Drug and Alcohol Policy

The campus is committed to the development and implementation of a comprehensive drug and alcohol-free program to create a cost-effective, safe, and healthy workplace and school. Therefore, the campus has adopted a "Drug and Alcohol-Free Program" in compliance with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act Amendment of 1989 (including Section 22, Drug-Free Schools and Campuses). This program is consistent with guidelines developed by the Substance Abuse and Mental Health Services Administration (SAMHSA) and is intended to cover both employees of the institution and students who are attending classes and working in clinical rotation sites and other campus-arranged workplace experiences. Use or possession of alcohol and illegal use or possession of illicit controlled drugs or being under the influence of these substances while on campus premises or while engaged in institution-sponsored activities is prohibited.

Standards of Conduct

- Consumption of alcohol is prohibited on all campus and externship/clinical sites.
- Drug usage, other than over-the-counter drugs and prescription medications used in accordance with a doctor's prescription, is prohibited while serving as an employee or student representative of the Institution, whether on- or off-campus.
- The unlawful use, possession, manufacture, or distribution of controlled substances on any campus or externship/clinical site is strictly prohibited.
- The operation of any vehicle or machinery for institution business or training while under the influence of alcohol or drugs is strictly prohibited.
- The sale of drugs or alcohol on any campus or externship/clinical site is prohibited.
- The campus reserves the right to conduct drug and/or alcohol testing for preemployment/enrollment, reasonable suspicion, and post-accident. In the case of an employee or student with a prior violation for drugs or alcohol or is subject to DOT rules, those individuals will be subject to random screening, and they will be notified of that condition.

Note: The term "Campus" also encompasses any school sanctioned activity/function.

Sanctions

Legal

The Institution will comply with all federal, state, and local laws and policies regarding the abuse of alcohol and other drugs by its employees and students. In addition to disciplinary sanctions imposed by the institution, all employees and students should be aware that federal, state, and some local laws treat illegal possession, use, sale/distribution, or manufacturing of drugs or alcohol as serious crimes that can lead to imprisonment, fines, and assigned community service. Resulting convictions can prevent a person from entering certain fields of employment and may have to be listed on employment applications.

The possession, use, or distribution of illegal drugs is prohibited by federal law. There are strict penalties for drug convictions, including mandatory prison terms for many offenses. For a listing of

federal offenses, penalties and sanctions, visit the Department of Justice / U.S. Drug Enforcement Administration- Office of Diversion Control website at http://www.deadiversion.usdoi.gov/21cfr/21usc/index.html.

Institutional

Sanctions the Institution will impose:

- Any employee or student found consuming alcohol or drugs on any campus or externship/clinical site shall be subject to disciplinary action.
- Any employee or student found using, possessing, manufacturing, or distributing illegal drugs or transferring alcohol or drugs during normal working/school hours on any campus or externship/clinical site shall be subject to disciplinary action.
- Any employee or student who reports to work or class under the influence of alcohol or drugs shall not be permitted to remain on campus or the externship/clinical site and will be escorted home. The employee or student shall also be subject to disciplinary action.
- Consistent with the Drug-Free Workplace Law, as a condition of employment, all employees are required to abide by the terms of this policy and notify Human Resources of any criminal drug conviction for a violation occurring in the workplace no later than five (5) days after such conviction.
- Compliance with this policy is considered a condition of employment and/or acceptance for study; therefore, if an employee or student violates this policy, discipline will be assessed accordingly and the individual could be subject to termination or expulsion or referral for prosecution.
- In all cases, the Institution abides by local, state, federal, and where applicable DOT sanctions regarding unlawful possession of drugs in prohibited areas and/or the use of alcohol by individuals who have not attained the legal drinking age. Any drug identified by the law as illegal is included in this program, as are legal prescription drugs used in a manner contrary to a doctor's prescription.
- In the event of a failure of a drug or alcohol screen, a DOT student or employee must be cleared by a substance abuse professional.

Counseling/Treatment

The Institution supports programs aiding in the prevention of substance abuse. Students and employees are encouraged to seek assistance for substance abuse problems. Many health insurance plans include drug, alcohol, and mental health services. If you need help in finding a treatment center, the Federal Substance Abuse & Mental Health Services Administration (SAMHSA) offers a free service to help locate a facility. The toll-free Treatment Referral Hotline can be reached 24 hours a day, 7 days a week: 1-800-622-HELP (4357). Their treatment facility location can be accessed online at https://www.samhsa.gov/find-treatment.

Data and Health Risks

The entire section listed below comes directly from samhsa.gov, 2020

Alcohol

Data:

- The 2018 National Survey on Drug Use and Health reports that 139.8 million Americans age 12 or older were past month alcohol users, 67.1 million people were binge drinkers in the past month, and 16.6 million were heavy drinkers in the past month.
- About 2.2 million adolescents aged 12 to 17 in 2018 drank alcohol in the past month, and 1.2 million of these adolescents binge drank in that period (2018 NSDUH).
- Approximately 14.8 million people age 12 or older had an alcohol use disorder (2018 NSDUH).
- Excessive alcohol use can increase a person's risk of stroke, liver cirrhosis, alcoholic hepatitis, cancer, and other serious health conditions.
- Excessive alcohol use can also lead to risk-taking behavior, including driving while impaired. The <u>Centers for Disease Control and Prevention</u> reports that 29 people in the United States die in motor vehicle crashes that involve an alcohol-impaired driver daily.

Opioids

Data:

- An estimated 808,000 people had used heroin in the past year, based on 2018 NSDUH data.
- In 2018, there were 10.3 million people age 12 or older who misused opioids in the past year. The vast majority of people misused prescription pain relievers (2018 NSDUH).
- An estimated 2.0 million people aged 12 or older had an opioid use disorder based on 2018 NSDUH data.
- Opioid use, specifically injection drug use, is a risk factor for contracting HIV, Hepatitis B, and Hepatitis C. The <u>CDC</u> reports that people who inject drugs accounted for 9 percent of HIV diagnoses in the United States in 2016.
- According to the <u>Centers for Disease Control and Prevention's Understanding the Epidemic</u>, an average of 130 Americans die every day from an opioid overdose.

Marijuana

Data:

- 2018 NSDUH data indicates that 43.5 million Americans aged 12 or older, 15.9 percent of the population, used marijuana in the past year.
- Approximately 4.4 million people aged 12 or older in 2018 had a marijuana use disorder in the past year (2018 NSDUH).
- Marijuana can impair judgment and distort perception in the short term and can lead to memory impairment in the long term.
- Marijuana can have significant health effects on youth and pregnant women.

Emerging Trends in Substance Misuse:

• **Methamphetamine**—Methamphetamine use has risen in the United States. In 2018, NSDUH data show that approximately 1.9 million people used methamphetamine in the past year. Approximately 1.1 million people had a methamphetamine use disorder, which was higher than the percentage in 2016, but similar to the percentages in 2015 and 2017. The National Institute on Drug Abuse reports that overdose death rates involving

- methamphetamine have quadrupled from 2011 to 2017. Frequent meth use is associated with mood disturbances, hallucinations, and paranoia.
- **Cocaine**—In 2018, NSDUH data show an estimated 5.5 million people aged 12 or older were past users of cocaine, including about 775,000 users of crack. The <u>CDC reports</u> that overdose deaths involving have increased by one-third from 2016 to 2017. In the short term, cocaine use can result in increased blood pressure, restlessness, and irritability. In the long term, severe medical complications of cocaine use include heart attacks, seizures, and abdominal pain.
- **Kratom**—Kratom is a tropical plant that grows naturally in Southeast Asia with leaves that can have psychotropic effects by affecting opioid brain receptors. It is currently unregulated and has risk of abuse and dependence. The National Institute on Drug Abuse reports that health effects of Kratom can include nausea, itching, seizures, and hallucinations.

Review and Distribution

This policy will be reviewed biennially (in even-numbered years) to determine its effectiveness. During the review, an analysis of the effectiveness of the methodology will be reviewed in addition to the sanctions imposed therein. The policy will be distributed to employees and students on an annual basis by October 1st. Employees and students will receive email notification annually from the Campus President or their designee.