



Hospital: System-Wide

Division: Human Resources

Policy & Procedure

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| Administrative Approval: | <u>Melanie Stith</u> |
| Administrative Title: | <u>VP, Human Resources</u> |
| Originator (Title): | <u>Director HR</u> |

Subject: Substance Abuse

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RSFH Applicability Statement: This policy applies to Roper Hospital, Bon Secours St. Francis Xavier Hospital, Roper St. Francis Mount Pleasant Hospital, Roper St. Francis Hospital-Berkeley, and any departments owned or operated by these Hospitals, as well as Roper St. Francis Physician Partners Network, Corporate and Roper St. Francis Medshare.

SUMMARY: Roper St. Francis Healthcare adheres to the philosophy of a Drug & Alcohol Free Work Place. The safety of patients, teammates, physicians and visitors is enhanced when all teammates avoid the use of alcohol, illegal drugs and legal drugs which adversely affect work performance.

DEFINITIONS

5.1 Illegal Drugs

“Illegal drugs” are drugs or controlled substances which are (1) not legally obtainable or (2) legally obtainable but not used in a lawful manner. Examples include cocaine and marijuana, as well as prescription drugs which are not lawfully obtained and/or properly utilized. The term “illegal drugs” also refers to mind-altering and/or addictive substances which are not sold as drugs or medicines, but are used for mind- or behavior-altering effects (ex. Inhalants, bath salts, synthetic drugs, etc.).

5.2 Legal Drugs

“Legal drugs” are those prescribed or over-the-counter drugs which are legally obtained by the team member and used for the purpose for which they were prescribed and sold.

5.3 Roper St. Francis Healthcare Property

The term “Roper St. Francis Healthcare property” includes work sites, parking lots, vehicles and offices owned, rented, leased, utilized, or serviced by Roper St. Francis Healthcare (RSFH)

5.4 On Duty

The term "on duty" includes all working and on call hours, regardless of whether on premises.

GUIDELINES**Alcohol Use**

5.5 The consumption of alcohol on RSFH property or while on duty is prohibited. It is also against policy to report to work or to work under the influence of alcohol or with a noticeable smell of alcohol.

5.6 Possession of open containers of alcohol on RSFH property or while on duty is prohibited; however, alcohol may be permissible in some RSFH sponsored social circumstances (see 5.38 Social Events).

5.7 Off duty abuse of alcohol which adversely affects a teammate's job performance or other interests of RSFH is prohibited.

5.8 A teammate who has a confirmed test result of .02 blood ethanol level or greater will be considered to be under the influence of alcohol.

Drug Use

5.9 The use, sale, purchase, possession, manufacture, diversion or distribution of **illegal drugs** is prohibited and is cause for immediate employer intervention and/or corrective action up to and including termination of employment. It is also against RSFH policy for a teammate to report to work or to work while under the influence of illegal drugs. A teammate will be considered to be under the influence of illegal drugs if the teammate tests positive for such drug(s) (or their metabolites) during the testing process.

5.10 A teammate who is taking any **legal drug** which the prescribing health care provider or pharmacist indicates may adversely affect the teammate's ability to safely perform the functions of his/her job must advise his/her supervisor before reporting to work while taking such medication(s). RSFH reserves the right to consider any and all alternatives if RSFH determines that such use adversely affects the teammate's ability to safely perform the functions of his or her job. Improper use of **legal drugs** is prohibited and may result in an employer intervention and/or corrective action up to and including termination of employment.

5.11 Off duty abuse of any drug which adversely affects a teammate's job performance or other interests of RSFH is prohibited.

ON-CALL REQUIREMENTS

5.12 Teammates who are on call are expected to be fit for work at all times when they report to work. If under the influence of alcohol or drugs, a teammate must inform his/her leader when contacted to report for work. If a teammate is not fit for work due to the consumption of alcohol or drugs, the teammate's unavailability is documented and may result in employer intervention at the discretion of RSFH and/or corrective action up to and including termination of employment. Additionally, the teammate may lose call pay for the shift in which he/she chooses to consume alcohol or drugs that impact fitness for duty.

TESTING

5.13 Alcohol and/or drug testing may be conducted:

- As a condition of employment;
- With reasonable suspicion/for cause;
- As required by applicable state or federal laws, rules, or regulations;
- As deemed appropriate by RSFH.

5.14 Pre-Employment Testing (As a Condition of Employment)

An applicant must provide a specimen that tests negative for the presence of illegal drugs, alcohol and/or abuse of legal drugs. If the test is positive, the applicant is not hired, but may be considered for employment after one year.

5.15 Reasonable Suspicion/For Cause Testing

Teammates may be asked to submit to a drug and/or alcohol test if, in the opinion of leadership, there is reason to believe that their ability to perform work safely or effectively may be impaired/compromised. For-cause testing may be based upon specific observations of leadership concerning the appearance, behavior, speech, body odors, work performance or other factors deemed appropriate. See Attachment A for a non-exclusive list of examples. For-cause testing may also include reasonable reports submitted by anonymous or other sources.

5.16 If a teammate has reasonable suspicion of substance abuse by another teammate, physician or licensed provider, he/she should immediately inform any member of leadership or Human Resources. The nursing supervisor can be contacted after hours. The Chief Physician Officer or the facility-specific Chief Medical Officer should be notified for physicians and licensed providers.

5.17 When a leader receives a report or has reasonable suspicion, he/she should, if reasonably possible under the circumstances, seek another leader, nursing supervisor, HR or employed physician (if in the practice setting) to review the occurrence to ensure that reasonable judgment is used. Leaders may consult with HR for assistance or with concerns at any time.

5.18 Once a leader has received approval to start the reasonable suspicion testing process, he/she should determine the best location for testing, keeping in mind privacy and confidentiality. If in the hospital setting, the leader should contact the Emergency Department charge nurse to advise him/her that reasonable suspicion testing is being conducted, to request a private space and to be on the lookout for a representative from Low Country Drug Screening (LCDS), or other designated substance abuse testing service utilized by RSFH. If in a practice or offsite location, the leader may transport the teammate to the closest RSFH ER or may schedule LCDS, or other designated substance abuse testing service utilized by RSFH, to come to the specific location if there is adequate privacy.

5.19 LCDS can be contacted at 843-747-3224. LCDS provides 24-hour coverage, 7 days a week. It will be necessary to provide LCDS with an address, a contact name and phone number. The leader will need to indicate that a witnessed alcohol and drug screen is being requested.

5.20 The leader should meet with the teammate privately to notify him/her that there is reasonable suspicion and testing is being initiated. The leader should escort the teammate to the RSFH ER, or other suitable location, and remain with the teammate until the procedure is complete and the teammate is released.

5.21 The leader should advise the teammate that he/she is suspended without pay pending the results of the testing.

5.22 The teammate should be encouraged not to drive home if suspected to be under the influence and transportation should be arranged, such as allowing the teammate to contact a family or friend to pick them up or the leader can contact a taxi service (nursing supervisors can assist with account information where necessary so that RSFH can cover the cost of the safe ride home). If the teammate insists on driving home, we should make every reasonable effort to encourage them to accept a safe ride, however we cannot force the teammate to do so or force the teammate to stay on the premises against his/her will.

5.23 The teammate will be notified of the results. Please note that testing time can take from 24-48 hours up to 2 weeks.

5.24 Teammates in their orientation period who test positive will be terminated.

General Testing Guidelines

5.25 RSFH will utilize accurate testing procedures and will determine which drug and/or alcohol testing will be performed and the cutoff levels where a test result will be considered positive proof of drug and/or alcohol use. Results will be analyzed by a SAMHSA approved, independent laboratory which has been selected by RSFH, in conjunction with its Medical Review Officer. Every effort will be made to maintain the confidentiality of the testing process.

5.26 Any teammate requested to submit to alcohol or drug testing will be asked to sign a Consent to Test. If a teammate refuses to consent to testing, tampers with the test, or otherwise fails to cooperate with the testing procedure, he/she will be subject to corrective action up to and including termination of employment.

APPEAL PROCESS

5.27 Teammates or applicants who test positive on a drug screen may appeal the test results. The teammate or applicant must initiate the appeal to have the original specimen re-tested within 72 hours of notification of the positive test result by the Medical Review Officer. The teammate or applicant will sign a Consent to Test with LCDS and pay the retesting fee. The teammate or applicant may also request that the re-test of the same specimen be tested at an alternate SAMHSA approved lab and is responsible for any additional fees that may be incurred.

REMEDIATION OPTIONS/CORRECTIVE ACTION

5.28 The determination of what employer intervention and/or corrective action is appropriate for a violation of this policy rests solely with RSFH. Employer intervention and/or corrective action may be based not only on a violation of this policy, but also on prior work performance, workplace misconduct, other rule violations, and any other factors which RSFH determines to be relevant. This policy in no way infers or creates any contractual obligation to follow any particular procedure.

5.29 Where appropriate, the leader may make referrals to an Employee Assistance Program (EAP) counselor to assess treatment needs and provide appropriate counseling/referrals in an attempt to remediate the teammate. Cooperation with the EAP counselor and remedial treatment is required for continued employment. The teammate must sign an EAP consent form, allowing EAP to share information with leadership/HR on a need-to-know basis, regarding the teammate's cooperation and progress in the remediation program.

5.30 Teammates who have participated in remediation must have a negative alcohol/drug screen prior to returning to work, consent to the terms of a second chance agreement, and will be subject to random follow-up testing at their own expense for a period of at least two years following the initial positive test result. Teammates who are allowed to return to work will be terminated for a subsequent positive drug or alcohol test.

5.31 Teammates who do not cooperate with EAP, refuse to participate in remediation, do not satisfactorily complete a prescribed drug or alcohol abuse rehabilitation program, or who subsequently violate this policy will be subject to corrective action up to and including termination of employment.

5.32 RSFH will report violations of this policy as required by local, state and federal law enforcement agencies, as well as state regulatory agencies and licensing boards. Licensed professionals must follow the guidelines and requirements of their licensing agency, in conjunction with any recommendations by RSFH and the EAP counselor.

5.33 Participation in any evaluation, treatment, or counseling program will be at the teammate's expense unless the teammate is entitled to such benefits under the terms of RSFH's group health plan or by other available benefits. If leave is required, applicable RSFH leave of absence policies may apply. Time lost from work for such a program is without pay unless the teammate is otherwise entitled to pay pursuant to RSFH policies.

SEARCH POLICY

5.34 RSFH reserves the right to request a teammate to submit to a search of his/her person or personal property including but not limited to vehicles, handbags, briefcases, backpacks, etc. or company property including file cabinets, desks, vehicles, lockers, etc., where there is reason to believe that the teammate is in possession, under the influence, or impaired by alcohol or drugs. The teammate may be present during this search. RSFH reserves the right to inspect all company property without prior notice to the teammate and/or in the teammate's absence to include removal of locks from workplace lockers. Refusal to consent to a search may result in corrective action up to and including termination of employment.

OTHER PROVISIONS**Employment at Will**

5.35 All teammates of Roper St. Francis Healthcare (except employed physicians who are under contract) are "employees-at-will." Either the teammate or Roper St. Francis Healthcare has the right to terminate employment at any time and for any reason.

Arrests

5.36 Teammates arrested for an alcohol or drug-related incident must immediately notify their leader of the arrest if the incident:

- occurs during scheduled working hours;
- occurs while operating an RSFH vehicle on RSFH or personal business;
- occurs while operating a personal vehicle on RSFH business;
- involves the sale or distribution of Illegal Drugs;
- could negatively impact RSFH's interests in the community/negatively impact community trust;
- could result in a felony conviction; or
- could have an impact on professional licensure.

Convictions

5.37 Teammates must notify RSFH of any criminal drug or alcohol conviction no later than five (5) calendar days after the conviction. "Criminal conviction" means a finding of guilt, an imposition of a sentence, a plea of no contest, or a plea of guilty. Drug activity off the job will normally be treated as a positive drug test, however RSFH may decide at its sole discretion how to proceed.

Social Events

5.38 Any RSFH CEO or Vice President may authorize alcohol to be present at RSFH functions. Reasonable consumption under such circumstances will not be deemed a violation of this policy and all teammates are encouraged to consume alcohol in a responsible manner at work functions.

5.39 The possession of alcohol when purchased for an RSFH authorized function or an unopened gift of alcohol is not prohibited, provided such possession is in compliance with federal/state/local laws and other RSFH policies (HR Conflict of Interest, Corporate Compliance, etc.).

ATTACHMENT A

Factors Leading to Suspicion of Impairment

The following non-exclusive factors may lead to suspicion of impairment:

1. Personality changes
2. Patient and staff complaints about teammate, especially complaints by patients of no relief of pain
3. Recurrent absenteeism and lateness for work
4. Patterns of absenteeism, e.g. before or after a weekend
5. Inappropriate prescribing of large doses of narcotics and/or other potentially addicting substances
6. Changes in routine
7. Sloppy recordkeeping, suspect ledger entries, and drug shortages
8. Refusal of relief
9. Desire to work alone
10. Long sleeves in warm environments
11. Unpredictable work habits and patterns e.g. volunteering for overtime or requesting to come in early
12. Frequent disappearances from the department or work area
13. Improbable excuses for absences from the department or work area
14. Frequent trips to the bathroom
15. Frequent illness
16. In the department frequently when off duty
17. Physical changes
18. Heavy wastage of drugs and/or patterns of wasting drugs without a witness
19. Frequent requests for verbal orders for narcotics
20. Insistence of personal administration of injected narcotics for patients
21. Frequent trips to areas where drugs are kept
22. Abusive behavior
23. Work related accident or near accident in which safety precautions were violated and/or human error/at risk/intolerable acts were performed
24. Pattern of reported accidents in a particular unit or work area

Physical symptoms may include:

1. Hand tremors
2. Sweating
3. Marked nervousness
4. Odor of alcohol
5. GI upset or headache
6. Slurred speech
7. Increased anxiety
8. Unsteady gait
9. Heavy use of mints or mouthwash
10. Sniffling or sneezing
11. Clumsiness
12. Flushed face
13. Watering or red eyes