DRUG TESTING POLICY & PROCEDURES

The policies and procedures set forth in this document will apply to all contractors receiving substance abuse treatment funds or claiming reimbursement for drug testing procedures with the County of Santa Barbara Alcohol and Drug Program. The County reserves the authority to modify these policies and procedures at any time.

NOTE: Authority cited:

- Alcohol and/or Other Drug Program Certification Standards 12045, Drug Screening.
- California Code or Regulations, Title 9, Crime Prevention Act of 2000 (SACPA) - Substance Abuse Treatment and Testing Accountability (SATTA) Program.
OBJECTIVE:

Drug Testing is viewed as an important tool in drug treatment. Detection of ongoing drug usage or intermittent relapses can assist in the therapeutic process. Urine test results provide the counselor and client a timely opportunity to honestly confront those factors which constitute triggers for relapse and cravings in the early stages of recovery. Drug Testing is used as an intervention tool to overcome denial of substance abuse problems, hold one accountable for their behavior, and strive to live drug free. The inclusion of drug testing in treatment planning is a very important way to document compliance to program standards.

The following procedures are recommended for the uniformity and consistency in the practice of Drug Testing; for the health and safety of staff and clients, as well as to insure the reliability and validity of the test results.

Foreword:

California Department of Health Care Services, Alcohol and/or Other Drug Program Certification Standards require all certified residential and nonresidential alcohol and drug programs to have a written policy statement regarding drug screening where it is deemed appropriate and necessary by the program director. “The program will establish procedures that protect against the falsification and/or contamination of any body specimen sample collected for drug screening and document results of the drug screening in the participant’s files.”

- Substance Abuse and Crime Prevention Act of 2000 (SACPA) - Substance Abuse Treatment and Testing Accountability (SATTA) Program, “Drug testing, when used, must be used as a treatment tool. We continue to believe that inclusion of drug testing in treatment plans is a very important way to document compliance.”

- Santa Barbara County Proposition 36, Collective Decision Points, Redwood Toxicology Test Products will be used countywide with a direct observation of the sample collection.”

The Santa Barbara Behavioral Wellness, Alcohol & Drug Programs supports the below standards and protocols contained within the following pages.
1. **Intake Advisement & Release Forms:**

At the time of initial intake, all clients will be advised that urinalysis testing is a part of their treatment program. Testing methods may include, but are not limited to urine, saliva, and breath alcohol testing. All clients should be advised that they will be required to submit to supervised drug tests on a random basis. Failure to submit a sample or submitting adulterated urine will constitute a positive test. Clients may also be required to submit a urine sample upon suspicion of drug usage and movement from one program phase to another, which requires the submission of a clean urine sample. Each Agency Director shall insure that a Drug Testing and Results Log are maintained on each client.

During intake, all clients should be asked if they are on any form of Probation, Parole or Child Welfare Services supervision and a release of information should be obtained from the client at that time allowing for communication with that Agency. The release must be obtained for each agency requiring drug testing results.

2) **Validation of Urinalysis Supplies**

In determining and maintaining reliability and performance, the use of both positive and negative controls at the start of each group of tests is recommended. Distilled or deionized water can be used for a negative control. These controls should be run to ensure proper technique, assay reliability and performance. If the expected results are not achieved with the positive and negative controls, do not proceed with testing.

3) **Effective and Safe Procedures for Obtaining Urine Samples**

The Drug Testing area must be locked when not in use, and clients should have no access to this room except during testing. Before using the room, scan it for contraband. It is well established that many methods exist to adulterate or substitute urine samples. Addicts often utilize these methods in an attempt to avoid detection of ongoing drug usage. Urine test strips for adulteration and detection of Creatinine, Nitrite, Glutaradehyde, pH, Specific Gravity, Bleach, Pyridinium, Chlorochromate, and temperature should be used for all suspected adulterated urines.

In order to insure that the urine sample provided by the client is genuine, it is imperative that a staff member visually observes via direct frontal observation or mirror, the client urinate into the specimen cup. The staff member should have the client wash their hands prior to the test then hand the empty cup to the client immediately before the sample is provided, to avoid adulterants being placed in the cup by the client in advance of the test or during the test. A staff member of the same sex to the client must observe the submission of the urine sample. The testing procedures should be conducted as follows:

3.1 Female staff should insure they visually observe the flow of urine from the female client’s body, having them urinate and at mid flow stop, then collect the urine sample. One of the client’s hands should be holding the cup and the other should be empty and visible to the staff member.
3.2 Male staff members should insure that they clearly observe the flow of urine from the male client’s body into the test cup.

3.3 Staff members should insure that the client provides at least one inch of urine into the test cup to allow a sufficient amount to be analyzed.

The Client should then hand the urine sample directly to the staff member. Staff members should always wear latex gloves while handling urine samples to reduce the risk of infection from contagious diseases.

4) Staff Training

Redwood Toxicology drug test products will be used to analyze urine samples for the presence of morphine, cocaine, amphetamine, benzodiazaphine, THC, and Alcohol. Staff should be trained to conduct analysis of urine samples by written drug testing procedures, video instruction, or training. Each agency shall designate an employee as the liaison with DHCS. It is recommended that staff receive personal instruction and training by a qualified individual. Staff should be qualified to conduct urine analysis before left alone to do so. Training/Certification shall be documented in the employee personnel file and be updated annually.

5) Analysis of Urine Samples

5.1 Every attempt should be made to analyze the urine specimen while the client is on the premises. The urine analysis shall occur away from the client’s line of observation; thus, avoiding possible client outbursts or contamination of the testing results.

5.2 Do not leave urine unattended where it can be contaminated.

5.3 If a test result is positive (+) for any substance, a client should immediately be advised of the test results.

5.4 Determine how and when to inform the client of the positive test. The goal is to approach the client in a manner designed to elicit an honest admission of use and to debrief the events leading up to the use episode or relapse. However, it is common for clients who are or have recently used to deny, sometimes adamantly, they have used.

6) Positive Test Reporting Protocol For Probation Referred Clients

6.1 If a client tests positive and admits to staff they used, the following steps must be taken by the testing staff:
   a. The client should be asked to sign an Admission of Use Statement.
   b. Fill out an Incident Report and fax the copy to the designated referral source.

6.2 If a client tests positive and does not admit to staff that they have used, the following steps must be taken by the testing staff:
a. Fill out an incident report and fax copy to the designated referral source.
b. Have the client sign Consent for Release for GCMS testing, and then follow the recommended GCMS protocols set by the laboratory and send the positive test sample to national Toxicology Lab for GCMS testing.

6.3

a. In the event a client denies use and a confirmatory test of the same sample produces a positive result, the client may face additional sanctions.

7) **Biohazard Procedures for Urine Testing. All human body fluids should be considered hazardous and must be treated with extreme caution:**

7.1 Staff must wear latex gloves at all times when handling urine samples. Do not handle or touch anything outside of the testing room while wearing gloves to avoid contaminating any other surface.

7.2 Sample containers must always be kept on a hard surface to prevent spills. Do not place a urine sample directly onto a surface; instead place the test cup on a clean paper towel or plastic tray/mat, which will contain spills.

7.3 To dispose of urine samples, empty each sample container into the toilet taking care not to splash any liquid outside the toilet bowl and flush.

7.4 All used urine sample containers and used urine test materials must be placed in a separate receptacle. These materials cannot be disposed of in any other trash container, as they are hazardous.

7.5 Wash your hands, and have the client wash their hands before leaving the test room.

8) **Urine Spills:**

8.1 Urine spills must be cleaned up immediately, and the surface must be disinfected using a disinfectant spray or cleaner. All cleanup materials must be disposed of in the appropriate receptacle.

8.2 A urine spill on carpeting or another porous surface requires special care, including thorough cleaning and disinfecting. After cleaning, report this urine spill to a management team member.