


**GUAM MEMORIAL HOSPITAL AUTHORITY
HUMAN RESOURCES MANUAL**

APPROVED BY:  THEODORE M. LEWIS Interim Hospital Administrator CEO	RESPONSIBILITY: <p style="text-align: center;">Hospital Wide</p>	EFFECTIVE DATE: <p style="text-align: center;">May 29, 2012</p>	POLICY NO. <p style="text-align: center;">8650-1.210</p>	PAGE <p style="text-align: center;">1 of 3</p>
TITLE: DRUG FREE WORKPLACE				
LAST REVIEWED/REVISED: August 2009, April 2012; 2015				
ENDORSED: EMC 2012, 2015				

PURPOSE:

1. Employees are the Guam Memorial Hospital Authority's (GMHA) most valuable resource and, therefore, their health and safety is a serious concern. They have the right to work in a drug and alcohol-free environment, GMHA will not tolerate substance abuse or use which affects the health and well-being of its employees or threatens its service to patients and the public.
2. The use of illegal drugs and abuse of controlled substances, on or off-duty, is inconsistent with law abiding behavior expected of all GMHA employees.
 - a. Studies show that employee who use illegal drugs or abuse controlled substances or alcohol, on or off-duty, tend to be less productive, less reliable, prone to greater absenteeism and more accidents. The result is a potential delay in providing services and an increase in operating costs and risk of liability.
 - b. These associated impaired behaviors, threaten GMHA's ability to give quality patient care and service to the public.
 - c. Employees who abuse drugs or alcohol are a danger to themselves, other employees, the patients, and the public. Substance abuse inflicts a terrible toll on **GMHA's** productive resources and the health and well-being of its employees and their families.
3. GMHA will comply with the requirements of the Federal Drug-Free Workplace Act of 1988.
 - a. This policy shall be a part of the GMHA Personnel Rules and Regulations.
 - b. Amendment to Policies and Procedures: The Hospital Administrator reserves the right to modify, supplement, resolve or substitute the policies and procedures stated herein.
 - c. Severability: If any of the provisions of the policies and procedures stated herein or the application for such provisions to any person or circumstances shall be found invalid, the validity of the remainder of the provisions as applied to other persons or circumstances shall not be affected thereby.

POLICY:

The Hospital will not tolerate substance abuse or usage which imperils the health and well-being of its employees or threatens its service to the public. Therefore, it shall be the policy of the Guam Memorial Hospital Authority to maintain a workforce free of substance abuse.

- a. Reporting to work or performing work for the Hospital while impaired by or under the influence of illegal drugs or alcohol is prohibited.
- b. The illegal use, possession, dispensation, distribution, manufacture or sale of a controlled substance by an employee at the hospital, or while the employee is on official GMHA business, or on stand-by duty or off duty is prohibited.
- c. Employees are required by the Drug Free Workplace Act of 1988 to notify the Hospital Administrator or his designee within five (5) days of any criminal drug statute conviction where such conviction was due to an occurrence at the hospital, or while on official business or stand-by or off-duty.
- d. Violation of prohibitions above and/or drug statute Convictions will result in disciplinary actions up to and including termination.
- e. Each GMHA employee will be given a copy of the GMHA Drug Free Work-place Policy New employees shall receive this policy at orientation.
- f. GMHA employees must abide by the terms of this policy as a condition of employment.
- g. Current and new employees must read and sign the Drug Free Workplace Affirmation Form and it will be made a part of their permanent personnel file.

APPLICABILITY: The Drug Free Workplace Policy applies to all GMHA employees working in a classified, unclassified, and contractual capacity; and to applicants that are tentatively selected for employment.

ASSISTANCE PROGRAM: GMHA will provide reasonable effort to make available employee assistance programs (subject to the limitation of availability of local resources) to GMHA employees for substance abuse education, counseling or rehabilitation. The Hospital encourages voluntary treatment for substance abuse.

AWARENESS PROGRAM: The Guam Memorial Hospital Authority will strive to educate employees about the dangers of substance abuse. The Hospital will establish a Substance Abuse Awareness Program to assist employees to understand and avoid the perils of drug and alcohol abuse. The Hospital will use the program in an ongoing educational effort to prevent and eliminate substance abuse that may affect the Hospital's workforce.

The Substance Abuse Awareness Program will contain provisions to inform employees about the: (1) Dangers of alcohol and drug abuse; (2) GMHA Drug Free Workplace Policy; (3) Availability of treatment and counseling for employees who voluntarily seek such assistance; and (4) Sanctions the Hospital will impose for violations of its Drug Free Workplace Policy.

DRUG SCREENING PROGRAM: Upon initial implementation of this program, all employees of the Guam Memorial Hospital Authority will be required to submit for a drug screening test. The first drug screening test for all employees shall be conducted and scheduled by the Hospital Administrator or his/her designee within a reasonable time after the effective date of this policy. Employees will be notified as to when the testing will begin to take place. A Drug Screening Program shall be established for this purpose.

NATURE AND FREQUENCY OF DRUG TESTING:

A. NATURE: GMHA's drug testing program includes the following types of drug testing:

- (1) Applicant testing;
- (2) Random testing of those employees in sensitive positions that have been designated as testing designated positions;
- (3) Reasonable suspicion testing;
- (4) Voluntary testing;
- (5) Accident or unsafe practice testing; and
- (6) Testing as part of or as follow-up to counseling or rehabilitation.

B. **FREQUENCY:** GMHA reserves the right to increase or decrease the frequency of testing based on the needs of GMHA, availability of resources, and experience in the program, consistent with the duty to achieve a drug-free workplace.

PROCEDURE:

The Hospital shall follow the procedures in the Drug Free Work Place policy adopted by the hospital pertaining to:

1. Purpose
2. Drug Testing
 - Applicant Testing
 - Random Drug Testing
 - Reasonable Suspicion Testing
 - Accident or Unsafe Testing
 - Voluntary Testing
 - Follow-up Testing
3. Awareness Program
4. Collection Sites and Laboratory Procedures
5. Employee Assistant Programs (EAP)

REFERENCE:

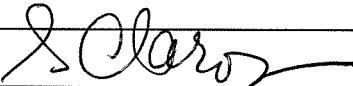
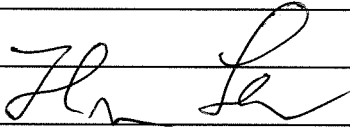
GMHA Drug Free Workplace Policy and Procedures Manual.

GUAM MEMORIAL HOSPITAL AUTHORITY

REVIEW AND ENDORSEMENT CERTIFICATION

The signatories on this document acknowledge that they have reviewed and endorsed the following:

- | | | |
|---|--|---|
| <input type="checkbox"/> Bylaws | Submitted by | Department/Committee: <u>Human Resources Department</u> |
| <input type="checkbox"/> Rules & Regulations | Title: <u>Drug Free Work Place</u> | |
| <input checked="" type="checkbox"/> Policies & Procedures | Policy Number (if applicable): <u>8650-1.210</u> | |

	Date	Signature
Reviewed	8/13/15	
Endorsed		
Title	Elizabeth M. Claros: Personnel Services Administrator	
Reviewed		
Endorsed		
Title	Associate Administrator, Operations	
Reviewed	10/13/15	
Endorsed		
Title	Theordore M. Lewis, Interim Hospital Administrator/CEO, EMC Committee	
Reviewed		
Endorsed		
Title		
Reviewed		
Endorsed		
Title		
Reviewed		
Endorsed		
Title		

Guam Memorial Hospital Authority
Aturidåt Espetåt Mimuriåt Guåhan

850 GOV. CARLOS CAMACHO ROAD
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FAX: (671) 649-0145

October 13, 1999

INFORMATIONAL CIRCULAR NO. 99-119

TO: All GMHA Employees
FROM: Hospital Administrator
SUBJECT: Implementation of Executive Order No. 99-15
Re: GMHA Drug Free Workplace Policy

Please be advised that Executive Order No. 99-15 relative to adopting and promulgating a comprehensive GMHA Drug Free Workplace Policy which includes mandatory drug testing as a condition of employment and the procedures for dealing with illegal drug use in the workplace has been signed by the Governor on October 3, 1999.

In this regard, a Statement of Policy is hereby attached for your information and guidance. Please read and be knowledgeable of the statement of policy. This policy also serves as a notice that employees are given sixty (60) days notice prior to the implementation of the drug-testing program. All employees must complete and submit the attached Affirmation of Policy Form (APF) to their supervisors no later than October 19, 1999. All supervisors must turn in these forms to Personnel Office by October 20, 1999.

Your utmost cooperation is highly appreciated.


FYRONE J. TAITANO

Attachment

GUAM MEMORIAL HOSPITAL AUTHORITY

AFFIRMATION OF POLICY FORM (APF)

Statement of Policy

The Guam Memorial Hospital Authority is committed to a drug-free workforce to protect the safety of workers and the public. GMHA will not tolerate substance abuse or usage which imperils the health and well-being of its employees or threatens its service to the public. Therefore, it shall be the policy of GMHA to maintain a workforce free of substance abuse.

It is the policy of the Guam Memorial Hospital Authority that applicants are given a conditional offer of employment shall take a drug screen to show they are drug free. In order to protect the safety of employees and the public, no applicant whose test shows illegal drug use will have his/her employment considered.

It is the policy of the Guam Memorial Hospital Authority that employees may be required to take a drug screen to show they are drug-free if there is reasonable suspicion of illegal drug use. GMHA will give current employees an opportunity to rehabilitate and return to their jobs as productive members of the workforce. Current employees who do not rehabilitate or who have a second test which shows illegal drug use may be disciplined in accordance with the Civil Service Commission Adverse Action Procedures.

It is the policy of the Guam Memorial Hospital Authority to inform applicants and employees of drug screening programs prior to drug tests being conducted. Employees will be given sixty (60) days notice prior to the implementation of the drug testing program. GMHA will consider drug screening results and medical information provided by applicants and employees as confidential.

Affirmation of Policy

As an applicant or an employee, I affirm that I have read and understood the meaning of the above statement of policy regarding the Guam Memorial Hospital Authority's Drug Screening Program. As an applicant, I am aware that my offer of employment is conditional upon the results of a drug screen. As an employee of the GMHA, I am aware that I may be required to undergo a drug screen based upon reasonable suspicion, that I will be informed prior to the drug screen, and that I may be referred to an educational and treatment program depending on the results of the drug screen.

Name of Applicant or Employee: _____

Social Security No.: _____ Badge No.: _____

Department/Section: _____

Signature of Applicant or Employee

Date

Signature of Department Head

Date

- Original: Personnel Jacket
- 1st copy: Department
- 2nd copy: Employee/Applicant
- 3rd copy: Personnel Services Department



TERRITORY OF GUAM
OFFICE OF THE GOVERNOR
AGAÑA, GUAM 96910
U. S. A.



EXECUTIVE ORDER NO. 99-15

RELATIVE TO ADOPTING AND PROMULGATING A COMPREHENSIVE DRUG FREE WORKPLACE POLICY FOR THE GUAM MEMORIAL HOSPITAL AUTHORITY WHICH INCLUDES MANDATORY DRUG TESTING AS A CONDITION OF EMPLOYMENT IN THE GOVERNMENT OF GUAM; AND PROCEDURES FOR DEALING WITH ILLEGAL DRUG USE IN THE WORKPLACE.

WHEREAS, over the last several years Guam has experienced an increase in the use of illicit drugs and this increase has led to a corresponding increase in the island's crime rate; and

WHEREAS, the use of illicit drugs has found its way into our elementary and middle school age children and there is a growing awareness that the health, safety and welfare of our community is jeopardized by the prevalent use of illicit drugs and alcohol abuse; and

WHEREAS, the Gutierrez-Bordallo Administration is committed to the eradication of the presence and use of deadly drugs within the workplace and throughout our community; and

WHEREAS, approximately 1,000 employees who work for the Guam Memorial Hospital Authority should represent the highest integrity in insuring a drug free workplace and anyone who aspires to become a government of Guam employee shall be free from drugs; and

WHEREAS, substance abuse is a serious island crisis which has a detrimental effect on the lives of many of our citizens, and has exerted a negative effect on the operation of business and government; and

WHEREAS, the government of Guam experiences a loss in the productivity due to drug-related absenteeism, injuries on-the-job, decreased work productivity and quality; and

WHEREAS, employees under the influence of illegal substances function below established standards and make impaired work decisions which may seriously affect their co-workers and members of the public; and



WHEREAS, the government must maintain a work environment which eliminates waste and supports the health, well-being and productivity of all its employees as they carry out their responsibilities for the people of Guam; and

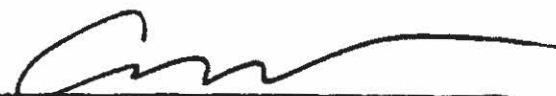
WHEREAS, the Federal Omnibus Drug Act of 1998 stipulates that any state or territory of the United States which is a recipient of federal dollars must establish a drug free workplace; and

WHEREAS, a drug free workplace is fundamental to efficient, effective and responsive government;

NOW, THEREFORE, I, CARL T. C. GUTIERREZ, I Maga'lahaen Guåhan, Governor of Guam, by virtue of the authority vested in me by the Organic Act of Guam, as amended, and the laws of Guam, deeming such actions in the best interests of public health and safety, law enforcement and the efficiency of government service, and in order to establish standard procedures in achieving a drug free workplace while protecting the privacy of the Guam Memorial Hospital Authority employees, hereby proclaim the following:

1. The Guam Memorial Hospital Drug Free Work Place Program Policy approved by the Civil Service Commission on May 25, 1999, is hereby adopted and promulgated. The policy is attached.
2. Applicants selected for and offered employment within the Guam Memorial Hospital Authority shall undergo and pass a mandatory drug test before being employed. Failure to submit to or pass such drug test shall be grounds for rescinding the offer of employment, unless the applicant is undergoing treatment through a rehabilitation program approved or recognized by the Department of Mental Health and Substance Abuse, in which case the applicant must successfully complete the program within the prescribed time before being employed.

SIGNED AND PROMULGATED at Hagåtña, Guam this 3rd day of October, 1999.



CARL T. C. GUTIERREZ
I Maga'lahaen Guåhan
Governor of Guam

COUNTERSIGNED:


MADELEINE Z. BORDALLO



TERRITORY OF GUAM
OFFICE OF THE GOVERNOR
AGAÑA, GUAM 96910
U. S. A.

EXECUTIVE ORDER NO. 95-29

RELATIVE TO ADOPTING AND PROMULGATING A COMPREHENSIVE DRUG FREE WORKPLACE POLICY FOR THE GOVERNMENT OF GUAM WHICH INCLUDES MANDATORY DRUG TESTING AS A CONDITION OF EMPLOYMENT IN THE GOVERNMENT OF GUAM; RANDOM DRUG TESTING FOR DESIGNATED POSITIONS; AND PROCEDURES FOR DEALING WITH ILLEGAL DRUG USE IN THE WORKPLACE.

WHEREAS, over the last several years Guam has experienced an increase in the use of illicit drugs and this increase has led to a corresponding increase in the island's crime rate; and

WHEREAS, the use of illicit drugs has found its way into our elementary and middle school age children and there is a growing awareness that the health, safety, and welfare of our community is jeopardized by the prevalent use of illicit drugs and alcohol abuse; and

WHEREAS, the Gutierrez-Bordallo Administration is committed to the eradication of the presence and use of deadly drugs within the workplace and throughout our community; and

WHEREAS, approximately 14,000 employees who work for the government of Guam should represent the highest integrity in insuring a drug free workplace and anyone who aspires to become a government of Guam employee shall be free from drugs;

WHEREAS, substance abuse is a serious island crisis which has a detrimental effect on the lives of many of our citizens, and has exerted a negative effect on the operation of business and government; and

WHEREAS, the government of Guam experiences a loss in productivity due to drug-related absenteeism, injuries on-the-job, decreased work productivity and quality; and

WHEREAS, employees under the influence of illegal substances function below established standards and make impaired work decisions which may seriously affect their co-workers and members of the public; and

WHEREAS, government employees who use illegal drugs must themselves be primarily responsible for changing their behavior and, if necessary, begin the process of rehabilitating themselves; and

WHEREAS, the illegal use of the workplace as a market place for drugs endangers the health, safety, and welfare of government employees and the community; and



WHEREAS, the government must maintain a work environment which eliminates waste and supports the health, well-being and productivity of all its employees as they carry out their responsibilities for the people of Guam; and

WHEREAS, the Federal Omnibus Drug Abuse Act of 1988 stipulates that any state or territory of the United States which is a recipient of federal dollars must establish a drug-free workplace; and

WHEREAS, a drug free workplace is fundamental to efficient, effective and responsive government;

NOW, THEREFORE, I, CARL T. C. GUTIERREZ, Governor of Guam, by virtue of the authority vested in me by the Organic Act of Guam, deeming such actions in the best interests of public health and safety, law enforcement and the efficiency of government service, and in order to establish standards and procedures in achieving a drug-free workplace while protecting the privacy of government employees, hereby proclaim the following:


- 1) The Department of Administration Drug Free Workplace Program Operating Procedures approved by the Civil Service Commission on December 5, 1995, are hereby adopted and promulgated
- 2) Autonomous agencies or those outside the personnel jurisdiction of the Department of Administration may participate in the Drug Free Workplace Program through a Memorandum of Understanding as provided in the Drug Free Workplace Program Operating Procedures.
- 3) All government agencies shall cooperate to ensure that the Drug Free Workplace Program is successful and effective.
- 4) Applicants selected for and offered employment with the government of Guam shall undergo and pass a mandatory drug test before being employed. Failure to submit to or pass such drug test shall be grounds for rescinding the offer of employment, unless the applicant is undergoing treatment through a rehabilitation program approved or recognized by the Department of Mental Health and Substance Abuse, in which case the applicant must successfully complete the program within the prescribed time before being employed

SIGNED AND PROMULGATED at Agaña, Guam this 6th day of December, 1995.



CARL T. C. GUTIERREZ
Governor of Guam

COUNTERSIGNED:

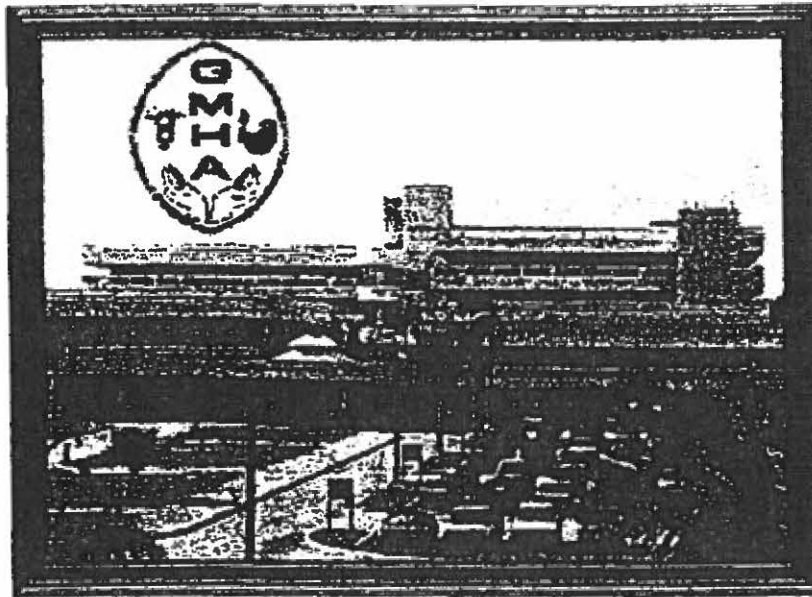


MADELEINE Z. BORDALLO
Lieutenant Governor of Guam

Guam Memorial Hospital Authority

Aturidat Espetat Mimuriat Guahan

850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96911



Drug Free Workplace

Policy & Procedures



Guam Memorial Hospital Authority Aturidåt Espetåt Mimuriåt Guåhan



850 GOV. CARLOS CAMACHO ROAD
OKA, TAMUNING, GUAM 96911
TEL: 647-2444 or 647-2330
FAX: (671) 649-0145

May 18, 1999

MEMORANDUM

TO: Executive Director, Civil Service Commission

FROM: Hospital Administrator

SUBJECT: Amended GMHA-Drug Free Workplace (DFWP) Policy

We are re-submitting the amended GMHA-Drug Free Workplace (DFWP) policy for your review and approval.

Please be informed that the changes made in the DFWP policy were a result of the recommendation of the Commission. GMHA employees were informed through an informational circular that an amendment was made and that it was available for their review. The GMHA Executive Committee as well as the GMHA Board of Trustees approved the amendment.

Attached are the following documents that will assist in your review:

- | | | |
|---------------|---|--|
| Attachment #1 | - | Amended GMHA-DFWP Policy |
| Attachment #2 | - | Comparison of the DFWP policy of September, 1998 and the amended |
| Attachment #3 | - | Additional list of TDP approved by Attorney General's Office |
| Attachment #4 | - | Excerpt from the Medical Review Officer Handbook |

Should you need additional information, please call Mr. A.S. Duenas, Personnel Services Administrator, at 647-2219.


TYRONE J. TAITANO

Attachment
a/s

**GMHA DRUG FREE WORKPLACE
Policy & Procedures**

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• Agreement to Participate in Education, Rehab or Treatment Program	Attachment #7
• Release of Information Form	Attachment #8
• Employee Assistance Program (EAP) Referral Form	Attachment #9
• Supervisor's Report – Reasonable Suspicion Testing	Attachment #10
• Individual Notice to Employees assigned to TDP	Attachment #11
• List of Testing Designated Positions	Attachment #12
• Procedure for Changing the TDP List	Attachment #13



GOVERNMENT OF GUAM



CIVIL SERVICE COMMISSION
KUMISION I SETBISION SIBIT

2nd Floor Hakubotan Bldg
E.T. Calvo Way, Tamuning 96913
P.O. Box 3156 Hagatna, Guam 96932
Tel: 647-1855/6 Fax: 647-1867

CSC NO. 2004-147

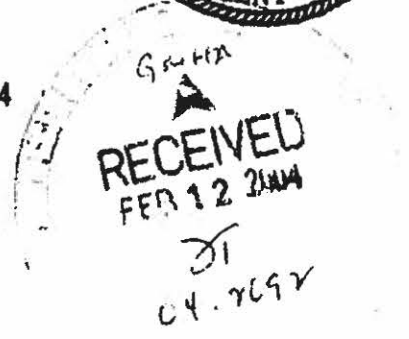
09 FEBRUARY 2004

MEMORANDUM

TO: All Department and Agency Heads
Human Resource Division

FROM: Executive Director

SUBJECT: Amendment of Section 5a(2) of the Drug-Free Workplace Program (DFWP)
Operating Procedures



Hafa Adail Attached is the CSC Resolution No. 2004-001 on the amendment of Section 5a(2) of the Drug-Free Workplace Program (DFWP) Operating Procedures. The amendment deletes the requirement for the Department of Mental Health and Substance Abuse (DMHSA) to approve any additions or deletions to the Testing Designated Positions (TDP).

The effective date of the amendment to Section 5a(2) shall be January 20, 2004.

Please be guided accordingly. *Si Yu'us Ma'ase!*

Senseramente,

VERNON P. PEREZ

ATTACHMENT

- 1. CSC Resolution 2004-001





GOVERNMENT OF GUAM

**CIVIL SERVICE COMMISSION
KUMISION I SETBISION SIBIT**

2nd Floor Hakubotan Bldg.
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P.O. Box 3156 Hagatna, Guam 96932
Tel: 647-1855/6 Fax: 647-1867



**CIVIL SERVICE COMMISSION
RESOLUTION NO. 2004-001**

**RELATIVE TO THE DEPARTMENT OF ADMINISTRATION'S
DRUG-FREE WORKPLACE PROGRAM OPERATING
PROCEDURES**

WHEREAS, the Department of Administration's comprehensive Drug-Free Workplace Program Operating Procedures was promulgated on December 06, 1995 by Executive Order No. 95-29; and

WHEREAS, Section 24(a) "ACCIDENT OR UNSAFE PRACTICE TESTING" of the Department of Administration's Drug-Free Workplace Program Operating Procedures was amended by Executive Order No. 99-03, promulgated on February 18, 1999; and

WHEREAS, the role of Department of Mental Health and Substance Abuse is to ensure the rehabilitation and treatment of employees and applicants for employment regardless of the position they occupy; and

WHEREAS, the Department of Mental Health and Substance Abuse have not been involved in the process or the review of the listing of positions to determine whether positions should be added or deleted from the list of Testing Designated Position (TDP); and

WHEREAS, the Department of Administration has requested to amend Section 5a(2) of the Drug-Free Workplace Program Operating Procedures to delete the Department of Mental Health and Substance Abuse in the approval process of any addition or deletions of positions to the Testing Designated Positions (TDP).

NOW, THEREFORE, BE IT RESOLVED:

1. The Civil Service Commission approves the amendment of Section 5a(2)

GMEA-DRUG FREE WORKPLACE POLICY

Attachment #1

GUAM MEMORIAL HOSPITAL AUTHORITY

ADMINISTRATIVE MANUAL

APPROVED	RESPONSIBILITY	EFFECTIVE DATE	NUMBER	PAGE
TITLE: Drug Free Workplace Policy				

SECTION I

I. SCOPE AND PURPOSE

1. Employees are the Guam Memorial Hospital Authority's (GMHA) most valuable resource and, therefore, their health and safety is a serious concern. They have the right to work in a drug and alcohol-free environment. GMHA will not tolerate substance abuse or use which affects the health and well-being of its employees or threatens its service to patients and the public.
2. The use of illegal drugs and abuse of controlled substances, on or off-duty, is inconsistent with law abiding behavior expected of all GMHA employees.
 - a. Studies show that employees who use illegal drugs or abuse controlled substances or alcohol, on or off-duty, tend to be less productive, less reliable, prone to greater absenteeism and more accidents. The result is a potential delay in providing services and an increase in operating costs and risk of liability.
 - b. These associated impaired behaviors, threaten GMHA's ability to give quality patient care and service to the public.
 - c. Employees who abuse drugs or alcohol are a danger to themselves, other employees, the patients, and the public. Substance abuse inflicts a terrible toll on GMHA's productive resources and the health and well-being of its employees and their families.
3. GMHA will comply with the requirements of the Federal Drug-Free Workplace Act of 1988.
 - a. This policy shall be a part of the GMHA Personnel Rules and Regulations.
 - b. Amendment to Policies and Procedures: The Hospital Administrator reserves the right to modify, supplement, resolve or substitute the policies and procedures stated herein.
 - c. Severability: If any of the provisions of the policies and procedures stated herein or the application for such provisions to any person or circumstances shall be found invalid, the validity of the remainder of the provisions as applied to other persons or circumstances shall not be affected thereby.

2. **POLICY**: The Hospital will not tolerate substance abuse or usage which imperils the health and well-being of its employees or threatens its service to the public. Therefore, it shall be the policy of the Guam Memorial Hospital Authority to maintain a workforce free of substance abuse.

A. Reporting to work or performing work for the Hospital while impaired by or under the influence of illegal drugs or alcohol is prohibited.

B. The illegal use, possession, dispensation, distribution, manufacture or sale of a controlled substance by an employee at the hospital, or while the employee is on official GMHA business, or on stand-by duty or off duty is prohibited.

C. Employees are required by the Drug Free Workplace Act of 1988 to notify the Hospital Administrator or his designee within five (5) days of any criminal drug statute conviction where such conviction was due to an occurrence at the hospital, or while on official business or stand-by or off-duty.

D. Violation of prohibitions above and/or drug statute convictions will result in disciplinary actions up to and including termination.

F. Each GMHA employee will be given a copy of the GMHA Drug Free Work-place Policy. New employees shall receive this policy at orientation.

G. GMHA employees must abide by the terms of this policy as a condition of employment.

H. Current and new employees must read and sign the Drug Free Workplace Affirmation Form and it will be made a part of their permanent personnel file.

3. **APPLICABILITY**: The Drug Free Workplace Policy applies to all GMHA employees working in a classified, unclassified, and contractual capacity; and to applicants that are tentatively selected for employment.

4. **ASSISTANCE PROGRAM**: GMHA will provide reasonable effort to make available employee assistance programs (subject to the limitation of availability of local resources) to GMHA employees for substance abuse education, counseling or rehabilitation. The Hospital encourages voluntary treatment for substance abuse.

5. **AWARENESS PROGRAM**: The Guam Memorial Hospital Authority will strive to educate employees about the dangers of substance abuse. The Hospital will establish a Substance Abuse Awareness Program to assist employees to understand and avoid the perils of drug and alcohol abuse. The Hospital will use the program in an ongoing educational effort to prevent and eliminate substance abuse that may affect the Hospital's workforce.

The Substance Abuse Awareness Program will contain provisions to inform employees about the: (1) Dangers of alcohol and drug abuse; (2) GMHA Drug Free Workplace Policy; (3) Availability of treatment and counseling for employees who voluntarily seek such assistance; and (4) Sanctions the Hospital will impose for violations of its Drug Free Workplace Policy.

6. DRUG SCREENING PROGRAM: Upon initial implementation of this program, all employees of the Guam Memorial Hospital Authority will be required to submit for a drug screening test. The first drug screening test for all employees shall be conducted and scheduled by the Hospital Administrator or his/her designee within a reasonable time after the effective date of this policy. Employees will be notified as to when the testing will begin to take place. A Drug Screening Program shall be established for this purpose.

7. NATURE AND FREQUENCY OF DRUG TESTING:

A. NATURE: GMHA's drug testing program includes the following types of drug testing:

- (1) Applicant testing;
- (2) Random testing of those employees in sensitive positions that have been designated as testing designated positions;
- (3) Reasonable suspicion testing;
- (4) Voluntary testing;
- (5) Accident or unsafe practice testing; and
- (6) Testing as part of or as follow-up to counseling or rehabilitation.

B. FREQUENCY: GMHA reserves the right to increase or decrease the frequency of testing based on the needs of GMHA, availability of resources, and experience in the program, consistent with the duty to achieve a drug-free workplace.

SECTION II: STANDARD OPERATING PROCEDURES

1. **PURPOSE:** To implement the Guam Memorial Hospital Authority Drug Free Workplace Policy, hereafter referred to as "DFW Policy". Samples from applicants and employees will be screened in all cases to identify the following classes of substances:

 Marijuana/Cannabinoids (THC)
 Cocaine Metabolites
 Opiates
 Phencyclidine (PCP)
 Amphetamines/Methamphetamine

2. **DRUG TESTING:**

A. **Applicant Testing:** The objective of the applicant drug screening is to maintain the high professional standards of GMHA's workforce. It is imperative that individuals who use illegal drugs be screened out during the initial employment process before they are placed on the employment lists of GMHA. This procedure will have a positive effect on reducing instances of illegal drug use by employees working within GMHA, and will provide for a safer work environment. For these reasons, drug testing is required for all applicants.

(1) An individual offered employment by GMHA is required to take a drug test as a condition of employment.

(a) Refusal to comply with this requirement will be considered the equivalent of receiving a confirmed and positive result.

(b) A positive result will disqualify the applicant from holding such employment offer made by GMHA

(2) **Vacancy Announcements:** Every vacancy announcement for positions designated for applicant testing shall state:

ALL APPLICANTS TENTATIVELY SELECTED FOR THIS POSITION ARE REQUIRED TO SUBMIT A URINE SAMPLE TO TEST FOR ILLEGAL DRUG USE PRIOR TO APPOINTMENT.

(3) Procedure:

(a) The Employee Health Nurse shall direct applicants to an appropriate collection facility. If possible, the drug test must be undertaken as soon as notified or no later than 48 hours after notification to the applicant.

(b) Applicants shall be advised of the opportunity to list all medications that may support a legitimate use for a specific drug and that information will be reviewed only by the Medical Review Officer to determine whether the individual is using an illegal drug. This list of medications shall be kept by the applicant and submitted to the Medical Review Officer when necessary.

(c) **Personnel Services:** Upon notification that an individual has been tentatively selected for employment with GMHA, the Employee Health Nurse shall assure, after consultation with the Medical Review Officer, that a drug test has been conducted on that individual and determine whether the test result is a confirmed positive result.

(d) **Consequences:** GMHA will decline to extend a final offer of employment to any applicant with a confirmed positive test result, and such applicant will have his/her name removed from the certified list. Personnel Services shall inform such applicant that the drug screening report indicates that the applicant is not approved for employment to the position applied for.

B. **Random Drug Testing:** GMHA Testing Designated Positions will be subjected to random drug testing. GMHA reserves the right to add and delete positions from the list of Testing Designated Positions.

(1) **Implementing Random Testing:** In implementing the program of random testing, the Plan Administrator shall:

(a) Ensure that the means of random selection remains confidential; and

- (b) Evaluate periodically whether the number of employees tested and the frequency with which those tests will be administered satisfy GMHA's duty to achieve a drug free workplace.
- (c) Ensure that individual notices are given to employees whose positions met the criteria for the Testing Designated Positions will be subjected to Random Drug Testing no sooner than 30 days from receipt of the notice.

(2) **Notification of Selection:** An employee selected for random testing and his/her supervisor, shall be notified on the day the test is scheduled. The supervisor shall explain to the employee that the employee is under no suspicion of taking drugs and that the employee's name was selected randomly.

(3) **Deferral of Testing:** An employee selected for random drug testing may obtain a deferral of testing from the Plan Administrator provided he/she is:

- (a) In a leave status (sick, annual, administrative, or leave without pay); or
- (b) In an official travel status away from the test site or about to go on official travel scheduled prior to testing notification. An employee whose random drug testing is deferred will be subject to random testing upon his/her return to work preferably within 5 working days.

C. Reasonable Suspicion Testing:

- (1) If an employee is suspected of using, or being under the influence of drugs, the appropriate supervisor will gather all information, facts, and circumstances leading to and supporting this suspicion.
- (2) When the Hospital Administrator, or designated representative, concurs with the reasonable suspicion, the supervisor will:

- (a) Promptly prepare and submit a written report detailing the circumstances which warrant the testing. This report should include the dates and times of reported drug related incidents, reliable sources of information, rationale leading to the test, and the action(s) taken.

- (b) Refer the individual to the Employee Health Services for Drug Testing.

(3) Reasonable suspicion testing may be based upon objective facts including but not limited to:

- (a) Observable phenomena, such as direct observation of drug use or possession; or

- (b) A direct observation of a pattern of abnormal conduct or erratic behavior; or

- (c) Documented deterioration in the employee's job performance that is likely to be attributable to drug use by the employee; or

- (d) Documented on-the-job incident that may be reasonably attributed to the use of drugs. Includes incidents such as, but not exclusive to, a medical emergency; or information provided either by reliable and credible sources or independently corroborated; or

- (e) Newly discovered evidence that the employee has tampered with a previous drug test.

(4) Employee will be on administrative leave pending result of the test.

D. Accident or Unsafe Practice Testing: GMHA is committed to providing a safe and secure work environment. It also has a legitimate interest in determining the cause of serious on-the-job accidents or unsafe, on-duty, job related activity so that it can undertake appropriate corrective measures. Drug testing after an accident or unsafe practice

can provide invaluable information in furtherance of that interest. Accordingly, employees may be subject to testing when, based upon the circumstances of the on-the-job accident or unsafe, on-duty, job-related activity, their actions are reasonably suspected of having caused or contributed to an accident or unsafe practice that meets either of the following criteria:

- (1) The accident or unsafe practice results in a death or personal injury requiring hospitalization.
- (2) The accident or unsafe practice results in severe damage to government or private property in excess of \$10,000.00.

The government of Guam has an obligation to protect the safety of the public and a legitimate interest in determining the cause of accidents that directly impact the public. Accordingly, employees, shall be subject to testing when, based upon the circumstance of the on-the-job accident or unsafe, on-duty, job related activity, their actions possibly caused or contributed to an accident while transporting a member of the public.

E. Voluntary Testing (i.e. inclusion in the Testing Designated Positions): In order to demonstrate the employee's commitment to GMHA's goal of a drug-free workplace and to set an example for other GMHA employees, employees not in Testing Designated Positions (TDP) may volunteer to be included in the TDP listing and thereby be subjected to unannounced random testing. Employees who wish to volunteer may do so by notifying the Hospital Administrator or his/her designee. Volunteers shall remain on the TDP listing until they withdraw from participation by notifying the Hospital Administrator or his/her designee of such intent prior to a scheduled Random Drug Screening.

F. Follow-up Testing to Counseling or Rehabilitation: All employees referred through administrative channels who undergo a counseling or rehabilitation program for illegal drugs will be subject to unannounced testing following completion of such a program for a period of one year. Such employees will be tested monthly for a period of three (3) months and quarterly thereafter.

3. AWARENESS PROGRAM

The Guam Memorial Hospital Authority shall provide all employees with the hospital's Drug Free Workplace Policy as well as instructional information to educate them on the dangers of substance abuse.

A. Education Department shall develop and implement an ongoing Drug and Alcohol Awareness program for all supervisors.

B. Personnel Services shall distribute and explain the DFW Policy at all General Orientations for new employees. Additionally, they will ensure the policy is disseminated to all Hospital staff via GMHA informational circular and the paycheck stuffer system.

C. Employees have the right to know the dangers of drug abuse and what rehabilitative help is available to assist with drug and alcohol problems. Therefore, the Education Department shall institute a mandatory education program (See Appendix, Awareness Program Curriculum) that will inform all employees of the danger of drug and alcohol abuse in the workplace.

D. All department directors are responsible for annual review of the DFW Policy with their staff. This will provide staff an additional opportunity to ask any questions they may have regarding the policy.

E. All staff will receive an annual refresher in-service on the dangers of drug and alcohol abuse in the workplace. This training will be provided at the Annual Health and Safety Fair.

4. COLLECTION SITES AND LABORATORY PROCEDURES

Collection of urine specimens, for the purpose of detecting illegal use of drugs or specified controlled or toxic substances, will comply with Health Care Financing Administration (HCFA), U.S. Department of Health and Human Services (DHHS), National Committee for Clinical Laboratory Standards (NCCLS), and Substance Abuse and Mental Health Services Administration (SAMSHA) guidelines.

A. Locations of the specimen collection and drug testing sites are determined by the

Hospital Administrator or designee as follows:

- *Has employees tested outside*
1. GMHA's Laboratory employees: All collection and testing performed by a contracted reference laboratory.
 2. GMHA's non-Laboratory employees: Collection and testing performed by GMHA laboratory, confirmation testing performed by a contracted reference laboratory.

B. The Medical Laboratory Administrator shall establish collection and chain-of-custody procedures to be used by all collection sites to ensure reasonable consistency, specimen integrity, proper identification and individual privacy.

C. GMHA and certified referral laboratories' test methods shall follow the standards found in 49 CFR part 40, Rules and Regulations.

D. Procedures Before Collection:

(1) Determine that collection site facilities are clean, well lighted, and dedicated solely to specimen collection.

(2) Account for the presence of all required specimen collection personnel and supervisors who should be present at the collection site.

(3) Place bluing agent in the toilet bowl, if applicable.

(4) Ensure that no other source of water is readily available in the enclosure where urination occurs by:

- (a) securing faucet with security tape or
- (b) otherwise disabling use of faucet.

(5) Ensure that all necessary supplies are present.

(6) Sealed kits assure that supplies have not been tampered. These kits contain:

- (a) collection bottle

(b) tamper proof tape

(c) temperature tape

(d) biohazard storage bag

(e) gloves (for handling the urine)

(f) bluing agent for toilet

(g) tamper proof tape or other means to secure faucets and soap dispenser.

(7) Request "photo" identification from the subject (e.g., identification badge or driver's license). If the person has no "photo" identification, then identification can be made by an official who can positively identify the person.

(8) Check testing schedule to assure that donor has been authorized for testing by appropriate agency/department and to remind donor to retain information regarding medications for their and the Medical Review Officer's reference, if needed.

E. Procedures and Instructions during Collection:

(1) Process one donor at a time.

(2) Ask the subject to remove any unnecessary outer garments such as a coat or jacket.

(3) Instruct the donor to leave all personal belongings, such as a purse or a briefcase, with the outer garments outside of the stall or partitioned area. A lockable container may be provided for valuables. The donor will retain the key until after the collection.

(4) Instruct the donor to wash, rinse, and dry his or her hands.

(5) Give the subject a urine specimen collection container. Have the subject remain in the presence of the collector. The subject should have no access to fountains, faucets, soap dispensers, or any other materials that could be used to adulterate the urine specimen.

- (6) Allow the donor to enter and maintain privacy within the restroom, stall, or partitioned area. If public restroom is used, the collector is to remain in the restroom, but outside of the stall, until the specimen is collected.
- (7) Wearing PPE/gloves, accept the specimen from the Donor.

F. Procedures after Collection is Completed:

- (1) Upon receipt of the specimen, the collector is to immediately:
 - (a) Ensure that the volume is a minimum of 30 cc. If the volume collected is not adequate, additional urine may be collected in a separate container. Keep all specimens in view of the donor. When an adequate total volume has been collected, the specimens should be combined into one container while the test donor observes. If volume is inadequate, the donor may be directed to drink a maximum of 12 ounces of water and allow them to re-collect within 30 minutes. If unable to collect after 30 minutes, collection is to be re-scheduled.
 - (b) Measure the temperature of the urine specimen by observing the color of the liquid crystal thermometer attached to the container. The green area temperature is recorded within 4 minutes of urination. (33°C to 37°C or 91°F to 98°F is acceptable.)
 - (c) Inspect the color and appearance of the urine specimen for any signs of contamination. Note any unusual findings in the permanent record book. **NOTE: DO NOT CONFRONT THE PROBLEMS. RECORD ALL CONCERNS ON THE FORM & PERMANENT RECORD BOOK.**
 - (d) Add no additional substances (e.g., preservatives) to the specimen.
 - (e) The collector and donor are to keep the specimen in view at all times before it is sealed and labeled.

(f) Pass a tamper proof seal over the bottle cap and down the sides of the bottle. The test donor is to initial the seal.

(g) Label the urine specimen with the donor's code number, the date and time of collection, the approximate volume of urine collected, the collectors initials, and the initials of the person providing the specimen. To insure the correct identification, an accession number and/or bar code is given to each specimen.

(h) Labels are completed in ink that will not smudge or run if it becomes wet. All identification information must be legibly printed or typed on the label.

(i) Enter all information that identifies the specimen on the chain-of-custody or laboratory requisition form. Both the collector and the subject providing the urine specimen should sign the form. The donor's signature certifies that the identified specimen is the specimen that he or she provided. The donor is given the "donor copy" to verify collection and record any medications taken at time of collection.

(j) Splitting samples into three containers, both labeled and sealed as described above may be requested. Each container will be sealed and documented as described above.

(k) Make a note in the permanent record book that describes any unusual circumstances, behavior, or appearance pertaining to the donor.

(l) Place specimen in tamper proof side of bag and seal.

(m) Place top copy of form in other side of bag and seal.

(n) Deliver sealed specimens directly to the Toxicology testing personnel assuring that they have signed the chain of custody forms.

(o) Place the other forms in a confidential envelope and directly deliver to the Administrator's office.

(2) Permanent (Bound) Record Book - The following information is to be included in the Permanent Record book:

- (a) Date of collection.
- (b) Test donor's name and social security number or code number.
- (c) Specimen accession number or bar code label.
- (d) Temperature of specimen (within 4 minutes of voiding).
- (e) Note on any unusual behavior or unusual findings observed in the examination of the urine specimens or any other relevant information. If adulteration is suspected, the supervisor of the collection site may initiate a second (Directly Observed) sample.
- (f) Collector's signature and printed name.
- (g) Signature of the test donor, which certifies that the urine collected is, in fact, the specimen that he or she provided.

(3) Observed Collection Procedures:

- (a) The decision by collection site personnel to obtain a specimen under direct observation will be determined by the appropriately designated supervisor or Medical Review Officer.
- (b) If collection under direct observation is authorized according to policy, all procedures are to be conducted in a professional, discreet, and objective manner.
- (c) The following steps will be taken:
 - Inform the donor that collection will occur under direct observation.

- An individual designated by the Donor's employer will accompany the donor into the collection facility. The observer must be the same gender as the subject.
- Instruct the donor to wash, rinse, and dry his or her hands.
- Hand the donor a urine collection container. Only the donor and the observer are to be in the collection area.
- The observer should position himself or herself in manner that facilitates verification that the urine specimen passes directly from the donor's body into the specimen container.
- Collection of a urine specimen under direct observation is highly sensitive. **NO INFORMATION CONCERNING THIS EVENT, EXCEPT THAT IT WAS PERFORMED, SHALL BE RELEASED.**
- Accept the specimen from the donor as described for unobserved collection.
- Document on the chain-of-custody/laboratory requisition form that collection was done under direct observation.

(4) Specimen Tampering: The following descriptions are some of the known Specimen Tampering methods used to avoid detection:

- (a) Substitution: Liquids such as soda, tea, apple juice, and clean urine (i.e., drug free) are substituted for the test subject's own urine.
- (b) Adulteration: Urine may be adulterated by the addition of foreign material known or thought to invalidate the test. Common substances include soap, household cleaners, salt, bleach, and drain cleaner. The effect of each of these adulterants varies with the test methods used. Adulterants are often detectable at the collection site by visual inspection of the specimen or by smell and abnormal

temperatures caused by the chemicals. Other properties such as pH and specific gravity of the urine may also be affected by addition of adulterants.

- (c) **Dilution:** Dilution reduces the drug concentration in urine to the point that it will not be reported by the drug testing laboratory. This may be done by adding water after the specimen is provided or donors may attempt to dilute their urine by ingesting large amounts of fluid, usually water, in an effort to lower the apparent concentration of any drug present below the cut-off level. The determination of the creatinine is used to detect these samples, and specimens with creatinine concentrations below 20 mg/dl should be reported as suspect, requiring another specimen to be submitted.
- (d) Drug users have been known to resort to drastic measures to avoid detection. Some have even gone so far as to use catheters to fill their bladders with water or someone else's drug-free urine. (Infections and damaged tissue can result from such practices.) In attempts to reduce the drug concentration in their urine or change the excretion rate of the drug, others have consumed large volumes of water or drunk substances such as vinegar.

(5) **Counter measures to Prevent Tampering:** To deter subjects from attempting substitution or adulteration of a specimen, the following safeguards have been incorporated into the collection procedure. The measures instituted will depend on the reasons for testing. Specimens taken for medical purposes may not require such exact collection procedures.

- (a) **Place Bluing Agent (Dye) in the Toilet Bowl.** Placing dye in the toilet bowl discourages the subject from using it to dilute the urine specimen because the color of the urine would

change. This would be an obvious indication of tampering. Alternatively, a water-free system such as a commode or chemical toilet may be used.

- (b) **Require Photo Identification.** The collection procedure requires that a test donor present identification that includes a photograph of himself or herself. Use of "photo" identification prevents a person from enlisting another person to take the test in their place.
- (c) **Leave Coats, Briefcases, or Purses Outside of the Collection Area.** To reduce the possibility of concealing drug-free urine specimens or adulterants on the test subject's person, coats, briefcases, or purses should be left outside of the collection area. A lockable container may be provided for valuables. The Donor will retain the key until after the collection.
- (d) **Wash and Dry Hands Before Providing a Specimen.** By washing and drying their hands before providing a urine specimen, test subjects are prevented from placing substances on their hands that could be transferred to the urine in an attempt to adulterate it.
- (e) **Observe Collection.** The most reliable way to prevent specimen tampering is to observe the collection of the urine. This is usually considered intrusive and it is generally permitted only in situations where the test subject has previously tried to substitute or adulterate specimens. Observed collection may also be warranted when the clinical impression does not agree with the test results, or when it is known that, due to circumstances surrounding the test request, the results will be subjected to severe legal scrutiny.
- (f) **Take the Temperature of the Urine Within 4 Minutes of Collection.** If the collection is not observed,

taking the temperature of the urine is the most effective method of detecting dilution, adulteration, or substitution.

1. The temperature should be in the range of 33°C to 37°C (91°F to 98°F). This allows for a maximum delay of 4 minutes during which the specimen temperature must be obtained.
2. If the temperature of a specimen is not within the acceptable range, another subject may have adulterated or substituted a specimen. In this case another specimen should be collected. This could be considered a valid reason for collecting the second sample under direct observation by a collection site person of the same gender.
3. It is recommended that the appropriately designated supervisor review and concur in advance with any decision made by collection site personnel to obtain a specimen under direct observation.
4. When a second specimen is required, both specimens should be carefully marked to indicate the sequence of collection before they are sent to the laboratory for testing.
5. Various kinds of thermometers can be used to determine the temperature of the urine.

- i) Liquid crystals: (Best and the one authorized for use) are attached to the side of the container; react to a temperature change within 15 seconds; and cause no contamination problems.
- ii) Digital thermometers:
 - respond rapidly to temperature changes; and

- require disposable, one-time use tips to prevent contamination.

iii) Standard mercury thermometers should not be used because they respond slowly and they may be a source of cross-contamination.

iv) If the temperature of the specimen falls outside of the prescribed range, a subject may volunteer to have his or her oral temperature taken to counter any belief that the specimen was altered or substituted.

(6) Testing Procedure: The GMHA Laboratory will perform the initial screening by Enzyme Immuno Assay (EIA). If the initial screen results positive, the second sealed urine sample will be sent for confirmation testing to a contracted reference laboratory, which performs SAMHSA recommended toxicology procedures.

(7) References

- (a) NCCLS Document T/DM8-P, "Urine Drug Testing in the Clinical Laboratory; Proposed Guideline, July, 1993.
- (b) Federal Register, "Mandatory Guidelines for Federal Workplace Drug Testing Programs; Notice", Volume 59, No.110/ Thursday, June 9, 1994.

5. EMPLOYEE ASSISTANCE PROGRAMS (EAP)

A. Guam Memorial Hospital Authority recognizes that many human problems can be successfully treated, provided it is identified in its early stages, and referral is made to an appropriate modality of care. This applies whether the problem is alcoholism, drug abuse, physical illness, mental or emotional illness, financial,

marital or family distress, legal problems, or other concerns.

B. GMHA has an Employee Assistance Program (EAP) to provide reasonable assistance to all employees seeking rehabilitation for a drug, alcohol, or related problem. EAP provides employees, the families of employees, when feasible, with short-term counseling, information, referral and advocacy services.

(1) The Administrator of Medical Social Services is GMHA's Employees Assistance Program Coordinator (EAP). The EAP Coordinator shall implement and operate the EAP within GMHA. All EAP operations shall be confidential.

(2) Specific functions of the EAP:

- (a) Serve as the initial point of contact for employees who ask or are referred for counseling.
- (b) Identify employee problem and help resolve them through confidential and short-term counseling.
- (c) Provide employees the opportunity for specialized education, treatment, and rehabilitation.
- (d) Refer to external treatment or other community services, if necessary.
- (e) In making referral, consider the nature and severity of the problem, location of the treatment, cost of the treatment, other special needs and the preference of the employee.
- (f) Monitor the progress of referred employees during and after rehabilitation period. Provide feedback to management within confidentiality requirements.
- (g) Focus on restoring diminished workplace performance caused by the use of illegal drugs, substance abuse, or alcohol.
- (h) Support and consult management in dealing with troubled employees and in protecting individual privacy.

- (i) Assist supervisors with employee performance or problems that may be related to illegal drug use.
- (j) Provide education materials and training to managers, supervisors, and employees on illegal drugs in the workplace.
- (k) Provide training to assist supervisors recognizing and documenting facts and circumstances supporting a reasonable suspicion that an employee may be using illegal drugs.
- (l) Maintain a list of rehabilitation or treatment organizations, to include health care providers and counselors, and counseling and rehabilitation programs.
- (m) Be familiar with applicable laws and regulations including drug treatment and rehabilitation insurance coverage to employees.

C. EAP Referral Procedure

(1). Voluntary Employee Referral:

An important aspect of EAP is its availability to employees on a voluntary basis. A voluntary referral procedure is established to encourage illegal drug users to seek counseling and rehabilitation without risk of disciplinary action. This is referred to as providing the employee "Safe Harbor". Accordingly, any employee who voluntarily identifies him/herself as a user of illegal drugs will be provided "safe harbor" and be exempt from disciplinary action for the admitted acts of prior illegal drug use, including possession incident to such use, provided the employee:

- (a) Voluntarily makes such disclosure to a superior official prior to his/her being officially informed of an impending drug test.
- (b) Obtains counseling or rehabilitation through the Employee Assistance Program.

(c) Consents in writing to the release of all records related to counseling and rehabilitation to appropriate management and EAP officials.

(d) Agrees to be tested as part of or as a follow-up to counseling and rehabilitation.

(e) Thereafter refrains from using illegal drugs.

Since the key to this provision's effectiveness is an employee's willingness to admit his or her problem, ~~Voluntary referral is not available after:~~

- Being asked to provide a urine sample in accordance with this plan; or
- Having been found to have used illegal drugs by Reasonable Suspicion standards or Random Testing.

(2) Supervisory Referral:

Supervisory referral may or may not be drug related. Supervisors shall, when the employee's problem may be:

(a) Performance Related:

- (i) Identify and document instances of deficient work performance or conduct, with special attention directed to patterns of performance deterioration.
- (ii) Discuss performance or conduct deficiencies with the employee and refer the employee to the EAP Coordinator if, in their opinion, the noted deficiencies may be caused by a personal problem such as alcohol, or other problems.
- (iii) Refrain from diagnosing employee problems, but be alert to indications of personal

problems, including alcohol or drug abuse.

(iv) Referral shall be made in writing using a standardized referral form (see Appendix, Form A).

(b) Confirmed Positive Drug Screen:

(i) Direct the employee to contact the EAP Coordinator for consultation and subsequent referral to Department of Mental Health and Substance Abuse (DMH&SA) for drug assessment, education, rehabilitation, and treatment.

(ii) Have the employee complete and sign a Release of Information Form (RIF) (see Appendix, Form C)

(iii) The EAP Coordinator will perform the initial consultation with the employee and provide a notice of referral to DMH&SA. Referral to DMH&SA is for a complete drug assessment, education, rehabilitation, and treatment program.

(iv) The DMH&SA clinician or counselor shall provide feedback within reasonable time to GMHA on employees who are referred for assessment, education, or rehabilitation. They will also:

- Keep GMHA informed on the participation in an education, rehabilitation or treatment program.
- Provide a written statement in any assessment, education, rehabilitation or treatment plans and its potential impact on the employees work schedule as set forth in the preceding Section 3 Confidentiality.

(v) The Employee will provide all limited general information

concerning the employee's participation in an education, rehabilitation, or treatment to his Supervisor/Department Manager and to the EAP Coordinator.

- (vi) Failure to complete the drug assessment, education, rehabilitation or treatment program may result in disciplinary or other adverse action.

3. Confidentiality:

The nature of the employee's problem or personal information provided to the education/treatment counselor or mental health clinician is private information. This information will not be disclosed to anyone outside the treatment or rehabilitation setting without the employee's consent.

Only limited general information concerning the employee's participation in an education, rehabilitation or treatment program will be disclosed to the employee's supervisory chain of command, or other entities not directly in the employee's supervisory chain of command. This includes information necessary to schedule and approve the employee's leave time and to re-assign the employee's job responsibilities. Recipients of information that may disclose or can be related to the employee's participation in an education or treatment program shall maintain utmost confidentiality of this information.

SECTION III: APPENDIX

1. EMPLOYEE'S DUTIES AND RESPONSIBILITIES

- A. Observe public trust and confidence through personal support and compliance with the intent and provisions of this Standard Operating Procedure (SOP).
- B. Notify an appropriate supervisor before reporting to duty, before using GMHA equipment, or before or immediately upon entering GMHA property:
 - (1) When taking any medication or drug, either prescription or non-prescription, which might impair the effectiveness or safety of job performance.
 - (2) When having taken alcohol which might impair the effectiveness or safety of job performance.
- C. Consider volunteering for and completing an education, rehabilitation or treatment program if the employee believes there is an addiction to alcohol or drugs which might impair the effectiveness or safety of job performance.
- D. Consider participating in an education, rehabilitation or treatment program when recommended by the Employee Health Nurse, Department Manager, Plan Administrator, Employee Assistance Program Coordinator, or Hospital Administrator.
- E. Encourage other employees, who use a substance which might impair the effectiveness or safety of job performance, to volunteer for and complete an education, rehabilitation, or treatment program.
- F. Acknowledge that he/she has received and read the Drug Free Workplace Policy and understands its purpose, objectives, and employee responsibilities.
- G. Acknowledge that he/she was notified if the position he/she is holding was determined

meeting the criteria for the Testing Designated Position and that no sooner than thirty (30) days from receipt of the notice will he/she be subjected to Random Drug Testing.

- H. Attend all required education programs that support the Drug Free Workplace Program.

2. SUPERVISOR'S RESPONSIBILITIES

- A. Attend all GMHA sponsored training on drug and alcohol awareness and prevention.
- B. Ensure that each of his/her subordinate employees have received a copy of the DFW Policy.
- C. Be available to explain the purpose, objectives, and responsibilities under the DFW Policy to each employee he/she supervises.
- D. If a "critical incident" occurs, have the discretion to:
 - (1) Summon law enforcement, and/or
 - (2) Summon hospital security, and/or
 - (3) Summon medical assistance.
- E. Immediately notify the Department Manager of all "critical" incidents. Follow-up with a written report to include signatures of all witnesses, if available.
- F. If "reasonable suspicion" exists that an employee's work performance is affected by a drug problem, recommend to the Department Manager or Plan Administrator that the employee undergo a reasonable suspicion drug test.
- G. Cooperate in the rehabilitation efforts of GMHA.
- H. Follow normal performance evaluation and counseling procedures when there is impaired or reduced job performance and there is no suspicion or evidence of drug or alcohol related problem.
- I. If problems on the job are suspected of being drug related (without concrete fact or evidence):

(1) Follow normal performance evaluation and counseling procedures.

(a) An employee whose job performance is reduced or impaired by a drug problem may have a history or pattern of poor job performance. In this instance, knowledge of and proof of poor performance rating is imperative which, in turn, occasions pre-and-post counseling.

(b) On-the-job counseling occasionally is not effective or the supervisor believes that more professional counseling is necessary. Appropriate recommendations should be made to the Department Manager for the employee to participate in an education, rehabilitation, or treatment program.

(c) The causes for the employee's poor job performance may be related to personal difficulties or problems, and could have the same adverse effects on job performance as a drug related problem. An education, rehabilitation, or treatment program may be helpful to the troubled employee and to his/her job performance.

(2) Strictly maintain confidentiality; disclose information on a need-to-know basis only.

3. EMPLOYEE RIGHTS

A. Legal Rights: Employees have legal rights that must be honored and respected at all times.

B. Confidentiality Rights: Confidentiality is an essential element of an EAP.

C. Self Referral (Voluntary Participation):

(1) All self-referral participation shall be held in confidence unless the employee agrees, through specific written release, that any other party be notified.

(2) The self-referral employee's compliance with recommendations or actions from the EAP Coordinator is voluntary.

(3) The self-referred employee's job security and/or promotional opportunities will not be jeopardized by participation.

(4) In no event shall this program be used to shield the employee from, or replace, normal procedures for unsatisfactory job performance.

D. Directed Participation:

(1) Notwithstanding any other provision of the DFW Policy, medical information about any employee shall be treated in accordance with prevailing laws and practices protecting the confidentiality of such information.

(2) If, for protection of public health or public safety, confidential information is required by law or by judicial proceedings, legal process for obtaining and/or disclosing such information shall be used.

(3) Reports to the Hospital Administrator or his/her designee resulting from education, rehabilitation, or treatment program sources shall be strictly limited to statements of compliance or non-compliance.

(4) Notwithstanding D(1) above, for protection of public health and public safety, disclosure of a drug analysis test result without employee agreement may occur when the information is required by medical personnel for the diagnosis or treatment of the employee who is unable to authorize disclosure.

E. Appeals of Adverse Actions are governed by the Civil Service Commission policy and other applicable personnel rules, regulations, and statute.

4. MEDICAL REVIEW OFFICER

A. The Medical Review Officer receive all drug testing results

from the Drug Screening Laboratories (DSLs).

- B. Assure that an individual who has tested positive is afforded an opportunity to offer alternate medical justification for the test results.
- C. Immediately report all verified drug test results to the Hospital Administrator or his/her designee.
- D. Coordinate with and report to the Hospital Administrator and department head on all drug testing functions and findings on a regular basis.
- E. Ensure complete confidentiality except for those who need-to-know.

5. DRUG RETESTING

Only the Hospital Administrator and his/her designee, after consultation with the Medical Review Officer, has the discretion to authorize retest on the same or new specimen if the Hospital Administrator or his/her designee determines that the technical standards established for test methods or chain-of-custody procedures were violated in deriving a confirmed "positive" result or has other appropriate cause to warrant a retest.

An employee may at his/her own expense, request a retest of the same specimen within seventy-two (72) hours of consultation with the Medical Review Officer concerning a positive drug test. The employee will remit, prior to the retest, all required costs associated with the retest directly to the Medical Review Officer.

6. REPORTING AND MAINTAINING RESULTS AND RECORDS

A. Reporting Requirements: The importance of confidentiality and accuracy in record keeping throughout the drug testing process cannot be overemphasized. Each person and each office involved in preparing or maintaining records for the drug screen program has certain responsibilities.

B. Departments: Request applicants and employees to read, sign and date the Affirmation of Policy Form (APF) (see Attachment #1). Personnel Services will assist in this matter. Employees are to complete this form when they receive orientation about the program. Applicants are to complete this form anytime during the selection process, but it must be done before the applicant is sent for a drug screen. Give the applicant or employee a copy of the signed statement and also forward original copy to Personnel Services.

(1) Initiate the Consent and Acknowledgment Form (CAF) (see Attachment #2). Ask each employee or applicant being requested to take a drug screen to read and sign the CAF. Give a copy to the applicant or employee and forward original copy to Personnel Services. Instruct the applicant or employee to show the signed copy to the collection site personnel.

(2) Test results will be reported to the Hospital Administrator and Employee Health Nurse. Only these individuals are to receive results of drug testing. It is the responsibility of these authorities to maintain the confidentiality and security of the information.

(3) Results for applicants will be reported as either "Recommended for employment" or "Not Recommended for employment".

(4) Results for employees will be reported as "referral for education, treatment, or rehabilitation program required" or "referral for education, treatment, or rehabilitation not required".

(5) Ask an employee who is required to undergo an assessment and recommended education or treatment program to sign the Release of Information Form (RIF) (see Attachment #8) releasing limited necessary information about the employee's participation. Give a copy of the signed release waiver to the employee and forward original copy of the release to the Personnel Services which will

transmit to the Department of Mental Health and Substance Abuse.

- (6) If an employee or applicant refuses to take a drug screen, refuses to sign the consent or release forms or fails to report for a drug screen or treatment program, document the refusal. Include the name of the applicant or employee, the position or the one for which a conditional offer had been made, the nature of the refusal, names of witnesses and the refusal date. Personnel Services shall retain a copy of the documentation along with a copy of the letter to the Hospital Administrator for disciplinary or disqualification action.

C. Collection Site:

- (1) Ask the applicant or employee to complete the Medical Information Form (MIF) (see Attachment #3). Laboratory personnel shall assign a specific Specimen Identification Number (SIN) for each applicant or employee and enter the SIN on the form. Put the collection site location code on the MIF. Any unusual behavior, circumstances or findings and direct observation should be noted on this form.
- (2) Initiate the collection site's Chain of Custody Form (CCF) (see Attachment #4) and enter the Specimen Identification Number on the CCF. The employee or applicant, and each person at the collection site who has handled or transferred the specimen, must sign and date the Chain of Custody Form.
- (3) Medical Information Form (MIF) should be kept by the applicant and should not be submitted to Laboratory.

D. Laboratory:

- (1) Continue the Chain-of-Custody Form (CCF) by showing the date and signature of the person receiving the specimen. Report results within a reasonable time from receipt of the specimen. Before any results are requested, the laboratory personnel responsible for the test validation must

review and certify all results as accurate.

- (2) Upon completion of initial and confirmatory tests, forward results to the Medical Review Officer.

- (a) Report as negative all specimens which are negative on the initial test or are negative on the confirmatory test.

- (b) When a confirmatory test positive (CTP) occurs, forward CTP data, test results, Medical Information Form and the Chain-of-Custody Form (CCF) to GMHA's contracted Medical Review Officer.

- (c) Provide the Employee Health Nurse with statistical information regarding the testing of GMHA employees and applicants for GMHA employment during that month. Report the statistical summaries in aggregate form without any personal identifying information. Include the following information in the summaries.

1. Initial Test:

- (i) Number of specimens received
 - (ii) Number of specimens reported out (negative)
 - (iii) Number of specimens reported positive for:
 - marijuana metabolites
 - cocaine metabolites
 - opiate metabolites
 - phencyclidine
 - amphetamines

2. Confirmatory Testing:

3. Medical Review Officer

- (i) Number of specimens received for confirmation
 - (ii) Number of specimens reported (negative)
 - (iii) Number of reanalysis requested
 - (iv) Number of specimens confirmed positive for:
 - marijuana metabolites

- cocaine metabolites
 - opiate metabolites
 - phencyclidine
 - amphetamines
- (d) Upon receipt of confirmatory test positive data, compare the results with the Medical Information Form (MIF). Retain the MIF and test data. Forward the final results and any comments to the Employee Health Nurse. **DO NOT FORWARD THE MIF OR TEST DATA; RETAIN COPIES OF THESE RECORDS (RESULTS, TEST DATA AND MIF) FOR AT LEAST THREE (3) YEARS.**
- (e) Provide monthly summaries of statistical information to the Employee Health Nurse. Do not include any personal identification information in the statistical summary. Include the following information:
1. Number of confirmatory test positive (CTP) results received
 2. Number of reanalysis requested
 3. Number of CTP's not leading to confirmed positive results: consistent with legal drug use scientifically insufficient data.
 4. Number of CTP's leading to Confirmed Positive Results (CPR).
 5. Number of CPR's for:
 - (i) marijuana metabolites
 - (ii) cocaine metabolites
 - (iii) opiate metabolites
 - (iv) phencyclidine
 - (v) amphetamines
- (3) Employee Health:
- a) Maintain records for each applicant or employee requested to take a drug screen.
 - b) Make every reasonable effort to maintain the confidentiality of these records whether they are stored electronically or on paper.
- (c) Retain records forwarded from each of the Departments including the Affirmation of Policy Form (APF) and the Consent and Acknowledgment Forms (CAF); the Release of Information (RIF) and Access to Records Forms (ARF).
- (d) Retain records forwarded from the laboratory including the results and the monthly statistical summaries. Retain information forwarded from the Medical Review Officer (MRO); including the Confirmed Positive Results (CPR) and the monthly statistical summaries.
- (e) Maintain all records regarding any and all drug testing matters in a separate file, distinct and apart from employee personnel files.
- (f) Control access to drug testing records is considered restricted. These shall be in a locked cabinet with limited access.
- (g) Keep records regarding applicants who have received a Confirmed Positive Result.
- (h) Identify individuals not eligible for probationary appointment.
- (i) Applicants and Employees may request access to their records regarding the drug testing process. The request must be in writing to the Hospital Administrator. Applicants and employees must sign an Access to Records Form (ARF) releasing complete information from the laboratory and Medical Officer to the Employee Health Nurse and GMHA or its officers, and relieving the Employee Health Nurse, GMHA or its officers, laboratory and Medical Review Officer (MRO) from any liability relating to the confidentiality of the individuals records.

5. CONFIDENTIALITY AND THE MAINTENANCE AND SECURITY OF RECORDS

- A. DFW records and test results are subject to GMHA Confidentiality Policy. Every individual involved in the DFW process is responsible for maintaining strict security and confidentiality. Access to these records is restricted to Plan Administrator, the supervisory chain of command, GMHA Legal Counsel, the Hospital Administrator or a designee, Medical Review Officer, Director of Lab Services, and Employee Health Nurse. No further access to these records can be authorized without the express consent of the employee or applicant.
- B. Need to Know - confidential information may be shared with others only if it is necessary or the employee has authorized a release of information.
- C. The nature of an employee's problem and information provided during education/treatment is private information. This information will not be disclosed to anyone outside the treatment or rehabilitation setting without the employee's consent.
- D. DFW records and test results are not subject to the Guam Freedom of Information Act (Title 5 GCA), also known as Guam Sunshine Law.

E. APPLICANTS AND CERTIFIED ELIGIBILITY LIST

- (1) Employee Health Nurse shall determine disqualification's of job applicants pursuant to this policy. Employee Health Nurse shall provide a pass or fail notice of each applicant to the Personnel Administrator.
- (2) The Personnel Administrator will ensure that a disqualified applicant is removed from the certified list of eligibles. Subsequent certifications shall adhere to the GMHA Personnel Rules and Regulations.

(3) The Personnel Administrator shall notify disqualified applicants, in writing, of his/her removal from the certified list. The notice will state the specific reason for the removal.

(4) DFW records and details of test results shall be maintained separate from personnel files.

7. VIOLATIONS

- A. Any employee convicted of violating a criminal drug statute, where such conviction was due to an occurrence at the work site, during work hours, or while on duty, official business, stand-by duty, or off-duty must inform the Hospital Administrator of such conviction (including pleas of guilty and nolo contendere) within 5 working days of the conviction occurring.
- B. Failure to inform the Hospital Administrator subjects the employee to disciplinary action, up to and including termination.
- C. The Hospital Administrator may offer an employee, convicted of a criminal drug statute, participation in an approved rehabilitation or drug abuse assistance program as an alternative to disciplinary action. If such a program is offered, and accepted by the employee, then the employee must satisfactorily participate in the program as a condition of continued employment.
- D. Involvement in illegal activity pertaining to the illegal use, sale, purchase, offer, or possession of a controlled substance while on duty, on GMHA property, or while using GMHA equipment will be reported to the Guam Police Department (GPD).
- E. An employee confirmed to be under the influence of an illegal drug or alcohol while on duty or while on GMHA property, or while using GMHA equipment will be ordered off GMHA property. The Hospital Administrator or a designee may place the employee on immediate suspension. Suspension will not exceed 30 days and may be appealed with the Civil Service Commission.

- F. An employee suspected of violating the DFW Policy may be directed by the Hospital Administrator or designee, to complete a drug analysis testing process. The employee will not be required to pay for such testing.
- G. Any employee violating the DFW Policy may be directed to participate in an education, rehabilitation, or treatment program by the Hospital Administrator or Designee, which will result in direction to participate and complete a drug analysis testing process.
- H. Any employee violating the DFW Policy is subject to disciplinary action up to and including termination.
- I. After the first offense, education, rehabilitation, or training are not options to an adverse action.

8. ORIENTATION AND NOTIFICATION PROCEDURES

- A. Responsibilities: Conveying complete information about GMHA drug testing policy to applicants and employees is essential.
 - (1) Job announcement must include a statement that AN APPLICANT TENTATIVELY SELECTED FOR THIS POSITION WILL BE REQUIRED TO SUBMIT A URINE SPECIMEN TO TEST FOR ILLEGAL USE OF DRUGS PRIOR TO FINAL SELECTION.
 - (2) Employees must be given a general statement of policy sixty (60) days prior to the implementation of the drug testing program.
 - (3) Employees whose positions were identified to meet the criteria for the Testing Designated Positions shall be notified that no sooner than thirty (30) days from receipt of the notice will they be subject to Random Drug Testing.
 - (4) The Personnel Administrator is responsible for informing Departments of the drug testing policies and procedures. Applicants will be furnished informational materials at time of

processing for employment with Personnel Services.

- (5) The Education Department is responsible for informational material and for training associated with this policy and any drug awareness. It is the responsibility of the GMHA Education Department, in coordination with the Personnel Administrator and Employee Health Nurse, to orient and familiarize all employees on GMHA's DFW Policy and Procedures.
- (6) Employee Health shall advise applicants and employees of the following:
 - (a) Methods of drug testing which may be used;
 - (b) Substances which may be identified;
 - (c) Reasonable effort to maintain the confidentiality of results and any medical information which may be provided; Importance of providing medical information to and cooperating with the collection site personnel;
 - (d) The specimen collection date, place, and time. Unless otherwise designated, the specimen collection site will be the GMHA Laboratory.

B. Notification Procedures: Official standardized forms and established reporting methods must be used for all notification procedures.

- (1) Applicants: The Personnel Services must complete the following steps when a conditional offer of employment for a position is made to the applicant.
 - (a) Inform the applicant that the offer of employment is conditional upon taking and receiving a negative drug test result.
 - (b) Advise the applicant as to the:
 - 1. consequences of a refusal to submit to a drug test;

2. consequences of a confirmed positive result;
3. substances which may be identified;
4. confidentiality of test results and medical information provided by the applicant;
5. consequences of refusing to submit to the drug screen or sign the consent form, failing to report for a drug screen or receiving a confirmed positive result.

(2). Current Employees: The Department Directors must complete the following steps when a supervisor has identified and documented reasonable suspicion of substance abuse.

- (a) Review the documented activity or actions which form the basis for the reasonable suspicion circumstances. Make sure the statements relate to work performance or safety.
- (b) Contact the Personnel Administrator promptly about the circumstances who will in turn consult with GMHA's Legal Counsel, if necessary.
- (c) Discuss the work performance or safety problem with the employee, but make no accusations of drug abuse or addiction.
- (d) Inform the employee that as a condition of continued employment, supervisors have the duty and obligation to submit recommendation to require an employee to take a drug test.
- (e) Consult with the Personnel Services to schedule a drug testing time with the collection site as soon as possible, after approval by the Hospital Administrator and no later than 24 hours after the suspected actions or the discussion with the employee.
- (f) After consultation with the Personnel Services, give the

employee verbal or written notification of the time and location.

- (g) Inform the employee that he/she will be escorted by GMHA Guard or his/her Supervisor to the collection site.
- (h) An employee who is requested to submit to a drug test shall be given time off with pay for the duration of the drug testing.
- (i) If the employee poses a threat to the safety or may cause undue disruption of work activity, consult the Personnel Administrator as soon as possible. The most reasonable action taken in this situation is to relieve the employee of his duties until GMHA receives the drug screen test result.
- (j) If the employee refuses or fails to participate in the drug screen process, notify the employee of the consequences and recommend the appropriate disciplinary action that may be taken against him.
 1. Contact the Personnel Administrator immediately.
 2. Document any such non-participation thoroughly including the name of the employee, the nature of the refusal or failure, and the reasonable suspicion circumstances, the date of the incident, names of witnesses and the employee's position. Forward the documentation to the Personnel Administrator.
- (k). Disposition of "Reasonable Suspicion" drug test:
 1. If the employee's drug screen is negative, the employee will be notified.
 2. If an employee's drug screen is confirmed positive and it is the employee's first confirmed positive, the employee will be

notified to visit the Employee Health Nurse.

3. If an employee's drug screen is a confirmed positive and it is not the employee's first confirmed positive, adverse action will be initiated. Rehabilitation does not apply.

9. DRUG TEST RESULTS

- A. Drug test results shall be reported in a reasonable timely manner.
- B. Drug test results shall be revealed only to persons authorized by the Hospital Administrator as having an established need-to-know for the information.
- C. An employee who receives a confirmed "positive" drug screen result or the equivalent and who has not previously had a confirmed "positive" result or the equivalent may be required to participate in an education, rehabilitation or treatment program. The employee may also be referred to an appropriate drug assessment, education or treatment program by the Hospital Administrator depending on the availability of local resources.
- D. An employee with a confirmed "positive" result shall sign and submit to the EAP Coordinator the education, rehabilitation or treatment program agreement. This agreement shall be filed in the Employee Health file.
 - (1) An employee will normally be granted annual or sick leave to participate in an approved education or treatment program pursuant to this policy. Leave requests are considered on a case-by-case basis and must be substantiated with proof of participation in an education, rehabilitation, or treatment program.
 - (2) The employee must also provide to the Employee Health Nurse and EAP Coordinator proof of participation in an education, rehabilitation or treatment program.

- (3) Supervisors or any cognizant authority in the chain-of-command may declare an employee a threat to safety or health at the work site while undergoing treatment or rehabilitation. In this situation, the Department Manager may recommend, and with the approval of the Hospital Administrator, transfer the employee to perform tasks where safety and health are not compromised. The Hospital Administrator may immediately suspend an employee pursuant to the adverse action procedures.

- (4) Refusal by an employee to participate in an approved education, rehabilitation, or treatment program as a condition of employment will be considered failure by the employee to successfully complete the recommended education, rehabilitation or treatment program. The employee shall be subject to disciplinary or adverse action.

- (5) Employees must provide or release clinical verification to the Employee Health Services of a successful completion of an education, rehabilitation or treatment program.

- (a) For the purpose of GMHA's drug testing program, successful completion of a recommended education, rehabilitation or treatment program means the employee achieved and maintained a drug-free state.

- (b) The Hospital Administrator retains the right to require an employee to submit to subsequent drug tests. As necessary, these tests may be administered during the authorized education, rehabilitation or treatment program and for a minimum period of twelve (12) months after the program ends.

- (6) Confirmed "Positive" drug screen result: An employee who receives a "positive" drug screen result is subject to adverse action procedures under the following conditions:

- (a) A first offender (of this policy) may be given the opportunity to

participate in an appropriate and approved drug assessment, education, and rehabilitation (or treatment) program before adverse action may be imposed.

- (b) An employee serving in a probationary period may be dismissed by written notice from the Hospital Administrator.
- (c) This policy shall not preclude the Managers from proposing disciplinary or adverse action for other mitigating circumstances that occur in addition to a confirmed "positive".
- (d) Failure by an applicant to report to the collection site at the scheduled time will be considered refusal to submit to a drug screen as a condition of employment and will be the equivalent of receiving a confirmed "positive" result for denial of employment and disqualification purposes.
- (e) Failure by an employee to report to the collection site at the scheduled time will be considered refusal to submit to drug screen as a condition of employment and will be the equivalent of receiving a confirmed "positive" result for disciplinary purposes.

- (7) If an employee occupies a TDP, the employee must be immediately removed from his/her current assignment. The employee will be assigned to a non-TDP, if available. The Hospital Administrator may return the employee to duty in a TDP as part of a rehabilitation and counseling program, if it would not endanger public safety. This determination should consider information obtained from the Plan Administrator, Medical Review Officer, Employee Assistance Administrator, and the employee's supervisor.

10. TAMPERING WITH DRUG SCREEN TESTING PROCESS

- A. Selected Applicant: Any selected applicant who intentionally tampers with a sample provided for drug testing, violates the chain-of-custody or identification procedures, or falsifies test results shall have conditional offer of employment withdrawn and such actions shall be grounds for disqualification to the position.
- B. Current Employee: Any current employee who intentionally tampers with a sample provided for drug testing, violates chain-of-custody or identification procedures, or falsifies a test result shall be subject to the adverse action procedures of dismissal.

11. APPEALS AND ADVERSE ACTION PROCEDURES

- A. Results of a Drug Test may lead to an Adverse Action.
- B. Adverse Actions and appeals are governed by GMHA Personnel Rules and Regulations and the CSC Adverse Action Procedures.

12. WORK RESPONSIBILITIES AND LEAVE PROVISIONS

- A. Employee's Job Responsibilities
 - (1) Some education, rehabilitation and treatment programs may require the employee to be on full-time leave; others will not. A GMHA Department Manager may detail an employee to another position or group of duties and responsibilities, if the supervisor has justifiable reasons that the employee is unable to perform his/her normal duties safely while receiving treatment. If the employee is not on leave status for education, rehabilitation or treatment, the employee will be expected to perform assigned work responsibilities during his/her normal work schedule.
 - (2) The employee is expected to perform satisfactorily if on work status while undergoing an education, rehabilitation or treatment program. The supervisor must continue to document work performance and behavior of the employee. If the employee's job performance is unsatisfactory, the employee may be disciplined for poor

work performance. If the employee continues to exhibit behavior which may indicate continued drug use during the education, rehabilitation or treatment period, the supervisor must provide documentation for reasonable suspicion.

(3) If an employee occupies a TDP, the employee must be immediately removed from his/her current assignment. The employee will be assigned to a non-TDP, if available. The Hospital Administrator may return the employee to duty in a TDP as part of a rehabilitation and counseling program, if it would not endanger public safety. This determination should consider information obtained from the Plan Administrator, Medical Review Officer, Employee Assistance Counselor, and the employee supervisor.

(4) The Hospital Administrator may require the employee to submit to subsequent drug screen as necessary or warranted to determine if the employee is making a progressive effort to rehabilitate himself or herself by becoming drug-free, which is important in order to protect the safety and health of employees and the public.

(5) Leave - An employee may be granted leave to participate in an appropriate and approved education, rehabilitation or treatment program. All leave requests shall be pursuant to the Personnel Rules and Regulations. The employee must provide proof of participation in the program to receive approval of leave request.

(6) The employee may apply for a sick, annual, leave sharing, or leave without pay. Whenever possible, the employee shall request that his/her education, rehabilitation or treatment sessions do not conflict with the employee's work schedule. Leave will be granted on a case-by-case basis and will be coordinated and verified with the Department of Mental Health and Substance Abuse.

(7) If an employee does not report to work at the conclusion of the approved leave period, GMHA may initiate disciplinary action in accordance with CSC Adverse Action Procedures.

SECTION IV: DEFINITIONS & FORMS

A. DEFINITIONS

1. **Administrator, Plan** - The Personnel Services Administrator of GMHA who is responsible for the following:
 - a. Provide guidance and assistance on the implementation of the DFWP policy and the submission of any DFWP reports.
 - b. Maintain the TDP list and process requests for changes to the list.
 - c. Ensure the confidentiality of test results.
 - d. Ensure that a copy of the "General Notice" is distributed to all employees and new hires.
 - e. Ensure timely distribution of an individual notice to each employee whose position has been determined to meet the criteria of a TDP at least thirty (30) days before the individual is subjected to unannounced random testing.
 - f. Ensure that the provisions of the DFWP are publicized to all employees including drug awareness, the hazards of illegal drug use, the Employee Assistance Program, and "safe harbor" provisions.
 - g. Ensure that employees who volunteer for the random testing program are released on administrative time off without charge to leave.
 - h. Ensure that an employee who has tested positive is immediately taken out of his or her TDP. The employee may be returned to his/her position as part of a counseling or rehabilitation program if the Hospital Administrator determines that such action will not endanger public safety or security.
 - i. Ensure that necessary disciplinary action is taken following the provision of this regulation.
2. **Alcohol** - the intoxicating agent in beverage alcohol or Ethyl alcohol or other molecular weight alcohol including Methyl or Isopropyl.
3. **Alcohol Use** - the consumption of any beverage, mixture or preparation, including any medication, containing alcohol.
4. **Aliquot** - a portion of a specimen used for testing.
5. **Applicant** - an individual offered employment at GMHA.
6. **Canceled or Invalid Test** - a Drug Test that has been declared invalid by a Medical Review Officer. A canceled test is neither positive or negative. In addition, a specimen that has been rejected for testing by the laboratory is treated the same as a canceled test.
7. **Chain-of-Custody** - the procedure and subsequent documentation by which laboratories handle specimens from collection to testing.
8. **Collection site** - the place (GMHA Medical Laboratory or as designated) where specimens are collected for drug testing analysis.
9. **Collection site personnel** - the trained laboratory personnel responsible for managing the collection process including Chain-of-Custody documentation and initial testing of the urine specimen provided by the individuals.
10. **Controlled Substance** - a material that is classed as a Drug, Narcotic, or immediate Precursor which is specified or referenced in the Title 9 GCA, Uniform Controlled Dangerous Substance Act; Chapter 67, and which may subject a person to criminal penalties.
11. **Confirmation (Confirmatory) test** - a second analytical procedure to identify the presence of a specific drug or metabolite. A confirmation test is independent of the drug test and uses different chemical technique and procedure in order to ensure reliability and accuracy. Gas Chromatography/Mass Spectrometry (GC/MS), GC/Fourier Transform Infrared Spectroscopy (GC/FTIR) and MSIMS are approved for Cocaine, Marijuana (THC), Opiates, Amphetamines, and Phencyclidines.
12. **Confirmed Positive Drug Test** - the presence of a specific drug or metabolite at or above the analytical sensitivity or cut off level by two tests on the same specimen by

- two different test methods; and which was not determined, after evaluation by the Medical Review officer, to have been caused by an alternate medical explanation.
13. Critical Incident - a circumstance which occurs while on duty at GMHA, on GMHA property, or using GMHA property that includes:
 - (a) An accident involving GMHA vehicle causing damage to property or person; or
 - (b) Behavior or activity which could cause damage to property or person; or Mental or physical impairment to raise doubt that job duties can be safely or effectively performed; or
 - (c) Possession, sale or use of an illegal drug or drug paraphernalia, open container of alcohol (in a moving vehicle), or driving under the influence of alcohol; and
 - (d) Reasonable suspicion that an employee's action or behavior was caused by alcohol and/or illegal drugs.
 14. DHSS - U.S. Department of Health and Human Services. A federal government agency that provide, maintain, and monitor all health and social programs.
 15. Drug - any substance other than food that can affect the way your mind and body works.
 16. Drug Metabolite - the specific substance produced when the human body metabolizes a given drug or substance as it passes through the body and is excreted in the urine.
 17. Drug Test - the laboratory analysis of a urine specimen collected and analyzed in accordance with National Committee for Clinical Laboratory Standards (NCCLS) and HCFA & DHHS regulations.
 18. Employee - an individual working in a classified, unclassified or contractual capacity at or for GMHA.
 19. Employee Assistance Program (EAP) - that GMHA EAP offers information, short term counseling, and referral services to assist employees in dealing with drug or alcohol dependency and related problems.
 20. EAP Coordinator - the Administrator of GMHA Social Services.
 21. HCFA - Health Care Financing Administration. A federal government organization that oversees the provision and financing of medical and social services for certain disadvantaged population such as the elderly and the disabled.
 22. Hospital Administrator - the Hospital Administrator of GMH. The Hospital Administrator is empowered to appoint and exercise discipline and or discharge of employees pursuant to 4 GCA, §4406 including those rights provided in §10112 of 4 GCA and Chapter 8 of 12 GCA.
 23. Illegal drugs - any controlled substance, drug, narcotic or immediate precursor which is specified or referenced in Chapter 67 of Title 9 GCA (Uniform Controlled Dangerous Substance Act) which may subject an individual to criminal penalties; or a legal drug which has not been legally obtained or is being used by an individual for whom it was not prescribed, or is not being used in a manner, combination or quantity for which it was manufactured, prescribed, or intended.
 24. Legal Drug - any "over-the-counter drug" or "prescription drug" which has been legally obtained and is being used in the manner, combination and quantity which it was manufactured, prescribed or intended.
 25. Impairment in or Reduction in Job Performance - the quality or quantity of an employee's performance on the job is less than should be expected or accepted, or less than usual, standard, or average as judged against the past job performance of the individual employee.
 26. Limit of Detection - the lowest concentration of a drug which a test is capable of detecting. If a drug is present below the LOD, the drug will not be detected.

27. **Medical Review Officer** - a licensed physician (Medical Doctor or Doctor of Osteopathy), assigned by GMHA and 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 relevant Bio-medical information.
28. **NCCLS - National Committee for Clinical Laboratory Standards.** A private organization that provides standards for clinical laboratory practice in accordance with best practice and government regulations.
29. **Need to Know** - confidential information may be shared with others only if it is necessary for implementing this policy, is part of the other individual's normal duties, or the employee has authorized a release of information.
30. **Negative Drug Test** - a drug test that indicates that a substance is absent or at a level below the "cut off" or limit of detection (LOD) for the immunoassay screening procedure. A verified negative test that has been reviewed by a Medical Review Officer and determined to have no evidence of prohibited drug use.
31. **On Duty** - the span of time the employee is scheduled to work including such time while the employee is on paid standby duty.
32. **Participate in an Education, Rehabilitation or Treatment Program** - to engage in, cooperate in, make satisfactory progress in, and complete an education, rehabilitation or treatment program.
33. **Prescription Drug** - means any drug prescribed for the individual by a licensed medical practitioner.
34. **Property** - includes all GMHA owned or leased property, work sites, parking lots, vehicles, including property assigned to or used by employees, such as desks, lockers, storage bins.
35. **Random Testing** - a system of drug testing without suspicion that may either be
- (a) Uniform-unannounced testing of designated employees occupying a specified area, element or position; or
 - (b) A statistically random sampling of such employees based on a neutral criterion, such as social security numbers.
36. **Reasonable Suspicion or Cause** - cause or suspicion based on objective facts and reasonable inference drawn from those facts, that an employee's action has been caused by drugs and/or alcohol.
34. **SAMHSA - Substance Abuse and Mental Health Services Administration.** A department under Department of Health and Human Services that provide, maintain, and monitor all substance abuse services such as: education, counseling, treatment, testing etc.
35. **Supervisor/Management** - an employee having authority to direct, assign, and to recommend the following: promote, reward, transfer, furlough, layoff, recall, suspend, discipline, or remove other employees. The exercise of the authority is not merely routine or clerical in nature, but requires the consistent exercise of independent judgment.
36. **Testing Designated Positions (TDP)** Positions Identified that will be subjected to random drug testing.
- B. FORMS**
- 1. Official forms to be used throughout the entire testing process are described below.
 - (a) Use of social security account number (SSAN) on a form is voluntary. This information will help insure proper identification of records.
 - (b) **Mandatory Forms.** Applicants and employees are required to sign the Drug Testing Consent and Acknowledgment Form and the Medical Information Form. Both forms are required prior to conducting a drug test.

- (1) Refusal to sign either or both forms is considered a refusal to submit to a drug test.
 - (2) Refusal by an applicant is equivalent to receiving a confirmed "positive" result and is a disqualification for employment purposes.
 - (3) Refusal by employee is equivalent to receiving a confirmed "positive" result and is grounds for disciplinary or adverse action.
- (c) Affirmation of Policy Form (APF). APF's are to be read, signed and dated by applicants and employees during program orientation and prior to any drug screens being conducted. The APF is used as a permanent record of prior knowledge by the applicants and employees of the drug screening policy. The APF contains a general statement of policy. The form also includes an applicant or employee's name, social security number and badge number, signature and the date.
- (d) Consent and Acknowledgment Form (CAF). CAF's are to be read, signed and dated by each applicant or employee asked to take a drug screen. If an applicant or employee is requested to submit to drug testing more than once, a new consent form must be signed each time. The CAF is a signed statement of consent to collect and analyze a urine specimen taken for the purpose of a drug screen. It is also used to acknowledge that the results of the screen will be made available to the Hospital Administrator and Employee Health Nurse and the respective GMHA Department Manager where the employee works. The CAF includes a space for the applicant's or employee's name, the social security number, badge number, and the employing division. The CAF also includes a space where the applicant and a witness sign and date the form.
- (e) Medical Information Form (MIF). The MIF is used by the applicant or employee to list all prescription and non-prescription drugs, if any, taken within 48 hours of the test. The accuracy of test results depend on information provided on the MIF. Collection site personnel will explain this form to each applicant or employee. Collection site personnel will also note any personal behavior, circumstances or findings on this form.
- (f) Chain-of-Custody Form (CCF). GMHA will utilize the Chain-of-Custody Form (CCF) of the contracted laboratory. Prior to implementation of the contracted laboratory's CCF, GMHA will issue an advisory to employees officially notifying employees of such form. The CCF is used to note each action taken and each person involved, from the beginning of the drug testing process through the reporting of test results, for each urine sample. The CCF begins with the collection of the sample and continues with sealing of the sample. The laboratory then receives, stores, and goes through each step of the testing process. Each succeeding action in the testing process will require the person completing a specific process to sign and date the CCF. The following information must appear on all parts of the urine custody and control form: 4. 5. 6. 7. 8. 9. 10.
- (1) Preprinted identification number
 - (2) Donor's employee identification number which is to be entered by the collector.
 - (3) Employer's name, address, and identification number.
 - (4) Specification for which drugs will be tested.
 - (5) Specification for reason for which test is conducted.
 - (6) Indication of temperature range and time of reading.
 - (7) Areas for information related to transfer of possession.

- (8) Information ~~on~~ - ~~for~~ collector to complete.
- (9) Laboratory accessioning information.
- (10) Information for donor to complete.
- (g) Access to Records Form (ARF). The purpose of the ARF is to allow an applicant or employee access to records concerning their drug screen and to release GMHA from any liability regarding the confidentiality of these records. The applicant or employee requesting access to the records must read, sign and date this form. This form requires the signature of a witness.
- (h) Verification of Treatment Form (VTF). The VTF form is used by the Department of Mental Health and Substance Abuse to report the status of an employee at the end of participation. This form is needed to verify the employee's successful completion in order to return to work. An authorized representative of Department of Mental Health and Substance Abuse, the employee, and a witness must sign the VTF.
- (i) Agreement to Participate in Education, Rehabilitation or Treatment Program. This form is to be read, signed, and dated by an employee who received a confirmed "positive" drug screen result. It is an agreement to participate in an education, rehabilitation or training program. Refusal to sign the agreement or failure to honor the agreement shall result in an adverse action. This agreement shall be filed in the Employee Health Record.
- (j) Release of Information (RIF) - This form will serve as notice that information must be released to the Employee Assistance Program Specialist (EAPS) and the Drug Program Specialist (DPS) regarding admittance and treatment schedule as long as he/she is involved in treatment and follow-up care.
- (k) Employee Assistance Program (EAP) Referral Form - This form provides information to the EAP regarding an employee's poor work performance or conduct when there is reason to believe that the cause may be due to a personal-medical problem.
- (l) Reasonable Suspicion Testing Form - This form is to be completed by the Supervisor to provide information regarding an employee suspected of using or being under the influence of drugs.
- (m) Form Supplies. The Employee Health Nurse will provide Departments with copies of the forms they will require.

ATTACHMENT #1

GUAM MEMORIAL HOSPITAL AUTHORITY

AFFIRMATION OF POLICY FORM (APF)

Statement of Policy

The Guam Memorial Hospital Authority is committed to a drug-free workforce to protect the safety of workers and the public. GMHA will not tolerate substance abuse or usage which imperils the health and well-being of its employees or threatens its service to the public. Therefore, it shall be the policy of GMHA to maintain a workforce free of substance abuse.

It is the policy of the Guam Memorial Hospital Authority that applicants be given conditional offer of employment shall take a drug screen to show they are drug free. In order to protect the safety of employees and the public, no applicant whose test shows illegal drug use will have his/her employment considered.

It is the policy of the Guam Memorial Hospital Authority that employees may be required to take a drug screen to show they are drug-free if there is reasonable suspicion of illegal drug use. GMHA will give current employees an opportunity to rehabilitate and return to their jobs as productive members of the workforce. Current employees who do not rehabilitate or who have a second test which shows illegal drug use may be disciplined in accordance with the Civil Service Commission Adverse Action Procedures.

It is the policy of the Guam Memorial Hospital Authority to inform applicants and employees of drug screening programs prior to drug tests being conducted. Employees will be given sixty (60) days notice prior to the implementation of the drug testing program. GMHA will consider drug screening results and medical information provided by applicants and employees as confidential.

Affirmation of Policy

As an applicant for or an employee, I affirm that I have read and understood the meaning of the above statement of policy regarding the Guam Memorial Hospital Authority's Drug Screening Program. As an applicant, I am aware that my offer of employment is conditional upon the results of a drug screen. As an employee of the GMHA, I am aware that I may be required to undergo a drug screen based upon reasonable suspicion, that I will be informed prior to the drug screen, and that I may be referred to an educational and treatment program depending on the results of the drug screen.

Name of Applicant or Employee: _____

Social Security No.: _____ Badge No.: _____

Department/Section: _____

Signature of Applicant or Employee

Date

Signature of Department Head

Date

- Original: Personnel Jacket
- 1st copy: Department
- 2nd copy: Employee/Applicant
- 3rd copy: Personnel Services Department

ATTACHMENT #2

GUAM MEMORIAL HOSPITAL AUTHORITY

CONSENT AND ACKNOWLEDGMENT FORM (CAF)

As an applicant for employment or an employee of GMHA, I hereby consent to and acknowledge that I am scheduled to undergo a drug test. The drug test will involve an analysis of a urine sample which I will provide at a designated collection site. The purpose of the test is to identify the presence of the following substances: marijuana, cocaine, PCP, opiates, and amphetamines. I acknowledge that the drug test result will be made available to the Hospital Administrator and Employee Health. As an applicant, I am aware that my conditional offer of employment will be rescinded should I receive a confirmed positive test result. As an employee, I am aware that I may be referred to an education, treatment, or rehabilitation program should I received a confirmed positive test result. If I refuse to undergo treatment, or if I have received a previous confirmed positive test result, I am aware that I may be subject to disciplinary action in accordance with the Civil Service Commission Adverse Action Procedures. I will present a copy of this form to the Collection Site when I report for my scheduled drug screen.

Name of Applicant or Employee:	Department/Section
Social Security No.	
Signature of Applicant or Employee: _____	Date: _____
Signature of Hospital Administrator, Authorized Designee or Witness: _____	Date: _____

Distribution List.

Original: Employee Health
1st copy: Applicant/Employee
2nd copy: DMH&SA

ATTACHMENT #3

(CONFIDENTIAL)

GUAM MEMORIAL HOSPITAL AUTHORITY

MEDICAL INFORMATION FORM (MIF)

I, (print name) _____, hereby consent to have a specimen of my urine submitted and I understand that it will be used for analysis by the GMHA Medical Laboratory. The result of the test on my specimen will be made available to GMHA and used for employment evaluation or referral for education, treatment, or rehabilitation. I hereby release all physicians, medical facilities, testing facilities, clinics, GMHA, its employees and officers from any all liability whatsoever arising from the release of the information discovered from my test.

Source ID No.:	SEX		
Date of Birth:	MALE		FEMALE
Have you taken any over-the-counter or prescription Medication in the last 48 hours?	YES		NO

DATE	TIME	MEDICATION/S

I hereby certify the above statement is accurate and true to the best of my knowledge.

Signature of Applicant or Employee:	Date:
-------------------------------------	-------

Sample obtained by: (print name)

Signature of Laboratory Personnel:	Date:
------------------------------------	-------

V. CARLOS CAMACHU RD.
NG, GUAM 96911

1-647-2283

**DO NOT WRITE
IN THIS AREA**

STUDY & CONTROL

SOCIAL SECURITY # _____
 EMPLOYEE NUMBER _____
 REASON FOR TEST (CHECK ONE)
 (1) PRE-EMPLOYMENT (2) POST ACCIDENT (3) RANDOM
 (4) PERIODIC (5) REASONABLE SUSPICION/CAUSE
 (6) RETURN TO DUTY (7) OTHER (SPECIFY) _____
 DONOR VERIFIED PHOTO I.D. EMPLOYER REPRESENTATIVE
 SIGNATURE OF EMPLOYER REP _____
 TEST(S): _____

STEP 2 - TO BE COMPLETED BY COLLECTOR. Who must read specimen temperature within 4 minutes of collection. Check the box below if reading is within the specified range. 90.5° - 99.8° F / 32.5° - 37.7° C or record actual temperature here _____

TO BE COMPLETED BY DONOR (Please turn to copy No. 3 (Pink page)).

TO BE COMPLETED BY COLLECTOR (Before completing this step have donor complete step 3 on bottom of pink page).

DONOR _____ TIME _____ AM PM COLLECTION SITE _____
 FOR _____ ADDRESS _____
 CONCERNING _____ CITY, STATE, ZIP _____ PHONE _____
 NON _____

I certify that the specimen identified on this form is the specimen sent to me by the donor identified in Step 1 above, and was collected, labeled and sealed in the donor's presence.

Signature of Collector

TO BE INITIATED BY THE COLLECTOR AND COMPLETED AS NECESSARY THEREAFTER.

PURPOSE OF CHANGE	RELEASED BY - Signature - Print Name	RECEIVED BY - Signature - Print Name	DATE
PROVIDE SPECIMEN FOR TESTING	DONOR - NO SIGNATURE		
SHIPMENT TO LAB		SEALED FOR COURIER PICK-UP	

REMARKS:

CONTAINER PACKAGE INTEGRITY WAS ACCEPTABLE UNACCEPTABLE WHEN RECEIVED IN LAB.

RECEIVER'S INITIALS _____

ATTACHMENT #4

ATTACHMENT #5

GUAM MEMORIAL HOSPITAL AUTHORITY

ACCESS TO RECORD FORM (ARF)

As an applicant or employee of the Guam Memorial Hospital Authority, I request access to all records relative to my drug screening test. I understand that my records relative to my drug screening test, including but not limited to the medical review, screening information and test results, will be released to the Hospital Administrator and/or his/her designee. I understand that by requesting access to these records, I hereby release the Guam Memorial Hospital Authority from any and all liability regarding the confidentiality of these records.

Name of Applicant or Employee: _____
Department/Section: _____
Social Security No.: _____ Badge No.: _____

Signature of Applicant or Employee: Date

Subscribed and sworn to before me this ____ day of _____ 19 ____

Notary Public
My appointment expires: _____ 19 ____

Distribution list:

Original: Personnel Department
1st copy: Employee
2nd copy: Employee Health Office

GUAM MEMORIAL HOSPITAL AUTHORITY

VERIFICATION OF TREATMENT OR EDUCATION FORM

This Certifies that the following individual participated in a drug evaluation and was recommended for an education or treatment program as a mandatory referral to the Department of Mental Health & Substance Abuse.

NAME OF EMPLOYEE: _____

SOCIAL SECURITY NO.: _____ BADGE NO.: _____

- 1. This individual successfully completed the recommended program. Determination is based on clinical evidence contained in our records that the individual is free of illegal drugs.
- This individual failed to successfully complete the recommended program. Determination is based on:
 - a. failure by the individual to participate; and/or
 - b. clinical evidence contained in our records that the individual is not free of illegal drugs.

Clinical evidence includes a drug screening test results. YES NO

COMMENTS: _____

NAME OF FACILITY: _____ DATE: _____

FACILITY'S AUTHORIZED SIGNATORY _____ DATE: _____

SIGNATURE OF EMPLOYEE _____ DATE: _____

Subscribed and sworn to before me this ____ day of _____ 199__.

NOTARY PUBLIC

My appointment expires: _____

ATTACHMENT #7

GUAM MEMORIAL HOSPITAL AUTHORITY

**AGREEMENT TO PARTICIPATE IN
EDUCATION, REHABILITATION OR TREATMENT PROGRAM**

PART A

Participation in education, rehabilitation or treatment program is offered to you as an alternative to disciplinary action.

PART B

If you agree to participate, cooperate, and make satisfactory progress in , and complete the program as recommended by the Plan Administrator which may include drug and alcohol analysis testing, disciplinary action will not be taken or will be mitigated as follows:

PART C

Under any option, satisfactory conduct and satisfactory job performance must be maintained. Your referral for education, rehabilitation or treatment program does not replace my supervisory option to initiate any adverse action against you if unsatisfactory job performance or unsatisfactory conduct continues.

PART D

Your signature below signifies your agreement to participate in the education, rehabilitation or treatment program. Failure to complete your agreement to participate and comply with the treatment program shall result in disciplinary or adverse action to include termination.

EMPLOYEE'S SIGNATURE BADGE NO. DATE

DEPARTMENT HEAD'S SIGNATURE DATE

ATTACHMENT #8

GUAM MEMORIAL HOSPITAL AUTHORITY

RELEASE OF INFORMATION (RIF)

As an employee of the Government of Guam, I understand and acknowledge that I have been referred to the Guam Memorial Hospital Authority's Treatment and Rehabilitation Program. I understand that I must contact the Employee Assistance Program (EAP) within 24 hours for processing and scheduling for a drug assessment with the Department of Mental Health & Substance Abuse. I understand that I may voluntarily arrange and schedule for any and all required education, treatment, or rehabilitation programs as may be prescribed by the EAP Specialist.

I hereby sign this waiver which releases information about the educational and treatment program in which I will participate. I authorize the release of any and all information regarding my admittance to an outpatient treatment program, the treatment program and progress, how the scheduled treatment will affect my work schedule, and other information which may affect my employment responsibilities.

I will present a copy of this signed waiver to the Department of Mental Health & Substance Abuse Counselor as notification that I am a referral from the EAP as a result of the Drug Screening Program. This form will serve as notice that information must be released to the Employee Assistance Program (EAP) Coordinator and the Plan Administrator, regarding my admittance and treatment schedule for as long as I am involved in treatment and follow-up care. I understand that if I do not contact the EAP, schedule an assessment, provide information regarding my treatment or complete my scheduled treatment sessions, I may be subject to disciplinary action in accordance with the Civil Service Commission's Adverse Action Procedures.

PRINT NAME OF EMPLOYEE

SIGNATURE OF EMPLOYEE

DATE

SOCIAL SECURITY NUMBER

BADGE NUMBER

DEPARTMENT/SECTION

Subscribed and sworn to before me this _____ day of _____ 19 ____.

NOTARY PUBLIC
My appointment expires _____ 19 ____

REASON FOR REFERRAL
(TO BE COMPLETED BY THE SUPERVISOR OF REFERRED EMPLOYEE)

Please fill in the sections that are relevant to this referral. If sufficient space is not available, please attach a supplemental sheet, or order that all relevant information is provided. Attach documentation (Letters of Warning, other disciplinary actions and incident report(s) to support these disclosures.

ATTENDANCE

No. of Days Absent In The Past 12 Months:	Number of Extended Lunch Periods in Past Six Months, (Reasons, if known):	Number of Late Occurrences in the Past Six Months. Reasons (if any):
Pattern (if any) – e.g., Mondays, Friday, after paydays, before and after holidays. Attach leave records for verification.		Other (Please Specify):

JOB PERFORMANCE

(Give Examples of Demonstrated Poor Performance or Conduct)

<input type="checkbox"/> Lower Quality of Work <input type="checkbox"/> Decreased Productivity <input type="checkbox"/> Increased Errors <input type="checkbox"/> Impaired Judgement/Memory	<input type="checkbox"/> Erratic Work Patterns <input type="checkbox"/> Failure to Meet Schedules <input type="checkbox"/> Inability to Concentrate <input type="checkbox"/> Other (Specify) _____
--	---

BEHAVIOR DEMONSTRATED

(Give Examples of a Specific Poor Behavior)

<input type="checkbox"/> Avoids Supervisors or Co-Workers <input type="checkbox"/> Less Communicative <input type="checkbox"/> Usually Sensitive to Advice or Constructive Criticism <input type="checkbox"/> Usually Critical of Supervisor, Co-Workers, or Employer	<input type="checkbox"/> Loss of Interest or Enthusiasm in Job <input type="checkbox"/> Frequent Mood Swings <input type="checkbox"/> Disregard for Safety On the Job <input type="checkbox"/> Other _____ _____
Have the Above Issues Been Discussed with the Employee <input type="checkbox"/> Yes <input type="checkbox"/> No	Has the Employee Been Referred for Special Medical Examination: <input type="checkbox"/> Yes <input type="checkbox"/> No
Supervisor's Signature:	Date:

ATTACHMENT #9

**GUAM MEMORIAL HOSPITAL AUTHORITY
EMPLOYEE ASSISTANCE PROGRAM (EAP)
REFERRAL FORM**

CONFIDENTIAL

General Instructions: The purpose of these forms is to provide information to the Employee Assistance Program (EAP) regarding an employee's poor work performance or conduct when there is reason to believe that the cause may be due to a personal-medical problem. It is important that you fill in the information requested to the best of your knowledge, limiting your responses to the facts, not hearsay and/or assumptions. This information will serve as a means of assessing the employee's problem and will help the EAP to determine the necessary steps needed in assisting the employee in alleviating his/her problem.

EMPLOYEE INFORMATION SHEET
(To be completed by the Supervisor of Referred Employee)

NAME:	SOCIAL SECURITY NO.:	BADGE NO.:	REFERRAL DATE:
--------------	-----------------------------	-------------------	-----------------------

HOME ADDRESS:	DATE OF BIRTH:	SEX:
----------------------	-----------------------	-------------

MAILING ADDRESS:	HOME PHONE:
-------------------------	--------------------

POSITION TITLE:	DEPARTMENT:	WORK PHONE:
------------------------	--------------------	--------------------

HOURS OF WORK:	DAYS OFF:	REFERRED BY:
-----------------------	------------------	---------------------

POSITION TITLE:	TELEPHONE NUMBER:
------------------------	--------------------------

THIS SECTION TO BE COMPLETED BY EMPLOYEE

I understand that I am being referred by my employer to the Employee Assistance Program (EAP). I also understand that my signature below does not reflect my agreement/disagreement to any of the issues raised. My signature verifies that I have seen the referral and all documentation contained therein.

_____ Yes, I will participate in the Employee Assistance Program.
I am responsible for all costs of treatment and rehabilitation.

_____ No, I will not participate in the Employee Assistance Program.

Employee's Signature

Date

Please handcarry or forward all document in a sealed envelope and stamped
CONFIDENTIAL to:

Employee Assistance Program (EAP)
2nd Floor GMHA
Social Services Department

If you have any questions, please call the EAP Coordinator at 647-2356/2140

GUAM MEMORIAL HOSPITAL AUTHORITY

SUPERVISOR'S REPORT
DRUG-TESTING PROGRAM

REASONABLE SUSPICION TESTING

Supervisor must complete the following information when an employee is suspected of using or being under the influence of drugs.

1. EMPLOYEE NAME: _____ DEPARTMENT: _____ DATE: _____
TIME: _____

2. Check the appropriate box and indicate your findings in the space below:

- Direct observation of drug use; or
- Direct observation of a pattern of abnormal conduct or erratic behavior; or
- Documented deterioration of employee's job performance that is likely to be attributable to drug use by the employee; or
- Documented on-the-job incident/accident or unsafe practice that may be reasonable attributed to the use of drugs such as a medical emergency or information provided by reliable and credible source(s); or
- Newly discovered evidence that the employee has tampered with a previous drug test.

DATE/TIME/LOCATION/EVIDENCE

3. Discuss the work performance or safety problem with the employee but make no accusations of drug abuse or addiction.
4. Inform the employee that as a condition of continued employment supervisors have the duty and obligation to submit a recommendation to require an employee to take a drug test.
5. Notify Department Manager or Personnel Administrator (during day time) or Nursing Supervisor (during evening/night time) of the critical incident(s) described above and recommend the employee undergo a reasonable suspicion drug test and obtain approval for the test.
6. Consult with Personnel Services to schedule a drug testing time with the collection site as soon as possible, after approval by the Hospital Administrator, and no later than 24 hours after the suspected actions or the discussion with the employee.
7. After consultation with Personnel Services, give the employee verbal or written notification of the time and location of the drug test.
8. Escort employee to the collection site.
 - An employee who is requested to submit to a drug test shall be given time off with pay for the duration of the drug testing.
9. If employee poses a threat to safety, or may cause undue disruption of work, consult the Personnel Administrator as soon as possible and inform the employee that she/he will be escorted by GMHA Security.
 - The most reasonable action taken in this situation is to relieve the employee of his/her duties until GMHA Receives the drug screen test result.
10. Employee and Security Escort to Lab at (time) _____

SUPERVISOR'S SIGNATURE: _____ DATE & TIME: _____

*Forward original to Plan Administrator with copy to Employee

ATTACHMENT #11

GUAM MEMORIAL HOSPITAL AUTHORITY
Tamuning, Guam 96911

INDIVIDUAL NOTICE TO EMPLOYEES

**CURRENTLY ASSIGNED TO
TESTING DESIGNATED POSITIONS**

MEMORANDUM

TO: _____
Employee's Name, Job Title and Grade

FROM: Hospital Administrator

SUBJECT: Notice of Random Drug Testing Under the Drug-Free Workplace Program

You were advised by a General Notice dated _____, that the Guam Memorial Hospital is implementing drug testing as part of the Drug-Free Workplace Program (DFWP). It has been determined that your position meets the criteria for random drug testing under the DFWP. Performance of the duties of your position is sufficiently critical to Government of Guam that screening to detect the presence of drugs is warranted as a requirement of your position. It is mandatory for your continued employment in this position that you refrain from the use of illegal drugs and, when directed, submit to drug testing.

No sooner than thirty (30) days from receipt of this notice, you may be subject to random drug testing on an unannounced basis for marijuana, cocaine, opiates, amphetamines and phencyclidine (PCP). You will receive specific instructions concerning when and where the test will be conducted immediately prior to the test. You will be allowed individual privacy while providing the urine specimen unless there is reason to believe the specimen will be altered. To ensure the accuracy of the test result, the collection, handling, and testing of the urine specimen will be conducted under strict chain-of-custody procedures established by the U.S. Department of Health and Human Service Guidelines for Workplace Drug Testing Programs and described in the Guam Memorial Hospital Authority - DFWP. The procedures used to test the urine specimens are very accurate and tightly monitored to ensure reliable results. The test results will be handled with maximum respect for individual confidentiality. In the event your specimen test positive, you will be given an opportunity to submit medical documentation to a designated Medical Review Officer to establish your legitimate use of the specific drug(s) before any administrative action will be taken.

If you refuse to furnish a urine specimen or fail to report for testing as directed, you will be subject to discipline. If, by any means, illegal drug use is detected, you will be subject to the following two administrative actions:

1. You will immediately be taken out of your current assignment. You may be restored to your TDP as part of your successful participation in a rehabilitation or counseling.
2. You will also be referred to the Employee Assistance Program (EAP) as required by the DFWP procedures.

In addition, disciplinary action up to and including removal from government service will be initiated. The removal action will be initiated if you refuse to obtain counseling or rehabilitation through the EAP after being found positive on your drug test or for a second finding.

If you believe you have a drug problem, you are encouraged to seek counseling and/or referral services by contacting the EAP (provide name, address, telephone number). If you voluntarily identify yourself to your supervisor or other higher level management official as a user of illegal drugs prior to being so identified through other means such as drug testing, seek counseling and/or rehabilitation assistance, and thereafter refrain from using illegal drugs, you will not be subject to discipline for your prior drug use. This immunity from discipline under these circumstances is referred to as "safe harbor." Furthermore, if you are arrested or convicted of a drug-related offense, you will not be eligible for "safe harbor" from discipline for those actions.

As stated in the General Notice announcing the Program, you, as well as all employees, may also be subject to drug testing under the provision of reasonable suspicion, involvement in an accident or safety mishap, and as part of or follow-up to a rehabilitation and/or counseling program for illegal drug use. When conducting reasonable suspicion testing or accident testing, the test may be for any drug listed in the policy such as: Marijuana/Cannabinoids (THC), Cocaine Metabolites, Opiates, Phencyclidine (PCP), and Amphetamines/Methamphetamine.

TYRONE J. TAITANO

ACKNOWLEDGMENT RECEIPT

I acknowledge receipt of this letter and have read and understood its contents. I understand that I may be selected for random drug testing. I also understand that refusal to submit to testing will result in initiation of disciplinary action, up to and including dismissal.

SIGNATURE OF EMPLOYEE

DATE

ATTACHMENT #12

GUAM MEMORIAL HOSPITAL AUTHORITY

TESTING DESIGNATED POSITIONS

Clinical Dietitian I and II
Hospital Licensed Practical Nurse I and II
Hospital Nurse Supervisor I and II
Hospital Unit Supervisor
Hospital Nursing Supervisor
Emergency Room Technician
Cardiac Monitoring Technician
Hemodialysis Technician
Infection Control Practitioner
Infection Control Officer
Hospital Pharmacist
Blood Bank Recruiter
Patient Courier
Operating Room Technician
Chief Hospital Pharmacist
Pharmacy Technician
Pharmacy Aide
Director, Radiology Services
Chief, Hospital Radiology Services
Assistant Chief, Hospital Radiology Services
Hospital Radiologic Technologist I and II
X-Ray Technician I and II
Ultrasound Technologist
Nuclear Medicine Technologist
Director, Rehabilitative Services
Chief Hospital Physical Therapist
Hospital Physical Therapist I and II
Hospital Physical Therapist Supervisor
Physical Therapy Technician I and II
Recreational Therapy Technician I and II
Chief Hospital Respiratory Therapist
Respiratory Therapist I and II
Cardiopulmonary/Neurology Technician I and II
Echocardiogram Technologist
Nurse Aide I and II
Hospital Laboratory Technologist I, II, and III
Medical Laboratory Technician I, II and III
Administrator, Laboratory Services

JUSTIFICATION:

These positions have direct patient care responsibility. Errors in judgment would directly impact on patient prognosis and progress. The provision of psychotherapy by drug-impaired staff would compromise the integrity of the mission of the Guam Memorial Hospital Authority and the Drug Free Workplace Program.

ADDITIONAL POSITIONS FOR TESTING DESIGNATED POSITION

Staff Nurse I
Staff Nurse II
Physician

Description:

- a. **Staff Nurse I and II** - These positions involve professional nursing work in the hospital. Incumbents perform assessments, initiate the care plan for each patient, implement the medical care plan through Physician's Order of each patient and evaluates the response of the patient to the medications administered, uses adaptive and life sustaining complex equipment, in addition to nursing skills and techniques as determined by specific types of services rendered and documents nursing actions taken, medications and treatments given. All incumbents have access to controlled substances.
- b. **Physician** - This position involve professional medical work in providing direct patient care. Incumbent is responsible in the diagnosis, prevention, and treatment of diseases and injuries; and research in the causes, transmission, and control of diseases and other ailments. Examines patients using medical instruments and equipment; orders or executes various tests, analyses reports and findings of tests and of examination; administers or prescribes treatments and drugs.

JUSTIFICATION:

These positions have direct patient responsibilities. Health professionals are responsible for the lives and well being of their patients. The potentially disastrous results of inappropriate diagnosis and/or treatment dictates that such practitioners be mentally alert and competent at all times. Incumbents must recognize patients' adverse signs and symptoms and react swiftly in emergency situations. Any impairment due to drug use may result in loss of life or serious physical or mental injury to patients and negatively impact a substantial sub-section of patient care.



ATTACHMENT #13

PROCEDURES FOR CHANGING THE TDP LIST

Department Heads may request additions to or deletions from the TDP list from the Hospital Administrator. The request must contain:

1. The exact title and pay grade of each position.
2. A description of duties and justification which warrant including the position on the TDP list.
3. The reasons why the department head wants the position deleted from the TDP list in sufficient detail to support the request.

If the Hospital Administrator determines after conferring with the Director of Mental Health & Substance Abuse and the Attorney General, that the requested addition meets the criteria and justification for inclusion on the TDP list, he will grant approval, subject to CSC's approval. The requested position will be added to the list and a new listing will be provided.

If request is rejected by the Hospital Administrator, the requestor will be notified. The TDP list will not be revised.

The Hospital Administrator will evaluate requests for deletions and will notify the department head of the decision to delete. Where a deletion is approved, positions with the same title and pay grade must be removed from every TDP list and thereafter, incumbents of positions will not be tested.

