



# Operating Procedure

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<b>Amended</b> 8/1/18	<b>Operating Level</b> Department
<b>Supersedes</b> Operating Procedure 841.5(7/1/15)	
<b>Authority</b> COV §53.1-10, §53.1-25, §53.1-32.1, §53.1-145	
<b>Subject</b> <b>OFFENDER ALCOHOL AND OTHER DRUG TESTING AND TREATMENT SERVICES</b>	
<b>ACA/PREA Standards</b> 4-4377, 4-4437, 4-4438, 4-4439, 4-4440, 4-4441; 4-ACRS-5A-08, 4-ACRS-5A-09, 4-APPFS-2D-04; 2-CO-4B-04, 2-CO-4F-01	
<b>Incarcerated Offender Access</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	<b>Public Access</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> <b>Attachments</b> Yes <input checked="" type="checkbox"/> #2 No <input type="checkbox"/>
<b>Office of Primary Responsibility</b> Corrections Operations Administrator	

## I. PURPOSE

This operating procedure establishes guidelines for all Department of Corrections units to perform alcohol and other drug testing on incarcerated offenders and offenders under community supervision and for imposition of appropriate sanctions and treatment interventions for those offenders who test positive for illicit substances or have documented drug and alcohol addiction problems.

## II. COMPLIANCE

This operating procedure applies to all units operated by the Department of Corrections (DOC). Practices and procedures shall comply with applicable State and Federal laws and regulations, Board of Corrections policies and regulations, ACA standards, PREA standards, and DOC directives and operating procedures.

## III. DEFINITIONS

**Alcohol** - The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols including methyl and isopropyl alcohol

**Breathalyzer** - A device that tests exhaled breath to measure the amount of alcohol in the body

**Chain of Custody** - The ability to guarantee that the identity and integrity of a specimen is correctly matched to the person who provided the specimen, from the point of collection through the reporting of test results, including but not limited to collection, handling, storage, transportation, and testing of the specimen and dissemination of test results

**Collecting Officer** - Any Officer participating in the collection of a specimen as documented on the chain of custody form

**Community Corrections Alternative Program (CCAP)** - A residential facility operated by the Department of Corrections to provide evidence-based programming in accordance with COV §53.1-67.7 and COV §53.1-67.8

**Community Corrections Facility** - A residential facility operated by the Department of Corrections to provide Community Corrections Alternative Programs

**Drug** - A chemical or substance, such as a narcotic or hallucinogen that affects the central nervous system, and can cause changes in behavior and possibly addiction

**Drug Test** - A single test or panel of tests used to identify the presence of drugs, or their metabolites, in human urine or saliva

**Drug Testing Contract Administrator** - The person appointed by the executive staff to be DOC drug testing coordinator and oversee contracts for drug testing

**Follow-up Random Testing** - Offender drug testing after the initial/full test focused on the offender's drug of choice, not to exceed three drugs per test

**Gas Chromatograph/Mass Spectrophotometer (GC/MS), Liquid Chromatograph/Mass Spectrophotometer (LC/MS)** - Drug testing methods that separate the drug or drug metabolite from the

specimen for examination on the molecular level to reveal a pattern that is unique to the particular drug in question to the exclusion of any other substance

**Hand Held Testing Device** - A portable drug testing device, such as a test slide, requiring no calibration or formal instrumentation

**Initial/Full Test** - A multiple drug test for at least three drugs

**Intersex** - A person whose sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female; intersex medical conditions are sometimes referred to as disorders of sex development.

**Negative Result** - A test result indicating that a drug or metabolite was not detected at or above the cut-off level

**Offender** - An inmate, probationer, parolee or post release supervisee or other person placed under the supervision (conditional release) or investigation of the Department of Corrections

**Organizational Unit Head** - The person occupying the highest position in a DOC unit, such as a correctional facility, regional office, probation and parole office, Virginia Correctional Enterprises (VCE), Academy for Staff Development, Corrections Construction Unit, Agribusiness Unit, and individual headquarters unit (i.e. Human Resources, Offender Management, Internal Audit)

**Positive Result** - A test result indicating that a drug or metabolite was detected at or above the cut-off level

**Random Testing** - A process of selecting individual offenders for testing that reduces predictability; provides an equal probability that any offender from a group will be selected; and does not allow staff the discretion to waive the testing of any offender selected under the process

**Repeat Test** - A second test, utilizing the same testing methodology that detected a positive result from an initial specimen

**Specimen** - The amount of urine taken from an offender sufficient to perform a drug test

**Staff** - A Department of Corrections employee or contracted employee who is authorized to perform alcohol and other drug testing on an offender

**Testing Coordinator** - The staff person designated by the Unit Head to coordinate and oversee alcohol and other drug testing for the organizational unit

**Transgender** - A person whose gender identity (*i.e.*, internal sense of feeling male or female) is different from the person's assigned sex at birth

**Universal Precautions** - An approach to infection control in which all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens

**Voluntary Admission** - An offender's self-declaration to the use of drugs prior to drug or alcohol testing or confirmation

#### IV. PROCEDURE

##### A. Substance Use Disorders

1. This operating procedure provides for substance abuse programs, to include monitoring and drug testing, for offenders with drug and alcohol addiction problems. (4-4437)
2. Offenders with substance use disorders are identified early through a standardized battery assessment and are provided with information, education, or treatment. This battery shall be documented and include, at a minimum, the following: (4-ACRS-5A-08)
  - a. Screening
  - b. Clinical assessment and reassessment
  - c. Referrals
  - d. Monitoring and drug testing
3. Each DOC facility and P&P Office operates a urine surveillance program, this operating procedure

provides instructions for: (4-ACRS-5A-09; 4-APPFS-2D-04)

- a. The collection, processing, and disposing of samples
  - b. The interpretation of results
  - c. The response to violations
  - d. Chain-of-custody and preservation-of-evidence procedures
  - e. Staff observations for transgender and intersex offenders
4. The DOC provides guidance and resources to establish and maintain special services and programs for offenders with specific types of problems such as substance use disorders. (2-CO-4B-04)

B. Assessment (4-4377)

1. Each offender entering a DOC facility or beginning supervision in a P&P District will have a COMPAS assessment for substance abuse risk and needs. (See Operating Procedure 810.1, *Offender Reception and Classification*, and Operating Procedure 920.1, *Community Case Opening, Supervision, and Transfer*.)
2. The COMPAS assessment should guide the development of facility *Re-entry Case Plans* and community *Case Plans* relating to substance abuse risk and treatment needs.
3. When indicated by the assessment, offenders in facilities should undergo clinical assessment by a multidisciplinary clinical team that includes medical, mental health, and substance abuse professionals as indicated.
  - a. The clinical assessment should guide the development of an individual substance abuse treatment plan to be incorporated into the offender's *Re-entry Case Plan*.
  - b. The *Re-entry Plan* should include appropriate referrals to treatment resources such as Therapeutic Community and prerelease relapse-prevention education, including risk management.
  - c. The offender will be involved in developing after care discharge plans as indicated.
4. Within requirements listed below, an individual offender's frequency of substance abuse testing and the substances tested should be based on the risk/needs assessment and the individual offender's substance abuse history.

C. Method of Testing

1. The following are the only methods of testing allowed:
  - a. The Virginia Department of General Services, Division of Consolidated Laboratory Services (DCLS) Memorandum of Agreement; substances available for testing:
    - i. Amphetamines
    - ii. Barbiturates
    - iii. Benzodiazepine
    - iv. Buprenorphine (Suboxone)
    - v. Cocaine Metabolites
    - vi. Cannabinoids
    - vii. ETG Alcohol
    - viii. LSD
    - ix. Methadone
    - x. Opiates
    - xi. Oxycodone
    - xii. Phencyclidine
    - xiii. Validity Testing (Creatinine/Specific Gravity)
  - b. Virginia Correctional Enterprises (VCE), hand held testing devices; substances available for testing:
    - i. Acetylmorphine (6am-Heroin)

- ii. Amphetamines
  - iii. Bath Salts
  - iv. Barbiturates
  - v. Benzodiazepine
  - vi. Buprenorphine (Suboxone)
  - vii. Cocaine Metabolites
  - viii. Cannabinoids
  - ix. Cotinine (Nicotine metabolites)
  - x. Ecstasy
  - xi. ETG Alcohol
  - xii. Fentanyl
  - xiii. K-2/K-3 Spice (Synthetic Marijuana)
  - xiv. Methadone
  - xv. Methamphetamines
  - xvi. Opiates
  - xvii. Phencyclidine
  - xviii. Tramadol
  - xix. Zolpidem
  - xx. Validity Testing (Creatinine/Specific Gravity)
- c. Breathalyzer Test - Accuracy checks and calibrations must be completed in accordance with the manufacturer's instructions.
- d. The State Contract will control the level of sensitivity of the testing services and hand held devices provided by the vendor.
- e. Staff will strictly adhere to manufacturer's instructions for all testing devices. When applicable, staff will complete the manufacturer's on-line training for testing devices prior to use.
2. Use of Hand Held Testing Devices
- a. Community Corrections Units will only use a hand held testing device when drug testing results are required for the immediate arrest of an offender, when staff are in the field i.e. Courthouse, or when DCLS is unable to test for a particular substance.
  - b. Institutions are not authorized to use a hand held testing device except:
    - i. When staff observed the following symptoms: the odor of alcohol on the breath; erratic behavior; incoherent, staggering, or disoriented demeanor; fresh needle marks; slurred speech; glassy eyes; dilated pupils, etc.
    - ii. Oral fluid hand-held testing devices may be used for dialysis patients and when necessary for other medical conditions as determined by Health Services.
    - iii. Any positive test for drug use resulting from a hand held device will require a repeat test be conducted for confirmation.
    - iv. Positive drug tests resulting from a hand held device may be submitted to DCLS for screening and confirmation testing. When the drug test is submitted to DCLS, the original sample must be submitted for testing.
  - c. Breathalyzers shall be used to test an offender for alcohol.
  - d. Only staff trained in administering and reading the handheld testing devices will conduct the test and are required to document the test and the results of the test in VACORIS
  - e. Hand held testing devices may be used to test particular substances when DCLS is unable to test, for example: Tramadol; K-2/K-3 Spice.
  - f. Orders for hand held testing devices will be reviewed and approved through *eVA* by the Drug Testing Contract Administrator.

#### D. Voluntary Admission

1. Prior to testing, an offender may voluntarily admit to the use of alcohol or other drugs by signing the [Substance Abuse Voluntary Admission](#) 841\_F9.
  - a. Obtaining a signed *Substance Abuse Voluntary Admission* from the offender does not preclude the offender from being tested.
  - b. A signed *Substance Abuse Voluntary Admission* may be used in disciplinary or violation proceedings.
2. Institutional offenders who voluntarily admit to a drug use problem, prior to notification of a drug test, or who voluntarily admits that they are in possession of drugs, prior to notification of a search, may request assignment to an Intensive Drug Treatment Program.
  - a. The Intensive Drug Treatment Program for Security Level W, 1, & 2 male offenders will be offered at Indian Creek Correctional Center, Security Level 3 male offenders will be offered the program at Augusta Correctional Center; Substance Abuse Treatment for Security Level 4 and above male offenders will be offered at the offender's current institutional assignment, offenders will not be transferred for treatment
  - b. The Intensive Drug Treatment Program for Security Level W, 1 & 2 female offenders will be offered at Virginia Correctional Center for Women, Substance Abuse Treatment for Security Level 3 female offenders will be offered at Fluvanna Correctional Center for Women.
  - c. If the offender requests assignment to an Intensive Drug Treatment Program, the offender will be referred to their institutional counselor.
    - i. If the offender meets the *Institutional Assignment Criteria* for the receiving institution, the counselor will prepare the *Institutional Classification Authority Hearing Notification* in VACORIS in accordance with Operating Procedure 830.1, *Institution Classification Management* and notify the Institutional Classification Authority (ICA).
    - ii. To be eligible for assignment to the Intensive Drug Treatment Program at Indian Creek Correctional Center, Security Level W, 1, & 2 offenders must be within 20 years or less of their MPRD/GTRD in lieu of the 18 months minimum and 30 months maximum as provided on the *Institutional Assignment Criteria*.
  - d. The ICA will conduct the hearing upon notification from the offender's counselor and expedite the offender's transfer, when applicable, to the appropriate institution for participation in an Intensive Drug Treatment Program.
  - e. The offender's voluntary admission of drug use will be documented on the [Substance Abuse Voluntary Admission](#) 841\_F9.
    - i. Voluntary admission does not preclude the offender from being drug tested but the offender will not be subject to a disciplinary offense for a positive test for 30 days from completion of the [Substance Abuse Voluntary Admission](#) 841\_F9, if the offender has requested assignment to the Program.
    - ii. Offenders will be subject to a disciplinary offense for any positive drug test after the 30 days.
    - iii. Offenders are only eligible to voluntarily admit to drug use and request assignment to the Intensive Drug Treatment Program once during their incarceration.
  - f. Offenders who voluntarily admit to drug possession shall be required to surrender the drugs to investigative staff.
    - i. The offender will not be subject to a disciplinary offense for drug possession if the offender has requested assignment to the Program.
    - ii. Offenders will be subject to a disciplinary offense for any drugs found in their possession after the initial surrender when they requested assignment to the Intensive Drug Treatment Program.
    - iii. Offenders are only eligible to voluntarily admit to drug possession and request assignment to the Intensive Drug Treatment Program once during their incarceration.
  - g. Upon assignment to a Program, the offender shall be required to participate and complete the program.

- i. Offenders who refuse to participate or are removed due to disruptive, non-participatory, or non-compliant behavior will be charged with Offense Code 119e “Refusal to participate in or removal from a residential cognitive community program”.
  - ii. Offenders found guilty of Offense Code 119e shall receive a formal hearing by the ICA to be reduced to good time Class Level IV effective the date the charge was written (see Operating Procedure 830.3, *Good Time Awards*). A #7 override should be used regardless of the offenders’ Class Level score. This override will flag the offenders’ file so that they are not allowed to earn good time until completing the specified program.
3. For any documented overdose, positive drug test, or conviction of drug possession within the last 30 calendar days, the counselor will offer Security Level W - 3 male offenders and Security Level W - 2 female offenders the opportunity to request assignment to an Intensive Drug Treatment Program.
  - a. Security Level 4 and above male offenders and Security Level 3 female offenders will be offered Substance Abuse Treatment at their current institutional assignment, offenders will not be transferred for treatment.
  - b. If the offender requests assignment to the Program, the offender’s request will be processed in accordance with this operating procedure.
  - c. If the offender refuses assignment to the Program, the offender’s refusal will be documented as a *Facility Note* in VACORIS.
  - d. Any offender who completes the Drug Program and does not have a positive drug test for a period of 1 year, will have their associated disciplinary offense expunged.

#### E. Collection Supplies

1. When testing through DCLS, collection cups, plastic transport bags, and security seals will be replenished by DCLS when transport coolers are returned to the site.
  - a. Specimen Collection Kits will be replenished when the DCLS Courier Service returns the Specimen Transport Containers to the unit.
  - b. For sub-offices, the replenished specimen collection kits are delivered to your main P&P office.
  - c. For additional specimen collection kits, contact DCLS directly at (804) 648-4480 ext. 104.
  - d. For additional *Chain of Custody* forms, contact the Drug Testing Contract Administrator
2. For hand held testing devices, the site must purchase specimen collection cups directly from Virginia Correctional Enterprises VCE. No substitutions are permitted.

#### F. Specimen Collection Procedure

1. Offenders will provide a urine specimen under the direction of a same sex staff member.
2. The specimen collector will:
  - a. When testing through DCLS, enter an electronic order in the *Drug Testing Module* in VACORIS to generate the *DCLS Chain of Custody (COC)* (see Attachment 1 for sample). The COC must be printed on the label paper obtained through Virginia Correctional Enterprise (VCE). No alteration/substitution of this form is allowed.
  - b. When a hand held testing device is used for immediate test results, the use of the *Chain of Custody*, bar code label, and security seal are not required.
  - c. Before a specimen is obtained for DCLS testing, label the collection cup with the offender’s name and number using the VACORIS generated bar code label.
  - d. The collecting Officer must wear personal protective equipment to comply with Universal Precautions (see Operating Procedure 740.1, *Infectious Disease Control*) regarding occupational exposure to blood borne pathogens.
  - e. If the offender claims to be taking prescription medications that could cause a false positive test result, the collecting Officer should document the prescription medication(s) on the *DCLS Chain of Custody* (see Attachment 1 for sample).

- f. When collecting a urine specimen, ensure that the offender is free from observation by non-involved staff or offenders when providing the specimen. A same sex staff member shall personally observe the urine collection from a side or frontal view to reduce the possibility of substitution, dilution or adulteration of the urine.
- i. Offenders under community supervision, who report that they are transgender or intersex during the case opening or at any time while under supervision, will be observed by staff of the same sex as the offender's self-identified gender indicated on the approved [P&P Urine Test Observation Accommodation Request](#) 841\_F21 during urine screens.
  - (a) Any offender that identifies as a transgender should be asked to complete the *Request* at the time of case opening (*Initial Interview*).
  - (b) Offenders should be informed they may complete or revise the *Request* as needed throughout their supervision during any personal contact with their supervising P&P Officer.
  - (c) A completed [Case Opening Substance Abuse Screening Acknowledgement](#) 920\_F22 should be completed and be filed in the offender's case file.
  - (d) Completed forms should be submitted to Unit Head for review, approval and be filed in the offender's case file.
- ii. Incarcerated offenders, who indicate they are transgender or intersex during the *Classification Assessment* or at any time during their incarceration, will be observed by correctional staff of the sex indicated and approved on the [Strip Search Deviation Request](#) 810\_F2 in accordance with Operating Procedure 445.1 *Employee, Visitor, and Offender Searches*.
- g. If the offender is initially unable to provide a specimen, the offender will be given sixteen ounces of water and instructed to stay in an area where the offender has no access to additional fluids for up to two hours to produce an adequate specimen volume.
- h. In cases of a documented health condition, the offender will be given sixteen ounces of water and two hours to produce a specimen.
  - i. The timeframe may be extended based on the recommendation of the appropriate health services staff.
  - ii. Staff should ensure that the offender does not have possession of substances to adulterate, dilute, or produce a false specimen and does not have access to additional fluids until the offender is able to provide an adequate specimen.
  - iii. If the offender is unable to provide a urine sample, oral swab testing may be used. The Drug Testing Contract Administrator must be notified within one working day of each offender tested by oral swab.
  - iv. If the offender suffers from paruresis or a medical condition such that they are not able to provide a urine sample if provided water and extra time, they must have an appropriate diagnosis. Paruresis must be diagnosed by a Mental Health Professional. Medical conditions must be diagnosed by a medical provider.
    - (a) In facilities, the QMHP or Health Authority should document in a VACORIS *Facility Note* and advise staff responsible for urine collection of the offender's inability to produce a urine sample with a projected date when the offender may again be able to provide a sample. The diagnosis shall be documented in the Health Record but shall not be listed in the VACORIS *Facility Note*.
    - (b) In P&P Offices, the P&P Officer shall document in a VACORIS *Case Note* the offender's inability to produce a urine sample with a projected date when the offender may again be able to provide a sample. No specific diagnosis should be entered in VACORIS *Case Notes* or the offender's *Case File*.
- i. Once a specimen is produced, the offender will be instructed to dry the specimen cup prior to handing it to the collecting Officer. After placing the lid securely on the collection cup, the collecting Officer will secure the security seal across the lid of the cup. The collecting Officer must ensure that the security seal tape does not obscure the bar code label identifying the specimen.

- j. When testing through DCLS, the collecting Officer shall seal the specimen and the *DCLS Chain of Custody* in the plastic transport bag provided by the lab.

#### G. Storage of Urine Specimens

1. When testing through DCLS, the specimen can remain at room temperature or can be refrigerated up to a maximum of seven calendar days. For specimens stored in either manner, DCLS must receive the specimen in time to test the specimen by the seventh day after collection. If the unit is unable to get the specimen to the lab within this timeframe, the specimen must be placed in a secured freezer.
  - a. When freezing a specimen, the staff member collecting the specimen must write the letter "F" and the date that the specimen was frozen directly on the *DCLS Chain of Custody* (see Attachment 2 for sample).
  - b. If this is not correctly documented on the COC, DCLS will reject the specimen.
2. Failure to store a specimen properly will not cause a positive test result.
3. Access to specimen storage areas will be restricted to only designated staff authorized to handle the urine specimens.

#### H. DCLS Courier Service

1. Each unit will be provided designated date(s) for DCLS Courier Service pick up.
2. Prior to DCLS pick up the unit testing coordinator should log into the [ACE Client Portal](#), enter and submit the required information to include the barcode numbers for the associated drug samples.
3. The unit testing coordinator shall be responsible for removal of urine specimens from storage, placement into the DCLS Specimen Transport Containers, securing the containers, and securing them in the DCLS Courier Service pick-up box/location.
4. Placing the specimens in the DCLS Courier Service pick-up box/location should be timed to minimize the time out of storage before pick-up by the courier.
5. Transport containers must be packed and ready for pick up when the courier arrives. The courier is not required to wait for staff to pack the transport coolers.
6. The DCLS Courier Service will return empty Specimen Transport Containers on the next scheduled pick-up day.
7. Questions regarding Transport Specimen Containers or to request additional coolers, contact DCLS directly at (804) 648-4480 ext. 104.

#### I. Reporting Test Results

1. The person conducting a test with a hand held device will be responsible for documenting the test by entering testing information and results into VACORIS.
2. The person responsible for collecting urine specimens shall document in VACORIS and notify appropriate staff when any Community Corrections offender fails to appear as scheduled for testing.
3. DCLS will electronically send the test results to DOC that will automatically load into the Drug Testing Module in VACORIS. Staff is encouraged to check the Drug Testing Module for results daily and take appropriate action based on the results.
4. The person responsible for collection shall record in VACORIS when the offender is a no show, refuses to submit, or is unable to provide a specimen.

#### J. Confirmation Testing

1. Gas Chromatograph/Mass Spectrophotometer (GC/MS) and Liquid Chromatograph/Mass Spectrophotometer (LC/MS) laboratory confirmation will be strictly limited to criminal prosecution or probation/parole/post-release revocation proceedings as required by the Court and Parole Board.
2. DCLS will conduct confirmation testing on the original specimen stored in their laboratory.



3. The Organizational Unit Head or designee must order GC/MS or LC/MS confirmation in VACORIS. The offender may not request confirmation testing.
4. Confirmation testing for any other reason must be approved by the Drug Testing Contract Administrator.

## V. INSTITUTIONS

### A. Frequency of Testing

1. Each Facility Unit Head should conduct testing at their discretion as a security tool; at a minimum all offenders will be drug tested as follows:
  - a. Upon intake for newly received offenders into the DOC from a jail or other non DOC facility; newly received offenders will not be subject to a disciplinary offense for a positive test. The jail or other non DOC facility should be notified.
  - b. Upon an offender's arrival at a DOC facility from another DOC facility; when an offender tests positive for drug use; the sending facility must be notified so that an investigation can be conducted.
  - c. At least 10 days prior to discharge from a DOC facility to Community Supervision; when an offender tests positive for drug use, the offender's P&P Officer will be notified and a facility investigation should be conducted.
  - d. When there is reasonable belief that the offender may be under the influence of illicit drugs or alcohol in accordance with this operating procedure.
  - e. In accordance with the *Random Testing Requirements* of this operating procedure
2. All offenders should be tested when there is reasonable belief:
  - a. That the offender may be under the influence of illicit drugs, tobacco, or alcohol - Examples of symptoms include, but are not limited to, the odor of tobacco or alcohol on the breath; erratic behavior; incoherent, staggering, or disoriented demeanor; fresh needle marks; slurred speech; glassy eyes; dilated pupils; or previous history of drug/alcohol abuse.
  - b. Due to other factors that cause suspicion, such as an illicit drug, alcohol, tobacco, or related contraband found on, about, or around an offender or the offender's personal property.
  - c. Due to credible information that the offender may be using drugs, tobacco, or alcohol.

### B. Random Testing will be conducted as follows:

1. Random Testing Requirements for Facility Populations:
  - a. Overall population - 5% per month - VACORIS automatically schedules a random test for each facility on the 28<sup>th</sup> of each month. The facility may collect specimens on that day or reschedule to any date in that same month.
  - b. Workers outside the facility perimeter - 10% per month
  - c. Residential substance abuse programs such as Therapeutic Communities - 5% per week
2. Increased Testing Levels (4-4437)
  - a. The Facility Unit Head or designee should increase testing levels as needed to maintain the integrity of a substance abuse program and the substance free status of participants. The Program Director should confer with the Unit Head and Unit Testing Coordinator to ensure program related testing is conducted.
  - b. Testing may occur as a part of non-residential substance abuse programs at the discretion of the Facility Unit Head or designee.
  - c. Offenders who receive positive test results for alcohol or are found to be manufacturing alcohol will be tested minimally once per week, on random days, for at least a ninety day period to ensure abstinence.
  - d. Any offender convicted of Disciplinary Offense Code 122a/b/c/d/e/f or for Offense Codes 198

a/b/c-122 a/b/c/d/e/f shall be tested at least twice per month for one year after the most recent conviction.

3. Each Facility Unit Head should regularly review testing results to adjust frequency and types of drugs tested if needed.

#### C. Staff Approved To Conduct Drug/Alcohol Testing

1. The staff person designated by the Facility Unit Head as the Unit Testing Coordinator will ensure testing levels are maintained and random test measures are used where required.
2. The Unit Testing Coordinator will ensure that all staff involved in the collecting and testing process is properly trained in specimen collection and testing procedures.

#### D. Offender Searches

1. To avoid the possibility of substitution, dilution, or adulteration of the specimen, all offenders shall be frisk searched immediately prior to producing a specimen.
2. At any point during the search or observation of the offender or if other circumstances of the collection process cause reasonable belief that the offender is trying to invalidate or circumvent testing procedures, the Shift Commander or Unit Head will be contacted for authorization to conduct a strip search in accordance with Operating Procedure 445.1, *Employee, Visitor, and Offender Searches*.

E. Specimens should be collected in accordance with the *Specimen Collection Procedure* section of this operating procedure.

F. Upon receipt of the specimen, the collecting Officer will ensure that the *Collector Certification and Donor Certification and Consent* sections on the *DCLS Chain of Custody* are signed.

1. If the offender refuses to sign the *Donor Certification and Consent* section, the collecting Officer will document the offender's refusal by checking the box provided.
2. Offenders shall not be provided a copy of the *DCLS Chain of Custody*.

G. When receiving the specimen from the offender, the collecting Officer shall secure the specimen and the *DCLS Chain of Custody* in accordance with the *Storage of Urine Specimen* section of this operating procedure.

1. The Facility Unit Head or designee will identify the combination of drugs to be tested by the facility.
2. A maximum of three drugs (any combination of drugs previously listed) can be tested at one time. More than three drugs may be tested on a case-by-case basis as authorized by the Facility Unit Head or Administrative Duty Officer (ADO) when warranted for reasonable suspicion of drug use.
3. The collecting Officer will indicate the particular substance(s) to be tested in the Drug Testing Module in VACORIS.
4. When it is suspected that the specimen has been altered, the specimen can be tested for adulteration or dilution.

#### H. Medication Verification by Collecting Officer

1. After specimen collection, the collecting Officer will refer to the medication section of the *DCLS Chain of Custody*.
2. If the offender claims to be taking prescription medications that could cause a false positive, the collecting Officer will contact the Medical Department for verification of prescription medications that the offender is taking, and will determine if the offender should be charged.
3. The manufacturer of the drug testing device/method is the authority for determining if a particular medication could cause a false positive. Contact the Drug Testing Contract Administrator for assistance.

#### I. Urine Specimen Rejection

1. When it is suspected that the specimen has been altered, but does not test abnormal for adulteration or dilution, the specimen should be rejected and the offender is required to provide a second specimen.
2. If during the collection of the specimen the collection Officer witnesses the offender intentionally alter or tamper with the specimen, the offender should be charged with Offense Code 122f, *Adulteration, dilution, or substitution of specimen for the purpose of compromising the results of the drug test* (see Operating Procedure 861.1, *Offender Discipline, Institutions*).
3. The offender should then provide a second specimen for drug testing.
4. The rejected specimen should be disposed of in a sanitary sewer system (toilet or urinal) and the container disposed of in an appropriate trash receptacle.

#### J. Test Results

1. Positive Test Results:
  - a. Results will be recorded in VACORIS with notification to the Unit Testing Coordinator or designated point of contact.
  - b. If the Medical Department or the manufacturer of the drug testing device does not support the offender's claim that his or her medication(s) caused a false positive, the offender will be charged with Offense Code 122c, *Under the Influence of Drugs*.
  - c. Abnormal validity test results (Creatinine/Specific Gravity):
    - i. Offenders testing positive for dilution due to ingesting excessive liquids shall be given one warning without a disciplinary charge and retested as soon as practical but at least three hours after the initial test and warning
    - ii. Offenders testing positive for dilution on any subsequent test after receiving one warning, will be charged with Offense Code 122f, *Adulteration, dilution, or substitution of specimen for the purpose of compromising the results of the drug test*.
    - iii. Offenders observed or determined to have adulterated, diluted (other than by ingesting excessive liquids), or substituted a specimen for the purpose of compromising the results of the drug test should be charged with Offense Code 122f on the first offense with no warning issued.
2. Positive Test Results for THC or Nicotine - Because THC and Nicotine may, in some cases of high use, stay in the body up to 30 days, offenders testing positive for THC or Nicotine should receive an initial charge, but not be recharged based on a positive test for 30 days from the date of the initial positive test. During the 30-day period, these offenders should receive increased frequency testing and be charged if use of other substances is found.
3. In general, the staff person collecting the specimen should be the Reporting Officer on the *Disciplinary Offense Report* and is considered to have discovered the offense when they become aware of the test results and, if applicable, have received guidance on whether medication(s) may have caused a false positive
4. Negative test results will be recorded in VACORIS
5. Under the Influence of Jimson Weed - When the facility has established that the offender has ingested Jimson Weed, the offender should be charged with Offense Code 122c, *Under the Influence of Drugs*, without a positive drug screen result. When Jimson Weed is found in the offender's possession, the offender should be charged with Offense Code 122a, *Possession of unauthorized or un-prescribed Drugs*.

#### K. Refusal to Provide a Specimen

1. If an offender refuses to submit to alcohol testing, he or she should be charged with Offense Code 241a, *Refusal to Submit to Breathalyzer/Alcohol Testing*.

2. If ordered to do so, offenders must provide a urine specimen. Any offender unable or unwilling to produce a useful specimen will be instructed that failure to produce a specimen within two hours will result in disciplinary action.
  3. When an offender refuses to submit to testing, he or she will be charged with Offense Code 122d, *Refusal to submit to drug testing*. The offender will NOT be given sixteen ounces of water and two hours to produce a specimen.
  4. Offenders unable to produce a specimen after two hours will be charged with Offense Code 122d, *Refusal to submit to drug testing*.
  5. The staff member witnessing the offender's inability or refusal to submit a urine specimen should act as the Reporting Officer for the Disciplinary Offense Report.
  6. The facility should develop methods to notify the appropriate staff for sanctions or program referrals.
- L. Case Management and Special Program Issues (2-CO-4F-01)
1. Notification of Counselor
    - a. Any time an offender receives a positive drug test, the offender's counselor should be notified and the *Reentry Case Plan* should be adjusted if needed to refer the offender to programming that addresses addiction, dependency, or criminal thinking issues.
    - b. If the offender completes the drug program and does not have a positive drug test for a period of 1 year, the disciplinary offense will be expunged
  2. Substance Abuse Therapeutic Community (TC) Programs
    - a. Substance Abuse TC programs are intensive residential programs designed to address substance abuse needs of offenders. TC programs are operated at facilities designated by the Chief of Corrections Operations. (See Operating Procedure 830.5, *Transfers, Institution Reassignments*.)
    - b. Criteria for admission to a TC are:
      - i. A maladaptive pattern of substance use noted by one or more of the following:
        - (a) Use interferes with responsibilities
        - (b) Use interferes with safety
        - (c) Use causes legal problems
        - (d) Use causes social and interpersonal problems
      - ii. Offenders must have 18-20 months remaining to serve. Exceptions will be made on a case-by-case basis.
      - iii. Psychological classification as is appropriate to the specific institution or unit
      - iv. Security classification appropriate to each specific institution or unit
      - v. All offenders must meet the criteria of the institution hosting the therapeutic community.
      - vi. Courts may sentence eligible offenders directly to a TC program
    - c. Each TC program has a written treatment philosophy within the context of the total corrections system, as well as goals and measurable objectives. These documents are reviewed at least annually and updated, as needed. (4-4438)
    - d. Each TC program provides for an appropriate range of primary treatment services for alcohol and other drug abusing offenders that include, at a minimum, the following: (4-4439)
      - i. Offender diagnosis
      - ii. Identified problem areas
      - iii. Individual treatment objectives
      - iv. Treatment goals
      - v. Counseling needs
      - vi. Drug education plan
      - vii. Relapse prevention and management (4-4377)
      - viii. Culturally sensitive treatment objectives, as appropriate
      - ix. The provision of self-help groups as an adjunct to treatment

- x. Prerelease and transitional service needs (4-4377)
- xi. Coordination efforts with community supervision and treatment staff during the prerelease phase to ensure a continuum of supervision and treatment.
- e. Each facility with a TC program uses a coordinated staff approach to deliver services as documented in treatment planning conferences and individual treatment files. (4-4440).
- f. Each TC program provides incentives for targeted treatment programs to increase and maintain the offender's motivation for treatment. (4-4441)
- g. Removal from for Substance Use:
  - i. Offenders who are found to be using illicit substances while in a TC program should be removed from the program for a period of at least thirty days, during which they will receive frequent drug testing.
  - ii. The offender will not be re-admitted to the TC program for at least the thirty day period, after which readmission will be based on staff's determination of the offender's commitment to change.
  - iii. Upon removal from the TC program, the offender will be reduced to Good Time Award Class Level IV. This level will not be raised until the offender re-enters and successfully participates in a TC program. The Good Time Award Class Level will not be raised if the offender is transferred to another facility and the offender does not re-enter and successfully participate in a TC program. (see Operating Procedure 830.3, *Good Time Awards*)
- 3. Conviction of Drug Offenses in Substance Abuse (SA) and Sex Offender Residential Treatment (SORT) Programs:
  - a. For offenders in these programs, appropriate facility sanctions should be imposed for the first drug conviction in accordance with this operating procedure to include reduction to Good Time Award Class Level IV.
  - b. For a second conviction, an increase in security level will be required, unless other recommendations or sanctions are deemed appropriate by the offender's Treatment Team.

## VI. COMMUNITY CORRECTIONS

### A. Community Supervision

1. An initial test will be conducted at case opening to Community supervision; initial testing may exceed the maximum of three drugs tested at one time on a case by case basis. (see Operating Procedure 920.1, *Community Case Opening, Supervision, and Transfer*).
2. The basis for frequency of additional testing shall be determined by suspected drug use.
  - a. Instances where offenders may be required to submit to AOD testing will include, but are not limited to the following:
    - i. During the pre-sentence investigation by the Court
    - ii. When imposed as a special condition of probation, parole or post-release supervision
    - iii. When staff observation of an offender's physical symptoms cause suspicion of illicit drug or alcohol abuse
    - iv. When an offender is arrested for a new offense that may be drug related
    - v. When an offender admits to using illicit drugs or alcohol, or to being under the influence of illicit drugs or alcohol
    - vi. When illicit drugs have been discovered in an area controlled, occupied, or inhabited by an offender
    - vii. When an offender is undergoing outpatient substance abuse treatment in a program when drug testing is not administered
    - viii. When an offender has a history of substance abuse
  - b. After the initial/full test, follow-up random testing should focus on the identified drug of abuse
    - i. A maximum of three drugs (any combination of drugs at the discretion of the P&P Officer)

should be tested at one time. More than three drugs may be tested on a case-by-case basis as authorized by the Unit Head when warranted for reasonable suspicion of drug use.

- ii. In addition to the initial/full test, multiple drug testing should be used only if the offender is suspected of poly-substance use or in the case of a change of their drug of choice.

B. Offenders who are participating in a Community Corrections Alternative Program shall receive an initial/full test upon entry and as follows:

1. Participants will have a follow-up random test each month thereafter until their termination from the program.
2. At least 10% of all participants assigned to Community Employment will have an additional test monthly.
3. All participants will be tested at least 10 days prior to graduation from a CCAP. When an offender tests positive for drug use, the offender's P&P Officer and the referring P&P District must be notified.

C. Staff Approved to Conduct Testing

1. The Unit Head will determine which staff positions are responsible for AOD testing.
2. The Unit Head will ensure that all staff involved in the collecting process is properly trained in specimen collection and testing procedures.
3. To ensure effectiveness, the collection of all specimens should be observed by staff.

D. Offender Refusal or Inability to Produce Specimen

1. If the offender is unable to provide a specimen, they should be given 16 ounces of water and up to 2 hours to provide a specimen.
2. Verified medical conditions resulting in the offender's inability to produce a urine specimen will be handled on a case by case basis.
3. The P&P Officer will impose appropriate sanctions for offenders determined to be or attempting to adulterate, dilute, or substitute their specimen to avoid detection.
4. If a CCAP offender refuses to provide a specimen, appropriate sanctions will be imposed in accordance with Operating Procedure 940.4, *Community Corrections Alternative Program*.

## VII. REFERENCES

Operating Procedure 445.1, *Employee, Visitor, and Offender Searches*

Operating Procedure 740.1, *Infectious Disease Control*

Operating Procedure 810.1, *Offender Reception and Classification*

Operating Procedure 830.1, *Institution Classification Management*

Operating Procedure 830.3, *Good Time Awards*

Operating Procedure 830.5, *Transfers, Institution Reassignments*

Operating Procedure 861.1, *Offender Discipline, Institutions*

Operating Procedure 920.1, *Community Case Opening, Supervision, and Transfer*

Operating Procedure 940.4, *Community Corrections Alternative Program*

## VIII. FORM CITATIONS

[Strip Search Deviation Request](#) 810\_F2

[Substance Abuse Voluntary Admission](#) 841\_F9

[P&P Urine Test Observation Accommodation Request](#) 841\_F21

[Case Opening Substance Abuse Screening Acknowledgement](#) 920\_F22

IX. REVIEW DATE

The office of primary responsibility shall review this operating procedure annually and re-write it no later than three years after the effective date.

*Signature Copy on File*

*6/5/18*

A. David Robinson, Chief of Corrections Operations

Date