

TIEC, Inc.

DRUG, ALCOHOL, AND CONTRABAND POLICY

Effective Date: 04-13-15

Approved By:

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Vice President of HSE

For the purpose of this policy “company” shall refer to: **TIEC, Inc.**

Contents

DRUG, ALCOHOL, AND CONTRABAND POLICY	1
1) PURPOSE	1
2) DEFINITIONS	3
a) Company Personnel:	3
b) Property or Customers Property:	3
c) Prohibited Substances:	3
d) Reasonable Suspicion:	3
e) Under the Influence:	4
3) PROHIBITIONS	4
4) ROLES AND RESPONSIBILITIES	4
a) Designated Employee Representative (DER):	4
b) Medical Review Officer (MRO):	5
5) SEARCHES AND INSPECTIONS	5
6) TESTING REQUIREMENTS	6
a) Pre-Access Testing	6
b) Post-Incident Testing	6
c) Reasonable Suspicion Testing	7
d) Random Testing	8
e) Wall-to-Wall Testing	8
7) TESTING PROTOCOL	9
a) Laboratory:	9
b) Collection Personnel:	9
c) Alcohol:	10
8) NON-COMPLIANCE	10
9) SUBSTANCE ABUSE AWARENESS	11
10) SPECIAL PROVISIONS - CUSTOMER-APPROVED CONSORTIUM	11
11) APPLICABLE LAWS	11
12) SUPERVISOR TRAINING	11
13) AUDIT	11
ATTACHMENT A -1	13
URINE NON-DOT DRUG AND ALCOHOL TESTING PROTOCOL:	13
ATTACHMENT A -2	14
HAIR FOLLICLE DRUG TESTING PROTOCOL:	14
ATTACHMENT B	15
ACKNOWLEDGEMENT OF DRUG AND ALCOHOL CONTRABAND POLICY RECEIPT	15
ATTACHMENT C	16
1. SUPERVISOR TRAINING	16
2. EMPLOYEE EDUCATION	16
ATTACHMENT D	17
SUPERVISOR DRUG AND/OR ALCOHOL CHECKLIST	17

TIEC, Inc.

1) PURPOSE

To ensure a safe, healthy, and productive work environment for the employees of the company, customers, and others on company or customer property. To protect company and customer property and assets, ensure efficient operations, and meet any specific requirements of customers. Company shall enforce this drug, alcohol, and contraband policy in a fashion consistent with the laws of the states in which the company employees' are employed.

2) DEFINITIONS

a) **Company Personnel:**

All company employees, agents, subcontractors or subcontractors' employees performing field operations work on company or customer property. This includes temporary and part-time personnel.

b) **Property or Customers Property:**

All real or tangible personal property, including facilities, buildings, vehicles, products and equipment, either owned or controlled by the company or its customers.

c) **Prohibited Substances:**

- i) Illicit or un-prescribed drugs, controlled substances and mood or mind-altering substances (for example: any synthetic derivative/product that produces a marijuana-type high and any herbal products not intended for human consumption);
- ii) Prescribed drugs used in a manner inconsistent with the prescription;
- iii) Alcoholic beverages;
- iv) Medical Marijuana/Recreational Marijuana – The use of marijuana for medical or recreational purposes, even if permitted by state law, regulation or ordinance, will not be considered an acceptable explanation for a confirmed positive laboratory report for marijuana and will be reported by the Medical Review Officer (MRO) as a verified positive drug test for marijuana. The company will treat marijuana like they would alcohol; they are not required to tolerate individuals being under the influence while at work, or on customer property. The company will not permit or accommodate the use, consumption, possession, transfer, display, transportation, sale or growing of marijuana in the workplace.

d) **Reasonable Suspicion:**

A belief based on objective and articulable facts sufficient to lead a supervisor to suspect use of prohibited substances.

For the purposes of this section a *supervisor* is a company employee acting in an official supervisory capacity who has successfully completed drug and alcohol supervisor training as outlined in this policy.

e) **Under the Influence:**

- i) The presence of a prohibited substance or metabolites of a prohibited substance in body fluids above the cut-off level established by company's policy or other commonly accepted cut-off level;
- ii) The presence of a prohibited substance that affects an individual in any detectable manner. The symptoms of influence may be, but are not limited to, slurred speech or difficulty in maintaining balance.

3) PROHIBITIONS

Unless specifically authorized in writing by the company and its customers, TIEC, Inc. policy shall prohibit company personnel from the following:

- a) Using, possessing, selling, manufacturing, distributing, concealing or transporting on company or customer property any of the following items:
 - i) Any prohibited substance;
 - ii) Contraband, including firearms, ammunition, explosives, and weapons (except where in violation of state law);
 - iii) Illicit drug equipment or paraphernalia.
- b) Possessing or using prescription drugs or over-the-counter medication that may cause impairment, except when all of the following conditions have been met, while on company property (unless otherwise provided for under the American's with Disabilities Act):
 - i) Prescription drugs have been prescribed by a licensed physician for the person in possession of the drugs, and;
 - ii) The prescription is not expired and was filled by a licensed pharmacist for the person possessing the drugs, and;
 - iii) The individual notifies their supervisor that they will be in possession of, or using, impairment-causing prescription drugs or over-the-counter medication and appropriate steps are taken to accommodate the possibility of impairment, including but not limited to, removal from work for the period of possible impairment.
Note: Discussions between the individual and their supervisor must be limited to the individual's ability to perform essential job functions.
- c) Being under the influence of prohibited substances while performing any work for the company or their customers.
- d) Switching, diluting or adulterating any urine, blood or other sample used for testing.
- e) Performing work for the company or their customers when an individual has tested positive or refused testing in any employment-related test.

4) ROLES AND RESPONSIBILITIES

a) **Designated Employee Representative (DER):**

Designated Employee Representative (DER) should be an employee within the Health, Safety, Security and Environment (HSSE) department who is authorized to receive test

results and other communications, take immediate action to remove workers from a company or customer's jobsite and make required decisions in the testing and evaluation process. Specific roles and responsibilities assigned to a DER should include, at a minimum, the following:

- i) Select and contract with a laboratory or service provider, based on pre-determined criteria, to help implement all or part of the Drug, Alcohol and Contraband Program.
- ii) Receive general correspondence, newsletter, and announcements from laboratories and service providers.
- iii) Coordinate reasonable suspicion training for all supervisors and ensure they have signed a document acknowledging completion of the training.
- iv) Schedule and coordinate drug and alcohol testing activities.
- v) Maintain confidential files for the Drug, Alcohol and Contraband Program.
- vi) Monitor non-negative, positive, or invalid test results and results supporting that the specimens have been adulterated or substituted to determine appropriate actions.

b) **Medical Review Officer (MRO):**

An MRO is a person who is a licensed physician who is knowledgeable about substance abuse problems, medical and legal issues, and clinical and occupational medicine. An MRO is responsible for receiving and reviewing laboratory test results and evaluating medical explanations for certain drug test results. Roles and responsibilities assigned to an MRO typically include the following:

- i) Serve as an independent party to oversee the accuracy and integrity of the company Drug and Alcohol Testing process (DOT and NON-DOT).
- ii) Review appropriate copies of chain-of-custody forms to determine if problems exist
- iii) Conduct verification interviews with workers for non-negative drug test results or results indicating that the specimen has been adulterated or substituted.
- iv) Interpret drug test results to determine if a legitimate medical explanation exists for a laboratory's confirmed positive, an invalid test result or adulterated or substituted specimen.
- v) Immediately report verified positive or invalid results, results requiring immediate collection under direct observation, adulterated or substituted specimens, and other refusals to test to appropriate personnel.
- vi) Report written drug test results in a confidential manner to appropriate personnel authorized to receive such information

5) SEARCHES AND INSPECTIONS

Searches and inspections may be:

- a) Conducted on company or customer property, at any time, by company or customer supervisors or authorized search and inspection specialists including scent trained animals.

- b) Unannounced searches or inspections of company or customer personnel and their property, which may include, but is not limited to: wallets, purses, lockers, baggage, offices, desks, toolboxes, clothing and vehicles.
- c) Employees have the right to refuse being searched or having their personal effects searched or to cooperate in the requested tests; however, refusal to allow such searches or to cooperate in such lawfully permitted searches by any employee will be cause for disciplinary action, up to and including immediate termination.

6) TESTING REQUIREMENTS

Drug and alcohol testing must meet the requirements of customers:

a) **Pre-Access Testing**

- i) All company personnel are subject to customer pre-access testing which may mandate that the employee(s) receive a negative result on a drug and/or alcohol test within a customer's specific required amount of time preceding the employee's first access to customer property. Note: Some customers may waive this requirement if employee(s) are currently active in a random testing pool. Annual drug and alcohol testing is also required by specific customers. Upon customer's request, company shall so certify in writing.
- ii) Company will provide no information to customers identifying individuals who have positive pre-access tests.

b) **Post-Incident Testing**

- i) Company shall remove individuals from customer property and surrender their site credentials to the customers IF it is determined by the company or customers:
 - (1) from the best information available, immediately following a work-related incident
 - (2) the performance of one or more company personnel contributed to the incident or cannot be completely discounted as a contributing factor to the incident
- ii) An individual so removed will be allowed to return to work on customer property only after:
 - (1) company conducts alcohol and drug testing on the individual as soon as possible following the individual's removal from the site, and
 - (2) the company certifies all of the following in writing:
 - (a) the test identification number
 - (b) the individual's 4 digit identifying number
 - (c) the test date and time, and
 - (d) a negative test result
 - (3) On the written certification the company will include a consent signed by the individual permitting disclosure to customers of the test result.
- iii) If alcohol testing occurs more than two (2) hours from the time of the incident, a written reason for the delay may be required by customers.

- iv) If drug testing cannot be completed within 32 hours, a written reason why the testing could not be completed may be required by customers.
- v) If an employee who is subject to post-accident testing is conscious, able to urinate normally (in the opinion of a medical professional) and refuses to be tested, that employee shall be removed from their position and shall be subject to discipline.

For the purpose of this part "incident" means:

(1) An actual event that caused:

- (a) Injury requiring medical treatment beyond first aid
- (b) Environmental impact beyond a small immediate area to:
 - (i) soil/ground-water
 - (ii) marine life, or
 - (iii) impact to nearby habitat, wildlife, livestock, crops or fisheries
- (c) Process Safety events as determined by the responsible company or customer Supervisor
- (d) Property damage as determined by the responsible company or customer Supervisor
- (e) Motor vehicle accident (the operator of the vehicle or other individuals where there is evidence to support that they may have contributed to the incident)

Or

- (f) An event that had potential for
 - (i) Serious injury/fatality
 - (ii) Environmental impact beyond Company or Customer Premises
 - (iii) Property damage as determined by the responsible Company or Customer Supervisor

(2) The Company may decide not to conduct a post-accident drug and/or alcohol test if:

- (a) The best information immediately available after the accident indicates that the employee's performance could not have contributed to the accident, or
- (b) Because of the time between the performance and the accident, it is not likely that a drug and/or alcohol test would reveal whether performance was affected by drug and/or alcohol use.

c) Reasonable Suspicion Testing

- i) Upon reasonable suspicion of company or customers that company personnel is under the influence of a prohibited substance while on company or customer property (refer to Attachment D as a guide to assess whether there is reasonable suspicion for requesting a test), company shall remove the individual(s) from customer property and surrender their site credentials to the customers.
- ii) An individual removed from company or customer property for Reasonable Suspicion will be allowed to return to work on company or customer property only after:

- (1) Company conducts alcohol and drug testing on the individual as soon as possible following the individual's removal from the site, and
- (2) Company certifies all of the following in writing:
 - (a) the test identification number
 - (b) the individual's 4 digit identifying number
 - (c) the test date and time, and
 - (d) a negative test result
- (3) On that written certification the company will include a consent signed by the individual permitting disclosure to customers of the test result.
(Attachment D: example check list)

d) Random Testing

If specific customers require random drug and/or alcohol testing then the following guidelines will be followed:

- i) Unless otherwise specified by a specific customer, company personnel shall be subject to:
 - (1) Un-announced random testing
 - (2) Performed on a quarterly basis (at a minimum)
 - (3) That yields a compliance of an annualized rate as determined by the customer operator
- ii) If required by the specific customer, a breath alcohol test will be given at the same time as the drug test.
- iii) Upon notification of being selected for a drug and/or alcohol test, company personnel must report to the collection site within 30 minutes, plus travel time.
- iv) Failure to report to the collection site, refusal to test, or adulterating a specimen is considered the same as a positive test and the individual could be denied access to company or customer premises.

e) Wall-to-Wall Testing

Company personnel may be subject to:

- i. Un-announced en masse drug and alcohol testing.
- ii. Such tests are scheduled at the sole discretion of the customers. This includes the determination of the scope and the timing of such testing.
- iii. Such a group may include all members of the named group on site at the determined time or time period and shall not be determined in terms of named individuals.
- iv. Such groups may include, but are not limited to, all company personnel on site, or by shift, by crew, by location, by craft, by company or by another similar category, including a random selection based on site access records.

7) TESTING PROTOCOL

a) **Laboratory:**

Laboratories selected for employee drug testing must be evaluated against the following criteria to help ensure that results obtained from these laboratories will be reliable.

- i) Laboratories must be certified according to local laws and regulations or industry practices for providing accurate and reliable services.
 - (1) Urine samples must be analyzed by a laboratory that has been certified by the Department of Health and Human Services under the National Laboratory Certification Program or Substance Abuse and Mental Health Services Administration (SAMHSA)
 - (2) Hair follicle specimens must be analyzed by a Clinical Laboratory Improvement Program (CLIP) accredited laboratory.

Note: some customers will not allow hair testing as a means to meet their requirements.
- ii) Special handling and chain-of-custody procedures must:
 - (1) be written and available, and
 - (2) discuss inspecting, documenting, storing, and transporting specimens
- iii) Laboratory management and staff must have appropriate education, experience, and qualifications.
- iv) Quality-Control procedures must be:
 - (1) written and available, and
 - (2) include testing blank and spiked samples for verification
- v) Laboratories must be able to provide technical assistance and advice concerning drug and alcohol testing.
- vi) Sample supplies appropriate to the type of specimen being collected or the test run must be readily available from the laboratory.
- vii) Laboratories must be able to generate confidential and accurate reports.

b) **Collection Personnel:**

- i) Urine specimens must be collected by personnel who have been trained and certified according to the SAMHSA/DHHS guidelines which includes:
 - (1) basic information,
 - (2) qualification training,
 - (3) initial proficiency demonstration,
 - (4) refresher training, and
 - (5) error correction training
- ii) Hair follicle specimens must be collected by personnel that have documentation supporting that they have been trained in:
 - (1) equipment and procedures used in gathering and collecting hair follicle specimens

- (2) preparing chain-of-custody forms
 - (3) preparing the specimen for shipment, and
 - (4) shipping the sample to an approved laboratory
- Note: Hair testing will only be utilized for customer compliance when the customer has authorized this testing method

iii) Breath/Saliva testing shall be conducted utilizing devices approved by the National Highway Traffic Safety Administration or equivalent. All collection and testing procedures shall mirror as closely as possible to US DOT (Department of Transportation) protocols.

c) **Alcohol:**

Personnel that have a blood alcohol concentration (BAC) level:

- i) Personnel that have a blood alcohol concentration (BAC) level equal to or greater than 0.02 during pre-employment confirmation testing are considered to be under the influence of alcohol and will not be eligible to perform work for certain customers.
- ii) Personnel that have a blood alcohol concentration (BAC) level equal to 0.02 and less than 0.04 must be removed from performing safety or security-sensitive activities until the BAC level is below 0.02
- iii) Personnel that have a blood alcohol concentration (BAC) level equal to or greater than 0.04 have violated the Drug, Alcohol and Contraband Program and are subject to disciplinary action up to and including termination.

8) NON-COMPLIANCE

Company personnel will be found to be in non-compliance if they:

- Violate any portion of this policy or the customer's policy, or
- Refuse to cooperate with the searches and tests included in this policy or the customer's policy

If found to be in non-compliance:

- The company personnel found to be in non-compliance shall be permanently removed by the company from customer property and from performing work for the customer.
- Company must immediately notify customers that the individual has become disqualified from performing work for them.
- Company will immediately review with customers the nature of the work previously performed by the individual.
- At customer's request, company shall, at its sole cost and risk, inspect all work in which the individual may have participated and submit a written report to the customer that documents the inspection and any findings and the actions taken to assure all deficiencies have been corrected.

9) SUBSTANCE ABUSE AWARENESS

Company warrants that company personnel performing work have each been fully informed of the requirements of this policy and customer's policy. Before beginning work on company or customer property, all company personnel must sign a written certification that they have been so informed and agree to be bound by the requirements. See Attachment B and Attachment C.

10) SPECIAL PROVISIONS - CUSTOMER-APPROVED CONSORTIUM

The following will be recognized as satisfying some customer's pre-access and random testing requirements:

- Enrollment in and maintenance of an "active status" in a customer-approved consortium that:
 - Requires pre-enrollment testing and
 - Continuously subjects active members to random drug and/or alcohol testing at an annual effective rate of at least 50% (unless otherwise specified by DOT)

11) APPLICABLE LAWS

Company shall comply with all applicable Federal, State, and local drug and alcohol related laws and regulations applicable to company personnel (e.g., DOT regulations, Department of Defense (DOD) Drug-Free Workplace Policy, Drug-Free Workplace Act of 1988, etc.).

12) SUPERVISOR TRAINING

Company shall provide training regarding this policy to all affected company personnel, to include recognition of performance indicators of probable drug and/or alcohol use and on its effects and consequences to personal health, safety and the workplace. Each supervisor responsible for determining whether an employee must be tested based on reasonable suspicion shall receive at least one 60-minute training session on the specific, contemporaneous, physical, behavioral, and performance indicators of probable drug and alcohol use. Records of trained individuals (including name and date) must be maintained by the company and available to customers upon request. See Attachment C

13) AUDIT

- a) Company shall keep records required by this policy available for inspection by customers during the period that the company is performing work for customers and for a period of (3) years after company ceases to perform work for that customer.
 - i) Such records include but are not limited to:
 - (1) laboratory copies of test results
 - (2) chain of custody forms
 - (3) copies of signed acknowledge/consent forms from this policy
 - ii) Records can be stored electronically as long as they are accessible upon request.

- b) At their discretion, customers may perform unannounced audits of the company's alcohol and drug program to verify that the company's policy and its enforcement comply with these guidelines.
- c) At customer's request the company shall:
 - i) Provide separate lists of company personnel (including name and 4 digit identifying number) who were eligible for customers work on a date specified by customers
 - ii) Provide customers with the following information on each alcohol and drug test conducted for each company personnel identified by customers from those lists:
 - (1) Date of and type of test (e.g. random, pre-access) and;
 - (2) Laboratory chain-of-custody identification number and/or test number
- d) Upon submission by customers of a list, or lists, of 4 digit identifying numbers, chain-of-custody ID numbers and test dates, the company shall obtain an agreement with any consortium, laboratory, or Medical Review Officer (MRO) providing drug and/or alcohol testing services for the company to ensure:
 - i) The consortium/laboratory will verify that the tests were conducted as represented, and
 - ii) The consortium/laboratory or company MRO will provide a sworn statement attesting whether or not each of the tests identified by the customer can be confirmed as negative

ATTACHMENT A -1

URINE NON-DOT DRUG AND ALCOHOL TESTING PROTOCOL:

*****Drug** testing should be a urine test that is collected by a certified collector and the specimen sent to a SAMHSA certified laboratory for analysis. **Quick Screen/Rapid Test devices are not acceptable unless prior approval has been received, in writing, from your customer and a copy of that approval has been submitted to NCMS.**

*****Alcohol** testing should be a breath test using a device that is listed on the DOT conforming products list. If a screening device (saliva) is utilized it must be listed on the DOT conforming products list. If the result is positive you will need to follow the waiting period guidelines of 15 minutes and then follow up with a confirmation test using a confirmation testing device. It is imperative that you follow these testing guidelines or your employees could be denied access or working for a customer. (If there are exemptions from these testing guidelines from your customer then a copy of that exemption should be submitted to NCMS.)

COLLECTION FACILITY	NAME	
	ADDRESS	
	PHONE NUMBER	
	CONTACT PERSON	

TESTING LABORATORY	NAME	
	ADDRESS	
	PHONE NUMBER	
	NATIONALLY CERTIFIED? (YES/NO)	
MRO (Medical Review Officer)	MRO NAME	
	MRO PHONE	

SUBSTANCE	SCREEN LEVEL	CONFIRMATION LEVEL
COCAINE		
PHENCYCLIDINE (PCP)		
MARIJUANA (THC)		
OPIATES 6-ACETYLMORPHINE		
AMPHETAMINES/METHAMPHETAMINES MDMA MDA MDEA		
BARBITURATES		
BENZODIAZEPINES		
METHADONE		
PROPOXYPHENE		
ENTER ADDITIONAL DRUGS HERE		

ALCOHOL TESTING METHOD USED:	SCREEN LEVEL	CONFIRMATION LEVEL

ATTACHMENT A -2

HAIR FOLLICLE DRUG TESTING PROTOCOL:

***If **Hair Follicle** testing is an acceptable testing method per the customer you are working for then the use of a laboratory accredited under the Clinical Laboratory Improvement Program (CLIP) is required. Collections of the hair follicle should be performed by personnel with documentation showing they have training on collection techniques, transportation procedures and completion of chain of custody forms.

COLLECTION FACILITY	NAME	
	ADDRESS	
	PHONE NUMBER	
	CONTACT PERSON	

TESTING LABORATORY	NAME	
	ADDRESS	
	PHONE NUMBER	
	CLIP ACCREDITED? (YES/NO)	
MRO (Medical Review Officer)	MRO NAME	
	MRO PHONE	

SUBSTANCE	SCREEN LEVEL (pg/mg)	CONFIRMATION LEVEL (pg/mg)
COCAINE		
PHENCYCLIDINE (PCP)		
MARIJUANA (THC)		
OPIATES 6-ACETYLMORPHINE		
AMPHETAMINES/METHAMPHETAMINES MDMA MDA MDEA		
BARBITURATES		
BENZODIAZEPINES		
METHADONE		
PROPOXYPHENE		
ENTER ADDITIONAL DRUGS HERE		

ATTACHMENT B

Acknowledgement of drug and alcohol contraband policy receipt

I hereby acknowledge that I have been provided a copy of the **TIEC, Inc.** drug/alcohol policy requirements. I understand that disciplinary action up to and including termination, will result if I violate this policy.

Employee Signature

Date

Employee Name (Typed or Printed)

Employee ID (4 digit identifier)

Consent and authorization for disclosure to customers of TIEC, Inc. for alcohol and drug test results and related information

I hereby consent to disclosure by **TIEC, Inc.** and its agents, including, but not limited to, any collecting and testing agencies, of the test results identified above and any related information to customers of **TIEC, Inc.** and its authorized agents, assigns, or representatives.

Employee Signature

Date

Employee Name (Typed or Printed)

Employee ID (4 digit identifier)

*** This consent form is for release of NON-DOT tests. Please follow DOT regulations if you choose to submit DOT test results in place of non-dot in order to meet the requirements of a specific client***

ATTACHMENT C

1. SUPERVISOR TRAINING

Managers and supervisors must be adequately trained in the topics listed below to ensure they effectively communicate and implement the Drug, Alcohol and Contraband Program.

- Rationale for having the Drug, Alcohol and Contraband Program
- Requirements contained in the Program
- Procedures for implementing the Program
- Drug and alcohol abuse terms and symptoms
- Reasonable suspicion that an employee is under the influence of drugs or alcohol
- Documentation of potential drug or alcohol abuse problems
- Protecting employee confidentiality

Training on the recognition of performance indicators of probable drug and/or alcohol use and on its effects and consequences to personal health, safety and the workplace shall be included. It is required that each supervisor who will determine whether an employee must be tested based on reasonable suspicion, receive at least one 60-minute training session on the specific, contemporaneous, physical, behavioral and performance indicators of probable drug and alcohol use. Records of individuals trained (including name and date) must be maintained by the company and available to customers upon request.

(see Attachment D: Supervisor Drug and/or Alcohol Checklist)

2. EMPLOYEE EDUCATION

Employee education opportunities must be developed to communicate the Drug and Alcohol Testing Program. Education and communication must include, but are not limited to the following topics:

- Requirements contained the Drug, Alcohol and Contraband Program
- Types and effects of drugs, including prescription and over-the-counter medication, and alcohol on employees and the ability to perform their work safely.
- Ways to assess whether employees may have drug and alcohol dependency problems or may be under the influence of drugs or alcohol.
- Requirement to inform supervisors of reasonable suspicion of an employee being under the influence of drugs or alcohol
- Disciplinary actions for employees failing to comply with the Drug, Alcohol and Contraband Program.

**ATTACHMENT D
SUPERVISOR DRUG AND/OR ALCOHOL CHECKLIST**

(Example Form: Do not send this form to NCMS. This should be kept for your records only)

Supervisor Drug and/or Alcohol Checklist		
Question	Yes	No
1. Smell of alcohol on breath of person?	<input type="checkbox"/>	<input type="checkbox"/>
2. Speech:		
• Slurred?	<input type="checkbox"/>	<input type="checkbox"/>
• Confused?	<input type="checkbox"/>	<input type="checkbox"/>
• Fragmented?	<input type="checkbox"/>	<input type="checkbox"/>
• Slow?	<input type="checkbox"/>	<input type="checkbox"/>
• Unusually soft?	<input type="checkbox"/>	<input type="checkbox"/>
• Unusually loud?	<input type="checkbox"/>	<input type="checkbox"/>
3. Disorientation – Is the contractor confused about:		
• Where he or she is?	<input type="checkbox"/>	<input type="checkbox"/>
• What day it is?	<input type="checkbox"/>	<input type="checkbox"/>
• What time it is?	<input type="checkbox"/>	<input type="checkbox"/>
4. Apparent inability to focus on work?	<input type="checkbox"/>	<input type="checkbox"/>
5. Unusual or unexplained resistance to authority or refusal to follow reasonable directions?	<input type="checkbox"/>	<input type="checkbox"/>
6. Lack of motor coordination?	<input type="checkbox"/>	<input type="checkbox"/>
7. Mood:		
• Belligerent?	<input type="checkbox"/>	<input type="checkbox"/>
• Moody?	<input type="checkbox"/>	<input type="checkbox"/>
• Ecstatic?	<input type="checkbox"/>	<input type="checkbox"/>
• More nervous than usual?	<input type="checkbox"/>	<input type="checkbox"/>
• Giddy?	<input type="checkbox"/>	<input type="checkbox"/>
• Talkative?	<input type="checkbox"/>	<input type="checkbox"/>
• Drowsy?	<input type="checkbox"/>	<input type="checkbox"/>
8. Skin color:		
• Pale?	<input type="checkbox"/>	<input type="checkbox"/>
• Flushed?	<input type="checkbox"/>	<input type="checkbox"/>
9. Excessive perspiration?	<input type="checkbox"/>	<input type="checkbox"/>
10. Excessive trips to the restroom?	<input type="checkbox"/>	<input type="checkbox"/>
11. Bloodshot eyes?	<input type="checkbox"/>	<input type="checkbox"/>
12. Dilated pupils?	<input type="checkbox"/>	<input type="checkbox"/>
13. Pinpoint pupils?	<input type="checkbox"/>	<input type="checkbox"/>
14. Traces of alcohol in containers?	<input type="checkbox"/>	<input type="checkbox"/>
15. Confession by contractor that he/she was drinking alcohol or ingesting drugs?	<input type="checkbox"/>	<input type="checkbox"/>
16. Confirmation by other contractors or employees?	<input type="checkbox"/>	<input type="checkbox"/>
17. Presence of substances with the appearance of drugs?	<input type="checkbox"/>	<input type="checkbox"/>

Supervisor Drug and/or Alcohol Checklist		
Question	Yes	No
18. Presence of drug paraphernalia?	<input type="checkbox"/>	<input type="checkbox"/>
19. Smell of marijuana?	<input type="checkbox"/>	<input type="checkbox"/>
20. Congregation of contractors in remote areas of the companies, facilities, or in areas not usually frequented by contractors?	<input type="checkbox"/>	<input type="checkbox"/>
21. Weariness, fatigue, or exhaustion?	<input type="checkbox"/>	<input type="checkbox"/>
22. Deteriorating physical appearance?	<input type="checkbox"/>	<input type="checkbox"/>
23. Yawning excessively?	<input type="checkbox"/>	<input type="checkbox"/>
24. Blank stare or expression?	<input type="checkbox"/>	<input type="checkbox"/>
25. Sudden and/or unpredictable change in energy level?	<input type="checkbox"/>	<input type="checkbox"/>
26. Unusually energetic?	<input type="checkbox"/>	<input type="checkbox"/>
27. Shaking or trembling of hands?	<input type="checkbox"/>	<input type="checkbox"/>
28. Sunglasses worn at inappropriate times?	<input type="checkbox"/>	<input type="checkbox"/>
29. Changes in appearance after lunch break?	<input type="checkbox"/>	<input type="checkbox"/>
30. Withdrawal and avoidance of peers?	<input type="checkbox"/>	<input type="checkbox"/>
31. Complaints from co-workers?	<input type="checkbox"/>	<input type="checkbox"/>
32. Excessive absenteeism, especially Mondays, Fridays and days before or after holidays or paydays?	<input type="checkbox"/>	<input type="checkbox"/>
33. Unusually high incidence of colds, flu, upset stomach, and/or headaches?	<input type="checkbox"/>	<input type="checkbox"/>
34. Unauthorized or unscheduled absences?	<input type="checkbox"/>	<input type="checkbox"/>
35. Breathing or swallowing difficulties?	<input type="checkbox"/>	<input type="checkbox"/>
36. Unusual sneezing / nasal congestion?	<input type="checkbox"/>	<input type="checkbox"/>
37. Needle marks on arms?	<input type="checkbox"/>	<input type="checkbox"/>
38. Prolonged lunch hours?	<input type="checkbox"/>	<input type="checkbox"/>
39. Tardiness?	<input type="checkbox"/>	<input type="checkbox"/>
40. Unexplained departures from work or disappearances from the job area?	<input type="checkbox"/>	<input type="checkbox"/>
41. More than average number of job-related mistakes injuries or accidents?	<input type="checkbox"/>	<input type="checkbox"/>
42. Decrease in efficiency or productivity?	<input type="checkbox"/>	<input type="checkbox"/>
43. Careless operation of equipment?	<input type="checkbox"/>	<input type="checkbox"/>
44. Careless performance of job?	<input type="checkbox"/>	<input type="checkbox"/>