

# **Drug & Alcohol Policy For Action Traffic Maintenance Inc.**

In 1988, Congress enacted the Drug Free Workplace Act to require federal contractors to establish and maintain a work environment that is free from the effects of drug use and abuse. Federal Regulations 49 CFR Part 40 (§382) present the general terms of this program and its guidelines. We agree with that goal and believe that Action Traffic Maintenance Inc. has responsibility to its employees and those who use or come in contact with its products/services, to ensure a safe and productive work environment. To satisfy these responsibilities, it is the policy of Action Traffic Maintenance Inc. and a condition of employment that an employee be present and able to perform their job free from the effects of alcohol, narcotics, depressants, stimulants, hallucinogens and cannabis or any other substances, which can impair job performance.

## **Our Commitment**

We recognize that drug and alcohol abuse may be a sign of chemical dependency and that substance abuse can be successfully treated with professional help.

Action Traffic Maintenance Inc. provides an Employee Assistance Program (EAP) through [SapList.Com](http://SapList.Com) for employees to deal with substance abuse and other personal problems that can affect work performance. Our commitment is to help employees remain productive members of our team. In certain circumstances, the company may insist upon a mandatory referral to our EAP as a condition of continued employment. No employee will be disciplined or discriminated against simply for seeking help. However, the company may place you on unpaid leave if they feel the safety of the employee, other employees or the public may be in danger of allowing the employee to continue working.

## **Employee Responsibility**

The employee is responsible for following all of our work and safety rules, and for observing the standards of behavior and employer, co-workers, and customers have the right to expect from you. In addition, if you believe you may have a problem with drugs or alcohol, you are responsible for seeking assistance, whether from or through the company or any other resource, before a drug or alcohol problem adversely affects your work performance or results in a violation of this policy. The time to seek help is **BEFORE** you are in "trouble", NOT AFTER. If a professional assessment is made that you have a problem with Drugs or Alcohol, your continued employment may be conditioned upon:

- Entering into and completing a treatment program approved by the company.
- Signing and living up to a last chance performance agreement.
- Undergoing a Follow-up Testing Program at companies' discretion.

## **Scope of Our Policy**

This Policy and each of its rules apply whenever an employee is on or in Company Property, surrounding grounds and parking lots, leased or rented space. Company time

(including breaks and meal periods), in any vehicle used on Company business, and in other circumstances (such as on customer premises or at business/sales functions) we believe may adversely affect our operations, safety, reputation or the administration of this policy.

### **Our Drug and Alcohol Rules**

The following rules are extremely important and an employee who violates any one of them will be subject to disciplinary action, up to and including termination.

**CDL Drivers are subject to unannounced random testing. A driver may be directed to take a drug test even when at home in an off duty status. Random alcohol testing may occur only when the driver is on-duty or immediately before or after. Once notified to report for random testing, drivers must immediately report to the testing location. Delaying your arrival may be considered a refusal (see 49 CFR 40.191), which is equivalent to testing positive.**

1. **Alcohol** An employee may not possess, use, transfer, offer, or be under the influence of any intoxicating liquor while at work or on company business. This rule prohibits using any alcohol prior to reporting to work, during breaks or meal periods, or in conjunction with any Company activity, except social or business events where a Corporate Officer has authorized the moderate consumption of Alcoholic Beverages.
2. **Drugs** An Employee may not possess, use, transfer, offer, share, attempt to sell or obtain, manufacture, or be under the influence of any drug or similar substance and also may not have any drugs of similar substances present in the body. Thus, an employee who tests positive for any illegal-drug violates this rule. This rule also pertains to Prescription drugs being taken without doctor's authorization.
3. **Drug Paraphernalia and Alcohol Containers.** An Employee may not possess any Drug Paraphernalia or Alcohol Containers.
4. **Prescriptions/Over-the-counter Medications** It is the employee's responsibility to check the potential effects of prescribed drugs and over-the counter Medications with your doctor or pharmacists before starting work, and to immediately let your supervisor know when such use makes it unsafe for you to report to work or do your job. **Employee must report to the DER all prescriptions with a note from the Doctor stating if the drug will affect their driving capabilities.**
5. **Adulterants** Any substance that is used for the purpose of Manipulating a drug test by adding to the specimen or ingesting.

### **Consequences.**

1. An employee that tests positive will be immediately placed on un-paid time off until such time that the results are reviewed by the Medial Review Officer (MRO). If after the MRO determines that the test was accurate, the employee's employment will be terminated for cause of violating this policy. The employee has the right to contest the results as permitted by the Department of

Transportation (DOT). The process for contesting the test results can be found on the DOT website.

2. An terminated employee may re-apply for a position with the company if they have completed the required DOT return to service protocols. These protocols may be reviewed from the SapList.Com website, or the DOT website. The company is not obligated to hire, or re-hire any person.

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

All safety sensitive employees are required to pass a DOT pre-employment urine drug test before being hired. If there is a positive test result, no employment offer is to be made. **The company will pay the cost of a single Pre-employment test per applicant.**

#### **Random Testing Program.**

CDL

The Random-testing program is implemented by a third party and/or a computerized Selection Process throughout the year. The TPA (third party administrator) notifies the DER, Designated Employee Representative. The DER can notify the Driver within the selection period. When the driver is notified, they must test ASAP. The Federal Motor Carrier Safety Administration does not allow testing delays due to convenience or movement of freight. (FMCSA).

The Company will cover the cost of any negative random test the employee is directed to take. The employee will be responsible for the cost of any positive tests and retests.

#### **Mandatory Post Accident Testing.**

Post accident drug and/or alcohol testing will be at supervisor or company request, or as Defined in 49 CFR Part 40. *See Chart*

<b>Type of accident involved</b>	<b>Citation issued to the CMV driver? (Class A or B)</b>	<b>Test must be Performed.</b>
<b>i. Human Fatality</b>	<b>Yes</b>	<b>Yes</b>
	<b>No</b>	<b>Yes</b>
<b>ii. Bodily injury with immediate medical treatment away from scene.</b>	<b>Yes</b>	<b>Yes</b>
	<b>No</b>	<b>No</b>
<b>iii. Disabling damage to any motor vehicle requiring tow away.</b>	<b>Yes</b>	<b>Yes</b>
	<b>No</b>	<b>No</b>

#### **Reasonable Suspicion Testing or Reasonable Cause**

At least one Supervisor will be trained in accordance to 49 CFR 382.603 of the Federal Register to make these observations of Work Performance, Behavior, and Physical Indicators.

- Observable Symptoms or Unusual Behavior.

- The Odor or Smell of Alcohol or Drugs on the employee's breath or clothes or in an area (such as in a vehicle, office, work area, or restroom) immediately controlled or occupied by the employee.
- Alcohol, alcohol containers, illegal drugs or drug paraphernalia in the employee's possession or in an area controlled or occupied by the employee (vehicle, office, desk, restroom).
- Unexplained or Significant deterioration in job performance.
- Unexplained significant changes in behavior (e.g., abusive behavior, repeated disregard of safety rules or procedures, insubordination, etc.);
- Evidence that the employee may have tampered with a previous drug test.
- Criminal citations, arrests or convictions involving drugs and alcohol.
- Unexplained absenteeism or tardiness
- Employee admissions regarding drug or alcohol use;
- Any involvement in any work-related accident or near misses.
- Any type of Paraphernalia discovered on your person or Company Property

### **Fit for Duty**

The company could require a fit for duty exam by a certified Medical Practitioner; this exam can be administered along with Drug and Alcohol Screen to determine if employee is fit for Duty. This could be requested in addition to the DOT Medical Card Certificate.

### **Duty to Cooperate**

An employee who fails to cooperate in the administration of this policy generally will be terminated and is in violation of §49 CFR Part 40. This includes such things as:

- Refusing to consent to testing, to submit a sample, or to sign required forms.
- Refusing to cooperate in any way (for example, refusing to courteously and candidly cooperate in any interview or investigation, including any form of truthfulness, misrepresentation or misleading statements or omissions.);
- Any form of dishonesty in the investigation or testing process.
- Refusing to test again at a time of the Company's choosing whenever any test results in a finding of a dilute sample or reasonable suspicion.
- Failure to accept the referral, to enter into and complete an approved treatment program, or to sign or adhere to the commitments in the Last Chance Performance Agreement.

### **EMPLOYEE ACKNOWLEDGEMENT AND CONSENT TO TESTING**

1. I, \_\_\_\_\_ acknowledge receiving a copy of the Company's Drug and Alcohol Policy. Date \_\_\_\_\_
2. I voluntarily agree to provide a sample of my Urine for Testing and to submit to any related physical or other examination when I have been requested to do so.
3. I authorize the release of the Test Result (and any other relevant medical information) to the Company for its use evaluation and suitability for continued

employment. I also release the Company from all liability arising out of or connected with the testing.

4. I understand that if I refuse to submit to the testing, to give a requested sample(s), to authorize release of the results to the company, and/or if the test results indicate that I do not meet the Company's standards, I may be terminated.
5. I understand that any attempt to switch, adulterate or in any way tamper with the requested sample(s) or to otherwise manipulate the testing process will result in termination of employment. I also understand that if my test results are dilute on the second testing, I may be terminated.

I have read this entire policy and each of the above statements ☐ Yes ☐ No

Signature & Date

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Sign and return this