



*State of North Carolina
Department of Correction
Division of Prisons*

POLICY AND PROCEDURE

Chapter: F
Section: .2600
Title: **Inmate Drug / Alcohol
Testing**
Issue Date: 06/01/10
Supersedes: 05/12/03

.2601 PURPOSE

The purpose of this policy is to specify the conditions and procedures for conducting drug screening of inmates. The Division of Prisons has a responsibility to protect the public, to provide a safe environment for staff and inmates, and to enforce the rules and regulations governing inmate conduct. The goal of the Division of Prisons is to preserve order and maintain security. Drug use presents a threat to the safety of staff and inmates. Drug screening of inmates combined with appropriate graduated sanctions is an effective means of suppressing drug use, drug trafficking, and drug-related infractions, including institutional violence, and to the extent feasible, ensuring that inmates released from prison are drug free. Drug screening also provides a mechanism to identify those inmates with substance abuse problems and target them for effective treatment programs. The current drugs routinely tested for include cannabinoid, cocaine, and opiates with additional screening for amphetamines, barbiturates, LSD, PCP and benzodiazepines upon request.

.2602 RESPONSIBILITY

- (a) The Chief of Security is responsible for establishing and monitoring the drug-screening program for inmates in the Division of Prisons and monitoring test results.
- (b) The superintendent/warden is responsible for the implementation of the drug screening program at that facility.
- (c) Facility medical staff and Division medical staff are responsible for reviewing medication orders for inmates who have tested positive for drugs. Division of Prisons medical staff should not be involved in urine sample collection, breath alcohol testing or specimen control.
- (d) Staff involved in the drug screening program at the facility are responsible for carrying out their duties according to the standard operating procedures for the drug screening program.
- (e) All staff of the Division of Prisons are responsible for reporting to the facility superintendent or designee any evidence and observations that suggest illegal drug use or other drug related activity.
- (f) Medical Laboratory Technicians are responsible for screening the urine samples, reporting results, and maintaining all documentation relating to drug screening request forms and result data for three (3) years.

.2603 URINALYSIS

- (a) Reasons for screening inmates: The following are examples of when an inmate may be subject to urinalysis drug screening. This list is illustrative and not inclusive of all appropriate justifications for testing.
- (1) Upon initial admission to the Division of Prisons or upon admission to specified facilities involved in the drug screening program;
 - (2) As part of the cause/suspicion and random drug-screening program, approximately 10% of the total inmate population are randomly drug tested each month. Specific numbers are established by the Chief of Security in consultation with the Field Drug Testing Coordinator;
 - (3) When an inmate is found to be in possession of drugs or drug paraphernalia or when drugs or drug paraphernalia are found in an area that is controlled, occupied, or inhabited by the inmate;
 - (4) When staff have documented reason to believe that the inmate has used or is using drugs. This may be based on the behavior of the inmate or on reliable information from informants. The reliability of the informant should be documented;
 - (5) When suspicious behavior that suggests drug use or drug related activity by the inmate or his visitors is observed during visitation;
 - (6) When an inmate returns late from any community based program or returns under suspicious conditions that suggest drug use or drug related activity;
 - (7) As part of a drug abuse prevention program;
 - (8) When an inmate has tested positive on a previous urinalysis drug screening;
 - (9) When an inmate is being considered for placement in community based programs such as work release, study release, family visits, and the community volunteer program.
 - (10) In accordance with provisions enacted by the 1996 session of the General Assembly requiring the establishment of a Pre-Release Drug Testing Program, the inmate is within 60 to 90 days of a known or anticipated release date.
- (b) Authority to designate inmates for screening:
- (1) Inmates selected for random screening will be chosen by a random selection process, whereby the identity of the inmate is not known by selection personnel when the inmate is chosen for screening. Facilities are to utilize OPUS generated random selection lists.

- (2) Other inmates selected for screening will be identified by the facility superintendent or designee.
- (c) Sample Collection
- (1) Before collecting a urine sample, the processing officer will positively identify the inmate by name and prison number.
 - (2) A clear, non-reusable plastic container designed for the collection and storage of urine samples will be provided to the inmate by the processing officer just prior to the collection of the urine sample. The inmate will be given a specimen cup and a direct order to submit a urine sample (a minimum of 30 mls) of urine.
 - (3) The observing officer, who will be of the same sex as the inmate being tested, will escort the inmate to an area that provides privacy from visual observation by others. The observing officer will give the inmate a direct order to provide a urine sample. The collection of the urine sample will be observed only by the inmate and the observing officer, unless there is a legitimate security need for the presence of additional staff.
 - (4) If an inmate is unwilling to provide a urine sample within 2 hours of an order to do so, the collecting officer should initiate disciplinary action against the inmate for A-13, Refuse to submit to a drug test or breathalyzer test. To eliminate the possibility of diluted or adulterated samples, staff shall keep the inmate under direct visual supervision during this two hour period or until a urine sample is furnished. To assist the inmate in giving a sample, staff shall offer the inmate 16 ounces of water at the beginning of the two hour period.
 - (5) An inmate is presumed to be unwilling if the inmate fails to provide a urine sample within the two hour period. If an inmate claims to be unable to produce a sample because of Paruresis or Shy Bladder Syndrome he will be referred to mental health as listed in section .2603 (d) and the inmate may rebut the presumption during the disciplinary process.
 - (6) When the inmate has submitted his/her urine sample he/she will secure the lid to the specimen cup. The inmate will notify the custody staff member that he/she has provide a urine sample. The custody staff member will ensure that the lid is properly secured to the specimen cup to prevent any spillage. Once the specimen has been collected the inmate will be allowed to return to regular population.
 - (7) Tamper resistant evidence tape will be placed on the sample container, the processing officer will label the container, and the inmate will be instructed to initial the label and evidence tape verifying "this is my sample". If the inmate refuses to initial the label, evidence tape or sign the request form (DCC26), the processing officer will document the inmate's refusal on the request form along with the processing officer's

signature and the signature of a witness. For refusal to initial the evidence tape the following procedures should be taken; the collecting officer writes refused to initial on the tape and he/she signs the evidence tape. On the DCC-26 the collecting officer and a witness documents the inmate refusal to initial the evidence tape. Disciplinary action should not be taken against the inmate for refusing to initial or sign the form.

- (8) The processing officer will place the sealed container in a plastic double pouch transport bag, and place the bag with the container and request form in the transport box. In order to ensure chain-of-custody requirements are met, samples should be transported in a lockable container.
- (d) Shy Bladder Syndrome
- (1) If after failing to produce a urine sample an inmate claims to have a psychogenic and non-volitional inability to produce a urine sample while being watched (aka 'shy bladder' or paruresis), the inmate can request a referral to mental health by means of a completed DC-540 form.
 - (2) The inmate will be seen by psychology per policy on DC-540 referrals, and will be evaluated by means of available chart review, interview, and psychometric testing (the latter to discern evidence of malingering of symptoms).
 - (3) Should the diagnosis of paruresis or shy bladder be supported as a result of the Mental Health evaluation, documentation of the diagnosis shall be made in OPUS for notification of alternative method for urine collection as outline below in section .2603(d)(5).
 - (4) Shy Bladder Syndrome Testing: For the purpose of Random/Cause Drug Testing, inmates who have been diagnosed with the medical condition Paruresis or Shy Bladder Syndrome will be flagged in OPUS so those responsible for testing will be aware of specific conditions and steps that must be followed when testing these inmates.
 - (A) The following steps will be taken to assist these inmates that have been diagnosed with the condition of Paruresis or Shy Bladder Syndrome.
 - (i) The inmate will be escorted by Custody Staff to a secure dry cell which will be searched prior to the inmate being placed in the cell for contraband. The inmate will be instructed to wash his/her hands prior to being placed in the cell.
 - (ii) The inmate will be strip searched by a member of the same sex to ensure that there's no contraband on or about his/her person that could be used to dilute or adulterate the urine sample.

- (iii) To further assist the inmate in giving a sample, staff shall offer the inmate sixteen (16) ounces of water. The inmate will be given a specimen cup and a direct order to submit a urine sample (a minimum of 30 mls) of urine. Once the inmate is secured in the dry cell custody staff will not have direct observation of the inmate, but must ensure that the inmate has no contact with any other inmate (s) during this time.
 - (iv) The inmate will be given an additional sixteen (16) ounces of water every two (2) hours until a urine sample is produced. Again custody staff will not have direct observation of the inmate, but must ensure that the inmate has no contact with any other inmate (s) during this time.
- (d) Specimen Control
 - (1) All samples must be held in a secure environment until lab screening is conducted. Samples held more than 24 hours after collection must be refrigerated. Those samples must be frozen if not taken to the lab within 48 hours of refrigeration.
 - (2) A written record on the location and transportation of urine samples must be maintained at all times so that a chain of custody is documented from the time that the inmate provides the urine sample until it is tested by the lab technician. Whenever custody of the specimen changes, the receiver will check the seals on the containers and document such. The chain of custody log is recorded on the DCC 26 and DCC 26A forms.
- (e) Results of Screening
 - (1) All samples with a positive result will automatically be re-tested by the lab using the same screening technology. After a positive result for certain drugs (see chart below) is reported to the facility superintendent, facility medical staff will review the inmate's medical records to determine what prescribed or over the counter medications the inmate is currently taking and consult with the DOP Medical Director to discuss the possibility of a positive result due to medication cross reactivity. If there is no basis for a positive result due to cross reactivity, disciplinary action will be initiated against the inmate for A-12, Manufacturing, possessing, introducing, selling or using any unauthorized controlled substance, unauthorized intoxicant or alcoholic beverage, or possessing associated equipment. A guilty finding will result in a presumptive active sentence to include the forfeiture of earned time.

Confirmation testing is conducted by an outside lab and is done by utilizing a testing methodology equal to or greater in sensitivity, accuracy and specificity than the screening methodology. This procedure is designed to validate the "presumptive

positive" screen result. It detects the "fingerprints" of the drug(s) in question by identifying and quantitating it, thereby giving you an actual concentration of the drug that is present. The method which we use is GC/MS (Gas Chromatography/Mass Spectroscopy) and is considered the "Gold Standard" by SAMHSA guidelines for confirmation testing.

Confirmation is required for certain positives (see chart below). The screening lab will send all positive drug screens for LSD and Methamphetamines for GC/MS confirmation testing prior to reporting results to the facility.

<u>Drug</u>	<u>Confirmation</u>	<u>Medical Review</u>
Marijuana	No	No
Cocaine	No	No
Opiates	No	Yes
Benzodiazepines	No	Yes
LSD	Yes	No
Methamphetamines	Yes	No

- (2) An inmate with a negative test result is still subject to disciplinary action if there is behavioral or other evidence to warrant such disciplinary action.
- (3) If disciplinary action is taken against an inmate as a result of the test results, the inmate will be given the opportunity during the disciplinary hearing to challenge the validity of the test results.
- (4) If inmates who test positive are being released on parole, the Superintendent or their designee will notify the appropriate parole case analyst assigned to that case that the inmate has tested positive for drug use. Paroles may be rescinded at the discretion of the Parole Commission.
- (5) Any positive drug test within the last 30 days of confinement will result in a notification to the sheriff in the county of release. This notification will automatically be generated electronically through the Division of Criminal Information (DCI) network.
- (6) An inmate that tests negative during initial pre-release screening may be retested at the discretion of the facility Superintendent for any of the reasons outlined in Section .2603. If an inmate tests positive during initial pre-release drug screening at least one additional test must be completed prior to release. The second test should follow testing guidelines outlined in .2604.
- (7) Upon the first positive drug test for any inmate, an individual counseling session with the assigned case manager will occur. This counseling may involve referral to part

time or voluntary treatment program(s) such as AA or NA, and possible classification review. Upon a second positive drug test result in a twelve month period, the inmate's case manager will initiate a referral for mandatory participation in any available part time or full time drug treatment program(s). As a result of a second positive drug test result in a twelve month period, a classification review will be conducted to determine whether changes in housing and/or work program assignments are necessary. All referrals for treatment will be coordinated in conjunction with normal disciplinary actions associated with positive drug or alcohol results. Treatment programs may impact classification actions, but will not influence disciplinary actions established for these offenses.

- (8) If an inmate refuses to submit a urine sample, disciplinary action will be initiated for offense A-13, Refusing to submit to a drug test or breathalyzer test.

.2604 TESTING TIME FRAMES

(a) New Admissions

Research has shown that only those persons who use marijuana at least daily for extended periods of time will retain marijuana in their system longer than 7 days, therefore an extended amount of time is allowed for new admissions to ensure any marijuana use prior to commitment to the Department of Correction has sufficient time to clear out of the inmate's system.

(1) Marijuana

New admissions may not be subjected to disciplinary action for a positive test result for marijuana until the 30th day after admission to DOC, inclusive of the admission date, e.g., inmate admitted on May 1 may not be subjected to disciplinary action for a positive marijuana test resulting from a sample collected prior to May 30.

(2) Other Drugs

New admissions may not be subjected to disciplinary action for a positive test result for other drugs, i.e., opiates, cocaine, etc, until the 4th day after admission to DOC, inclusive of the admission date, e.g., inmate admitted on May 1 may not be subjected to disciplinary action for a positive cocaine test resulting from a sample collected prior to May 4.

(b) Retest After Positive

(1) Marijuana

When an inmate tests positive for marijuana, that inmate may not be subjected to

disciplinary action for a positive test result for marijuana for a minimum of 7 days from the date the previous positive sample was collected, e.g., inmate provides sample on Monday and sample positive for marijuana - may not be subjected to disciplinary action for a positive test result for marijuana collected prior to the following Monday.

(2) Other Drugs

When an inmate tests positive for other drugs, i.e., opiates, cocaine, etc, that inmate may not be subjected to disciplinary action for a positive test result for that specific drug for a minimum of 4 days from the date the previous positive sample was collected, e.g., inmate provides sample on Monday and sample positive for cocaine, opiates, etc., may not be subjected to disciplinary action for a positive test for that same specific drug collected before Friday of the same week.

- (c) These time frames are not intended to prevent inmates from being tested multiple times on the same day or consecutive days. This policy is intended to prevent an inmate from being charged with disciplinary offenses more than one time within these time frames for the same drug. An inmate that is positive on Monday for marijuana, but negative for cocaine and / or opiates, may be tested on Tuesday. If he/she is positive on Tuesday for cocaine and/or opiates, additional disciplinary action should be taken. However, if he/she is positive on Tuesday for marijuana only, no additional disciplinary action should be taken.
- (d) Regardless of time frames, inmates may be subject to disciplinary action for manufacturing, possessing, introducing, selling or using any unauthorized controlled substance, unauthorized intoxicant or alcoholic beverage, or possessing associated equipment in those cases where inmates are found to be in possession of unauthorized controlled substances or associated equipment. Staff must document these observations to support disciplinary action.

.2605 STAFF TRAINING

All staff involved in the collection, documenting, transport or otherwise handling of urine samples will be required to complete the training program utilizing Lesson Plan #812, Inmate Urinalysis Drug Screening. Trainees should be allowed to assist with urine sample collection and breath alcohol testing while being supervised by a staff member experienced in these areas until such time as the trainee demonstrates proficiency in each area.

.2606 SUBSTANCE ABUSE TREATMENT PROGRAMS

A system of substance abuse treatment programs is in place for treatment and education purposes. These programs are delivered to selected offenders while incarcerated in the Department of Correction. Drug Treatment Programs may include part time Substance Abuse Programs as well as full time Substance Abuse Programs.

- (a) Drug education in the form of literature and individual counseling is available at all facilities.

Inmates may be required by their case manager to attend or may volunteer to attend.

- (b) Group counseling is available at selected facilities with inmates attending on a voluntary basis.
- (c) Narcotics Anonymous/Alcoholics Anonymous is available at most facilities with participation being voluntary. Inmates are to be encouraged to attend by case managers for classification or other considerations. Case managers may refer inmates to NA or AA programs based on a history of substance abuse, or positive test(s) while incarcerated. Inmates participating in NA/AA are subject to drug screening as part of the random/suspicion or cause screening program that the regular inmate population is subject to.
- (d) Drug/Alcohol Recovery Program (DART) is a full time residential treatment program that varies in length as follows: 35-120 days for minimum custody and 35-90 days for medium custody. These residential treatment programs are designed to identify, complete assessments and treat individuals who score between three and thirteen on the Short Michigan Alcoholism Screening Test (SMAST) and Chemical Dependency Screening Test (CDST) obtained during the diagnostic/reception process. Individuals selected for participation must have a documented history of drug/alcohol related problems, court recommended for DART participation or be a self-referral. Inmates must be felons in close, medium, or minimum custody, as well as, misdemeanants who meet eligibility criteria. Each participant in the DART program will be drug tested at least once during the period of program participation.
- (e) DART After Care is required of all inmates that complete the DART program. The purpose of this eight to twelve week after care, part-time program is treatment, recovery and relapse prevention. Inmates participating in DART After Care are subject to random drug screening as being a part of the regular inmate population.
- (f) State Alliance for Recovery and General Education for Chemically Dependant Youth,(SARGE) Program. SARGE is a full time long term residential treatment program that extends from 6 - 12 months. The target population for SARGE is youth (18-21) years of age. Individuals selected must have a documented history of drug/alcohol related problems. They may also be court recommended for SARGE participation. Each participant in the SARGE Program will be drug tested at least once during the period of program participation.
- (g) Private Alcohol/Drug Treatment Centers are on contract to provide treatment programs for adult male and female felon inmates in minimum custody, and misdemeanants aged nineteen and above. These facilities house and treat residents for periods ranging from 6 months to 20 months. Private treatment centers randomly test 35% to 45% of the residents on a monthly basis.

.2607 BREATH ALCOHOL TESTING

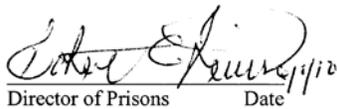
- (a) Reasons for Testing Inmates: The following are examples of when an inmate is subject to breath alcohol testing: This list is illustrative and not inclusive of all appropriate

justifications for testing.

- (1) When staff have documented reason to believe that the inmate has used or is using alcohol. This may be based on the behavior of the inmate or on reliable information from informants. The reliability of the informants should be documented.
 - (2) When an inmate is found to be in possession of alcohol.
 - (3) As part of an alcohol use prevention program.
 - (4) As part of the random breath alcohol testing.
 - (5) When an inmate returns late from any community based program or returns under suspicious conditions that suggest alcohol use or alcohol related activity.
 - (6) When an inmate has tested positive on a previous breath alcohol test.
- (b) Authority to Designate Inmates for Testing
- (1) Inmates selected for random testing will be chosen by a random selection process, whereby the identity of the inmate is not known by selection personnel when the inmate is chosen for testing.
 - (2) Other inmates selected for testing will be identified by the facility superintendent or designee.
- (c) Sample Collection: Procedures for breath alcohol testing are outlined in the instructional manual for the equipment used to conduct the breath alcohol testing. Breath alcohol testing will be done by personnel appropriately trained in breath alcohol testing procedures and breath alcohol testing equipment.
- (d) Results of Testing
- (1) Based on a positive breath alcohol testing result of greater than .02, disciplinary action will be initiated against the inmate for A-12, Manufacturing, possessing, introducing, selling or using any unauthorized controlled substance, unauthorized intoxicant or alcoholic beverage, or possessing associated equipment. Inmates may be subject to disciplinary action for manufacturing, possessing, introducing, selling or using any unauthorized controlled substance, unauthorized intoxicant or alcoholic beverage, or possessing associated equipment based on positive breath alcohol test results of .02 or less only in those cases where staff observe indications that alcohol use has occurred. Staff must document these observations in corroboration of a .02 or less positive test result to support disciplinary action. Observable indications may include, but are not limited to slurred speech, bloodshot eyes, staggering walk or

presence of the odor of an alcoholic beverage. Confirmatory testing of breath alcohol testing will not be conducted unless the testing officer has doubts as to the validity of that particular inmate's test.

- (2) If disciplinary action is taken against the inmate as a result of the breath alcohol testing, the inmate will be given the opportunity during the disciplinary hearing to challenge the validity of the test results.
- (3) If an inmate refuses to submit to a breath alcohol test, disciplinary action will be initiated against the inmate for offense A-13, Refuse to submit to a drug test or breathalyzer test.


Director of Prisons Date

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