



COUNTYWIDE REASONABLE SUSPICION DRUG AND ALCOHOL TESTING REQUIRED DOCUMENTS

Below are descriptions of all the required documents to complete a Reasonable Suspicion Drug and Alcohol Test. All required documents are included in this packet. Click on the name of a document below, and it will take you to that page. Separate copies of these documents are also available on the DHR-OHP website, please [click here](#) to access.

1. Countywide Reasonable Suspicion Procedures

The Countywide Reasonable Suspicion Procedures is a guide for completing all the necessary and required steps when an employee is under Reasonable Suspicion. *Managers and Supervisors are not required to return this document to OHP.*

2. Countywide Reasonable Suspicion Checklist

The Countywide Reasonable Suspicion Checklist is a document that must be completed by a supervisor or manager who has completed the County's Reasonable Suspicion Procedure training and has personally observed the employee's appearance and behavior(s) resulting in a request for reasonable suspicion drug and alcohol testing. *This document must be provided to OHP.*

3. Countywide Reasonable Suspicion - Notice of Requirement

The Countywide Reasonable Suspicion - Notice of Requirement document must be presented to the employee under Reasonable Suspicion and the employee must sign the form before they are taken for testing. If the employee refuses or declines to sign the Notice of Requirement, do not take them for testing. Continue with obtaining all required forms, including the Notice of Requirement which indicates the employee's refusal to sign, and forward them to OHP. *This document must be provided to OHP.*

4. Countywide Reasonable Suspicion - Notice to OHP

The Countywide Reasonable Suspicion - Notice to OHP form is a template to be used by Departments whenever an employee is under Reasonable Suspicion. The Notice to OHP must be completed on your Departmental letterhead. *This document must be provided to OHP.*

5. Countywide Drug and Alcohol Testing - Work Order

This work order must be completed and taken to the collection site with the employee. You must indicate the type of test on this form as this form is also utilized for Department of Transportation (DOT) Random Drug and Alcohol Testing. For Reasonable Suspicion testing, you simply check the Non-DOT – Reasonable Suspicion box. *A copy of this document must be provided to OHP.*

6. List of ASAP Drug and Alcohol Testing Locations

The Los Angeles County, Department of Human Resources contracts with American Substance Abuse Professional Drug Solutions, Inc. (ASAP) to provide drug and alcohol specimen collection and laboratory testing services. Be sure to only send employees to the testing locations that offer the services you are seeking (e.g., DOT, Non-DOT, and Reasonable Suspicion testing).

7. Countywide Reasonable Suspicion - Witness Affidavit

The Countywide Reasonable Suspicion – Witness Affidavit is intended to be completed by any Witness(s) who is not the Primary Observer. *All Witness Affidavits must be provided to OHP.*



COUNTYWIDE REASONABLE SUSPICION PROCEDURES

***Note: Reasonable Suspicion Drug and Alcohol Testing
must be completed within four (4) hours of observation.***

<p>1. When a supervisor or manager witnesses or is informed of an employee who appears to be impaired or exhibiting concerning behavior(s), you must first obtain approval from your Departmental Human Resources (HR) or Employee Relations (ER) to proceed with the Reasonable Suspicion procedures.</p> <p>If the Departmental HR or ER personnel are not available, the supervisor or manager must proceed with the Reasonable Suspicion procedures and document the reason for not being able to obtain prior approval.</p>	<p>Initiated the Reasonable Suspicion procedures and documented attempt(s) to reach out to HR/ER personnel.</p>
<p>2. Before you speak to the employee, the Reasonable Suspicion Checklist (RSC) must be completed by two (2) trained supervisors or managers. If the RSC is completed by only one (1) trained supervisor or manager, an explanation must be documented.</p>	<p>RSC is completed by one (1) or two (2) trained supervisor(s) or manager(s).</p>
<p>3. The observing supervisor or manager must complete the following in the stated order:</p> <ol style="list-style-type: none">On the day of the observed impairment the supervisor or manager must meet with the employee under suspicion of impairment to discuss the observations that led to this referral.Provide the employee with a copy of the signed RSC.Inform the employee of their right to representation. The employee must be allowed a reasonable time frame to secure a representative to attend the meeting so as to not delay the reasonable suspicion testing process.Proceed with the completion of the Reasonable Suspicion Procedure.	<p>Met with employee.</p> <p>RSC provided to the employee.</p> <p>Employee is informed of their right to representation.</p>



4. During the supervisor's or manager's meeting with the employee under reasonable suspicion and regardless as to whether the employee elected or declined representation, the employee must be given the opportunity to provide an explanation regarding observations of their concerning behavior(s).

Regardless of the employee's explanation, proceed to Step 5.

Employee is given an opportunity to explain and/or provide a written response. The observing supervisor or manager documented the employee's explanation.

5. The supervisor or manager must provide the employee with a copy of the ***Notice to Employee of the Requirement to Submit to Reasonable Suspicion Drug and Alcohol Testing***. If the employee refuses to review and sign this notice, document their refusal on this notice and proceed to Step 6.

The Notice to Employee of the Requirement to Submit to Reasonable Suspicion Drug and Alcohol Testing is reviewed and signed by the employee.

6. The supervisor or manager must complete the ***Reasonable Suspicion Drug and Alcohol Testing Work Order*** and provide it to the authorized departmental representative who will accompany the employee to the collection site.

Completed the Reasonable Suspicion Drug and Alcohol Testing Work Order.

7. The supervisor/manager must arrange transportation to and from the collection site (unless on-site collection has been arranged) by an authorized departmental representative or a transportation service.

An authorized person, other than the employee's immediate supervisor, **must** confirm that the employee has a photo identification (e.g., Driver's License or County ID) prior to accompanying the employee to the collection site, unless both employee and supervisor agree the employee's immediate supervisor is the most suitable person to accompany the employee.

Transportation to and from the collection site for the employee was arranged.

Authorized Departmental representative accompanying employee has a copy of the Work Order.

Confirmed the employee has photo identification.



<p>8. At the collection site, the authorized departmental representative must provide the <i>Reasonable Suspicion Drug and Alcohol Testing Work Order</i> to the collection site's staff.</p> <p>The employee must present photo identification, or the department representative must confirm the employee's identity.</p> <p>The employee must provide a urine specimen and complete a breath alcohol test (BAT) in accordance with the collection site's collection procedures.</p>	<p>Authorized departmental representative provided the <i>Reasonable Suspicion Drug and Alcohol Testing Work Order</i> to the collection site's staff.</p> <p>The employee's identity was confirmed by the collection site's staff.</p> <p>The employee provided a urine specimen and completed the BAT.</p>
<p>9. If there are additional witnesses to the employee's impairment, the supervisor or manager who completed the RSC must instruct those witnesses to complete an affidavit documenting their observations.</p> <p>The supervisor or manager who completed the RSC, or their designee, must forward completed copies of the Notice to OHP of Reasonable Suspicion Drug and Alcohol Testing, RSC, and witness affidavit(s) to OHP via email at ohp@hr.lacounty.gov.</p>	<p>Email OHP the following:</p> <p>Notice to OHP of Reasonable Suspicion Drug and Alcohol Testing</p> <p>RSC</p> <p>Witness Affidavit(s)</p>
<p>10. The supervisor/manager must arrange transportation to the and from the collection site (unless on-site collection has been arranged).</p>	<p>The employee must not drive after the Reasonable Suspicion procedures have been initiated.</p>
<p>11. Upon receiving and reviewing the laboratory report, OHP will provide a final results letter to the employee and Department Head (or designee) within four (4) business days from the time of the specimen collection.</p>	<p>Final Results Letter will be sent by OHP.</p>



COUNTYWIDE REASONABLE SUSPICION CHECKLIST

Note: This document must be completed by a supervisor or manager who has been trained in the County's Reasonable Suspicion Procedure and has personally observed the employee's appearance and behavior(s) resulting in a request for reasonable suspicion drug/alcohol testing.

EMPLOYEE REFERRED FOR REASONABLE SUSPICION TESTING

Full Name (last, first, middle)		Employee ID No.	e
Job/Classification Title			
Department			

PRIMARY OBSERVER INFORMATION

Full Name (last, first, middle)		Employee ID No.	e
Job/Classification Title			
Department			
Work Telephone Number			
Work Email Address			

SECONDARY OBSERVER INFORMATION

Full Name (last, first, middle)		Employee ID No.	e
Job/Classification Title			
Department			
Work Telephone Number			
Work Email Address			

DATE & LOCATION OF OBSERVATION

May be completed by either Primary or Secondary Observer.

Date of Observation		Time of Observation	
Location of Observation			
Address			
City		State	
		Zip Code	



OBSERVATIONS

Please check all the observations that apply.

Quality of Speech

Normal

Loud

Slowed

Rapid

Soft

Slurred

Pressured

Silent

Nature of Speech

Normal

Confused

Hostile

Non-Sensical

Paranoid

Level of Alertness

Normal

Drowsy

Energetic

Mood

Normal

Elated/ "Up"

Fearful

Anxious

Irritable

Angry

Sad/ "Down"

Movements

Normal

Slowed

Quickened

Uncoordinated

Shaking

Aggressive

Walking

Normal

Stumbling

Falling

Holding, Reaching

Balance

Normal

Swaying

Staggering

Falling

Nose

Sniffing

Runny

Reddened

Eyes

Reddened

Pupils Constricted

Pupils Dilated

Breath

Alcohol-Like

Chemical Odor

"Burnt Rope" Odor



EXPLANATION OF OBSERVED BEHAVIORS

Please use plain language to describe and further explain any of the behaviors that were checked in the section above.

ADDITIONAL NOTES/OBSERVATIONS

Please provide any additional details to support your request for a reasonable suspicion referral.

ATTESTATION

I certify that I hold the position of supervisor or higher with the County of Los Angeles, and that I have completed the training on Reasonable Suspicion. I also certify that based on my observation, I believe that reasonable suspicion exists to require the above employee to undergo testing for drugs and/or alcohol.

Primary Observer's - Printed Name	
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Primary Observer's Signature		Date	
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Secondary Observer's - Printed Name	
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Secondary Observer's Signature		Date	
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PLEASE SUBMIT AN ELECTRONIC COPY OF THIS DOCUMENT TO OCCUPATIONAL HEALTH PROGRAMS IN THE DEPARTMENT OF HUMAN RESOURCES AT: OHP@HR.LACOUNTY.GOV



COUNTYWIDE NOTICE TO EMPLOYEE OF THE REQUIREMENT TO SUBMIT TO REASONABLE SUSPICION DRUG AND ALCOHOL TESTING

Date this Notice was Provided to the Employee	
Name of the Employee Receiving the Notice	
Employee's Department	

The County of Los Angeles' (County) Drug-Free Workplace Policy 9.050 strictly prohibits the use, possession, selling, or sharing of drugs or alcohol by employees, contract personnel, and others responsible for carrying out the County's business while in the workplace or on duty. This policy further prohibits being under the influence of any substance that causes impairment or that adversely impacts the individual's ability to perform their job duties safely and effectively and may adversely affect the health, safety, security, and productivity of the County's workforce, as well as undermine public trust and confidence.

This policy also authorizes a County department to initiate the County's Reasonable Suspicion Drug and Alcohol Testing procedures when a direct observation is made concluding that there is a reason to believe that the employee is impaired due to drugs and/or alcohol. The term "drugs" refers to any and all controlled substances that are taken outside of a valid prescribed use as authorized by the Controlled Substances Act. A copy of this policy accompanies this notice.

Observations reported to the Department, as documented by a supervisor or manager in the Reasonable Suspicion Checklist document provided to you on _____ support the Department's decision to refer you for reasonable suspicion drug and alcohol testing.

Accordingly, you are required to undergo both a urine drug test and a breath alcohol test (BAT) immediately and without unnecessary delay.

SUBSTANCES SCREENED FOR

The drug and alcohol tests will screen for the following substances:

1. Amphetamines and Methamphetamines
2. Benzodiazepines (for example, Valium, Librium)
3. Barbiturates (for example, Fiorinal)
4. Cocaine
5. Methadone
6. Methaqualone (for example, Quaalude)
7. Opiates (for example, Tylenol #3, Codeine)
8. Phencyclidine (PCP)
9. Marijuana
10. Alcohol (BAT)



REFUSAL TO SUBMIT TO REASONABLE SUSPICION DRUG AND ALCOHOL TESTING

Refusing to consent to reasonable suspicion drug and alcohol testing and/or failure to provide a urine specimen and BAT within four (4) hours from the time of the observed behavior may subject you to disciplinary action, up to and including discharge by your Department, for being under the influence of drugs and/or alcohol based on your refusal and documentation of your behavior(s).

URINE COLLECTION AND TESTING

You will be required to provide a urine specimen in a manner that respects your privacy and dignity but also prevents potential tampering, adulteration, or substitution of the urine specimen. You must provide enough urine (about ¼ cup) so that the sample can be divided into two bottles. Both specimen bottles will be sealed in your presence and will be transported to a certified drug testing laboratory. The laboratory will unseal the first bottle and will use that specimen to conduct the drug test.

If the urine specimen you provide yields a positive drug test result, a Medical Review Officer (MRO) must review and discuss the test results with you prior to making a final determination. The MRO will advise you of your right to have the second specimen bottle to be tested at a different certified laboratory within 72 hours after the discussion between you and the MRO.

BREATH ALCOHOL TEST (BAT)

You will be required to breathe into a breath alcohol device to determine your blood alcohol concentration (BAC) at the time of testing.

FINAL RESULTS

After the MRO completes their assessment, you will receive a letter from the Department of Human Resources, Occupational Health Programs informing you of the final results of the drug and alcohol testing and a copy of the laboratory result(s).

Your Department will be notified of the final results and will contact you directly to discuss any applicable next steps.

I RECEIVED A COPY OF THIS NOTICE AND UNDERSTAND ITS CONTENTS, INCLUDING MY RIGHT TO REPRESENTATION AND TO OBTAIN A NO-COST TEST OF THE SECOND BOTTLE SAMPLE IF THE SPECIMEN RESULTS FROM THE FIRST BOTTLE ARE POSITIVE.

Employee's Printed Name	
Employee's Signature	
Date and Time	



TEMPLATE NOTICE LETTER TO OHP

(To be provided on Official Departmental Letterhead)

Date

Occupational Health Programs
Department of Human Resources
Attn: Reasonable Suspicion Testing Unit

Sent via email to ohp@hr.lacounty.gov

CONFIDENTIAL NOTICE TO DHR/OHP

COUNTYWIDE REASONABLE SUSPICION DRUG AND ALCOHOL TESTING

Based on direct observation, The Department (Name of Department) has reasonable suspicion that the employee named below is under the influence of drugs/alcohol while on duty or when reporting to duty and their ability to perform their duties is impaired. Therefore, the Department is ordering the employee to undergo reasonable suspicion drug and alcohol testing.

Employee Name (last, first, middle initial)	
Employee ID	e-
Employee's Job Title / Classification	
Employee's Assigned Work Location at the time impairment was observed	
Testing Site Used for Specimen Collection	

Should you need additional information regarding this notice, please contact the following individual:

Printed Name of Departmental Representative	
Signature of Departmental Representative	
Email Address	
Phone Number	



20300 S. Vermont Ave. (888) 691-TANG
Torrance, CA 90502 tangandcompany.com



COUNTY OF LOS ANGELES
Department of Human Resources
Occupational Health Programs
Phone: 213-433-7201 | Email: ohp@hr.lacounty.gov

COUNTY OF LOS ANGELES - DRUG/ALCOHOL TESTING WORK ORDER

DEPARTMENT INFORMATION

Employees must report to the collection site within 60 minutes of notification plus travel time.

Authorized by - Full Name (last, first, middle)			
Signature		Date	
Work Telephone No.		Work Email	
Date/Time Employee Notified			
Department Name			
Account No. (ASAP use only)			

EMPLOYEE INFORMATION

Full Name (last, first, middle)		Employee No.	
Commercial Driver's License No. (If Applicable)		Date of Birth	
Job Title		Item No.	
Personal Telephone No.		Personal Email	

COLLECTION SITE

Do not conduct drug or alcohol testing without an authorized work order. Collection must be completed on the same date services were authorized. EMPLOYEES MUST PRESENT VALID PHOTO IDENTIFICATION.

Collection Site Name			
Collection Site Address			
City		State	
Zip Code			
Collection Site Telephone Number			

Reason for Test	Type of Test		
DOT FMCSA	DOT Random Drug	DOT Random Alcohol	DOT Random Drug & Alcohol
	DOT Pre-Employment	DOT Return to Duty	Other
	DOT Post-Accident	DOT Follow-Up	
Non-DOT	Non-DOT Reasonable Suspicion	Non-DOT Random	Other
FormFox Code (ASAP use only)			

Employee time in:

Employee time out:

Submit invoice for services to ASAPcheck

Fax or email all MRO copies and collection paperwork to 562-624-2737 or asapforms@asapdrugsolutions.com.



DRUG AND ALCOHOL TESTING COLLECTION SITES

The Los Angeles County, Department of Human Resources contracts with American Substance Abuse Professional Drug Solutions, Inc. (ASAP) to provide drug and alcohol specimen collection and laboratory testing services.

Please be sure to only send employees to the clinics that offer the services you are seeking e.g., DOT, Non-DOT, and Reasonable Suspicion testing.

Two of the clinics listed below can provide a **mobile response** to the work site for on-site sample collection in accordance with Non-DOT collection procedures (Reasonable Suspicion). These sites will respond within 90 minutes to work sites within a 25-mile driving distance of the facility. Response times for distances longer than 25 miles could be longer. Contact the clinic for an estimate of the response time to your location. The cost for a mobile response service is a \$200 call-out fee and a \$50 sample collection fee in addition to the standard cost for analysis.

ASAP, Inc Contact Information

General Inquiries: Support@asapcheck.com (562) 624-2720

Urgent Inquiries: clientsupport@asapcheck.com (213)261-3297

Clinic Name/Location	Hours of Operation	Services Available
CareOnSite – Long Beach 1250 Pacific Ave. Long Beach, CA 90813 (562) 437-0831 Note: Mobile response for on-site collection services is available.	24 Hours 7 days per week	<ul style="list-style-type: none">• Commercial Driver (DOT)• Reasonable Suspicion• Random
CareOnSite – Torrance 20280 S Vermont Ave Ste 120 Torrance, CA 90502 (562) 624-2720 Note: Mobile response for on-site collection services is available.	Monday – Friday 7:00 A.M. – 5:00 P.M.	<ul style="list-style-type: none">• Commercial Driver (DOT)• Reasonable Suspicion• Non-DOT Random
Concentra Medical Center – LAX 6033 West Century Blvd. Suite # 200 Los Angeles, CA 90045 (310) 215-1600	24 Hours 7 days per week	<ul style="list-style-type: none">• Commercial Driver (DOT)• Reasonable Suspicion• Non-DOT Random



COUNTY OF LOS ANGELES

Department of Human Resources

Occupational Health Programs

Phone: 213-433-7201 | Email: ohp@hr.lacounty.gov

<p>Glendale Adventist Occupational Medicine 600 S. Glendale Avenue Glendale, CA 91205 (818) 502-2050</p>	<p>Monday – Friday 8:00 A.M. – 5:00 P.M.</p> <ul style="list-style-type: none"> Commercial Driver (DOT) Reasonable Suspicion Random
<p>Concentra Medical Center - Irwindale 6520 N. Irwindale Ave #100 Irwindale, CA 91702 (626) 812-0366</p>	<p>Monday – Friday 8:00 A.M. – 5:00 P.M.</p> <ul style="list-style-type: none"> Commercial Driver (DOT) Reasonable Suspicion Random
<p>Temple Medical Center 124 Vignes Street Los Angeles, CA 90012 (213) 626-5679</p>	<p>Monday – Friday 24 Hours</p> <p>Saturday Closed at 5:00 P.M.</p> <p>Closed on Sunday</p> <ul style="list-style-type: none"> Commercial Driver (DOT) Reasonable Suspicion Random
<p>ProActive Work Health Center 44451 16th Street West Lancaster, CA 93534 (661) 945-5999</p>	<p>Monday – Friday 7:00 A.M. to 5:00 P.M.</p> <p>Saturday 9:00 A.M. to 2:00 P.M.</p> <ul style="list-style-type: none"> Commercial Driver (DOT) Reasonable Suspicion Random
<p>SoCal Drug Testing Clinic 20301 Ventura Blvd Suite 105 Woodland Hills, CA 91364 (818) 881-7440</p>	<p>Monday – Friday 9:30 A.M. to 5:00 P.M.</p> <ul style="list-style-type: none"> Reasonable Suspicion Non-DOT Random
<p>ProHealth Valley Occupational Medical Center 10630 Sepulveda Blvd 100 Mission Hills, CA 91345 (818) 361-3369</p>	<p>Monday – Friday 8:00 A.M. to 6:00 P.M.</p> <ul style="list-style-type: none"> Reasonable Suspicion Non-DOT Random



Concentra Medical Center - Chatsworth 9700 DeSoto Avenue Chatsworth, CA 91311 (818) 882-8100	Monday - Friday 8:00 A.M. to 5:00 P.M.	• Commercial Driver (DOT)
Concentra Medical Center - El Monte 9350 Flair Drive #102 El Monte, CA 91731 (626) 407-0300	Monday – Friday 8:00 A.M. to 5:00 P.M.	• Commercial Driver (DOT)
Concentra Medical Center - Commerce 3430 South Garfield Avenue Commerce, CA 90040 (323) 722-8481	24 Hours 7 days per week	• Commercial Driver (DOT)
Concentra Medical Center - Van Nuys 16300 Roscoe Blvd. Van Nuys, CA 91406 (818) 893-4426	Monday – Friday 7:00 A.M. to 7:00 P.M. Saturday 7:00 A.M. to 3:00 P.M.	• Commercial Driver (DOT)
Concentra Medical Center - Vernon 3851 Soto Street Vernon, CA 90058 (323) 585-7162	Monday – Friday 8:00 A.M. to 5:00 P.M.	• Commercial Driver (DOT)
Concentra Medical Center - Industry 17487 East Hurley Street City of Industry, CA 91744 (626) 965-0959	Monday – Friday 7:00 A.M. to 7:00 P.M.	• Commercial Driver (DOT)
Concentra Medical Center - Irwindale 15768 Arrow Highway Irwindale, CA 91706 (626) 969-9800	24 Hours 7 days per week	• Commercial Driver (DOT)



COUNTY OF LOS ANGELES
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COUNTYWIDE REASONABLE SUSPICION WITNESS AFFIDAVIT

Note: This Affidavit is intended to be completed by a Witness who is not the Primary Observer.

I certify through my signature below that the above statement is true to the best of my knowledge and observations.

Printed Name

Employee ID Number, e

Date

Signature