

Allied Environmental Services, Inc. Drug Free Workplace Program

Policy Statement

Revised Date: **12/8/2017** Effective Date: **01/01/2018**

As part of our commitment to safeguard the well-being of our employees and to provide a safe and healthful working environment for everyone, Allied Environmental Services (Allied) has established a drug/alcohol free workplace Substance Abuse Policy.

It is the intent of Allied Environmental Services, Inc., to maintain a safe workplace free of the influence of alcohol, drugs or other mind-altering substances. Further, it is our intent to comply with the requirements of the Drug-Free Workplace Act of 1988, as well as, the special drug/alcohol testing rules promulgated by the United States Department of Transportation and its various divisions.

The ultimate goal of this program is to balance our respect for individual privacy with our need to keep a safe, productive, drug and alcohol free environment. We encourage those who abuse any substance to seek help in overcoming their problem.

While Allied understands that employees and applicants under a physician's care are required to use prescription drugs, abuse of prescribed medications will be dealt with in the same manner as the abuse of illegal substances.

According to the Occupational Safety & Health Administration (OSHA), of all drug and alcohol users, about 75% hold regular jobs, and in approximately 10% of the cases where employees are involved in deadly accidents at work, the deceased tested positive for drug or alcohol use.

Types of drug/alcohol testing required.

- Job applicant drug testing. Allied requires job applicants who are offered employment to submit to a post-offer drug test. A job applicant is a person who has applied for a position of employment with Allied and is offered a position contingent upon successfully passing a drug test. (See Attachment 1 for Program Acknowledgement). A refusal to submit to a drug test or a non-negative confirmed drug test may be used as a basis for rejecting a job applicant.
- All active employees shall sign and date Attachment 1 on the effective date of this program.
- **Random Drug Testing**. A random substance abuse testing process has been implemented by Allied as detailed below:
 - Random testing will be performed quarterly at a minimum.
 - ↔ Percentage of random tests to be performed is a management decision and can be increased or decreased each quarter.
 - Employees selected for random testing will be notified that they must report to a company designated collection and testing facility immediately.

- No Exceptions Failure to follow this directive shall be deemed a refusal to test by the employee and will be considered a non-negative test.
- Only actively working employees shall be entered into the random pool of participants.
- Random pool of participants includes staff and field employees.
 - The random pool of active employees (participants) shall be maintained by the Safety Manager.
- Random selection is performed using a double-blind process and will be witnessed by members of management.
- Observed sampling may be performed by medical professionals if requested by Allied Management.
- **Reasonable-suspicion drug testing**. Allied requires an employee, upon request, to submit to a reasonable-suspicion, observed drug/alcohol sample collection test. Reasonable-suspicion drug/alcohol testing is based on direct observation that an employee may be under the influence or has used drugs/alcohol in violation of the Substance Abuse Program. Reasonable suspicion may be drawn from specific objective and articulable facts and reasonable inferences drawn from those facts in light of experience. Refer to Attachment 3 for the checklist to be used. Among other things, such facts and inferences may be based upon:
 - Observable phenomena while at work, such as direct observation of drug use or of the physical symptoms or manifestations of being under the influence of a drug.
 - Abnormal conduct or erratic behavior while at work or a significant deterioration in work performance.
 - A report of drug use, provided by a reliable and credible source.
 - Evidence that an individual has tampered with a drug test during his or her employment with the current employer.
 - Information that an employee has caused, contributed to, or been involved in an accident while at work.
 - Evidence that an employee has used, possessed, sold, solicited, or transferred drugs while working or while on Allied's premises, Owner/Client property or while operating Allied's vehicles, machinery, or equipment.
- **Routine fitness-for-duty drug testing**. Allied requires an employee to submit to a drug test if the test is conducted as part of a routinely scheduled employee fitness-for-duty medical examination that is part of the established policy, or that is scheduled routinely for all members of an employment classification or group such as Asbestos, Hazwoper, Respiratory, DOT or other specific physical examination.
- Follow-up drug testing. If the employee in the course of employment enters a drug/alcohol rehabilitation program, Allied requires the employee to submit to a drug/alcohol test as a follow-up to the program and a certificate or letter of satisfactory completion of the program from the rehabilitation counsler/center to be <u>considered</u> for re-instatement. Allied has the option to require post-rehabilitation drug/alcohol testing. Normally, follow-up testing will be performed every quarter for 1 year. Advance notice of a follow-up testing date will not be given to the employee to be tested.

• On the Job Impairment. Impairment may be defined as an inability to complete job-related activities and consistently communicate or think rationally without error while performing duties.

Many aspects of the workplace today require alertness, and accurate and quick reflexes. An impairment to these qualities can cause serious accidents, and interfere with the accuracy and efficiency of work. Other ways that substance abuse can cause problems at work include:

- After-effects of substance use (hangover, withdrawal) affecting job performance
- Absenteeism, illness, and/or reduced productivity
- Preoccupation with obtaining and using substances while at work, interfering with attention and concentration
- Illegal activities at work including selling illicit drugs to other employees,
- Psychological or stress-related effects due to substance abuse by a family member, friend or co-worker that affects another person's job performance.

Category	Examples	Examples of General Effects
Alcohol	beer, wine, spirits	impaired judgement, slowed reflexes, impaired motor function, sleepiness or drowsiness,
		coma, overdose may be fatal
Cannabis	marijuana, hashish	distorted sense of time, impaired memory, impaired coordination
	sleeping medicines, sedatives, some	inattention, slowed reflexes, depression, impaired balance, drowsiness, coma, overdose
	tranquilizers	may be fatal
_	LSD (lysergic acid diethylamide), PCP	inattention, sensory illusions, hallucinations, disorientation, psychosis
	(phencyclidine), mescaline	
Inhalants	hydrocarbons, solvents, gasoline	intoxication similar to alcohol, dizziness, headache
Nicotine	cigarettes, chewing tobacco, snuff	initial stimulant, later depressant effects
	morphine, heroin, codeine, some prescription	loss of interest, "nodding", overdose may be fatal. If used by injection, the sharing of
	pain medications	needles may spread Hepatitis B, or C and HIV/AIDS.
Stimulants	cocaine, amphetamines	elevated mood, overactivity, tension/anxiety, rapid heartbeat, constriction of blood vessels

• On the Job impairment may not involve the use of illegal substances.

- Medical/Health Event
- Side effects or reactions to prescription or over the counter medications
- Abuse of prescribed medications or over the counter medications may also occur
- It is important to remember that any employee suffering impairment should be evaluated by a medical professional as soon as possible and to determine fitness for duty
- Immediate Actions Allied will take regarding an employee deemed impaired while on the job
 - The affected employee shall be removed from performing tasks and if practical, from the jobsite immediately.
 - Do not let the employee drive.
 - The employee shall not be allowed to work and shall be observed to ensure his and other's safety until a decision is made regarding a course of action to take regarding the employee.
 - If there is doubt of an employee's current state of health and consciousness due to his or her condition, call medical first responders immediately
 - Immediately notify the Operations/Branch Manager, HR Manager and/or the Safety Manager of the event.
 - When an employee demonstrates any type of impairment while on the job, supervisors must utilize the Drug/Alcohol Reasonable Suspicion Checklist (Attachment 3) to

document any indicators of impairment or drug/alcohol use regardless of medical intervention.

- Operations /Branch Manager, HR Manager or Safety Director shall report to the jobsite to interview supervisor and employee and if necessary, call first responders or bring the employee to attesting/collection facility if it is determined that it is safe to do so.
 - The Supervisor may drive an employee to the Corporate Office.
 - Employee shall not be allowed to drive under any circumstances
- Arrangements shall be made to escort the employee to a Drug and Alcohol Testing and Collection Facility, or if transported to a medical facility, have them perform drug testing.
 - A urine or blood sample as appropriate shall be obtained.
 - If the employee refuses a drug or alcohol test, the employee shall be informed that their refusal will be considered a non-negative test by the HR Manager, Branch Manager or the Operations Manager.
 - A urine sample submission shall be observed to ensure adulteration of the sample does not occur
 - If possible, obtain an instant test. The collection site will obtain a sample for GC or MS.
 - A fitness for duty examination shall be performed by a medical professional
- The employee shall return (or be returned) to the Corporate or Branch Office as soon as feasible to be interviewed by the HR Manager and Operations Manager/Branch Manager or Safety Manager and informed of the company's position as it relates to this policy.
- Each event shall be thoroughly evaluated and investigated to determine which course of action to take on a case by case basis.
 - Options include:
 - Referral to Allied's Employee Assistance Program
 - Last Chance Policy
 - No Action
 - Prescription medication reaction
 - Side effects of prescribed medications
 - Medical/Health event
 - If it is determined that the employee is not impaired through a fitness for duty examination by a medical professional:
 - Await results of drug or alcohol test before making a decision regarding the disposition of the employee
 - Evaluate the circumstances to ensure that alcohol and/or drug abuse did not occur.
 - Consideration may be made to re-instate the employee or follow this procedure for non-negative substance abuse testing, dependent upon the results of testing and/or a medical professional's opinion.

Actions Allied may take against an employee on the basis of a non-negative confirmed drug/alcohol test result or admission of substance abuse.

• Results of non-negative drug test results shall be reviewed with the employee and a signature obtained indicating notification. (Attachment 2)

- If the employee comes forward prior to any requests for testing and voluntarily admits abusing drugs or alcohol to his/her immediate supervisor, the supervisor shall contact the Human Resource Manager immediately. (Admission of illegal drug use is considered current if used within 30 days)
 - The Management Team shall review the circumstances of the employee's admission and determine appropriate actions.
 - The employee shall be referred to a drug testing facility for submission of a 10 panel drug test immediately.
 - Others may be involved with this review to best determine the appropriate course of action.
 - Results of the drug test should be taken into account before final action is determined.
 - An employee must sign a Last Chance Agreement prior to returning to work Attachment 5) and may be placed on an unpaid leave of absence for a minimum of 30 days while the employee is seeking appropriate counseling or treatment to prevent reoccurrence. Leave of absence not to exceed 60 days and
 - At the end of the leave of absence a determination will be made by Allied to consider eligibility for re-hire or terminate the employee.
 - See Employee Assistance Program Section.
 - Non-negative Test Denial of unemployment benefits.
 - Upon a non-negative confirmed drug/alcohol test result, Allied will deny an employee's claim for unemployment benefits.
 - Refusal of Test will result in denial of unemployment benefits.

Confidentiality

- Except as otherwise provided in this section, all information, interviews, reports, statements, memoranda, and drug test results, written or otherwise, received or produced as a result of Allied's drug-testing program are confidential.
- Company, laboratories, medical review officers, employee assistance programs, drug rehabilitation programs, and their agents may not release any information concerning drug test results obtained pursuant to this section without a written consent form signed voluntarily by the person tested, unless such release is compelled by an administrative law judge, a hearing officer, or a court of competent jurisdiction pursuant to an appeal taken under this section or is deemed appropriate by a professional or occupational licensing board in a related disciplinary proceeding. The consent form must contain, at a minimum (See Attachment 4):
 - The name of the person who is authorized to obtain the information.
 - The purpose of the disclosure.
 - The precise information to be disclosed.
 - The duration of the consent.
 - The signature of the person authorizing release of the information.
- This subsection does not prohibit an agent of Allied or laboratory conducting a drug test from having access to employee drug test information or using the information when consulting with legal counsel in connection with actions brought under, or related to this section, or when the information is relevant to its defense in a civil or administrative matter.

Reporting use of prescription or nonprescription medications.

- An employee or job applicant may confidentially report the use of prescription or nonprescription medications to a medical review officer, both before and after a drug/alcohol test, by contacting the medical review officer directly; Allied will provide the contact information upon request.
 - Prescription or nonprescription medication is a drug or medication obtained with a prescription from an authorized health care provider or a medication that is authorized by federal or state law for general distribution and use without a prescription in the treatment of human diseases, ailments, or injuries.
 - A medical review officer (MRO) is a licensed physician contracted by the collection and testing facility who has knowledge of substance abuse disorders, laboratory testing procedures, and chain of custody collection procedures; who verifies non-negative confirmed test results; and who has the necessary medical training to interpret and evaluate an employee's non-negative test result in relation to the employee's medical history or any other relevant biomedical information.

List of common medications that may affect a drug/alcohol test

- The following is a list of the most common medications, which may alter or affect a drug test, and is not intended to be all-inclusive:
- All liquid medications containing ethyl alcohol (ethanol). Please read the label for alcohol content.

Amphetamines	Obetrol, Biphetamine, Desoxyn, Dexedrine, Didrex, Ionamine, Fastin.
Cannabinoids	Marinol (Dronabinol, THC).
Cocaine	Cocaine HCI topical solution (Roxanne).
Phencyclidine	Not legal by prescription.
Methaqualone	Not legal by prescription.
Opiates	Paregoric, Parepectolin, Donnagel PG,
	Morphine, Tylenol with Codeine, Empirin
	with Codeine, APAP with Codeine,
	Aspirin with Codeine, Robitussin AC,
	Guiatuss AC, Novahistine DH,
	Novahistine Expectorant, Dilaudid
	(Hydromorphone), M-S Contin and
	Roxanol (morphine sulfate), Percodan,
	Vicodin, Tussi-organidin, etc.
Barbiturates	Phenobarbital, Tuinal, Amytal, Nembutal,
	Seconal, Lotusate, Fiorinal, Fioricet, Esgic,
	Butisol, Mebaral, Butabarbital, Butalbital,
	Phrenilin, Triad, etc.

Ativan, Azene, Clonopin, Dalmane,
Diazepam, Librium, Xanax, Serax,
Tranxene, Valium, Verstran, Halcion,
Paxipam, Restoril, Centrax.
Dolophine, Metadose.
Darvocet, Darvon N, Dolene, etc.

Consequences of refusing drug/alcohol testing

- Post offer job applicant drug/alcohol testing. Allied will not hire a job applicant who refuses to submit to a drug/alcohol test.
- Employee drug/alcohol testing.
 - If an employee refuses to submit to a drug/alcohol test, the refusal will be considered a non-negative test. The employee may be referred to Allied's Employee Assistance Program. Failure to accept referral to Allied's Employee Assistance Program may result in termination of employment.
 - Allied may deny unemployment benefits.

Employee Assistance Program

Allied maintains an Employee Assistance Program ("EAP"). The purpose of an EAP is to provide help to employees who suffer from alcohol abuse, drug abuse or other health issues. Employees may access these services without Allied's involvement. Please direct any questions regarding this program to the HR Manager.

It is the responsibility of an employee to seek assistance from an EAP <u>before</u> alcohol and drug problems lead to disciplinary actions. Once a violation of this policy occurs, subsequently seeking treatment through an EAP on a voluntary basis will not necessarily lessen disciplinary action and may, in fact, have no bearing on the determination of appropriate disciplinary action.

Allied's EAP will provide appropriate assessment, evaluation and counseling and/or referral for treatment of drug and/or alcohol abuse. Employees <u>may</u> be placed on an unpaid leave of absence status for 30 days with a conditional return to work, contingent upon successful completion of the agreed-upon treatment regimen (within 60 days of employee notification of a non-negative drug/alcohol test), which shall include follow-up testing.

The cost of seeking assistance from the program will be the responsibility of the employee and subject to provisions of Allied's health insurance plan, if any. Please consult the provider concerning any costs that may be your responsibility.

After the completion of the EAP program, the employee shall submit to a drug/alcohol test and have a fitness for duty examination performed by a medical professional. Under no circumstances, shall an employee be on any maintenance medications for their addiction when requesting re-instatement.

Challenges to test results

 An employee or job applicant who receives a non-negative confirmed test result may contest or explain the result to the designated medical review officer (MRO) within five (5) working days after receiving written notification of the test result. If an employee's or job applicant's explanation or challenge of the non-negative test is not acceptable to the MRO, the MRO shall communicate the positive test result back to the employer.

- The terms "confirmation test," "confirmed test," or "confirmed drug test" mean a second analytical procedure used to identify the presence of a specific drug or metabolite in a specimen, which test must be different in scientific principle from that of the initial test procedure and must be capable of providing requisite specificity, sensitivity, and quantitative accuracy.
- Confirmation testing shall be done in accordance with the following:
 - If an initial drug test is negative, Allied may, in its sole discretion, seek a confirmation test.
 - Only licensed or certified laboratories may conduct confirmation drug tests.
 - All non-negative initial tests shall be confirmed using gas chromatography/mass spectrometry (GC/MS) or an equivalent or more accurate scientifically accepted method approved by the Testing Facility.
 - If an initial drug test of an employee or job applicant is confirmed as non-negative, Allied's designated medical review officer shall provide technical assistance to the Allied and to the employee or job applicant for the purpose of interpreting the test result to determine whether the result could have been caused by prescription or nonprescription medication taken by the employee or job applicant.

Note:

- In light of several states passing legislation regarding the use of medical marijuana (MM), Allied's policies remain the same regarding the prohibition of being under the influence of any substance while performing job duties as well as detection considered non-negative in any submitted sample such as urine, blood, hair or saliva.
- Questions regarding the program should be directed to the Safety Manager and/or the Human Resource Manager.
- For those employees who fall under the FMSCA/PHSMA (DOT) regulations, Allied Environmental will follow current protocols relating to Federal Register (82 FR 5229) Part 40.



Drug Free Workplace Program Acknowledgement

I hereby acknowledge that I have read and received Allied's Substance Abuse Program. I have had an opportunity to have all aspects of this material fully explained and was permitted to ask any questions to clarify any misunderstandings.

I also understand that during my employment I may be required to submit to testing for the presence of drugs or alcohol in my body. I understand that submission to such testing is a condition of employment with Allied, and subject to disciplinary action up to and including termination if:

- I refuse to consent to testing.
- I refuse to accept Allied's EAP (if employed)
- I refuse to authorize release of the test results to the company.
- The tests establish a violation of Allied's Substance Abuse Policy.
- I otherwise violate the policy.

I also recognize that the Substance Abuse Policy and related documents are not intended to constitute a contract between Allied and me.

The undersigned further states that he/she has read, understands and will abide by the policy reviewed and the above acknowledgement and signs below of his/her own free will.

PLEASE COMPLETE IN INK

PRINT NAME

DATE

SIGNATURE

WITNESS

DATE

Attachment 1