

How Methamphetamines Affect the Workplace



How Methamphetamines Affect the Workplace

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How Methamphetamines Affect the Workplace

Objectives

You will learn:

- What methamphetamines are;
- Effects of methamphetamines;
- Regional awareness of methamphetamine use and production;
- Recognition of improvised chemical labs and equipment for methamphetamines production;
- How to recognize methamphetamine use and production in the workplace;
- Available drug treatment intervention programs;
- Hazards associated with production;
- Safety protocols to limit exposure;
- Best practices for site removal of hazardous waste.

How Methamphetamines Affect the Workplace

Agenda

8:30 am - 8:45 am

- Introduction

8:45 am - 10:45 am

- Extent of the problem
- Effects of Methamphetamine use
- What is a Methamphetamine lab
- Locations of labs
- Identifying lab waste

10:45 am – 11:00 am

- Break

11:00 am - 11:45 am

- Lab safety and what you should do
- Chemical, toxicological and physical hazards
- Contamination & decontamination
- Cleanup PPE

11:45 am – 12:30 pm

- Workplace effects and what an employer can do
- Employee assistance and drug-free workplace programs
- Review session
- Q&A
- Evaluations

BWC Office Locations

**Ohio Center for
Occupational Safety &
Health (OCOSH)**
13430 Yarmouth Drive
Pickerington, OH 43147
1-800-OHIO BWC
(Follow the prompts)
(614) 995-8622
Safety@bwc.state.oh.us

Cambridge
61501 Southgate
Parkway
Cambridge, OH 43725
(740) 435-4210

Canton
400 Third St. S.E.
PO Box 24801
Canton, OH 44701-
4801
(330) 471-0397

Cleveland
615 W. Superior Ave.
6th Floor
Cleveland, OH 44113
(216) 787-3060

Columbus
30 W. Spring St.
11th Floor
Columbus, OH 43215
(614) 752-4538

Dayton
3401 Park Center Drive
PO Box 13910
Dayton, OH 45414
(800-862-7768
(937) 264-5230

Garfield Heights
4800 E. 131st St.
Garfield Heights, OH
44105
(216) 584-0115

Governor's Hill
8650 Governor's Hill Dr.
4th Floor
Cincinnati, OH 45249
(513) 583-4403

Hamilton
One Renaissance
Center
345 High St.
Hamilton, OH 45011
(513) 785-4510

Lima
2025 E. Fourth St.
Lima, OH 45804
(419) 227-4116

Logan
1225 W. Hunter St.
Logan, OH 43138
(740) 385-9848

Mansfield
240 Tappan Drive N.
PO Box 8051
Mansfield, OH 44906
(419) 529-4528

Portsmouth
1005 Fourth St.
PO Box 1307
Portsmouth, OH 45662
(740) 353-3419

Springfield
1 S. Limestone St.
PO Box 1467
Springfield, OH 45501
(937) 327-1365

Toledo
1 Government Center
12th Floor
Toledo, OH 43604
(419) 245-2474

Youngstown
242 Federal Plaza W.
Suite 200
Youngstown, OH 44503
(330) 797-5010

Instructions for Downloading Materials from BWC's Learning Center

1. Go to: www.bwclearningcenter.com
2. Log in using your username and password
 - a. If you have forgotten your username and password call 1-800-OHIOBWC
3. Click the "Team Center" building
4. Click "Team Rooms"
5. Type "meph" in the keyword field and click search
6. Click the "How Methamphetamines Affect the Workplace" team room which should be the first team room listed
7. Click "Content" listed in the Team Room Tools
8. Click on the document that you wish to view/download
 - a. Websites might be available to click for easy access to online resources
 - b. Students and instructors are also able to submit resources that might be useful to other team members
 - c. Instructor(s) PowerPoint(s) that may not be in manual will be available to download
9. Log off when finished

How Methamphetamines Affect the Workplace

Methamphetamine and It's Impact on Ohio's Work Force

*SA Dennis Lowe
Ohio Bureau of Criminal Investigation
Clandestine Laboratory Unit*

How Big Is The Problem?

- Methamphetamine Identified as #1 Drug Threat in the U.S.
- Meth is Leading Cause of Drug related visits to emergency rooms in the U.S.
- In Many States Meth accounts for 85% of drug related crime

The Problem Continued.....

- Methamphetamine is the Most Abused Hard Drug on the Planet
- 26,000,000 People Addicted Worldwide
- 12,000,000 in USA Have Tried It or Use it
- 1,900,000 Americans Addicted to Meth
- Since 2000 Ohio Has Seized More Than 1,700 Methamphetamine Labs

How Methamphetamines Affect the Workplace

Ohio's Problem is Multi Faceted

- Addiction Driven
- Mexican National Drug Cartels Supplying Users With High Grade Meth
- Ohio Based Manufacturers Producing Meth in Small Toxic Meth Labs
- Subjecting Ohioans to not only the Social and Economic Cost of Addiction, But Putting the Public at Risk from The Chemical, Toxicological, and Physical Hazards Associated with the Manufacture of Meth

HOW TO IDENTIFY METHAMPHETAMINE WASTE ABANDONMENT AND DUMP SITES



SA Dennis Lowe
Ohio Bureau of Criminal Investigation
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Discussion Topics

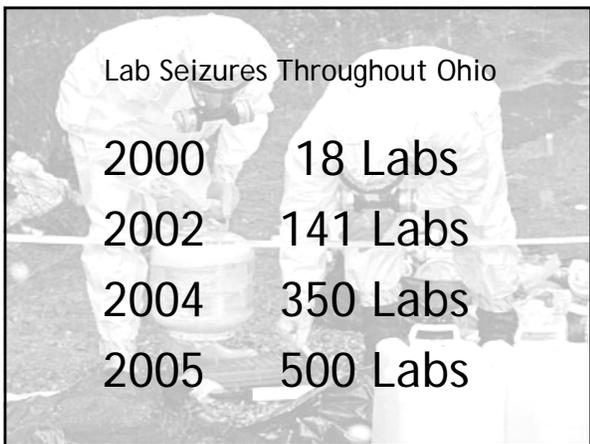
- Extent of the problem
- Effects of meth use
- What is a meth lab?
- Locations of labs
- Identifying lab waste
- Chemical, toxicological and physical hazards
- Contamination & decontamination
- Lab safety and what you should do



How Methamphetamines Affect the Workplace



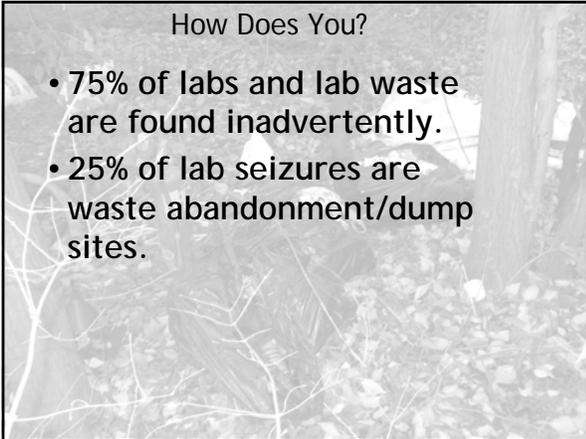




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How Does You?

- 75% of labs and lab waste are found inadvertently.
- 25% of lab seizures are waste abandonment/dump sites.



What is Meth?

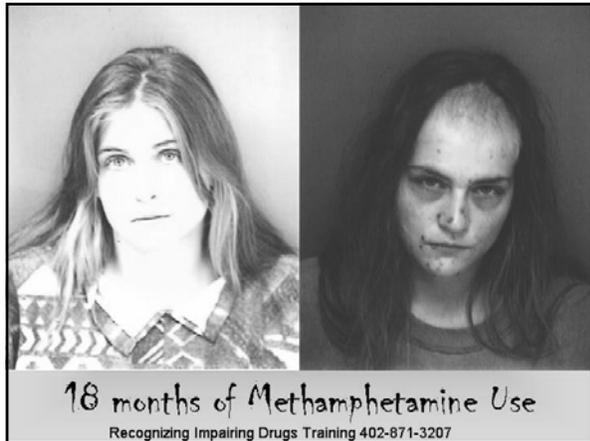
- Highly powerful and addictive CNS stimulant.
- Looks similar to cocaine.
- Can be snorted, injected, smoked, or taken orally.

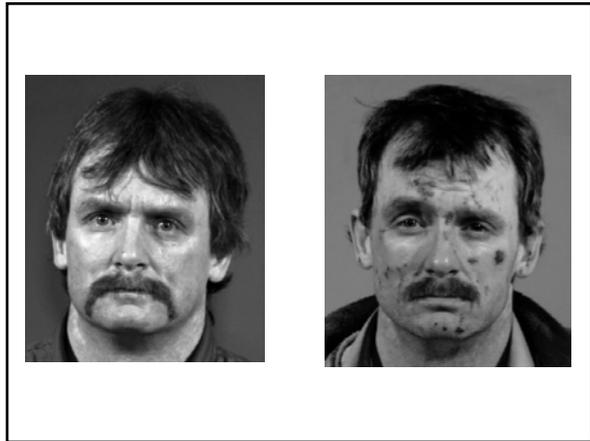


What Does a Meth User Look Like?



How Methamphetamines Affect the Workplace





"Meth Bugs, Sores, & Abrasions"

- Common to most meth users
- Can be found all over body
- Poor Hygiene
- De-hydration
- Malnutrition
- Chemical exposures
- Prone to infection

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Short-Term Effects of Meth Use

- Increased Alertness
- Sense of Euphoria
- Paranoia
- Intense High
- Hallucinations
- Aggressive Behavior
- Increased Heart Rate
- Convulsions
- Insomnia
- Grinding Teeth
- Extreme Body Temp
- Uncontrolled Twitching
- Violent Behavior
- Impaired Speech
- Dry, Itchy Skin
- Premature Aging
- Rotting Teeth
- Loss of Appetite
- Acne, Sores
- Numbness

Long-Term Effects of Meth Use

- Fatal Kidney / Lung Disorders
- Possible Brain Damage
- Depression
- Hallucinations
- Disorganized Lifestyle
- Permanent Psychological Disorders
- Violent / Aggressive Behavior
- Extreme Weight Loss
- Insomnia
- Paranoid Schizophrenia Like Behavior
- Decreased Social Life
- Malnutrition
- Poor Coping Abilities
- Lowered Resistance to Illness and Infection
- Liver Damage
- Stroke
- Heart Attack
- Death

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- For every 1 year of Methamphetamine use, the user loses 1% of their brain cells
 - This is equivalent to the onset of Alzheimer's disease



Most Dangerous Stage of Methamphetamine Abuse is "Tweaking" or Binge Use

- Phase where abuser has probably not slept in 3-15 days maybe longer
- Extremely irritable
- Extremely paranoid
- May behave and react violently
- Alcohol use intensifies negative feelings and associated danger
- Long term use can lead to stroke, heart failure and psychosis that mimics paranoid schizophrenia

Why Would Employees Use Meth?

- Users believe that meth will increase their ability to concentrate and focus
- They will get more done
- Be better, faster, more efficient
- It will enable them to deal with stress in the workplace
- That they can control meth

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What Effects Does Meth Have on the Workplace?

- Increased absenteeism
- Workplace injuries
- Workers compensation claims
- Employee Conflicts with co-workers and management
- Potential health care increases
- Lost revenue
- Theft of products used to manufacture meth
- Vicarious liability issues

- It takes 5 employees under the influence of meth to do the work of 3 non meth users



Does Treatment Work?

- Most Meth Users Do Not Seek Treatment!
- 90% - 98% Of Users Relapse
- Treatment Must Be Meth Specific and Long in Duration Normally Between 6 - 18 Months
- Some Success Seen With Anti-Depressants Such As Wellbutrin

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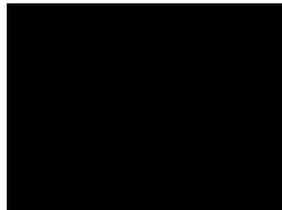
Chemical Hazards at Lab Sites

- Flammable
- Combustible
- Reactive
- Corrosive
- Caustic
- Toxic



Chemicals Used to Manufacture Meth are Very Volatile

- These labs are prone to deadly fires and explosions



Hazardous Waste is Typically...

- Buried
- Burned in barrels or pits
- Dumped into streams or rivers
- Discarded on ground or dump site
- Left By roadside
- Poured Into sewage, or septic systems
- Discarded in trash at rest areas



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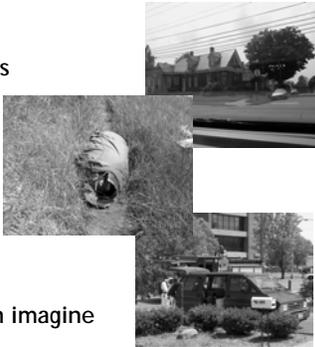
What Is A Meth Lab?

• Any component, ingredient, or hazardous material associated with the manufacture of Methamphetamine.



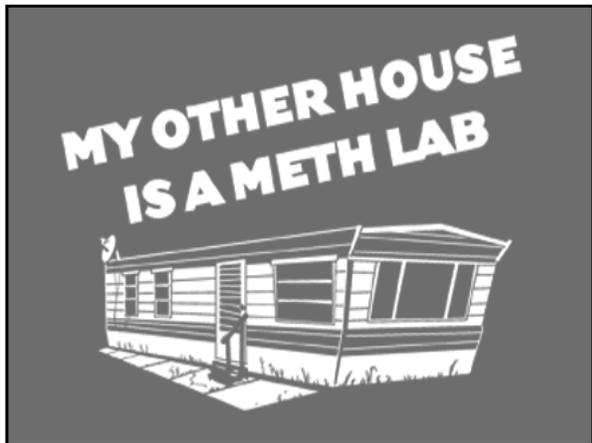
Where Will You Find A Meth Lab?

- Urban locations
- Suburban locations
- Rural locations
- Mobile labs
- RV's and trailers
- Hotel / Motels
- Roadsides
- Ditch lines
- Wooded areas
- Campgrounds
- Anywhere you can imagine





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The Most-Utilized Methods of Manufacture In Ohio

- Red Phosphorous Method, "Red P"
4 Step Process
- Birch Reduction Method, "Nazi",
"Anhydrous Ammonia"
4 Step Process

What Products Are Used To Make It?

•Aluminum Foil	•Kerosene
•Lithium Camera Batteries	•Lacquer Thinner
•Lighter Fluid	•Paint Thinner
•Denatured Alcohol	•Mineral Spirits
•Isopropyl Alcohol	•Muriatic Acid
•Naphtha	•Red Devil Lye
•Epsom Salts	•Drano
•Gasoline	•Liquid Fire
•Heet	•Starting Fluid
•Iodine Crystals	•Table Salt, Rock Salt
•7% Tincture of Iodine	•Cold Medicine
•Iodine	•Battery Acid
•Peroxide	•Acetone

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Products Continued.....

- Lithium Metal
- Sodium Metal
- Petroleum Distillates
- Magnesium Sulfate
- Methyl Alcohol
- Ethyl Alcohol
- Hydrochloric Acid
- Sodium Hydroxide
- Sulfuric Acid
- Phosphorous
- Sodium Chloride
- Ephedrine/Pseudoephedrine
- Coffee Makers
- Coffee Filters
- Funnels
- Tubing
- Cheese Cloths
- Pots, Pans, Pyrex Dishes
- Mason, Ball Jars
- Stoves, Microwaves, Skillets
- Hot Plates
- Drink Dispensers
- Hand Mixers
- Any Household Items

Pseudo-epheadrine





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RED PHOSPHOROUS





IODINE

- Iodine is toxic and could be fatal



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RED DEVIL LYE

- Caustic Drain Opener



How Methamphetamines Affect the Workplace

Flammable Solvents

- Starting Fluid, Coleman Fuel, Camp Fuel, Toluene, Paint Thinner, etc
- Extremely Hazardous
- Neurological Toxins
- Flammable
- In vapor form it is heavier than air







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Hydrogen Chloride Gas Generator

- Closed container
- Plastic tubing and hose

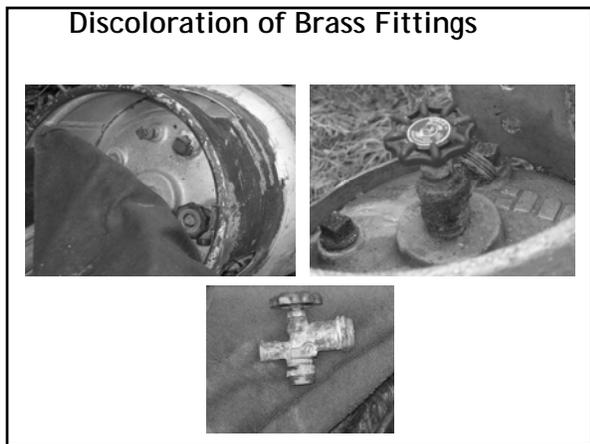




How Methamphetamines Affect the Workplace







How Methamphetamines Affect the Workplace



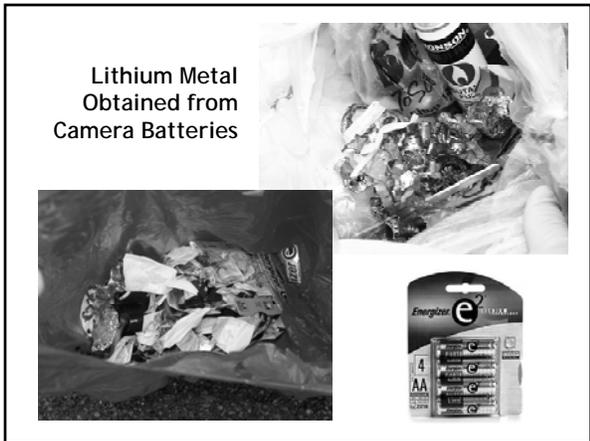




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How Methamphetamines Affect the Workplace







How Methamphetamines Affect the Workplace







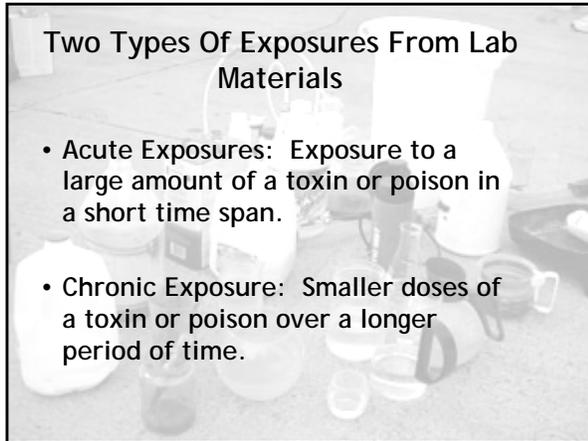
How Methamphetamines Affect the Workplace





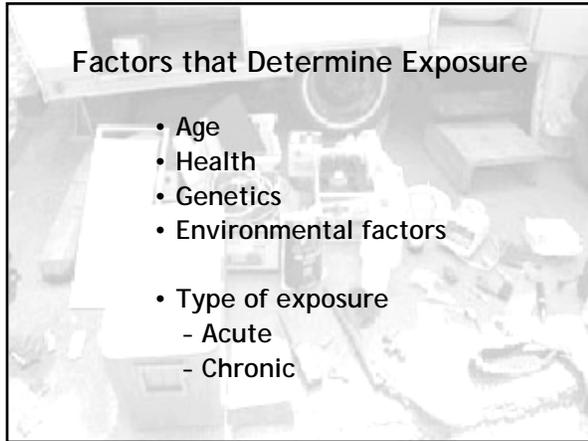


How Methamphetamines Affect the Workplace

A photograph of a laboratory setting with various pieces of glassware, including beakers, flasks, and a graduated cylinder, arranged on a surface.

Two Types Of Exposures From Lab Materials

- Acute Exposures: Exposure to a large amount of a toxin or poison in a short time span.
- Chronic Exposure: Smaller doses of a toxin or poison over a longer period of time.

A photograph of a laboratory workstation with a microscope, pipettes, and other scientific instruments.

Factors that Determine Exposure

- Age
- Health
- Genetics
- Environmental factors

- Type of exposure
 - Acute
 - Chronic

A photograph of a person wearing a white lab coat and a mask, standing in a field of tall grass or reeds.

Types of Injuries

- Inhalation injuries
- Burns from fire and explosions
- Acid burns
- Oral ingestion of toxins
- Skin absorption
- Slip, trip, and fall

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Minimum Personal Protective Equipment

- Nitrile gloves
- Outer work gloves
- Eye protection
- Proper footwear
- Grabbers
- Water
- Double trash bags
- First Aid kit

Contamination Issues

- Every lab is contaminated.
- Most labs do not have a gross contamination.
- Most likely source of contamination is from Methamphetamine.
- Other sources of contamination and exposures:
 - Going beyond the scope of capabilities
 - No or wrong PPE
 - Incidental contact
 - Intentional acts by offenders

Decontamination

- At least some minimal decontamination MUST take place
- Different depending on exposure
- As soon as possible wash hands and face
- Clean boots
- Change your clothes if needed
- Seek medical treatment if necessary
- Wash your contaminated clothing somewhere else
- Don't take it HOME with you
- #1 limitation to decon is PEOPLE

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REVIEW



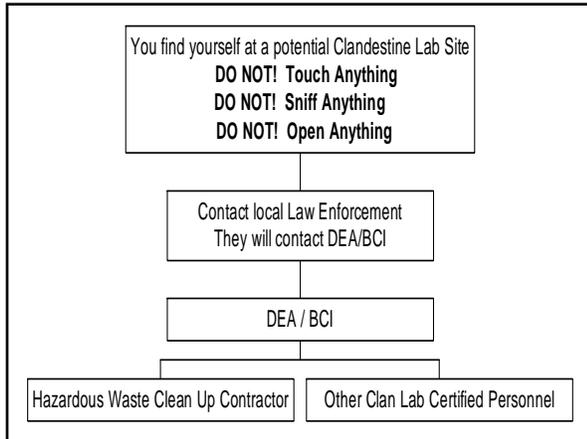
Q. What would require a "lab response" by law enforcement?

A. A large *quantity* or a *combination* of any of the following:

- Any flammable solvent containers, especially if altered, in large quantities or with any other lab waste.
- Any containers with "bi-level" liquids.
- Any containers wrapped up with duct or electrical tape.
- Any containers with plastic tubing or hoses.
- Quantities of coffee filters, paper towels with unusual stains.

- Containers such as drain openers, Muriatic Acid, Red Devil Lye, Crystal Drano, Iodine, Hydrogen Peroxide.
- Propane tanks and oxygen cylinders particularly if they have been altered, painted, or have "bluing" or corrosion of the brass fittings.
- Trash bags with an ether, solvent, or ammonia odor.

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What Can Employers Do?

- Awareness is first step
- Train supervisors and staff
- Implement drug testing if possible
- Watch your inventory
- Contact law enforcement

BCI
Clandestine Laboratory Unit
Contact Number

BCI Headquarters
24 Hour
1-800-282-DRUG

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BWC
Division of Safety & Hygiene

Cost to American Businesses

Alcohol and other drug use costs American businesses an estimated \$102 billion every year in lost productivity, accidents, employee turnover, and related problems (Economic Costs of Alcohol and Drug Abuse and Mental Illness: 1987, ADAMHA, 1990).

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Substance use is a national problem that's also a workplace issue.

77% of illicit drug users are employed

By occupation, the highest rates of current illicit drug use and heavy drinking were reported by:

- **food preparation workers, waiters, waitresses and bartenders (19 %)**
- **construction workers (14 %)**
- **service occupations (13 %)**
- **transportation and material moving workers (10%)**

Bureau of Labor Statistics

Small employers are more at risk

Among the population of full-time employed current illicit drug users:

- 44% work for small establishments (1-24 employees)
- 43% work for medium establishments (25 - 499 employees)
- 13% work for large establishments (500 or more employees)

How Methamphetamines Affect the Workplace

- On average, 15 - 17% of any U.S. workforce uses alcohol or other drugs *(Bureau of Labor Statistics)*

- Users cost employers an average of \$7,000 - \$25,000 per year *(Small Business Administration)*

Employee Assistance

Considered a cornerstone of any DFWP Program

What assistance do you offer?

- None provided
- Provide list of local resources
- Refer for assessment and/or treatment
- Provide health benefits coverage including chemical dependency treatment

Employee Assistance Program (EAP)

An EAP is one way for an organization to offer help to employees with personal problems, including problems with alcohol and other drugs. This component can be a sign of employer support and a source of improved productivity. Although not every employer will want or be able to afford an EAP, it is worth considering. Low-cost options for offering an EAP are available, making this component within reach even for companies with limited resources.

How Methamphetamines Affect the Workplace

Employee Assistance Plan

Recommended:

- Procedures to be followed when referring for assessment and/or treatment as appropriate
- Procedures for re-entry/reintegration
- Procedures aimed at protecting confidentiality
- Guidelines regarding compensation or employment status for an employee's time off work for assessment and/or treatment as applicable

Cost Savings/Benefits of a DFWP Program

- Increased safety
- Improved productivity
- Reduced theft
- Reduced absenteeism / tardiness
- Reduced healthcare cost
- Improved morale

For more information see course: *Enhancing Safety Through a Drug-free Workplace*

Definitions

Drug and Alcohol Testing Terminology

Air blanks – A quality assurance test administered on an EBT to ensure that the machine is testing accurately.

Alcohol concentration – The amount of alcohol in an individual's breath, measured in grams per 210 liters of breath.

Breath alcohol technician (BAT) – The only technician who can conduct a breath alcohol test for the Bureau's DFWP Program. To be classified a BAT, an individual is required to complete training and proficiency requirements outlined by the federal government.

Chain of custody – The protocol followed when submitting specimens for drug testing. It assures that there is no opportunity for contamination or switching of samples. Elements include signed and witnessed forms, sealed and initialed containers, and couriers requiring a receipt.

Collection site – A place where individuals provide specimens of their urine to be analyzed for the presence of drugs, or breath, saliva or (on rare occasion) blood to be analyzed for the presence of alcohol. This site may or may not be owned and/or operated by the laboratory that actually analyzes the specimen.

Confirmatory test – When testing for drugs, this is the second analytical procedure to confirm the presence of a specific drug/metabolite in a urine specimen. This procedure uses a more sophisticated technique (e.g., GC/MS, EBT) to ensure reliability and accuracy. With breath testing for alcohol, the confirmatory test is conducted on an EBT which has the capability to print out the results, date and time, a sequential test number, and the name and serial number of the testing device.

Cut-off level – A pre-determined amount of drug metabolite, measured in nanograms (ng) per milliliter (ml) of urine, which constitutes whether a tested specimen is negative or positive. For example, a test would be declared positive if the amount of drug/metabolite were equal to or above the cut-off level. Employers typically choose levels that have been adopted and tested by a recognized authority such as the Department of Health and Human Services (DHHS) or, for drugs other than the "DOT 5," are recommended by their DHHS-certified laboratory.

DHHS (also referred to as NIDA or SAMHSA)-certified laboratory – A drug testing facility which is certified and closely monitored by the DHHS. To obtain and maintain certification, a laboratory must undergo extensive performance testing and on-site inspections.

Drug metabolite – The specific substance produced when the body breaks down a given drug as it passes through the body and is excreted in the urine.

Evidentiary breath testing devices (EBT) – Instruments used to measure the amount of alcohol in an individual's system. In DOT/FMCSA-mandated alcohol testing, these instruments are approved by the federal government and operated by trained and certified technicians. The DFWP Program is modeled on the federal programs in terms of procedures.

Enzyme multiplied immunoassay technique (EMIT) – A preliminary screening test performed on a urine specimen to identify the presence of a drug/metabolite in an individual’s system. The accuracy of this screen ranges between 92% to 98%. If this test is positive, a second and more sophisticated analysis is conducted to confirm which drug/metabolites are present and in what quantity.

Gas Chromatography/Mass Spectrometry (GC/MS) – A state-of-the-art test used to confirm the presence and amount of an identified drug/metabolite in a urine specimen. This test ensures that over-the-counter drugs are not reported as positive results and is virtually 100% accurate from a scientific standpoint.

Laboratory – Facility where a urine specimen is analyzed for the presence of drugs/metabolites. The specimen is typically not collected at this facility, but rather at a designated collection site that then ensures timely transport of the specimen to the laboratory.

Medical Review Officer (MRO) – A licensed physician responsible for receiving laboratory results and determining if there is a medical explanation for the presence of drugs/metabolites in the donor’s urine. This physician must have knowledge of substance use disorders and appropriate medical training to interpret and evaluate an individual’s confirmed positive test result, together with his/her medical history and any other relevant medical information. MROs follow extensive guidelines that have been published by the federal Department of Health & Human Services.

Re-test – A second opinion analysis of a urine specimen originally deemed positive for drugs/metabolites. This test is usually requested by the donor and performed at a laboratory meeting the same standards as the lab conducting the first analysis. Re-tests should be done on a split specimen in order to be effective.

Substance Abuse Professional (SAP) – A professional who is qualified by the federal government to perform DOT/FMCSA-required alcohol/drug assessments. Qualified professionals include licensed physicians, licensed/certified psychologists, social workers, employee assistance professionals and certified addiction counselors with knowledge of and clinical experience in the diagnosis and treatment of alcohol/drug-related disorders.

Screening test technician (STT) – A technician who is qualified to use the saliva testing mechanism to screen for alcohol.

Acronyms

<u>ADA</u>	Americans with Disabilities Act
<u>ADAMH</u>	Alcohol, Drug Addiction and Mental Health Services Board (county)
<u>ADAS</u>	Alcohol and Drug Addiction Services Board (county)
<u>AOD</u>	Alcohol and Other Drugs
<u>BAC</u>	Blood Alcohol Content
<u>BWC</u>	(Ohio) Bureau of Workers' Compensation
<u>CADCA</u>	Community Anti-Drug Coalition of America
<u>CAP</u>	College of American Pathologists
<u>CCDCIII</u>	Certified Chemical Dependency Counselor
<u>CEAP</u>	Certified Employee Assistance Professional
<u>DHHS</u>	U.S. Department of Health and Human Services
<u>DOT</u>	U.S. Department of Transportation
<u>EAP</u>	Employee Assistance Program
<u>FMCSA</u>	Federal Motor Carrier Safety Administration
<u>5-Panel</u>	A drug test covering five drugs (required by DOT/FMCSA)
<u>GC/MS</u>	Gas Chromatography/Mass Spectrometry (confirmatory drug test)
<u>MCO</u>	Managed Care Organization
<u>MRO</u>	Medical Review Officer
<u>NCADI</u>	National Clearinghouse of Alcohol and Drug Information
<u>NHTSA</u>	National Highway Traffic Safety Administration
<u>NIDA</u>	National Institute on Drug Abuse (predecessor to SAMHSA)
<u>OCPS</u>	Ohio Certified Prevention Specialist
<u>ODADAS</u>	Ohio Department of Alcohol and Drug Addiction Services
<u>OTC</u>	Over-the-counter medications
<u>SAMHSA</u>	Substance Abuse and Mental Health Services Administration
<u>SAP</u>	Substance Abuse Professional
<u>9-Panel</u>	A drug test covering nine drugs
<u>TPA</u>	Third Party Administrator

**Drug-Free
Workplace Forms**

DRUG-FREE WORKPLACE SAMPLE POLICY

I. STATEMENT OF POLICY

Employer (“Company”) believes that it is very important to provide a safe workplace for all of its employees. The Company is taking steps to address the problem of substance use that negatively affects every workplace, including ours. Our Company is concerned with the health and well being of all employees. Behaviors related to substance use can endanger all employees, not just substance users. We can’t condone and won’t tolerate behaviors on the part of employees that relate to substance use, such as:

- a. Use of illegal drugs;
- b. Misuse of alcohol;
- c. Sale, purchase, transfer, trafficking, use or possession of any illegal drugs;
- d. Arrival or return to work under the influence of any drug (legal or illegal) or alcohol to the extent that job performance is affected.

Management is fully committed to our Drug-Free Workplace Policy which establishes clear guidelines for acceptable and unacceptable employee behavior for everyone in the workplace. We will not tolerate substance use in violation of this Policy and intend to hold everyone reasonably responsible for supporting the Policy.

This document (Policy) describes our Company’s Drug-Free Workplace Program, and every employee is expected to read and understand it. The Policy applies to every employee including management, and also applies to contractors and subcontractors we may use. The consequences stated in this Drug-Free Workplace Policy will apply to anyone who violates the Policy.

The Company holds all employees accountable in terms of substance use but also supports getting help for employees. Employees who come forward voluntarily to identify that they have a substance problem will receive Company support and assistance. However, if an employee has a substance problem and does not come forward, and the employee then tests positive for drug or alcohol use in violation of this Policy, the Company reserves the right to terminate employment for violation of this work rule. Employees whose jobs are subject to any special law or regulation may face additional requirements in terms of substance use. Other consequences that apply to all employees who violate this Policy are spelled out within this document.

This program will go into within 30 (60) days of the announcement of our Drug-Free Workplace Program and this new Policy that describes our program. Our Policy covers five key parts of the Company’s Program. The five parts are:

- a written policy that clearly spells out the program rules and how everyone benefits.
- annual substance awareness education for all employees.
- training for supervisors regarding their responsibilities.
- drug and alcohol testing, the most effective way to change harmful behaviors related to substance use.
- employee assistance.

Employees will have the opportunity to receive information about how substance use is a problem affecting the workplace. You will learn the signs and symptoms, dangers of use, and how and where to get help for yourselves and your families. (Name) will be our Drug-Free Coordinator so everyone knows who to go to for information or help. He/she will be responsible for arranging drug and alcohol testing, as needed, and will have a list of places that employees can turn to for help for themselves and/or their families. He/she will also arrange to get knowledgeable presenters to educate our employees about substance use.

Protections for Employees

This program is designed to protect employees from the behaviors of substance users. Some of the protections built into the program are:

- Employee records like testing results and referrals for help will be kept confidential. Information will be on a need-to-know basis. Any violation of confidentiality rights is subject to disciplinary action up to and including termination of employment.
- We're committed to employees who have a substance problem getting help. Each situation will be reviewed individually. Employee assistance is available for employees and their families a list of resources available through our Drug-Free Coordinator and posted in the break room. We want you to come forward if you have a substance problem and not wait. If you test positive, you're risking losing your job. We don't want that to happen.
- All supervisors will be trained in their duties related to testing before this program begins.
- All employees will receive awareness education every year to help identify problems and learn where employees can go for help.
- Collection of urine specimens and breath testing will be done at a local clinic, and urine drug test specimens will be analyzed by a laboratory certified by the federal government. These labs use the highest level of care in ensuring that results are accurate, and the process that's used is 100% accurate in detecting that the substances that the Company is concerned about are present in the employee in sufficient quantity to lead to behaviors that may hurt the person or other employees. The lab will work closely with our local clinic to ensure fairness and accuracy of every test, and we also have a Medical Review Officer (called an MRO), a trained physician responsible for checking whether there's a valid reason for the presence of the substance in the employee's system. The MRO is an expert in drugs and alcohol. When the MRO receives positive test results, the MRO will contact the employee and any appropriate health care provider to determine whether there is a valid reason for the presence of the drug in the person's system.
- The testing program consists of an initial screening test. If the initial results are positive, then a second test is used. Cut-off levels for each drug and for alcohol are established for what will be considered a positive test. These levels show that the employee didn't just have a little of the substance in his or her system but enough to affect workplace safety and the ability to do the job. These cut-off levels come from federal guidelines and are fair for all employees.

Employee Awareness Education:

Every employee will attend a session in which this policy is discussed. You will have a chance to ask questions. We'll give everyone a copy of our written Policy, and everyone will be expected to sign that they received it. Later, we'll have a qualified person explain why and how substance use is a workplace problem, the effects, signs/symptoms of use, effects of commonly used drugs in the workplace, and how to get help. There will be a minimum of two hours of substance education annually for all employees. New employees will hear about the program during orientation and will receive substance education as soon as possible thereafter.

Supervisor Training:

Supervisors will be trained to recognize substance problems that may endanger the employee and others as well as violate this Policy. This training is in addition to the employee education session. Supervisors will be trained about testing responsibilities, how to recognize behaviors that demonstrate an alcohol/drug problem and how to make referrals for help.

Drug and Alcohol Testing: Testing will be used to detect problems, get employees not to use substances in a way that they violate our Policy and then allow us to take appropriate action to correct the situation. In addition to alcohol, the drugs that we're testing for are:

- Amphetamines (speed, uppers)
- Cocaine (including crack cocaine)
- Marijuana
- Opiates (codeine, heroin, morphine)
- Phencyclidine (PCP, "angel dust")

Employee Assistance

The Company believes in offering assistance to employees with a substance problem. We don't have a rehabilitation program and can't afford to pay for someone to attend a program, but we are supportive of employees taking action on their own behalf to address a substance problem. We have a list of local community resources to give to employees who come forward voluntarily to seek help. The list includes places to go for an assessment and for treatment. When an employee has a substance problem, we'll meet with the employee to discuss the problem and any violation of this Policy. The Company reserves the right to terminate based on a positive test.

II. WHEN WILL A TEST OCCUR?

Employees will be tested for the presence of drugs in the urine and/or alcohol on the breath under any and/or all of the conditions outlined below:

A. Post-Offer, Pre-Employment Medical Examination and Drug Testing

As part of the Company's employment procedures, all applicants will be required to undergo a post-offer, pre-employment medical examination and a drug test conducted by a contractor the Company designates. Any offer of employment is depends upon satisfactory completion of this examination and/or screening, and the determination by the Company and its examining physician that the person is capable of performing the responsibilities of the position that has been offered.

B. Reasonable Suspicion Testing

Reasonable suspicion testing will occur when management has reason to suspect that an employee may be in violation of this Policy. The suspicion will be documented in writing prior to the release of the test findings. A reasonable suspicion test may occur based on:

1. Observed behavior, such as direct observation of drug/alcohol use or possession and/or physical symptoms of drug and/or alcohol use;
2. A pattern of abnormal conduct or erratic behavior;
3. Arrest or conviction for a drug-related offense, or identification of an employee as the focus of a criminal investigation into illegal drug possession, use, or trafficking. The employee is responsible for notification of the Company, within five (5) working days, of any drug-related conviction;
4. Information provided either by reliable and credible sources or independently corroborated regarding an employee's substance use; or
5. Newly discovered evidence that the employee has tampered with a previous drug or alcohol test.

Reasonable suspicion testing does not require certainty, but mere “hunches” are not sufficient to justify testing. To prevent this, all managers/supervisors will be trained to recognize drug and alcohol-related signs and symptoms. Testing may be for drugs or alcohol or both.

C. Post-Accident Testing

Post-accident testing will be conducted whenever an accident occurs, regardless of whether there’s an injury. We consider an accident an unplanned, unexpected or unintended event that occurs on our property, during the conduct of the our business, or during working hours, or which involves one of our motor vehicles or motor vehicles that are used in conducting company business, or is within the scope of employment, and which results in any of the following:

- (i) A fatality of anyone involved in the accident;
- (ii) Bodily injury to the employee and/or another person that requires off-site medical attention away from the Company’s place of employment;
- (iii) Vehicular damage in apparent excess of (you fill in the amount); or
- (iv) Non-vehicular damage in apparent excess of (you fill in the amount).

When such an accident results in one of the situations below, any employee who may have contributed to the accident will be tested for drugs or alcohol use or both. .

Drug and/or Alcohol Testing after an Accident

Urine specimen collection (for drugs) or breath/saliva (for alcohol) is to occur as quickly as possible after a need to test has been determined. At no time will a urine specimen be collected after 32 hours from the time of an employment-related incident. Breath or saliva alcohol testing will be performed as quickly as possible but no later than eight hours after the incident, or it will be documented but not performed. If the employee responsible for an employment-related accident is injured, it is a condition of employment that the employee grants the company the right to request that attending medical personnel obtain appropriate specimens (breath, urine and/or blood) for the purpose of conducting alcohol and/or drug testing. Further, all employees grant the Company access to any and all other medical information that may be relevant in conducting a complete and thorough investigation of the work-related accident including a full medical report from the examining physician(s) or other health care providers. A signed consent to testing form is considered a condition of employment. Management reserves the right to determine who may have caused or contributed to a work-related accident and may choose not to test after minor accidents if there is no violation of a safety or work rule, minor damage and/or injuries and no reasonable suspicion.

D. Follow up Testing after Return-to-Duty from Assessment or Treatment

This test occurs when an employee who has previously tested positive and the decision is made to not terminate the employee under a “last-chance” agreement. A negative return-to-duty test is required before the employee will be allowed to return to work. If the employee fails this test, this will lead to termination of employment. Once an employee passes the drug and/or alcohol test and returns to work, management may choose to do additional unannounced tests for as long as we deem necessary. Any employee with a second positive test result will be terminated. Follow-up tests will be unannounced and may occur at any time for a time period that management considers reasonable. The intent is to deter any subsequent usage that would result in a violation of our Policy and result in termination of employment.

III. SUBSTANCES TO BE TESTED FOR AND METHODS OF TESTING

The procedure that we're relying on is called systems presence testing. This is how qualified testing professionals identify the presence of one or more of prohibited controlled substances or alcohol that may be present in the employee. There is an initial screening test. If it's negative, then a negative test is declared. If the initial test is positive (comes in at or higher than the cut-off level), a second test called a "confirmatory" test is done. This is a different test and is considered 100% accurate by experts and in court. Cut-off levels are standards that have been established each of the tested drugs after years of research. These levels will be used to interpret all drug screens/tests, whether for a pre-employment examination, reasonable suspicion test, post-accident test or follow up test.

Breath alcohol testing will be conducted by a medical clinic that uses only certified equipment and personnel. Breath alcohol concentrations exceeding .04 will be considered a verified positive result. In the event of an accident where an employee has "whole blood" alcohol drawn at a medical treatment facility, a result equal to or greater than .04 shall be considered to be a verified positive result. An Evidentiary Breath Test (EBT) will typically be used to confirm any initial positive test result. The Company also reserves the right to add or delete substances on the list above, especially if mandated by changes in existing Federal, State or local regulations or laws.

An employee who adulterates, attempts to adulterate or substitutes a specimen or otherwise manipulates the testing process will be terminated. A refusal to produce/provide a specimen is considered a positive test unless there's a verifiable medical reason that the specimen could not be produced.

IV. SPECIMEN COLLECTION PROCEDURE

Urine specimens and breath testing will be conducted by trained collection personnel who meet standards for urine collection and breath alcohol testing. Confidentiality is required from our collection sites and labs. Employees are permitted to provide urine specimens in private, but subject to strict scrutiny by collection personnel so as to avoid any alteration or substitution of the specimen. Breath alcohol testing will likewise be done in an area that affords the individual privacy. In all cases, there will only be one individual tested at a time. Failure to appear for testing when scheduled shall be considered refusal to participate in testing, and will subject an employee to the range of disciplinary actions, including dismissal, and an applicant to the cancellation of an offer of employment. An observed voiding will only occur if there is grounds for suspecting manipulation of the testing process.

V. REVIEW OF TEST RESULTS

To ensure that every employee who is tested is treated fairly, we have hired a Medical Review Officer ("MRO"). The MRO is a doctor with a specialized knowledge of substance abuse disorders and will be able to determine whether there are any valid reasons for the presence in the employee's system of the substance that was tested positive.

V. EMPLOYEES' RIGHTS WHEN THERE'S A POSITIVE TEST RESULT

An employee who tests positive under this Policy will be given an opportunity to explain the findings to the MRO prior to the issuance of a positive test result to the Company. Upon receipt of a confirmed positive finding, the MRO will attempt to contact the employee by telephone or in person. If contact is made by the MRO, the employee will be informed of the positive finding and given an opportunity to rebut or explain the findings. The MRO can request information on recent medical history and on medications taken within the last thirty days by the employee.

If the MRO finds support in the explanation offered by the employee, the employee may be asked to provide documentary evidence to support the employee's position (for example, the names of treating physicians, pharmacies where prescriptions have been filled, etc.). A failure on the part of the employee to provide such documentary evidence will result in the issuance of a positive report by the MRO with no attendant medical explanation. A medical disqualification of the employee will result. If the employee fails to contact the MRO as instructed, the MRO will issue a positive report to the Company.

VII. REPORTING OF RESULTS

All test results will be reported to the MRO prior to the results being issued to the company. The MRO will receive a detailed report of the findings of the analysis from the testing laboratory. Each substance tested for will be listed along with the results of the testing. The company will receive a summary report, and this report will indicate that the employee passed or failed the test. All of these procedures are intended to be consistent with the most current guidelines for Medical Review Officers, published by the federal Department of Health and Human Services.

VIII. STORAGE OF TEST RESULTS AND RIGHT TO REVIEW TEST RESULTS

All records of drug/alcohol testing will be stored separately and apart from the employee's general personnel documents. These records shall be maintained under lock and key at all times. Access is limited to designated company officials. The information contained in these files shall be utilized only to properly administer this Policy and to provide to certifying agencies for review as required by law. Designated company officials that shall have access to these records are charged with the responsibility of maintaining the confidentiality of these records. Any breach of confidentiality with regard to these records may be an offense resulting in termination of employment. Any employees tested under this Policy have the right to review and/or receive a copy of their own test results. An employee may request from the Drug-Fee Coordinator, in writing, presenting a duly notarized Employee Request for Release of Drug Tests Results form, requesting that a copy of the test be provided. The company will use its best efforts to promptly comply with this request and will issue to the employee a copy of the results personally or by U.S. Certified Mail, Return Receipt Requested.

IX. POSITIVE TEST RESULTS

Employees who are found to have a confirmed positive drug or alcohol test will be immediately taken off safety-sensitive duties and are subject to discipline up to and including termination.

X. TERMINATION NOTICES

In those cases where substance testing results in the termination of employment, all termination notices will list "misconduct" as the reason. Termination shall be deemed "for cause."

Date: _____

ACKNOWLEDGEMENT OF RECEIPT

OF

DRUG-FREE WORKPLACE POLICY

Signing this form acknowledges that the employee has received a copy of the Company's drug-free Policy, has had the opportunity to discuss the Policy and have questions answered, and understands all of the provisions in the Policy. Although it reflect the Company's current Policy regarding substance use, it may be necessary to make changes from time to time to best serve the needs of our organization. However, any changes deemed necessary will be made in writing, and the modified Policy will be shared with every employee.

By my signature below, I acknowledge that I have received a copy of the drug-free Policy of the Company. I understand that it is my obligation to read, understand and comply with the procedures and provisions contained within this Policy.

Date Signed

Employee's Signature

Witness Signature

Printed Name of Employee

CONSENT & RELEASE FORM FOR EMPLOYEES/APPLICANTS

I, _____, (applicant or employee name), as an employee/applicant of the Company, hereby acknowledge that the Company's policy requires me to submit to urine drug testing and/or breath alcohol testing.

I further understand that the purpose of this analysis is to determine or rule out the presence of non-prescribed or prohibited dangerous controlled substances in my system.

I hereby freely and voluntarily consent to this request for a urine sample and/or breath alcohol test, and agree to participate in the testing program.

I hereby and herewith release the Company, its employees, agents and contractors from any and all liability whatsoever arising from this request for testing, from the actual testing procedures, and from decisions made concerning my application for or continuation of employment based on the results of the analysis.

I agree to cooperate in all aspects of the testing program.

I hereby authorize the release of my drug and/or alcohol test results to the contractor's Medical Review Officer (MRO), and/or to the Company's examining physician, as provided by the Company's Policy.

I further acknowledge that the Company has provided me with an opportunity to ask questions related to its drug and alcohol testing program and that all my questions have been answered.

Employee/Applicant Signature: _____

Employee/Applicant Printed Name: _____

Signature of Witness Signature _____

Printed Name of Witness: _____

Date of Signatures: _____

REPORT OF SUSPECTED JOB-RELATED DRUG/ALCOHOL USE

The individual identified below is suspected of failing to comply with the Company's drug-free policy.

Employee Name: _____ Location: _____

List below all of the behaviors observed by the supervisor that created a concern that the employee named above might be in violation of the Company's drug-free policy.

If there were observable changes in the employee's job performance, list these behaviors below.

List below any physical signs or symptoms of possible substance use that the employee exhibited.

Eyes: _____

Coordination: _____

Speech: _____

Other: _____

Other Pertinent Observations: _____

Name of Supervisor Reporting: _____

Title of Supervisor: _____

Name of Any Other Supervisor/Management Witness: _____

Position: _____

Date: _____ Time: _____ Shift: _____

Testing Ordered: _____ Yes Employee Consent: _____ /Yes Date Tested: _____ Alcohol

_____ No Consent Obtained: _____ /No _____ Drugs

MRO Findings: _____

Follow-up Actions Taken: _____

Company Official's Signature: _____ Date: _____

LAST CHANCE AGREEMENT

On _____ [date], [choose appropriate company personnel such as President, Drug-Free Coordinator, Human Resources Manager, etc.] agreed to your request to seek counseling and referral to a rehabilitation program for alcohol and drug use. The following conditions apply to your rehabilitation program:

1. You must authorize [choose appropriate employee assistance or treatment program/counselor] to provide proof of enrollment in an alcohol/drug abuse rehabilitation program and proof of attendance at all required sessions on a monthly basis to the company's [supervisor, Drug-Free Coordinator, H.R. Manager, etc]. The company will closely monitor your attendance and will terminate your employment (cancel this agreement) if you do not regularly attend all required sessions.
2. You will pay for all costs of rehabilitation that are not covered under the company's benefits plan.
3. During the _____ (identify time frame in terms of months) following completion of your rehabilitation program, the company may test you for alcohol and/or drug use on an unannounced basis to determine if you are in compliance with the company's drug-free policy. The company will promptly terminate your employment if you refuse to submit to testing or if you test positive during this period.
4. You must meet all established standards of conduct and job performance. The company will terminate you (your services) if your on-the-job conduct or job performance is unsatisfactory. Satisfactory performance includes ongoing compliance with the company's drug/alcohol testing policy, including testing if there is reasonable suspicion of a violation of the prohibition of use.
5. Nothing in this agreement alters your employment (contract) status. The company hopes its employment (contractual) relationship with you will be a happy and enduring one. Nevertheless, you remain free to resign your employment (terminate your agreement) at any time for any or no reason without notice. Similarly, the company reserves the right to terminate you, (your services) for any or no reason, without notice. No one can alter your at-will status except the [President], in writing.

I voluntarily agree to all of the above conditions and authorize [treatment program/counselor, employee assistance provider] to provide my supervisor with proof of my enrollment and attendance at the recommended rehabilitation program.

Date Agreement Signed

Company Name

Employee Signature

Company Representative Signature

Signature of Witness

Signature of Witness

Observed Behavior - Reasonable Cause Record, Page 1

Employee Name _____
Identification Number: _____
Observation: Date _____ Time: (_____ a.m./p.m. to _____ a.m./p.m.)
Location: _____ (Street Address) (City) (State) (ZIP Code)

CAUSE FOR SUSPICION

1. Presence of Drugs and/or Drug Paraphernalia (specify):

2. Appearance:

- Normal
- Disheveled
- Dilated/constricted pupils
- Dry-mouth symptoms
- Flushed
- Bloodshot eyes
- Profuse sweating
- Runny nose
- Nose sores
- Puncture marks
- Inappropriate wearing of sunglasses
- Tremors
- Other (describe) _____

3. Behavior:

(Speech):

- Normal
- Confused
- Incoherent
- Slowed
- Slurred
- Silent
- Whispering
- Other (describe) _____

(Awareness):

- Normal
- Lethargic
- Confused
- Lack of coordination
- Mood swings
- Paranoid
- Euphoric
- Disoriented
- Other (describe) _____

Observed Behavior - Reasonable Cause Record, Page 2

4. Motor Skills:

(Balance):

- Normal
- Swaying
- Falling
- Staggering
- Other (describe) _____

(Walking and Turning):

- Normal
- Stumbling
- Swaying
- Falling
- Arms raised for balance
- Reaching for support
- Other (describe) _____

5. Other Observed Actions or Behavior (specify): _____

Witnessed by:

(Signature) (Title) _____ a.m./p.m.
(Time)

(Signature) (Title) _____ a.m./p.m.
(Time)

This document should be prepared and signed by the witnesses within 24 hours of the observed behavior or before the results are released, whichever is earlier.

Reasonable Suspicion Checklist, Page 1

Name of Observed Employee _____

Location _____

Time _____ **a.m.** _____ **p.m.** **Date** _____

When there is reasonable suspicion that an employee at work is unfit for duty, the supervisor or manager observing the behavior as well as another supervisor/manager as witness, if possible, must complete the checklist below. Where "Other" is checked, please describe.

Observation Checklist

Walking: ___ Holding on ___ Stumbling ___ Unable to walk
 ___ Unsteady ___ Staggering ___ Swaying
 ___ Falling ___ Other _____

Standing: ___ Swaying ___ Feet wide apart ___ Unable to stand
 ___ Rigid ___ Staggering ___ Sagging at knees
 ___ Other _____

Speech: ___ Whispering ___ Slurred ___ Shouting
 ___ Incoherent ___ Slobbering ___ Silent
 ___ Rambling ___ Mute ___ Slow
 ___ Other _____

Demeanor: ___ Cooperative ___ Calm ___ Talkative ___ Polite
 ___ Sarcastic ___ Sleepy ___ Crying ___ Silent
 ___ Sleeping on job ___ Argumentative ___ Excited
 ___ Other _____

Actions: ___ Hostile ___ Fighting ___ Profanity ___ Drowsy
 ___ Threatening ___ Hyperactive ___ Erratic ___ Calm
 ___ Resisting communication ___ Other _____

Eyes: ___ Bloodshot ___ Watery ___ Droopy ___ Dilated
 ___ Glassy ___ Closed ___ Other _____

Face: ___ Flushed ___ Pale ___ Sweaty
 ___ Other _____

Appearance/ ___ Neat ___ Unruly ___ Messy ___ Dirty
Clothing: ___ Stains on clothing ___ Having odor ___ Partially dressed
 ___ Bodily excrement stains ___ Other _____

Breath: ___ No alcoholic odor ___ Faint alcoholic odor
 ___ Alcoholic odor ___ Sweet/pungent tobacco odor
 ___ Heavy usage, breath spray ___ Other _____

Reasonable Suspicion Checklist: Page 2

Movements: Fumbling Jerky Nervous
 Slow Normal Hyperactive
 Other _____

**Eating/
Chewing:** Gum Candy Mints
 Other _____

Miscellaneous: Presence of alcohol and/or drugs in associate’s possession or vicinity
 On-the-job misconduct by employee
 Employee admission concerning alcohol use and/or drug use or possession
 If there are witnesses to employee’s conduct, list below:

Other Observations: (if accident, provide details)

Employee’s Explanation of Reasons for His/Her Conduct:

Once above portion of form has completed by you and a witness, you are now ready to take a position with the employee. Be certain to follow company procedures as outlined in our drug-free policy.

Employee has agreed to testing (Check one) Employee has not agreed to testing

Supervisor/Manager Signature

Date

Witness Signature

Date

Resources

Resources

The following resources may help the employer to establish a drug-free workplace policy and program. Many of these services are free. Use of these resources will help the employer to implement a drug-free workplace program at minimal costs. Other resources are also available. When calling the numbers below, feel free to ask for additional resources.

Ohio Resources

Ohio Department of Alcohol and Drug Addiction Services..... 1-614-466-3445
Each county in the state of Ohio has an office that is called either an Alcohol and Drug (Addiction) and Mental Health (ADAMH) Board or an Alcohol and Drug Addiction Services (ADAS) Board which coordinates the pass-through of federal and state funds for the operation of community drug and alcohol services. These local boards can identify the support, assessment and treatment providers in the area.

Ohio Prevention & Education Resource Center1-800-788-7254
OPERC offers a resource directory and assistance in identifying alcohol and drug prevention, education, treatment and drug-free workplace resources in your local community.

National Resources

Community Anti-Drug Coalitions of America.....1-703-706-0560
DDW represents a network of coalitions operating around the United States and offering support to employers operating drug-free workplaces.

Drug-Free Workplace Helpline1-800-967-5752
The Center for Substance Abuse Prevention (CSAP) offers telephone consultation to business owners, managers and union leaders on the development/implementation of a comprehensive drug-free workplace program. This CSAP Helpline will also serve as a resource for networking with local, state federal or national contacts. This number may roll over shortly to another number or provide additional information.

Employee Assistance Professionals Association (EAPA)1-703-522-6272
This organization provides information on how to qualify and select EAPs, their value, how they operate and how to find quality national, regional, and local providers.

National Clearinghouse for Alcohol and Drug Information (NCADI).....1-800-729-6686
The NCADI – an operational unit of SAMHSA, the Substance Abuse and Mental Health Services Administration, and part of the U.S. Department of Health and Human Services – provides information on all aspects of substance use, such as videos, prevention materials, specific program descriptions, and resources in Ohio and latest research results. Many publications and educational materials are free. All publications are in the public domain allowing you to reprint them under your logo without permission. Call NCADI for a catalog of resources.

Office of the Secretary of Transportation (DOT)1-202-366-3784
Drug Enforcement and Program Compliance, Room 9404
400 Seventh St., S.W.
Washington, D.C. 20590

Ohio Credentialing Board for Chemical Dependency Professionals.....1-614-469-1110

Ohio Parents for Drug-Free Youth.....1-614-540-9985

Ohio State Bar Association1-614-487-2050
This office (or the local Bar Association) can help the employer to identify and network with the legal resources in the community that can help with development of a written policy as well as with operating a DFWP program.

Substance Abuse Program Administrators Association.....1-800-672-7229
This organization can help with a variety of information including guidelines and networking to third party administrators of testing, collection sites and substance abuse professionals (SAPs).

U.S. Department of Health & Human Services - For the most updated list of DHHS-certified labs, employers may call the National Laboratory Certification Program.....1-301-443-6014

U. S. Department of Transportation’s (DOT) Office of Drug and Alcohol Policy and Compliance Information Line.....1-800-225-3784
You may request DOT/FMCSA materials by sent to you regarding transportation industry regulations.

Resources Available from the Division of Safety & Hygiene (DSH) Libraries

(800) 644-6292 (614) 466-7388

library@bwc.state.oh.us

www.ohiobwc.com

Safety training:

- Safety talks, outlines and scripts - DSH Safety leader's discussion guide, Training Center's One-hour safety presentations, reference books, web resources
- Videos – hundreds of safety and health topics
- Books and articles on training techniques

Machine and equipment safety:

- Safety standards (ANSI, NFPA, CGA)
- Books and articles on power presses, material handling equipment, lockout/tagout, etc.

Sample written programs:

- DSH program profiles and sample written programs
- Reference books
- Internet resources

Illness and injury statistics:

- Statistics from the U.S. Bureau of Labor Statistics
- National Safety Council's *Injury Facts*
- National Institute of Occupational Safety & Health (NIOSH) studies

Hazard communication and chemical safety:

- Chemical safety information
- Material safety data sheets (MSDSs)
- Sample written programs
- Videos
- Internet resources

Safety standards

- American National Standards Institute (ANSI) standards (including standards for construction, machinery and equipment, personal protective equipment)
- National Fire Protection Association (NFPA) fire codes (including the Life Safety Code and the National Electrical Code)
- Compressed Gas Association (CGA) standards

Other topics of interest (books, articles, magazines, videos and standards):

- Confined spaces
- Electrical safety
- Job safety analysis
- New employee orientation
- Powered industrial trucks
- Respiratory protection
- Safety culture
- Scaffolds

Directories and lists of vendors of safety equipment

Occupational Safety & Health Administration (OSHA) regulations

Manual of Uniform Traffic Control Devices (MUTCD)

Recommendations of useful Internet sites

BWC publications

Saving You Time and Research

Requests for copies of OSHA standards, information on starting a safety committee, a video on accident investigation techniques -- these are some of the thousands of inquiries BWC's Division of Safety & Hygiene (DSH) libraries receive each year.

DSH has two libraries to serve you:

- The central library in the William Green Building in downtown Columbus;
- The resource center and video library located at the Ohio Center for Occupational Safety and Health (OCOSH) in Pickerington.

Both libraries are open 8 a.m. to 5 p.m., Monday through Friday. Your need for information does not require a visit to the library. You can phone, fax, or e-mail your requests and receive a quick response.

The central library provides free information services on the topics of occupational safety and health, workers' compensation and rehabilitation.

The OCOSH resource center provides similar services for those who visit OCOSH for meetings and training center classes.

The video library offers an extensive collection of videotapes to supplement your organization's safety and health training program. It is a convenient and popular source for Ohio employers to borrow quality occupational safety- and health-related training aids.

Visit our Web site at **www.ohiobwc.com**.

Central Library
30 W. Spring St., Third Floor
Columbus OH 43215-2256
1-800-OHIOBWC
(614) 466-7388
(614) 644-9634 (fax)
library@bwc.state.oh.us

OCOSH Resource Center
13430 Yarmouth Drive
Pickerington OH 43147
1-800-OHIOBWC
Resource center (614) 728-6464
Video library (614) 644-0018