alcohol, including any records pertaining to his or her drug or alcohol tests.

TARC shall disclose data for its drug or alcohol testing program and any other information pertaining to its anti-drug or alcohol misuse prevention program required to be maintained when requested by the

TRANSIT AUTHORITY OF RIVER CITY DRUG AND ALCOHOL POLICY/PROGRAM

Secretary of Transportation or any of its employees. TARC shall permit access to all facilities utilized in complying with the requirements to the Secretary of Transportation or any DOT agency with regulatory authority over TARC or any of its employees.

When requested by the National Transportation Safety Board as part of an accident investigation, TARC shall disclose information related to its administration of a drug or alcohol test following the accident under investigation.

TARC may disclose information required to be maintained under the regulations pertaining to a covered employee to the employee or the decision maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual, and arising from the results of a drug or alcohol test administered under the regulations, or from TARC's determination that the employee engaged in conduct prohibited by this program, including, but not limited to, a worker's compensation, unemployment compensation, or other proceeding relating to a benefit sought by the covered employee.

TARC shall release information regarding a covered employee's record as directed by the specific, written consent of the employee authorizing release of the information to an identified person. Release of such information by the person receiving the information is permitted only in accordance with the terms of the employee's consent.

Information of this nature will be contained in a separate confidential file that will be kept under the control of the Drug and Alcohol Program Manager and the Human Resources Coordinator. Such information will be shared only with those as necessary, as allowed, or as required by the regulations.

B. Methodology

Urine drug testing and breath testing for alcohol may be conducted under TARC policy or as required by federal regulations. All safety-sensitive employees shall be subject to pre-employment, random, reasonable suspicion and post-accident drug and alcohol testing as defined in other sections of this policy.

Testing shall be conducted in a manner to assure a high degree of accuracy and reliability and using techniques, equipment, and laboratory facilities, which have been approved, by the U.S. Department of Health and Human Service (DHHS). All testing will be conducted consistent with the procedures in 49 CFR Part 40, as amended. Copies of 49 CFR Part 40 are available for review by employees in the Human Resources Department. An electronic version of 49 CFR Part 40 is also available for download at the Office of Drug and Alcohol Policy and Compliance website (<http://www.dot.gov/ost/dapc/index.htm>). The collection procedures will be performed in a private, confidential manner and every effort will be made to protect the employee, the integrity of the drug testing procedure, and the validity of the test result.

Drugs: DOT regulations only permit urine testing for the following five drugs: marijuana, cocaine, opiates, amphetamines, phencyclidine and MDMA. Urine specimens will be collected using the split specimen collection method as described in 49 CFR Part 40, as amended. Each specimen will be accompanied by a Federal Drug Testing Custody and Control Form and identified using a unique identification number that attributes the specimen to the correct individual. An initial drug screen will be conducted on the primary urine specimen. For those specimens with non-negative initial drug screen results, confirmatory Gas Chromatography/Mass Spectrometry (GC/MS) will be performed. The test will be considered positive if the amounts present are above the minimum thresholds established in 40 CFR 40.87. Part 2 (I) Drug Testing Procedures lists the minimum thresholds established for each drug and /or its metabolites. The Medical Review Officer (MRO) will notify the employee of the verified positive test and the employee will then have 72 hours to request a test of the split sample by a second DHHS approved laboratory.

TRANSIT AUTHORITY OF RIVER CITY DRUG AND ALCOHOL POLICY/PROGRAM

A positive confirmatory test result, above the minimum thresholds set forth by federal regulation and verified by a Medical Review Officer (MRO), will be considered a violation of the rule. The MRO will notify the employee of the verified positive test and the employee will then have 72 hours to request a test of the split sample by a second DHHS approved laboratory.

Alcohol: Breath alcohol testing will be conducted using a National Highway Traffic Safety Administration (NHTSA) approved evidential breath-testing device (EBT) device operated by a trained breath alcohol technician (BAT). All breath alcohol test results will be reported only by an MRO or BAT to the Designated Employer Representative (DER). If the initial test indicates a breath alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. **A safety-sensitive or non-safety-sensitive employee who has a confirmatory breath alcohol test result of 0.02 or greater will be immediately removed from duty.** Under TARC policy, a safety-sensitive employee with a confirmatory breath alcohol test result with a concentration of .02 or greater, but less than .04 will be immediately removed without pay for the remainder of their shift and will be suspended without pay for three (3) days upon a first offense. A second offense will result in termination. A confirmatory breath alcohol test result of 0.04 or greater will be considered a positive alcohol test result and a violation of this policy and federal requirements in 49 CFR Part 655.

Any safety-sensitive employee with a confirmed positive drug test result, confirmatory breath alcohol test result of 0.04 or greater, or refuses to submit to a drug or alcohol test will be immediately removed from their safety-sensitive position, terminated, and referred to a Substance Abuse Professional (SAP) for assessment and referral in accordance with 49 CFR Part 40.

Any non safety-sensitive employee with a confirmed positive drug test result, confirmatory breath alcohol test result of 0.04 or greater, or refuses to submit to a drug or alcohol test will be immediately removed from their safety-sensitive position, terminated, and referred to Employee Assistance Program (EAP).

Non-safety-sensitive employees are exempt from FTA regulations included in this policy, but are governed under TARC's own policy and testing authority.

C. Types of Testing

Pre-Employment Testing: All safety-sensitive position applicants shall undergo urine drug testing and transfers from non-safety sensitive to safety-sensitive positions shall undergo urine drug testing and breath alcohol testing- (following procedures set forth in 49 CFR 655.41 and 49 CFR Part 40) prior to hire or transfer into a safety-sensitive position. Receipt by TARC of a verified negative drug test result is required prior to employment. **A verified positive pre-employment drug and/or alcohol test will disqualify an applicant for employment.** Any safety-sensitive applicant who undergoes a pre-employment test, but is not actually assigned safety sensitive duties within 90 days from the date of the test, will have to retest with negative test results prior to the applicant's first performance of safety-sensitive duties. Any safety-sensitive employee who has not performed a safety-sensitive function for 90 consecutive calendar days regardless of the reason, and has not been in the random selection pool during that time, must have a pre-employment drug test with a verified negative result prior to the employee's first performance of safety-sensitive duties.

No applicant with a prior positive testing history may be considered as a valid applicant unless and until that individual can document successful completion of a SAP-monitored referral, evaluation and education/treatment plan as described in Section 655.41 (a)(2) and Subpart O of 49 CFR Part 40.

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TARC requires that all non-safety-sensitive position applicants shall undergo urine drug testing prior to hire. Receipt by TARC of a verified negative drug test result is required prior to employment. **A verified positive pre-employment drug and/or alcohol test will disqualify an applicant for employment.**

Any safety-sensitive or non-safety-sensitive employee that has a confirmed positive pre-employment drug and/or alcohol test will be terminated.

Reasonable Suspicion Testing: All safety-sensitive and non-safety-sensitive employees may be subject to a fitness for duty evaluation, and urine and/or breath testing when there are reasons to believe that drug or alcohol use is adversely affecting job performance and/or safety. A supervisor trained in detecting the signs and symptoms of drug use and alcohol misuse will make the determination that reasonable suspicion exists based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the covered employee. Circumstances which result in such testing include, but are not limited to, observed actions of unusual behavior suggesting alcohol or drug use, the presence of the odor of alcoholic beverages and/or drugs or possession of substances reasonably suspected to be drugs or to contain alcohol.

A reasonable suspicion drug test can be conducted anytime while on duty, including lunch or break periods during a continuous shift. A reasonable suspicion alcohol test can only be administered just before, during or just after the performance of safety-sensitive functions.

Non-safety-sensitive employees are subject to reasonable suspicion drug and alcohol testing solely under TARC policy.

Post-Accident Testing: Any safety-sensitive employee who has been involved in an FTA accident with a TARC Transit vehicle will promptly be administered a post-accident drug and alcohol test. Supervisors must prepare a "Post Accident Documentation Summary Form" for each accident and submit it to the DER or Human Resources Coordinator. "Accident" means any occurrence associated with the operation of a revenue service vehicle (whether or not in revenue service at the time), or a non-revenue service vehicle operated by a holder of a Commercial Driver's License (CDL), in which;

- 1.) An individual dies (fatality);
- 2.) An individual suffers bodily injury and immediately receives medical treatment away from the scene of the accident;
- 3.) Public transportation vehicle involved is a bus, van or automobile, one or more vehicles including non-FTA funded vehicles incur disabling damage as the results of the accident and the vehicle or vehicles are towed from the scene by a tow truck or other vehicle; and
- 4.) Public transportation vehicle involved is a trolley car or trolley bus, which is removed from operations.

In the case of a fatality, each surviving safety-sensitive employee operating the vehicle at the time of the accident must be tested as well as any other safety-sensitive employees not on the vehicle, whose performance could have contributed to the accident (based upon the best information available at that time).

An accident could be the result of a collision with another vehicle or pedestrian, or it could be associated with an incident that occurs on the vehicle without any contact with another vehicle.

In a non-fatal accident, all safety sensitive employees operating the vehicle at the time of the accident will be tested unless it is determined the employee's performance can be completely discounted as a contributing factor to the accident. Any other safety-sensitive employee whose performance could have contributed to the accident will also be tested. The decision regarding being "completely discounted"

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will be made by the supervisor on the scene based upon the best information available at the time of the incident.

Following a covered accident, the safety-sensitive employee will be tested as soon as possible following the accident, but not to exceed 8 hours for alcohol testing and 32 hours for drug testing. If the alcohol test is not administered within two (2) hours of the accident, the supervisor must document the reason on the "Post Accident Documentation Summary Form" stating the reason the test was not promptly administered. If an alcohol test was not administered within eight (8) hours following the accident, all attempts to administer the test must cease and the supervisor must document the "Post Accident Documentation Summary Form".

Any safety-sensitive employee involved in an accident must refrain from alcohol use for eight hours following the accident or until he/she undergoes a post-accident alcohol test. Any safety-sensitive employee who does not remain available for testing or leaves the scene of the accident without authorization from a TARC official prior to submission to drug and alcohol testing will be considered to have refused the test and the employee will be terminated.

Post-accident testing may be delayed while the employee receives any needed medical attention or assists in resolution of the accident. However, any employee under the above circumstance who fails to remain readily available for drug or alcohol testing (including notifying TARC of his/her location) or who otherwise leaves the scene of the accident without appropriate authorization prior to drug and alcohol testing, will be considered to have refused the test.

If TARC is unable to perform a FTA drug and alcohol test (i.e., employee is unconscious, employee is detained by law enforcement agency), the transit system may use drug and alcohol post-accident test results administered by State and local law enforcement officials (49 CFR Part 40). The State and local law enforcement officials must have independent authority for the test and TARC must obtain the results in conformance with State and local law.

Once an employee completes the required Post-Accident Drug and Alcohol testing, they shall not be assigned to operate any company vehicle or perform any safety-sensitive functions pending the outcome of the test.

Random Testing: The FTA regulation (49 CFR 655.45) requires random (unannounced) testing of drugs and alcohol for all safety-sensitive employees. The selection of safety-sensitive employees for random drug and alcohol testing will be made using a scientifically valid method that ensures each covered employee will have an equal chance of being selected each time selections are made. The random tests will be unannounced and spread throughout the year. Based upon TARC's operations, random testing is conducted on all days and hours during which safety-sensitive functions are performed.

TARC will at a minimum meet annual random testing rates as established by FTA although TARC reserves the right to establish higher rates.

Employees are required to proceed immediately and directly to the collection site upon notification of their random selection. Under TARC policy, any employee who does not proceed immediately to the testing site when notified, or who fails to report to the testing site can result in disciplinary action up to and including discharge. All employees who fail to report for a drug test will be terminated.

A random drug test can be conducted anytime while on duty, including lunch or break periods during a continuous shift. A random alcohol test can only be administered just before, during or just after the performance of safety-sensitive functions.

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D. Retests and Observed Tests

Consistent with the requirements in 49 CFR 40.67, an immediate urine specimen collection under direct observation (by a person of the same gender) with no advance notice will be conducted if any of the following situations occur:

- Specimen is invalid;
- Original positive, adulterated, or substituted result had to be cancelled because the test of the split specimen could not be performed;
- The specimen was negative-dilute with a creatinine concentration greater than or equal to 2 mg/dL but less than or equal to 5 mg/dL
- Materials are observed being brought to the collection site
- Temperature on the original specimen was out of range;
- Original specimen appeared to have been tampered with

If a TARC employee receives a negative, dilute test result with a creatinine concentration greater than 5 mg/ml, and the MRO has not directed TARC to perform an observed collection, it is TARC's policy the employee will be directed to report for re-testing immediately by unobserved collection. If the second collection is also negative and dilute, unless directed by the MRO to perform another observed collection, the test result will stand, as negative, dilute and no additional testing will be required.

There are certain situations that may require the employee to provide, at the collection site, another urine or breath sample, i.e., when insufficient volume of urine or breath provides an inadequate sample.

Any safety-sensitive or non-safety sensitive employee who questions a positive, adulterated or substituted test result of a required drug test identified in this policy may request that the split sample be tested. This test must be conducted at a different DHHS certified laboratory. The test must be conducted on the split sample that was provided by the employee at the same time as the original sample. If an employee requests split sample testing, the split sample test will occur regardless of up-front payment, but TARC reserves the right to seek reimbursement from the employee unless the result of the split sample testing invalidates the result of the original test. The employee's request for a split sample test must be made to the Medical Review Officer within 72 hours of notice of the original sample verified test result. Requests after 72 hours will only be accepted if the delay was due to verifiable facts that were beyond the control of the employee.

E. Compliance with Request for Testing

Any safety-sensitive employee who refuses to comply with a request for testing shall be removed from duty immediately and terminated. The following circumstances constitute a test refusal by an applicant/employee:

- All employees are required to depart for drug/alcohol testing immediately upon notification. Any employee, who fails to report to the testing site within a reasonable time (except Pre-Employment), as determined by TARC, will be subject to disciplinary action up to and including termination. All employees who fail to report for a drug/alcohol test will be terminated;
- Fail to remain at the testing site until the testing process is complete;
- Fail to provide a urine and/or breath specimen for any DOT required drug and/or alcohol test.
- Fail to sign the certification at Step 2 of the Alcohol Test Form;

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- In the case of a directly observed or monitored collection in a drug test, failing to permit the observation or monitoring of the employee's provision of a specimen;
- For an observed collection, fail to follow the observer's instructions to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process;
- Possess or wear a prosthetic or other device that could be used to interfere with the collection process;
- Admit to the collector or MRO that you adulterated or substituted the specimen;
- Fail to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- Fail or decline to take a second test that TARC or the collector has directed the employee to take;
- Fail to undergo a medical examination or evaluation within five (5) days, as directed by the MRO as part of the verification process, or as directed by the DER as part of the "shy bladder" or "shy lung" procedures.
- Fail to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process);
- An MRO verified adulterated or substituted drug test result.

III. Employee Assistance Program (EAP)

TARC encourages employees to seek treatment voluntarily and provides the Employee Assistance Program to aid in such treatment. The EAP program offers help for employees to improve or maintain job performance by solving personal problems. A component of that program is to help employees who have some type of personal problem related to addiction (drugs and alcohol). TARC's present EAP provider is:

~~Stuecker and Associates~~ Human Development Company
(502) ~~452-9227~~589-4357 or 1 (800~~800~~) ~~799877~~93278332
<http://www.stueckerandassoc.com>www.humandev.com

Alcoholism and drug dependency are treatable illnesses and can be successfully dealt with if identified in their early stages and referred to an appropriate source for treatment. Indications of alcohol misuse and/or drug abuse are included in Appendix C (Fact Sheets).

IV. Discipline

All employees are subject to the appropriate discipline as outlined in this policy.

V. Education and Training

It is the policy of TARC that training and education programs will be made available to all employees. All safety sensitive employees will undergo a minimum of one hour of training on the signs and symptoms of drug use including the effects and consequences of drug use on personal health, safety, and the work environment. The training must also include manifestations and behavioral cues that may indicate prohibited drug use.

Supervisors will also receive in addition to the above training one-hour of reasonable suspicion training on the physical, behavioral, and performance indicators of probable drug use and one hour of additional reasonable suspicion training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

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VI. Prescription and Over-the-Counter Medications

In the interest of protecting employees and the general public, safety-sensitive employees must make sure that any drugs, prescribed or Over-the-Counter or any combination of drugs being taken will not adversely impact their job performance. Employees have the responsibility to explain their job duties to their medical practitioner and ensure that the use of prescribed medication will not pose a safety risk to themselves, other employees, or the general public.

Ultimately, the employee may be the best judge of how a substance is impacting him/her. As such, the employee has the responsibility to refrain from using any medication that causes performance-altering side effects.

Employees, who experience medication side effects or do not feel fit for duty, must report the medication to their Supervisor and immediately refrain from performing hazardous activities, including all safety-sensitive functions.

The employee must consult their personal medical practitioner and submit a TARC Medication Approval Form before returning to work anytime a new medication is prescribed which carries a warning label indicating that mental functioning, motor skills or judgement will or may be adversely affected.

If the employee's use of a prescription or over-the-counter drug endangers the employee, other employees or the public, or has contributed to an accident, the employee will be subject to discipline, including discharge, under TARC policy.

Part 2 – Highlights of Drug and Alcohol Testing Procedures

The U.S. Department of Transportation published drug-testing procedures initially in 1989. Those procedures were amended and alcohol-testing procedures established in rules published in February and August 1994. The complete set of procedures for transportation workplace drug and alcohol testing programs are referred to as 49CFR Part 40 unless otherwise indicated. The rules are extensive and not shown here in their entirety. However, the entities which perform drug specimen collection, laboratory testing, breath alcohol testing, medical review, and substance abuse professional services for TARC shall be required to follow all such guidelines correctly.

I. Drug Testing Procedures

The specimen collection site shall be staffed by collection technicians trained in proper procedures to ensure the dignity and accuracy of the collection and analysis process.

To ensure the greatest possible privacy and most accurate analysis, the collection procedure shall include the following safeguards:

- Upon arrival at the collection site, the employee shall be required to present positive identification. This consists of a photo ID issued by the employer or a Federal, state, or local government (e.g., driver's license).
- The employee shall check outer garments with collection site personnel for safekeeping.
- Employee must empty his or her pockets and display the items in them to ensure that no items are present which could be used to adulterate the specimen.
- A "chain of custody form (CCF)" shall be initiated and signed by the employee and collection technician, and this form will stay with the specimen. For this section, "specimen" shall mean the primary specimen and the split specimen.
- The employee shall wash and dry his/her hands in the presence of the collection technician.

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- Employee or collector will select an individually wrapped or sealed collection container from collection kit materials. The employee and collector must both be present, when unwrapping or breaking the seal of the collection container.
- The employee will provide his/her specimen in the privacy of a collection enclosure or stall.
- The employee must provide a specimen of at least 45 mL, with a 30 mL primary specimen and 15 mL split specimen or sample.
- Following collection, the employee will give the specimen to the collection technician, who shall seal and label the specimen as the employee observes. The sealing and identification process consists of several steps the employee and collection technician must complete together.
- The collection technician shall examine the specimen and take the temperature within 4 minutes of collection. Any unusual finding must be noted on the chain of custody form.
- The collection technician shall examine the specimen for signs of tampering (i.e. unusual color, presence of foreign objects or material, or other signs of tampering).
- The sealed and labeled specimen and the chain of custody form should be placed into a container appropriate for delivering the specimen to the laboratory for analysis.

Specimens will be shipped to a DHHS approved laboratory for analysis. Extensive procedural steps are outlined in the regulations, which the laboratory must follow to assure that each specimen is properly controlled and tested.

<u>Initial Test</u>	Minimum Thresholds	<u>Initial Test Cutoff Levels</u>
Marijuana Metabolites		50 ng/mL
Cocaine Metabolites		150 ng/mL
Opiates:		
Morphine		2,000 ng/mL
Codeine		2,000 ng/mL
6-acetylmorphine		10 ng/mL
Phencyclidine (PCP)		25 ng/mL
Amphetamines:		
Amphetamine		500 ng/mL
Methamphetamine		500 ng/mL
MDMA (Ecstasy)/MDA/MDEA		500 ng/mL

If a positive result is indicated from this initial analysis, a confirmatory analysis shall be performed. The confirmatory analysis must be performed by the use of gas chromatography/mass spectrometry (GC/MS) techniques. The test shall be considered positive where the confirmatory test cutoff levels shown below are met:

<u>Confirmatory Test</u>	Confirmatory Test Cutoff Levels
Marijuana Metabolites (1)	15 ng/mL
Cocaine Metabolites (2)	100 ng/mL
Opiates:	
Morphine	2,000 ng/mL
Codeine	2,000 ng/mL
6-acetylmorphine	10 ng/mL
Phencyclidine (PCP)	25 ng/mL
Amphetamines:	

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Amphetamine	250 ng/mL
Methamphetamine	250 ng/mL
MDMA (Ecstasy)/MDA/MDEA	250 ng/mL

- (1) Delta-9-tetrahydrocannabinol-9-carboxylic acid
- (2) Benzoyllecgonine
- (3) Specimen must also contain amphetamine at a concentration greater than or equal to 200 ng/ml

These cutoff levels are subject to change by the Department of Health and Human Services as advances in technology or other considerations warrant identification of these substances at other concentrations.

In addition, TARC retains the right to test for any other drug whose illegal use has become prevalent and/or has been found to potentially impair performance or be addictive.

II. Alcohol Testing Procedures

Collection technicians trained in proper procedures to ensure the dignity and accuracy of the collection and analysis process shall staff the collection site.

To ensure the greatest possible privacy and most accurate analysis, the collection procedure shall include the following safeguards:

- Upon arrival at the collection site, the employee shall be required to present positive identification. This consists of a photo ID issued by the employer or a Federal, state, or local government (e.g., driver's license).
- An "alcohol testing form" (ATF) shall be initiated and signed by the employee and collection technician.
- Employee or collector will select an individually wrapped or sealed mouthpiece from the testing materials. The employee and collector must both be present, when unwrapping or breaking the seal of the mouthpiece.
- The employee will be instructed to blow steadily and forcefully into the mouthpiece for at least six (6) seconds or until the device indicates that an adequate amount of breath has been obtained.
- If test is less than .02 – test is complete.
- If test is .02 or greater a confirmation test will be conducted after a 15-minute waiting period.

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Appendix A

**Adopted 6/20/88
Revised April, 2003**

Joint Policy Statement on Alcohol/Drug Abuse

The Amalgamated Transit Union, Local 1447, AFL-CIO (Union) and the Transit Authority of River City (TARC) jointly recognize that alcoholism and drug abuse are problems that affect society, are illnesses, are treatable, and should be treated before they affect performance on the job. The Union and TARC also want to assure that the transit system is operated in as safe a manner as possible and that an employee who has a problem with alcohol or drug abuse seeks treatment for rehabilitation before job misconduct results. The main purposes of this policy statement are noted above; neither the Union nor TARC seeks to regulate the private lives of TARC employees through its adoption.

The Union and TARC take the commitment to its employees seriously. A primary objective of this statement is to help, not harm, the employee; and the statement is designed to rehabilitate, not terminate. Accordingly, an Employee Assistance Program (EAP) has been established which can provide access to professional services to aid any employee with an alcohol or substance abuse problem to seek assistance as early as possible and before such problem affects job fitness or performance. Participation in this program is voluntary, confidential, and the personal responsibility of the employee. No employee who seeks treatment for alcohol or substance abuse will be disciplined or denied opportunity for promotion for this reason. TARC will not accept alcohol or substance abuse problems as an excuse for poor job performance by employees who do not seek assistance or do not correct such problems after referral and assistance.

The Union and TARC want to cooperate and maintain the transportation system in a safe and efficient manner for its public and to provide a safe work environment for its employees. Furthermore, each TARC employee has an individual responsibility to the public to deliver services in a safe and conscientious manner. In order to achieve as safe a job performance as possible, TARC employees must be able to work in a drug-free environment and themselves be free from the effects of alcohol and other job impairing substances. Accordingly, the use, sale or possession by an employee of an intoxicating beverage, controlled substance drug not medically authorized, or any other substance, which impairs job performance or poses a hazard to the safety and welfare of the employee, the public, or other employees, is strictly prohibited.

The following conditions shall apply to all employees of TARC:

1. Employees, who suspect that they may have a problem with alcohol or substance abuse, even in its early stages, are encouraged to seek professional assistance and/or referral from the Employee Assistance Program, before such problem affects job fitness or performance.
2. TARC and the Union shall form a joint committee to review procedures adopted under this policy statement and to seek means to improve the approach to this issue.
3. Use, sale, or possession of alcoholic beverages, controlled substances, medically unauthorized drugs, or other substance resulting in impairment on duty or when reporting for duty on vehicles or property of TARC is strictly prohibited.
4. No employee shall report for duty or be on duty under the influence of prescription or over-the-counter drugs to the point of impairment or to the point that their safety or the safety of others is jeopardized.
5. By becoming a party to this policy statement, the Union in no way waives any of its rights or the rights of any employee under the collective bargaining agreement or any applicable law. By becoming a party to this policy statement, TARC in no way waives its rights and responsibilities to take appropriate disciplinary action in cases resulting from alcohol and drug abuse.

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Appendix B

Adopted 10/17/94, Revised 2003

**Policy Statement
Drug-Free Workplace Act**

TARC and its employees, as recipients of the benefits of federal grants, must comply with the requirements of the **Drug-Free Workplace Act of 1988**. This policy is to inform you as an employee of the responsibilities you and TARC have under this federal act.

1. All employees are prohibited from the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance in the workplace.
2. All employees must notify TARC in writing within (5) calendar days of his or her conviction for a violation of a criminal drug statute occurring in the workplace. Such notice shall be sent or given to the Director of Transportation, Director of Maintenance, Director of Human Resources, or the Assistant Executive Director.
3. All employees who fail to properly report such a conviction will be subject to disciplinary action up to and including discharge.
4. All employees must abide by this policy as a condition of employment.
5. TARC shall be certain that each employee receives a copy of this policy.
6. TARC shall establish and maintain an ongoing drug-free awareness program to inform employees about:
 - a) The dangers of drug abuse in the workplace;
 - b) TARC's policy of maintaining a drug-free workplace;
 - c) The availability of an Employee Assistance Program;
 - d) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.
7. TARC shall notify the appropriate federal agency in writing within ten (10) calendar days after receiving notice of a conviction as outlined in paragraph 2 above.
8. TARC shall within thirty (30) calendar days after receiving notice of a conviction as outlined in paragraph 2 above, take appropriate disciplinary action up to and including discharge against the employee:
9. TARC shall continue to make a good faith effort to maintain a drug-free workplace

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Appendix C

Adopted 10/17/94; Revised 2003, 2008

Alcohol Fact Sheet

Alcohol is a socially acceptable drug that has been consumed throughout the world for centuries. It is considered a recreational beverage when consumed in moderation for enjoyment and relaxation during social gatherings. However, when consumed primarily for its physical and mood-altering effects, it is a substance of abuse. As a depressant, it slows down physical responses and progressively impairs mental functions.

Signs and Symptoms of Use

- Dulled mental processes
- Lack of coordination
- Odor of alcohol on breath
- Possible constricted pupils
- Sleepy or stuporous condition
- Slowed reaction rate
- Slurred speech

(Note: Except for the odor, these are general signs and symptoms of any depressant substance.)

Health Effects

The chronic consumption of alcohol (average of three servings per day of beer [12 ounces], whiskey [1 ounce], or wine [6 ounce glass]) over time may result in the following health hazards:

- Decreased sexual functioning
- Dependency (up to 10 percent of all people who drink alcohol become physically and/or mentally dependent on alcohol and can be termed "alcoholic")
- Fatal liver diseases
- Increased cancers of the mouth tongue, pharynx, esophagus, rectum, breast, and malignant melanoma
- Kidney disease
- Pancreatitis
- Spontaneous abortion and neonatal mortality
- Ulcers
- Birth defects (up to 54 percent of all birth defects are alcohol related).

Social Issues

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

Annual Toll

- 24,000 people will die on the highway due to the legally impaired driver.
- 12,000 more will die on the highway due to the alcohol-affected driver.
- 15,800 will die in non-highway accidents.
- 30,000 will die due to alcohol-caused liver disease.
- 10,000 will die due to alcohol-induced brain disease or suicide.
- Up to another 125,000 will die due to alcohol-related conditions or accidents

Workplace Issues

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

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Amphetamine Fact Sheet

Amphetamines are central nervous system stimulants that speed up the mind and body. The physical sense of energy at lower doses and the mental exhilaration at higher doses are the reasons for their abuse. Although widely prescribed at one time for weight reduction and mood elevation, the legal use of amphetamines is now limited to a very narrow range of medical conditions. Most amphetamines that are abused are illegally manufactured in foreign countries and smuggled into the U.S. or clandestinely manufactured in crude laboratories.

Description

- Amphetamine is sold in counterfeit capsules or as white, flat, double-scored “mini-bennies.” It is usually taken by mouth.
- Methamphetamine is often sold as a creamy white and granular powder or in lumps and is packaged in aluminum foil wraps or sealable plastic bags. Methamphetamine may be taken orally, injected, or snorted into the nose.
- Trade/street names include Biphphetamine, Delcobese, Desotyn, Dexedrine, Chetrol, Ritalin, Speed, Meth, Crank, Crystal, Monster, Black Beauties, and Rits.

Signs and Symptoms of Use

- Hyper excitability, restlessness
- Dilated pupils
- Increased heart rate and blood pressure
- Heart palpitations and irregular beats
- Profuse sweating
- Rapid respiration
- Confusion
- Panic Talkativeness
- Inability to concentrate
- Heightened aggressive behavior

Health Effects

- Regular use produces strong psychological dependence and increasing tolerance to drug.
- High dose may cause toxic psychosis resembling schizophrenia.
- Intoxication may induce a heart attack or stroke due to spiking of blood pressure.
- Chronic use may cause heart and brain damage due to severe constriction of capillary blood vessels.
- The euphoric stimulation increases impulsive and risk-taking behaviors, including bizarre and violent acts.
- Withdrawal from the drug may result in severe physical and mental depression.

Workplace Issues

Since amphetamines alleviate the sensation of fatigue, they may be abused to increase alertness because of unusual overtime demands or failure to get rest. Low-dose amphetamine use will cause a short-term improvement in mental and physical functioning. With greater use or increasing fatigue, the effect reverses and has an impairing effect. Hangover effect is characterized by physical fatigue and depression, which may make operation of equipment or vehicles dangerous.

TRANSIT AUTHORITY OF RIVER CITY DRUG AND ALCOHOL POLICY/PROGRAM

Cocaine Fact Sheet

Cocaine is used medically as a local anesthetic. It is abused as a powerful physical and mental stimulant. The entire central nervous system is energized. Muscles are tenser, the heart beats faster and stronger, and the body burns more energy. The brain experiences exhilaration caused by a large release of neurohormones associated with mood elevation.

Description

The source of cocaine in the coca bush, grown almost exclusively in the mountainous region of northern South America. Cocaine Hydrochloride "snorting coke" is a white to creamy granular or lumpy powder that is chopped into a fine powder before use. It is snorted into the nose, rubbed on the gums, or injected in veins. The effect is felt within minutes and lasts 40 to 50 minutes per "line" (about 60 to 90 milligrams). Common paraphernalia include a single-edged razor blade and a small mirror or piece of smooth metal, a half straw or metal tube, and a small screw cap vial or folded paper packet containing the cocaine. Cocaine Base is a small crystalline rock about the size of a small pebble. It boils at a low temperature, is not soluble in water, and is up to 90 percent pure. It is heated in a glass pipe and the vapor is inhaled. The effect is felt within seven seconds. Common paraphernalia includes a "crack pipe" (a small glass smoking device for vaporizing the crack crystal) and a lighter, alcohol lamp, or small butane torch for heating. Trade/street names include Coke, Rock, Crack, Free Base, Flake, Snow, Smoke, and Blow.

Signs and Symptoms of Use

- Financial problems
- Frequent and extended absences from meetings or work assignment
- Increased physical activity and fatigue
- Isolation and withdrawal from friends and normal activities
- Secretive behaviors, frequent non-business visitors, delivered packages, phone calls
- Unusual defensiveness, anxiety, agitation
- Wide mood swings
- Runny or irritated nose
- Difficulty in concentration
- Dilated pupils and visual impairment
- Formication (sensation of bugs crawling on skin)
- High blood pressure, heart palpitations, and irregular rhythm
- Hallucinations and paranoia
- Hyper excitability and overreaction to stimulus
- Insomnia or excessive talkativeness
- Profuse sweating and dry mouth

Health Effects

Research suggests that regular cocaine use may upset the chemical balance of the brain. As a result, it may speed up the aging process by causing irreparable damage to critical nerve cells. The onset of nervous system illnesses such as Parkinson's disease could also occur. Cocaine use causes the heart to beat faster and harder and rapidly increases blood pressure. In addition, cocaine causes spasms of blood vessels in the brain and heart. Both effects lead to ruptured vessels causing strokes or heart attacks. Strong psychological dependency can occur with one "hit" of crack. Usually, mental dependency occurs within days when using crack or within several months when snorting coke. Cocaine causes the strongest mental dependency of any known drug. Treatment success rates are lower than for other chemical dependencies. Cocaine overdose is one of the most common drug emergencies.

Workplace Issues

- Extreme mood and energy swings create instability. Sudden noises can cause a violent reaction.
- Lapses in attention and ignoring warning signals greatly increase the potential for accidents.
- The high cost of cocaine frequently leads to workplace theft and/or dealing.
- A developing paranoia and withdrawal create unpredictable and sometimes violent behavior.
- Work performance is characterized by forgetfulness, absenteeism, tardiness, and missed assignments.

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Cannabis (Marijuana) Fact Sheet

Marijuana is one of the most misunderstood and underestimated drugs of abuse. People use marijuana for the mildly tranquilizing and mood-and perception-altering effects it produces.

[The use of medical marijuana is prohibited for any safety-sensitive employee subject to drug testing.](#)

Description

Usually sold in plastic sandwich bags, leaf marijuana will range in color from green to light tan. The leaves are usually dry and broken into small pieces. The seeds are oval with one slightly pointed end. Less prevalent, hashish is a compressed, sometimes tar like substance ranging in color from pale yellow to black. It is usually sold in small chunks wrapped in aluminum foil. It may also be sold in an oily liquid. Marijuana has a distinctly pungent aroma resembling a combination of sweet alfalfa and incense. Cigarette papers, roach clip holders, and small pipes made of bone, brass, or glass are commonly found. Smoking "bongs" (large bore pipes for inhaling large volumes of smoke) can easily be made from soft drink cans and toilet paper rolls. Trade/street names include Marinol, THC, Pot, Grass, Joint, Reefer, Acapulco Gold, Sinsemilla, Thai Sticks, Hash, and Hash Oil.

Signs and Symptoms of Use

- Reddened eyes (often masked by eye drops)
- Slowed speech
- Distinctive odor on clothing
- Lackadaisical "I don't care" attitude
- Chronic fatigue and lack of motivation
- Irritating cough, chronic sore throat

Health Effects

- When marijuana is smoked, it is irritating to the lungs. Chronic smoking causes emphysema-like conditions.
- One joint causes the heart to race and be overworked. People with undiagnosed heart conditions are at risk.
- Marijuana is commonly contaminated with the fungus *Aspergillus*, which can cause serious respiratory tract and sinus infections.
- Marijuana smoking lowers the body's immune system response, making users more susceptible to infection. The U.S. government is actively researching a possible connection between marijuana smoking and the activation of AIDS in positive human immunodeficiency virus (HIV) carriers.

Pregnancy Problems and Birth Defects

The active chemical, tetrahydrocannabinol (THC), and 60 other related chemicals in marijuana concentrate in the ovaries and testes. Chronic smoking of marijuana in males causes a decrease in sex hormone, testosterone, and an increase in estrogen, the female sex hormone. The result is a decrease in sperm count, which can lead to temporary sterility. Occasionally, the onset of female sex characteristics including breast development occurs in heavy users. Chronic smoking of marijuana in females causes a decrease in fertility and an increase in testosterone. Pregnant women who are chronic marijuana smokers have a higher than normal incidence of stillborn births, early termination of pregnancy, and higher infant mortality rate during the first few days of life. In test animals, THC causes birth defects, including malformations of the brain, spinal cord, forelimbs, and liver and water on the brain and spine. Offspring of test animals who were exposed to marijuana have fewer chromosomes than normal, causing gross birth defects or death of the fetus. Pediatricians and surgeons are concluding that the use of marijuana by either or both parents, especially during pregnancy, leads to specific birth defects of the infant's feet and hands. One of the most common effects of prenatal cannabinoid exposure is underweight newborn babies. Fetal exposure may decrease visual functioning and causes other ophthalmic problems.

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Mental Function

Regular use can cause the following effects:

- Delayed decision-making
- Diminished concentration
- Impaired short-term memory, interfering with learning
- Impaired signal detection (ability to detect a brief flash of light), a risk for users who are operating machinery
- Impaired tracking (the ability to follow a moving object with the eyes) and visual distance measurements
- Erratic cognitive function
- Distortions in time estimation
- Long-term negative effects on mental function known as “acute brain syndrome,” which is characterized by disorders in memory, cognitive function, sleep patterns, and physical condition.

Acute Effects

- Aggressive urges
- Anxiety
- Confusion
- Fearfulness
- Hallucinations
- Heavy sedation
- Immobility
- Mental dependency
- Panic
- Paranoid reaction
- Unpleasant distortions in body image

Workplace Issues

The active chemical, THC, stores in body fat and slowly releases over time. Marijuana smoking has a long-term effect on performance. A 500 to 800 percent increase in THC concentration in the past several years makes smoking three to five joints a week today equivalent to 15 to 40 joints a week in 1978. Combining alcohol or other depressant drugs and marijuana can produce a multiplied effect, increasing the impairing effect of both the depressant and marijuana.

Opiates (Narcotics) Fact Sheet

Opiates (also called narcotics) are drugs that alleviate pain, depress body functions and reactions, and, when taken in large doses, cause a strong euphoric feeling.

Description

Varieties of opiates include natural and natural derivatives – opium, morphine, codeine, and heroin as well as synthetics such as meperidine (Demerol), oxymorphone (Numorphan), and oxycodone (Percodan). Opiates may be taken in pill form, smoked, or injected, depending upon the type of narcotic used. Trade/street names include Smack, Horse, Emma, Big D, Dollies, Juice, Syrup, and China White

Signs and Symptoms of Use

- Mood changes
- Impaired mental functioning and alertness
- Constricted pupils
- Depression and apathy
- Impaired coordination
- Physical fatigue and drowsiness
- Nausea, vomiting, and constipation

Health Effects

IV needle users have a high risk for contracting hepatitis and AIDS due to the sharing of needles. Narcotics increase pain tolerance. As a result, people could more severely injure themselves or fail to seek medical attention after an accident due to the lack of pain sensitivity. Narcotics' effects are multiplied when used in combination with other depressant drugs and alcohol, causing increased risk for an overdose.

Social Issues

There are over 500,000 heroin users in the U.S., most of who are IV needle users. An even greater number of medical narcotic-dependent persons obtain their narcotics through prescriptions. Because of tolerance, there is an ever-increasing need for more narcotics to produce the same effect. Strong mental and physical dependency occurs. The combination of tolerance and dependency creates an increasing financial burden for the user. Costs for heroin can reach hundreds of dollars a day.

Workplace Issues

Unwanted side effects such as nausea, vomiting, dizziness, mental clouding, and drowsiness place the legitimate user and abuser at higher risk for an accident. Narcotics have a legitimate medical use in alleviating pain. Workplace use may cause impairment of physical and mental functions.

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Phencyclidine (PCP) Fact Sheet

Phencyclidine (PCP) was originally developed as an anesthetic, but the adverse side effects prevented its use except as a large animal tranquilizer. Phencyclidine acts as both a depressant and a hallucinogen, and sometimes as a stimulant. It is abused primarily for its variety of mood-altering effects. Low doses produce sedation and euphoric mood changes. The mood can change rapidly from sedation to excitation and agitation. Larger doses may produce a coma-like condition with muscle rigidity and a blank stare with the eyelids half closed. Sudden noises or physical shocks may cause a "freak out" in which the person has abnormal strength, extremely violent behavior, and an inability to speak or comprehend communication.

Description

PCP is sold as a creamy, granular powder and is often packaged in one-inch square aluminum foil or folded paper "packets." It may be mixed with marijuana or tobacco and smoked. It is sometimes combined with procaine, a local anesthetic, and sold as imitation cocaine. Trade/street names include Angel Dust, Dust, and Hog

Signs and Symptoms of Use

- Impaired coordination
- Severe confusion and agitation
- Extreme mood shifts
- Muscle rigidity
- Nystagmus (jerky eye movements)
- Dilated pupils
- Profuse sweating
- Rapid heartbeat
- Dizziness

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. Other depressant drugs potentiate PCP, including alcohol, increasing the likelihood of an overdose reaction. Misdiagnosing the hallucinations as LSD induced; and then treating with Thorazine, can cause a fatal reaction. Use can cause irreversible memory loss, personality changes, and thought disorders. There are four phases to PCP abuse. The first phase is acute toxicity. It can last up to three days and can include combativeness, catatonia, convulsions, and coma. Distortions of size, shape, and distance perception are common. The second phase, which does not always follow the first, is a toxic psychosis. Users may experience visual and auditory delusions, paranoia, and agitation. The third phase is a drug-induced schizophrenia that may last a month or longer. The fourth phase is PCP-induced depression. Suicidal tendencies and mental dysfunction can last for months.

Workplace Issues

PCP abuse is less common today than in recent years. It is also not generally used in a workplace setting because of the severe disorientation that occurs. However, use in the workplace can expose the user and others to extreme safety hazards.

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Appendix D

Definitions

“Conviction” means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the federal or state criminal drug statutes.

“Criminal Drug Statute” means a federal or non-federal criminal statute involving the manufacture, distribution, dispensation, possession or use of any controlled substance.

“Controlled Substance” means a controlled substance defined in Schedules I through V of the Controlled Substance Act (21 U.S.C. 812), and as further defined by regulation at 21 CFR pursuant to a valid prescription or other use allowed by law is not unlawful.

“Drug-free Workplace” means a site for the performance of work done in connection with a specific grant at which employees of TARC are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance. Such definition shall include all TARC owned or controlled vehicles.

DRAFT

Appendix E

Forms

- Release of Information for Previous Employer
- Federal Drug Testing Custody and Control Form
- Alcohol Testing Form
- Medication Approval Form

DRAFT

**TRANSIT AUTHORITY OF RIVER CITY
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Release of Information Form – 49 CFR Part 40 Drug and Alcohol Testing



Section I. To be completed by the new employer, signed by the employee, and transmitted to the previous employer:

Employee Printed or Typed Name: _____

Employee SS or ID Number: _____

I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer, listed in **Section I-B**, to the employer listed in **Section I-A**. This release is in accordance with DOT Regulation 49 CFR Part 40, Section 40.25. I understand that information to be released in **Section II-A** by my previous employer, is limited to the following DOT-regulated testing items:

1. Alcohol tests with a result of 0.04 or higher;
2. Verified positive drug tests;
3. Refusals to be tested;
4. Other violations of DOT agency drug and alcohol testing regulations;
5. Information obtained from previous employers of a drug and alcohol rule violation;
6. Documentation, if any, of completion of the return-to-duty process following a rule violation.

Employee Signature: _____ Date: _____

I understand that a refusal to test or a positive result from a previous employer for drug or alcohol will eliminate me from further consideration

I-A.

New Employer Name: Transit Authority of River City (TARC)

Address: 1000 West Broadway
Louisville, KY 40203

Phone #: (502) 561-5141 Fax #: (502) 213-3202

Designated Employer Representative: Melissa Fuqua, Director of Human Resources

I-B.

Previous Employer Name: _____

Address: _____

Phone #: _____

Designated Employer Representative (if known): _____

Section II. To be completed by the previous employer and transmitted by mail or fax to the new employer:

II-A. In the two years prior to the date of the employee's signature (in Section I), for DOT-regulated testing ~

1. Did the employee have alcohol tests with a result of 0.04 or higher? YES NO
2. Did the employee have verified positive drug tests? YES NO
3. Did the employee refuse to be tested? YES NO
4. Did the employee have other violations of DOT agency drug and alcohol testing regulations? YES NO
5. Did a previous employer report a drug and alcohol rule violation to you? YES NO
6. If you answered "yes" to any of the above items, did the employee complete the return-to-duty process? N/A YES NO

NOTE: If you answered "yes" to item 5, you must provide the previous employer's report. If you answered "yes" to item 6, you must also transmit the appropriate return-to-duty documentation (e.g., SAP report(s), follow-up testing record).

II-B.

Name of person providing information in Section II-A: _____

Title: _____ Phone #: _____

Date: _____

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FEDERAL DRUG TESTING CUSTODY AND CONTROL FORM



SPECIMEN ID NO. **1234567**

LAB ACCESSION NO.

STEP 1: COMPLETED BY COLLECTOR OR EMPLOYER REPRESENTATIVE

<p>A. Employer Name, Address, I.D. No. _____</p> <p>C. Donor SSN or Employee I.D. No. _____</p> <p>D. Reason for Test: <input type="checkbox"/> Pre-employment <input type="checkbox"/> Random <input type="checkbox"/> Reasonable Suspicion/Cause <input type="checkbox"/> Post Accident <input type="checkbox"/> Return to Duty <input type="checkbox"/> Follow-up <input type="checkbox"/> Other (specify) _____</p> <p>E. Drug Tests to be Performed: <input type="checkbox"/> THC, COC, PCP, OPI, AMP <input type="checkbox"/> THC & COC Only <input type="checkbox"/> Other (specify) _____</p> <p>F. Collection Site Address: _____</p>	<p>B. MRO Name, Address, Phone and Fax No. _____</p> <p>Collector Phone No. _____</p> <p>Collector Fax No. _____</p>
---	--

STEP 2: COMPLETED BY COLLECTOR

Read specimen temperature within 4 minutes. Is temperature between 90° and 100° F? Yes No, Enter Remark _____

Specimen Collection: Split Single None Provided (Enter Remark) _____ Observed (Enter Remark) _____

REMARKS _____

STEP 3: Collector affixes bottle seal(s) to bottle(s). Collector dates seal(s). Donor initials seal(s). Donor completes STEP 5 on Copy 2 (MRO Copy)

STEP 4: CHAIN OF CUSTODY - INITIATED BY COLLECTOR AND COMPLETED BY LABORATORY

I certify that the specimen given to me by the donor identified in the certification section on Copy 2 of this form was collected, labeled, sealed and released to the Delivery Service noted in accordance with applicable Federal requirements.

<p><input checked="" type="checkbox"/> _____ Signature of Collector</p> <p>Time of Collection: _____ AM/PM</p> <p>(PRINT) Collector's Name (First, MI, Last) Date (Mo./Day/Yr.)</p>	<p>SPECIMEN BOTTLE(S) RELEASED TO:</p> <p>_____ Name of Delivery Service Transferring Specimen to Lab</p>
---	---

<p>RECEIVED AT LAB:</p> <p><input checked="" type="checkbox"/> _____ Signature of Accessioner</p> <p>(PRINT) Accessioner's Name (First, MI, Last) Date (Mo./Day/Yr.)</p>	<p>Primary Specimen Bottle Seal Intact</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No, Enter Remark Below</p> <p>SPECIMEN BOTTLE(S) RELEASED TO:</p>
--	--

STEP 5: COMPLETED BY DONOR

I certify that I provided my urine specimen to the collector; that I have not adulterated it in any manner; each specimen bottle used was sealed with a tamper-evident seal in my presence; and that the information provided on this form and on the label affixed to each specimen bottle is correct.

Signature of Donor

(PRINT) Donor's Name (First, MI, Last) Date (Mo./Day/Yr.)

Daytime Phone No. () _____ Evening Phone No. () _____ Date of Birth Mo/Day/Yr.

Should the results of the laboratory tests for the specimen identified by this form be confirmed positive, the Medical Review Officer will contact you to ask about prescriptions and over-the-counter medications you may have taken. Therefore, you may want to make a list of those medications for your own records. THIS LIST IS NOT NECESSARY. If you choose to make a list, do so either on a separate piece of paper or on the back of your copy (Copy 5). —DO NOT PROVIDE THIS INFORMATION ON THE BACK OF ANY OTHER COPY OF THE FORM. TAKE COPY 5 WITH YOU.

STEP 6: COMPLETED BY MEDICAL REVIEW OFFICER - PRIMARY SPECIMEN

In accordance with applicable Federal requirements, my determination/verification is:

NEGATIVE POSITIVE TEST CANCELLED REFUSAL TO TEST BECAUSE:
 DILUTE ADULTERATED SUBSTITUTED

REMARKS _____

Signature of Medical Review Officer (PRINT) Medical Review Officer's Name (First, MI, Last) Date (Mo./Day/Yr.)

STEP 7: COMPLETED BY MEDICAL REVIEW OFFICER - SPLIT SPECIMEN

In accordance with applicable Federal requirements, my determination/verification for the split specimen (if tested) is:

RECONFIRMED FAILED TO RECONFIRM - REASON _____

Signature of Medical Review Officer (PRINT) Medical Review Officer's Name (First, MI, Last) Date (Mo./Day/Yr.)

COPY 2 - MEDICAL REVIEW OFFICER COPY

0000-0000-0025

**TRANSIT AUTHORITY OF RIVER CITY
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**U.S. Department of Transportation (DOT)
Alcohol Testing Form**

(The instructions for completing this form are on the back of Copy 3)

Step 1: TO BE COMPLETED BY ALCOHOL TECHNICIAN

A: Employee Name _____
(Print) (First, M.I., Last)

B: SSN or Employee ID No. _____

C: Employer Name _____
 Street _____
 City, ST ZIP _____

DER Name and Telephone No. _____
()
 DER Name _____ DER Phone Number _____

D: Reason for Test: Random Reasonable Susp Post-Accident Return to Duty Follow-up Pre-employment

*Affix
Or
Print
Screening Results
Here*

*Affix
With
Tamperevident Tap*

STEP 2: TO BE COMPLETED BY EMPLOYEE

I certify that I am about to submit to alcohol testing required by US Department of Transportation regulations and that the identifying information provided on the form is true and correct.

 Signature of Employee _____ Date Month Day Year

*Affix
Or
Print
Confirmation Result
Here*

*Affix
With
Tamperevident Tape*

STEP 3: TO BE COMPLETED BY ALCOHOL TECHNICIAN

(If the technician conducting the screening test is not the same technician who will be conducting the confirmation test, each technician must complete their own form.) I certify that I have conducted alcohol testing on the above named individual in accordance with the procedures established in the US Department of Transportation regulation, 49 CFR Part 40, that I am qualified to operate the testing device(s) identified, and that the results are as recorded.

TECHNICIAN: BAT STT DEVICE: SALIVA BREATH* 15-Minute Wait: Yes No

SCREENING TEST: *(For BREATH DEVICE* write in the space below only if the testing device is not designed to print)*

Test #	Testing Device Name	Device Serial # OR Lot # & Exp Date	Activation Time	Reading Time	Result

CONFIRMATION TEST: Results MUST be affixed to each copy of this form or printed directly onto the form.

REMARKS:

Alcohol Technician's Company _____ Company Street Address _____
(PRINT) Alcohol Technician's Name (First, M.I., Last) Company City, State, Zip _____ Phone Number _____
()

 Signature of Alcohol Technician _____ Date Month Day Year

*Affix
Or
Print
Additional Results
Here*

*Affix
With
Tamperevident Tape*

STEP 4: TO BE COMPLETED BY EMPLOYEE IF TEST RESULT IS 0.02 OR HIGHER

I certify that I have submitted to the alcohol test, the results of which are accurately recorded on this form. I understand that I must not drive, perform safety-sensitive duties, or operate heavy equipment because the results are 0.02 or greater.

 Signature of Employee _____ Date Month Day Year

COPY 1 – ORIGINAL – FORWARD TO THE EMPLOYER

TRANSIT AUTHORITY OF RIVER CITY
DRUG AND ALCOHOL POLICY/PROGRAM

Medical Approval Form



Employee completes this section:

Employee Name _____ Date _____

Employee ID# _____ Position _____

Department _____ Phone Number _____

The information provided in this Medication Approval Form is true and correct to the best of my knowledge. I understand and will comply with the prescribed use of these medications and their restrictions while working.

Signature _____ Date _____

Physician completes this section:

Please complete this form so that your patient can work in his/her Transit Authority of River City Safety-Sensitive job. By signing below, you are acknowledging that you are aware of this employee's job duty requirements and that the prescribed medication(s) currently being taken will not adversely impair performance or endanger the safety of this individual, coworker, TARC customer, or the public. Please indicate below what, if any, restrictions should be placed upon the time between when the medication is taken and the time the individual can safely perform his/her job duties.

Medication Employee is Currently Taking:

<u>Name of Drug</u>	<u>Date Prescribed</u>	<u>Date Approval Expires</u>	<u>Restrictions/Instructions</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Physician Signature _____ Date _____

Physician - Please print Name, Address and Phone Number Below:

