



Samaritan Health Services, Inc.
Corporate Policies and Procedures
Human Resources

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Title: Substance Abuse

Date: November 22, 2010

SIGNATURE: Larry A. Mullins

DATE SIGNED: 11/22/2010

PURPOSE:

Samaritan Health Services (SHS) has a responsibility to the people they serve to deliver services in a safe and conscientious manner. SHS expects employees to report for work unimpaired and in condition to perform their duties safely and efficiently. In order to ensure this objective, SHS employees must be working free from the effects of performance impairing substances. SHS strives to balance the respect for individual privacy with the need to ensure a safe, productive drug-free work environment and comply with Federal regulations. SHS recognizes that employees are a valuable asset, that substance abuse is a treatable disease, and will, when appropriate, be supportive of rehabilitation of its employees with substance abuse problems.

APPLICATION / SCOPE: All SHS Employees

DEFINITIONS: None.

POLICY:

A. **PROHIBITED CONDUCT: Illegal Drugs and Alcohol**

The following conditions and activities are expressly prohibited and are subject to corrective action, up to and including termination:

- 1. The manufacture, sale, use or possession of alcohol, any illegal substance (including marijuana, even if medically prescribed pursuant to Oregon Law) or any controlled substance that has not been lawfully prescribed to the employee or is not being used as prescribed, is prohibited during work hours, including breaks and lunches. On-call hours are considered work hours for purposes of this policy.
- 2. It is a violation of this policy for an employee to report to work with any detectable level of an illegal or controlled drug (other than as described under Prescription Medications), including alcohol or marijuana, in one's system or to have any noticeable or perceptible impairment of the employee's mental or physical faculties. "Detectable level" may include a positive blood, urine or breath test and/or having an odor of alcohol or marijuana on the breath or person when at work. Any violation of this policy will be subject to corrective action.

B. **PRESCRIPTION MEDICATIONS**

Employees who are medically authorized to use prescribed drugs, not including medical marijuana, are responsible to determine from their physician whether or not the substance can impair job performance. If it can, the employee must report the use of the substance to his or her immediate supervisor and provide proper written medical authorization (i.e. Fitness For Duty/Return To Work Authorization Form) from a physician as to whether the employee can perform all the essential job functions with or without restrictions while using the authorized drugs. Written medical authorization(s) will be maintained in the employee's health record in the Employee Health (EH) Department. SHS does not authorize the use of medical marijuana and will treat any use of marijuana for all employees in the same manner as the use of any other illegal drug.

C. **DRUG AND ALCOHOL TESTING**

Drug testing shall be required of all newly hired employees as part of their post-offer health screening, of employees reasonably suspected of being under the influence of alcohol or drugs, **when a motor vehicle accident involves a SHS owned vehicle**, of employees returning to work on monitored treatment plans, and employees returning to work after a leave of absence per Human Resources discretion. A legal chain of custody form will be required for all drug and alcohol testing.

1. **New Hire/ Post Offer Testing**

Urine testing for drugs will be conducted after a job offer has been made (post-offer) for all employees. All offers of employment will be contingent upon the new hire employee passing the urine drug test. The urine sample must be suitable for testing. If the urine sample is unsatisfactory, e.g. temperature less than 90 degrees Fahrenheit, quantity less than 30 ml, diluted specimen, etc., the applicant will be asked to repeat the urine test at a time determined by the facility conducting the test. If the applicant refuses or cannot return at the designated time, the appropriate SHS contact person will be notified and the job offer may be rescinded.



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Any new hire employee who has a confirmed positive test, or if the sample is found to be adulterated, or submits an invalid specimen, will be denied employment at that time and will not be able to reapply for at least one year.

2. Specimen Integrity Test - The urine drug screen must be negative for the presence of drugs that are being tested (Amphetamines, Barbiturates, Cocaine, Opiates, Marijuana) and the urine sample, which includes testing the urine creatinine, must pass an integrity test. If an applicant has a negative drug screen but fails the integrity portion of the test due to the consumption of too much liquid, he or she will be allowed to repeat the urine drug screen within 24 hours. If the applicant cannot return within 24 hours after notification, the job offer will be rescinded. If the applicant's sample fails the integrity test the second time, no further testing will be done and the job offer will be rescinded.
3. Reasonable Suspicion Testing
When the hospital has a reasonable suspicion that an employee is in violation of this policy, the employee will be required to submit to testing to determine the presence or use or any involvement with alcohol or drugs. SHS reserves the right to determine whether reasonable suspicion exists. When reasonable suspicion testing is initiated, the employee will be suspended, without pay, pending the findings of the investigation and results of any applicable laboratory testing, fitness for duty examinations or medical evaluations. Among the situations where the hospital may exercise its "reasonable suspicion" right to test include, but are not limited to the following:
 - Observable symptoms of being under the influence of alcohol or drugs (e.g., slurred speech, staggering or unsteady gait, glassy or reddened eyes, etc.);
 - Noticeable odor of alcohol or drug use;
 - Involvement in an accident on company premises which results in physical injury or property damage where substance abuse is suspected;
 - Any accident involving a SHS owned motor vehicle, even if substance abuse is not suspected;
 - A sentinel event or any significant patient safety concern;
 - Unexplained, significant changes in behavior (erratic, insubordinate or abusive behavior, or disregard of safety rules or procedures);
 - Unexplained or suspicious absenteeism or tardiness and/or deteriorating work performance;
 - Suspicion of diverting drugs; or
 - Admission of alcohol and/or drug use.
4. Fitness For Duty
An employee may be subjected to reasonable suspicion testing for signs/symptoms of impairment and have a "negative" drug test. An employee may be considered impaired and unfit for work for reasons other than substance abuse (e.g. excessive use of prescriptive and over-the-counter medications, sleep deprivation, acute psychological stress reaction, etc.). The employee will be suspended, without pay, pending the findings of a fitness-for-duty medical evaluation by the employee's healthcare provider.
5. Return to Work Monitoring
Drug and alcohol testing will be conducted as outlined in the Second Chance Agreement as part of the employee's rehabilitation program when applicable.

D. RIGHT TO CONDUCT LIMITED SEARCHES

SHS reserves the right to inspect and/or search any employee's personal property on hospital premises if there is reason to believe that this policy has been violated. In the event that a search is required, the employee will be notified of the reasons for the search and the search will be conducted by the Security Department Manager and/or Department Manager/designee in the presence of the employee whenever possible. Refusal to submit to any such inspection or refusal to cooperate in any investigation will result in corrective action, which could include termination.



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E. CORRECTIVE ACTION

Any employee who is found to be in violation of this policy, or who refuses to submit to testing as required, or who refuses to cooperate or attempts to subvert the collection process and/or testing procedures will be subject to corrective action which could include immediate termination of employment. Any confirmed incident of substance abuse will be reported to the appropriate licensing boards, when applicable, for any licensing corrective action. SHS also reserves the right to involve law enforcement officials for any conduct, which it believes, might be in violation of state or federal law.

F. REHABILITATION AGREEMENT/SECOND CHANCE AGREEMENT

1. Voluntary Disclosure

Any employee who voluntarily request assistance in dealing with a personal drug and/or alcohol problem may do so through the Employee Assistance Program (EAP) without jeopardizing his or her employment as long as this assistance is sought before work performance has deteriorated or corrective action has begun.

Employees seeking help on their own for a substance abuse problem or who are referred to the EAP by their manager, supervisor, or Employee Health, will be provided assistance on a confidential basis. The employee will not be released from work unless his/her condition warrants inability to work, and will not be subject to corrective action for voluntarily seeking assistance the first time. Any communication regarding the employee's condition and work arrangements will be kept as private and confidential as possible.

2. Non-Voluntary Disclosure

As a result of corrective action arising from a drug or alcohol problem, an employee may be required to participate in a drug or alcohol treatment program as a condition of continued employment. SHS reserves the right to determine if an employee is a candidate for the return to work/rehabilitation treatment program. If a treatment program is deemed appropriate, the employee will be referred to the Employee Assistance Program (EAP) for assessment and guidance with rehabilitation.

If the employee is given the option and he/she agrees to accept appropriate treatment, after-care and follow-up testing, he/she will then have the opportunity, on a one-time basis, for rehabilitation as part of the "Second Chance Agreement." Failure to observe the terms of the Second Chance Agreement will result in immediate termination.

G. VERIFICATION/NOTIFICATION OF TEST RESULTS

If the post-offer urine drug test is positive for any of the 6 drugs tested, the sample will be sent to a DHHS/SAMSA-certified and Oregon licensed laboratory for Gas Chromatography/Mass Spectrometry confirmatory testing.

A licensed physician with knowledge of substance abuse disorders will make a final verification of a positive drug test result. SHS has designated a Medical Review Officer (MRO) who will determine if a confirmed positive test resulted from something other than substance abuse. The MRO will notify a designated SHS contact person with the final interpretation of the test result (i.e. pass/fail).

H. CONFIDENTIALITY & RECORD KEEPING

Substance abuse records are considered confidential information, which are disclosed only to individuals on a need to know basis.

1. Reasonable Suspicion/Corrective Action Documents

If an employee has a confirmed positive substance abuse test, documentation of the investigation and any corrective action communication will be stored in the employee's investigation file in Human Resources.

2. Urine Drug and Blood/Breath Alcohol Test Results

Substance abuse test results for reasonable suspicion will be stored in a separate file in a locked cabinet located in the Employee Health Department. When the employee terminates employment, the substance abuse test results will be placed in the employee's health record in accordance with regulatory and hospital policy on retention of medical records.

For post-offer urine drug tests, Samaritan Occupational Medicine will have custody and maintain the results for the mid-valley facilities and SPCH. The Laboratory Department will maintain the post-offer urine drug test results for SNLH.



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3. **Release of Post-Offer Urine Drug Test Results**

Employees requesting copies of their post-offer urine drug test results should contact Samaritan Occupational Medicine for the mid-valley facilities and SPCH. For SNLH, employees should contact the Laboratory Department.

4. **Release of Reasonable Suspicion Test Results**

The employee must make the request in person at Samaritan Occupational Medicine* office. A picture I.D. will be required. SOM* will only release a copy of the test results. Other documents (i.e. MRO evaluation, etc.) will not be released without a court order. *For SNLH, the request is made at the Laboratory Department. SNLH Laboratory will only release a copy of the test results.

PROCEDURE:

A. POST OFFER TESTING

- New hire employees will be informed of post offer urine drug testing initially by Human Resources when an offer of employment is made. The urine drug screen will be collected within 24 hours of the conditional job offer. The job offer may be rescinded on the basis of refusal to test if the applicant fails to have his or her test within the 24-hour limit. Out-of-area applicants and applicants with special circumstances may have the collection time extended per the discretion and approval of the SHS Recruitment Director.
- The post offer urine drug test must be completed before the employee begins to work.
- The MRO will notify Human Resources of any confirmed positive test results. Human Resources will notify the employee and the employee's manager that he/she did not pass the post offer drug test and the offer of employment will be rescinded.

B. REASONABLE SUSPICION

If an employee is thought to be in violation of the SHS substance abuse policy, the following steps will be taken:

- a) The manager or designee will request the assistance of an appropriate witness (i.e. ADM, Security Manager, Nursing Supervisor). Both persons will observe the behavior of the employee in question. A "Supervisor's Worksheet" may be used to document the signs/symptoms of the employee's suspected substance abuse.
- b) Once confirmation of the suspicion has occurred, the employee will be removed from the work area, and in private, with manager/ witness present, questioned regarding the behavior/performance observed. The manager/designee and witness will then determine whether it will be necessary to require the employee to submit to substance testing.
- c) If the employee refuses to cooperate, advise the employee that, under SHS's policy, failure to respond to questions or to allow a test thereafter may be grounds for termination. The employee is to be sent home with appropriate transportation if he or she refuses to submit to the substance abuse investigation.
- d) Refer to the last page of the policy for locations and phone numbers for drug/alcohol collection. **A urine drug test (consisting of a comprehensive Health Professional Drug Test Panel) AND breath alcohol testing will be collected for any reasonable suspicion.** A blood alcohol test will be obtained only if breath alcohol testing is unavailable.
- e) When paging Samaritan Occupational Medicine (SOM) in the mid-valley, provide meeting location and contact person's name. (Example: "Requesting reasonable suspicion drug testing at GSRMC, Corvallis. Please meet Jane Doe, Nursing Supervisor, in the front lobby of the Emergency Department.")
- f) Secure a private room, near a bathroom, for the testing to be conducted. Once testing has been completed, the employee will be relieved of his/her duties and appropriate transportation will be arranged by the facility to take the employee home. The employee will not be allowed to drive his/her vehicle from the work premises if he/she is suspected of being under the influence of alcohol or drugs. The employee will be suspended without pay until the investigation is complete.
- g) A written report, documenting the investigation, will be completed by the manager/designee and sent to Human Resources in a sealed envelope marked "confidential".



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C. AUTHORIZATION

If a situation arises during post-offer or reasonable suspicion testing that is not covered within this written policy, the person conducting the drug test will contact the appropriate SHS contact person for clarification and/or further instructions. If needed, the contact person will consult with the SHS Vice-President of Human Resources, who has the ultimate authority in decisions pertaining to these situations.

RESPONSIBILITIES: Human Resources

REFERENCES:

COLLABORATED WITH: Human Resources, Employee Health, Samaritan Occupational Medicine.

FOLLOW-UP RESPONSIBILITY: Vice-President, Human Resources

ATTACHMENTS: Substance Abuse Policy Supervisor's Worksheet

Policy Creation Date 09/89	Author(s) / Department of Policy: K.Schlessinger, Employee Health/Human Resources	
Approval Authority: Corporate Operations	Date of approval: 11/8/2010	
Date Reviewed: 04/91	Date Revised: 07/90, 07/95, 03/96, 12/97, 01/98, 01/00, 12/00, 08/01, 03/05, 12/06, 04/08, 4/10, 11/10	

SHS Mid-Valley Facilities

Contact

Samaritan Occupational Medicine (Albany Office)

Contact Phone Numbers

Daytime: Monday – Friday 7:30 AM – 5:30 PM

812-5600 or 812-5605

Evenings (after 5:30 PM), Weekends, Holidays:

Pager #917-5664 (enter complete call back number, do not enter an extension). For emergency back-up, use cell # - 974-0419.

SHS Coastal Facilities

SPCH – Manager/designee will escort the employee to Samaritan Occupational Medicine

Department during the hours of 8:00 AM – 5:00 PM (office is closed 12:00 –1:00 PM for lunch).

After hours, escort employee to the Laboratory Department.

SNLH – Manager/designee will escort the employee to the Laboratory Department



SAMARITAN HEALTH SERVICES SUPERVISOR'S WORKSHEET

Employee Name _____

Job Title _____

Department _____

Date of Observation ____ / ____ / ____

Time of Observation _____ **am / pm**

After each category, check those terms that describes what you see / hear / smell regarding the above employee:

WALKING	<input type="checkbox"/> Stumbling <input type="checkbox"/> Unable to Walk	<input type="checkbox"/> Staggering <input type="checkbox"/> Swaying	<input type="checkbox"/> Falling <input type="checkbox"/> Unsteady	<input type="checkbox"/> Holding on
STANDING	<input type="checkbox"/> Staggering <input type="checkbox"/> Knees Sagging	<input type="checkbox"/> Unable to Stand <input type="checkbox"/> Rigid	<input type="checkbox"/> Swaying	<input type="checkbox"/> Feet Wide Apart
SPEECH	<input type="checkbox"/> Shouting <input type="checkbox"/> Rambling	<input type="checkbox"/> Silent <input type="checkbox"/> Slurred	<input type="checkbox"/> Whispering <input type="checkbox"/> Slobbering	<input type="checkbox"/> Slow <input type="checkbox"/> Incoherent
DEMEANOR	<input type="checkbox"/> Cooperative <input type="checkbox"/> Crying <input type="checkbox"/> Sarcastic	<input type="checkbox"/> Polite <input type="checkbox"/> Silent <input type="checkbox"/> Combative	<input type="checkbox"/> Calm <input type="checkbox"/> Talkative	<input type="checkbox"/> Sleepy <input type="checkbox"/> Excited
ACTIONS	<input type="checkbox"/> Fighting <input type="checkbox"/> Drowsy <input type="checkbox"/> Resisting Communication	<input type="checkbox"/> Threatening <input type="checkbox"/> Profanity	<input type="checkbox"/> Calm <input type="checkbox"/> Hyperactive	<input type="checkbox"/> Hostile <input type="checkbox"/> Erratic
EYES	<input type="checkbox"/> Bloodshot <input type="checkbox"/> Droopy	<input type="checkbox"/> Watery <input type="checkbox"/> Closed	<input type="checkbox"/> Dilated	<input type="checkbox"/> Glassy
FACE	<input type="checkbox"/> Flushed	<input type="checkbox"/> Pale	<input type="checkbox"/> Sweaty	
MOVEMENTS	<input type="checkbox"/> Fumbling <input type="checkbox"/> Nervous	<input type="checkbox"/> Jerky <input type="checkbox"/> Hyperactive	<input type="checkbox"/> Slow	<input type="checkbox"/> Normal
EATING / CHEWING	<input type="checkbox"/> Gum	<input type="checkbox"/> Candy	<input type="checkbox"/> Mints	<input type="checkbox"/> Other
BREATH	<input type="checkbox"/> Alcoholic Odor	<input type="checkbox"/> Faint Alcoholic	<input type="checkbox"/> No Alcoholic Odor	<input type="checkbox"/> Other Odor
ABNORMAL APPEARANCE/ CLOTHING	<input type="checkbox"/> Messy	<input type="checkbox"/> Dirty	<input type="checkbox"/> Odorous	

OTHER OBSERVATIONS / COMMENTS: _____

Supervisor Making Observation

Date

Time

Witness to any or all of above observations

Date

Time