



**16<sup>th</sup> Annual FTA Drug and Alcohol Program  
National Conference**

March 14-16, 2023

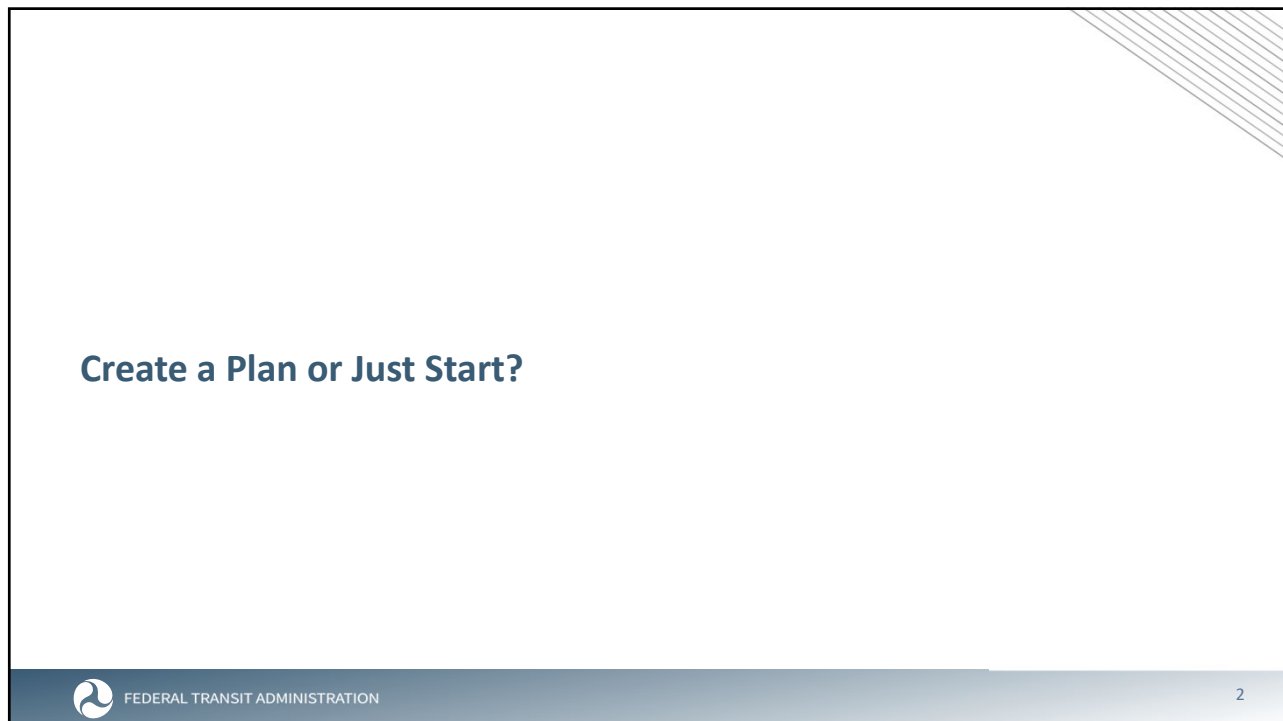
**Common Pitfalls and  
Professional Tips**

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FEDERAL TRANSIT ADMINISTRATION

  
U.S. Department of Transportation  
Federal Transit Administration

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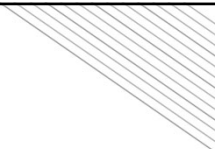


**Create a Plan or Just Start?**


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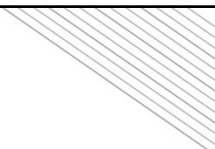
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- **Pitfall:**
  - A stationary gravity trap that relies on the concealment of a hole, generally placed within an expected travel route
  - A hidden or unsuspected danger or difficulty

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- Are there concealed hazards close by or underfoot in your program?
- Are there unsuspected difficulties? What are they?

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- Examining your program *closely and efficiently* can reveal the traps or hazards



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## A look at your program

- Who is in charge?
  - Multiple decision makers?
  - Active team?
  - Single administrator?
  - Vendor?



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## Outsourced Components

- Are the outsourced components of your program appropriate?
  - In house training, medical review, random selections, collections?
  - Partially or fully outsourced services by vendors?

Are the sources adding to your overall program (accuracy, time, etc.)?

Are you better off with the components where they are?



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## Who is in charge of the components?

- If a component is outsourced, who has control over it?
- Do you have adequate program control of vendors?

**Pitfall:** If the paperwork is complete and on-time, we assume quality



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## Mechanisms of Transmission

- Do the documents and information you receive meet your expectations?
- Do they reach you in a way that is conducive to efficiency, security, and control?

**Pitfall:** Old habits aren't always worth preserving. New innovations aren't always worth adopting. Fax? Text? Portals?



## Your Drug and Alcohol Policy

- When was the last revision?
- Consider annual check-up right after MIS submission (March 15)
- Send to FTA for review

**Pitfall:** Fear of board approval and printing logistics should not prevent policy revisions



## Testing Categories



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## Pre-Employment Testing

- When is it required in your specific program?

- Pre-hire?

- Mid-training?

Could the test be moved to earlier or later in the on-boarding process?

***Pitfall:*** Testing employees after leave but not meeting the criteria



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## Random Testing

- When is the earliest test you've conducted in the last 2 years?
- When is the latest test you've conducted in the last 2 years?
- How many people are involved in the notification process?
- What days or times each month have never had a random test?

**Pitfall:** Technically meeting the minimums but with no deterrence



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## Random Testing

- Keep a spreadsheet of your tests
- Chart them
- Do any covered employees feel that there are times or days when they won't be tested?

**Pitfall:** A vendor sends selections late and deadlines conflict



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## Post-Accident Testing

- Is the paperwork complete?
  - Signatures?
  - Clear narrative about the occurrence
  - Dates and times
  - Company personnel
  - Decision making

**Pitfall:** Not checking accident decision-making forms, not making corrections



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## Post-Accident

- Ask the supervisor to fill in details for incomplete paperwork as soon as possible
- Make sure the paperwork shows a complete process
  - Accident times
  - Decision and notification times
  - Transported employees or reasons for not testing



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## Return-to-Duty and Follow-Up

- Have files with process clearly shown:
  - Initial violation
  - SAP referral and evaluation
  - Treatment confirmation / second evaluation and plan
  - RTD test (D.O.)
  - Follow-up tests (D.O.)

**Pitfall:** Not documenting absences during follow-up testing period



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## Reasonable Suspicion

- Was the company official who made the determination trained?
- Does the paperwork clearly show what occurred and when?
  - Decision making process
  - Time limitations

**Pitfall:** Not clearly describing the physical signs and symptoms and the evaluation



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## The Collection Site



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## When was the last time you visited?

- A collection site is a business and the relationship should be mutually beneficial
  - If your demands exceed your testing volume, you may be at risk
  - For VERY small or rural employers, consider assisting with EBT procurement

***Pitfall:*** Too hands-on / too hands-off



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## Availability

- Is the collection site available when covered duties are performed?
- If restricted, negotiate occasional off-hours tests (word gets out)
- Have an agreement for post-accident and reasonable suspicion during off-hours

**Pitfall:** Lengthy public contracting process for vendor services and invoices



## Testing Forms and Process

- Make sure CCFs are clear, legible, accurate, and complete
- Call ahead for post-accident and reasonable suspicion tests
- Monitor wait-times and try to reduce delays. Offer expedience price

**Pitfall:** Long waits, repeated intake paperwork, and delayed Copy 4



## Working Relationship

- Make sure collection sites have multiple numbers and contacts
- Notify of vacations or leave, provide alternate

***Pitfall:*** The collection has outdated or limited contact information for DER



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## Medical Review Officer and the Process



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## The MRO Process

- Does the MRO contact you if they are unable to reach an employee?
- Does the MRO transmit clear results in a useful format?
- Are they results received in a reasonable amount of time?

***Pitfall:*** Unclear results or soft-notified positives



## Substance Abuse Professional



## Zero Tolerance or Second Chance

- Zero Tolerance: must give contact information for 2 SAPs
- 2<sup>nd</sup> Chance: must provide at least one SAP
- “SAP referral” means providing SAP contact information

**Pitfall:** Rural or remote areas with no DOT-qualified SAP using EAP



## Zero Tolerance or Second Chance

- Zero Tolerance: send SAP information at termination, also verbally refer to policy if listed there
- Second Chance: make sure SAP letters contain all Part 40 requirements

**Pitfall:** SAP letter is a template and contains errors



## Management Overall

- Communicate your program needs and what is required
- What elements of the program stick out as difficult?
  - Examine for opportunities to improve
  - Tech solutions: Integrated databases of schedules and payroll
  - Analog solutions: Post-it reminders for follow-up testing or pool removal



## Process Clarity

- Does your system work for you?
- Could an alternate fill in if needed?
- Can you locate what you need when you need it?



## Pitfalls and Professional Tips

- Some processes are regulatory and cannot be innovated away
- Pitfalls can become predictable, learn to avoid them
  - Consult with FTA
  - Consult with peers
  - Consult with your vendors (industry network)
  - State or regional associations, conferences, webinars



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## Pitfalls and Professional Tips

- Temporarily change involvement in different parts of your program to learn more, manage closely, or look for opportunities



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## Pitfalls and Professional Tips

- The program will change, have turnover, failures, successes
- Keep learning, stay current on regulatory issues, look for changes that will benefit your program
  - Oral fluids testing (future)
  - Expanded panel testing (opioid testing)



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**Thank you.**



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