

## EDUCATING THE WORKFORCE IN SUBSTANCE ABUSE PROGRAM MANAGEMENT

### Reasonable Suspicion Testing

While most Designated Employer Representatives (DERs) and Drug and Alcohol Program Managers (DAPMs) have heard of reasonable suspicion tests being conducted, an actual referral to test is statistically rare. Since reasonable suspicion tests are not part of the predictable day-to-day operations, they can often be overlooked. Reasonable suspicion training also tends to focus on the specific effects of each drug in the DOT five-panel test. While this is required training outlined in the regulations, it should be considered a component in your overall safety program.

*Focus on detecting impairment, not diagnosing a particular substance!*

The reasonable suspicion testing category is designed to provide a mechanism for preventing impaired employees from performing safety-sensitive functions. As

a DAPM, you are a central component in this effort, and your supervisors and other company officials are the front line. If an employee is behaving oddly and you suspect impairment, a face-to-face evaluation is required. During that evaluation, if you are unable to match their signs, symptoms, or behaviors to those you learned about in training, the reasonable suspicion test may still be ordered.

Your focus should be detecting impairment and not attempting to accurately diagnose which of the five substances an employee may have used. You should not feel obligated to determine from your evaluation the exact cause, though it may reveal itself during the discussion. Your primary concern should be determining if the employee is impaired and unable to perform a safety-sensitive function correctly.

If during your evaluation, you are unable to pinpoint the cause of the impairment, you must still order the test. The

laboratory will determine the illicit substance, if present, but your determination of impairment is reason enough to order the test. Documenting what you see, hear, and what you are told by the employee is the second step in the process.



The test can often lead to fitness-for-duty medical qualification rechecks and MRO safety warning to the employer due to downgrades as a result of valid prescription use. Regardless, all of these results will have a positive effect on both safety and employee wellness.

DATCS offers in-depth reasonable suspicion training. For more information, please contact Alisa at 903-234-1136 or [alisa.bradshaw@datcs.com](mailto:alisa.bradshaw@datcs.com).

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## 24/7 On-Site Availability

DATCS is available with specially trained collection professionals to provide on-site mobile testing services 24 hours a day, 7 days a week for all of your post-accident or reasonable suspicion drug and alcohol testing needs. Our team understands and is sensitive to the urgency and necessity of accuracy for your collections.

DATCS can set up a collection at your location to make the pre-employment or random testing process convenient for you and your employees. This service saves your company time and money by reducing both travel costs and employee downtime when you request one or more of our knowledgeable

collection specialists to come to your facility.

To schedule an on-site during business hours, contact your local DATCS office.

**Longview, TX**  
903-234-1136

**Tyler, TX**  
903-534-3893

**Wichita Falls, TX**  
940-264-8805

**Bossier City, LA**  
318-212-1125

For emergency services, please call **1-888-201-0242** to speak with one of our friendly staff members to assist with your after-hours needs.



## Driver BASIC -- Fitness

It takes time, effort, and money to research a potential driver's driving history and medical fitness. Most new commercial drivers need in-house training beyond what they receive to obtain a Commercial Driver's License; drivers with medical conditions need dispatchers to take the time to assign them appropriately. Many commercial drivers need help with wellness: they're far more likely to smoke, be obese, develop chronic diseases, and generally have a shorter lifespan than average. Are the benefits worth a carrier's investment?

Absolutely. Drivers with inadequate training, poor driving records, or serious medical conditions cost everyone time, money, and lives.

**Reduced costs.** Fines associated with using unqualified drivers can be large, and this doesn't even include the cost of replacing the driver, which can be up to \$8000.

Wellness programs, if designed correctly, can substantially reduce absenteeism, time lost to injuries, and health claims, in addition to crash rates.

**Improved driver retention.** Driving is a profession, and like all professions, job satisfaction increases when the employees feel that the employer has their interests in

mind. Carriers who provide well-designed wellness programs have seen substantial reduction in driver turnover—down to 30% annually at one truckload company, in contrast to the industry average of over 100%.

**Crashes avoided.** Not getting medical clearance for drivers is asking for trouble. A recent study found that 10% of all fatal-to-driver crashes in a given year were due to the driver's severe health problems; 89% of these were the result of a sudden acute heart problem at the time of the crash.



## Sap Return to Duty Process

When an employee tests positive for a drug or alcohol test, Designated Employer Representatives are faced with the decision of whether to offer them a second chance or terminate. It is always a wise decision to know your company's policy on this issue before the situation arises. If the company's policy is to terminate, then the DER simply needs to provide the employee with information about getting treatment from a Substance Abuse Professional. When a company has a "second chance" policy, then there is a process that must be followed before the employee can return to a safety sensitive position.

### What is involved?

The employee with the positive test must make contact with a Substance Abuse Professional. The SAP makes a face-to face

clinical assessment and evaluation to figure out what assistance is needed by the employee to resolve problems with drug use and alcohol misuse. Next, the SAP refers the employee to an appropriate program for education or treatment, or both. Following that, the SAP conducts another face-to-face evaluation – the follow-up evaluation – to determine if the employee actively participated in the program and has demonstrated successful compliance with the education and treatment program and should have any reports and materials they provided for review. As the DER, you should receive from the SAP an initial evaluation letter outlining the treatment and education recommendations. Your second letter from the SAP should include the

SAP's clinical characterization of the employee's level of participation in treatment and education and a statement about whether or not the employee demonstrated successful compliance with the program. If the employee successfully complied with the SAP's recommendations, this letter should also contain any plans for aftercare treatment and a follow-up plan.

DOT authorizes the DER to confer with a SAP about the employee's testing without having the employee's permission. This also includes the SAP getting information from the DER even if the employee was fired. The information the SAP obtains from the employer may help determine the best course of treatment or education, or both for the employee.



**Can I confer with a SAP about the employee's testing without the employee's permission?**

**Yes, you can!**

## Screening vs. Confirmation Cutoff Levels

A cutoff is the concentration of analyte (drug) in a urine sample at or above which the sample is considered positive for that drug. The purpose of the cutoff is to ensure consistence and reliability throughout the testing process. The screening cutoff level may be different than

the confirmation cutoff when the screening test is detecting all forms of the drug and the confirmation cutoff is measuring only one form (metabolite) of the drug in question.

For instance, in testing for marijuana, the screening test looks for all forms of cannabinoid

while the confirmation test looks only at the major metabolite – delta 9-tetrahydrocannabinol carboxylic acid. Test results in excess of the confirmation cutoff levels are consistent with recent ingestion of the analyte or an analyte-producing medication.

