

SPONSOR: Janet Venecz.
Councilwoman at Large

ORDINANCE NO. 9248

AN ORDINANCE AMENDING ORDINANCE NUMBERS 7415, AN ORDINANCE OF THE CITY OF HAMMOND STATING THE POLICY ON THE USE OF DRUGS AND ALCOHOL BY CITY EMPLOYEES

WHEREAS, the City of Hammond presently has a Policy concerning drugs and Alcohol which is found in Ordinance 7415; and

WHEREAS, this Ordinance has not been amended or updated since 1991 and since that time, changes in State and Federal Law have occurred and now require that the City Policy be amended to reflect these updates; and

WHEREAS, the provision to be amended is attached as an exhibit and made part of this Ordinance as if listed here in its entirety, and any reference to Ordinance 7415 in the Employee Handbook will now reflect this current Ordinance number; and

THEREFORE BE IT ORDAINED by the Common Council of the City of Hammond, Indiana that Ordinance Number 7415 as it relates to the City of Hammond's drug and alcohol policy is amended to reflect current State and Federal Law Changes as follows:

See Attached Exhibit: DRUGS AND ALCOHOL

THEREFORE, BE IT FURTHER ORDAINED that if any part of this ordinance shall be held invalid by a court of competent jurisdiction, the remainder thereof shall not be affected.

BE IT FURTHER ORDAINED This Ordinance shall be considered as amending Section 37.020 of the Hammond Municipal Code, and if there be any conflict therewith with any other section, this Ordinance shall take precedence.

AN ORDINANCE AMENDING ORDINANCE NUMBERS 7415, AN ORDINANCE OF THE CITY OF HAMMOND STATING THE POLICY ON THE USE OF DRUGS AND ALCOHOL BY CITY EMPLOYEES

BE IT FURTHER ORDAINED by the Common Council that this Ordinance shall be in full force and effect from and after its passage by the Common Council, signing by the President thereof, and approval by the Mayor.

ADOPTED AND APPROVED BY the Common Council of the City of Hammond, Indiana, this 14th day of April, 2014.

Michael Opinker President /s/
Hammond Common Council

ATTEST:

Robert J. Golec, City Clerk /s/
City of Hammond, Indiana

PRESENTED BY ME, the undersigned City Clerk of the City of Hammond, Indiana, to the Mayor, for approval and signature, this 15th day of April, 2014.

Robert J. Golec, City Clerk /s/
City of Hammond, Indiana

The foregoing Ordinance No. 9248 consisting of two (2) typewritten pages, including this page, was APPROVED AND SIGNED BY ME, the undersigned Mayor of the City of Hammond, Indiana, this 17th day of April, 2014.

Thomas M. McDermott, Jr., Mayor /s/
City of Hammond, Indiana

PASSED by the Common Council on the 14th day of April, 2014 and approved by the Mayor on the 17th day of April, 2014.

Robert J. Golec, City Clerk /s/

City of Hammond, Indiana

Drugs and Alcohol

The City of Hammond is dedicated to the health and safety of our employees. Drug and/or alcohol use may pose a serious threat to health and safety. Therefore, it is the policy of the City of Hammond to prevent the use of drugs and abuse of alcohol from having an adverse effect on our employees.

The City will comply with these regulations and is committed to maintaining a drug-free workplace.

It is the policy of the City of Hammond that the use, sale, purchase, transfer, possession, or presence in one's system of any controlled substance (except medically prescribed drugs) by any employee while on the City premises, engaged in City business, operating City equipment, or while under the authority of the City of Hammond is strictly prohibited. Disciplinary action will be taken as necessary.

The City retains the sole right to change, amend, or modify any term or provision of this policy without notice. This policy is effective upon passage by the Hammond Common Council, and will supersede all prior policies and statements relating to alcohol or drugs. In addition, this policy is subject to all federal and state statute and regulation. Employees of the City who hold a commercial driver's license (CDL) may also be subject to regulations issued by the U.S. Department of Transportation (DOT) and the Indiana Department of Transportation (INDOT). Wherever a conflict exists between this policy and federal or state law or regulation, federal or state law/regulation shall take precedence.

Alcohol and Controlled Substance Procedures

Who is Responsible?

It is the City's responsibility to provide random testing that is in compliance with all federal and state laws and regulations, and within the provisions of this policy. The City will retain all records related to testing and the testing process in a secure and confidential matter.

Each employee is responsible for complying with the requirements set forth in this policy. An employee will not use, have possession of, abuse, or have the presence of alcohol or any controlled substance while on duty. The employee will not use alcohol within 4 hours of beginning work.

All supervisors must make every effort to be aware of an employee's condition at all times the employee is working for the City. The supervisor must be able to make reasonable suspicion observations to determine if the employee is impaired in some way, and be prepared to implement the requirements of this policy if necessary.

Definitions

The following definitions apply:

- Actual knowledge means actual knowledge by a supervisor that an employee has used alcohol or controlled substances based on the supervisor's direct observation of the employee, a traffic citation for driving while under the influence of alcohol or a controlled substance, or an employee's admission of alcohol or controlled substance. Direct observation as used in this definition means observation of alcohol or controlled substance use and includes observation of an employee's behavior or physical characteristics sufficient to warrant reasonable suspicion testing.
- Alcohol means the intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol.
- Alcohol concentration (or content) means the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test.
- Alcohol screening device (ASD), such as a breath or saliva device.
- Alcohol use means the consumption of any beverage, liquid mixture, or preparation, including any medication, containing alcohol.
- Breath Alcohol Technician (or BAT). An individual who instructs and assists individuals in the alcohol testing process, and operates an evidential breath testing device (EBT).
- Collection site. A place designated by the City, where individuals present themselves for the purpose of providing a urine specimen for a drug test.
- Confirmation (or confirmatory) drug test means a second analytical procedure performed on a urine specimen to identify and quantify the presence of a specific drug or drug metabolite.
- Confirmation (or confirmatory) validity test means a second test performed on a urine specimen to further support a validity test result.
- Confirmed drug test means a confirmation test result received from a laboratory.
- Consortium/Third-party administrator (C/TPA) is a service agent that provides or coordinates the provision of a variety of drug and alcohol testing services for the City. C/TPAs typically perform administrative tasks concerning the operation of the City's drug and alcohol testing programs. This term includes, but is not limited to, groups of employers who join together to administer, as a single entity, the DOT drug and alcohol testing programs of its members. C/TPAs are not "employers."

Urinalyses will be conducted to detect the presence of the following substances:

1. Marijuana
2. Cocaine
3. Opiates
4. Amphetamines

5. Phencyclidine (PCP).

- The designated employer representative (DER) is an individual identified by the City as able to receive communications and test results from service agents and who is authorized to take immediate actions to remove employees from job duties and to make required decisions in the testing and evaluation processes. Service agents cannot serve as DERs.
- Drug means any substance (other than alcohol) that is a controlled substance as defined in this policy and 49 CFR Part 40.
- Evidential breath testing device (EBT). A device used for the evidential testing of breath alcohol concentrations.
- Licensed medical practitioner means a person who is licensed, certified, and/or registered, in accordance with applicable federal, state, local, or foreign laws and regulations, to prescribe controlled substances and other drugs.
- Medical Review Officer (MRO). A person who is a licensed physician (Doctor of Medicine or Osteopathy) and who is responsible for receiving and reviewing laboratory results generated by the City's drug testing program and evaluating medical explanations for certain drug test results.
- Prescription Medications means the use (by an employee) of legally prescribed medications issued by a licensed health care professional familiar with the employee's work related responsibilities.
- Refuse to submit (to an alcohol or controlled substances test) means that an employee:
 1. Fails to appear for any test (except pre-employment) within a reasonable time, as determined by the City, consistent with applicable DOT regulations, after being directed to do so by the City.
 2. Fails to remain at the testing site until the testing is complete;
 3. Fails to provide a urine specimen for any DOT required drug test (except pre-employment if the employee leaves before the testing process begins);
 4. In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of the employee's provision of the specimen;
 5. Fails to provide a sufficient amount of urine when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
 6. Fails or declines to take a second test the City or collector has directed the employee to take;
 7. Fails to undergo a medical examination or evaluation, as directed;
 8. Fails to cooperate with any part of the testing process; or
 9. Is reported by the MRO as having a verified adulterated or substituted test result.
- Screening test technician (STT). A person who instructs and assists employees in the alcohol testing process and operates an alcohol screening device (ASD).

- Stand-down means the practice of temporarily removing an employee from the performance of work functions based only on a report from a laboratory to the MRO of a confirmed positive drug test for a drug or drug metabolite, an adulterated test, or a substituted test, before the MRO has completed verification of the test results.
- Substance abuse professional (SAP). A person who evaluates employees who have violated a DOT drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing, and aftercare. A SAP must be:
 1. A licensed physician (Doctor of Medicine or Osteopathy);
 2. A licensed or certified social worker;
 3. A licensed or certified psychologist;
 4. A licensed or certified employee assistance professional; or
 5. A drug and alcohol counselor certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission (NAADAC) or by the International Certification Reciprocity Consortium/Alcohol and Other Drug Abuse (ICRC), or by the National Board for Certified Counselors, Inc and Affiliates/Master Addictions Counselor (NBCC).

Alcohol Prohibitions

The City prohibits any alcohol misuse that could affect performance of work functions.

This alcohol prohibition includes:

- use while performing work functions;
- use during the 4 hours before work;
- reporting for duty or remaining on duty to perform safety-sensitive functions with an alcohol concentration of 0.08 or greater;
- use of alcohol for up to 8 hours following an accident or until the employee undergoes a post-accident test; or
- Refusal to take a required test.

With the exception of specially authorized extracurricular events/functions, City policy forbids the use or possession of alcohol on City grounds or in City vehicles.

Drug Prohibitions

The City prohibits any drug use that could affect the performance of safety-sensitive functions. This drug prohibition includes:

- use of any drug, except when administered to an employee by, or under the instructions of, a licensed medical practitioner, who has advised the employee that the substance will not affect the employee's ability to safely operate equipment, a vehicle and perform the employee's normal work duties (Under federal and Indiana law, the use of marijuana or any Schedule I drug does not have a legitimate medical use in the United States.);
- testing positive for drugs; or
- Refusing to take a required test.

City policy forbids the use or possession of any controlled substance on City grounds or in City vehicles.

All employees will inform the City's Personnel Director of any therapeutic drug use prior to performing a safety-sensitive function. He/she may be required to present written evidence from a health care professional which describes the effects such medications may have on the employee's ability to perform his/her tasks. At no time will the employee be asked to provide an explanation for, or diagnosis of the reasons why such a drug is needed.

Condition for Employment - Refusal

An applicant who has refused a drug or alcohol test, or failed a random test for controlled substances will not be considered for employment with the City of Hammond.

Condition for Employment - Positive Test

An applicant who has tested positive for drugs during a pre-employment test will not be considered for employment with the City of Hammond.

Circumstances for Testing

Pre-Employment Testing: All applicants will be required to submit to and pass a urine drug test as a condition of employment. Each applicant will be asked whether he/she has tested positive, or refused to test, on any pre-employment drug test administered by the City to which the applicant applied for, but was not hired during the past 2 years.

If the applicant admits that he/she has tested positive, or refused to test, on any pre-employment drug test the applicant may not perform any safety-sensitive functions for the City until and unless the applicant documents successful completion of the return-to-duty process.

Reasonable Suspicion Testing: If the employee's supervisor or another City official designated to supervise employees believes an individual is under the influence of alcohol or drugs, the employee will be required to undergo a drug and/or alcohol test.

The basis for this decision will be specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the employee.

The employee's supervisor or another City official will immediately remove the employee from any and all safety-sensitive functions and take the employee or make arrangements for the employee to be taken to a testing facility.

A written record of the observations leading to an alcohol or controlled substance reasonable suspicion test, signed by the supervisor or City official who made the observation, will be completed within 24 hours of the observed behavior or before the results of the alcohol or controlled substances test are released, whichever is first.

Post-Accident Testing: An employee is to report to his/her supervisor as soon as possible if they are involved in an accident.

An incident is when any of the following occurs:

- a fatality,
- bodily injury resulting in medical treatment;
- damage to a City vehicle or any other vehicle operated on the behalf of the City, or in which a citation is issued to the employee;
- damage to any piece of equipment that results in significant loss or cost (at least \$1,000.00 damage or more).

The employee will be tested for drugs and alcohol as soon as possible following the accident. The employee must remain readily available for testing. If the employee isn't readily available for alcohol and drug testing, he/she may be deemed as refusing to submit to testing. An employee involved in an accident may not consume alcohol for 8 hours or until testing is completed.

If the alcohol test is not administered within 2 hours following the accident, the City's Personnel Director will prepare a report and maintain a record stating why the test was not administered within two hours.

If the alcohol test is not administered within 8 hours following the accident, all attempts to administer the test will cease. A report and record of why the test was not administered will be prepared and maintained.

Random Testing: The City of Hammond will conduct random testing for all employees as follows:

- The City of Hammond will use a department-wide selection process based on a scientifically valid method.

The random testing will be spread reasonably throughout the calendar year. All random alcohol and drug tests will be unannounced, with each employee having an equal chance of being tested each time selections are made.

An employee may be tested for alcohol or drugs at any time while working.

Once notified that he/she has been randomly selected for testing, the employee must proceed immediately to the assigned collection site.

Return to Duty Testing: After failing a drug-alcohol test, an employee who is not terminated must undergo a return-to-duty test prior to returning to work. The test must indicate a verified negative result for drug use or alcohol.

Follow-Up Testing: Following the employee's violation of policy, and providing that the employee has not been terminated from employment, the employee will be subject to follow-up testing. Follow-up testing will be unannounced. The number and frequency of such follow-up testing will be directed by the City's Personnel Director, and consist of at least six tests in the first 12 months. Follow-up testing may be done for up to 60 months.

Refusal to Submit

An employee may not refuse to submit to a post-accident, random, reasonable suspicion, or follow-up alcohol or controlled substances test required by the regulations. An employee who refuses to submit to such tests will be immediately terminated and considered to have tested positive for drugs or failed an alcohol test.

Refusal to submit includes failing to provide adequate breath or urine sample for alcohol or drug testing and any conduct that obstructs the testing process. This includes adulteration or substitution of a urine sample.

Dilute Specimens

If the MRO informs the City that a positive drug test was dilute, the City of Hammond will simply treat the test as a verified positive test. The City will not direct the employee to take another test based on the fact that the specimen was dilute.

If the MRO directs the City to conduct a recollection under direct observation (i.e., because the creatinine concentration of the specimen was equal to or greater than 2mg/dL, but less than or equal to 5 mg/dL), the City of Hammond will do so *immediately*. The following provisions apply to all tests that the City of Hammond sends the employee for under the directive of the MRO:

- The employee is given the minimum possible advance notice that he or she must go to the collection site;
- The result of the retest taken is accepted as the test result of record;
- If the result of the retest taken is also negative and dilute, the City of Hammond will not make the employee take an additional test because the result was dilute.
- If the employee declines to take a retest as directed in accordance with this policy, the employee has refused to take a drug-alcohol test.

Alcohol Testing Procedures

Alcohol testing will be conducted at an approved City facility or by an approved testing service. The testing will be performed in a private setting. Only authorized personnel will have access, and are the only individuals who can see or hear the test results.

When the employee arrives at the testing site, the BAT or STT will ask the employee for identification.

The BAT or STT will then explain the testing procedure to the employee. The BAT or STT may only supervise one test at a time, and may not leave the testing site while the test is in progress.

A screening test is performed first. When a breath testing device is used, the mouthpiece of the breath testing device must be sealed before use, and opened in the employee's presence. Then the mouthpiece is inserted into the breath testing device.

The employee must blow forcefully into the mouthpiece of the testing device for at least 6 seconds or until an adequate amount of breath has been obtained.

Once the test is completed, the BAT must show the employee the results. The results may be printed on a form generated by the breath testing device or may be displayed on the breath testing device. If the breath testing device does not print results and test information, the BAT is to record the displayed result, test number, testing device, serial number of the testing device, and time on the alcohol testing form. If the breath testing device prints results, but not directly onto the form, the BAT must affix the printout to the alcohol testing form in the designated space.

When an alcohol screening device (ASD) is used, the screening test technician (STT) must check the device's expiration date and show it to the employee. A device may not be used after its expiration date.

The STT will open an individually wrapped or sealed package containing the device in front of the employee and he/she will be asked to place the device in his/her mouth and use it in the manner described by the device's manufacturer.

If the employee declines to use the device, or in a case where the device doesn't activate, the STT must insert the device in the employee's mouth and use it in the manner described by the device's manufacturer. The STT must wear single-use examination gloves and must change the gloves following each test.

When the device is removed from the employee's mouth, the STT must follow the manufacturer's instructions to ensure the device is activated.

If the procedures listed above can't be successfully completed, the device must be discarded and new test must be conducted using a new device. Again, the employee will be offered the choice of using the new device or having the STT use the device for the test.

If the new test can't be successfully completed, the employee will be directed to immediately take a screening test using an evidential breath testing device (EBT).

The result displayed on the device must be read within 15 minutes of the test. The STT must show the employee the device and its reading and enter the result on the ATF.

If the reading on the EBT or ASD is less than 0.02, both the employee and the BAT or STT must sign and date the result form. The form will then be confidentially forwarded to the City's Safety Coordinator or Human Resources Consultant.

If the reading on the EBT or ASD is 0.02 or more, a confirmation test must be performed. An EBT must be used for all confirmation tests.

The test must be performed after 15 minutes have elapsed, but within 30 minutes of the first test. The BAT will ask the employee not to eat, drink, belch, or put anything into his/her mouth. These steps are intended to prevent the buildup of mouth alcohol, which could lead to an artificially high result.

A new, sealed mouthpiece must be used for the new test. The calibration of the EBT must be checked.

If the results of the confirmation test and screening test are not the same the confirmation test will be used.

Refusal to complete and sign the alcohol testing form or refusal to provide breath or saliva will be considered a failed test, and the employee suspended until the matter is resolved. Such refusal may also result in the employee's termination.

Drug Testing Procedures

All drug testing procedures will be conducted at an approved City facility or by an approved testing service. A drug testing custody and control form (CCF) will be used to document the chain of custody from the time the specimen is collected at the testing facility until it is tested at the laboratory.

When the employee arrives at the collection site, the collection site will ask the employee for identification.

The employee will be asked to remove all unnecessary outer garments (coat, jacket) and secure all personal belongings. The employee may keep his/her wallet.

The employee will wash and dry his/her hands. After washing hands, the employee must remain in the presence of the collection site person and may not have access to fountains, faucets, soap dispensers, or other materials that could adulterate the specimen.

Collection site personnel will select an individually wrapped or sealed container from the collection kit materials. Either collection site personnel or the employee, with both individuals present, must unwrap or break the seal of the collection container. The seal on the specimen bottle may not be broken at this time. Only the collection container may be taken into the room used for urination.

The employee is then instructed to provide his/her specimen in a room that allows for privacy.

The specimen must consist of at least 45 ml. of urine. Within 4 minutes after obtaining the specimen, the collection site person will measure its temperature. The acceptable temperature range is 90 to 100 degrees Fahrenheit. If the specimen temperature is outside the acceptable range, the collector must note this on the CCF and must immediately conduct a new collection using direct observation procedures. Both specimens must be sent to the lab for testing. The collector must notify both the DER and collection site supervisor that the collection took place under direct observation and the reason for doing so.

Collection site personnel will also inspect the specimen for color and look for signs of contamination or tampering. If there are signs of contamination or tampering, the collector must immediately conduct a new collection using direct observation procedures. Both specimens must be sent to the lab for testing. The collector must

notify both the DER and collection site supervisor that the collection took place under direct observation and the reason for doing so.

The 45 ml. sample provided must be split into a primary specimen of 30mL and a second specimen (used as the split) of 15 ml. The collection site person must place and secure the lids on the bottles, place tamper-evident bottle seals over the lids and down the sides of the bottles, and write the date on the tamper-evident seals. The employee then initials the tamper-evident bottle seals to certify that the bottles contain specimens he/she provided. All of this must be done in front of the employee.

All identifying information must be entered on the CCF by the collection site person.

The CCF must be signed by the collection site person, certifying collection was accomplished in accordance with the instructions provided. The employee must also sign this form indicating the specimen was his/hers.

The collector is responsible for placing and securing the specimen bottles and a copy of the CCF into an appropriate pouch or plastic bag.

At this point, the employee may leave the collection site.

The collection site must forward the specimens to the lab as quickly as possible, within 24 hours or during the next business day.

Laboratory analysis: Only a laboratory certified by the Department of Health and Human Services (DHSS) to perform urinalysis for the presence of controlled substances will be retained by the City of Hammond. The laboratory will be required to maintain strict compliance with federally approved chain-of-custody procedures, quality control, maintenance, and scientific analytical methodologies.

All specimens are required to undergo an initial screen followed by confirmation of all positive screen results.

Results: The laboratory must report all test results directly to the City of Hammond's medical review officer (MRO). All test results must be transmitted to the MRO in a timely manner, preferably the same day that the review by the certifying scientist is completed. All results must be reported.

The MRO is responsible for reviewing and interpreting all confirmed positive, adulterated, substituted, or invalid drug test results. The MRO must determine whether alternate medical explanations could account for the test results. After the decision is made, the MRO must notify the DER. The DER will notify the employee of the results.

Confidentiality/Recordkeeping

All employee alcohol and controlled substance test records are considered confidential. For the purpose of this policy/procedure, confidential recordkeeping is defined as

records maintained in a secure manner, under lock and key, accessible only to the City's Personnel Director.

Employee alcohol and controlled substance test records will only be released in the following situations:

- To the employee, upon his/her written request;
- Upon request of any federal, state or local officials with regulatory authority over The City of Hammond.;
- Upon request by subsequent employers upon receipt of a written request by a covered employee;
- In a lawsuit, grievance, or other proceeding if it was initiated by or on behalf of the complainant and arising from results of the tests; or
- Upon written consent by the employee authorizing the release to a specified individual.

All records will be retained in the accordance with the City's records policy.

Assistance

Referral, Evaluation, and Treatment: A list of substance abuse professionals will be provided to all employees who fail an alcohol test or test positive for drugs. The following is a list of substance abuse professionals and counseling and treatment programs:

Insert List of Providers

The employee may be required to pay for such services and or treatment required.

Prior to returning to duty, the City of Hammond will require that an employee be evaluated by a SAP and must complete the treatment recommended by the SAP. Successful completion of a return to duty test and all follow-up tests is mandatory.

An employee who fails to complete an evaluation by the SAP, treatment recommended by the SAP, a return to duty test, or a follow-up test *will be terminated*.

Discipline

No person who has failed an alcohol or drug test, or refused to test, will be allowed to perform safety-sensitive functions until the referral, evaluation, and treatment requirements have been complied with. The employee will be disciplined in accordance with the City's Rules of Conduct or other policy contained in the City's employee handbook, and on a case-by-case basis.

Refusal to Test: An employee's refusal to test for alcohol or controlled substances will be considered a positive test result. Adulteration or tampering with a urine or breath sample is considered conduct that obstructs the testing process and is considered a refusal to test. An employee whose conduct is considered a refusal to test will be suspended without pay subject to termination in accordance with the City's Rules of Conduct or other policy contained in the City's employee handbook.

Failed Alcohol Test Result: The employee will be disciplined in accordance with the City's Rules of Conduct or other policy contained in the City's employee handbook, and on a case-by-case basis.

APPENDIX: The Effects of Alcohol and Controlled Substances

This appendix is intended to help individuals understand the health, social/personal, and workplace consequences of substance abuse. Signs and symptoms of a problem are also reviewed for your benefit.

Alcohol

A central nervous system depressant found in beer, wine, hard liquor and in some over-the-counter medications (for example: some allergy and cold medications).

Alcohol is widely abused primarily due to its social acceptance and availability. It is considered a recreational beverage when consumed in moderation for enjoyment and relaxation during social gatherings. "Abuse" occurs when it is used primarily for its physical and mood-altering effects. About half of all auto accident fatalities in the United States are related to alcohol abuse.

Signs and Symptoms of Use:

- Dulled mental processes _____
- Lack of coordination _____
- Odor of alcohol on breath _____
- Pupils may be constricted _____
- Sleepy or stuporous condition _____
- Slowed reactions _____
- Slurred speech _____

NOTE: With the exception of the odor of alcohol, these are general signs and symptoms of any depressant substance.

Other Effects:

- Greatly impaired driving ability _____
- Reduced coordination and reflex actions _____
- Impaired vision and judgment _____
- Inability to divide attention _____
- Lowering of inhibitions _____
- Headaches, nausea, dehydration, unclear thinking, unsettled digestion and aching muscles are associated with overindulgence (hangover). _____

How Does it Work on the Body?

Alcohol first acts on the parts of the brain that affect self-control and other learned behaviors. Diminishing self-control often leads to aggressive behavior. In large doses, alcohol dulls sensations and impairs muscular coordination, memory, and judgment. Taken in large quantities over a long period of time, alcohol can damage the liver and heart, and may cause permanent brain damage. On average, heavy drinkers shorten their life span by about 10 years.

After ingestion, alcohol is absorbed through the stomach and intestine into the bloodstream. Here it passes through the liver, where it is metabolized in several steps. Metabolism helps prevent alcohol from accumulating in the body and destroying cells and organs. The liver can't metabolize alcohol as quickly as the body can absorb it. This is the point of intoxication. Any concentration of alcohol that remains unmetabolized can be detected and measured during a blood alcohol concentration test.

Many factors contribute to levels of alcohol absorption, rates of metabolism, and intoxication. Among them are: body size and weight, food ingested, gender, physical condition, and other drugs or medications in the body. Impairment begins with one drink.

Health Effects:

Over time, chronic* consumption of alcohol may result in the following health hazards:

- Liver damage
- Inflammation of the esophagus
- Aggravation of peptic ulcers
- Acute and chronic pancreatitis
- Malabsorption of food nutrients that may lead to malnutrition
- Heart attack
- Hypertension
- Stroke
- Immune system depression (makes body more susceptible to infections)

- Cancers of the liver, esophagus, nasopharynx or larynx
- Brain damage (dementia, black outs, seizures, hallucinations, peripheral neuropathy).

* Chronic consumption of alcohol = Average of three servings per day of 12 ounces of beer, one ounce of whiskey or six ounces of wine.

How Alcohol Impairs Functions Needed For Work:

The subtlety and complexity of the skills required to operate equipment, a motor vehicle safely, or other work tasks, can affect an employee even at a low amount of consumed alcohol. The evidence linking alcohol and transportation accidents is supported by experimental studies conducted by the National Institute on Alcohol Abuse and Alcoholism, relating the effect of alcohol on specific driving related skills. Impairment is related to alcohol in terms of its concentration in the bloodstream. For example, a blood alcohol concentration (BAC) of 0.04 percent might be achieved by a 150-pound man consuming two drinks in one hour.

Low to moderate BAC's (0.03 to 0.05 percent) interfere with voluntary eye movement, impairment in the eye's ability. A delay in the body's eye-to-hand reaction time can result in significant impairment in steering ability at about 0.035 percent BAC.

Alcohol impairs nearly every aspect of the brain's information processing. Alcohol

impaired employees require more time to read, respond and perform job duties. Results of numerous studies show that a deficit in the ability to divide attention may occur at 0.02 percent BAC.

Facts:

- ✓ About two in every five Americans will be involved in an alcohol-related vehicle accident in their lifetime._____
- ✓ The risk of a traffic fatality per mile driven is at least eight times higher for a drunk driver than a sober one._____
- ✓ A 12-ounce can of beer; a 5- ounce glass of wine and a 1 ½ ounce shot of hard liquor all contain the same amount of alcohol._____
- ✓ Each 1 ½ ounce of alcohol takes the average body about one hour to process and eliminate_____
- ✓ Coffee, cold showers and exercise do not quicken sobriety._____

Marijuana

Also known as grass, pot, weed, gold, joint, hemp, reefer. Active chemical-THC.

Marijuana is one of the most misunderstood and underestimated drugs of abuse. It is used for its mildly tranquilizing, mood and perception altering effects. It alters the brain's interpretation of incoming messages but does not depress the reactions of the central nervous system. It alters a person's scene of time and reduces the ability to perform tasks requiring concentration, swift reflexes and coordination. The drug has a significant effect on a user's judgment caution and sensory/motor abilities.

Signs and Symptoms of Use:

- Reddened eyes_
- Slowed speech_
- Distinctive, pungent odor on clothing (aroma of alfalfa combined with incense)_____
- Lackadaisical "I don't care" attitude_____
- Chronic fatigue and lack of motivation_____
- Irritating cough_____
- Chronic sore throat_____

Other Effects:

- Restlessness_____
- Inability to concentrate_____
- Increased pulse rate and blood pressure_____
- Rapidly changing emotions and erratic behavior_____
- Impaired memory and attention_____
- Hallucinations, fantasies and paranoia_____
- Decrease in/temporary loss of fertility_____
- Distorted perception of time_____
- Apathy_____

- Delayed decision making_____
- Aggressive urges_____
- Anxiety__
- Confusion_____
- Hallucinations__

Health Effects:

Over time, long-term inhalation of marijuana smoke may result in the following health hazards:

- Lung irritations__
- Emphysema-like conditions__
- Cancer__
- Heart conditions
- Respiratory tract and sinus infections caused by the fungus Aspergilligs, a common contaminant of marijuana__
- Lowered immune system response__
- Aggravation of ulcers__
- Brain damage.

(Marijuana causes long-term negative effects on mental function-also known as “acute brain syndrome,” characterized by disorders in memory, cognitive function, sleep patterns and physical conditions.)

How Marijuana Impairs Functions Needed For Work:

Marijuana impairs driving ability for at least 4-6 hours after smoking one “joint” (cigarette); it impairs signal detection (ability to detect a brief flash of light); it impairs tracking (ability to follow moving objects with the eyes); it impairs visual distance measurements; and it chemically alters the brain and gross motor functioning of the body, having a direct impact on the complex system of critical thinking skills and reflexes that allow people to work safely and conscientiously.

NOTE: THC is stored in body fat and is slowly released over time, causing a long-term effect on overall performance.

Facts:

- ✓ Marijuana remains in the body for 28 days. This is in contrast to alcohol which dissipates in a matter of hours.
- ✓ A 500% to 800% increase in HTC potency in the past several years makes smoking three to five joints (cigarettes) per week today the equivalent of 15 to 40 joints per week in 1978.
- ✓ Combining marijuana with alcohol or other depressant drugs can produce a multiplied effect, increasing the impairment caused by all substances.

Cocaine

A stimulant drug also known as coke or blow when it is inhaled (snorted) ingested. Free-base cocaine, known as crack or rock, is smoked.

Cocaine is used medically as a local anesthetic. It is abused for its powerful physical and mental stimulant properties. The entire central nervous system is energized by cocaine. Heart rate and blood pressure are elevated. Muscles become more tense and the body burns more energy. The brain experiences an exhilaration caused by a large release of neurohormones associated with mood elevation.

Crack or rock cocaine gets its name from the popping sound heard when it is heated. The most dangerous effect of crack is that it can cause vomiting, rapid heartbeat, tremors and convulsive movement. All of this muscle activity increased the demand for oxygen, which can result in a cocaine-induced heart attack. Since the heat regulating center in the brain is also disrupted, dangerously high body temperatures can occur. With high doses, brain functioning, breathing and heartbeat are depressed-leading to death.

Signs and Symptoms of Use:

- Fatigue
- Anxiety and agitation
- Runny or irritated nose
- Difficulty in concentration
- Dilated pupils and visual impairment
- High blood pressure, heart palpitations and irregular heart rhythm
- Insomnia
- Profuse sweating and dry mouth

Other Effects:

- Impaired driving ability
- Hallucinations
- Talkativeness
- Restless, aggressive behavior
- Wide mood swings
- Increased physical activity
- Heightened, but momentary, feeling of confidence, strength and endurance
- Paranoia (which can trigger mental disorders in users prone to mental instability)
- Repeated sniffing/snorting causes irritation of the nostrils and nasal membrane, which may cause nosebleeds
- Compulsive behavior such as teeth grinding or repeated hand washing

- Craving for more cocaine

Health Effects:

- Accelerated pulse, blood pressure and respiration. May cause spasms of blood vessels in the brain and heart, leading to ruptured vessels that lead to heart attack and stroke.
- Regular use may upset the chemical balance of the brain, which may speed up the aging process by causing irreparable damage the critical nerve cells
- Mental dependency on crack cocaine occurs within days (within several months when coke is snorted).
- Cocaine is extremely dangerous when taken with depressant drugs. Death due to overdose are often not reversible.

How Cocaine Impairs Functions Needed For Work:

Cocaine chemically alters the brain and gross motor functioning of the body, having a direct impact on the complex system of critical thinking skills and reflexes that allow people to drive safely and conscientiously.

Facts:

- ✓ The number of cocaine overdose deaths has tripled in the past four years.
- ✓ Treatment success rates are lower for cocaine than for other chemical dependencies.
- ✓ Cocaine causes the strongest mental dependency of any known drug. Strong psychological dependency can occur within on "hit" of crack.
- ✓ Many people think that because crack is smoked, it is safer than other forms of cocaine use. It is one of the most addictive substances known today. The crack "high" is reached in 4-6 seconds and lasts about 15 minutes.

Amphetamines and Methamphetamines

Stimulant drugs.

Some common street names for amphetamines are speed, uppers, black beauties, bennies, wake-ups and dexies.

Some common street names for methamphetamines are ice, crank, crystal, meth, 64 glass, cristy, go fast, zip.

Amphetamines and methamphetamines are drugs that stimulate the central nervous system and promote a feeling of alertness and an increase in speech and general physical activity. While amphetamines are usually sold in tablet form, methamphetamines are available as powder, and may be swallowed, snorted or injected.

Although they were 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. In action, methamphetamines are nearly identical to amphetamines. It is abused for the physical sense of energy at lower doses and the mental exhilaration of higher doses. Even small, infrequent doses can produce toxic effects in some people.

Signs and Symptoms of Use:

- Hyper- excitability, restlessness, anxiety
- Dilated pupils
- Profuse sweating
- Rapid respiration
- Difficulty in focusing eyes

Other Effects:

- Impaired driving ability
- Loss of appetite
- Headaches/dizziness
- Confusion
- Panic
- Talkativeness
- Inability to concentrate
- Short-term insomnia
- Paranoid thoughts
- Hallucinations

Health Effects:

- Heartbeat disturbances or heart damage cause by severe constriction of capillary blood vessels
- Increased blood pressure
- Convulsions
- Coma
- Brain damage resulting in speech disturbances
- High doses may cause toxic psychosis resembling Schizophrenia
- Long-term users often have acne resembling measles, trouble with their teeth, gums and nails, and dry, dull hair.

How Amphetamines And Methamphetamines Impair Functions Needed For Work:

They chemically alter the brain and gross motor functioning of the body, having a direct impact on the complex system of critical thinking skills and reflexes that allow people to drive safely and conscientiously.

Fact:

- ✓ People with a history of sustained low-dose use quite often become dependent and believe they need to take the drug to “get by.” These users

frequently keep taking amphetamines to avoid the “down” mood they experience when the “high” wears off.

Opiates

Narcotics, including heroin, morphine, codeine, and many synthetic drugs used to alleviate pain, depress body functions and reactions

In large doses, opiates cause a strong euphoric feeling.

Common street names are: horse, morpho, china, M, brown sugar, Harry and dope.

Sometimes narcotics founding medicines are abused. This includes pain relievers containing opium and cough syrups containing codeine. Heroin is illegal and cannot even be obtained with a physician’s prescription. Most medical problems associated with the use of opiates are caused by uncertain dosages, use of unsterile needles, contamination of the drug, or from combining a narcotic with other drugs.

Signs and symptoms of Use:

- Mood changes
- Impaired mental function and alertness
- Impaired vision
- Constricted pupils
- Impaired coordination

Other Effects

- Impaired driving ability_____
- Drowsiness followed by sleep_____
- Decreased physical activity_____
- Sleeplessness and drug craving
- Depression and apathy
- Constipation
- Nausea and vomiting

Health Effects:

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

How Opiates impair Functions needed For Work:

Opiates chemically alter the brain and gross motor functioning of the body, having a direct impact on the complex system of critical thinking skills and reflexes that allow

people to drive safely and conscientiously.

Fact:

- ✓ Heroin, also called “junk” or “smack,” accounts for 90 % of the narcotic abuse in the United States.

Phencyclidine (PCP)

PCP acts as both a depressant and a hallucinogen, and sometimes as a stimulant.

Also called angel dust, rocket fuel, embalming fluid and killer weed.

PCP was developed as a surgical anesthetic in the late 1950s. Later, due to its unusual side effects in humans, it was restricted to use as a veterinary anesthetic and tranquilizer. Today it has no lawful use and is no longer legally manufactured. It is abused largely for its variety of mood-altering effects.

PCP scrambles the brain’s internal stimuli and alters how users see and deal with their environment. Routine activities like driving and walking become very difficult.

A low dose produces sedation and euphoric mood changes. The mood can rapidly from sedation to excitation and agitation. Increased doses produce an excited, confused state including any of the following: muscle rigidity, loss of concentration and memory, visual disturbances, delirium, feelings of isolation, and convulsions.

Signs and Symptoms of Use:

- Impaired driving ability
- Impaired coordination
- Thick, slurred speech
- Severe confusion and agitation
- Muscle rigidity
- Profuse sweating

Other Effects:

- Loss of concentration and memory
- Extreme mood shift
- Nystagmus (jerky, involuntary eye movements)
- Rapid heartbeat
- Dizziness
- Convulsions
- Memory loss

Health Effects:

- The potential for accidents and overdose emergencies is high due to the extreme mental effects combined with the anesthetic effect on the body.
- PCP becomes more potent in combination with other depressant drugs, including alcohol, increasing the likelihood of an overdose reaction.

How PCP Impairs Functions Needed For Work:

PCP chemically alters the brain and gross motor functioning of the body, having a direct impact on the complex system of critical thinking skills and reflexes that allow people to drive safely and conscientiously. PCP also causes severe disorientation.

Facts:

- ✓ PCP abuse is less common today than in the past.
- ✓ There are four phases to PCP use: toxicity (which may be accompanied by convulsions, combativeness, catatonia and even coma), toxic psychosis (including visual delusions and paranoia), schizophrenia and depression.