

DEPARTMENT OF HUMAN SERVICES

EFFECTIVE DATE: September 7, 2010

ISSUE DATE: September 7, 2010

REVISION DATE: February 22, 2023

SUBJECT: DRUG TESTING

I. PURPOSE

The Department of Human Services (“DHS”) is committed to operating in the safest manner possible. In order for DHS State developmental centers to meet this commitment, it is essential that employees not engage in the prohibited use of Controlled Dangerous Substances or be impaired while on duty.

The purpose of this Administrative Order is to implement a drug testing program, as required by law, for certain Applicants and Employees (full time, part time and temporary employment services) employed at State developmental centers. It is the responsibility of each employee to ensure that he or she complies with the requirements outlined in this Administrative Order.

II. SCOPE

This Administrative Order applies to:

- A. Any person who is employed or working at a State developmental center who provides direct care to a resident at a State developmental center or is designated by the Commissioner as serving in a job title listed in Attachment # 1 and those individuals seeking employment in those job titles; and
- B. Any person who volunteers at a State developmental center in a role that has direct resident contact.

III. AUTHORITY

N.J.S.A. 30:4-3.27

Executive Order 204 Kean: Policy for a Drug-Free Workplace in New Jersey State Government (1989)

L. 2021, c. 16 (New Jersey Cannabis Regulatory, Enforcement Assistances, and Marketplace Modernization Act)

IV. **DEFINITIONS**

Applicant(s) means a person (prospective employee, former employee returning to State service via reemployment lists, interim employee, or temporary employee) who seeks to obtain a position with DHS as an Employee, as that term is defined herein, who is subject to this Administrative Order.

Controlled Dangerous Substance (CDS) means substances as defined in 21 U.S.C. § 912 including substances listed on Schedules I through V as they may be revised from time to time (21 C.F.R. Parts 1301-1316), and those substances defined by N.J.S.A. Title 24 and companion regulations as they may be revised from time to time but does not include cannabis for the purposes of this Administrative Order.

Employee(s) means any person who provides direct care to a resident at a State developmental center, serves in a job title listed in Attachment # 1, or volunteers at a State developmental center in a role that has direct resident contact.

Health Care Professional means a person licensed or otherwise authorized pursuant to Title 45 or Title 52 of the Revised Statutes to practice a health care profession that is regulated by the Director of the Division of Consumer Affairs or by one of the following boards: the State Board of Medical Examiners, the New Jersey Board of Nursing, the New Jersey State Board of Dentistry, the New Jersey State Board of Optometrists, the New Jersey State Board of Pharmacy, the State Board of Chiropractic Examiners, the Acupuncture Examining Board, the State Board of Physical Therapy, the State Board of Respiratory Care, the Orthotics and Prosthetics Board of Examiners, the State Board of Psychological Examiners, the State Board of Social Work Examiners, the State Board of Veterinary Medical Examiners, the State Board of Examiners of Ophthalmic Dispensers and Ophthalmic Technicians, the Audiology and Speech-Language Pathology Advisory Committee, the State Board of Marriage and Family Therapy Examiners, the Occupational Therapy Advisory Council, and the Certified Psychoanalysts Advisory Committee. Health Care Professional also includes a nurse aide and a personal care assistant certified by the Department of Health and a homemaker home-health aide certified by the New Jersey Board of Nursing.

The term Health Care Professional is further defined as those individuals in positions described above who are employed by, under contract to render professional services to, volunteer for, or who have clinical privileges or practice granted by a State developmental

center, or one who provides such services pursuant to an agreement with a health care services firm or staffing registry.

Medical Review Officer means a physician(s) employed and/or designated by the Testing Company, as defined herein, with appropriate medical training and knowledge of substance abuse conditions, authorized to receive, review and report laboratory drug test results.

On Duty means any time period (regular work hours, overtime, hourly services), including breaks, during which an employee is required to comply with a directive from a supervisor and the employee may be expected to perform and/or be available to perform a work related function.

Positive Drug Test means a CDS test result reported positive by the Testing Company and subsequently confirmed upon review by the Medical Review Officer as evidence of prohibited use of CDS.

Prohibited Use of CDS means use of CDS without a prescription, use of a prescribed CDS not in accordance with the prescription, or unlawful use of CDS.

Site Manager means any supervisory level staff designated by the Chief Executive Officer (CEO) or other executive officer to oversee the drug testing at the testing site.

Supervisory Employee means any employee with direct or in-line responsibility for overseeing the work of other employees but not a co-worker.

Testing Company means a State designated/contracted company/vendor used to conduct random, reasonable suspicion and/or Applicant drug testing for CDS.

Workplace means any location, including but not limited to State developmental centers, offices, field sites, whether or not owned or operated by the State of New Jersey, where official State business is conducted or where job duties are performed and/or responsible for managing the unit to which the employee is assigned.

V. POLICY

- A. As a condition of employment with DHS, Employees may not engage in the Prohibited Use of CDS or be impaired by a CDS, non-CDS drug, cannabis or alcohol while on duty. The unlawful use, possession, solicitation for, or sale of CDS (including prescription CDS), non-CDS drugs, cannabis or alcohol, on DHS property is strictly prohibited. Prescription CDS must be taken in accordance with the prescription given to the Employee, as any positive test results must be corroborated against the prescription.

- B. This Administrative Order requires that Employees be subject to random drug testing for CDS performed at such intervals as the Commissioner or his/her designee deems appropriate.
- C. An Employee may also be required to undergo drug or alcohol testing if the Employee's Supervisory Employee has reasonable suspicion to believe that the Employee is impaired by a CDS, non-CDS drug, cannabis or alcohol while on duty. The Supervisory Employee's reasonable suspicion is based on the Employee's visible impairment or professional misconduct, which relates adversely to resident care or safety.
- D. Nothing in this Administrative Order shall be construed to authorize any delay in obtaining emergency medical treatment, where appropriate, for an Employee.
- E. Any employment action taken by DHS for violation of the provisions of this Administrative Order shall be taken in accordance with N.J.S.A. Title 11A, N.J.A.C. Title 4A ("Title 4A"), DHS Administrative Order 4:08, and any applicable procedures contained in collective bargaining agreements.
- F. Each State developmental center's Office of Human Resources must provide an updated listing of all Employees to the Testing Company on a quarterly basis.
- G. Each Applicant and Employee required to be tested for CDS pursuant to this Administrative Order must provide, when requested, an undiluted specimen of sufficient quantity and temperature for testing. Failure to provide such a specimen will be considered non-compliance. The Employee must supply information necessary to identify the samples (that is, provide photo identification, complete paperwork, and initial specimen), and must cooperate with the collection and testing procedures.
- H. In complying with this Administrative Order, an Employee or Applicant may request an accommodation under the Americans with Disabilities Act in accordance with DHS policies and guidelines.

VI. PROCEDURES

- A. Administering Drug Testing
 - 1. All drug testing as described below will be performed by a Testing Company that complies with New Jersey law and industry standards.
 - 2. Applicants and Employees will be notified of all positive laboratory results of any drug test and provided with an opportunity to discuss the results with the Medical Review Officer (MRO) prior to a final determination and reporting of the test results as positive.

B. Applicant Drug Testing

1. All notices for employment opportunities in State developmental centers for positions subject to this Administrative Order shall include notice of the requirement to undergo testing for CDS, at the expense of the Applicant, following the receipt of a conditional offer of employment. This includes job opportunity notices posted by the State developmental centers.
2. All individuals receiving conditional offers of employment for positions subject to this Administrative Order will be required to undergo testing for CDS before final employment is confirmed. This category includes, but is not limited to, new employees, former employees returning to State service via reemployment lists, interim appointees, and temporary employees. Applicants will receive and sign the "Applicant Notice and Acknowledgment" Form (Attachment # 2) and must be tested for CDS by a Testing Company, within 72 hours of receiving a conditional offer of employment letter.
3. All individuals will be notified of positive drug pre-employment test results by the designated Human Resources office.
4. Individuals who test positive for Prohibited Use of CDS will not be hired. Any individual with a conditional offer of employment who refuses to cooperate with the drug test requirement will not be hired.
5. An individual who receives a negative dilute result must be retested within 72 hours of receiving the results. The individual should be advised that a second test is required because the first specimen was diluted and that he or she should not drink more than 16 ounces of liquid prior to the second test. The individual will be responsible for paying the costs of the second test. An individual who receives a subsequent negative dilute test will be required to obtain a medical evaluation at his or her expense to provide a medical reason for the diluted test. The individual must schedule this appointment within 72 hours and provide the date of the appointment that should be scheduled within 14 days of the notification that an appointment is necessary. Failure to schedule a doctor's appointment within this timeframe will result in the individual being removed from consideration for employment. The individual must execute an authorization form to permit the release of health information to DHS and the MRO. The doctor's name, address and phone number must be provided to the Office of Human Resources/Employee Relations. Failure to provide evidence that substantiates an existing medical condition as the cause of the negative dilute result will be considered a Positive Drug Test result.

6. An individual who tests positive for Prohibited Use of CDS will not be allowed to re-apply for employment.
7. A “No Hire” list will be maintained, which will identify all Applicants who received a Positive Drug Test or did not comply with this Administrative Order.

C. Employee Drug Testing Upon Re-Assignment

1. Employees who are initially assigned or reassigned to a position covered by this Administrative Order in which service has not been rendered for six months or more are required to be tested prior to starting work in the new function. This category includes, but is not limited to, reassignments, temporary or interim appointments, demotions, promotions, transfers, employees returning from a leave of absence and appointments resulting from a reduction-in-force. Testing for current Employees will be at the expense of DHS.
2. Employees who test positive for Prohibited Use of CDS may be suspended from duty, referred to Employee Advisory Service (“EAS”), or terminated at the discretion of the CEO or his or her designee. Refusal to cooperate with the collection or testing procedures will result in immediate suspension and discipline, seeking removal from State service, in accordance with Title 4A, negotiated contract provisions and DHS policies. The Employee shall retain any available right of appeal or review by the Civil Service Commission.

D. Employee Random Testing

1. DHS is responsible for annually performing random drug testing for Prohibited Use of CDS on Employees.
2. Employee selection, sample collection, and the actual random drug testing will be conducted by a Testing Company.
3. Employees will be subject to random, unannounced drug testing. Employees will be selected by a method employing a scientifically valid random number generation method and objective, neutral criteria which ensure that every such Employee has an equal statistical chance of being selected each time.
4. Employees who test positive for Prohibited Use of CDS may be suspended from duty, referred to EAS, or terminated from employment, at DHS’s discretion.

5. Employees referred to EAS after an initial positive test may use benefit leave time. If the Employee has no benefit leave time available, he or she may elect to be placed in a non-pay status. Any Employee who tests positive for Prohibited Use of CDS on a follow up or second Random test will be terminated in accordance with DHS and Civil Service Commission rules generally found in Title 4A.
6. An Employee's refusal to cooperate with the collection or testing procedures will result in immediate suspension and discipline seeking removal from State service, in accordance with Title 4A, negotiated contract provisions, and DHS policies. The Employee shall retain any available right of appeal or review by the Civil Service Commission.
7. Random Testing Procedures
 - a) Each State developmental center will maintain a list of names of its Employees and their assigned work location. Each State developmental center's Office of Human Resources/Employee Relations will run an employment report from HRIS and submit to the Testing Company on a quarterly basis.
 - b) The Testing Company will contact the State developmental center's Office of Human Resources/Employee Relations on a quarterly basis to identify those Employees who have been randomly selected for testing and both will agree to dates and times when those Employees will be tested.
 - c) The State developmental center's Office of Human Resources/Employee Relations and the Site Manager as designated by the State developmental center's CEO will safeguard the identity of those individuals who have been randomly selected for testing and the dates of the planned drug test to ensure confidentiality.
 - d) On the day of, or day prior to the test, the State developmental center's Office of Human Resources/Employee Relations will notify the Site Manager and arrange for the Site Manager to arrive at the testing location 15 minutes before the scheduled test time. Upon arrival at the test location, the Site Manager will assume sole authority over testing operations. He or she will take attendance and explain the drug testing procedures to all Employees being tested.
 - e) The Site Manager will document the attendance of all Employees who have been randomly selected for testing to ensure that those Employees are present at the site.

- i. If an Employee who has been randomly selected for testing is scheduled for duty that day, that individual must be tested. If an Employee is off premises on the designated day of testing, that Employee will be considered exempt from that test.
- f) On the day of testing, each Employee scheduled for testing will receive written notice to immediately report to the testing location for random testing. (Attachment # 6).
- g) Each Employee scheduled for testing must sign the "Employee Notice for Random/Reasonable Suspicion Drug Testing" Form acknowledging receipt of the notification for drug testing and immediately report to the designated testing location.
- h) The Employee's Supervisory Employee must also sign the "Employee Notice for Random/Reasonable Suspicion Drug Testing" Form and return it to the Office of Human Resources / Employee Relations for filing.
- i) The Testing Company will perform the test in accordance with established industry procedures.
- j) All Employees randomly selected to be tested will remain at the testing location until released by the Testing Company. Employees shall strictly comply with the rules established by the Testing Company. DHS will not grant benefit time to an Employee following notification of selection of a random test except in cases of extreme emergency.
- i. All Employees, who are selected for random drug testing and who are scheduled for duty at the State developmental center, are required to undergo a drug test.
 - 1. If the Employee cannot be contacted through a page or cellular phone, then his or her Supervisory Employee should be sent to find the selected Employee to compel them to appear for the drug test immediately.
 - 2. If an Employee does not respond to a page or call because they were not heard or received and cannot be located by their Supervisory Employee, the Employee will be provided with an appointment for a mandatory drug testing for the next work day.

- k) The following conditions may apply as exceptions to random testing, including but not limited to:
- i. Employee is on an approved leave or sick leave, short-term or extended;
 - ii. Employee is on a scheduled vacation, personal, regular day off or furlough day approved prior to test notification;
 - iii. Employee is serving Jury Duty;
 - iv. Employee is off premises at an official agency activity (for example, training);
 - v. Employee is no longer employed in a covered title; or
 - vi. Employee is suspended.
- l) Should an Employee become ill while waiting to be tested, the Site Manager will arrange for the Employee to be taken to an authorized medical care facility for treatment and arrange the drug testing at that medical care facility. If the Employee reports extreme illness, an ambulance should be called. The Testing Company will dispatch someone to the medical care facility to retrieve a test sample.
- i. If a test sample cannot be retrieved at the medical care facility, the Employee will not be permitted to return to work until he or she produces a negative test result for Prohibited Use of CDS.
- m) Employees leaving the test site without approval from the Testing Company will be considered to have refused to test, which may result in disciplinary action, including termination.
- n) The “shy bladder rule” governs situations in which Employees cannot provide a sufficient urine sample.
- i. Employees will be provided up to three hours to drink up to 40 fluid ounces of water before making the second attempt to provide a complete specimen.
 - ii. If the Employee refuses to drink the fluids or if the Employee has not provided a sufficient specimen within three hours of the first unsuccessful attempt to provide the specimen, the Testing Company shall discontinue the collection process and notify the applicable State developmental center’s Office of Human Resources/Employee Relations.
 - iii. An Employee who has not provided a sufficient specimen, will be subject to discipline, unless he or she receives a medical

evaluation, at his or her own expense, to determine the reason why a sufficient sample was not possible. The Employee must execute an authorization form to permit the release of health information to DHS and the MRO. The physician conducting the evaluation must have appropriate expertise (for example, urology specialist). The Employee must schedule the medical evaluation within seventy-two hours of the drug test date on which he or she could not provide a sufficient urine sample. Within seven business days of the drug test date on which he or she could not provide sufficient urine sample, the Employee must provide to the Office of Human Resources/Employee Relations the following:

1. the date of the appointment,
2. the doctor's name,
3. the doctor's address, and
4. the doctor's phone number

Alternatively, the Employee may provide this information to the Office of Human Resources/Employee Relations and the Testing Company's MRO within 7 business days of the drug test date on which he or she could not provide sufficient urine sample.

iv. The Office of Human Resources/Employee Relations or their designee will provide the MRO with the scheduled date, the urologist's name, address and phone number. The MRO will contact the urologist and request that the physician send the MRO a report of the results of their meeting with the employee.

v. After the MRO receives this report, the MRO then notifies Office of Human Resources/Employee Relations or their designee that:

1. there is no medical reason as to why the employee had a shy bladder, or
2. there is a medical reason the person could not void their shy bladder.

vi. If the results are that there is no medical reason for the shy bladder occurrence, then the Employee is notified, put off duty (using their own earned benefit leave time, if elected to be used by the Employee, or if the Employee does not have

benefit leave time then they will be put on leave without pay), scheduled with EAS, and/or subject to discipline. A shy bladder with no medical reason is considered a “refusal” on the drug screening test.

- o) An Employee who provides a specimen that is too hot or too cold will be given three hours to drink up to 40 ounces of fluid before making the second attempt to provide a complete specimen.
- p) As Employees are released by the Testing Company, the Site Manager will direct those Employees to return to their normal work assignments.

8. Random Drug Testing Results

- a) Because the results of drug testing are not immediately known, Employees are to remain on full duty status pending receipt of the results and initiation of disciplinary action, if any.
- b) Employees will not receive notification of a negative drug test result.
- c) If the test results are anything other than negative, the MRO will contact the Employee directly to obtain additional information relating to the test results.
 - i. An Employee who receives a negative dilute result will be provided with an appointment for a retest within 24 hours of the employee being notified of the result. Employees should be advised that they are being sent for a second test because the first specimen was diluted and a second test is required. The Office of Human Resources/Employee Relations shall provide a letter that instructs the employee not to drink more than 16 ounces of liquid prior to the second test. The Employee will be responsible for paying the costs of the second test unless the Employee subsequently submits a supported medical justification for the negative dilute.
 - ii. An Employee who receives a subsequent negative dilute result will be required to obtain a medical evaluation at his or her expense to provide a medical reason for the diluted result. The Employee must schedule this appointment within 72 hours and provide the date of the appointment that should be scheduled within 14 days of the notification that an appointment is necessary. Failure to schedule a doctor's appointment will result in disciplinary action. The Employee

must execute an authorization form to permit the release of health information to DHS and the MRO. The doctor's name, address and phone number must be provided to the Office of Human Resources/Employee Relations. Failure to provide evidence that substantiates an existing medical condition as the cause of the negative dilute result will be considered a Positive Drug Test result. A supported medical justification for a negative dilute will not result in adverse employment action.

- d) Within 24 hours after testing, the MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all negative CDS test results. Notification is to be done via telephone and confirmed in writing via email to the Office of Human Resources/Employee Relations.
- e) The MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all Positive Drug Test results. Notification is to be done via telephone and confirmed in writing via email to the Office of Human Resources/Employee Relations.
- f) The State developmental centers' Offices of Human Resources/Employee Relations will notify each other of any Positive Drug Test results. Notification is to be accomplished via telephone or email or in-person.
- g) Upon receipt of documentation which substantiates a Positive Drug Test, the State developmental center's Office of Human Resources/Employee Relations will contact the Employee to explain the procedures regarding the mandated referral to EAS and a subsequent return to work drug screen. The Office of Human Resources/Employee Relations will provide the Employee with a copy of the Requirements of the "Random Drug Testing" procedure (Attachment # 7). The Employee may use his or her own earned benefit time or be placed into non-pay status if benefit leave time is not available. If benefit time is not available, the Employee may request a leave of absence, in accordance with Title 4A. Employees placed on non-pay status should be provided with a health benefits pre-payment schedule to maintain health benefits during their absence in order to complete the required treatments. The Employee will not be allowed to return to work until the Employee is cleared by EAS and has been authorized to return to work by the State developmental center's Office of Human Resources/Employee Relations. While receiving treatment in EAS, the Employee may use benefit time.

- h) Health Care Professionals who test positive for Prohibited Use of CDS on a random drug test shall be placed off duty. Administrative Order 3:09: Health Care Professional Reporting Requirements (Cullen's Law) shall be followed.

E. Reasonable Suspicion Testing Policy

1. An on-duty Employee shall be required to submit to a drug test when his or her Supervisory Employee has reasonable suspicion to believe the Employee is impaired by a CDS, a non-CDS drug, cannabis or alcohol while on duty.
2. Under circumstances that warrant a reasonable suspicion test, the Employee will be removed immediately from the performance of direct care functions pending the outcome of the test(s). The Supervisory Employee must notify the Office of Human Resources/Employee Relations as soon as possible after this occurs and no later than the morning of the next business day.
3. An Employee's refusal to cooperate with the testing procedures will result in immediate suspension pending removal from State service, in accordance with Title 4A, negotiated contract provisions, and DHS policies. The Employee shall retain any available right of appeal or review by the Civil Service Commission.
4. Reasonable Suspicion Testing Procedures
 - a) The Supervisory Employee's determination of reasonable suspicion that an Employee is impaired by a CDS, a non-CDS drug, cannabis or alcohol must be based on the Supervisory Employee's specific, contemporaneous, articulable observations concerning the appearance, behavior, speech, or body odors of the Employee. Observation of professional misconduct, which relates adversely to resident care or safety and/or employee job performance may satisfy the reasonable suspicion standard. The observations may include indications of the chronic and withdrawal effects of substances.
 - b) Some medical crises manifest symptomatic behaviors similar to behaviors of someone under the influence of drugs. Prior to implementing procedures to request testing for reasonable suspicion of drug use, the Supervisory Employee will take initial action consistent with facility policies and procedures to rule out a medical emergency, including placing a 911 emergency call if necessary. The Supervisory Employee should ask the suspected Employee

whether there is a medical reason for his or her behavior and consider his or her response when determining whether a reasonable suspicion drug test is warranted. An Employee's denial of use of drugs or alcohol does not mean that a reasonable suspicion drug test may not be performed if other factors requiring the drug test are present.

- c) In cases of reasonable suspicion testing, Supervisory Employees shall determine whether a drug test is warranted and are required to document their observations using the "Reasonable Suspicion - Drug Testing Supervisor's Observation/Report" Form (Attachment # 3). This form must be used in conjunction with the "Reasonable Suspicion Drug Screening Authorization" Form (Attachment # 4).
- d) The Supervisory Employee must request a second opinion from another member of supervision in his or her chain of command, who will personally observe the behavior of the employee in question. This second opinion should be confidential. During this time the Employee in question should be given a non-direct care assignment, if available, and remain under the observation of the Supervisory Employee. These observations must be documented and forwarded, along with the forms listed in subsection (c) above, to the CEO or his or her designee for a final determination.
- e) Prior to scheduling and sending an Employee for a reasonable suspicion drug test, the Supervisory Employee must obtain written approval from the State developmental center's CEO or his or her designee. The CEO or his or her designee must approve the reasonable suspicion drug test in writing by signing the "Reasonable Suspicion Drug Screening Authorization" Form (Attachment # 4).
- f) Upon the CEO's or his or her designee's approval, the Employee must submit to drug testing.
- g) DHS may subject an Employee, whose Supervisory Employee has reasonable suspicion to believe that the Employee is under the influence of CDS, a non-CDS drug, cannabis or alcohol, to a drug test during the following times:
 - i. upon reporting for work for normal assigned shifts or overtime shifts,
 - ii. anytime during his or her work shift, and
 - iii. immediately following the work shift.

- h) Upon completion of the above process, the Supervisory employee must inform the Employee that personal observations of his or her behavior warrant a drug test. The Employee must be told that if he or she refuses to submit to the test(s), he or she will be terminated. This verbal communication should be done in a private setting. Another Supervising Employee must be present during this notification.
 - i) One of the Supervisory Employees present during the Employee notification will provide the Testing Company the following:
 - 1. notice that a reasonable suspicion drug must be performed the same day;
 - 2. a copy of the CEO's written approval; and
 - 3. the Employee's name and any other required information.
 - j) The Employee should arrange to be transported to an approved medical facility for the test to be completed. If the Employee cannot make arrangements to be transported to and from the test site, then the developmental center may contact Emergency Medical Technicians.
 - k) If transport to an approved drug testing site is not feasible, upon approval of the CEO or his or her designee, the requesting Supervisory Employee may contact the Testing Company for an emergency, on-site test.
6. Reasonable Suspicion Test Results – First 72 Hours after Testing
- a) Because the results of a drug test are not immediately known, the Employee is to remain off duty, with pay until the results are known. The Employee shall not report back to work until directed to do so by the Office of Human Resources/Employee Relations.
 - b) If the test results are anything other than negative, the MRO will contact the Employee directly to obtain additional information relative to the test results.
 - c) As soon as possible after testing, the MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all negative drug test results. Notification is to be done via telephone and via email or fax.

- d) The MRO will notify the State developmental center's Office of Human Resources / Employee Relations of all Positive Drug Test results as soon as practicable. Notification is to be done via telephone and via fax to ensure accurate communication of test results.
- e) The State developmental center's Offices of Human Resources/Employee Relations will notify each other of any Positive Drug Test results as soon as practicable. Notification is to be accomplished via telephone or email or in-person.
- f) Upon receipt of the notification that confirms a Positive Drug Test, the State developmental center's Office of Human Resource/Employee Relations will contact the Employee to explain to him or her the procedures regarding a referral to EAS and a subsequent return to work drug screen, or suspend the employee as appropriate.
 - i. The Office of Human Resources/Employee Relations will provide the Employee with a copy of the Requirements of the Random Drug Testing procedure (Attachment # 7). The Employee shall use his or her earned own benefit time or be placed into non-pay status if benefit leave time is not available while waiting for the mandated EAS appointment. If benefit time is not available, the employee may request a leave of absence, in accordance with Title 4A. The Employee will not be allowed to return to work until he or she is cleared by EAS and has been authorized to return to work by the State developmental center's Office of Human Resources/Employee Relations. While receiving treatment in EAS, the Employee may use benefit time.
- g) An Employee who receives a negative dilute test is subject to the procedures discussed above for this situation.

F. Return-to-Duty Re-testing

1. Each Employee, who has been subject to random or reasonable suspicion drug testing and has engaged in conduct prohibited by this Administrative Order (for example, a positive test or a non-medically justified insufficient urine sample) shall, prior to his or her return to work, undergo a return-to-duty drug test for Prohibited Use of CDS with a negative result. Employees

who are returning to work after being put off duty related to a drug offense shall also be required to be subject to return-to-duty drug testing.

2. Return-to-Duty Re-test Results

- a) Pending the receipt of the return-to-duty drug test results, the Employee is to remain off duty.
- b) If the test results are anything other than negative, the MRO will contact the Employee directly to obtain additional information relative to the test results.
- c) Within 24 hours after testing, the MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all negative drug test results. Notification is to be done via telephone and via fax to ensure accurate communication of test results.
- d) The MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all Positive Drug Test results. Notification is to be done via telephone and via fax to ensure accurate communication of test results.
- e) The State developmental center's Offices of Human Resources/Employee Relations will notify each other of any Positive Drug Test results. Notification is to be accomplished via telephone or email or in-person.
- f) Upon receipt of documentation which confirms a positive drug test, the State developmental center's Office of Human Resources/Employee Relations may initiate disciplinary action.
- g) An Employee who receives a negative dilute test is subject to the procedures discussed above for this situation.

3. Follow-up Re-testing

- a) When an Employee is permitted to return to duty, the Employee shall be subject to three unannounced follow-up drug tests at the employee's expense in the first twelve months following the return to duty.
- b) When required to undergo a follow-up drug test, Employees should be allowed to use available sick, vacation, and/or administrative

leave benefit time. If an Employee is out of benefit leave time, then he or she will not receive compensation for follow-up retesting. If an Employee takes a leave of absence during the twelve-month return-to-duty testing period, the twelve-month period will be extended by the amount of time that the Employee goes out on a leave of absence during the re-test period.

- i. For example, an Employee who returns to work on January 1, 2023 will be subject to three unannounced follow-up drug tests through December 31, 2023. However, should that Employee take a leave of absence from July 1, 2023 to September 30, 2023 (i.e., a three-month leave), then the Employee will be subject to unannounced follow-up drug testing through March 31, 2024.

4. Follow Up Re-testing Procedures

- a) For follow-up scheduling, the State developmental center's Office of Human Resources/Employee Relations will notify the Employee's Supervisory Employee to ensure that the Employee reports for testing.
- b) Pending the receipt of the follow up re-testing drug test results, the Employee is to remain in full duty status.
- c) If the test results are anything other than negative, the MRO will contact the Employee directly to obtain additional information relative to the test results.
- d) Within 24 hours after testing, the MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all negative drug test results. Notification is to be done via telephone and via fax to ensure the accurate communication of test results.
- e) The MRO will notify the State developmental center's Office of Human Resources/Employee Relations of all Positive Drug Test results. Notification is to be done via telephone and via fax to ensure accurate communication of test results.
- f) The State developmental center's Offices of Human Resources and Employee Relations will notify each other of any Positive Drug Test results. Notification is to be accomplished via telephone or email or in-person

- g) Upon receipt of documentation which confirms an additional Positive Drug Test, the State developmental center's Office of Human Resources/Employee Relations will remove the Employee from the work site and initiate suspension without pay procedures (that is, a Loudermill hearing). If appropriate, the Human Services Police shall escort the Employee off DHS property.
- h) Employees who test positive for Prohibited Use of CDS on a second offense will be terminated.
- i) An Employee who receives a negative dilute test is subject to the procedures discussed above for this situation.
- j) The Office of Employee Relations will take the necessary actions to place the Employee off duty in accordance with established disciplinary procedures.

G. Supervisory Employees

- 1. Each State developmental center shall ensure that Supervisory Employees who may have to determine whether reasonable suspicion exists to require an Employee to undergo drug testing are familiar with this Administrative Order and the standards by which reasonable suspicion is determined.

H. Employee Notification

- 1. Each State developmental center shall follow established operational procedures to implement this Administrative Order in accordance with the standards established herein and provide notice to all Employees through a copy of the Administrative Order. Employees shall also be given an oral explanation of the procedures herein prior to being subject to any testing procedures.
- 2. All Employees shall sign a form acknowledging receipt of the Administrative Order (Attachment # 5) and such receipt shall be maintained in the Employee's personnel file.

I. Voluntary Participation In Drug Treatment

- 1. Employees who have substance use disorder are encouraged to voluntarily seek treatment. Treatment may be sought through the EAS or independently by the Employee without employer involvement. Nothing herein shall prevent DHS from taking appropriate disciplinary action for violations under this Administrative Order.

J. Testing for Cannabis

1. Applicants and Employees will not be tested for cannabis under this Administrative Order except for reasonable suspicion testing.
2. Employees shall only be tested for cannabis when reasonable suspicion exists that the employee is 1) using cannabis while at a DHS worksite; 2) using cannabis while engaged in the performance his or her duties; 3) impaired by cannabis while on duty; or 4) subject to testing following a work-related accident while operating a vehicle with a commercial driver's license (CDL).
3. Testing for cannabis based on reasonable suspicion may only be performed in conjunction with a physical examination of the employee to determine the Employee's state of impairment.
4. Employees holding a CDL as a requirement of their title are subject to separate drug testing that includes cannabis, as CDL holders are prohibited by federal rules from using cannabis.

VII. CONFIDENTIALITY

- A. Information regarding a medical condition obtained in the course of drug testing must be treated as confidential. Such information shall be collected and maintained on separate forms and in secured medical files, separate from the Employee's personnel file and maintained in the Office of Human Resources. Reasonable steps should be taken to avoid the disclosure of test results and medical conditions beyond to those with a business necessity.
- B. The Testing Company performing drug testing under this Order shall report individual test results to the MRO and to the individual who provided the sample.
- C. The MRO may release a Positive Drug Test result to DHS only after they have been confirmed positive and only after the MRO has made all reasonable efforts to discuss the results with the individual who provided the sample.
- D. Pursuant to P.L. 2009, c. 220, drug testing results shall not be reported to law enforcement authorities.
- E. Statistical compilations without individual identifiers may be made available to the public.
- F. Any Applicant or Employee, who is the subject of a drug test, shall, upon written request, have access to his or her records relating to his or her drug test.

Attachment # 1

**DHS DRUG TESTING TITLES
TITLES INCLUDE ALL LEVELS AND VARIANTS
(INCLUDES TES EQUIVALENTS)**

Union	BARG. CODE	Title
CWA	A	CLINICAL LABORATORY TECHNICIAN
	A	ELECTROENCEPHALOLOGRAPHER
	A	INTERPRETER FOR THE DEAF
	A	LABORATORY TECHNICIAN
	A	NURSING SERVICES CLERK
	A	SENIOR CLINICAL LABORATORY TECHNICIAN
	A	SENIOR LABORATORY TECHNICIAN
	A	TEACHING ASSISTANT 12 MONTHS
	P	ADVANCED PRACTICAL NURSE
	P	BEHAVIOR SUPPORT TECHNICIAN (ALL LEVELS AND VARIANTS)
	P	CLIENT SERVICES REPRESENTATIVE
	P	CLINICAL PSYCHIATRIST BOARD ELIGIBLE
	P	CLINICAL PSYCHOLOGIST (ALL LEVELS & VARIANTS)
	P	CLINICAL SPECIALIST IN PSYCHIATRIC NURSING
	P	CLINICAL PSYCHTRST BOARD CERTIFIED
	P	CLINICAL PSYCHTRST POST CERTIFIED
	P	COMMUNITY PROGRAM SPECIALIST (ALL LEVELS AND VARIANTS)
	P	COUNSELOR 1 VOCATIONAL PROGRAM DEVELOPMENTAL DISABILITIES
	P	COUNSELOR 2 VOCATIONAL PROGRAM DEVELOPMENTAL DISABILITIES
	P	EDUCATION SPECIALIST I, DEVELOPMENTAL SPECIALIST
	P	HABILITATION PLAN COORDINATOR
	P	INSTRUCTOR COUNSELOR
	P	INSTRUCTOR-COUNSELOR TRAINEE
	P	MEDICAL TECHNOLOGIST
	P	OCCUPATIONAL SAFETY CONSULTANT (ALL LEVELS)

	P	OCCUPATIONAL THERAPIST
	P	PHYSICAL THERAPIST
	P	PHYSICIAN 1
	P	PHYSICIAN ASSISTANT
	P	PHYSICIAN SPECIALIST (ALL LEVELS)
	P	PROGRAM ASSISTANT DIVISION OF DEVELOPMENTAL DISABILITIES
	P	PROGRAM COORDINATOR MENTAL HEALTH
	P	PSYCHOLOGICAL INTERN
	P	REGIONAL STAFF NURSE MEDICAL ASSISTANCE
	P	REHABILITATION COUNSELOR MENTAL HEALTH (ALL LEVELS)
	P	SAFETY OFFICER, DEVELOPMENTAL DISABILITIES
	P	SENIOR INCOME MAINTENANCE TECHNICIAN
	P	SENIOR PHYSICAL THERAPIST
	P	SOCIAL WORKER (ALL LEVELS & VARIANTS)
	P	SPEECH/HEARING SPECIALIST (ALL LEVELS)
	P	STAFF CLINICAL PSYCHOLOGIST (ALL LEVELS & VARIANTS)
Union	BARG. CODE	Title
CWA	P	STAFF NURSE 12 MONTHS
	P	TEACHER 12 MONTHS (ALL LEVELS)
	P	THERAPIST ART
	P	THERAPIST MOVEMENT
	P	THERAPIST MUSIC
	P	VOCATIONAL REHABILITATION COUNSELOR (ALL LEVELS & VARIANTS)
	R	ASSISTANT HOUSEKEEPING SUPERVISOR (ALL LEVELS)
	R	ASSISTANT SOCIAL WORK SUPERVISOR (ALL VARIANTS)
	R	ASSISTANT SUPERVISING MEDICAL SECURITY OFFICER
	R	ASSISTANT SUPERVISOR OF EDUCATIONAL PROGRAMS (ALL LEVELS)
	R	ASSISTANT SUPERVISOR OF RECREATION
	R	BEHAVIOR ANALYST 2
	R	CHARGE NURS 12 MONTHS

	R	CLINICAL DIETITIAN
	R	COTTAGE TRAINING SUPERVISOR
	R	CREW SUPERVISOR BUILDING MAINTENANCE WORKERS
	R	DENTIST 1
	R	GUARDIANSHIP SERVICES SPECIALIST (ALL LEVELS)
	R	HEAD COTTAGE TRAINING SUPERVISOR
	R	HEAD HAIRDRESSER
	R	HEAD HOUSEKEEPER
	R	INSTITUTIONAL TRANSPORTATION SUPERVISOR
	R	PRINCIPAL COMMUNITY PROGRAM SPECIALIST
	R	PRINCIPAL LABORATORY TECHNICIAN
	R	PRINCIPAL PHYSICAL THERAPIST
	R	RESIDENTIAL SERVICES SPECIALIST (ALL LEVELS & VARIANTS)
	R	SENIOR INSTRUCTOR COUNSELOR READJUSTMENT UNIT
	R	SENIOR OCCUPATIONAL THERAPIST
	R	SUBSTANCE ABUSE COUNSELOR (ALL LEVELS & VARIANTS)
	R	SUPERVISING RESPIRATORY THERAPIST
	R	SUPERVISING VOCATIONAL REHABILITATION COUNSELOR
	R	SUPERVISOR OF MUSIC THERAPY
	R	SUPERVISOR OF X RAY TECHNICIANS
	R	SUPERVISOR VOCATIONAL PROGRAM
	R	SUPERVISING REHABILITATION COUNSELOR MENTAL HEALTH
	S	ASSISTANT DIRECTOR OF NURSING SERVICES (ALL VARIANTS)
	S	ASSISTANT SUPERVISOR OF PROFESSIONAL RESIDENTIAL SERVICES DEV
	S	ASSISTANT SUPERVISOR OF RESIDENTIAL LIVING
	S	CHIEF OF DENTAL SERVICES
	S	DIRECTOR OF OCCUPATIONAL THERAPY
	S	DIRECTOR OF SPEECH,LANGUAGE,PATHOLOGY AND AUDIOLOGY
	S	HOUSEKEEPING SUPERVISOR (ALL LEVELS)

	S	PRINCIPAL OCCUPATIONAL THERAPIST
	S	SOCIAL WORK SUPERVISOR (ALL LEVELS & VARIANTS)
	S	SUPERVISING COMMUNITY PROGRAM SPECIALIST
	S	SUPERVISING CLINICAL DIETITIAN
	S	SUPERVISING LABORATORY TECHNICIAN
Union	BARG. CODE	Title
CWA	S	SUPERVISING MEDICAL SECURITY OFFICER
	S	SUPERVISING SUBSTANCE ABUSE COUNSELOR
	S	SUPERVISOR OF CLINICAL LABORATORIES
	S	SUPERVISOR OF EDUCATIONAL PROGRAMS (ALL LEVELS)
	S	SUPERVISOR OF NURSING SERVICES
	S	SUPERVISOR OF PHYSICAL THERAPY
	S	SUPERVISOR OF PROFESSIONAL RESIDENTIAL SERVICES
	S	SUPERVISOR OF RECREATION
AFSCME	H	BARBER
	H	COTTAGE TRAINING TECHNICIAN
	H	DENTAL AIDE
	H	DENTAL ASSISTANT (ALL LEVELS)
	H	DENTAL HYGIENIST 1
	H	EMERGENCY MEDICAL SERVICES TECHNICIAN
	H	FOOD SERVICE WORKER 12 MONTHS
	H	HAIRDRESSER
	H	HUMAN SERVICES ASSISTANT
	H	HUMAN SERVICES TECHNICIAN
	H	INCOME MAINTENANCE TECHNICIAN
	H	INSTITUTIONAL TRADE INSTRUCTOR (ALL LEVELS)
	H	MEDICAL SECURITY OFFICER RECRUIT
	H	OCCUPATIONAL THERAPY ASSISTANT
	H	PHYSICAL THERAPY ASSISTANT
	H	PRACTICAL NURSE
	H	PRINCIPAL SOCIAL SERVICE AIDE
	H	RECREATION AIDE
	H	RECREATION ASSISTANT
	H	RESIDENTIAL LIVING SPECIALIST
	H	RESPIRATORY THERAPY TECHNICIAN

	H	SENIOR FOOD SERVICE HANDLER
	H	SENIOR FOOD SERVICE WORKER 12 MONTHS
	H	SENIOR MEDICAL SECURITY OFFICER
	H	SENIOR SOCIAL SERVICE AIDE
	H	SENIOR THERAPY PROGRAM ASSISTANT
	H	SOCIAL SERVICE AIDE
	H	SENIOR COTTAGE TRAINING TECHNICIAN
	H	SENIOR HUMAN SERVICES TECHNICIAN
	H	SENIOR PRACTICAL NURSE
	H	SUBSTANCE ABUSE ASSISTANT
	H	THERAPY AIDE
	H	THERAPY PROGRAM ASSISTANT
	H	X RAY TECHNICIAN
IFPTE	O	RESIDENTIAL SERVICES WORKER
	O	SENIOR BUILDING MAINTENANCE WORKER
	O	SENIOR LAUNDRY WORKER
	O	MOTOR VEHICLE OPERATOR 2
NON- UNION	M	MANAGING PHYSICIAN/PSYCHIATRIST
Union	BARG. CODE	Title
NON- UNION	M	SUPERVISOR OF REHABILITATIVE SERVICES
	X	CHAPLAIN
	X	CONSULTING PHYSICIAN SPECIALIST

DEPARTMENT OF HUMAN SERVICES - DRUG TESTING
APPLICANT Notice and Acknowledgment

I, _____ (*Please Print Name*), applicant for _____ (*Name of Position*), understand that as part of the pre-employment process, the Department of Human Services will conduct a comprehensive background investigation to determine my suitability for the position for which I have applied.

I understand that as part of this process, I will undergo drug testing through urinalysis.

I understand that the **cost of the drug testing is at my own expense.**

I understand that I must schedule myself and be tested for drugs, at a designated drug testing site, within 72 business hours of receiving a conditional offer of employment letter/ notification.

I understand that the results of my drug test will be shared with the NJ Department of Human Services' _____ (*Name of Facility*) Human Resources Office.

I understand that a negative drug test result is a condition of employment.

I understand that if I refuse to undergo the testing, I will be rejected for employment.

I understand that if I produce a positive test result for prohibited use of any controlled dangerous substance, I will be rejected for employment.

I understand that if I produce a positive test result for prohibited use of any controlled dangerous substance, that information will not be reported to law enforcement authorities.

I have read and understand the information contained on this "Applicant Notice and Acknowledgment" form. I agree to undergo drug testing through urinalysis as part of the pre-employment process.

Signature of Applicant

Date

Name of Witness (Please Print)

Signature of Witness

Date

Attachment # 3

REASONABLE SUSPICION – Drug Testing

Supervisor’s Observation/Report Form

New Jersey Department of Human Services Facility Name:

Employee’s Name		Supervisor’s Name
Job Title	Work Unit & Shift	Second Supervisor
Place/Location of Observation		
If there was an accident or incident, give a brief description		
If there is a medial reason for the behavior, give a brief description		

<p>1. Reasonable Suspicion – Observed Behavior <i>(Check all that apply)</i></p> <p><input type="checkbox"/> Slurred/Incoherent speech</p> <p><input type="checkbox"/> Drowsiness/asleep</p> <p><input type="checkbox"/> Staggering Gait</p> <p><input type="checkbox"/> Physical Coordination Problems</p> <p><input type="checkbox"/> Tremor/Shaking Problems</p> <p><input type="checkbox"/> Unable to perform Usual Work Tasks</p> <p><input type="checkbox"/> Odor of Alcohol</p> <p><input type="checkbox"/> Odor of Marijuana/Cannabis</p>	<p>• Eyes</p> <p><input type="checkbox"/> Bloodshot <input type="checkbox"/> Droopy Lids</p> <p><input type="checkbox"/> Sunglasses</p> <p><input type="checkbox"/> Watery <input type="checkbox"/> Normal <input type="checkbox"/></p> <p>Contacts</p> <p>• Clothing</p> <p><input type="checkbox"/> Partly Dressed <input type="checkbox"/> Defecated in</p> <p><input type="checkbox"/> Vomited on <input type="checkbox"/></p> <p>Urinated in</p> <p><input type="checkbox"/> Soiled <input type="checkbox"/> Normal</p>
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<p>Walking Ability</p> <p><input type="checkbox"/> Unable to Walk <input type="checkbox"/> Stumbling</p> <p><input type="checkbox"/> Falling <input type="checkbox"/> Grasping</p> <p><input type="checkbox"/> Swaying <input type="checkbox"/> On hands & knees</p> <p> • Standing Ability</p> <p><input type="checkbox"/> Swaying <input type="checkbox"/> Leaning on items for support</p> <p><input type="checkbox"/> Rigid <input type="checkbox"/> Feet apart for support</p> <p><input type="checkbox"/> Unable to Stand</p> <p> • Speech</p> <p><input type="checkbox"/> Shouting <input type="checkbox"/> Slurred</p> <p><input type="checkbox"/> Rambling <input type="checkbox"/> Crying</p> <p><input type="checkbox"/> Incoherent <input type="checkbox"/> Whisper</p> <p><input type="checkbox"/> Boisterous <input type="checkbox"/> Vulgarity</p> <p> • Demeanor</p> <p><input type="checkbox"/> Fighting <input type="checkbox"/> Hysterical <input type="checkbox"/> Polite</p> <p><input type="checkbox"/> Indifferent <input type="checkbox"/> Calm <input type="checkbox"/></p> <p>Cooperative</p> <p> • Actions</p> <p><input type="checkbox"/> Punching <input type="checkbox"/> Resisting <input type="checkbox"/> Normal</p> <p><input type="checkbox"/> Kicking <input type="checkbox"/> Profanity <input type="checkbox"/> Threatening</p> <p><input type="checkbox"/> Difficult to Awaken</p>	<p> • Face</p> <p><input type="checkbox"/> Flushed <input type="checkbox"/> Pale <input type="checkbox"/></p> <p>Normal</p> <p> • Hands</p> <p><input type="checkbox"/> Fumbling <input type="checkbox"/> Shaking</p> <p><input type="checkbox"/> Slow <input type="checkbox"/></p> <p>Normal</p> <hr/> <p>II. JOB PERFORMANCE</p> <p>Was employee performing his or her job at the time?</p> <p style="text-align: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>How were job duties impacted?</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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III. Did you observe the employee interacting with a client or operating equipment or vehicle?

 • **Was the Client Interaction::**

Badgering

Too Loud

Inappropriate

Explain:

• Was the Vehicle:

- Zig Zagging
- Excessive Speed
- Left unattended while operating
- On wrong side of roadway
- Too slow
- Lights not on?
- Operator disobeying traffic rules

• Was Equipment:

- Being improperly used
- Mishandled, not stored properly
- Not operated safely
- Left unattended while operating
- Caused to be broken

• Other Observations:

Attachment # 4

DEPARTMENT OF HUMAN SERVICES
REASONABLE SUSPICION DRUG SCREENING AUTHORIZATION

- () Chief Executive Officer, (DDD FACILITY), or
- () Chief Executive Officer Designee, (DDD FACILITY)
- Approved Disapproved Other

Explain: _____

Name: _____ Signature: _____
(Please Print)

Date _____ Time _____

Contacted Via Telephone _____ In Person _____ Email _____

Employee Name _____

Employee Title _____

Employee Social Security Number (last 4 digits only) **xxx - xx -** _____

AUTHORIZATION REQUESTED BY:

() Supervisor Name: _____ Signature: _____
(Please Print)

Date _____ Time _____

() Secondary Supervisor Name: _____ Signature: _____
(Please Print)

Date _____ Time _____

Attachment # 5

DEPARTMENT OF HUMAN SERVICES

DRUG TESTING

EMPLOYEE Notice and Acknowledgment of Receipt of Drug Testing Policy

To Be Completed By Employee

I, _____ (*Print Name*), understand that as part of the New Jersey Department of Human Services’ Drug Testing Policy, I will be subject to random and reasonable suspicion drug testing by urinalysis.

I understand that a negative result is a condition of my continued employment as a “Covered Person” for the New Jersey Department of Human Services.

I understand that a refusal to submit to a random and/or reasonable suspicion drug test shall result in my dismissal from the New Jersey Department of Human Services.

I understand that if I produce a positive result for prohibited use of any controlled dangerous substance, I may be referred to employee advisory services, or terminated from employment with the New Jersey Department of Human Services, as applicable.

I understand that if I produce a positive test result for prohibited use of any controlled dangerous substance, the information will not be reported to law enforcement authorities.

I have read and I understand the information contained on this “Employee Notice and Acknowledgment” form. I agree to undergo drug testing through urinalysis as a condition of continued employment with the New Jersey Department of Human Services.

On this Date _____, I acknowledge receipt of Administrative Order # _____ (Drug Testing Policy)

Signature of Employee

Date

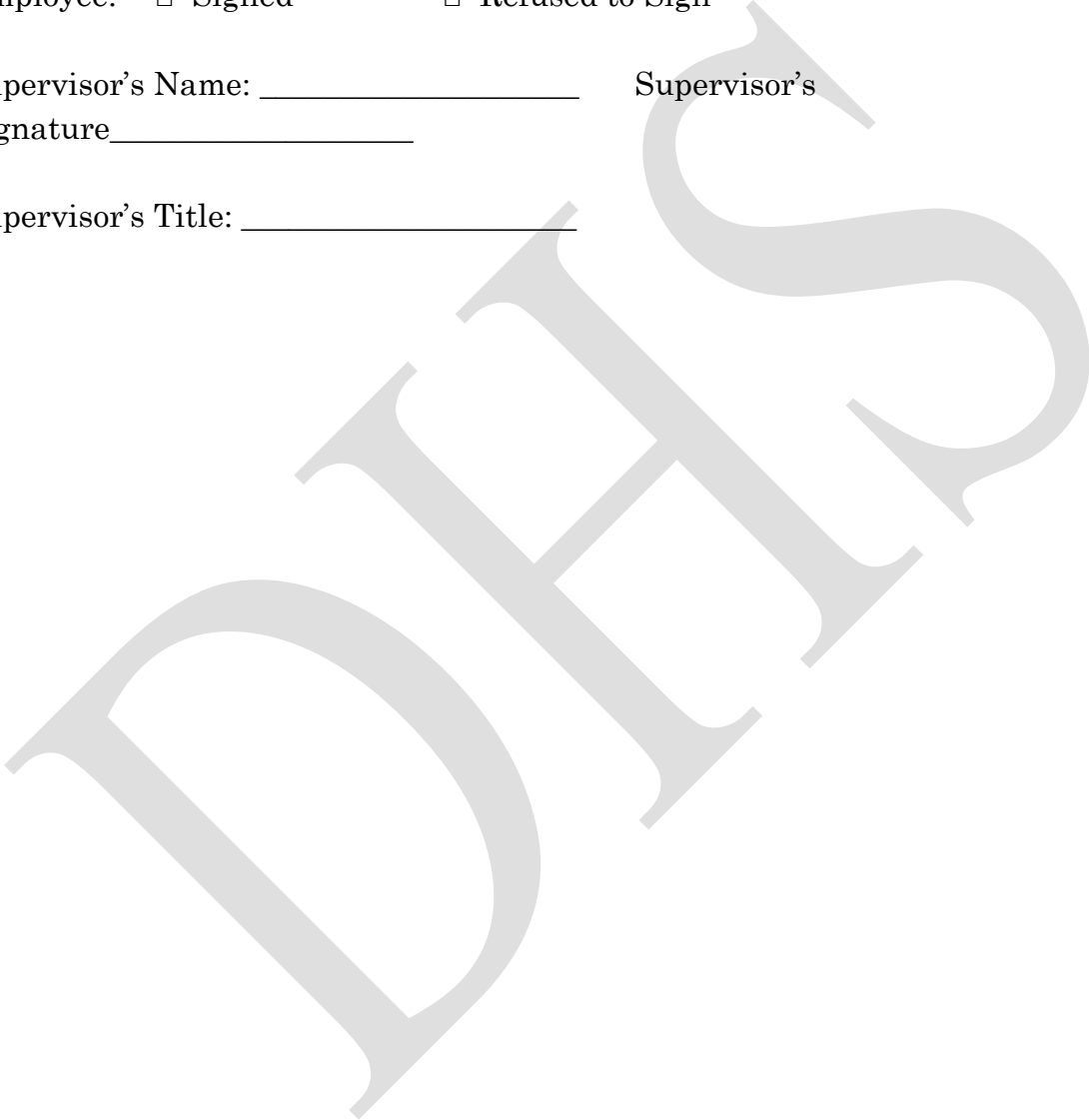
To Be Completed By Supervisor:

On this Date: _____, I provided _____ (*Employee Name Printed*) with a copy of Administrative Order # _____ (*Drug Testing Policy*)

Employee: Signed Refused to Sign

Supervisor's Name: _____ Supervisor's
Signature _____

Supervisor's Title: _____



DEPARTMENT OF HUMAN SERVICES

EMPLOYEE Notice

To Report For Random/Reasonable Suspicion Drug Testing

To Be Completed By Employee:

I, _____ (*Print Name*), understand that as part of the New Jersey Department of Human Services’ Drug Testing Policy, I am subject to random and/or reasonable suspicion drug testing by urinalysis.

I understand that a negative result is a condition of my continued employment as a “Covered Person” for the New Jersey Department of Human Services (DHS).

I understand that a refusal to submit to a random and/or reasonable suspicion drug test shall result in my dismissal from the DHS.

On this Date _____, at _____ (*Time*), I acknowledge receipt of this notification to immediately report to _____ (*Testing Location*) for drug testing by urinalysis.

Signature of Employee

Date

To Be Completed By Supervisor:

On this Date: _____, at _____ (*Time*), I provided _____ (*Employee Name Printed*) with notification to immediately report to _____ (*Testing Location*) for drug testing.

Employee: Signed Refused to Sign Not available (explain)

Supervisor’s Name: _____

Supervisor’s Signature _____

Supervisor’s Title: _____

To:

From:

Date:

Subject: Notice as to Requirements of the Random/Reasonable Suspicion Drug Testing Procedure

You have tested positive under the Random Drug or Reasonable Suspicion Testing Procedure and you must now comply with all of the requirements of Administrative Order 4:23. (policy attached)

- The Human Resources office has scheduled you for a mandatory appointment with the Employee Advisory Service (EAS). You will be placed off duty until the date of the appointment. You may elect to use available benefit leave balances to cover your period of absence prior to the EAS appointment.
- You are not permitted to work until you are cleared by EAS. You may use available benefit leave balances to cover your absence. You may also request a leave of absence without pay by completing the attached package.
- When EAS indicates to you that you are cleared to return to work, you must contact the Office of Human Resources / Employee Relations so that you can be referred for a return-to-work drug screen. The Office of Human Resources / Employee Relations will provide you with a referral for the drug screen. Upon receipt of a negative drug screen, the Office of Human Resources / Employee Relations will contact you to arrange for your return to work.
- You will have to submit to unannounced follow-up drug testing at least 3 times in the first 12 months following your return to work. If you go out on a leave at any point during the 12 months after your return to work, the time period for follow-up drug testing will be extended by the period of your leave.
- You will be responsible, at your own expense, to pay for the return-to-work drug screen and all follow-up drug testing following your return to work.

Failure to comply with any of the aforementioned requirements may result in your termination from employment. If you have a positive drug screen result for prohibited use of any controlled dangerous substance on your return-to-work drug

screening or a positive drug screen result for prohibited use of any controlled dangerous substance during any of the unannounced follow-up drug tests, then you may be terminated from your employment. If your contact telephone numbers should change, if you need to leave the State, or you have any problem you must contact the Office of Human Resources / Employee Relations at: _____.

I acknowledge receipt of this notice, a copy of Administrative Order 4:23, and Leave of Absence paperwork.

Employee Signature

Date

Contact Telephone numbers: _____

Witness Name

Witness Signature