DEPARTMENT OF CORRECTIONS

Policy Number:	**205.230**
Title:	**Correctional Facility Offender/Resident Drug and Alcohol Testing**
Effective Date:	**5/5/20**

PURPOSE: To specify the conditions, circumstances and procedures for conducting drug and alcohol testing of offenders/residents under the department's authority.

APPLICABILITY: All offenders and residents

DEFINITIONS:

Confirmation testing – advance scientific testing conducted by a certified and/or accredited laboratory using Gas Chromatography/Mass Spectrometry (GC/MS) or Liquid Chromatography with Tandem Mass Spectrometry (LC/MS/MS) technology utilized to determine the amount of drugs or alcohol in a sample.

Drug – all non-prescribed mood controlling substances, including such examples as marijuana, cocaine, amphetamines, methamphetamines, barbiturates, benzodiazepine, opiates, and hallucinogens, and legally-prescribed drugs that are being abused.

Panel – the specific drugs for which a facility tests

Point-of-collection screening – a drug testing device that may be utilized for the initial screening of urine or oral fluid as an alternative to laboratory testing.

Positive drug testing – a test result that indicates a presence of drugs, indicating that an offender/resident has ingested those substances.

Random testing – unscheduled and unannounced drug testing initiated by selecting a computerized, predetermined percentage of the total offender/resident population in a correctional facility.

Screening testing – initial testing method using point-of-collection screening device to determine if a urine sample is positive or negative.

Zero tolerance – drug and alcohol use is not allowed while incarcerated. All positive tests result in a department response.

PROCEDURES:

A. General

1. The department maintains a zero tolerance policy for drug and alcohol use and is committed to drug testing, sanctions, and the treatment of all offenders/residents under its authority.

2. All positive drug/alcohol tests result in an appropriate sanction and/or treatment intervention.

3. The department utilizes the latest available drug testing technologies and procedures as determined by the department's discipline committee.

4. The department develops and implements procedures to comply with all drug and alcohol testing for all offenders/residents under DOC custody.

B. Selection of offenders/residents for testing

The selection of offenders/residents for testing in all categories is supported by appropriate documentation and is not based on the race, color, religion, gender, age, or national origin of the offender.

1. *Targeted testing population*

*T*he identification of specific offenders/residents whose behavior, or medical or legal status necessitates testing in addition to the random testing utilized by the DOC.

a) Offenders/residents are tested for one or more drugs as directed by current or past behavior.

b) Offenders/residents are selected for targeted testing when:

(1) Staff have reasonable suspicion to believe that the offender/resident has used any intoxicant or drug not authorized by medical staff; reasonable suspicion includes such examples as:

(a) The observation of behavior that the offender/resident appears to be under the influence of drugs/alcohol;

(b) When the offender/resident is found to be in possession of suspected unauthorized drugs, alcohol, or drug paraphernalia;

(c) When the offender/resident is observed to be in possession of unauthorized drugs/alcohol, but the staff are unable to obtain a sample; and

(d) When staff receives information from a reliable source that the offender/resident is currently under the influence of, or has received unauthorized drugs/alcohol;

(2) The offender's/resident's serious violation of the offender/resident disciplinary regulations may result in criminal charges of the offender/resident;

(3) The adult offender reaches the offender's day of supervised release and is placed on intensive supervised release (a point-of-collection screening device must be used to test for THC, cocaine, and amphetamines at a minimum);

(4) The offender/resident or the offender's/resident's visitor's suspicious behavior suggests drug use or drug related activity during a visit;

(5) The offender/resident has tested positive on a previous test; or

(6) The offender/resident is receiving or under consideration for certain types of medical treatment. Central office health services staff provide a list of offenders/residents who are tested by medical urinalysis for medical purposes.

c) Offenders/residents who are released to detainers are not subject to targeted testing.

2. *Random testing*

a) The facility warden may direct random testing of offenders/residents based on facility security and programming needs.

b) Documents generated to select offenders/residents for random testing must be retained in the discipline unit or program records according to retention schedules.

3. *Testing of offenders/residents in treatment*

a) As a routine condition of participation in a treatment program, computer selected random testing occurs on a monthly basis.
b) Ten percent of the treatment population is tested monthly, at a minimum.
c) Juvenile residents on extended furlough status as a condition of treatment program completion are also subject to monthly testing.

C. Urine testing procedures

1. The testing coordinator at each facility/district office must ensure that all staff involved in testing are trained in testing procedures.

2. *Urinalysis pre-collection procedure:* staff must:
   a) Ensure that the collection site is clean, well-lighted, provides a toilet/urinal, sink, hand towels, hand soap, and affords reasonable privacy.
   b) Remove any objects that may be used to adulterate the sample.
   c) Ensure that all required testing materials are available and begin documentation.
   d) Require the offender/resident to remove all unnecessary garments, such as a coat or hat, and leave these items outside the collection area.
   e) Wear department-approved gloves before conducting a search or touching a specimen collection bottle.
   f) Perform a pat or an unclothed body search as necessary in a custody situation in order to ensure that the offender/resident is not hiding any objects that might adulterate the sample or containers that might hold an alternate urine sample.
   g) Require the offender/resident to wash and dry the offender's/resident's hands and conduct a visual inspection under the fingernails for any foreign material before providing the sample.

3. *Urine collection procedure:* staff must:
   a) Be of the same sex as the offender/resident providing the sample.
   b) Position him/herself in such a manner as to verify that the specimen passes directly from the offender's/resident's body into the specimen collection container.
   c) Keep the collection bottle in full view of the offender/resident at all times.
   d) Complete all other necessary documentation, including
      (1) Documentation on the tamper proof seal;
      (2) The chain of custody form;
      (3) The drug testing log; and
      (4) Any laboratory forms.
      (5) Staff must record any prescribed medication the offender/resident took (if known), which might result in a positive test result.

4. If the offender/resident is unable to produce at least 50 ml of urine,
   a) Require the offender to remain directly in the staff line of sight, secure a dry cell or another location where there is no access to water for up to two hours in order to produce a complete specimen.
   b) Allow the offender/resident to drink no more than 8 oz. of liquid within a two-hour period.
   c) If the offender/resident is still unable to produce a specimen at the end of two hours, proceed with established disciplinary action.

5. If staff believe the offender/resident tampered with the specimen, staff must dispose of the specimen and proceed with steps to secure another urine specimen.

6. If utilizing a point-of-collection screening device, then the screening test must be conducted immediately.

7. Testing results from a point of collection screening device showing
   a) A positive test result is considered positive.
   b) A negative test result is considered negative.

8. *Urine sample control*: staff must:
   a) Ensure that the refrigerator or transport container is only accessible to authorized staff; and
   b) Complete the chain of custody form each time the specimen is handled—from the time the sample is collected to the time when the sample is disposed.

9. *Testing methods*:
   a) The DOC discipline committee annually reviews and approves the point of collection screening devices and panels used in the correctional facilities.
   b) When an offender/resident requests a confirmation test for a urine sample to be tested at a laboratory, staff must follow all procedures to ensure a complete chain of custody is maintained, integrity of the specimen is maintained, and vendor protocol is followed.
   c) Treatment interventions initiated following positive tests for drug or alcohol use must be documented in the offender's/resident's medical or behavioral health file.

10. All urine samples tested with a point of collection screening device that give a negative result must be disposed of immediately, except that samples collected for targeted testing for reasonable suspicion of drug/alcohol use (procedure A.1.b), above, are processed into evidence even if the collection screening device shows a negative test result.
    a) The urine must be disposed of via a toilet receptacle.
    b) The bottle(s) may be deposited in any trash receptacle.

11. Positive urine samples which are tested with a point-of-collection screening device:
    a) Must be maintained through the completion of the disciplinary process, including the appeal process; and
    b) Must be frozen within three days of the specimen collection.

12. If an offender/resident receives a positive screening test, the offender/resident may request a confirmation test.
    a) The offender/resident must pay for the cost of the confirmation test if the confirmation test result is positive.
    b) If the confirmation test result is negative, the DOC pays for the confirmation test.

D. <u>Alternative drug testing methods</u>:
   1. For all testing methods, staff must be trained in the use of alternative drug testing method before performing tests.

   2. Staff must follow all documentation and possible disciplinary policies and procedures.

   3. When it is not possible to collect a urine sample, staff persons may conduct the screening test using an oral sample, if available and with supervisory approval.

E. Breath alcohol testing procedures

1. Staff must only use DOC-authorized breath testing equipment.

2. All breath testing equipment must be calibrated monthly by staff trained in the calibration procedures.

3. Staff must adhere to all breath testing equipment instructions.

F. Staff training

1. All staff involved in the collection, documenting, transport, or otherwise handling of urine samples must complete any authorized DOC training programs.

2. All staff involved in conducting breath alcohol testing must complete any authorized DOC training.

3. All staff involved in conducting alternative drug-testing must complete any authorized DOC training.

4. All training must be documented in the agency-approved electronic training management system.

G. Treatment interventions

1. The DOC, within the limitations imposed by available resources, seeks to provide a comprehensive substance abuse treatment continuum, throughout the system, in order to meet the varying needs of offenders supervised by the DOC.

2. Each facility establishes a range of interventions for positive test results.

H. Sanctions

1. All positive tests result in an appropriate response, which includes a range of escalating sanctions for continued drug/alcohol use, imposed through the offender/resident discipline process.

2. All offenders due to be released on intensive supervised release who test positive are placed on pre-hearing detention status.

INTERNAL CONTROLS:

A. Staff training pertaining to drug testing and related procedures is documented in the agency-approved electronic training management system.

B. Treatment interventions initiated following positive tests for drug or alcohol use are documented in the offender's/resident's medical or behavioral health file.

C. Documents generated to select offenders/residents for random testing are retained in the discipline unit or program records per Policy 106.240 "Official Record Management and Retention Schedules."

ACA STANDARDS: 4-4437

REFERENCES: Minn. Stat. §§ 243.05, subd. 2: 244.05, subd. 1b & 6; 244.15, subd. 2; and 244.172, subd. 1 & 2.
Department of Justice Appropriations Act, 1997, PL104-208
Policy 204.060, "Challenge Incarceration Program Phase I"

REPLACES: Policy 205.230, "Adult Offender Drug Testing," 8/2/16.
All facility policies, memos, or other communications whether verbal, written, or transmitted by electronic means regarding this topic.

ATTACHMENTS: None

APPROVALS:
Deputy Commissioner, Community Services
Deputy Commissioner, Facility Services
Assistant Commissioner, Operations Support
Assistant Commissioner, Strategic Planning, Implementation, and Employee Development
Assistant Commissioner, Criminal Justice Policy, Research, and Performance