

# Tohutohu Whakamātautau Pūroi | Guidelines on drug testing

# Mō wai me te whānuitanga | Audience and scope

These guidelines apply to kaimahi employed by Te Pūkenga\* at the workplaces that Te Pūkenga manages or controls. Out of scope of these guidelines are:

- a) Kaimahi employed by another PCBU (Person Conducting a Business or Undertaking)
- b) Ākonga\*\*
- c) Visitors and other persons at our workplaces.

These guidelines are, by necessity, broad. Business divisions of Te Pūkenga may have specific procedures for drug testing that apply to their own workplaces and circumstances. If that is the case, and if such procedures align with the principles outlined in this document, business divisions may operate to their procedures.

- \* For the sake of simplicity, the word 'kaimahi' in this document refers to employees of Te Pūkenga.
- \*\* Although we generally do not require ākonga to undergo drug testing, there are occasions when it does occur due to conditions of enrolment, continuation of study or similar. In these instances, parts of this document may help with processes and practices.

## Mokamoka whakaaetanga | Approval details

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Procedure sponsor (has authority to make minor amendments)	Pourangi Tangata	Procedure owner	Pourangi Tangata
Contact person	Pounuku Haumarutanga	Date of next review	ТВА

# Ngā whakatikatika | Amendment history

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1	February 2024	Pounuku Haumarutanga	Initial version
2	May 2024	Pounuku Haumarutanga	Broadened the purpose and scope to allow for local autonomy



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## Tohutohu Whakamātautau Pūroi | Guidelines on drug testing

### 1. Pūtake | Purpose

- 1.1. The primary purpose of these guidelines is to provide the principles, processes and practices related to the drug testing of kaimahi employed by Te Pūkenga.
- 1.2. Drug testing of kaimahi may occur, where permitted, when we believe there is reasonable cause to suggest that a kaimahi employed by Te Pūkenga:
  - a) Is at risk of impairment due to the consumption of drugs.
  - b) Was under the influence of drugs and it may have been a factor in a workplace accident or near miss.
- 1.3. Although predominantly about kaimahi and reasonable cause testing, these guidelines (or parts thereof) could apply to situations when kaimahi and ākonga need to be drug tested as a condition of recruitment, employment, enrolment, continuation of employment or study, and so on. These conditions would be stated in relevant documentation and/or communicated to the kaimahi or ākonga.

### 2. Ngā Mātāpono | Principles

- 2.1. We will, so far as reasonably practicable:
  - a) Conduct drug tests in a confidential and private manner, subject to maintaining the integrity of specimen collection and testing.
  - b) Complete drug testing at the earliest opportunity and without delays.
  - c) Pay the cost of drug testing.

### 3. Hātepe | Process

3.1. The process for drug testing has four stages: decide, inform, test and evaluate.

#### **Decide**

- 3.2. The decision to conduct a drug test must be based on sound evidence gathered through observation and conversation. A form that can be used to guide this decision is attached as Appendix 3.
- 3.3. Notes must be recorded in a secure, confidential location.
- 3.4. It is recommended that a minimum of two, authorised people determine whether there is reasonable cause. Authorisation is defined by their role in the organisation or a specific designation.
- 3.5. It is recommended that kaimahi from the Wellbeing and Safety function and/or People and Culture function are involved in the decision and subsequent actions.
- 3.6. There may be occasions when a drug test cannot be conducted or may be delayed due to the person's injuries or the actions needed to preserve the scene or make it safe. In these circumstances, it may be necessary for a manager, supervisor or similar to accompany the kaimahi to hospital or medical centre and check that testing is completed as soon as reasonably practicable.
- 3.7. If testing is not possible, a learning review may be completed that includes the topic of impairment due to drug consumption.



#### Inform

- 3.8. The manager, supervisor or someone so delegated meets immediately with the kaimahi concerned and explains:
  - a) Why a drug test will be conducted, that is, the reasonable causes that have led to the decision
  - b) What is involved in the drug test process
  - c) How consent is provided.
- 3.9. The kaimahi is given the opportunity to ask questions and to consult a support person. If the kaimahi unreasonably delays the process, disciplinary processes may result.
- 3.10. The kaimahi provides written consent before testing can occur. See Appendix 4 for a consent form. Further documentation may be required to be completed by the approved testing agency.
- 3.11. The kaimahi must provide an explanation if they refuse to undertake a drug test based on reasonable cause. Disciplinary processes may result (dependant on the explanation).

#### Test

- 3.12. Once consent has been given, Wellbeing and Safety function or People and Culture function (or someone so delegated) contacts the approved testing agency.
- 3.13. To safeguard the chain of custody, the kaimahi must be supervised until the approved testing agency can conduct an onsite test, or until the kaimahi is under the supervision of the approved testing agency at an off-site facility.
- 3.14. Testing should take place within one hour for alcohol and within two-three hours for other drugs.

#### **Evaluate**

#### Negative

- 3.15. A negative result is considered proof that the kaimahi was not at risk of impairment from drugs or that drugs were not a factor in the near miss or accident.
- 3.16. The kaimahi returns to work when they are fit to do so.
- 3.17. A review should be carried out on why testing was needed and to discover if there are any lessons that can be shared.

#### Non-negative or tampered

- 3.18. If the kaimahi returns a non-negative result or an indication that the specimen may have been tampered with, then the specimen (together with another specimen if adulteration is suspected) will be forwarded to the laboratory for confirmation testing.
- 3.19. In such circumstances, subject to consultation with the kaimahi, they may be suspended on full pay until at least the confirmed results have been received from the laboratory.

#### Confirmed positive or tampered

- 3.20. If the kaimahi returns a confirmed positive or tampered test, then this may, subject to disciplinary processes, constitute serious misconduct.
- 3.21. The test result may be used to assess what other steps must or should be taken, for instance, termination of employment without notice, a return-to-work plan inclusive of rehabilitation, or a stand-down period while rehabilitation is pursued.
- 3.22. Disciplinary processes will be carried out in accordance with the relevant policies and procedures. Subject to consultation, the kaimahi may be suspended on full pay.



### 4. Whakamātūtūnga | Rehabilitation

4.1. Rehabilitation can be self-referred or initiated by Te Pūkenga.

#### Self-referral

- 4.2. Kaimahi are encouraged to disclose if they have a drug problem.
- 4.3. Self-referral will not instigate disciplinary processes. Instead, the kaimahi enters into a contract or commitment with clear expectations and goals, including an acknowledgement that a breach or non-conformance will activate disciplinary processes.

#### Te Pūkenga-initiated

- 4.4. A rehabilitation programme may be offered at the discretion of Te Pūkenga.
- 4.5. Relevant considerations for this decision include the safety-sensitive nature of the workplace and role, and any potential risks to the kaimahi and/or others if the kaimahi was under the influence of drugs.
- 4.6. The rehabilitation programme is organised through the Wellbeing and Safety function and provided by an external agency.
- 4.7. The availability of a rehabilitation programme and counselling does not prevent Te Pūkenga from dismissing a kaimahi found to be in breach of relevant policies, agreements, codes of conduct or similar, or taking any other, appropriate disciplinary action.
- 4.8. If the kaimahi agrees to attend the rehabilitation programme, they must enter into a rehabilitation contract or agreement and commit to the terms of that document.
- 4.9. The rehabilitation programme may be funded in full or part by Te Pūkenga.
- 4.10. A kaimahi undertaking a rehabilitation programme will not be permitted to return to work until a negative test is retuned and they are deemed fit to return to work. During the stand-down period the kaimahi will have the option to use any leave pursuant to an approved leave plan.

### 5. Ngā Haepapa | Responsibilities

Role	Responsibilities
Kaimahi	Participate in drug testing processes.
Kaimahi leaders	<ul> <li>Understand the principles of drug testing and how drug testing fits within the wider topic of impairment.</li> <li>Understand the process and procedures of drug testing.</li> <li>Treat information sensitively and confidentially.</li> <li>Respond to observations and engage with actions.</li> </ul>
Te Pūkenga senior leaders	<ul> <li>Provide resources to facilitate drug testing.</li> <li>Drive a culture of care and empathy.</li> </ul>
Wellbeing and Safety team members (local and regional) and/or People and Culture team members	<ul> <li>Support kaimahi, managers and supervisors with drug testing processes and rehabilitation programmes.</li> <li>Act as a second decider, if required.</li> <li>Share observations and improvements to practice.</li> <li>Monitor action plans, including rehabilitation and return to work.</li> </ul>
National Wellbeing and Safety function	<ul> <li>Provide guidance and advice on drug testing.</li> <li>Work with local and regional Wellbeing and Safety team members and external testing agencies.</li> </ul>



### 6. Ngā Hononga ki Tuhinga kē | Links to Other Documents

### Ngā Kaupapa-Here e Hāngai ana | Related policies

Policy: Te Oranga me te Haumaru | Wellbeing and Safety

### Ngā Tukanga me ngā Hātepe | Processes and procedures

- Te whakahaere waimaero i te wāhi mahi | Guidelines on managing workplace impairment
- Tikanga Whakahaere Raru Ohotata | Incident Management Procedure

### Ture whai take | Relevant legislation

- Health and Safety at Work Act 2015 (HSWA)
- Health and Safety at Work (General Risk and Workplace Management) Regulations 2016
- Privacy Act 2020
- Health Information Privacy Code 2020
- Crimes Act 1961
- Misuse of Drugs Act 1975
- Misuse of Drugs (Medicinal Cannabis) Regulations 2019



### **Appendix 1: Testing**

#### **General information**

- 1. Testing will be conducted in accordance with current, accepted, good practice.
- 2. Depending upon the situation, breath testing is used for alcohol and a urine collection is used for other drugs.
- 3. For an onsite test, a negative result will normally be accepted, but if the staff member returns a non-negative result or an indication that the specimen may have been tampered with, or if Te Pūkenga otherwise reasonably considers further screening is required, the specimen will be sent to the laboratory for confirmation or further testing.
- 4. If tampering is suspected, another specimen will be collected and both specimens forwarded to the laboratory.
- 5. Laboratory testing uses a two-phased process. In the first phase, the specimen is tested using the immunoassay technique for the presence of drugs at or above the testing cut-off levels. If a non-negative result is obtained, a second confirmation test is conducted. Also tested are the presence of dilutants, masking agents and substances affecting the specimen integrity.
- 6. A positive test will be reported by the laboratory if the level of a drug or metabolite is equal to or above the confirmation cut-off levels outlined in Appendix 2.
- 7. The laboratory will report if there is an abnormal dilution or if any integrity measurement may have affected the test result.
- 8. The kaimahi will be advised of the initial test result at the time of testing, and of any laboratory result by their manager or supervisor. Written confirmation will be provided as soon as practicable after the test.
- 9. If the kaimahi disagrees with an initial, positive test result, they have the option of having the second split sample tested at an accredited laboratory. This request must be made within five days of receiving the initial result.

### **Testing for alcohol**

#### **Standard**

- 1. The standard is that as used by the NZ Transport Authority (NZTA).
- 2. The test will be considered positive if the kaimahi has a level of alcohol in their system at or above 250 micrograms of alcohol per litre of breath for those over 20 years of age or zero micrograms of alcohol per litre of breath for those under 20 years of age.

### **Procedure**

- 3. The test for alcohol will be conducted using a breath alcohol testing device that complies with AS 3547-1997.
- 4. The person conducting the test will have been trained in the procedures and use of the testing device.
- 5. The kaimahi will be closely observed for ten minutes before the test to ensure they have not taken any fluid, food or other substances by mouth.
- 6. A consent form will be signed. See Appendix 4.
- 7. The kaimahi must provide verification of personal details, which includes both photo identification and signature. Note that verification of the identity of the kaimahi by a manager or supervisor is insufficient.
- 8. The first test requires the kaimahi to blow into the device using a disposable mouthpiece.
- 9. If the result is negative, no further breath alcohol testing is required. However, other forms of testing may occur.



- 10. If the result is above zero, a confirmatory test on the same device using a new mouthpiece will be conducted after a 15–20-minute period. The kaimahi must be supervised during this period and must not ingest anything by mouth.
- 11. A result below the NZTA standards will be reported as negative.
- 12. A result at or above the NZTA standards will be reported as positive.
- 13. The time and result will be recorded.
- 14. The kaimahi, manager or supervisor, and tester/collector will sign the record to acknowledge the result and time.

### Testing for drugs other than alcohol

#### Standard

- 1. Drug testing will conform to the requirements outlined in AS/NZS 4308: 2008: Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine.
- 2. Approved collectors will collect specimens, conduct an onsite screening test using a fully verified device and processes that comply with AS/NZS 4308: 2008, and forward any not negative specimens to the accredited laboratory for confirmation testing.

#### **Procedure**

- 3. The kaimahi will sign a consent form. See Appendix 4.
- 4. The kaimahi will be accompanied to the approved collector.
- 5. The kaimahi must provide verification of personal details, which includes both photo identification and signature. Note that verification of the identity of the kaimahi by a manager or supervisor is insufficient.
- 6. The kaimahi will be able to observe specimen collection, specimen processing, onsite screening test and chain of custody procedure, including the splitting of the specimen (if it requires confirmation) into three tubes.
- 7. A chain of custody form will be partially completed at the start of the procedure. Final signatures are completed after the specimen has been collected and processed. The chain of custody form contains as a minimum:
  - a) Verification of donor's identity, for example, driver's licence, passport or similar photo identification.
  - b) Two identifiers unique to the donor, such as full name and date of birth.
  - c) Date and time of collection.
  - d) Details of Te Pükenga business division.
  - e) Results of specimen integrity tests carried out at the point of collection.
  - f) Declaration by the tester/collector that the specimen has been collected and, if applicable, screened in the donor's presence using an onsite device and procedures in conformance to AS/NZS 4308:2008.
  - g) Name and signature of tester/collector.
  - h) Confirmation and signature by the donor that the specimen is their own and was correctly taken.
- 8. A urine specimen will be provided in a manner that allows for individual privacy. Observed collections would only be considered if the individual has previously been suspected of compromising specimen integrity.
- 9. The kaimahi will be able to note the temperature reading on the collection bottle and verify the temperature reading was correctly recorded on the form.
- 10. Further tests for specimen integrity, such as dilution and masking agent, will be conducted in the presence of the kaimahi.



- 11. The kaimahi will be asked to voluntarily provide information on drugs they have used recently. This information is only for the laboratory and will not be made available to Te Pūkenga unless the laboratory is able to match the test findings to any declared medication.
- 12. The kaimahi will be asked to read, sign and date the chain of custody statement certifying the specimen is their own and has not been changed or altered at the time of the collection. Note that this step is not carried out until the onsite screening test has been completed and again, if required, once the specimen has been processed for dispatching to the laboratory.
- 13. The specimen will be screened at the collection site using a verified onsite immunoassay device that conforms to AS/NZS 4308:2008.
- 14. A negative report can be issued when all drug classes subject to testing return negative results and the integrity of the specimen is not in question.
- 15. Te Pūkenga may have the specimen forwarded to the laboratory for extended testing for drugs that would not be detected with an onsite screen. In this situation, the laboratory must be instructed as to which substances to analyse.
  - a) Specimens screening 'not negative' or with suspected integrity may be sent to the accredited laboratory for confirmatory testing.
  - b) If the integrity is suspect, the kaimahi must stay at the collection site or other suitable location and be supervised at all times until they can provide a second urine specimen. This second specimen may be forwarded to the laboratory for both drug and specimen integrity testing. The original specimen and further specimens will be uniquely labelled and accompanied by their individual, cross-referenced chain of custody forms.
  - c) The confirmatory process involves splitting the specimen into three samples. One is set aside as the donor's reserve sample.
  - d) Te Pūkenga receives an interim report that advises the specimen requires further testing by the laboratory. There is no indication from the collector, at this stage, as to the reason for further testing.
- 16. The laboratory uses a specific confirmatory test, either gas chromatography mass spectrometry (GCMS) or liquid chromatography mass spectrometry (LCMSMS), to confirm the identity of the drug or metabolite and accurately measure the concentration. These methods are considered by scientific and medical experts to be the most reliable procedures available. Dilutants, masking agents and substances affecting the specimen integrity can also be confirmed.
- 17. The laboratory will report all the drug classes that were tested. If a drug and/or metabolite is either not detected or below the cut-off concentration, the result will be reported as 'negative'. Individual drugs and/or metabolites confirmed by GCMS or LCMSMS at levels equal to or above the confirmation cut-off concentration will be reported as 'positive'. The report will not include the actual concentration(s).
- 18. The laboratory will report if abnormal dilution or any other integrity measurement may have affected the test result.
- 19. If the kaimahi disagrees with an initial, positive test result, they have the option of having the reserve split sample tested at the same or another accredited laboratory. This request must be made within seven days of receiving the initial result. This further analysis looks for the presence of any amount of the drug, that is, it is not restricted to cut-off concentrations.
- 20. The result of the second test, whether negative or positive, will be accepted as a conclusive result.



## Appendix 2: Confirmatory test cut-off concentrations

The table below lists the confirmatory test cut-off concentrations (as total drug) stated in AS/NZS 4308:2008.

For drugs and metabolites not listed in AS/NZS 4308: 2008, the laboratory will determine the appropriate cut-off concentration and advise the client.

Compound	Cut-off level (micrograms/litre)	Compound	Cut-off level (micrograms/litre)
Morphine	300	11-nor- Δ9- tetrahydrocannabinol-9- carboxylic acid	15
Codeine	300	Benzoylecgonine	150
6-Acetylmorphine	10	Ecgonine methyl ester	150
Amphetamine	150	Oxazepam	200
Methylamphetamine	150	Temazepam	200
Methylenedioxymethylamphetamine	150	Diazepam	200
Methylenedioxyamphetamine	150	Nordiazepam	200
Benzylpiperazine	500	α-hydroxy-alprazolam	100
Ephedrine	500	7-amino-clonazepam	100
Phentermine	500	7-amino-flunitrazepam	100
Pseudoephedrine	500	7-amino-nitrazepam	100



### Appendix 3: Determining reasonable cause

### Note to users of this document

Context drives behaviour, so treat this form as a guide only. We have suggested having two people being involved in the decision-making process. That may not work in your context. In the same vein, it may not work to have a line manager involved. Another consideration is that your business division may have specific procedures about who is involved and when, what their roles are, and how you will record the information and the decision. Therefore, please modify this form to suit your context or use the procedures at your business division that determine reasonable cause.

Kaimahi subject to determination process					
Nam	e:		Role:		
Supp	ort person: YES / NO Nam	e:			
Deci	ders				
Man	ager's name:				
	e of other decider:				
Decid	ders to check one or more of the fo	llowir	ng reasonable cause indicators: Not	te tha	t it is not an exhaustive list.
✓	Indicator	✓	Indicator	✓	Indicator
	Unusual or out of character behaviour		Obvious, continual drop in performance		Hyperactive behaviour
	Excessive lateness		Patterns of absence, such as Mondays and Fridays		Increased health problems or complaints about health
	Heightened emotions (irritable, angry or aggressive)		Impairments in learning, memory, perception and judgment		Intense anxiety or panic attacks
	Depression		Bloodshot eyes or dilated pupils		Hangovers
	Changes in alertness and attentiveness		Changes in appearance (clothing, hair and personal hygiene)		Changes in personality or mood
	Dizziness		Agitated		Paranoia
	Slurred speech		Less energy		Odour – alcohol or cannabis
	Impaired motor skills		Involvement in various minor accidents		Going to the bathroom more than normal
	Feigning sickness or emergencies to get out of work early		Regularly leaving work early		Defensive when confronted about behaviour
	ervations and comments from decid				
Expla	anation and comments from kaimah	ii (if o	ttered):		



### Decision

1.	Considering the above, is there a risk to the wellbeing and safety of the kaimahi and/or other people?	YES	NO	
2.	Are you satisfied that it is reasonably possible that the risk is a result of the possible use of drugs or that there is evidence of drugs?	YES	NO	

the possible use of drugs or that the	re is evidence of drugs?			
Note: Both questions must be answered in the affirmative for drug testing to proceed.				
Action				
Reasonable cause established?	YES / NO			
Time:	Date:			
What actions have been put in place?				
Signed by manager:		Date:		
Signed by other approved person:		Date:		



### Appendix 4: Consent form

#### Note to users of this form

Date:

This consent form is provided as an example. Completion of this form provides the kaimahi with information on the drug testing process and Te Pūkenga with the informed consent of the kaimahi to proceed with drug testing.

Your business division may have an existing document that is better suited to your circumstances and context.

- 1. I consent to undergo a drug test conducted by an external, accredited testing agency (Agency) approved by Te Pūkenga.
- 2. I acknowledge the drug test is for the purpose of determining whether I have levels of a drug(s) in my system higher than the accepted standard(s).
- 3. I understand that I will have to complete any documentation required by the Agency before the test starts and that a copy of this documentation will be given to me by the Agency.
- 4. I will advise the Agency of any medication that I am taking.
- 5. I will provide the Agency with proof of identity, which includes my photograph.
- 6. I consent to the results of the drug test(s) being communicated confidentially to an authorised representative of Te Pūkenga.
- 7. I understand that I may request a second test be conducted on the duplicate specimen (split sample) and analysed within 14 days of receiving the result. I further understand that for the second test to be positive, there need only be the presence of drug or metabolite detected, that is, not to cut-off limits.
- 8. I accept that the result of the second test, whether negative or positive, is the conclusive result.
- 9. Any collection, storage or exchange of information concerning the drug test will be in accordance with privacy requirements, such as the Privacy Act 2020 and the Health Information Privacy Code 2020.
- 10. I understand that a refusal to sign this form for drug testing to proceed or the return of a positive result may result in disciplinary processes, which may include dismissal or the requirement to take part in a rehabilitation programme.

have read and understood the terms of this consent form.
ignature of kaimahi:
lame of kaimahi:
ate:
ignature of witness:
ame of witness: