

## **Extra-curricular Program - Drug Testing and Education Program Procedures**

**OVERVIEW:** Prosser School District offers a voluntary random Drug Testing and Education Program (DTEP) for students participating in extra-curricular activities. Its purpose is threefold: (1) to provide for the health and safety of all student participants while educating and directing them away from alcohol and drug abuse, (2) to undermine the effects of peer pressure by providing them a legitimate reason for students to refuse to use prohibited substances including illegal drugs, alcohol, or non-medical use of prescription drugs detrimental to their health and (3) to encourage students currently using alcohol or controlled substances to participate in treatment programs.

The program does not affect the current policies, practices or rights of the District regarding student drug and/or alcohol possession or use, where reasonable suspicion is established by means other than drug testing through this policy.

Students involved in extra-curricular activities need to be exemplary in the eyes of the community and other students. The drug testing and education policy is designed to create a safe, drug-free environment for students and assist them in getting help when needed. The drug testing and education policy is non-punitive. No student shall be suspended or expelled from school as a result of a positive test conducted under this program. No student shall be penalized academically as a result of a positive test conducted under this program. The results of drug tests pursuant to this policy will not be documented in a student's academic records. Drug test results will be maintained by the school principal or his or her designee in separate, confidential files, and will be available only to school personnel with direct responsibility for administering the drug testing program. Information regarding the results of drug tests will not be disclosed to criminal or juvenile authorities absent legal compulsion by valid and binding subpoena or legal process, which the District shall not solicit. In the event of service of any such subpoena or legal process, the student and the student's custodial parent or legal guardian will be notified at least 72 hours before response is made by the District.

### **DEFINITIONS:**

**Drug:** For the purposes of this policy "drugs" shall mean:

- A. All controlled substances as defined in Ch. 69.50 RCW, Washington's Controlled Substances Act;
- B. All chemicals which release toxic vapors;
- C. All alcoholic beverages;
- D. Tobacco and tobacco products;
- E. Any prescription or patent drug, except those for which permission to use in school has been granted pursuant to Board policy;
- F. Anabolic steroids;
- G. Any "look-alike" substances;  
Any other illegal substances so designated and prohibited by law.

**Extra-Curricular Activity:** Any school, club or activity, to include all competitive-type activities, listed in the student handbook and those not listed.

## **DRUG EDUCATION**

The advisor or coach of each extra-curricular activity will require the attendance of all prospective participants at one (1) or more drug education sessions instructed by a trained drug intervention specialist at the beginning of each year, season or session of the activity. Each prospective participant shall receive a copy of this policy and procedure. The drug testing and education policy will be explained during the drug education session. The drug education session will educate the student about the harmful effects and consequences of alcohol and other drug abuse. Student will be offered the opportunity to participate in the DTEP. Students will receive information as to where they can seek professional help, if needed, for a drug or alcohol use or abuse problem. All advisors and coaches will ensure that any “new” student or transfer to the district or program, receives the above required drug education session prior to participation in the event or activity.

### **PROCEDURES FOR STUDENTS:**

**Consent:** Each student wishing to participate in the voluntary DTEP, along with the student’s custodial parent or guardian, must consent in writing to drug testing pursuant to the District drug and alcohol testing and education program. Written consent shall be on the form provided by the District.

**Parental Issues:** Parents or guardians who do not want their child to participate in the DTE Program will be allowed to exclude a student from the drug testing program; however, an opt-out form must be signed by both the parent and the student.

**Alcohol Testing:** The District will use an alcohol analyzer from the Conforming Products List generated by the National Highway Safety Administration that test for alcohol. The analyzer will be used anytime there is a question about an individual student’s possible alcohol use. Only trained personnel will administer the test.

**Other Controlled Substances:** At the option of the District, all students participating in the DTEP may be drug tested at the beginning of the time of entry to the program. In addition, random testing may be conducted during the year and students may be selected for testing during the season.

**Selection Pool:** Selection for random testing will be by random drawing from a pool of students participating in the DTEP.

**Additional Procedures:** The Superintendent shall take all reasonable steps to assure the integrity and confidentiality of the testing process provided for in this policy.

### **SAMPLE COLLECTION:**

Urine samples may be collected at school or at a designated collection site at a time selected by the school administration. All samples will be collected following Substance Abuse Mental Health Services Administration (SAMHSA) guidelines which call for an unobserved urine collection under controlled conditions. Random testing or specific student testing will occur after the student’s name is picked randomly prior to the day of the test. If the student is absent on the

testing day their name will be placed in the next testing pool. If a student is unable to produce a sample at any particular time, he/she may be given up to 24 ounces of fluid to drink and directed to remain at the collection site for up to two hours. The student must remain within the collection site under observation to discourage action which could compromise the collection process (drinking excessive fluids, obtaining “clean” urine, obtaining adulterants, etc.) If after a period of two hours the donor is still unable to provide an adequate sample, the collection will be discontinued and the District notified of the “shy bladder” situation. The Superintendent may determine to use other drug testing methods other than or in addition to, urine collection (e.g. saliva, sweat, etc.), which offer benefits to our students and District.

Procedures in the event of a shy bladder situation: If a student is unable to provide a urine sample within two hours of being given 24 ounces of fluid, he/she will be referred to a Medical Review Officer (MRO) to determine if there is a medical reason for failure to void. If the physician determines there is no medical reason, the consequences will be as if there had been a positive result.

Procedures in the event of sample tampering or adulteration: If during the collection or testing process it is determined that a student made an attempt to adulterate or tamper with the urine sample, the consequences shall be as if the student had a positive result.

### **TESTING / ANALYTICAL PROCEDURES**

All samples will be sent to a SAMHSA certified laboratory where the testing will be done following established federal guidelines and using mandated cutoff levels for both the screening and confirmatory procedures. Each specimen undergoes an integrity check for dilution and adulterants. The sample is then screened using immunoassay technology. If this initial determination is found to be negative, the results will be reported as negative. If the initial drug screen is positive, a new aliquot will be taken from the original specimen. This aliquot is then tested by Gas Chromatography / Mass Spectrometry (GC/MS) for the specific drug found positive on the screen. If the GC/MS result is negative, the drug test is considered negative. If the result is positive by both immunoassay and GC/MS conformation and all relevant quality control data is in order, the drug test will be considered positive and reported to the Medical Review Officer (MRO) appointed by the Board of Directors.

### **PRESCRIPTION MEDICATION**

Students who are taking prescription medication or who have eaten foods containing poppy seeds within the last three days may provide this information to the laboratory on their Drug Screen Requisition Form at the time of collection. While the information is not necessary for testing purposes, some medications and food substances may be detected. The medication or digestive history of the student may be helpful to assure the proper interpretation of the laboratory findings. Such information provided by the student will not be disclosed to any school official. These findings will be discussed with the student by the MRO. Depending on the discussion and test results, the MRO may request a copy of the prescription or physician’s verification to confirm or override the laboratory findings.

### **RESULT REPORTING**

The testing laboratory will report results only to the authorized high school principal or designee. Negative results will be forwarded directly from the laboratory to the authorized individual. Positive results requiring the MRO's review will be sent to the designated physician first, who will review and discuss the findings with the student. The students who tested positive will have 48 hours to contact/visit the doctors at the designated contracted clinic. Following that review and discussion, the MRO will forward his/her findings to the high school principal or designee.

### **SCOPE OF TESTS – ILLEGAL DRUG AND ALCOHOL**

The testing lab will be instructed to test for one or more prohibited substances including, illegal drugs or alcohol or non-medical use of prescription drugs. The Superintendent shall decide which drugs will be screened. Student samples will only be screened for the presence of drugs. Student samples shall not be screened for substances other than drugs or for any physical condition other than drug intoxication.

### **LIMITED ACCESS TO RESULTS**

The laboratory and the MRO will be authorized to report results only to the high school principal or to such person as the principal may designate.

### **PROCEDURES IN THE EVENT OF A POSITIVE RESULT**

**Presence of Drugs:** Whenever a student's test results indicate the presence of a drug or drugs it will be deemed a positive result. In the event of a positive result the following shall occur:

**Medical Review Officer:** The results will be sent from the laboratory to the MRO. It is the job of the MRO to evaluate the test results and to consult with the student to ascertain if medication or dietary considerations could be the cause of the positive result. A student shall not be considered to have a positive result if the sample provided by the student indicates only the presence of a drug that has been prescribed to the student. The MRO may take up to 72 hours to reach the donor and to complete the evaluation before the District is notified. At the request of the student, his or her parent may participate in this consultation/discussion. An aliquot of the student's original sample will be sent by the District to the same SAMHSA certified laboratory that conducted the initial testing for additional testing upon written request from the student or his or her parent or guardian presented to the District within 72 hours of the District's notification of a positive result. Any such additional testing will be at the parent or legal guardian's expense unless the results are negative.

**Alcohol:** If the breath alcohol analyzer result is positive, a second test will be given 15 minutes later to confirm the result.

### **FIRST VERIFIED POSITIVE RESULT**

For the first verified positive result for either alcohol or illegal drugs, the student will be referred to the Intervention Specialist. The student will be excluded from participating in extracurricular programs until the student is able to demonstrate adherence to the recommendations of the Intervention Specialist and submits to a drug test in accordance with the procedures set forth in this policy that indicates a negative result/the absence of drugs. The cost of retesting to regain eligibility to participate in extracurricular programs will be at the expense of the District.

### **SECOND VERIFIED POSITIVE**

A second verified positive result that occurs at any time during the student's school career will result in the student being excluded from participating in extra-curricular programs for one calendar year. Prior to reinstatement, the student must complete a drug and alcohol abuse evaluation with the Intervention Specialist, and demonstrate compliance with all recommendations of the Intervention Specialist, and submit to a drug test in accordance with the procedures set forth in this policy that indicates a negative result/the absence of drugs. The District shall be responsible for the cost of any such drug test. Any additional verified positive results for separate incidents will also result in a successive one calendar year exclusion and compliance with all Intervention Specialist recommendations. The cost of retesting to regain eligibility will be at the expense of the student and/or parent.

Further Procedures: The Superintendent shall establish such other administrative guidelines and appeal procedures necessary to implement this policy.

Implemented in the 2018/19 school year

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**EXTRA-CURRICULAR ACTIVITY  
DRUG TESTING CONSENT AUTHORIZATION and WAIVER**

I understand as a participant in extra-curricular activities that my performance, my health and the reputation of my school are depending, in part, on my conduct as an individual. I hereby agree to accept and abide by the standards, rules and policies set forth by the Prosser School District Board of Directors and the appointed leaders for activities in which I participate.

I (the student) knowingly authorize and freely give consent to the Prosser School District to conduct tests on urine specimens which I provide (or other such tests as administered), for the use of drugs as that term is defined in Policy/Procedure No. 3245. I also authorize the use of a breathalyzer test or other drug test as needed. I give my consent without coercion, force or intimidation. I agree to fully accept the consequences as detailed in Policy/Procedure 3245 if I test positive for drugs or alcohol. I understand that the release of information concerning the results of such tests will be made by the testing agency only to the following representatives of the Prosser School District: the District's Medical Review Officer or the principal (or designee) at my school. This consent form shall be deemed a consent pursuant to the Family Education Right to Privacy Act for the release of the above information to the parties named above. This authorization will be in effect throughout my entire career at Prosser School District or until it is revoked verbally and/or in writing by me and my parent or guardian.

Please check one of the following choices:

I consent to fully participate in the Voluntary Drug Testing & Education Program as detailed in Policy/Procedure No. 3245 and this consent authorization, as part of our commitment to provide a drug and alcohol-free extra-curricular program at Prosser School District.

I do not consent to participate in the District's Voluntary Drug Testing Program.

Print Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Parent Name: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NON-PUNITIVE NATURE OF POLICY**

No student shall be penalized academically for testing positive for alcohol or illegal drugs. The results of drug tests pursuant to this policy will not be documented in any student's academic records. Drug test results will be maintained by the school principal or his or her designee in separate, confidential files, and will be available only to school personnel with direct responsibility for administering the drug testing program. Information regarding the results of drug tests will not be disclosed to criminal or juvenile authorities absent legal compulsion by valid and binding subpoena or legal process, which the District shall not solicit. In the event of service of any such subpoena or legal process, the student and the student's custodial parent or legal guardian will be notified at least 72 hours before response is made by the District.

*Please list below the extra-curricular activities in which the student will be participating. This must be updated each season or activity if additional extra-curricular activities are added:*

Sports/Activities Student is participating in: \_\_\_\_\_

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**HIPPA AUTHORIZATION FORM**

Patient's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Student's Name – Please Print)

Address: \_\_\_\_\_ City, State \_\_\_\_\_

I hereby authorize Prosser Memorial Hospital Medical Center to disclose the protected health information regarding the above-named patient to: MRO (Medical Review Officer) authorized principal or designee (need-to-know person only).

My protected health information will be used and/or disclosed upon request for the purpose of reviewing the results of alcohol and other drug tests. Information obtained with this authorization will be used solely for this purpose and will be limited to the minimum information necessary to achieve the stated purpose.

This authorization for use and/or disclosure applies to the information described below:

**[X] Result of alcohol and other drug tests**

I understand that the information used or disclosed may be subject to re-disclosure by the person or class of persons or facility receiving it and would then no longer be protected by federal privacy regulations.

I may revoke this authorization by notifying Prosser School District in writing of my desire to revoke it. However, I understand that any action already taken in reliance on this authorization cannot be reversed and my revocation will not affect those actions. I understand that the medical provider to whom this authorization is furnished may not condition any treatment of me on whether or not I sign the authorization.

This authorization is good for the entire time your student is enrolled in the Prosser School District or until an opt-out letter is on file.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Relationship to Student:     Parent  
    Legal Guardian\*  
    Holder of Power of Attorney\*

\* Please attach legal documentation if you are the legal guardian or holder of power of attorney.