Memorandum

TO: Personnel Rules and Procedures Binder Holders

FROM: Jeffrey C. Kolin, City Manager

SUBJECT: ADMINISTRATIVE ORDER 96-025
ALCOHOL & DRUG TESTING REQUIREMENTS FOR COMMERCIAL MOTOR VEHICLE DRIVERS

September 3, 1996

Attached for insertion in your Personnel Rules and Procedures binder is the referenced. As with past Administrative Orders, it should be placed in the yellow-tabbed section labeled "Departmental Policies".

This policy is issued to provide guidelines and procedures for administering a federally mandated drug and alcohol testing program. The policy impacts our employees with commercial drivers licenses who operate specific commercial motor vehicles and occupy safety sensitive positions. This issuance follows discussions held with affected employees who have been oriented as to the regulation's requirements.

It is effective immediately.

JEFFREY C. KOLIN, CITY MANAGER

Attachment: Administrative Order 96-025 and Guidelines

Distribution: Binder Holders 1-7,9-17,22, 27-30, 33-35, 37,41,42,45,46
Subject: Alcohol & Drug Testing Requirements for Commercial Motor Vehicle Drivers

Purpose: Ensure the continued safe operation of vehicles by commercial drivers conducting City business.

Policy: Drivers having a commercial driver's license (CDL) who operate specific commercial motor vehicles as defined by the Omnibus Transportation Employee Testing Act and occupy safety-sensitive positions be subject to controlled substance and alcohol testing rules. Any questions regarding these new regulations should be referred to the Human Resources Department.

In order to provide greater statistical reliability, the regulation provides for the formation of a consortium. The City has joined a consortium made up of the members of Contra Costa County Municipal Risk Management Insurance Authority. The consortium has contracted with a nationally known and respected drug and alcohol testing organization, to administer this program.

Procedures: A detailed procedure manual outlining the areas listed below has been established and distributed to those employees directly affected by this policy. The procedures manual addresses in detail the following areas:

1. Definitions: Definitions of terms related to the Omnibus Transportation Employee Testing Act such as: alcohol, alcohol use, breath alcohol technician, commercial motor vehicle, confirmation test, driver, employee, employer, evidential breath testing device, medical review officer, performing a safety sensitive function, reasonable suspicion, refusal to submit (to an alcohol or controlled substance test), safety sensitive function, screening test, and substance abuse professional.

2. Prohibited Activity: Outlines alcohol and controlled substance-related activities prohibited and the resulting disciplinary actions which may be taken by the city.

3. Types of Testing: Included in this section are the types of alcohol and substance abuse testing permitted under this policy. They include: Pre-employment controlled substance testing-commercial drivers; random testing; random selection process; reasonable suspicion testing; post accident alcohol and controlled substances testing; positive alcohol/controlled substance test; mandatory drug/alcohol rehabilitation program; return to duty testing; and follow-up testing.

4. Procedure: Establishes the method of testing and the levels for determining whether an employee is under the influence. The procedures address alcohol and controlled substance testing.
5. **Consequences to employees engaging in conduct prohibited by the Federal Highway Administration’s Drug Use and Alcohol Misuse Rules:** Employees who are known to have engaged in prohibited behavior with regard to alcohol misuse or use of controlled substances are subject to disciplinary action up to and including termination. This section provides details into rehabilitation/disciplinary action which may be taken by the city.

6. **Training:** Staff training shall include informational materials as well as mandatory supervisory training. Training shall cover the physical, behavioral, speech, and performance indicators of probable alcohol misuse and the use of controlled substances, and is to intenced to assist supervisors in making appropriate determinations for reasonable suspicion testing.

7. **Forms:** Details the forms/releases required for new and current employees including: alcohol test consent and release form-current employee; pre-employment verification and release form; post accident log; employee testing log; notice of termination of qualified driver.

8. **Conclusion:** The intent of this policy is to comply with new federal alcohol/substance abuse testing guidelines. Employees occupying positions requiring commercial driver’s licenses and in safety sensitive occupations are subject to this order. In addition, as outlined in Administrative Order 89-011, use of alcohol and drugs during work hours or at the work site is in violation of Personnel Rule 14 and may result in discipline.
CITY OF PITTSBURG

ALCOHOL & DRUG TESTING REQUIREMENTS FOR COMMERCIAL MOTOR VEHICLE DRIVERS GUIDELINES

1. PURPOSE
The purpose of these guidelines is to explain in detail the procedures for implementing Administrative Order No.96-025. In February 1994, the Department of Transportation (DOT) issued its final regulations implementing the Omnibus Transportation Employee Testing Act of 1991. These regulations require that drivers having a commercial driver's license (CDL) who operate commercial motor vehicles as defined in Section 2.4 and occupy safety-sensitive positions be subject to controlled substance and alcohol testing rules. The City must comply with these rules no later than January 1, 1996. Any questions regarding these new regulations should be referred to the Human Resources Department.

In order to provide greater statistical reliability, the regulation provides for the formation of a consortium. The City has joined a consortium made up of the members of Contra Costa County Municipal Risk Management Insurance Authority. The consortium has contracted with a nationally known and respected drug and alcohol testing organization, to administer this program.

2. DEFINITIONS

Following are the definitions of terms related to the Omnibus Transportation Employee Testing Act and referenced in this policy:

2.1 Alcohol - The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol.

2.2 Alcohol Use - The consumption of any beverage, mixture, or preparation, including any medication containing alcohol.

2.3 Breath Alcohol Technician (BAT) - An individual who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing device (EBT).

2.4 Commercial Motor Vehicle - A motor vehicle or combination of motor vehicles which:

2.4.1 has a gross combination weight of 26,001 or more pounds inclusive of a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or

2.4.2 has a gross vehicle weight rating of 26,001 or more pounds; or

2.4.3 is designed to transport 16 or more passengers, including the driver; or

2.4.4 is of any size and is used in the transportation of hazardous materials requiring placards.
2.5 **Confirmation Test** - for alcohol testing means a second test, following a screening test with a result of 0.02 grams or greater of alcohol per 210 liters of breath, that provides quantitative data of alcohol concentration. For controlled substances testing means a second analytical procedure to identify the presence of a specific drug or metabolite which is independent of the screen test and which uses a different technique and chemical principle from that of the screen test in order to ensure reliability and accuracy.

2.6 **Driver** - any person who operates a commercial motor vehicle. For the purposes of pre-employment testing, the term driver includes a person applying to drive a commercial motor vehicle and current City employee transferring into a position which requires driving of a commercial vehicle.

2.7 **Employee** - For the purposes of this section, employee refers to any employee of the City, holding a California commercial driver's license, and occupying or applying for transfer to a position performing safety-sensitive functions as described herein. Those classifications which may require Class A or B California Driver's Licenses and/or hazardous materials or tanker endorsements include, but are not limited, to the following:

- Public Services Supervisor
- Street Maintenance Supervisor
- Maintenance Person III
- Typist Clerk II (Driving Instructor)
- Maintenance Aide
- Equipment Mechanic

2.8 **Employer** - Any person or entity who owns or leases a commercial motor vehicle or assigns persons to operate such a vehicle, including agents, officers, and representatives of the employer.

2.9 **Evidential Breath Testing Device (EBT)** - A device approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and placed on NHTSA's CONFORMING Products List of Evidential Breath Measurement Devices (CPL).

2.10 **Medical Review Officer** - A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by the City's drug testing program or his/her designee who has knowledge of substance abuse disorders and has appropriate medical training to interpret and evaluate an individual's confirmed positive test result together with his or her medical history and any other relevant biomedical information.

2.11 **Performing a Safety Sensitive Function** - Any period in which the driver is actually performing, ready to perform, or immediately able to perform any safety-sensitive functions.
2.12 Reasonable Suspicion - Belief that the driver has violated the alcohol or controlled substances prohibitions, based on objective facts and reasonable inference drawn from those facts, that an employee is under the influence of a drug and/or alcohol. Such facts may include characteristics of the employee’s appearance, behavior, mannerisms, speech, or body odors. Examples include but are not limited to:

2.12.1 Inability to perform work properly.
2.12.2 Behavior is creating a safety hazard.
2.12.3 Difficulties walking or standing, problems with dexterity, or other physical activity impairment.
2.12.4 Impaired ability to speak (slurred, thick speech).
2.12.5 Belligerent or violent behavior or wide mood swings.
2.12.6 Excessive unauthorized absenteeism.
2.12.7 Any conduct which constitutes a significant change from the individual’s usual behavior, or which indicates impairment of sound judgment.
2.12.8 Glazed/fixed stare.
2.12.9 Abnormally dilated or constricted pupils.
2.12.10 Glassy or bloodshot eyes.
2.12.11 Unusual odor of breath or skin.
2.12.12 Nose bleeds and excessive sniffing.
2.12.13 Actual observation of the ingestion or use of alcohol or a drug by an employee.

Reasonable suspicion alcohol tests must be administered within two hours of observation. If not, Supervisor must document in writing why the test was not conducted promptly. No alcohol test based on reasonable suspicion may be given after eight hours from observation.
2.13 Refusal to Submit (to an alcohol or controlled substance test) - A driver 1) fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement for breath testing; 2) fails to provide adequate urine for controlled substances testing without a valid medical explanation after he or she has received notice of the requirement for urine testing; or 3) engages in conduct that clearly obstructs the testing process.

2.14 Safety-Sensitive Function - Any of those on-duty functions as follows:

2.14.1 All time at a terminal, facility, or other property waiting to be dispatched, unless the driver has been relieved from duty by the City.

2.14.2 All time inspecting equipment as required by the Federal Motor Carrier Safety Regulations (FMCSR) or otherwise inspecting, servicing, or conditioning any commercial motor vehicle at any time.

2.14.3 All time spent at the driving controls of a commercial motor vehicle.

2.14.4 All time, other than driving time, spent on or in a commercial motor vehicle.

2.14.5 All time loading or unloading a commercial motor vehicle, supervising or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded.

2.14.6 All time spent performing the driver requirements associated with an accident.

2.14.7 All time repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle.

2.15 Screening Test (initial test) - In alcohol testing this means an analytical procedure to determine whether a driver may have a prohibited concentration of alcohol in his or her system. In controlled substance testing it means an immunoassay screen to eliminate negative urine specimens from further consideration.

2.16 Substance Abuse Professional (SAP) - A licensed physician (medical doctor or doctor of osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.
3. **PROHIBITED ACTIVITY**

The following alcohol and controlled substance-related activities are prohibited and may result in discipline up to and including termination:

3.1 Reporting for duty or remaining on duty to perform safety-sensitive functions while having an alcohol concentration of 0.04 or greater.

3.2 Performing safety-sensitive job duties within four hours of consuming alcohol.

3.3 Being on duty or operating a commercial motor vehicle while the driver possesses alcohol, unless the alcohol is manifested and transported as part of a shipment. This includes the possession of medicines containing alcohol unless the packaging seal is unbroken.

3.4 Using alcohol while performing safety-sensitive functions.

3.5 When required to take a post-accident alcohol test, using alcohol within eight hours following the accident or prior to undergoing a post-accident alcohol test, whichever comes first.

3.6 Refusing to submit to an alcohol or controlled substance test required by pre-employment, post-accident, random, reasonable suspicion or follow-up testing requirements.

3.7 Reporting for duty or remaining on duty, requiring the performance of safety sensitive functions, when the driver uses any controlled substance, except when instructed by a physician who has advised the driver that the substance does not adversely affect the driver’s ability to safely operate a commercial motor vehicle. Use of controlled substances as defined by law must be in accordance with a physician’s authorized prescription.

3.8 Reporting for duty, remaining on duty, or performing a safety-sensitive function if the driver tests positive for controlled substances.

4. **TYPES OF TESTING**

4.1 Pre-Employment Controlled Substance Testing - Commercial Drivers

Prior to the employment of any individual who will occupy a classification designated to perform safety-sensitive functions (as listed in 2 Definitions), and prior to the transfer of any current City employee into a position which performs safety-sensitive functions, that individual must submit to testing for controlled substances.
No candidate for City employment or current City employee involved in a transfer to a position designated to perform safety-sensitive functions as defined in Section 2 above shall be deemed qualified for appointment or transfer unless he/she has received a controlled substance test result from the City’s testing facility with a verified negative result.

4.2 Random Testing

4.2.1 Random alcohol testing shall be administered at a minimum annual rate of 25 percent of the average number of commercial driver positions.

4.2.2 Random controlled substances testing shall be administered at a minimum annual rate of 50 percent of the average number of commercial driver positions.

4.2.3 The City shall ensure that random alcohol and/or controlled substances tests are unannounced and spread reasonably throughout the calendar year. It is possible under this random testing program that one qualified employee could be tested more than once during a calendar year, while other employees may not be tested at all during that same time.

4.2.4 The City shall ensure that commercial drivers selected for random alcohol and/or controlled substance tests are taken to the designated testing facility upon notification of being selected.

4.2.5 Under this section, the employee shall only be tested for alcohol while he/she is performing safety-sensitive functions (see 2.11).

4.2.6 In the event the employee who is selected for a random alcohol and/or controlled substances test is on vacation or an extended medical absence, the City may either select another employee for testing or keep the original selection confidential until the employee returns from leave.

4.3 Random Selection Process

4.3.1 Safety sensitive employees will be entered into the eligible pool for selection upon implementation of the program. Newly hired safety-sensitive employees will be entered into the random pool the day they begin work with the City.

4.3.2 Drawings will be unannounced and dates for testing will be spread out during the course of the year. The drawings will be conducted in a manner that ensures confidentiality and randomness of selections.
4.3.3 After the drawing is completed, each selectee will be notified that they have been selected for a random alcohol and/or drug test and are to be taken immediately to the testing facility. Employees selected for random testing will be transported to the testing facility by the City.

4.4 Reasonable Suspicion Testing

Employee is required to submit to an alcohol or controlled substance test when there is reasonable suspicion as defined herein to believe such employee has violated the alcohol or controlled substances prohibitions. The required observations for alcohol and/or controlled substances reasonable suspicion testing shall be made by a supervisor or manager who has been trained in accordance with this program.

4.5 Post-Accident Alcohol and Controlled Substances Testing

As soon as practicable following an accident involving a commercial motor vehicle, the City shall test for alcohol and controlled substances each surviving employee when:

4.5.1 The accident involved a fatality; or
4.5.2 The employee receives a citation under state or local law for a moving traffic violation arising from the accident.

For the purposes of this section, accident is defined as an accident involving a commercial motor vehicle in which there is either a fatality, an injury treated away from the scene, or a vehicle is required to be towed from the scene.

Controlled substances tests will be administered within the following time frame:

<table>
<thead>
<tr>
<th>Time Elapsed</th>
<th>Action Required</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 hours</td>
<td>If the employee has not submitted to an alcohol test at this time, the City shall prepare and maintain on file a record stating the reason a test was not promptly administered.</td>
</tr>
<tr>
<td>8 hours</td>
<td>Cease attempts to administer alcohol tests, and prepare and maintain records described above.</td>
</tr>
<tr>
<td>32 hours</td>
<td>If the employee has not submitted to a controlled substance test at this time, the City shall cease attempts to administer the test and prepare and maintain the records described above.</td>
</tr>
</tbody>
</table>
Employee's Responsibility: Any employee who is subject to post-accident testing must remain available for testing, or the City may consider the employee to have refused to submit to testing. The employee subject to post-accident testing must refrain from consuming alcohol for eight hours following the accident, or until he/she submits to an alcohol test, whichever comes first. Failure to comply with these directions constitutes insubordination which may lead to disciplinary action up to and including termination.

4.6 Positive Alcohol/Controlled Substance Test

Engaging in any prohibited activity (see Section 3) will constitute a positive alcohol/controlled substance test. In the event positive test results occur, the Human Resources Department will contact the appropriate department and provide assistance to the supervisor for follow-up action based on the supervisor's documentation and test results. Appropriate action will be determined by the Department with the assistance of the Human Resources Department. Action may include referral of the employee for participation in a mandatory Drug/Alcohol Rehabilitation Program, and may include temporary reassignment to non-safety-sensitive job functions with a reduction in pay appropriate to the new assignments.

4.7 Mandatory Drug/Alcohol Rehabilitation Program

Any employee enrolled in a mandatory drug/alcohol rehabilitation program is subject to the terms and conditions of that agreement, which includes in part the requirement that all counseling be completed during non-work time, at the employee's own expense, and the requirement to submit to drug and/or alcohol tests at any time after returning to work when requested by a supervisor. The schedule of follow-up testing will be determined by the SAP.

The affected employee will receive a copy of the written agreement between the employee and the SAP stating the terms and conditions of the mandatory Drug/Alcohol Rehabilitation Program. The City will also receive a copy of the agreement. An employee refusing to participate in the mandatory Drug/Alcohol Rehabilitation Program may be subject to further disciplinary action including termination. Once enrolled in a mandatory drug/alcohol rehabilitation program, such employee can not be considered for any driving, hazardous duty, or safety-sensitive duty until a negative finding on a return-to-duty test is confirmed. Any employee participant in the mandatory Drug/Alcohol Rehabilitation Program must submit to random drug/alcohol testing.

Employees unable to work because of a positive test result will be allowed to use available sick leave, vacation leave, or compensatory time off during the rehabilitation period.
4.8 Return-to-Duty Testing

4.81 Alcohol Misuse

The City shall ensure that before an employee returns to duty requiring the performance of a safety-sensitive function, after engaging in prohibited conduct regarding alcohol misuse, such employee shall undergo a return-to-duty alcohol test indicating a breath alcohol concentration of less than 0.02.

4.82 Controlled Substances Abuse

The City shall also ensure that before such employee returns to duty requiring the performance of a safety-sensitive function, after engaging in prohibited conduct regarding controlled substance use, the employee shall undergo a return-to-duty controlled substances test with a result indicating a verified negative result for controlled substances use.

4.9 Follow-Up Testing

Following a determination that an employee is in need of assistance in resolving problems associated with alcohol misuse and/or use of controlled substances, the City shall ensure that the employee is subject to unannounced follow-up alcohol and/or controlled substances testing as directed by the Substance Abuse Professional. The employee shall be subject to a minimum of six random follow-up controlled substance and/or alcohol tests in the first twelve months after testing positive under this section. The follow-up testing period can be as long as sixty months; this period is determined under the direction of the SAP.

Alcohol follow-up testing shall be performed only when the employee is performing safety-sensitive functions.

5. PROCEDURE

5.1 Alcohol Testing

Alcohol testing will be conducted using evidential breath testing devices (EBT) approved by the National Highway Traffic Safety Administration. A screening test must be conducted first. If the result is an alcohol concentration level of less than 0.02, the test is considered a negative test. If the alcohol concentration level is 0.02 or more, a second confirmation test must be conducted. If the level of the second confirmation test is below 0.02 then it shall be deemed a negative test. If the level is between 0.02 and 0.039, the employee shall be removed from service for 24 hours.

Alcohol testing shall be accomplished by the City’s designated testing facility.
5.2 Controlled Substance Testing

5.2.1 The test must be conducted by analyzing the employees' urine.

5.2.2 The urinalysis must be done at a laboratory certified by the Department of Health and Human Services.

5.2.3 The urine specimen must be split into two bottles labeled as primary and split specimen. Both bottles must be sent to the lab.

5.2.4 If the urinalysis of the primary specimen tests positive for the presence of illegal, controlled substances, the employee has 72 hours to request that the split specimen be analyzed by a second certified lab to be chosen at the discretion of the Medical Review Officer (MRO). The cost of the second test will be borne by the employee unless the test is a confirmed negative.

5.2.5 The urine sample must be tested for the following: marijuana, cocaine, opiates, amphetamines, and phencyclidine (PCP).

5.2.6 If the test is positive for one or more of the drugs listed in "5.2.5" above, a confirmation test must be performed using gas chromatography/mass spectrometry analysis.

5.2.7 All drug test results will be reviewed and interpreted by the MRO before they are reported to the City's Human Resources Department.

5.2.8 With all positive drug tests, the MRO will contact the employee to determine if there is an alternative medical explanation for the positive test result. If documentation is provided and the MRO determines that there was a legitimate medical use for the prohibited drug, the test result may be reported to the City as negative.

6. CONSEQUENCES TO EMPLOYEES ENGAGING IN CONDUCT PROHIBITED BY THE FEDERAL HIGHWAY ADMINISTRATION'S DRUG USE AND ALCOHOL MISUSE RULES

Employees who are known to have engaged in prohibited behavior with regard to alcohol misuse or use of controlled substances are subject to disciplinary action up to and including termination:

6.1 The employee shall not be permitted to perform safety-sensitive functions.

6.2 The employee shall be advised by the City of the resources available to him/her in evaluating and resolving problems associated with the misuse of alcohol or use of controlled substances.
6.3 In accordance with the City's Alcohol and Drug Abuse Policy No. 89-011 the Department shall determine appropriate disciplinary action, which must include evaluation by a Substance Abuse Professional (SAP) who shall determine what assistance if any the employee needs in resolving problems associated with alcohol misuse and controlled substance use.

6.4 Any employee identified as needing assistance in resolving problems associated with alcohol or controlled substances shall be evaluated by the Substance Abuse Professional to determine that the employee has followed the rehabilitation program prescribed. The cost of the evaluation and rehabilitation program shall be borne by the employee (see section 4).

6.5 Before the employee returns to duty performing safety-sensitive functions, he/she shall undergo a return-to-duty drug and/or alcohol test(s) with a result indicating a breath alcohol level of less than 0.02, and/or a verified negative controlled substance test. The specific return-to-duty test(s) will be determined by the SAP.

6.6 The employee shall also be subject to unannounced follow-up alcohol and controlled substance testing as described in Section 4.7 above. The number and frequency of such follow-up testing shall be as directed by the substance abuse professional and consist of at least six tests in the first twelve months after return-to-duty in the prescribed rehabilitation program. This return-to-duty testing may extend as long as sixty months.

7. **TRAINING**

7.1 Informational Material

As required by the Department of Transportation, the City of Pittsburg will provide information on drug use and treatment resources to safety-sensitive employees.

7.2 Mandatory Supervisory Training

All supervisors of safety-sensitive employees shall attend at least two hours of training on the signs and symptoms of substance abuse. This training shall cover the physical, behavioral, speech, and performance indicators of probable alcohol misuse and the use of controlled substances, and is intended to assist supervisors in making appropriate determinations for reasonable suspicion testing.

8. **CDT FORMS/INSTRUCTIONS**

The Director of Public Services or their designee will ensure that all applicable forms and procedures for completing those forms are followed according to these guidelines.
The attached CDT Forms Instructions provides details on completing the following forms:

8.1 Pre-Employment Drug and Alcohol Test Consent Form

8.2 Alcohol Test Consent and Release Form - Current Employees

8.3 Pre-Employment Verification and Release Form

8.4 Post Accident Log

8.5 Employee Testing Log

8.6 Notice of Termination of Qualified Driver(s)

(Refer to Attachments)
CCC MUNICIPAL RISK MANAGEMENT CONSORTIUM
DRUG AND ALCOHOL TESTING PROGRAM

CDT FORMS INSTRUCTIONS

I. CURRENT EMPLOYEES

All current employees must sign the Alcohol Test and Release Form prior to administering an alcohol test.

II. NEW EMPLOYEES

1. All new employees must sign the Pre-Employment Drug and Alcohol Program Consent Form.

2. Each new employee must sign and complete a Pre-Employment Verification and Release Form. One form must be completed for each federally regulated employer for the past two years.

Examples:

a) The employee worked as an administrative assistant and did not perform a safety-sensitive function at his/her previous job. NO form needs to be completed.
b) The employee worked for XYZ Trucking for the past 5 years as a truck driver. Complete one form.
d) The employee worked for Joe’s Bus Company for 1 year and Bill’s Bus Company for 6 months as a bus driver. Complete one form for EACH company.

3. Send each completed Pre-Employment Verification and Release Form to CDT.

III. RANDOM TESTING

1. CDT will transmit the list of employees selected for random testing by fax or by modem.

2. Once you have received the list, copy the names and social security numbers directly on to the Employee Testing Log.

3. Note the date and time of notification of each employee.
4. If an employee is not tested, note the reason why (i.e., vacation, sick, etc.)

5. Send each completed log to CDT.

IV. POST-ACCIDENT TESTING

1. Complete the top portion of the Post-Accident Log. Enter the information about the driver and the accident.

2. If it is during regular business hours, transport the employee to the testing site. If it is necessary to conduct an emergency collection (i.e., a mobile collector comes on-site), please follow the instructions in section VI.

3. Complete the remainder of the log. State the time and place the collections took place and any remarks.

4. Send a copy of the completed log to CDT.

V. REASONABLE SUSPICION TESTING

1. Complete the Reasonable Suspicion Checklist.

2. If it is during regular business hours, transport the employee to the testing site. If it is necessary to complete an emergency collection (i.e., a mobile collector comes on-site), please follow the instructions in section VI.

3. Send a copy of the completed checklist to CDT.

VI. EMERGENCY COLLECTION PROCEDURES

1. Page CDT at (800)503-5287. Enter the number you are calling from and press #. REMAIN by the phone so that CDT may return your call.

2. Please be prepared to advise CDT on the following issues:

   a) Where the collection must take place.
   b) Type of test(s) required - drug or alcohol test, or both.
   c) Collection due to accident or reasonable cause.
   d) What time the accident happened or the time of the determination of reasonable cause.
VII. TERMINATION OF A QUALIFIED DRIVER

Fax the Termination of Qualified Driver Form when an employee terminates his/her employment or no longer has duties that include him/her in the Program.

CDT’s address is:

Mandy Gray, Account Manager
CDT, Inc.
5820 Naples Plaza
Long Beach, CA 90803

Phone:  (310)987-4788
FAX:     (310)987-5755
DRUG AND ALCOHOL TESTING PROGRAM

PRE-EMPLOYMENT DRUG AND ALCOHOL TEST
CONSENT FORM

1. I understand that as required by the Federal Motor Carrier Safety Regulations, Title 49 Code of Federal Regulations, Section 382.201, covered employee applicants must be tested for controlled substances as a pre-condition for employment.

2. I consent to the urine sample collection to test for controlled substances.

3. I understand and agree that, in the event that the results of any breath alcohol test I take show a blood alcohol concentration equal to or greater than .020%:

   a) a representative from the collection site where the breath alcohol test was performed will contact my prospective employer and inform them of that result;
   
   b) I will remain at the location where the breath alcohol testing was performed until my prospective employer’s personnel arrive to escort me from that location or until they make other arrangements for my safe transportation from that location, and I will use the means of transportation provided by them; and
   
   c) if the result of testing shows a blood alcohol concentration equal to or greater than .080%, the state legal intoxication level, and if I do not remain at the testing site, either the representative from the collection site where the breath alcohol test was performed or my prospective employer may call the police to inform them of my test results and that I left the testing site.

4. I understand that CDT and its subcontractors have agreed to perform breath alcohol testing in reliance on my agreement as set forth in this document.

5. I understand that driving under the influence of alcohol could result in injury or death to myself or others or to my or other people’s property.

6. I hereby expressly release and hold harmless CDT and its subcontractors from any injury, claim, liability, loss, damage, or expenses that may result, directly or indirectly, from my failure to follow any agreement set forth above or from any action of CDT and its subcontractors as set forth above.

I authorize CDT, Inc. to act as the third party administrator for the City of ___________ Drug and Alcohol Testing Program. I consent to the results of testing being forwarded to the City of ___________.

Applicant/Print Name ____________________________  Witness ____________________________

Applicant /Signature ____________________________  Date ____________________________

Date ____________________________
DRUG AND ALCOHOL TESTING PROGRAM

ALCOHOL TEST CONSENT AND RELEASE FORM

1. I understand and agree that, in the event that the results of any breath alcohol test I take show a blood alcohol concentration equal to or greater than .020%: 
   a) a representative from the collection site where the breath alcohol test was performed will contact my employer and inform them of that result;
   b) I will remain at the location where the breath alcohol testing was performed until my employer's personnel arrive to escort me from that location or until they make other arrangements for my safe transportation from that location, and I will use the means of transportation provided by them; and
   c) if the result of testing shows a blood alcohol concentration equal to or greater than .080%, the state legal intoxication level, and if I do not remain at the testing site, either the representative from the collection site where the breath alcohol test was performed or my employer may call the police to inform them of my test results and that I left the testing site.

2. I understand that CDT and its subcontractors have agreed to perform breath alcohol testing in reliance on my agreement as set forth in this document.

3. I understand that driving under the influence of alcohol could result in injury or death to myself or others or to my or other people's property.

4. I hereby expressly release and hold harmless CDT and its subcontractors from any injury, claim, liability, loss, damage, or expenses that may result, directly or indirectly, from my failure to follow any agreement set forth above or from any action of CDT and its subcontractors as set forth above.

5. I authorize CDT, Inc. to act as the third party administrator for the City of Drug and Alcohol Testing Program. I consent to the results of testing being forwarded to the City of

Applicant/Print Name

Applicant /Signature

Witness

Date
DRUG AND ALCOHOL TESTING PROGRAM
PRE-EMPLOYMENT VERIFICATION AND RELEASE FORM

Purpose of the form: To obtain two (2) years of controlled substance and alcohol testing records from the applicant’s previous employer(s). COMPLETE ONE FORM FOR EACH PREVIOUS EMPLOYER WITHIN THE PAST TWO YEARS.

TO BE COMPLETED BY APPLICANT:

I, ____________________________________________, hereby authorize (insert your company) _______ to obtain two years of drug and alcohol test information from my previous employer as part of my application for employment.

________________________________________
Applicant’s Signature

Previous Employer:

Name: _______________________________________ Telephone No: __________________________
Address: ______________________________________ ______________________________________
City, State, Zip: _________________________________________________________________
Contact Person: ________________________________________________________________

TO BE COMPLETED BY PREVIOUS EMPLOYER:

1. TEST INFORMATION VERIFIED BY: Name(print): _________________________________

Signature: __________________________________ Date: ________________________________

Title: ______________________________

2. The applicant named above ☐ participates ☐ does NOT participate in a drug and alcohol testing program that conforms to the Federal Highway Administration testing regulations.

Dates of participation: FROM: ___________________________ TO: _______________________

3. Has the applicant ever REFUSED a drug or alcohol test: ☐ YES ☐ NO

4. Has the applicant ever tested positive (.04 or above) on a breath alcohol test: ☐ YES ☐ NO

(IF YES - COMPLETE PAGE 2)

5. Has the applicant ever tested positive on a drug test: ☐ YES ☐ NO

(IF YES - COMPLETE PAGE 2)

6. If YES was answered to questions 3, 4, or 5, has the driver complied with Part 382.605 of the federal regulations: ☐ YES ☐ NO

7. Is the applicant qualified to drive a commercial motor vehicle according to the FHWA Federal Drug testing guidelines: ☐ YES ☐ NO
If you answered YES to Questions 4 and 5 on the previous page, please complete the following:

<table>
<thead>
<tr>
<th>Alcohol Test</th>
<th>Drug Test</th>
<th>Date: <em><strong>/</strong></em>/___</th>
<th>Result: Negative</th>
<th>Positive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol Test</td>
<td>Drug Test</td>
<td>Date: <em><strong>/</strong></em>/___</td>
<td>Result: Negative</td>
<td>Positive</td>
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<td>Result: Negative</td>
<td>Positive</td>
</tr>
</tbody>
</table>

COMMENTS: __________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

FAX COPY TO CDT (310)987-5755
DRUG AND ALCOHOL TESTING PROGRAM

POST-ACCIDENT LOG

City: 

Name/Signature of Supervisor Completing Report: 

Name of Employee in Accident: 

Employee Social Security #: 

Accident: Date: _____________ Time: _____________

Location: 

Drug/Alcohol Test Required due to: 


ALCOHOL TEST

TIME: _____________________ PLACE: _____________________

Administered within two hours: 

YES ☐ NO ☐

(If NO, state the reason why in remarks.)

REMARKS: _____________________ 


DRUG TEST

TIME: _____________________ PLACE: _____________________

Administered within 32 hours: 

YES ☐ NO ☐

(If NO, state the reason why in remarks.)

REMARKS: _____________________ 


Administered between 2 and 8 hours: YES ☐ NO (If NO, state the reason why in remarks.)

REMARKS: _____________________ 

FAX COPY TO CDT (310)987-5755
**CCC MUNICIPAL RISK MANAGEMENT CONSORTIUM**  
**DRUG AND ALCOHOL TESTING PROGRAM**  

**EMPLOYEE TESTING LOG**

City: ____________________________

Date: ____________________________

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>Social Security Number</th>
<th>Notified of Test</th>
<th>Supervisor Initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Date</td>
<td>Time</td>
</tr>
</tbody>
</table>

*****If an employee is not tested - note the reason why (i.e., sick, vacation, etc.)*****

Fax to CDT when testing round is completed (310)987-5755
CCC MUNICIPAL RISK MANAGEMENT CONSORTIUM
DRUG AND ALCOHOL TESTING PROGRAM

NOTICE OF TERMINATION OF QUALIFIED DRIVER(S)

City: _____________________________

Date: ____________________________

<table>
<thead>
<tr>
<th>Employee Name</th>
<th>SSN</th>
<th>Date of Termination</th>
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<tbody>
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</tbody>
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Completed By: ___________________________ (print name)

Signature: _____________________________

FAX COPY TO CDT (310)987-5755