# Policy: HR – Drug and Alcohol Use

Purpose: To promote a drug and alcohol-free workplace

## Policy:

[Company Name] is committed to providing a drug and alcohol-free workplace that protects the health and safety of all employees and the public it serves. Alcohol and drugs are not allowed on company property at any time.

### Procedural Guidelines:

[Company Name] may test an employee, or potential employee, for illegal drug or alcohol use during the pre-employment process, for reasonable suspicion, fitness for duty testing, follow-up testing or post-accident testing. Refusal to submit to testing will be deemed insubordination and may result in immediate termination.

Physical symptoms of intoxication, direct observation of illegal/illicit drug use or possession, a pattern of abnormal or erratic behavior, or other credible information that the company has corroborated independently constitute reasonable suspicion on the part of the Company, and the employee therefore would be required to submit to testing.

Failure of a drug test may result in disciplinary action, up to and including dismissal.

[Company Name] will immediately terminate an employee who is convicted of manufacturing, selling, possessing, distributing and/or stealing controlled substances.

Any employee taking a legal drug or other prescribed medication that is known to affect or impair judgment or work performance must notify his/her supervisor or manager prior to reporting to work. The employee will be asked to provide a physician’s authorization to return to work once the medication dosage has been exhausted.

All information, including drug-testing collection, medical records and test results, will remain confidential and kept separately in a medical file. The release of any drug-testing information will be on a strict need-to-know basis. Release of records will occur only if required by law or with the written consent of the employee, or if permitted under other company policies.

Effective Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Reviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_