The 3 "I's" Intoxication, Impairment & under the Influence

How to Identify in the Workplace

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Workplace Substance Abuse Facts and Figures

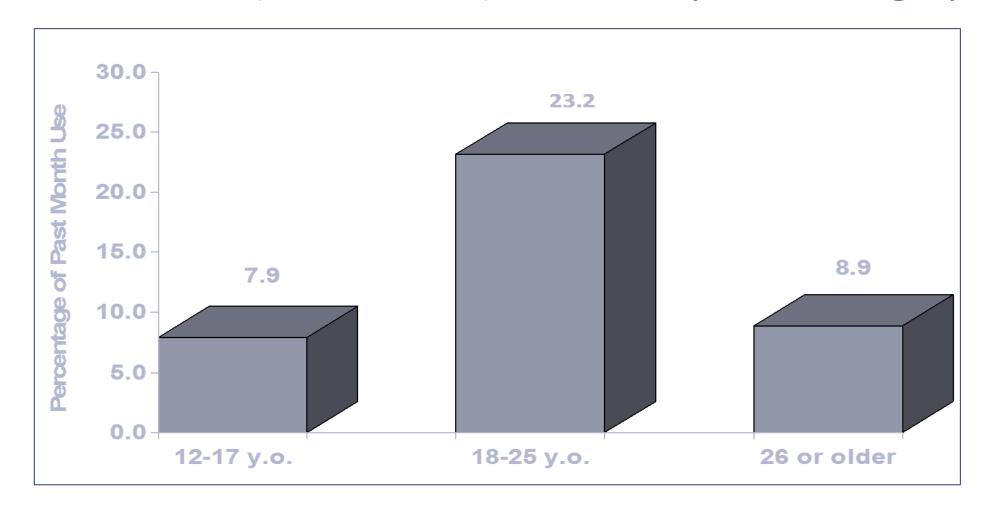
Substance Abuse in America

Substance Abuse in Workplaces

Outcomes of Workplace Substance Abuse

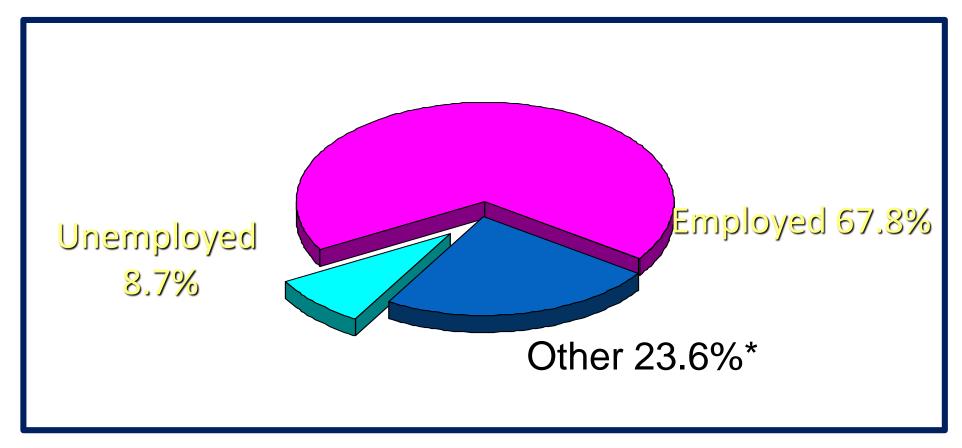
Workplace Drug Testing

Percent Current (Past Month) Use of Any Illicit Drug by Age



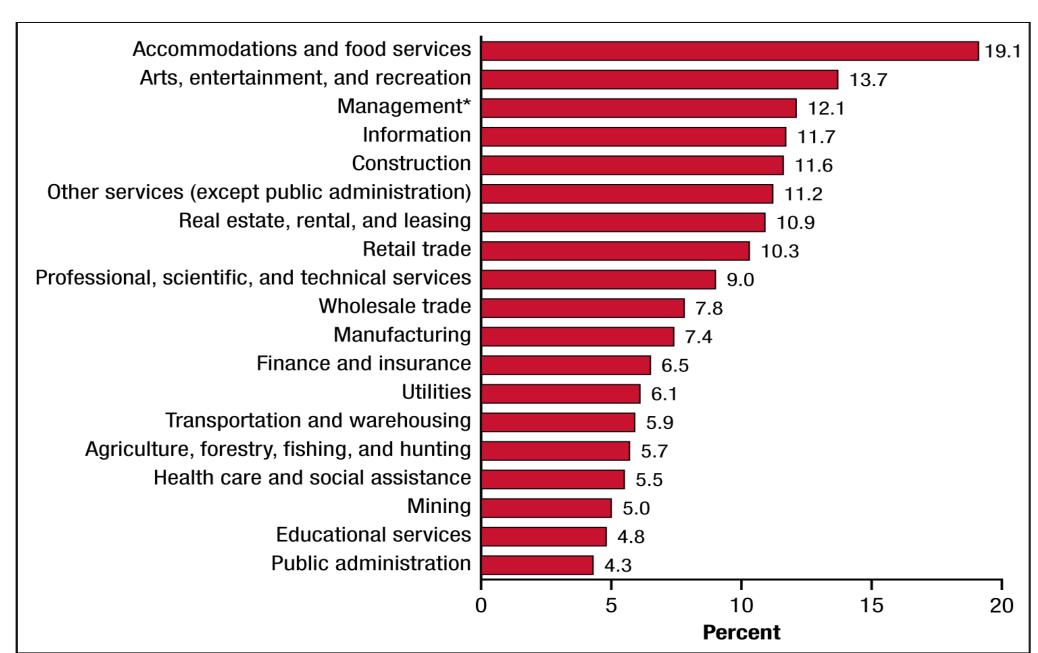
^{*}Illicit Drug use includes non-medical use of controlled substances medications

Two Thirds of Current Drug Users (Ages 18 & Over) Are Employed

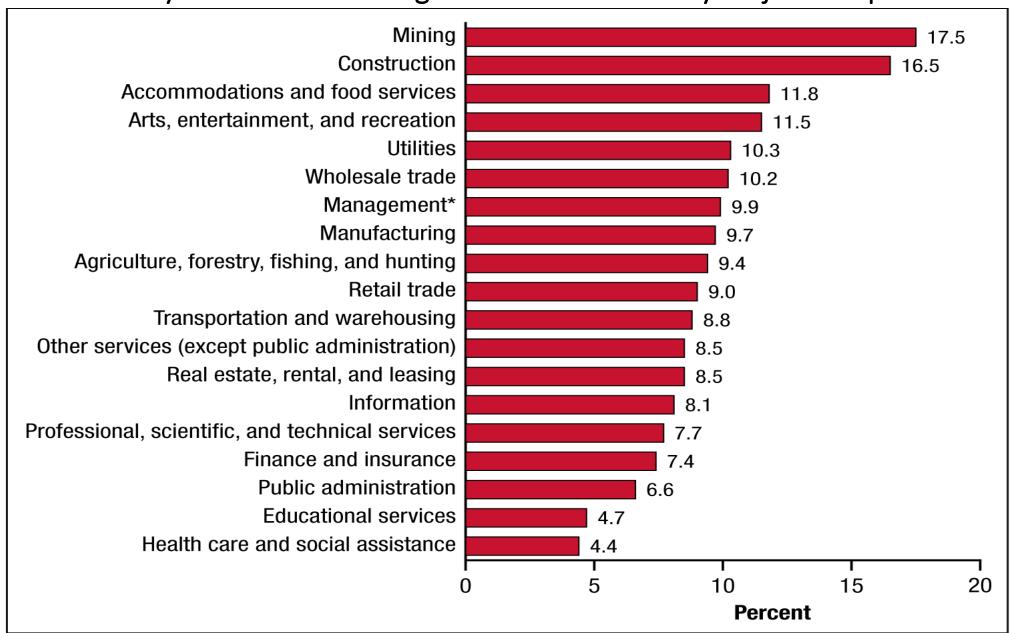


• Other represents persons not in the labor force, e.g., students, keeping house or caring for children full time, retired or disabled.

Current Drug Use Among Full-Time Workers--by Major Occupation Category



Current Heavy Alcohol Use Among Full-Time Workers--by Major Occupation Category



Some Measures of the Impact of Drugs in the Workplace



Job Turnover



Absenteeism



Accidents and Injuries



Health Care Utilization



Lost Productivity



Theft/Security



Training

Laboratory Positive Drug Test %

Table 4. Positivity Rates by Testing Reason – Urine Drug Tests (For General U.S. Workforce)

(More than 6.5 million tests from January to December 2018)

Testing Reason	2014	2015	2016	2017	2018
Follow-Up	7.1%	8.6%	8.9%	7.8%	8.4%
For Cause	27.7%	31.9%	32.9%	33.0%	33.7%
Periodic	1.6%	1.6%	1.5%	1.6%	1.6%
Post-Accident	6.5%	6.9%	7.4%	7.7%	8.4%
Pre-Employment	4.0%	4.2%	4.4%	4.6%	4.7%
Random	5.7%	5.5%	5.5%	5.6%	5.7%
Return to Duty	6.4%	6.3%	6.3%	6.4%	6.4%

Substance Abuse

Definitions

Drug/Alcohol Use Continuum



Use: consumption of alcohol or drugs consistent with applicable laws and in a socially responsible manner



Misuse: use a drug for purposes it is not intended for. Using Vicodin for a headache, Xanax for nausea, or any use simply to "feel better"; use of alcohol in circumstances where it is prohibited. At work, during required abstinence period(s); while operating a vehicle



Abuse: use of a drug for affects other than its medical purpose (to get "high", to alter one's psychological state); use of an illicit drug. Alcohol abuse includes binge drinking (5drinks/5times/30 days), legal consequence of drinking, interference with work or family responsibilities



Addiction/Dependency: a psychological and physical inability to stop consuming alcohol, a chemical, drug, or psychoactive substance, even though it is causing psychological and physical harm. Characterized by increased tolerance and withdrawal syndromes.

Affects of Alcohol or Drug Use



Intoxication: affected by alcohol or drugs especially to the point where physical and mental control is markedly diminished;



Impaired: diminished in function or ability; unable to function normally or safely because of intoxication by alcohol or drugs



Under the Influence: affected by drugs or alcohol



BOTTOM LINE: terms are often used interchangeably and employees affected by drugs or alcohol at work must be identified to protect themselves, their coworkers and the public.

Reasonable Suspicion

Definition

Criteria

Reasonable Suspicion

Definition:

- A belief, based on specific and articulable facts and/or inferences from those facts, associated with a specific individual that would lead a reasonable person to suspect the individual has been, is, or is about to be engaged in prohibited conduct.
 - Lesser standard than probable cause
 - More than an inchoate (rudimentary/not fully formed) and unparticularized suspicion or hunch

Reasonable suspicion:

- is based on observations of an individual
- Contemporaneous—just before, during, or after duty period
- What the supervisor sees, hears or smells
- is based on objective, documented criteria
- Capable of being expressed as signs or symptoms of possible use of drugs/alcohol

Reasonable suspicion testing:

- is used to "rule out" or eliminate alcohol or drug use as a cause of the individual's behavior or appearance
- is not a diagnostic tool

DOT Reasonable Suspicion Testing Criteria

Example:

- An employer shall conduct a drug and/or alcohol test when the employer has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse.
- An employer's determination that reasonable suspicion exists shall be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the covered employee. A supervisor(s), or other company official(s) who is trained in detecting the signs and symptoms of drug use and alcohol misuse must make the required observations.

Key Components:

- Observations of the employee made by a trained supervisor
 - Specific—to an individual employee
 - Contemporaneous—time proximate to performance of duty
 - Articulable—capable of being expressed in written form

FL Reasonable Suspicion Criteria

- Some criteria are provided in State DFWP statutes or regulations (Example: FL)
 - Reasonable-suspicion drug testing is drug testing based on a belief that an employee is using or has used drugs/alcohol in violation of the drug-free workplace policy. Reasonable suspicion may be drawn from specific objective and articulable facts and reasonable inferences drawn from those facts in light of experience. Among other things, such facts and inferences may be based upon:
 - Observable phenomena while at work, such as direct observation of drug use or of the physical symptoms or manifestations of being under the influence of a drug.
 - Abnormal conduct or erratic behavior while at work or a significant deterioration in work performance.
 - A report of drug use, provided by a reliable and credible source.
 - Evidence that an individual has tampered with a drug test during his or her employment with the current employer.
 - Information that an employee has caused, contributed to, or been involved in an accident while at work.
 - Evidence that an employee has used, possessed, sold, solicited, or transferred drugs while working or while on company premises or while operating company vehicle, machinery, or equipment.

Signs & Symptoms

Alcohol Use

Controlled Substances Use

.02-.04 Mental/Cognitive Functions

First affected

Individual is unaware of impact at low levels

Judgment, computation, decision making, short term memory retrieval

.04-.06 Sensory Perception

Vision - decreased object tracking, night and peripheral vision are diminished

Hearing - diminished acuity, ability to sort background noise

Smell - decreased sensitivity and selectivity

Taste - decreased sensitivity and selectivity

.08-.10 Speech & Fine Motor Skills

Speech is one of the earliest to be affected

Speech changes may include over-enunciation, slurring, or exaggerated speech patterns

Coordination, reflexes and fine motor dexterity are diminished Reaction times are slower, movements appear delayed or retarded

.10-.25 Gross Motor Skills

Gross motor skills are one of the last categories of functioning to be effected

Most noticeable area is gait

Head movements, spatial relationships and torso movements are effected

.25-.35 Balance & Navigation

Balance is controlled by the inner ear

Alcohol intoxication vertigo (room spin)

Nausea and vomiting

.35-.45 Life Threatening

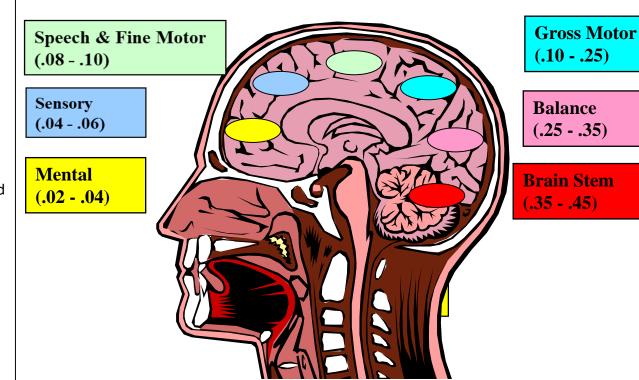
Brain stem involvement

Slowing of autonomic nervous system functions

Coma (respiratory and cardiovascular function depressed)

Death (respiratory and cardiovascular systems failure)

Signs Associated with BAC levels



Signs & Symptoms of Under the Influence of Alcohol

0.02 - 0.08

- Odor of alcohol on breath
- Poor judgment, increased risk taking behavior
- Decreased reasoning ability, forgetfulness
- Slower reflex reactions

0.08 and above

- Clumsiness, staggering, unsteady gait
- Poor coordination, slowed reflex, diminished reaction times
- Bloodshot eyes, impaired tracking ability
- Slurred speech patterns
- Exaggerated emotion, excitement, belligerent attitude
- Disheveled clothing, poor personal grooming
- Flushed complexion, sweating

Alcohol Odor

- Alcohol and alcohol byproducts give off a characteristic, distinct odor when being metabolized
- Odor of alcohol persists on the breath following alcohol use as the alcohol is being metabolized in the body
- Individuals often try to mask the odor by using breath fresheners, mints, etc.

NOTE: Odor of alcohol on a person's breath, body (perspiration) is the single best indicator that the individual has a BAC of at least .02.

Affects of Controlled Substance Drugs

- Mental and motor functioning are affected for many hours after use of the drug
 - Some studies show measurable motor and mental functioning impact for up to 24 hours after marijuana use
 - Stimulant drug use (cocaine, amphetamines) often contributes to sleep deprivation which impacts mental and motor functioning
 - Sedative drugs, including prescription opioid pain medications, slow motor and mental functioning for hours after use
 - Symptoms of acute opioid/opiate intoxication include:
 - Altered mental status, such as confusion, delirium, or decreased awareness or responsiveness
 - Extreme sleepiness or loss of alertness
 - Nausea and vomiting
- Observable effects (physical signs and symptoms, speech, motor functioning) of drug use are often not present for more than a few hours after use.

Appearance Signs and Symptoms

- Appearance changes due to drug use range from subtle to extreme
- Personal grooming often deteriorates or dramatic changes in hairstyle, clothing may occur
- Eyes are very susceptible to the effects of drugs:
 - eye movements such as tracking ability are affected
 - pupil size is altered
 - For example, opioid/opiate intoxication frequently causes pin-point or restricted pupils; individuals have difficulty functioning in low light conditions
 - bloodshot, watery or unfocused eyes
- Profuse sweating, the chills, flushed or pallid complexion may be due to the affects of the drugs
- Marijuana has a distinct odor when smoked that clings to the user's breath and clothing

Other Signs & Symptoms of Drug Use

Personality Changes

- Personality changes are the most difficult to specify
- Be alert to changes in the employee's usual personality traits or expression
- Personality changes due to drug use often are sudden and dramatic

Speech Patterns

- Stimulants create rapid, pressured speech patterns
- Narcotics produce slow, thick, slurred speech
- Hallucinogens may produce nonsense, fantasy speech

Social Interaction Changes

- Changes in social interaction are not specific to the drug
- Changes in social interaction vary from individual
- Be alert to changes in the employee's usual patterns of interacting with others

Psychomotor Changes

- Stimulants speed up the body's motor activity
- Sedatives or narcotics slow down motor functions
 - Opiate/opioid intoxication may cause individual to stagger, move very slowly, be unsteady when walking
- Hallucinogens may produce bizarre motor movements
- Marijuana delays reaction times, impairs eye-hand coordination and creates unsteadiness

Signs and Symptoms



Many signs and symptoms of alcohol or drug use can be due to other causes

Reasonable suspicion testing is used to rule out drugs/alcohol as the cause or contributing factor to your observations of the employee's bahavior, conduct or appearance



A good "rule of thumb" is to document at least two signs/ symptoms

odor of alcohol on breath is the most definitive sign of recent alcohol use and need not be accompanied by other signs/symptoms



If signs and symptoms are associated with either alcohol or drug use, you should conduct both drug and alcohol tests

Reasonable Suspicion Testing

Key Components

Documentation

Procedures for Testing

Post-Testing Considerations

Records and Reports

Key Components of Reasonable Suspicion Testing

Written policy defining, requiring, and establishing criteria for reasonable testing

Specific written procedures to follow when a determination to test has been made

Training for all supervisors/managers on reasonable suspicion testing, including the signs and symptoms of drug use and alcohol misuse

Standard documentation requirements for all reasonable suspicion testing incidents

Reasonable Suspicion Testing Documentation

Use of a checklist or standard template document that manager or supervisor completes and signs. Documentation should include:

- Specific observations of the employee's behavior, verbal responses, affect (conduct), physical characteristics, any detected odors.
- Concurrence or corroboration of 2nd manager, supervisor when possible
- Date and time of observations/interaction with employee
- Determination of testing—drug and/or alcohol, no test required, employee's refusal to test, time and other information concerning when/where testing was conducted, if available

Documentation should avoid:

- Statements that employee is intoxicated, impaired, drunk, etc.
- Identification of specific drug(s) suspected
- Vague narrative statements (e.g. "employee was acting strange")

APPENDIX A SUPERVISOR'S OBSERVATIONS Reasonable Suspicion Test Documentation

Section 1						
Employee Name:						
		Distribut/Work Unit:				
			am /pm			
Location:						
<u>Section 2</u> Obseluations: Check <u>ALL</u> that	арріу:					
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Section 3 The observations, are documents Supervisors Name printed or by			Identified in Section 1.			
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Employee Interaction

Isolate employee away from co-workers, work station to afford privacy and confidentiality

Keep conversation focused on what you see, hear, smell

Explain process to employee

Consider using the "ruling out" response to an employee's explanations for his/her behavior, conduct, appearance

- Example: "I look and sound this way because my diabetes is not well controlled, because I have the flu, because I was up all night with a sick kid".
- Response: That may be true, and if so, your test(s) will be negative and we will have documented that you have not violated the DFWP policy.

Refrain from stating that employee acts drunk, intoxicated, high....

Refrain from making it "personal" or going over extraneous personnel or performance matters

Procedures for Reasonable Suspicion Testing

Reasonable suspicion testing occurs infrequently, so it is important that supervisors have easy access to specifics about getting the testing accomplished

• Who must they notify, where is the testing to be conducted, who will accompany or escort employees for testing, where are forms located and how are they completed.

Once the decision to test has been made, the employee should be escorted/kept under supervision until tested.

In general, reasonable suspicion testing should be conducted using collection/testing procedures used for any other type of workplace test.

- Reasonable Suspicion testing should occur as soon as practical after the decision to test is made
- If delay is more than 2 hours, the circumstances should be documented; R/S testing should be discontinued if not accomplished 8 hours after the incident.

Post-testing Procedures and Considerations

Employee should not be permitted to return to work after testing is accomplished.

- Breath alcohol tests are available immediately; blood alcohol tests take at least 48 hrs. before reported
- Urine drug tests will take at least 24 hours before results are received
- Hair testing should NOT be used for Reasonable suspicion testing
- Employee should not be permitted to return to work until all results have been reported

Employee should not be permitted to drive home when testing is completed

- Employer must establish a policy for how transportation will be provided from testing location to employee's home
 - Employee to contact family or friend for transportation; company to authorize taxi or other transport
 - If employee refused offer of transportation home and insists on driving himself/herself, employee should be informed that local law enforcement will be contacted and advised that employee may be unsafe to operate a vehicle and has refused offer or transportation

Records of Reasonable Suspicion Testing

- Employer should maintain on file all documents associated with Reasonable Suspicion Testing, including:
 - Supervisor/manager checklist or incident documentation
 - Custody and control forms, alcohol testing forms and copies of results
 - Documentation of transportation provided
 - Documentation that supervisor making reasonable suspicion determination had completed training in reasonable suspicion testing

Reasonable Suspicion Testing

Myths

- Reasonable Suspicion Testing is the least effective tool for workplace substance abuse prevention & control
- Very few employees use drugs or alcohol while at work; it's an off-duty, lifestyle issue
- Reasonable suspicion testing is used as a punitive measure on "problem employees"
- Very few reasonable suspicion tests are positive; the supervisor was wrong in identifying employees for testing
- Reasonable suspicion testing is a diagnostic tool to identify addicts and abusers
- Supervisors managers must identify what drug(s) an employee may have used

Facts

- Reasonable Suspicion Testing is a core part of improving workplace safety and facilitating a drug/alcohol free work environment
- An estimated 10% of your workforce may be at work on any day with alcohol or drugs impacting their performance and safety
- Reasonable suspicion testing is substantially underutilized, with less than 1% of workplace drug/alcohol tests identified as reasonable suspicion tests
- 33-50% of all reasonable suspicion tests conducted are positive
- Reasonable suspicion testing is a risk-mitigation measure
- Reasonable suspicion testing is used to "rule out" drugs/alcohol as the cause or contributing factor to the employee's atypical/abnormal behavior, conduct, or physical appearance

In Summary

- Supervisors and managers are key stakeholders in a DFWP
 - The front line of substance abuse prevention and control in the workplace
- Reasonable suspicion is what a reasonable person would suspect based on facts or inferences from facts
 - Facts: what the supervisor sees, hears, smells—observations of a person's behavior, conduct and/or appearance
- The objective is not to detect substance use, but rather to rule it out as a cause or contributing factor to what you observe

Questions? More information?

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