

<b>Mountain Area Regional Transit Authority</b>	<b>PERSONNEL POLICY MANUAL</b>
<b>DRUG AND ALCOHOL POLICY FOR EMPLOYEES PERFORMING SAFETY SENSITIVE FUNCTIONS</b>	<b>Number: 103</b>
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### **103.01 APPLICATION**

This Drug and Alcohol Testing Policy applies to all safety-sensitive employees (full-or part-time) when performing safety sensitive duties.

A safety-sensitive function is operation of public transit service, including the operation of a revenue service vehicle (whether or not the vehicle is in revenue service), maintenance of a revenue service vehicle or equipment used in revenue service, security personnel who carry firearms, dispatchers or persons controlling the movement of revenue service vehicles, and any other transit employee who operates a transit vehicle that requires a Commercial Driver License to operate. Maintenance functions include the repair, overhaul, and rebuild of engines, vehicles and/or equipment used in revenue service. A list of safety-sensitive positions that perform one or more of the above mentioned duties is provided in Attachment A. Supervisors are only safety sensitive if they perform one of the above functions.

### **103.02 PURPOSE**

The Mountain Area Regional Transit Authority (MARTA) provides public transit and paratransit services for the residents of the San Bernardino Mountain area communities. Part of our mission is to ensure that this service is delivered safely, efficiently, and effectively by establishing a drug and alcohol-free work environment, and to ensure that the workplace remains free from the effects of drugs and alcohol, in order to promote the health and safety of employees and the general public. In keeping with this mission, MARTA declares that the unlawful manufacture, distribution, dispense, possession, or use of controlled substances or misuse of alcohol is prohibited for all employees.

Additionally, the purpose of this policy is to establish guidelines to maintain a drug and alcohol-free workplace in compliance with the Drug-Free Workplace Act of 1988, and the Omnibus Transportation Employee Testing Act of 1991. This policy is intended to comply with all applicable Federal regulations governing workplace anti-drug and alcohol programs in the transit industry. Specifically, the Federal Transit Administration (FTA) of the U.S. Department of Transportation has published 49 CFR Part 655, as amended, that mandates urine drug testing and breath alcohol testing for safety-sensitive positions, and prohibits performance of safety-sensitive functions when there is a positive test result. The U. S. Department of Transportation (US DOT) has also published 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens.

Any provisions set forth in this policy that are included under the sole authority of MARTA and are not provided under the authority of the above named Federal regulations are underlined. Tests conducted under the sole authority of MARTA will be performed on non-US DOT forms and will be separate from US DOT testing in all respects.

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### 103.03 DEFINITIONS

*Accident:* An occurrence associated with the operation of a vehicle even when not in revenue service, if as a result:

- An individual dies;
- An individual suffers a bodily injury and immediately receives medical treatment away from the scene of the accident; or,
- One or more vehicles incur disabling damage as the result of the occurrence and are transported away from the scene by a tow truck or other vehicle. For purposes of this definition, *disabling damage* means damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

*Adulterated specimen:* A specimen that has been altered, as evidence by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

*Alcohol:* The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols contained in any beverage, mixture, mouthwash, candy, food, preparation or medication.

*Alcohol Concentration:* Expressed in terms of grams of alcohol per 210 liters of breath as indicated by a breath test under 49 CFR Part 40.

*Aliquot:* A fractional part of a specimen used for testing. It is taken as a sample representing the whole specimen.

*Canceled Test:* A drug or alcohol test that has a problem identified that cannot be or has not been corrected, or which is cancelled. A canceled test is neither positive nor negative.

*Confirmatory Drug Test:* A second analytical procedure performed on a different aliquot of the original specimen to identify and quantify the presence of a specific drug or metabolite.

*Confirmatory Validity Test:* A second test performed on a different aliquot of the original urine specimen to further support a validity test result.

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*Covered Employee Under FTA Authority:* An employee who performs a safety-sensitive function including an applicant or transferee who is being considered for hire into a safety-sensitive function (See Attachment A for a list of covered employees).

*Covered Employee Under MARTA Authority:* An employee, applicant, or transferee that will not perform a safety-sensitive function as defined by FTA but is included under the MARTA's own authority.

*Designated Employer Representative (DER):* An employee authorized by the employer to take immediate action to remove employees from safety-sensitive duties and to make required decisions in testing. The DER also receives test results and other communications for the employer, consistent with the requirements of 49 CFR Parts 40 and 655.

*Department of Transportation (DOT):* Department of the federal government which includes the Federal Transit Administration, Federal Railroad Administration, Federal Highway Administration, Federal Motor Carriers' Safety Administration, Pipeline and Materials Safety Administration, United States Coast Guard, and the Office of the Secretary of Transportation.

*Dilute specimen:* A specimen with creatinine and specific gravity values that are lower than expected for human urine.

*Disabling damage:* Damage which precludes departure of any vehicle from the scene of the occurrence in its usual manner in daylight after simple repairs. Disabling damage includes damage to vehicles that could have been operated but would have been further damaged if so operated, but does not include damage which can be remedied temporarily at the scene of the occurrence without special tools or parts, tire disablement without other damage even if no spare tire is available, or damage to headlights, taillights, turn signals, horn, or windshield wipers that makes them inoperative.

*Evidentiary Breath Testing Device (EBT):* A device approved by the NHTSA for the evidential testing of breath at the 0.02 and the 0.04 alcohol concentrations. Approved devices are listed on the National Highway Traffic Safety Administration (NHTSA) conforming products list.

*Initial Drug Test (Screening Drug Test):* The test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

*Initial Specimen Validity Test:* The first test used to determine if a urine specimen is adulterated, diluted, substituted, or invalid.

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*Invalid Result:* The result reported by an HHS-certified laboratory in accordance with the criteria established by the HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

*Laboratory:* Any U.S. laboratory certified by HHS under the National Laboratory Certification program as meeting standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.

*Limit of Detection (LOD):* The lowest concentration at which a measurand can be identified but (for quantitative assays) the concentration cannot be accurately calculated.

*Limit of Quantitation:* For quantitative assays, the lowest concentration at which the identity and concentration of the measurand can be accurately established.

*Medical Review Officer (MRO):* A licensed physician (medical doctor or doctor of osteopathy) responsible for receiving laboratory results generated by the drug testing program 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/her medical history, and any other relevant bio-medical information.

*Negative Dilute:* A drug test result which is negative for the five drug/drug metabolites but has a specific gravity value lower than expected for human urine.

*Negative test result:* The verified presence of the identified drug or its metabolite below the minimum levels specified in 49 CFR Part 40, as amended. An alcohol concentration of less than 0.02 BAC is a negative test result.

*Non-negative test result:* A test result found to be adulterated, substitute, invalid, or positive for drug/drug metabolites.

*Oxidizing Adulterant:* A substance that acts alone or in combination with other substances to oxidize drugs or drug metabolites to prevent the detection of the drug or metabolites, or affects the reagents in either the initial or confirmatory drug test.

*Performing (a safety-sensitive function):* A covered employee is considered to be performing a safety-sensitive function and includes any period in which he or she is actually performing, ready to perform, or immediately available to perform such functions.

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*Positive result:* The result reported by an HHS-Certified laboratory when a specimen contains a drug or drug metabolite equal or greater to the cutoff concentrations.

*Prescriptions:* The **Controlled Substances Act (CSA)** is the statute establishing [federal U.S. drug policy](#) under which the manufacture, importation, possession, use and distribution of certain substances is regulated.

*Prohibited drug:* Identified as Marijuana, Cocaine, Amphetamines (MDMA, MDA), Opioids (codeine, heroin, morphine, oxycodone, oxymorphone, hydrocodone, hydromorphone) or phencyclidine at levels above the minimum thresholds specified in 49 CFR Part 40, as amended.

*Reconfirmed:* The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

*Rejected for Testing:* The result reported by an HHS-Certified laboratory when no tests are performed for specimen because of a fatal flaw or correctable flaw that has not been corrected.

*Revenue Service Vehicles:* All transit vehicles that are used for passenger transportation service.

*Safety-sensitive functions:* Employee duties identified as:

- The operation of a transit revenue service vehicle even when the vehicle is not in revenue service.
- The operation of a non-revenue service vehicle by an employee when the operation of such a vehicle requires the driver to hold a Commercial Drivers License (CDL).
- Maintaining a revenue service vehicle or equipment used in revenue service.
- Controlling the movement of a revenue service vehicle; and
- Carrying a firearm for security purposes.

*Split Specimen Collection:* A collection in which the urine collected is divided into two separate bottles, the primary specimen (Bottle A) and split specimen (Bottle B).

*Substance Abuse Professional (SAP):* A licensed physician (medical doctor or doctor of osteopathy) or licensed or certified psychologist, social worker, employee assistance professional, family-marriage therapist, or drug and alcohol counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission or by the International Certification Reciprocity

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Consortium/Alcohol and other Drug Abuse (ICRC) or by the National Board for Certified Counselors, Inc. and affiliates/Master Addictions Counselor (NBCC) with knowledge of and clinical experience in the diagnosis and treatment of drug and alcohol related disorders.

*Substituted specimen:* A specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

*Test Refusal:* The following are considered a refusal to test if the employee:

- Leaves the scene of an accident without a legitimate explanation prior to submission to drug/alcohol tests;
- Fails to appear for any test (excluding pre-employment) within a reasonable time, as determined by the employer, after being directed to do so by the employer;
- Fails to remain at the testing site until the testing process is complete;
- Fails to attempt to provide a urine or breath specimen for any drug or alcohol test required by Part 40 or DOT agency regulations;
- In the case of a directly observed or monitored collection in a drug test, the employee fails to permit the observation or monitoring of the provision of a specimen;
- Fails to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
- Fails or declines to take a second test the employer or collector has directed the employee to take;
- Fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER as part of the "shy bladder" or "shy lung" procedures;
- Fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behaves in a confrontational way that disrupts the collection process);
- The MRO reports that there is a verified adulterated or substituted test result;
- Fails or refuses to sign Step 2 of the alcohol testing form;
- Failure to follow the observer's instructions during an observed collection, including instructions to raise clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if any type of prosthetic or other device that could be used to interfere with the collection process is present;

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- A covered employee possess or wears a prosthetic or other device that could be used to interfere with the collection process; or
- A covered employee admits to the collector or MRO that they have adulterated or substituted the specimen.
- A covered employee brings materials for adulterating, substituting, or diluting the specimen to the collection site, or when the collector observes a donor's clear attempt to tamper with a specimen.

*Verified negative test:* A drug test result reviewed by a medical review officer and determined to have no evidence of prohibited drug use above the minimum cutoff levels established by the Department of Health and Human Services (HHS).

*Verified positive test:* A drug test result reviewed by a medical review officer and determined to have evidence of prohibited drug use above the minimum cutoff levels specified in 49 CFR Part 40 as revised.

*Validity testing:* The evaluation of the specimen to determine if it is consistent with normal human urine. The purpose of validity testing is to determine whether certain adulterants or foreign substances were added to the urine, if the urine was diluted, or if the specimen was substituted.

#### **103.04 EDUCATION AND TRAINING**

- A. Every covered employee will receive a copy of this policy and will have ready access to the corresponding federal regulations including 49 CFR Parts 655 and 40, as amended. In addition, all covered employees will undergo a minimum of 60 minutes of training on the signs and symptoms of drug use including the effects and consequences of drug use on personal health, safety, and the work environment. The training also includes manifestations and behavioral cues that may indicate prohibited drug use.
- B. All supervisory personnel or company officials who are in a position to determine employee fitness for duty will receive 60 minutes of reasonable suspicion training on the physical, behavioral, and performance indicators of probable drug use and 60 minutes of additional reasonable suspicion training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.
- C. Information on the signs, symptoms, health effects, and consequences of alcohol misuse is presented in Attachment B of this policy.

#### **103.05 PROHIBITED SUBSTANCES**

- A. Prohibited substances addressed by this policy include the following:
  - 1) Illegally Used Controlled Substance or Drugs Under the Drug-Free Workplace Act of 1988, any drug or any substance identified in Schedule I through V of

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Section 202 of the Controlled Substance Act (21 U.S.C. 812), and as further defined by 21 CFR 1300.11 through 1300.15 is prohibited at all times in the workplace unless a legal prescription has been written for the substance. This includes, but is not limited to: marijuana, amphetamines including methamphetamine and MDMA (Ecstasy), Opioids (oxycodone, oxymorphone, hydrocodone, hydromorphone) including codeine, morphine, and heroin, phencyclidine (PCP), and cocaine, as well as any drug not approved for medical use by the U.S. Drug Enforcement Administration or the U.S. Food and Drug Administration. Illegal use includes use of any illegal drug, misuse of legally prescribed drugs, and use of illegally obtained prescription drugs, the medical use of marijuana, or the use of hemp related products, which cause drug or drug metabolites to be present in the body above minimum thresholds, is a violation of this policy.

Federal Transit Administration drug testing regulations (49 CFR Part 655) require that all employees covered under FTA authority be tested for marijuana, cocaine, amphetamines including methamphetamine and MDMA (Ecstasy), Opioids (oxycodone, oxymorphone, hydrocodone, hydromorphone) including heroin, and phencyclidine as described in Section 103.08 of this policy. Employees covered under MARTA authority will also be tested for these same substances. Illegal use of these five drugs is prohibited at all times and thus, covered employees may be tested for these drugs anytime that they are on duty.

- 2) **LEGAL DRUGS:** The appropriate use of legally prescribed drugs and non-prescription medications is not prohibited. However, the use of any substance which carries a warning label that indicates that mental functioning, motor skills, or judgment may be adversely affected must be reported to a MARTA supervisor or manager and the employee is required to provide a written release from his/her doctor or pharmacist indicating that the employee can perform his/her safety-sensitive functions.
  
- 3) **ALCOHOL:** The use of beverages containing alcohol (including any mouthwash, medication, food, candy) or any other substances such that alcohol is present in the body while performing safety-sensitive job functions is prohibited. A random or reasonable suspicion alcohol test can only be performed on a covered employee under 49 CFR Part 655 just before, during, or just after the performance of safety-sensitive job functions. Under MARTA's authority, a non-DOT alcohol test can be performed any time a covered employee is on duty.



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## **103.06 PROHIBITED CONDUCT**

- A. All covered employees are prohibited from reporting for duty or remaining on duty any time there is a quantifiable presence of a prohibited drug in the body above the minimum thresholds defined in 49 CFR PART 40, as amended.
- B. Each covered employee is prohibited from consuming alcohol while performing safety-sensitive job functions or while on-call to perform safety-sensitive job functions. If an on-call employee has consumed alcohol, they must acknowledge the use of alcohol at the time that they are called to report for duty. The covered employee will subsequently be relieved of his/her on-call responsibilities and subject to discipline for not fulfilling his/her on-call responsibilities.
- C. MARTA shall not permit any covered employee to perform or continue to perform safety-sensitive functions if it has actual knowledge that the employee is using alcohol.
- D. Each covered employee is prohibited from reporting to work or remaining on duty requiring the performance of safety-sensitive functions while having an alcohol concentration of 0.02 or greater regardless of when the alcohol was consumed.
- E. No covered employee shall consume alcohol for eight (8) hours following involvement in an accident or until he/she submits to the post-accident drug/alcohol test, whichever occurs first.
- F. No covered employee shall consume alcohol within four (4) hours prior to the performance of safety-sensitive job functions.
- G. MARTA, under its own authority, also prohibits the consumption of alcohol all times an employee is on duty, or anytime the employee is in uniform.
- H. Consistent with the Drug-free Workplace Act of 1988, all MARTA employees are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of prohibited substances in the work place including MARTA premises and transit vehicles.

## **103.07 DRUG STATUTE CONVICTION**

Consistent with the Drug Free Workplace Act of 1998, all employees are required to notify MARTA management of any criminal drug statute conviction for a violation occurring in the workplace within five days after such conviction. Failure to comply with this provision shall result in disciplinary action as defined in 103.12 of this policy.

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## **103.08 TESTING REQUIREMENTS**

- A. Analytical urine drug testing and breath testing for alcohol will be conducted as required by 49CFR part 40 as amended. All employees covered under FTA authority shall be subject to testing prior to performing safety-sensitive duty, for reasonable suspicion, following an accident, and random as defined in Section 103.11 of this policy, and return to duty/follow-up.
- B. All covered employees who have tested positive for drugs or alcohol will be tested prior to returning to duty after completion of the Substance Abuse Professional's recommended treatment program and subsequent release to duty. Follow-up testing will also be conducted following return-to-duty for a period of one to five years, with at least six tests performed during the first year. The duration and frequency of the follow-up testing above the minimum requirements will be at the discretion of the Substance Abuse Professional.
- C. A drug test can be performed any time a covered employee is on duty. A reasonable suspicion and random alcohol test can be performed just before, during, or after the performance of a safety-sensitive job function. Under MARTA's authority, an alcohol test can performed any time a covered employee is on duty on non-DOT forms.
- D. All covered employees will be subject to urine drug testing and breath alcohol testing as a condition of ongoing employment with MARTA. Any safety-sensitive employee who refuses to comply with a request for testing shall be removed from duty and subject to discipline as defined in Section 103.12 of this policy. Any covered employee who is suspected of providing false information in connection with a drug test, or who is suspected of falsifying test results through tampering, contamination, adulteration, or substitution will be required to undergo an observed collection. Verification of the above listed actions will be considered a test refusal and will result in the employee's removal from duty and disciplined as defined in Section 103.12 of this policy. Refer to Section 103.12 for behavior that constitutes a refusal to test.

## **103.09 DRUG TESTING PROCEDURES**

- A. Testing shall be conducted in a manner to assure a high degree of accuracy and reliability and using techniques, equipment, and laboratory facilities which have been approved by the U.S. Department of Health and Human Service (HHS). All testing will be conducted consistent with the procedures set forth in 49 CFR Part 40, as amended. The procedures will be performed in a private, confidential manner and every effort will be made to protect the employee, the integrity of the drug testing procedure, and the validity of the test result.

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- B. The drugs that will be tested for include marijuana, cocaine, Opioids (oxycodone, oxymorphone, hydrocodone, hydromorphone) including codeine, morphine and heroin, amphetamines, methamphetamine and MDMA (Ecstasy), and phencyclidine. After the identity of the donor is checked using picture identification, a urine specimen will be collected using the split specimen collection method described in 49 CFR Part 40, as amended. Each specimen will be accompanied by a DOT Chain of Custody and Control Form and identified using a unique identification number that attributes the specimen to the correct individual. The specimen analysis will be conducted at a HHS certified laboratory. An initial drug screen and validity test will be conducted on the primary urine specimen. For those specimens that are not negative, a confirmatory Gas Chromatography/Mass Spectrometry (GC/MS) test will be performed. The test will be considered positive if the amounts of the drug(s) and/or its metabolites identified by the GC/MS test are above the minimum thresholds established in 49 CFR Part 40, as amended.
- C. The test results from the HHS certified laboratory will be reported to a Medical Review Officer. A Medical Review Officer (MRO) is a licensed physician with detailed knowledge of substance abuse disorders and drug testing. The MRO will review the test results to ensure the scientific validity of the test and to determine whether there is a legitimate medical explanation for a confirmed positive, substitute, or adulterated test result. The MRO will attempt to contact the employee to notify the employee of the non-negative laboratory result, and provide the employee with an opportunity to explain the confirmed laboratory test result. The MRO will subsequently review the employee's medical history/medical records as appropriate to determine whether there is a legitimate medical explanation for a non-negative laboratory result. If no legitimate medical explanation is found, the test will be verified positive or refusal to test and reported to the MARTA Drug and Alcohol Program Manager (DAPM). If a legitimate explanation is found, the MRO will report the test result as negative to the DAPM.
- D. If the test is invalid without a medical explanation, a retest will be conducted under direct observation. Employees do not have access to a test of their split specimen following an invalid result.
- E. Any covered employee who questions the results of a required drug test under paragraphs A through C, Section 103.09 of this policy may request that the split sample be tested. The split sample test must be conducted at a second HHS-certified laboratory. The test must be conducted on the split sample that was provided by the employee at the same time as the primary sample. The method of collecting, storing, and testing the split sample will be consistent with the procedures set forth in 49 CFR Part 40, as amended. The employee's request

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for a split sample test must be made to the Medical Review Officer within 72 hours of notice of the original sample verified test result. Requests after 72 hours will only be accepted at the discretion of the MRO if the delay was due to documentable facts that were beyond the control of the employee. MARTA will ensure that the cost for the split specimen is covered in order for a timely analysis of the sample; however, MARTA will seek reimbursement for the split sample test from the employee.

- F. If the analysis of the split specimen fails to confirm the presence of the drug(s) detected in the primary specimen, if the split specimen is not able to be analyzed, or if the results of the split specimen are not scientifically adequate, the MRO will declare the original test to be canceled. If the split specimen is not able to be analyzed the MRO will direct MARTA to retest the employee under direct observation.
  
- G. The split specimen will be stored at the initial laboratory until the analysis of the primary specimen is completed. If the primary specimen is negative, the split will be discarded. If the primary specimen is positive, it will be retained in frozen storage for one year and the split specimen will also be retained for one year. If the primary is positive, the primary and the split will be retained for testing for longer than one year if so requested by the employee through the Medical Review Officer (MRO), or by the employer, the MRO, or by the relevant DOT agency.
  
- H. Observed Collections
  - 1. Consistent with 49 CFR part 40, as amended, collection under direct observation, by a person of the same gender, with no advance notice will occur if:
    - a. The laboratory reports to the MRO that a specimen is invalid, and the MRO reports to MARTA's DAPM that there was not an adequate medical explanation for the result; or
    - b. The MRO reports to MARTA that the original positive, adulterated, or substituted test result had to be cancelled because the test of the split specimen could not be performed.
    - c. The laboratory reported to the MRO that the specimen was negative-dilute with a creatinine concentration greater than or equal to 2mg/dL but less than or equal to 5mg/dL, and the MRO reported the specimen as negative-dilute and that a second collection must take place under direct observation.
    - d. The collector observes materials brought to the collection site or the employee's conduct clearly indicates an attempt to tamper with a specimen.

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- e. The temperature on the original specimen was out of range.
- f. Anytime the employee is directed to provide another specimen because the original specimen appeared to have been tampered with.
- g. All follow-up and return-to-duty tests.

### **103.10 ALCOHOL TESTING PROCEDURES**

- A. Tests for breath alcohol concentration will be conducted utilizing a National Highway Traffic Safety Administration (NHTSA)-approved Evidential Breath Testing device (EBT) operated by a trained Breath Alcohol Technician (BAT). Alcohol screening tests may be performed using a non-evidential testing device which is also approved by NHSTA. If the initial test indicates an alcohol concentration of 0.02 or greater, a second test will be performed to confirm the results of the initial test. The confirmatory test must occur on an EBT. The confirmatory test will be conducted no sooner than fifteen minutes after the completion of the initial test. The confirmatory test will be performed using a NHTSA-approved EBT operated by a trained BAT. The EBT will identify each test by a unique sequential identification number. This number, time, and unit identifier will be provided on each EBT printout. The EBT printout, along with an approved alcohol testing form, will be used to document the test, the subsequent results, and to attribute the test to the correct employee. The test will be performed in a private, confidential manner as required by 49 CFR Part 40, as amended. The procedure will be followed as prescribed to protect the employee and to maintain the integrity of the alcohol testing procedures and validity of the test result.
- B. An employee who has a confirmed alcohol concentration of 0.04 or greater will be considered a positive alcohol test and in violation of this policy. The consequences of a positive alcohol test are described in Section 103.12. Even though an employee who has a confirmed alcohol concentration of 0.02 to 0.039 is not considered positive, the employee shall still be removed from duty for at least eight hours, or for the duration of the work day, whichever is longer, and will be subject to the consequences described in Section 103.12 of this policy. An alcohol concentration of less than 0.02 will be considered a negative test.
- C. MARTA affirms the need to protect individual dignity, privacy, and confidentiality throughout the testing process. If at any time the integrity of the testing procedures or the validity of the test results is compromised, the test will be canceled. Minor inconsistencies or procedural flaws that do not impact the test result will not result in a cancelled test.

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D. The alcohol testing form (ATF) required by 49 CFR Part 40 as amended, shall be used for all FTA required testing. Failure of an employee to sign step 2 of the ATF will be considered a refusal to submit to testing.

## **103.11 TYPES OF DRUG AND ALCOHOL TESTING**

### **A. Pre-Employment Testing**

1. All applicants for covered transit positions shall undergo urine drug testing as a condition of employment, and prior to performance of a safety-sensitive function. All offers of employment for covered positions shall be extended conditional upon the applicant passing a drug test. An applicant will not be allowed to perform safety-sensitive functions unless the applicant takes a drug test with verified negative results.
2. An employee shall not be placed, transferred or promoted into a covered position, covered under FTA authority or MARTA authority until the employee takes a drug test with verified negative results.
3. If an applicant fails a pre-employment drug test, the conditional offer of employment shall be rescinded and the applicant will be referred to a Substance Abuse Professional. Before being considered for future employment the applicant must provide the employer proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G. The cost for the assessment and any subsequent treatment will be the sole responsibility of the applicant.
4. When an employee being placed, transferred, or promoted from a non-covered position to a position covered under FTA authority submits a drug test with a verified positive result, the employee shall be subject to disciplinary action accordance with Section 103.11 and 103.12 herein.
5. If a pre-employment/pre-transfer test is cancelled, MARTA will require the applicant to take and pass another pre-employment drug test.
6. In instances where a FTA covered employee has not performed a safety-sensitive function for a period of 90 days or more, regardless of reason, and is not in the random testing pool during that time, the employee will be required to take a pre-employment drug test under 49 CFR Part 655 and have negative test results prior to the conduct of safety-sensitive job functions.
7. Following a negative dilute test result, the employee will be required to undergo another test. Should this second test result in a negative dilute

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result, the test will be considered a negative and no additional testing will be required unless directed to do so by the MRO.

8. Applicants are required (even if ultimately not hired) to provide MARTA with signed written releases requesting FTA drug and alcohol records from all previous DOT-covered employers that the applicant has worked for within the last two years. Failure to do so will result in the employment offer being rescinded. MARTA is required to ask all applicants (even if ultimately not hired) if they have tested positive or refused to test on a pre-employment test for a DOT covered employer. The applicant must provide MARTA proof of having successfully completed a referral, evaluation and treatment plan as described in section 655.62 of subpart G.

## **B. Reasonable Suspicion Testing**

1. All MARTA covered employees will be subject to a reasonable suspicion drug and/or alcohol test when the employer has reasonable suspicion to believe that the covered employee has used a prohibited drug and/or engaged in alcohol misuse. Reasonable suspicion shall mean that there is objective evidence, based upon specific, contemporaneous, articulable observations of the employee's appearance, behavior, speech or body odor that are consistent with possible drug use and/or alcohol misuse. Reasonable suspicion referrals must be made by one or more supervisors who are trained to detect the signs and symptoms of drug and alcohol use, and who reasonably concludes that an employee may be adversely affected or impaired in his/her work performance due to possible prohibited substance abuse or alcohol misuse. A reasonable suspicion alcohol test can only be conducted just before, during, or just after the performance of a safety-sensitive job function. However, under MARTA's authority, a NON-DOT reasonable suspicion alcohol test may be performed anytime the covered employee is on duty using non-DOT forms. A reasonable suspicion drug test can be performed any time the covered employee is on duty.
2. MARTA shall be responsible for transporting the employee to the testing site. Supervisors should avoid placing themselves and/or others into a situation which might endanger the physical safety of those present. The employee shall be placed on administrative leave pending disciplinary action described in Section 103.12 of this policy. An employee who refuses an instruction to submit to a drug/alcohol test shall not be permitted to finish his or her shift and shall immediately be placed on administrative leave pending disciplinary action as specified in Section 103.12 of this policy.
3. A written record of the observations which led to a drug/alcohol test, based on reasonable suspicion, shall be prepared and signed by the supervisor making

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the observation. This written record shall be submitted to MARTA management and shall be attached to the forms reporting the test results.

4. When there are no specific, contemporaneous, articulable objective facts that indicate current drug or alcohol use, but the employee (who is not already a participant in a treatment program) admits the abuse of alcohol or other substances to a supervisor in his/her chain of command, the employee shall be referred for an assessment and treatment consistent with Section 103.11 of this policy. MARTA shall place the employee on administrative leave in accordance with the provisions set forth under Section 103.12 of this policy. Testing in this circumstance would be performed under the direct authority of MARTA. Since the employee self-referred to management, testing under this circumstance would not be considered a violation of this policy or a positive test result under Federal authority. However, self-referral does not exempt the covered employee from testing under Federal authority as specified in Sections 103.08 and 103.09 of this policy or the associated consequences as specified in Section 103.12.

### **C. Post-Accident Testing**

1. **FATAL ACCIDENTS** - All covered employees will be required to undergo urine and breath testing if they are involved in an accident with a transit vehicle, regardless of whether or not the vehicle is in revenue service, that results in a fatality.  
This testing requirement also includes all surviving covered employees that are operating the vehicle at the time of the accident and any other whose performance could have contributed to the accident.
2. **NON-FATAL ACCIDENTS** - A post-accident test of the operator will be conducted if an accident results in injuries requiring immediate transportation to a medical treatment facility; or one of more vehicles incurs disabling damage, unless the operator's performance can be completely discounted as a contributing factor to the accident.
  - a. As soon as practicable following an accident, as defined in this policy, the transit supervisor investigating the accident will notify the transit employee operating the transit vehicle and all other covered employees whose performance could have contributed to the accident of the need for the test. The supervisor will make the determination using the best information available at the time of the decision.
  - b. The appropriate transit supervisor shall ensure that an employee, required to be tested under this section, is tested as soon as practicable, but no longer than eight (8) hours of the accident for alcohol, and within 32 hours



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for drugs. If an alcohol test is not performed within two hours of the accident, the Supervisor will document the reason(s) for the delay. If the alcohol test is not conducted within (8) eight hours, or the drug test within 32 hours, attempts to conduct the test must cease and the reasons for the failure to test documented.

- c. Any covered employee involved in an accident must refrain from alcohol use for eight (8) hours following the accident, or until he/she undergoes a post-accident alcohol test.
- d. An employee who is subject to post-accident testing who fails to remain readily available for such testing, including notifying a supervisor of his or her location if he or she leaves the scene of the accident prior to submission to such test, may be deemed to have refused to submit to testing.
- e. Nothing in this section shall be construed to require the delay of necessary medical attention for the injured following an accident, or to prohibit an employee from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident, or to obtain necessary emergency medical care.
- f. In the rare event that MARTA is unable to perform an FTA drug and alcohol test (i.e., employee is unconscious, employee is detained by law enforcement agency), MARTA may use drug and alcohol post-accident test results administered by local law enforcement officials in lieu of the FTA test. The local law enforcement officials must have independent authority for the test and the employer must obtain the results in conformance with local law.

#### **D. Random Testing**

1. All covered employees will be subjected to random, unannounced testing. The selection of employees shall be made by a scientifically valid method of randomly generating an employee identifier from the appropriate pool of safety-sensitive employees.
2. The dates for administering unannounced testing of randomly selected employees shall be spread reasonably throughout the calendar year, day of the week and hours of the day.
3. The number of employees randomly selected for drug/alcohol testing during the calendar year shall be not less than the percentage rates established by Federal regulations for those safety-sensitive employees subject to random testing by Federal regulations. The current random testing rate for drugs

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established by FTA equals twenty-five percent of the number of covered employees in the pool and the random testing rate for alcohol established by FTA equals ten percent of the number of covered employees in the pool.

4. Each covered employee shall be in a pool from which the random selection is made.
5. Each covered employee in the pool shall have an equal chance of selection each time the selections are made. Employees will remain in the pool and subject to selection, whether or not the employee has been previously tested. There is no discretion on the part of management in the selection.
6. Random tests can be conducted at any time during an employee's shift for drug testing. Alcohol random tests can be performed just before, during, or just after the performance of a safety sensitive duty. Testing can occur during the beginning, middle, or end of an employee's shift.
7. Employees are required to proceed immediately to the collection site upon notification of their random selection.

#### **E. Return to Duty Testing**

MARTA will terminate the employment of any employee that tests positive or refuses a test as specified in Section 103.12 of this policy. However, in the rare event an employee is reinstated with court order or other action beyond the control of MARTA, the employee must have completed the return-to-duty process prior to the performance of safety-sensitive functions. All covered employees who previously tested positive on a drug or alcohol test or refused a test, must test negative for drugs, alcohol (below 0.02 for alcohol), or both and be evaluated and released by the Substance Abuse Professional (SAP) and must test negative before returning to work. For an initial positive drug test a Return-to-Duty drug test is required and an alcohol test is allowed. For an initial positive alcohol test a Return-to-Duty alcohol test is required and a drug test is allowed. Following the initial assessment, the SAP will recommend a course of rehabilitation unique to the individual. The SAP will recommend the return-to-duty test only when the employee has successfully completed the treatment requirement and is known to be drug and alcohol-free and there are no undo concerns for public safety.

#### **F. Follow-Up Testing**

Covered employees that have returned to duty following a positive or refused a test will be required to undergo frequent, unannounced drug and/or alcohol testing following their return-to-duty. The follow-up testing will be performed for a period of one to five years with a minimum of six tests to be performed the first year. The frequency and duration of the follow-up tests (beyond the minimums)

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will be determined by the SAP reflecting the SAP's assessment of the employee's unique situation and recovery progress. Follow-up testing should be frequent enough to deter and/or detect a relapse. Follow-up testing is separate and in addition to the random, post-accident, reasonable suspicion and return-to-duty testing.

In the instance of a self-referral or a management referral, the employee will be subject to non-USDOT follow-up tests and follow-up testing plans modeled using the process described in 49 CFR Part 40. However, all non-USDOT follow-up tests and all paperwork associated with an employee's return-to-work agreement that was not precipitated by a positive test result (or refusal to test) does not constitute a violation of the Federal regulations will be conducted under company authority and will be performed using non-DOT testing forms.

#### **103.12 POLICY COMPLIANCE/RESULT OF A DRUG/ALCOHOL TEST**

- 1) Any safety-sensitive employee whose conduct is found to be in violation of this policy will be removed from his/her safety-sensitive position and is subject to disciplinary action, including suspension or termination.
- 2) Any safety-sensitive employee who refuses to submit to any of the required drug and/or alcohol testing will be subject to disciplinary action, which will include suspension and/or discharge.
- 3) Any employee who has a positive test under any testing circumstance or who otherwise violates this policy in any manner within the Return-to-Work Agreement time period will be discharged.
- 4) Any covered employee that has a verified positive drug or alcohol test or refuses to submit to testing will be removed from his/her safety-sensitive position, informed of educational and rehabilitation programs available, referred to a Substance Abuse Professional (SAP) for assessment, and will be terminated.
- 5) Following a negative dilute, the employee will be required to undergo another test. Should this second test result in a negative dilute result, the test will be considered a negative and no additional testing will be required, unless directed to do so by the MRO.
- 6) Refusal to submit to a drug/alcohol test shall be considered a positive test result and a direct act of insubordination and shall result in termination and referral to a SAP. A test refusal includes the following circumstances:
  - A covered employee leaves the scene of an accident without a legitimate explanation prior to submission to drug/alcohol tests;
  - A covered employee fails to appear for any test (excluding pre-employment) within a reasonable time, as determined by the employer, after being directed to do so by the employer;

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- A covered employee fails to remain at the testing site until the testing process is complete;
  - A covered employee fails to attempt to provide a urine or breath specimen for any drug or alcohol test required by Part 40 or DOT agency regulations;
  - In the case of a directly observed or monitored collection in a drug test, the employee fails to permit the observation or monitoring of the provision of a specimen;
  - A covered employee fails to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was no adequate medical explanation for the failure;
  - A covered employee fails or declines to take a second test the employer or collector has directed the employee to take;
  - A covered employee fails to undergo a medical examination or evaluation, as directed by the MRO as part of the verification process, or as directed by the DER as part of the “shy bladder” or “shy lung” procedures;
  - A covered employee fails to cooperate with any part of the testing process (e.g., refuse to empty pockets when so directed by the collector, behave in a confrontational way that disrupts the collection process);
  - The MRO reports that there is a verified adulterated or substituted test result;
  - A covered employee fails or refuses to sign Step 2 of the alcohol testing form;
  - For a directly observed collection, a covered employee fails to follow the observer’s instructions to raise clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if any type of prosthetic or other device that could be used to interfere with the collection process is present;
  - A covered employee possess or wears a prosthetic or other device that could be used to interfere with the collection process; or
  - A covered employee admits to the collector or MRO that they have adulterated or substituted the specimen.
- 7) An alcohol test result of  $\geq 0.02$  to  $\leq 0.039$  BAC is not considered a positive test result, but shall result in the removal of the employee from duty for eight hours or the remainder of the work day, whichever is longer. The employee will not be allowed to return to safety-sensitive duty for his/her next shift until he/she submits to an alcohol test with a result of less than 0.02 BAC. If the employee has an alcohol test result of  $>0.02$  to  $<0.039$  two or more times within a six month period, the employee will be removed from duty and referred for assessment and treatment consistent with Section 103.11 of this policy.

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- 8) In the instance of a self-referral or a management referral, disciplinary action against the employee shall include:
- a. Mandatory referral for an assessment by an employer approved counseling professional for assessment, formulation of a treatment plan, and execution of a return to work agreement.
  - b. Failure to execute, or remain compliant with the return-to-work agreement shall result in termination from MARTA employment.  
  
Compliance with the return-to-work agreement means that the employee has submitted to a drug/alcohol test immediately prior to returning to work; the result of that test is negative; is complying with the recommended treatment program; and the employee has agreed to periodic unannounced follow-up testing as defined in Section 103.11 of this policy.
  - c. Refusal to submit to periodic to unannounced follow-up drug/alcohol test shall be considered a direct act of insubordination and shall result in termination. All tests conducted as part of the return to work agreement will be conducted under MARTA authority and will be performed using a non-DOT testing forms.
  - d. A self-referral or management referral to the employer's approved counseling professional that was not precipitated by a positive test result does not constitute a violation of the Federal regulations and will not be considered as a positive test result in relation to progressive discipline as defined in Section 103.12 of this policy.
  - e. Periodic unannounced follow-up drug/alcohol test conducted as a result of a self-referral or management referral which results in a verified positive shall be considered a positive test result in relation to the progressive discipline defined in Section 103.12 of this policy.
  - f. A Voluntary Referral does not shield an employee from disciplinary action or guarantee employment with MARTA.
  - g. A Voluntary Referral does not shield an employee from the requirement to comply with drug and alcohol testing.
- 9) Failure of an employee to report within five days a criminal drug statute conviction for a violation occurring in the workplace shall result in termination.

### **103.13 GRIEVANCE AND APPEAL**

The consequences specified by 49 CFR Part 40.149 (c) for a positive test or test refusal is not subject to arbitration.

### **103.14 PROPER APPLICATION OF THE POLICY**

MARTA is dedicated to assuring fair and equitable application of this substance abuse policy. Therefore, supervisors/managers are required to use and apply all

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aspects of this policy in an unbiased and impartial manner. Any supervisor or manager who knowingly disregards the requirements of this policy, or who is found to deliberately misuse the policy in regard to subordinates, shall be subject to disciplinary action, up to and including termination.

### **103.15 INFORMATION DISCLOSURE**

- A. Drug/alcohol testing records shall be maintained by MARTA's Drug and Alcohol Program Manager and, except as provided below or by law, the results of any drug/alcohol test shall not be disclosed without express written consent of the tested employee.
- B. The employee, upon written request, is entitled to obtain copies of any records pertaining to their use of prohibited drugs or misuse of alcohol including any drug or alcohol testing records. Covered employees have the right to gain access to any pertinent records such as equipment calibration records, and records of laboratory certifications. In addition, employees have the right to gain access to all documents related to their SAP referral/return-to-duty program. Employees may not have access to follow-up testing plans.
- C. Records of a verified positive drug/alcohol test result shall be released to the Drug and Alcohol Program Manager, Department Supervisor and Personnel Manager on a need to know basis.
- D. Records will be released to a subsequent employer only upon receipt of a written request from the employee.
- E. Records of an employee's drug/alcohol tests shall be released to the adjudicator in a grievance, lawsuit, or other proceeding initiated by or on behalf of the tested individual arising from the results of the drug/alcohol test. The records will be released to the decision maker in the preceding. Records will be released to the National Transportation Safety Board during an accident investigation.
- F. Information will be released in a criminal or civil action resulting from an employee's performance of safety-sensitive duties, in which a court of competent jurisdiction determines that the drug or alcohol test information is relevant to the case and issues an order to the employer to release the information. The employer will release the information to the decision maker in the proceeding with a binding stipulation that it will only be released to parties of the proceeding.
- G. Records will be released to the DOT or any DOT agency with regulatory authority over the employer or any of its employees.
- H. Records will be released if requested by a Federal, state or local safety agency with regulatory authority over MARTA or the employee.

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- I. If a party seeks a court order to release a specimen or part of a specimen contrary to any provision of Part 40 as amended necessary legal steps to contest the issuance of the order will be taken.
  
- J. In cases of a contractor or sub-recipient of a state department of transportation, records will be released when requested by such agencies that must certify compliance with the regulation to the FTA.

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## **SYSTEM CONTACTS**

Any questions regarding this policy or any other aspect of the substance abuse policy should be directed to the following individual(s).

### **MARTA Drug and Alcohol Program Manager**

Name: Lois Lane  
 Title: Operations Supervisor/Trainer  
 Address: 41939 Fox Farm Rd., Big Bear Lake, CA 92315  
 Telephone: (909) 878-5200 / (909) 338-1113  
 FAX: (909) 878-5207

### **MARTA Drug and Alcohol Program Manager (Alternate Contact)**

Name: Kathy Hawksford  
 Title: General Manager/CEO  
 Address: 41939 Fox Farm Rd., Big Bear Lake, CA 92315  
 Telephone: (909) 878-5200  
 FAX: (909) 878-5207

### **Medical Review Officer**

Name: Ram Kamath, MD  
 Title: Certified Medical Review Officer  
 Address: 11687 Hesperia Rd., Hesperia, CA 92345  
 Telephone: (760) 244-6886  
 FAX: (760) 244-6061

### **Substance Abuse Professional**

Name: Liane Hileman, SAP  
 Title: Licensed Clinical Social Worker, LCS 11938  
 Address: 4515 Central Avenue, Suite 203, Riverside, CA 92506-2374  
 Telephone: (951) 369-6118  
 FAX: (951) 788-4486

### **Substance Abuse Professional**

Name: Hill Counseling  
 Title:  
 Address: 42145 Lyndie Lane, Temecula, CA 92591  
 Telephone:  
 FAX: (951) 303-1230



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Substance Abuse Professional

Name: Inland Valley Recovery Service  
 Title:  
 Address: 916 N. Mountain Ave., Upland, CA  
 Telephone: (909) 949-4667 (909) 421-9465  
 FAX: (909) 932-1069

HHS Certified Laboratory Primary Specimen

Name: PacTox Laboratories (Pacific Toxicology Laboratories)  
 Address: 9348 De Soto Avenue, Chatsworth, CA 91311  
 Telephone: (800) 328-6942  
 FAX: (818) 598-3116

HHS Certified Laboratory Split Specimen

Name: To be determined  
 Address:  
 Telephone:  
 FAX:

Third Party Administrator

Name: Mobile Occupational Services  
 Address: 11687 Hesperia Rd., Hesperia CA, 92345  
 Contact: Ellie Millar/Michael Pawsey  
 Telephone: (760) 244-6886  
 FAX: (760) 244-6061

Employee Assistance Program

Name: RIM Family Services  
 Address: 28545 Highway 18, Skyforest, CA 92385  
 Telephone: (909) 336-1800  
 FAX: (909) 336-0990

Member Assistance Program (Teamsters)

Name: Health Management Concepts, Inc.  
 Address:  
 Telephone: (800) 633-1231  
 FAX:

Testing

Name: Big Bear Valley Medical Group  
 Address: 41930 Garstin Dr., Big Bear Lake, 92315  
 Telephone: (909) 866-6567

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### Testing

**Name:** Fox Medical Group  
**Address:** 1375 Camino Real, Suite 130, San Bernardino, CA 92408  
**Telephone:** (909) 884-1500 (909) 327-8624 (after hrs)  
**FAX:**  
**Note:** Call FOX after hours (909) 327-8624 before sending employee. Staff will meet you at the clinic.

### After hours testing

**Name:** Loma Linda University Occupational Health Care  
**Address:** 25455 Barton Rd., Suite 106 B, Loma Linda, CA 92354  
**Telephone:** (909) 558-6222

### After hours testing

**Name:** US Healthworks—San Bernardino  
**Address:** 599 Inland Center Dr., Suite 105, San Bernardino, CA 92408  
**Telephone:** (909) 889-2665

### Alcohol Testing

**Name:** San Bernardino Sheriff's Dept.  
**Address:** 477 Summit Blvd., Big Bear Lake, CA 92315  
**Telephone:** (909) 866-0100

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## **Attachment A**

<b>Job Title</b>	<b>Job Duties</b>	<b>Testing Authority</b>
Driver	Operates transit revenue vehicle	FTA
Dispatcher	Dispatches transit revenue vehicles	FTA
Mechanic	Services/Repairs transit vehicles	FTA
Mechanic Helper	Services/Repairs transit vehicles	FTA
Operations Supervisor	Operates/dispatches transit revenue vehicles	FTA
Maintenance Manager	Services/Repairs transit vehicles	FTA

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## **Attachment B**

### **Alcohol Fact Sheet**

**Alcohol is a socially acceptable drug that has been consumed throughout the world for centuries. It is considered a recreational beverage when consumed in moderation for enjoyment and relaxation during social gatherings. However, when consumed primarily for its physical and mood-altering effects, it is a substance of abuse. As a depressant, it slows down physical responses and progressively impairs mental functions.**

#### **❖ Signs and Symptoms of Use**

- Dulled mental processes
- Lack of coordination
- Odor of alcohol on breath
- Possible constricted pupils
- Sleepy or stuporous condition
- Slowed reaction rate
- Slurred speech

(Note: Except for the odor, these are general signs and symptoms of any depressant substance.)

#### **❖ Health Effects**

The chronic consumption of alcohol (average of three servings per day of beer [12 ounces], whiskey [1 ounce], or wine [6 ounce glass]) over time may result in the following health hazards:

- Decreased sexual functioning
- Dependency (up to 10 percent of all people who drink alcohol become physically and/or mentally dependent on alcohol and can be termed “alcoholic”)
- Fatal liver diseases
- Increased cancers of the mouth, tongue, pharynx, esophagus, rectum, breast, and malignant melanoma
- Kidney disease
- Pancreatitis
- Spontaneous abortion and neonatal mortality
- Ulcers
- Birth defects (up to 54 percent of all birth defects are alcohol related).

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## **Attachment B (continued)**

### ❖ Social Issues

- Two-thirds of all homicides are committed by people who drink prior to the crime.
- Two to three percent of the driving population is legally drunk at any one time. This rate is doubled at night and on weekends.
- Two-thirds of all Americans will be involved in an alcohol-related vehicle accident during their lifetimes.
- The rate of separation and divorce in families with alcohol dependency problems is 7 times the average.
- Forty percent of family court cases are alcohol problem related.
- Alcoholics are 15 times more likely to commit suicide than are other segments of the population.
- More than 60 percent of burns, 40 percent of falls, 69 percent of boating accidents, and 76 percent of private aircraft accidents are alcohol related.

### ❖ The Annual Toll

- 24,000 people will die on the highway due to the legally impaired driver.
- 12,000 more will die on the highway due to the alcohol-affected driver.
- 15,800 will die in non-highway accidents.
- 30,000 will die due to alcohol-caused liver disease.
- 10,000 will die due to alcohol-induced brain disease or suicide.
- Up to another 125,000 will die due to alcohol-related conditions or accidents.

### ❖ Workplace Issues

- It takes one hour for the average person (150 pounds) to process one serving of an alcoholic beverage from the body.
- Impairment in coordination and judgment can be objectively measured with as little as two drinks in the body.
- A person who is legally intoxicated is 6 times more likely to have an accident than a sober person.