

1.3.A.8 Offender Drug Testing, Sanctions & Treatment

I Policy Index:



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II Policy:

A urinalysis and breath analyzer testing program shall be maintained throughout units of the Department of Corrections (DOC) charged with the management and supervision of offenders. Testing shall be applied to detect use of drugs and alcohol by offenders. To deter use of drugs and promote rehabilitation, offenders identified as having drugs in their system are subject to response and sanction. Drug testing will be used as a management tool to enhance supervision and identify offenders who may require treatment or programming.

III Definitions:

Blood Alcohol Content (BAC):

The measurement of alcohol content in the body, as determined by measuring the weight of alcohol in the breath or blood, as shown by chemical analysis. It is a violation for any offender to have a BAC of more than two thousandths (.002.)

Chain of Evidence:

A record of the movement and location of evidence, including a complete history of those persons who had the evidence in their custody, starting from the time the evidence is obtained, until any disciplinary or criminal response to a positive result is complete. The process establishes the evidence has remained in largely the same condition as when it was obtained and the possibility of alteration, substitution or change of condition to the evidence is minimal.

Comprehensive Offender Management System (COMS):

A DOC database for staff use in the management, storage and collection of informational and statistical data pertaining to offenders.

Confirmation Test:

The re-test or second test of a positive urine specimen using the same or different approved testing system. Typically performed to confirm the initial finding obtained from the same specimen. Confirmation testing will be performed by the South Dakota Department of Health Public Health Lab, located in Pierre, SD.

Controlled Substance:

Any material, compound, mixture or preparation which contains any quantity of hallucinogenic substances, salts, isomers, and salts of isomers included in Schedule I drugs, unless specifically exempted, whenever the existence of such salts, isomers and salts of isomers is possible within the specific chemical designation, as contained within SDCL § [34-20B-14](#).

Controlled Substance Analogue:

A substance is intended for human consumption which differs in its chemical stature to a controlled substance listed in or added to the schedule designated in Schedule I or II only by substituting one of more hydrogens with another, and has a stimulant, depressant, or hallucinogenic effect on the central nervous system (See SDCL § [34-20B-1\(22\)](#)).

Drug:

All non-prescribed mood controlling substances, including alcohol, marijuana, cocaine, amphetamines, methamphetamines, barbiturates, benzodiazepine, opiates, and hallucinogens.

DOC Institutions:

South Dakota State Penitentiary (SDSP), Sioux Falls Community Work Center, Mike Durfee State Prison (MDSP), Yankton Community Work Center, Rapid City Community Work Center, South Dakota Women’s Prison (SDWP), including Unit E and Pierre Community Work Center.

DOC Units:

For the purpose of this policy only, all adult DOC institutions, Parole Services and the Division of Juvenile Services.

Marijuana:

All parts of any plant of the genus cannabis, whether growing or not; the seeds thereof; and every compound, manufacture, salt, derivative, mixture, or preparation of such plant or its seeds.

Negative Result:

The total absence of the targeted substance or presence of a substance below the cutoff level of the initial test or confirmatory test of targeted substances. Negative results do not guarantee the offender did not consume the substance(s) tested.

Offender:

For the purpose of this policy, an offender is an inmate in the custody of the DOC institutional system, a parolee under parole or suspended sentence supervision by South Dakota Parole Services, including inmates placed on extension of confinement, or a juvenile offender committed to the DOC or placed in an institution or program under the control of the Department of Corrections.

Positive Result:

Shows a presumptive or confirmed presence of targeted substances at a detectable level. A positive result indicates the offender has ingested the targeted substance(s) and has tested positive.

Preliminary Breath Test (PBT):

A device used to detect and measure Breath Alcohol Level (BAL) through chemical test analysis of an offender's breath. The test may be administered by an appropriately trained person.

Random Testing:

Testing of offenders based on chance selection criteria. Typically, these tests are unscheduled and unannounced.

Specimen:

The amount of urine taken from an offender sufficient to perform a drug test(s).

Specific Urinalysis:

A urinalysis test conducted by a laboratory, usually the South Dakota Department of Health Public Health Lab located in Pierre, SD. The test will be conducted upon a specific urine sample to detect the presence of targeted illegal or illicit substances.

Targeted Testing:

Testing of specific offenders or groups of offenders identified based on behaviors, medical condition or symptoms, legal status, history, information, activity or characteristics.

IV Procedures:

1. Standards:

- A. Offenders in DOC custody and those under supervision of the DOC, shall not take into their body, any substance prohibited or controlled by any law of the State of South Dakota and shall avoid injurious actions, such as intoxication caused by ingestion of drugs.
- B. Wardens, Directors or their designees will assign staff to ensure the provisions of this policy are implemented, including but not limited to, random and targeted testing of offenders, complete and accurate collection of specimens and documentation of test results, staff training, and implementation of appropriate responses/sanctions for positive results to deter offenders from using drugs and support rehabilitation.
- C. A PBT is sufficient to confirm the presence of alcohol. An offender may be found to have ingested alcohol within their body based solely on the results of a PBT. In addition to, or in place of a PBT, an offender may be required to submit to a urinalysis (UA) or blood test (requires appropriately trained medical staff to obtain the sample).
 - 1. Staff conducting a PBT shall adhere to all instructions pertaining to the proper use and operation of the testing equipment.
- C. Drug testing kits and materials administered and utilized by DOC staff must be issued and approved by the DOC.
- D. A portion of the offender population will be drug tested each month, as determined by random or targeted selection. Offenders will not be tested solely on the basis of sexual orientation, race, color, religion, gender, age or national origin.
 - 1. DOC facilities and the Division of Juvenile Services will use the random selection report in COMS to select offenders for random drug testing.

2. Urinalysis Testing:

- A. Offenders will not be informed in advance when urine specimen collections are scheduled. Inability or refusal by an offender to provide an adequate urine specimen, as ordered by staff, may be treated as an admission of usage and a positive result. Offenders who refuse to provide a sufficient sample for testing are subject to disciplinary action.
- B. Offenders housed in a DOC institution are required to produce an adequate urine specimen for a urinalysis test within four (4) hours of being ordered to produce the specimen.
 - 1. The offender will be strip searched prior to collecting the UA specimen.
 - 2. The offender will be held in a secure cell or room.
 - 3. Offenders who fail to initially produce the required specimen shall remain in a secured area (dry cell or other approved area supervised by staff) until he/she produces the required specimen, or four (4) hours has elapsed.
 - 4. An offender who is unable to produce an adequate urine specimen when directed, may be given up to sixteen (16) ounces of liquid in a two (2) hour period. If an offender fails to produce the minimum amount of specimen required within four (4) hours, the offender's actions may be considered a positive result.
- C. Offenders are responsible for fully disclosing to staff, any prescription or over-the-counter medications they are taking prior to the test. If a positive result is obtained from an offender who has disclosed, they are taking medications, and the offender alleges such medication may affect the result, a health care provider or a pharmacist may be consulted to determine if the medication may affect the results of a drug test.
- D. Staff collecting a UA specimen from an offender will be of the same sex as the offender and will maintain direct, visual contact of the offender during the entire collection process. Exceptions to the same sex requirement may be made in the case of an emergency or safety issue. Such exceptions must be documented and forwarded to the staff member's supervisor.
- E. Staff must directly observe the offender urinating into the collection container. If staff does not observe the offender urinating into the collection container, the specimen will not be accepted, and the offender will be required to produce another specimen. The minimum amount of specimen required to complete testing by the Public Health Laboratory is approximately twenty-five milliliters (25 ml), or .85 fluid ounce. A standard issue UA test container that is one-third to one-half full will contain a sufficient sample for testing.
- F. If the specimen tests positive, it will be properly stored within the dedicated container, labeled (may be in the presence of the offender) and placed in secure storage. Specimens may be kept for up to 90-days, or longer if formally requested by the offender for the purpose of completing a confirmation test.
- G. If the specimen is negative, the specimen will be promptly disposed of in the toilet (may be in the presence of the offender). The container used to collect the sample will be properly disposed of in the trash.
- H. If a specimen is sent to the Public Health Laboratory for confirmation testing, staff will typically request the lab conduct a "Four Panel" drug screen. The "Four Panel" drug screen is designed to detect the presence of marijuana (THC), opiates, cocaine, and

amphetamines/methamphetamines. Additional drug screening may be requested in situations where the presence of other substances is suspected.

1. The *Drug Test Submission* form is available in COMS as an IWP.
- I. All offenders received at a DOC institution, including new admissions, suspended sentence and parole violators, CTP offenders or detainees returned to custody, who test positive for cannabinoids (marijuana plants and plant products that contain tetrahydrocannabinol (THC)) within the first forty-five (45) days following admission, will not be considered to have a positive test result. Staff will, however, document the positive result.
 1. The offender will be permitted reasonable time (max. of up to 45 days) for the cannabinoids/THC to clear from their system.
 2. Health Services will be notified of all institutional offenders testing positive for cannabinoids. Response will be determined based on the level of drug in the inmate's system.
 3. The offender must be re-tested at various intervals until the test result registers zero/negative, or otherwise drops below the minimum reading of the testing device.
 4. Offenders housed in a DOC institution who are found to have used cannabinoids while in DOC custody (supported by a positive test result), are subject to disciplinary action.
 - J. If the result of the urinalysis test is positive, or the offender refuses to provide an adequate sample, or the offender provides a sample which has been altered or is determined not to be legitimate (synthetic urine or urine not from the offender), the staff member conducting the test will document the result/outcome and generate a report. Every positive result from an offender may result in disciplinary action, response/sanction. Law enforcement and/or Special Investigations Unit staff may be notified of positive test results, as deemed appropriate.
 - K. A confirmation test is not required for staff to proceed with disciplinary action, response and sanctions, or to document the test as a positive result.
 - L. Offenders may request a confirmation test of the sample only if the result is positive, and the substance that was detected can be tested at the Public Health Lab. Synthetic marijuana and controlled substance analogues may be excluded from confirmation testing. The results of the field test supporting the presence of such substances shall be sufficient to initiate a response/sanction by staff.
 1. Offenders are responsible for all expenses, costs and fees associated with a confirmation test by the Public Health Lab. Offenders who are indigent may request confirmation testing and will be billed for all costs associated with the confirmation testing.
 2. Any pending disciplinary action, hearing, sanction or response related to the positive test result which the offender is requesting confirmation of, will be suspended until the results of the confirmation test are received from the Public Health Lab. When the results are received, the disciplinary process will resume.
 3. A copy of a statement of the methods and findings of any examination or analysis conducted by an employee of the Public Health Lab may be introduced as evidence by the DOC during hearings, responses, reviews, etc. involving the offender. The result of

confirmation drug test shall have the same force and effect as if the person who performed the analysis or examination testified in person (See SDCL § [23-1-19.3](#)).

3. Drug Testing:

A. Targeted drug testing of offenders.

1. Targeted drug testing will be used in the following situations:

- a. New admission inmates, detainees, suspended sentence violators, CTP returns, etc. shall be tested upon admission/receipt.
- b. There is reason to believe, or some evidence/information to support, an offender has used, or is in possession of drugs.
- c. An offender is found in possession of suspected drugs; or when suspected drugs are detected in an area controlled, occupied or inhabited by the offender.
- d. An offender is observed in possession of suspected drugs, but those supervising the offender are unable to obtain a sample of suspected drugs.
- e. Information is received that suggests an offender is under the influence, or has recently used, possessed or attempted to possess suspected drugs. May include reliable information from a confidential informant.
- f. When staff observe any of the following symptoms: the odor of alcohol or drugs on the offender's breath, clothing or in the proximity of the offender; erratic behavior; incoherent, staggering or disoriented demeanor; fresh needle marks; slurred speech; glassy eyes or dilated pupils or other potential signs of drug use.
- g. An offender admits to using drugs while in custody or on DOC supervision (tests shall be administered to confirm use, type, amount, etc.)
- h. An offender fails to attend a meeting with staff, counselor or parole agent.
- i. Offenders housed in a DOC institution returning from temporary absence (TAP) or any unsupervised departure from the institution, including walk-aways who are returned or turn themselves into the institution.
- j. Offenders housed in a DOC institution who return late (past their scheduled return time, i.e. work release, CTP, job search, furlough.
- k. Offenders considered for placement in a community-based program, such as CTP, work release, extension of confinement, etc.
- l. Offenders who are returned to custody from parole, suspended sentence, CTP for a violation or as a sanction/response to a violation (detainee), and those who test positive while on supervision who are then returned to DOC custody.
- m. Offenders with a history of testing positive.
- n. Offenders receiving or being considered for certain medical treatment, procedures or prescription drug management. Testing shall be as directed by a health care professional.

- B. Supervisory staff from contract facilities, community agencies, employers, community treatment program, medical staff, etc. may require an offender placed in their care/custody/supervision to submit to a UA, PBT or blood test. The test shall be administered by trained DOC staff or other person with proper authority and training to administer such a test.
- C. Offenders who test positive may be subject to disciplinary action, detainment, approved sanctions, responses, required treatment or assessment, and criminal prosecution.
- D. Any detoxification or monitoring required as a result of an offender testing positive for drugs shall be determined by a qualified medical provider and conducted under medical supervision at a DOC institution, hospital or clinic (See ADA 4-4376).
- E. The Warden, Director or designee may order off-site lab screening and confirmation testing of any collected specimen.
- F. Upon directive from the Warden, Director or designee:
 - 1. DOC facilities and juvenile units will use the Random Selection Report in COMS to select offenders for targeted drug testing.

4. Staff Training:

- A. All DOC staff assigned the duty of obtaining and testing specimens from offenders will receive appropriate training (See DOC policies 1.1.D.1 [Staff Training Requirements](#), 1.1.D.2 [Juvenile Division Staff Training Policy](#) and Parole OM 7.1.D.1 [Training and Staff Development](#)). Staff that has successfully completed training has authority to collect, process and appropriately dispose of specimens obtained, administer drug tests and interpret/determine the results of any test administered.
- B. All staff involved in administering and processing drug tests will receive instruction and training on proper chain of evidence.

5. Sanctions and Responses:

- A. Positive results, offender admission of use, disclosure of evidence supporting a finding the offender has used or possessed drugs or alcohol, may result in a sanction and response. Sanctions and responses shall include a range of escalating responses for continued positive test results by an offender.
- B. Juvenile aftercare sanctions and responses include (See JCC OM 6.4.G.4 [Urinalysis Testing](#)):
 - 1. House Arrest or other restriction on the offender's movement or access.
 - 2. Community service.
 - 3. Substance abuse testing, evaluation, assessment or required programming/treatment.
 - 4. Electronic monitoring.
 - 5. Termination or removal from programming/treatment.
 - 6. Increased level of programming/treatment (inpatient).

7. Increased level of supervision.
 8. Increased frequency of testing.
 9. Other sanctions and responses deemed appropriate by the juvenile corrections agent (JCA) and/or juvenile corrections agent supervisor (JCAS).
- C. Parolee sanctions and responses may include the following (also see Parole Services OM 7.4.F.1 [Drug Testing](#)):
1. Increased level of supervision, including increased testing.
 2. Temporary return to custody or temporary detainment.
 3. Placement in or termination from Community Transition Program (See DOC policy 1.5.G.2 [Parole Services-Community Transition Program](#)).
 4. Revocation of parole/return to DOC custody.
 5. Substance abuse testing, evaluation, assessment or required programming/treatment.
 6. Termination/removal from programming/treatment.
 7. Electronic Monitoring.
 8. Placement on 24/7 Sobriety Program (Twice Daily PBTs, SCRAM, Remote Breath, or other approved monitoring technologies).
 9. Additional restrictions and treatment assignments in current chemical dependency treatment program.
 10. Sanctions imposed by Parole Service Staff in accordance with DOC policy 1.5.G.6 [Parole Services-Response to Violations](#).
- D. Inmate sanctions and responses (includes those housed in Community Work Centers). May include any of the following (also see SDCL §§ [24-2-9](#) and [24-15A-4](#)):
1. Imposition of fines, fees or costs (including medical copayments).
 2. Additional labor without compensation (extra duty).
 3. Restriction or loss of privileges.
 4. Loss of work.
 5. Required programming and/or treatment.
 6. Loss of good time (if applicable and subject to certain provisions).
 7. Placement in disciplinary housing or other restricted housing.
 8. Placement in dry cell.

9. Transfer to a more secure housing unit or institution.
10. Change in classification status.
11. Denial of parole release.
12. Termination/removal from chemical dependency treatment program.
13. Criminal charges and prosecution.

6. Chemical Dependency Treatment:

- A. Chemical dependency treatment and/or programming will be available for offenders with assessed treatment/programming needs, as determined by qualified professionals.
 1. Offenders housed in a DOC institution will receive a chemical dependency screening/evaluation for substance abuse and potential treatment needs as part of the intake process. Offenders with a known history of CD needs may not require separate screening or evaluation for each admission or violation resulting in the return to custody.
 2. Offenders may be referred for screening/evaluation at any time while in DOC custody or while on DOC supervision.
 3. Screening/evaluation within DOC institutions is based on DSM 5 criteria (or most current version). Results and findings will be reviewed by qualified treatment staff.
 4. Recommendations for response to an offender's treatment needs may be based on the following:
 - a. Severity of chemical dependency, as determined through clinical assessment.
 - b. Co-occurring diagnosis and needs.
 - c. Length of stay in custody.
 - d. Program availability.
 - e. Number of prior treatment commitments and program completions.
 - f. Classification risk level.
 - g. Screening/evaluation results.
 - h. Results of drug testing.
- B. Correctional case plans, individual treatment plans and release plans will take into consideration an offender's assessed treatment needs. Pre-release education will be offered to those with substance use disorders (ADA 4-4377).
- C. Referral to, and participation in community based chemical dependency programs, 12 Step Self-Help programs and aftercare discharge plans upon discharge/release is a priority for those identified with substance use disorders and treatment needs.

- D. Offenders participating in treatment and programming remain subject to random and targeted drug testing.

7. Report on Drug Test Results:

- A. Institutional staff, Parole Services and Division of Juvenile Services staff will document all drug tests administered to an offender in the Comprehensive Offender Management System (COMS), Substance Testing screen. All positive test results will be recorded in the *Tested* section of the Substance Testing screen in COMS.
- B. When counting the number of tests administered, each panel/test is not included as a separate test. If a panel tests for four (4) different drugs, this is counted as one (1) test.
 - 1. For example: During the reporting period there were 144 incidents where offenders had random 4 drug screens = 144 random tests; during same period there were 10 incidents where offenders had targeted 5 drug screens = 10 targeted tests; total number of tests during the period were 144 plus 10 = 154 tests.
 - 2. Positive tests for cannabinoids from offenders during the first forty-five (45) days following admission to a DOC institution are not to be included in the report, unless it is determined the offender used cannabinoids while incarcerated.
 - 3. Tests initially found to be positive, but later found to be negative through the results of a confirmation test or medical reason, are not to be counted as positive.

8. Testing Procedures:

- A. Each DOC unit responsible for conducting offender drug testing will ensure there is sufficient staff trained and available to conduct drug testing and to maintain documentation, tracking and reporting of drug testing, including ensuring the security and integrity of drug testing records and specimens. Staff shall be knowledgeable in the following processes and procedures:
 - 1. How to properly obtain a specimen from an offender, including proper use of approved testing equipment.
 - 2. Staff is responsible for ensuring the chain of evidence is maintained (ACA 4-4207). The process shall ensure the specimen is not altered or tampered with from the point of collection through final disposition. Staff will follow policy and best practice standards when collecting and storing evidence.
 - 3. Proper processing of a specimen. Includes the procedures and timelines for sending the specimen to the Public Health Lab for confirmation testing. Normally, specimens are sent to the Lab within thirty (30) days following collection of the specimen.
 - 4. Specimens that produce a positive result, or specimens suspected of being tampered with or illegitimate, may be retained short-term in a designated, secure refrigerated storage area dedicated solely for the storage of specimens. Only authorized staff will have access to stored specimens.
 - 5. Proper disposal of specimens and related testing materials.
 - 6. Safely conducting a PBT or a UA test (utilization of DOC approved protective gloves)

throughout the collection process and during the disposal of the sample is required). Universal Standard Precautions, in accordance with DOC policy 1.4.E.8 *Blood-Borne Pathogens and Infectious Disease Management* shall apply.

- B. Procedures and training curriculum will be reviewed by the DOC Training Director and designated staff on a regular basis. Training processes, information presented, and the topic curriculum shall be revised as needed, based on changes in policy, standards, accepted practices and protocols.

V Related Directives:

SDCL §§ [23-1-19.3](#), [24-2-9](#), [24-15A-4](#), [34-20B-14](#) and [34-20B-1\(22\)](#).

DOC policy 1.1.D.1 – [Staff Training Requirements](#)

DOC policy 1.1.D.2 – [Training for Juvenile Division Staff](#)

DOC policy 1.3.C.2 – [Inmate Discipline System](#)

DOC policy 1.4.B.13 – [LSI-R Assessment and Case Planning](#)

DOC policy 1.4.E.8 – [Blood-Borne Pathogens and Infectious Disease Management](#)

DOC policy 1.5.G.2 – [Parole Community Transition Program](#)

DOC policy 1.5.G.6 – [Response to Violations](#).

Parole OM 7.1.D.1 – [Training and Staff Development](#)

Parole OM 7.4.F.1 – [Drug Testing and Sanctions](#)

JCC OM 6.4.G.4 – [Urinalysis Testing](#)

VI Revision Log:

Removed revisions from August 2002-May 2009.

May 2010: Revised formatting of Section 1. **Added** reference to offenders in a DOC institution in ss (F of Drug Testing Standards). **Deleted** former ss (E of Report on Drug Test Results) regarding DOC Admin completing an annual drug test report.

May 2011: **Added** definition of Chain of Custody. **Deleted** “will be handled accordingly” and **Replaced** with “an admission of usage and a positive test result, the offender may be found guilty of a Prohibited act and may be subject to the to the institution’s disciplinary process.” in Section 1 F. **Deleted** “Each juvenile unit will use the UA Testing section within the Juvenile Offender Tracking System (JOTS) to randomly select which offenders to test.” and **Replaced** with “Each juvenile unit will use the Random Selection Report in COMS to randomly select which offenders to test.” in Section 1 D. 2. **Deleted** Parole agent response to a violation” and **Replaced** with “Responses as specified in DOC policy” in Section 4 B. 4. **Deleted** “Citrix” from Section 6 A. **Deleted** “Juvenile Offender Tracking System (JOTS)” and **Replaced** with “COMS” in Section 6 A. 1. **Added** G. Staff conducting a PBT or a urinalysis test will wear protective gloves throughout the collection process and disposal process.” to Section 1. **Added** H. “A newly received offender (including supervised release violators returned to custody) who tests positive for cannabinoids (marijuana plants and plant products that contain tetrahydrocannabinol, THC) on the first test performed within forty-five (45) days of incarceration will not be considered to have a positive UA.” to Section 1. **Added** In most cases, staff will request the State Health Laboratory conduct a “Four Panel” drug screen on all samples. The “Four Panel” drug screen is designed to detect the presence of Marijuana (THC), Opiates, Cocaine, and Amphetamines/Methamphetamines. A “Five Panel” drug screen may be requested in situations where the presence of alcohol is suspected. A “Five Panel” drug screen included all of the above listed substances in addition to testing for the presence of alcohol. **Deleted** “Dual diagnosis issues” and **Replaced** with “Co-Occurring diagnosis” in Section 5. A. 2. b.

June 2012: **Added** “medical or legal status, history” to definition of Targeted Testing” **Added** “Typically these tests are unscheduled and unannounced” to definition of Random Testing. **Added** definition of “Positive Result” and “Drug”. **Added** “staff training” and **Added** “based on security and programming needs” to Section 1 A. **Added** 1. 2. 3. to Section 1 B. **Added** “of

offenders” to Section 1 D. **Added** 4. to Section 1 D. **Added** “The offender may be found guilty of a Major Prohibited Act and/or may be subject to the institutions disciplinary process” in Section 1 E. **Added** “or fails to produce the minimum amount needed for the UA test, their actions” to Section 1 F. **Deleted** “incarceration” and **Replaced** with “admission to” in Section 1. G. **Added** “are found to have” in Section 1 G. 3. **Added** “DOC approved” to Section 1 H. and moved to Section 7. #5. **Added** “The offender may be found guilty of a Major Prohibited Act and/or may be subject to the institutions disciplinary process” in Section 1 H. **Deleted** “is under the influence of alcohol, marijuana, or unauthorized controlled substances” and **Replaced** with “has used any intoxicant or drug not authorized by medical staff” in Section 2 A. 1. **Added** new B. to Section 2 and **Renumbered** items that follow in Section 2. **Deleted** “controlled substances” and **Replaced** with “drugs” throughout the policy. **Added** “community service, work release or deployment to a natural disaster (including drills) and **Added** “when the offender is” and **Added** “and not under the direct supervision of staff” to Section 2 C. **Added** “(Example: offender has tested positive on a previous test or the offender is receiving or under consideration for certain types of medical treatment” to Section 2 C. 2. **Added** “as required by the” and **Deleted** “require a test” and **Replaced** with “or operational memorandums, or when the offender is suspected of using or possessing alcohol, or unauthorized drugs.” in Section 2 D. 1. **Added** “Only staff who have received the authorized training designed for the product may perform the testing” in Section 3 C. **Added** new A. “All positive drug/alcohol tests will result in an appropriate response, which may include a range of escalating sanctions for continued drug/alcohol use” in Section 4 **Renumbered** items that follow. **Added** “SCRAM” to Section 4 C. 11. **Added** “within the limitations imposed by available resources” in Section 5. A. **Added** b. to Section 5. **Added** “following their admission to DOC” and **Added** “in the report” and **Added** “unless the inmate was found to have used marijuana while incarcerated” in Section 6 B. 2. **Deleted** “because the original position was” in Section 6 B. 3.

January 2013: **Deleted** “the urinalysis (UA) testing section within the Inmate Records Citrix database and **Replaced** with “the Random Selection Report in COMS” in Section 1 D.1. **Deleted** “use the Parolee Automated Tracking System” (PATS) to randomly select which offenders to test” and **Replaced** with “determine procedures to ensure compliance with random testing requirements/standards for offenders on community supervision” in Section 1 D. 3. **Deleted** “Prohibited Acts #5-11 and **Replaced** with “offense in custody” in Section 1 E. and F. **Deleted** “will” and **Replaced** with “may” in Section 2 A. **Added** 5. to Section 2. **Deleted** “or education assignment when the offender is off DOC grounds or outside the security perimeter of a DOC facility and not under the direct supervision of staff” and **Replaced** with “or upon returning from a travel permit (if on community supervision) in Section 2 C. 1. **Added** “or community agencies in connection to or as part of treatment/aftercare programming the offender may be involved with” in Section 2 C. 3. **Added** “or community agencies” in Section 2 D. 1. **Added** “All related training shall be documented in the staff member’s training file” in Section 3. A. **Added** “Only staff who have received the authorized training designed for the product used may perform the testing” in Section 3 B. **Deleted** “Only staff who have received the authorized training designed for the product may perform the testing” in Section 3 C. **Deleted** “completed by the DOC and the results of the testing within their respective databases” and **Replaced** with “in the appropriate area of COMS assigned to the unit” in Section 6 A. **Deleted** 1. 2. 3. Regarding the areas where the data was previously entered in Section 6. A.

July 2013: **Deleted** 2. “All PBT testing equipment must be calibrated on a regular basis” in Section 1 B. **Deleted** “At least 3% of the unit’s population of offenders will be randomly drug tested each month” and **Replaced** with “A portion of the offenders in each unit will be identified to be drug tested each month” **Deleted** “compliance with random testing requirements/standards for” in Section 1 D. 3. **Added** J. and 1. & 2. to Section 1. **Added** “and training” in Section 3 C. **Added** “results” to Section 6 A. **Added** “or a subsequent negative finding by the State Health Lab” in Section 6 B. 3. **Deleted** C. and D. regarding a percentage of the population are tested each month. **Added** “the procedures and timelines for” and **Deleted** “a test lab” and **Replaced** with “the state health lab and determining when a sample will be sent to the state health lab” in Section 7 A. 3. **Added** “and apply Standard Precautions, in accordance with DOC policy” to Section 7 A. 5.

May 2014: **Added** 3. to Section 1 J. **Deleted** “identified to be drug tested each month” and **Replaced** with “targeted for drug testing each month” in Section 1 D. **Added** new Section 2 “Urinalysis Testing” **Added** “sufficient” in Section 2 A. **Deleted** “at the State Health Laboratory” and **Deleted** “After splitting the sample to conduct a field test, the original specimen container must contain at least 25 ml of urine” and **Added** “should the offender choose to request a confirmation test” in Section 2 C. **Deleted** “in most cases, staff will request that” and **Replaced** with “If a specimen is sent to the” and **Added** “sent to the lab for testing” and **Added** “tests for the presence of” in Section 2 D. **Deleted** “Additional” and **Replaced** with “Random” in Section 3 B. **Deleted** “or targeted population of offenders (adult or juvenile) with a unit” **Deleted** “irregular and unannounced targeted drug testing” and **Replaced** with “random testing” in Section 3 B. 2. **Added** “random or targeted” in Section 3 C. **Deleted** “for unauthorized drugs as a result of targeted drug testing” and **Added** “regardless of unit or housing assignment” in Section 3 D. **Deleted** “drug use” and **Replaced** with “positive drug test results” in Section 5 A. **Deleted** “All DOC units” and **Replaced** with “Institutional staff and Juvenile Community Corrections staff will” and **Added** “administered to offenders during the month” and **Added** “Positive tests will be tracked in Metrics and PBMS. Parole staff will document drug tests in accordance with Parole OM” in Section 7 A. **Deleted** “Operations Memorandum Development” and **Replaced** with “Testing Procedures and Training” in Section 8. **Deleted** “An operational memorandum will be maintained as needed at each DOC unit which outlines detailed” and **Replaced** with “Each DOC unit responsible for drug testing offenders will ensure staff are trained in and familiar with testing procedures/approved protocol” in Section 8 A. **Deleted** “The respective institution’s operational memorandum(s) and **Replaced** with “Procedures and training curriculum” and **Deleted** “annually and updated as needed” and **Replaced** with “on a regular basis and revised as needed based on changes in policy or accepted practices/protocol” in Section 8 B.

May 2015: **Added** definition of “Negative Result” **Deleted** “validate the results of the first test of the specimen” and **Replaced** with “a positive result/specimen. Confirmatory tests shall be conducted by the Public Health Lab” in definition of “Confirmation Test”. **Added** “and train” in Section 1 A. **Added** “no later than the end of their shift” in Section 2 G. **Deleted** “in each unit will be targeted for” and **Added** “either through a random selection of targeted; however, offenders will not be drug tested on the basis of sexual orientation, race, color, religion, gender, age or national origin” in Section 1 D. **Deleted** 2, 3, and 4 in Section 1 D. **Deleted** “Targeted” in title of Section 3 and **Added** A and changed numbering of section. **Deleted** all language in Section 6 B. and **Replaced** with new language in b. **Added** “Substance Testing” and “All positive test results will be recorded in the Tested section of the Substance Testing screen in COMS” in Section 7 A. **Deleted** “staff are trained and familiar with drug testing procedures and approved protocol” and **Replaced** with “there are sufficient staff designated and trained to conduct testing and provide for the integrity and security of records and specimens” in Section 8 A. **Added** “normally within 24 hours after collection” in Section 8 A. 3. **Added** 4. to Section 8 A.

May 2016: **Added** “charged with the management and supervision of offenders” in the policy statement. **Updated** definition of “DOC Offender” and “DOC Institution”. **Revised** definition of “Positive Result” and “Negative Result”. **Added** definition of “Marijuana” and “Specimen”. **Added** C. to Section 2. **Added** “(for offenders in DOC custody) in accordance with DOC policy 1.3.C.2 *Inmate Discipline System* or issue an approved sanction (for offenders on community supervision)” and **Deleted** “no later than the end of their shift” and **Added** “Law enforcement will be notified when appropriate” in Section 2 H. **Deleted** “field test” and **Replaced** with “screening test” in Section 2 I. **Added** “if the positive test result is for a substance tested for by the Public Health Lab (See the four panel test). Synthetic marijuana and/or controlled substance analogues are excluded from confirmation testing” in Section 2 J. **Added** D. to Section 3. **Added** e. to Section 3 A. 1.

Added “offender admission, finding of guilt or staff determination an offender has violated the zero tolerance policy in Section 5 A. **Deleted** D. in Section 5 referencing STAR. **Added** g. and h. to Section 6 A. 2. **Added** “and/or conducting a field test of the collected sample” in Section 8 A. 3.

May 2017: **Added** “an inmate placed on extension of confinement” to the definition of “Offender”. **Added** “The offender shall remain in a secured area (dry cell or other approved area) until he/she complies, or four (4) hours elapses” in Section 2 A. 1. **Added** D. to Section 2. **Added** “Offenders

must remain under constant observation of staff” to Section 2 E. **Added** “Staff shall directly observe the offender urinating into the test container. If staff do not observe the offender urinating into the container, that sample will not be accepted” in Section 2 F. **Added** “or the offender refuses to provide an adequate sample, or the offender provides a sample which has been altered or is not legitimate (use of synthetic urine)” and **Added** “Every positive result from an offender may result in sanctions and/or appropriate treatment for substance abuse” and **Deleted** “The positive urine specimen may be retained and stored in a designated and secure location” in Section 2 J. **Added** “May include reliable information from a confidential informant” in Section 3 A. 1. d. **Added** g. i. j. and m. to Section 3 A. 1. **Deleted** 3. and 4. and **Added** 8. 9. and 10. in Section 5 B. **Added** D. to Section 3. **Added** 3. to Section 5 c. **Added** 13. to Section 5 D. **Added** B. and D. to Section 6. **Added** “The process shall ensure the specimen is not altered or tampered with from the point of collection through the reporting of the test results” in Section 8 A. 2. **Added** “or samples that are suspected to be tampered with or not legitimate (synthetic urine)” in Section 8 A. 4.

May 2018: **Deleted** 1. in Section 6 D.

April 2019: **Revised** policy statement. **Deleted** “may be” and **Replaced** with “are” in Section 1 B. **Added** “If a positive result is obtained from an offender who has disclosed they are taking medications, this should be verified with the offender’s health care provider to ensure the medication does not influence drug tests and **Deleted** “The offender’s use of medically approved and prescribed medication should be verified with the offender’s health care provider, when possible” in Section 2 D. **Deleted** “gender” and **Replaced** with “sex” in Section 2 E. **Added** “and/or Special Investigations Unit staff” in Section 2 J. **Added** new K. to Section 2. **Added** “for staff to proceed with disciplinary action or to document” and **Deleted** “is obtained by a UA screening test administered by staff” in Section 2 L. **Added** “or some evidence to support” and **Added** “or is in possession” in Section 3 A. 1. a. **Added** “clothing or proximity of the offender” in Section 3 A. e. **Added** “as determined by a qualified medical provider” in Section 3 D. **Added** “and testing” in Section 4 A. **Added** “testing, evaluation and assessment” to Section 5 B. 3. **Added** “fees or costs (including copayments)” in Section 5 D. 1. **Added** Parole Services” to Section 7 A. **Deleted** “24 hours” and **Replaced** with “30 days” in Section 8 A. 3. **Added** “which is dedicated solely for the storage of specimens” in Section 8 A. 4.

July 2020: Update to definitions.

Mike Leidholt (original signature on file)

Mike Leidholt, Secretary of Corrections

07/13/2020

Date