



Risk Management Guidelines

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Subject: REASONABLE SUSPICION TESTING
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Introduction

The drug and alcohol regulations issued by the Department of Transportation have a singular objective: to prevent accidents, injury and death caused by drivers who are under the influence of drugs or alcohol. School districts also have a zero drug and alcohol tolerance for both staff and students. As a supervisor, dispatcher, safety director, operations manager or any other person who supervises drivers or school employees, you play an important role in fulfilling those requirements.

The risk managers of CRMA will provide Reasonable Suspicion Testing for any member who would like or need to receive the training. This Guideline is a reference for those who have been through the training program and may need to refer to some of the basic elements of the program.

Reasonable Suspicion Requirements

1. An employer must require a driver to submit to an alcohol test and/or controlled substances test when the employer has reasonable suspicion to believe that the driver has violated the prohibitions of subpart B concerning alcohol and/or controlled substances.
2. The employer's determination that reasonable suspicion exists to require the specific, contemporaneous, articulable observations concerning the appearance, behavior, speech or body odors of the driver. **Note:** "*Contemporaneous*" means that the driver's suspicious behavior is happening as you observe it. "*Articulable*" means you must be able to describe your observations clearly. You cannot require a test based on hearsay or your intuition.
3. The employer's determination that reasonable suspicion exists to require the driver to undergo a *controlled substances* test may also be based on indications of the chronic and withdrawal effects of controlled substances.
4. Observations for alcohol and/or controlled substances reasonable suspicion testing must be made by a supervisor who is properly trained in reasonable suspicion (Sec. 382.603).
5. Observations for ordering reasonable suspicion testing for alcohol must be made during, just preceding or just after the period of the work day that the driver is required to be in compliance with the alcohol regulations.
6. A driver may only be directed to undergo a reasonable suspicion test for alcohol just before, during or just after performing safety-sensitive functions.
7. If a reasonable suspicion test for alcohol is not administered within two hours of the observation, a record must be prepared stating the reasons the test was not given. After

eight hours have passed without the administration of an alcohol test, a written document must be filed stating the reason why it was not given promptly, and all attempts to give the test should be stopped.

8. The person who makes the determination that reasonable suspicion exists shall not be the same person to conduct the alcohol test.
9. No driver shall report for duty or continue to perform safety-sensitive functions while he or she is under the influence of or impaired by alcohol as shown by the behavior, speech, and performance indicators of alcohol misuse.
10. The employer must not permit a driver to perform or continue to perform safety-sensitive functions until an alcohol test is administered and the driver's alcohol concentration measures less than 0.02---or---24 hours have elapsed following the determination that there is reasonable suspicion to believe the driver has violated the prohibitions concerning the use of alcohol.
11. A reasonable suspicion test for controlled substances may be administered based on observations made at any time the driver is on duty.
12. A written record must be made of the observations leading to an alcohol or controlled substance reasonable suspicion test within 24 hours of the observed behavior or before the results of the test(s) are released, whichever comes earlier.

Summary of Requirements

Simply stated, you must be able to explain to the driver, and clearly state in a report, exactly what physical, behavioral, speech or performance indicators you observed that signal possible use of drugs or alcohol. You must witness these things yourself. *For alcohol* the observations must be made just prior to, during or just after a driver performs a safety-sensitive function; *for controlled substances* the observations can be made any time the driver is on duty.

Examples of Observed Behavior

WALKING/BALANCE: stumbling, swaying, sagging at knees, staggering, unsteady gait, feet wide apart, falling, holding onto something, unable to stand, rigid

SPEECH: shouting, slurred, whispering, slobbering, slow, incoherent, rambling

ACTIONS: resisting communications, fighting/insubordinate, hyperactive, insulting, profanity, crying, hostile, threatening, indifferent, drowsy, erratic

EYES: bloodshot, droopy, watering, closed, dilated, wearing sunglasses, glassy

FACE: flushed, pale, sweaty

APPEARANCE/CLOTHING: disheveled, having odor, messy, stains on clothing, dirty partially dressed

BREATH: alcoholic odor, faint alcohol odor, no alcohol odor, marijuana odor

MOVEMENTS: fumbling, hyperactive, jerky, slow, nervous

EATING/CHEWING: gum, candy, mints, tobacco, other

What if a Driver Refuses to be Tested?

A refusal to test is treated the same as a positive test. If a driver refuses to be tested, he/she cannot continue to perform safety-sensitive functions.

“Refusal” occurs when a driver:

1. Fails to appear for any test within a reasonable time
2. Fails to remain at the testing site until the testing process is complete
3. Fails to provide:
 - a) A urine specimen for drug testing or
 - b) A saliva or breath specimen for alcohol testing
4. Fails to provide enough urine and there is no medical explanation for the failure
5. In the case of a directly observed or monitored collection in a drug test, fails to permit the observation or monitoring of his/her provision of the specimen
6. Fails or declines taking a second drug test when directed by an employer or collector
7. Fails to undergo a medical examination or evaluation as part of:
 - a) The verification process for drug testing or as directed by the designated employer representative (DER)
 - b) “shy bladder” procedures for drug testing or
 - c) Insufficient breath procedures for alcohol testing
8. Fails to cooperate with any part of the testing process
9. A verified adulterated or substituted drug test

What Happens if a Driver Fails an Alcohol Test:

- 1. A driver must be removed from all safety-sensitive functions.**
2. A driver may not return to a safety-sensitive function until an evaluation has been done by a substance abuse professional (SAP), driver has complied with treatment prescribed and passes a return-to-duty test. The driver is then subject to six follow-up tests in the first 12 months after the return to duty and may be subject to follow-up testing for up to five years.
3. Driver may not return to safety-sensitive duties for at least 24 hours if alcohol concentration is determined to be 0.02 or greater but less than 0.04.

What Happens if a Driver Tests Positive For Drugs:

1. **A driver must be removed from all safety-sensitive functions.**
2. A driver may not return to a safety-sensitive function until an evaluation has been done by a SAP, driver has complied with treatment prescribed by the SAP and passes a return-to-duty test. The driver is then subject to six follow-up tests in the first 12 months after the return to duty and may be subject to follow-up testing for up to five years.
3. Additional consequences of positive test results will be handled according to your school district.

Warning Signs of Alcoholism

1. Increased difficulty at home. Conflicts, absences, disappearances, and discrepancies.
2. Significant emotional and behavior changes. Family, friends, and coworkers concerned about behavior.
3. Unexplained absenteeism at work. Isolates and withdraws.
4. Alterations in lifestyle to accommodate alcohol use. Lies about use.
5. Frequent illness. Need for medication/over-prescribing.
6. Legal as, lawsuits, and financial troubles. DUIs, lawsuits, debts, etc.
7. Difficulties dealing with coworkers.
8. Continued use of alcohol with elaborate justification for need.

Signs and Symptoms of Alcohol Use

1. Dulled mental processes
2. Lack of coordination
3. Odor of alcohol on breath
4. Pupils may be constricted
5. Sleepy or stuporous condition
6. Slowed reactions
7. Slurred speech
8. Greatly impaired driving ability
9. Reduced coordination and reflex actions
10. Impaired vision and judgment
11. Inability to divide attention
12. Lowering of inhibitions
13. Headaches, Nausea, dehydration, unclear thinking, unsettled digestion and aching muscles are associated with overindulgence (hangover)

What You Should Look For When Determining Reasonable Suspicion for Alcohol

1. Slurred speech
2. Bloodshot, watery eyes
3. Poor balance
4. Odor on breath

5. Involuntary, sudden movement of the eyes

Warning Signs of Substance Abuse

1. Excessive absences and/or tardiness (especially after a weekend or holiday)
2. Frequent requests for time off
3. Numerous accidents without explanation
4. Noticeable increase in medical insurance claims, particularly nonjob-related injuries
5. Unsatisfactory work performance
6. Nonwork-related visits from other employees or strangers
7. Secretive behavior, defensive attitude
8. Drowsiness, slurred speech, lack of coordination, inability to concentrate, nausea or other physical symptoms
9. Agitation, rapid or slurred speech, dizziness, dilated pupils
10. Bloodshot eyes, runny nose
11. Drastic weight changes
12. Marked change in mood, attitude and behavior
13. Deterioration in personal grooming and hygiene
14. Wearing sunglasses and long sleeved shirts at inappropriate or unusual times to hide dilated pupils or needle marks
15. Frequent need to borrow money or theft from employer
16. Avoidance of supervisors

9 Signs of Substance Abuse

1. Increased tolerance to alcohol. *"I can drink them under the table."*
2. Occasional or partial memory lapse. *"Did I really do that last night?"*
3. Drinking beyond one's intensions. *"Boy did I get smashed! I should have eaten something."*
4. Increased dependence on alcohol and/or drugs. *"I can't wait...got to have a quickie."*
5. Sneaking drinks or drugs. *"I needed that extra hit...who's to know?"*
6. Preoccupation with alcohol or drugs. *"Election day tomorrow...better pick up a bottle. Have to celebrate (whatever)."*
7. Resentful whenever one's drinking or drug use is discussed. *"It's none of their business...I can handle it."*
8. Futile, frustrating attempts to get clean and sober. *"This time I'll do it...I just have to."*
9. Rationalizing one's loss of control. *"If they had my problems they'd do it too."*

Signs and Symptoms of Marijuana Use

1. Reddened eyes
2. Slowed speech
3. Distinctive, pungent odor on clothing (aroma of alfalfa combined with incense)

4. Lackadaisical “I don’t care” attitude
5. Chronic fatigue and lack of motivation
6. Irritating cough
7. Chronic sore throat
8. Restlessness
9. Inability to concentrate
10. Increased pulse rate and blood pressure
11. Rapidly changing emotions and erratic behavior
12. Impaired memory and attention
13. Fantasies and paranoia
14. Decrease in/temporary loss of fertility
15. Distorted perception of time
16. Apathy
17. Delayed decision making
18. Aggressive urges
19. Anxiety
20. Confusion

What You Should Look For When Determining Reasonable Suspicion for Marijuana Use

1. Very bloodshot eyes
2. Muscular tremors (involuntary quivering)
3. Impaired time and distance perception
4. Short attention span
5. Disoriented behavior
6. Unable to divide attention

Signs and Symptoms of Cocaine Use

1. Fatigue
2. Anxiety and agitation
3. Runny or irritated nose
4. Difficulty in concentration
5. Dilated pupils and visual impairment
6. High blood pressure, heart palpitations and irregular heart rhythm
7. Insomnia
8. Profuse sweating and dry mouth
9. Impaired driving ability
10. Hallucinations
11. Talkativeness
12. Restless, aggressive behavior
13. Wide mood swings

14. Increased physical activity
15. Heightened, but momentary, feeling of confidence, strength, and endurance
16. Paranoia (which can trigger mental disorders in users prone to mental instability)
17. Repeated sniffing/snorting causes irritation of the nostrils and nasal membrane, which may cause nosebleeds
18. Compulsive behavior such as teeth grinding or repeated hand washing
19. Craving for more cocaine

What You Should Look For When Determining Reasonable Suspicion for Cocaine Use

1. Uncontrolled talkativeness
2. Difficulty focusing the eyes
3. Extremely excitable behavior
4. Dilated pupils
5. Sniffles and/or runny nose
6. Body tremors
7. Teeth grinding
8. Distorted thinking

Signs and Symptoms of Amphetamines and Methamphetamines

1. Hyperexcitability, restlessness, anxiety
2. Dilated pupils
3. Profuse sweating
4. Rapid respiration
5. Difficulty in focusing eyes
6. Exaggerated reflexes, body tremors
7. Impaired driving ability
8. Loss of appetite
9. Headaches/dizziness
10. Confusion
11. Panic
12. Talkativeness
13. Inability to concentrate
14. Short-term insomnia
15. Paranoid thoughts
16. Hallucinations

What You Should Look For When Determining Reasonable Suspicion for Amphetamines and Methamphetamines

1. Dilated pupils
2. Distorted thinking

3. Exaggerated reflexes
4. Hallucinations
5. Repetitive bizarre behavior
6. Jaw grinding
7. Anorexia
8. Loss of coordination
9. Physical collapse

Signs and Symptoms of Opiate Use

1. Mood changes
2. Impaired mental function and alertness
3. Impaired vision
4. Constricted pupils
5. Impaired coordination
6. Impaired driving ability
7. Drowsiness followed by sleep
8. Decreased physical activity
9. Sleeplessness and drug craving
10. Depression and apathy
11. Constipation
12. Nausea and vomiting

What You Should Look For When Determining Reasonable Suspicion for Opiate Use

1. Constricted pupils
2. Droopy eyelids
3. Dry mouth
4. Low, raspy speech
5. Depressed reflexes
6. Poor coordination

Signs and Symptoms of Phencyclidine (PCP) Use

1. Impaired driving ability
2. Impaired coordination
3. Thick, slurred speech
4. Severe confusion and agitation
5. Muscle rigidity
6. Profuse sweating
7. Loss of concentration and memory
8. Extreme mood shift
9. Nystagmus (jerky, involuntary eye movements)

10. Rapid heartbeat
11. Dizziness
12. Convulsions
13. Memory Loss

What You Should Look For When Determining Reasonable Suspicion for Phencyclidine (PCP) Use

1. Impaired driving ability
2. Thick, slurred speech
3. Poor coordination
4. Violent, combative behavior
5. Behavior recurring in cycles
6. Involuntary eye movement
7. Confusion. Loss of memory
8. Disoriented to time and environment

OBSERVED BEHAVIOR REASONABLE SUSPICION RECORD

PERSONNEL OFFICE USE ONLY

Employee Number _____

Location _____

Incident Number _____

DRIVER'S NAME _____	DATE OBSERVED _____
ADDRESS OF INCIDENT: Street _____ City _____ State _____ Zip Code _____	TIME OBSERVED FROM _____ a.m. p.m. TO _____ a.m. p.m.

Record employee observed behavior for reasonable suspicion for the use of alcohol or controlled substances. According to 49 CFR §382.307 *Reasonable Suspicion Testing*, the employer shall require the driver to submit to a controlled substance or alcohol test if a supervisor or company official who is trained in accordance with §382.603 determines that reasonable suspicion exists.

Reasonable suspicion determined for: **Alcohol** **Drugs**

Mark items that apply and describe specifics

- 1. WALKING/BALANCE:**
 Stumbling Staggering Falling Unable to stand
 Swaying Unsteady Holding on Rigid
 Sagging at knees Feet wide apart
- 2. SPEECH:**
 Shouting Whispering Slow Rambling
 Slurred Slobbering Incoherent
- 3. ACTIONS:**
 Resisting communications Insulting Hostile Drowsy
 Fighting/insubordinate Profanity Threatening Erratic
 Hyperactive Crying Indifferent
- 4. EYES:**
 Bloodshot Watery Dilated Glassy
 Droopy Closed Wearing sunglasses
- 5. FACE:**
 Flushed Pale Sweaty
- 6. APPEARANCE/CLOTHING:**
 Disheveled Messy Dirty Partially dressed
 Having odor Stains on clothing
- 7. BREATH:**
 Alcoholic odor Faint alcohol odor No alcohol odor Marijuana odor
- 8. MOVEMENTS:**
 Fumbling Jerky Slow Nervous
 Hyperactive
- 9. EATING/CHEWING:**
 Gum Candy Mints Tobacco
 Other

Other observations: _____

Did employee admit to using drugs or alcohol? Yes No
 When: _____ Substance: _____
 How much: _____ Where taken: _____

WITNESSED BY:

Signature	Title	Preparation date	Time _____ a.m. p.m.
Signature	Title	Preparation date	Time _____ a.m. p.m.

THE ALCOHOL TEST MUST BE ADMINISTERED WITHIN EIGHT HOURS FOLLOWING A REASONABLE SUSPICION DETERMINATION.