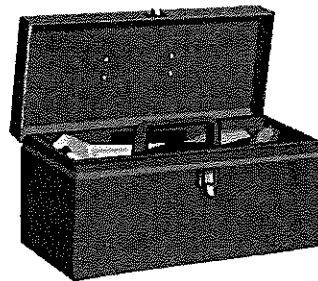


SUPERVISOR'S TOOL BOX

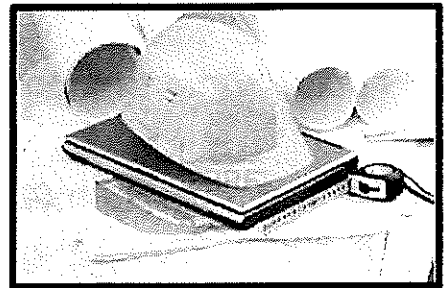


2022

PERFORMANCE SYMPTOMS

Key factor to performance issues - if something is *repeated & continuing*.

- Absenteeism - Excessive or increased absenteeism, especially Mondays after weekend or on day after Pay Day. Habitual 2-day "sick leave".
- Lateness - unlikely excuses for being late or absent, leaving work early, late from lunch.
- Unreliable Productivity - wide patterns of high and low performance.
- Forgetfulness - Recalling prior instructions is difficult. Deadlines get missed.
- Accidents - decreased motor coordination causing bumps and falls.
- Sleeping "Nodding" on the job.
- Unusual flare-ups or outbreaks of temper--- fights with fellow employees, drivers, dispatchers or dock workers.



BEHAVIORAL SYMPTOMS

The following symptoms are useful in identifying possible drug users:

- Association with known drug users
- Deterioration of physical appearance and grooming
- Disoriented
- Excitability
- Hallucinations
- Hyperactivity
- Impaired coordination
- Increased appetite
- Lowered inhibitions
- Memory problems
- Moody
- Overreaction to criticism
- Paranoia
- Poor concentration
- Poorly concealed attempts to avoid attention & suspicion, - frequent trips to storage rooms, closets, restroom, cars, etc.
- Reduced attention span
- Secretive behavior regarding actions and possessions
- Sedation
- Stealing items from company/employer or problems with law enforcement
- Unusual borrowing of money from friends and other employees
- Wearing sunglasses at inappropriate times to hide dilated/constricted pupils
- Wearing long sleeves in hot weather
- Withdrawn attitude toward family and supervisors



Safety matters

Reasonable Suspicion

Mood. Irritable, depressed, suspicious, withdrawn or excessively talkative behavior changes after lunch or breaks.

Appearance. Inappropriately dressed, bloodshot eyes, slurred speech, poor hygiene, excessive weight gain or loss, hand tremors, unsteady stance.

Work performance. Low productivity, poor work quality, loss of concentration, inability to make decisions, resistance to authority, misuse of equipment, frequent breaks, sick days or tardiness.

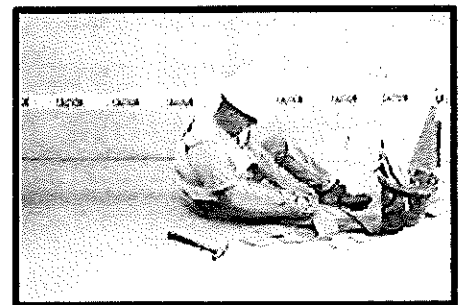
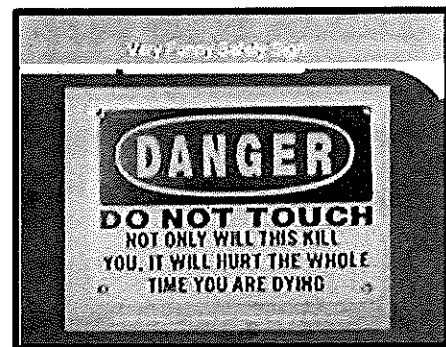
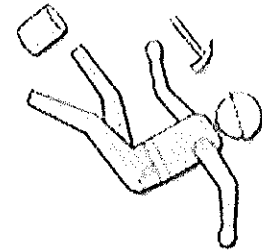
Relationships. Bad listening skills, uncooperative, overconfident, argumentative, discussion of problems at home.

"On-the-Job" Absenteeism. Frequent unauthorized absences from work site, frequent trips to water fountain or bathroom, physical illness on job, long coffee breaks.

Generally Lowered Job Efficiency. Missed deadlines, mistakes due to inattention/poor judgment, material wasted, complaints from coworkers, improbable excuses for poor job performance.

PHYSICAL SYMPTOMS

- Bad breath, frequent lip licking
- Blurred vision
- Cold and clammy skin
- Constricted pupils that fail to respond to light
- Decreased appetite
- Dilated pupils
- Disheveled and unkempt
- Distorted sense of time passage, tendency to over estimate time intervals
- Dizziness
- Drowsiness, lethargy
- Dry mouth and throat
- Excessive activity, difficulty sitting still
- Fatigue
- Flushed face
- Forgetfulness in conversation
(e.g. "What was I saying?")
- Headaches
- High fever
- High or low blood pressure
- Increased heart and breathing rates
- Increased risk of falling over (older people)
- Inflammation in white of eyes; pupils unlikely to be dilated
- Lack of interest in food and sleep
- Loss or increase of appetite
- Nausea
- Nervousness
- Personal hygiene decline
- Rapid loud talking and bursts of laughter in early stages of intoxication
- Red eyes, pale face, imprecise eye movements
- Reduced pain and anxiety
- Running nose, nasal problems
- Scars or "tracks" on arms or other parts of body from needle injections
- Skin rash
- Sleepy or stuporous in the later stages of intoxication
- Slowed pulse and breathing
- Slurred speech
- Strong smell of burning rope
- Sweating
- Talkative, but conversation often lacks continuity
- Tendency to drive slowly—below speed limit
- Unable to sleep
- Weight gain or loss



Drug Testing Process

- Chain of Custody: Document handling & storage of urine specimen from time collected until time disposed. Links donor to urine sample .
Written proof of all that happens to specimen while at collection site & lab.
- Initial drug test screen: Test used to differentiate negative specimen from one that requires further testing for drugs or drug metabolites.
- Confirmation Test: Second analytical procedure using gas chromatography/mass spectrometry (GC/MS) to identify & quantify presence of specific drug or drug metabolite.
- Medical Review Officer: Licensed physician (Doctor of Medicine or Osteopathy) - responsible for receiving & reviewing, evaluating medical explanations for certain lab results. If positive test, MRO contacts donor to ask about medical conditions/treatments or other reasons for positive result. If true & doctor prescribed medicine, test is reported as negative.

PERFORMANCE CHECKLIST

You may observe the following job-related problems & potential problems when an employee is abusing drugs or alcohol. This is not an exhaustive list, and there may be other causes for these symptoms.

Absenteeism or Other Attendance Problem	Changes in Personal Habits
<ul style="list-style-type: none"> • Multiple instances of unauthorized absences. • Excessive sick days. • Frequent Monday and/or Friday absences. • Repeated absences, particularly if the follow a pattern. • Excessive tardiness, especially Mondays. • Frequent use of unscheduled vacation days to cover absences. • Instances of leaving work early. • Peculiar an increasingly improbable excuses for absences. • Higher absentee rate than other employees for absences. • Frequent, unscheduled short-term absences (with or without medical explanation). • Frequent absences from work location. • Excessive lateness when returning from -breaks, lunch, or dinner. • Frequent trips to the water fountain or rest room. 	<ul style="list-style-type: none"> • Changes in personal appearance. • Declining attention to personal hygiene. • Reporting to work in other than normal conditions. • Returning from lunch or dinner in a noticeable different behavior mode. • Wide swings in morale or mood. • Excessive use of telephone (engaging in guarded conversations). • Receiving unusual or inappropriate visitors at work. • Creditors complaining to the supervisor or Human Resources Department regarding financial concerns. <div data-bbox="862 1356 1341 1829" style="text-align: center;"> </div>

Productivity and Other Performance Problems

- Missed deadlines.
- Complaints from users of the employee's production or work.
- Improbable excuses for poor job performance.
- Wasting materials.
- Alternate periods of high and low productivity.
- Difficulty in recalling own mistakes.
- Increasing difficulty in handling complex assignments.
- Jobs take longer than necessary to complete.
- Spasmodic work habits.
- Diminished morning performance.
- Accidents on the job due to carelessness.
- "Peculiar" accidents.
- Accidents off the job that affect job performance.

Changed Relations with Co-Workers

- Over-reaction to real or implied criticism.
- Borrowing money from co-workers.
- Unrealistic resentment to co-workers.
- Complaints from co-workers.
- Avoidance of associates.
- Increasingly argumentative with co-workers.
- Excessive talking with co-workers.



Getting Yourself Ready

- What are your personal feelings about employee & problem?
- Accept those feelings & then focus on being detached & objective.
- Consult with someone who can give professional advice or guidance (HR, EAP counselor).
- What exactly are you trying to achieve?
- Focus on this goal.
- Do you feel apprehensive or anxious about confronting this employee? If so, that's normal.
- Make notes on what you are going to say.

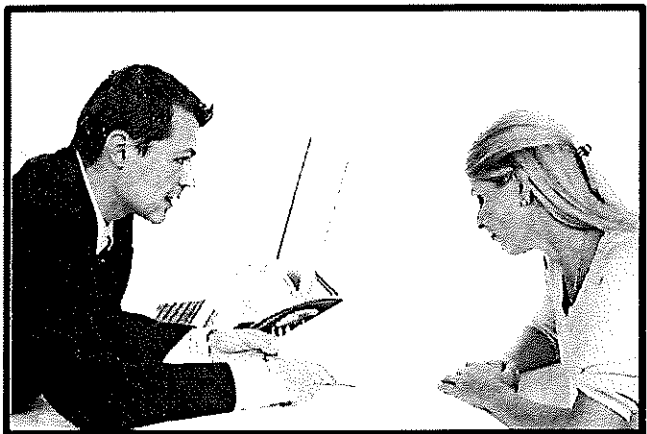
Anticipating the Employee's Reaction

- Think about situation from employee's point of view.
- What kind of reaction can you expect? Defensiveness, hostility?
- Think about ways to get past these reactions to make sure employee actually hears & understand message:

"Your job performance has deteriorated & you face serious consequences if problems aren't resolve."

Setting the Stage

- Usually meeting is between you & employee. Have HR representative or EAP counselor present if necessary.
- Arrange for private meeting place - no interruptions from telephone calls, visitors, or other employees.
- Identify best time of day for meeting considering employee's current work habits & behavior.
- Allow sufficient time for meeting & set time limit.
- Make an appointment with employee "to discuss a matter of importance."
- Don't make appointment too far in advance.



10 PANEL DRUG LIST

COMMON DRUGS OF ABUSE - 5 PANEL (NON DOT)

	Drug Levels	Confirmatory Levels
Amphetamines	300 ng/mL	100 ng/mL
Cannabinoids	200 ng/mL	100 ng/mL
Cocaine	300 ng/mL	100 ng/mL
Opiates	300 ng/mL	300 ng/mL
Phencyclidine (PCP)	25 ng/mL	10 ng/mL

ADDITIONAL 5 drugs (including above) for 10 Panel (Optional) (NON-DOT)

Barbiturates	300 ng/mL	100 ng/mL
Benzodiazepines	300 ng/mL	100 ng/mL
Methodone	300 ng/mL	100 ng/mL
Methaqualone	300 ng/mL	100 ng/mL
Propoxyphene	300 ng/mL	100 ng/mL

ALCOHOL

Ethanol/Alcohol .04 BAC of greater considered positive

SUPERVISOR CHECKLIST FOR ALCOHOL / SUBSTANCE ABUSE

Employee Name: _____

Employee Job Title: _____ Date _____ Time: _____ am/pm

Location: _____ Safety-sensitive duties: Yes No

Purpose / Description: _____

OBSERVATIONS-----Check ALL that apply

BEHAVIOR

- stumbling, unsteady gait
- drowsy, sleepy, lethargic
- agitated, anxious, restless
- hostile, belligerent
- irritable, moody
- depressed, withdrawn
- unresponsive, distracted
- clumsy, uncoordinated
- tremors, shakes
- flu-like illness complains
- suspicious, paranoid
- hyperactive, fidgety
- frequent use of mints, mouthwash, breath sprays, eye drops
- inappropriate, uninhibited behavior

APPEARANCE

- flushed complexion
- sweating
- cold, clammy, sweats
- bloodshot eyes
- tearing, watery eyes
- dilated (large) pupils
- constricted (pinpoint) pupils
- unfocused, blank stare
- disheveled clothing
- unkept grooming

SPEECH

- slurred, thick
- incoherent
- exaggerated enunciation
- loud, boisterous
- rapid pressured
- excessively talkative
- nonsensical, silly
- cursing, inappropriate
- speech

BODY ODORS

- alcohol
- marijuana

OTHER

OBSERVATIONS: _____

The observations, as documented, were made of the employee identified above.

Supervisor Name (print or type) _____

Signature _____

Date _____

Witness Name (optional) _____

Signature _____

Date _____

Test Determination

- Reasonable Suspicion Alcohol Test
- Reasonable Suspicion Drug Test
- Transported for medical care/evaluation
- No test conducted
- 8 hours elapsed
- No test required
- Employee refused test
- Other (explain) _____

Employee transported to collection site by: _____

Time transported: _____ am/pm

Collection site: _____

