

Administrative Directive Title: Employee Drug Testing Procedures	AD Number: 5.403.1	Adopted: March 1996 Former Descriptor: PER11
Policy References: Board Policy 5.403 – Drug-Free Workplace	Revised: 8/14; 3/19; 7/19; 11/24	

1 The purpose of this procedure is to maintain a safe and productive work environment by ensuring that
 2 school employees are not under the influence of drugs or alcohol while performing their duties. This
 3 procedure outlines the guidelines for drug testing, including reasonable suspicion testing for all school
 4 employees.

5 **REASONABLE SUSPICION TESTING**

6 All employees are subject to reasonable suspicion drug/alcohol testing if it appears at any time that an
 7 employee is under the influence of drugs or alcohol while on school campus or performing district-
 8 related job duties. Employees shall report concerns regarding possible alcohol or drug use to their
 9 immediate supervisor. This report may be based on the following factors:

- 10 1. Observable phenomena while at work, such as direct observation of drug or alcohol use or of
- 11 the physical symptoms or manifestations of being under the influence of a drug or alcohol;
- 12 2. Abnormal conduct or erratic behavior while at work or a significant deterioration in work
- 13 performance;
- 14 3. A report of drug or alcohol use, provided by a reliable and credible source;
- 15 4. Evidence that an individual has tampered with a drug or alcohol test during employment with
- 16 the current employer;
- 17 5. Information that an employee has caused, contributed to, or been involved in an accident while
- 18 at work; or
- 19 6. Evidence that an employee has used, possessed, sold, solicited, or transferred drugs or used
- 20 alcohol while working, while on the school district’s premises, or while operating a district-
- 21 owned vehicle, machinery, or equipment.

22 If testing is deemed necessary, the suspected employee will be immediately transported to the testing
 23 facility. If the results are negative, the employee will return to work as scheduled. If the results are
 24 positive, the employee will meet with their supervisor and the Human Resources Director to determine
 25 appropriate next steps. All drug/alcohol testing results and related documentation will be kept
 26 confidential and shared only with personnel who need the information to make decisions regarding
 27 employment or disciplinary actions.

28 **TESTING FOR CDL EMPLOYEES**

29 The Transportation Supervisor shall be responsible for overseeing all drug testing of CDL employees.
 30 They shall also provide information on the use of alcohol and controlled substances, the effects on an
 31 individual’s life, and resources for seeking assistance.

32 CDL employees shall be provided with a copy of this procedure and the accompanying board policy at
 33 the beginning of each school year. Any employees hired after the start of the school year or transferred

34 to a position with these responsibilities after that time shall subsequently be provided copies of these
35 materials. Each employee shall sign a statement acknowledging that he/she has received these materials.

36 Murfreesboro City Schools shall use “Professional Drug Screening Services” to conduct the testing listed
37 below. The “Professional Drug Screening Services” will maintain a list of all the illegal substances that
38 will be tested and the specific procedures utilized during testing. This list will be provided to employees
39 prior to testing.

40 **PRE-EMPLOYMENT DRUG TESTING**

41 Pre-employment drug testing will be performed by the “Professional Drug Screening Services”. If lab
42 results are negative, employee onboarding will begin, subject to the employee meeting all other required
43 conditions of employment. If lab results are positive, no onboarding will begin until either a doctor’s
44 note can be provided to establish an explanation, or another test can be administered. If the final result
45 is positive, the individual shall not be employed by the district.

46 **POST-ACCIDENT TESTING**

47 Alcohol and drug tests should be done as soon as practical (within two hours) after a critical incident,
48 although there should be no delay in providing medical treatment. Alcohol and drug tests will be
49 conducted after any incident, which results in any or all of the following:

- 50 a. An incident that results in death of a human being; or
- 51 b. An incident that results in bodily injury to a person who, as a result of the injury, immediately
52 receives medical treatment away from the scene of the accident; or
- 53 c. An incident where one of the vehicles is towed from the scene of the accident; or
- 54 d. An incident that results in the driver being issued a citation.

55 The driver will be transported from the scene by the Transportation Supervisor or designee to a testing
56 lab contracted by the school district. If an accident occurs after business hours, Transportation Supervisor
57 or designee will utilize the after-hours clinic list that he/she maintains. Transportation Supervisor or
58 designee will receive the results from the testing facility.

59 If the results are negative, the employee's supervisor/designee will transport the employee back to district
60 property and complete any necessary incident reports.

61 If the results are positive, the employee's supervisor/designee will contact the Human Resources Director
62 to determine appropriate next steps.

63 If circumstances prevent adhering to the two-hour time limitation, the employee's supervisor must
64 immediately contact the Human Resources Department to request a time extension. In no case will a
65 drug test be performed after thirty-two (32) hours from the occurrence of the incident and in no case will
66 an alcohol test be performed after eight (8) hours from the occurrence of the incident.

67 The post-accident testing process is subject to change depending on the severity of the accident and the
68 injuries sustained by the driver.

69 **RANDOM TESTING**

70 For CDL employees, the Human Resources Department will use a computer program to randomly
71 generate a list of employees for testing three (3) times each school year. The testing dates will be selected

72 by the lab conducting the testing. The Transportation Supervisor will contact employees and tell them
73 to report to a testing lab contracted by the school district immediately.

74 If the test is negative, the employee shall return to his/her normal work as scheduled.

75 If the test is positive, the employee will be assigned other duties while waiting for additional lab results.
76 If those additional lab results are negative, the employee will return to their normal work schedule.
77 However, if those results are positive, the employee will meet with their supervisor to determine
78 disciplinary measures up to and including termination.

79 If any employee refuses to submit to testing, it is considered a positive test, and they will be subject to
80 disciplinary action up to and including termination.

81 If an employee is absent from work that day the Transportation Supervisor will inform the Human
82 Resources Department, and the employee will be rescheduled for drug/alcohol test. All employees
83 selected for testing must be tested on the day of notification.

84 **DISSEMINATION**

85 The Human Resources Department shall be responsible for communicating the drug testing process to
86 all employees affected by this procedure and shall be accountable for its consistent enforcement. The
87 Human Resources Generalist shall answer questions about this procedure, the corresponding board
88 policy, and all other matters, including any potential disciplinary consequences, involved in the alcohol
89 and drug testing of CDL drivers and the reasonable suspicion testing of all other employees.

90 **CONFIDENTIALITY**

91 Results of tests will only be shared with appropriate personnel as necessary for recordkeeping, licensure
92 reporting, and disciplinary purposes, if applicable.

93 **EMPLOYEE ASSISTANCE**

94 The school district offers an Employee Assistance Program (EAP) that is confidential and available at
95 no cost to all employees enrolled in health coverage through the district.



Reasonable Suspicion Determination Report

This form is provided as guidance for supervisors to make a determination on whether reasonable suspicion exists regarding staff use of drug or alcohol or drug/alcohol impairment while on a school campus. The following checklist is designed to serve as a guide in the event you determine that such testing may be necessary and to document the reasonable suspicion required for testing under [Board Policy 5.403](#).

Employee Name: _____ Employee ID: _____

Date/Time of Observation: ____ / ____ / ____ _____ AM/PM

Date/Time of Determination to Test: ____ / ____ / ____ _____ AM/PM

Observed Indicators of Prohibited Drug Use/Alcohol Use

Observing Supervisor: _____ Witness: _____

Reasonable Suspicion determinations must be based on specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odor of the safety-sensitive employee.

Check all indicators CURRENTLY observed:

Physical Indicators

- Bloodshot or watery eyes
- Flushed or very pale complexion
- Extensive sweating/skin clamminess
- Dilated or constricted pupils
- Disheveled clothing/unkept grooming
- Unfocused, blank stare
- Runny or bleeding nose
- Jerky eye movement
- Body odor

Behavioral Indicators

- Fidgety/agitated
- Irregular breathing
- Nausea/vomiting
- Slow reactions
- Unstable walking
- Poor coordination
- Hand tremors
- Suspicious, paranoid
- Depressed, withdrawn
- Lackadaisical attitude
- Irritable, moody
- Extreme fatigue

Speech Indicators

- Slurred or slowed speech
- Loud, boisterous
- Incoherent, nonsensical
- Repetitious, rambling
- Rapid, pressured
- Excessive talkativeness
- Exaggerated enunciation
- Cursing, inappropriate speech
- Inability to concentrate
- Impulsive, unusual risk-taking
- Delayed decision-making
- Reduced alertness

Written Summary

Summarize the facts and circumstances surrounding the incident. Attach additional sheets as needed.

Testing Information:

Collection Site Location: _____

Time Arrived: _____AM/PM

Means of transportation to collection site :

Note: when a reasonable suspicion determination has been made, an employee should be transported to a collection site.

1. Did the employee submit to testing?

_____YES

_____NO

2. Did employee leave the workplace on their own?

_____YES

_____NO

If yes, circumstances:

Vehicle (if any): _____ License #: _____

Was local law enforcement notified? _____ Name of authority notified: _____

The above documentation of the observed physical, behavioral, and performance indicators of the named employee was provided by:

Supervisor Name: _____

Signature: _____

Date: _____

Witness Name: _____

Signature: _____

Date: _____

PLEASE REFER REPORT TO THE DIRECTOR OF HUMAN RESOURCES FOR FURTHER PROCESSING