

**WASHINGTON TOWNSHIP BOARD OF FIRE COMMISSIONERS  
DISTRICT NO. 1  
SUBSTANCE ABUSE POLICY**

**I. INTRODUCTION**

The Board of Fire Commissioners recognize that it bears the responsibility of ensuring that its fire-fighting force is fully capable of protecting the health, safety and welfare of the citizens within Washington Township Fire District No. 1.

The Board also recognizes that the nature of fire-fighting is such that the impairment of any volunteer fire service member seriously endangers the lives, safety and welfare of the public and other members.

The Board also recognizes that the unlawful manufacture, distribution, dispensation, possession or use of a controlled, dangerous substance and that the unlawful possession, use or abuse of alcohol can seriously impact upon a fire service member's ability to fulfill duties and obligations owed by that member to the community and other members.

The Board also recognizes that substance abuse seriously impacts upon the health of the person and, therefore, encourages its members to seek out the availability of counseling and rehabilitation programs.

Therefore, the Board of Fire Commissioners has compelling interest in making certain that all volunteer fire service members are free from abuse problems involving controlled, dangerous substance and alcohol.

The Board of Fire Commissioners is committed to providing a drug-free, healthful, safe and secure work environment for all of its fire-fighters and to provide further that the unlawful manufacture, distribution, dispensation,

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possession or use of a controlled substance and the unlawful possession, use or abuse of alcohol is absolutely prohibited.

**II. DEFINITIONS**

For the purposes of this policy, the following definitions shall apply:

Controlled Dangerous Substance includes the definition found at N.J.S.A. 24:21-2 and includes any substance other than alcohol that has mind-or function-altering effect, and volatile substances which produce the physiological and psychological effects of a controlled, dangerous substance through deliberate inhalation or ingestion. Controlled Dangerous Substance includes, but is not limited to amphetamines, cannabinoids, cocaine, phencyclidine (PCP), hallucinogens, methaqualone, opiates, barbiturates, benzodiazepines, synthetic narcotics, designer drugs or a metabolite of any of the substances herein.

Substance Abuse shall mean the consumption or use of any controlled dangerous substance as defined herein for the purposes other than for the treatment of sickness or injury as prescribed or administered by a person duly authorized to practice medicine and the misuse, abuse or unlawful use of alcohol.

Probable Cause requires the concurrence of a Commissioner, Fire Chief or desk or line officer in conjunction with the or by the sole advice of the Board's physician. "Probable Cause" is based upon the facts, circumstances, physical evidence, physical signs and symptoms or a pattern of behavior that indicates that a member has violated this policy by the unlawful manufacture, distribution,

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dispensation, possession or the use of a controlled substance and the unlawful possession, or abuse of alcohol when responding to an alarm or while performing as a fire-fighter/fire police. "Probable Cause" may be based upon, but not limited to, reports that a member has violated this policy during the performance of his/her duties as a fire-fighter/fire police, the odor of alcohol or marijuana on a member, unusual behavior such as slurred speech or lack of coordination, possession of paraphernalia used in connection with any drug, or involvement in an accident which resulted or could have resulted in bodily injury or damage to property or which involved a piece of fire apparatus responding to a fire.

Substance Abuse Test any chemical, biological, or physical instrumental analysis administered for the purpose of determining the presence or absence of a drug or its metabolites or for the purpose of determining the presence of any alcohol.

Prescription Medication a drug prescribed for use by a duly licensed physician, dentist or other medical practitioner licensed to practice medicine and issue prescriptions for a drug that is authorized for general distribution and use in the treatment of human diseases, ailments or injuries pursuant to the "Federal Food, Drug and Cosmetic Act," 62 Stat. 1040 (21 U.S.C., SEC 301, et seq.)

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**III. SUBSTANCE ABUSE TESTING**

In order to ensure that the above-stated policy is followed, Washington Township Fire District No. 1 hereby implements a substance abuse testing procedure. Substance abuse testing will take place under the following circumstances:

1. Entry-level substance abuse testing for persons applying for a position

in the volunteer fire service. The testing will be done as part of the pre-employment physical.

2. When probable cause exists that a member has violated the policy of Washington Township Fire District No. 1 by unlawfully manufacturing, distributing, dispensing, possessing or using a controlled, dangerous substance or by unlawfully possessing, using or abusing alcohol, that person shall be required to consent to a substance abuse test immediately.

**IV. SUBSTANCE ABUSE TREATMENT**

Further, in support of the policy to promote a drug-free work environment, Washington Township Fire District No. 1 encourages its member to seek assistance through counseling and rehabilitation and/or to request assistance with any substance abuse problem before disciplinary action is necessary.

**V. ENTRY-LEVEL TESTING**

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All applicants for a fire-fighting position within Washington Township Fire District No. 1 shall be notified on their application form and by receipt of a copy of this policy that a substance abuse screening test will be performed as part of their application's physical exam. Applicants for a fire-fighting position shall be required to sign a substance abuse test consent form. Failure to sign said consent form and/or submit a urine sample for testing shall disqualify the applicant from consideration for volunteer fire service. This signed substance abuse test form will act as a consent to undergo substance abuse testing consistent with this policy and will constitute an acknowledgment by the applicant that any detection of controlled, dangerous substances in his/her body will result in the denial of his/her application for a position in the volunteer fire service.

A urine sample is the standard method used in testing for the presence of these and/or other related drugs, amphetamines (uppers, bennies, speed), barbiturates (downers, reds, candy, etc.), benzodiazepines (tranquilizers), cocaine (snow, crack, blake, coke, etc.), ethchlorvynol, methaqualone (SOPARS), opiates (heroin, codeine, methadone, morphine, smack, horse), phencyclidine (PCP, angel dust), propoxyphene, marijuana (THC) and alcohol.

The initial analytical test to be utilized shall be the enzyme immunoassay technology (EMIT) and all such tests shown positive shall be confirmed by gas chromatography/mass spectrometry (GC/MS).

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The substance abuse test will be administered by the physician for Washington Township Fire District No. 1 as part of the entry-level application and will be performed by urinalyses. A urine specimen will be taken from each applicant. Urine specimens from female applicants will be taken in the presence of a female attending official and urine specimens from male applicants will be taken in the presence of a male attending official.

Proper chain of custody documentations shall be prepared to ensure the integrity of the testing procedure and to protect the rights of the applicant.

In the case of a positive test, applicants may elect to have the same sample tested at a State of New Jersey approved laboratory of their choice, at their own expense within three (3) days of notification of the initial test result. The applicant must arrange for the laboratory to pick up the sample directly from the office of the Board's physician.

Prior to the applicant being tested, the applicant will be informed of his/her opportunity to submit medical documentation that may verify his/her use of a prescription medication. Such verification, however, will not preclude the administration of the drug test.

Any applicant who refuses to submit to a drug test will be denied a position in the volunteer fire service. Similarly, any applicant who submits to the required drug test and whose urine specimen shows the presence of a controlled, dangerous substance will be denied a position in the volunteer fire service.

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VI. PROBABLE CAUSE TESTING

The testing of members for controlled, dangerous substances or alcohol shall be administered only upon probable cause. Random testing is prohibited and requests for employee consent to be tested in the absence of probable cause is prohibited.

When the two superiors concur that probable cause exists for the testing of a member, that member shall be required to consent to a substance abuse test. If the member refuses to consent to the test he will be instructed in writing to appear at the office of the Board's physician or other designated testing facility at the designated time not more than three hours from the time of the request to consent to testing. Members subject to testing will not be allowed to drive, but will be transported to and from the collection site, and home if required. If requested, members shall be allowed to have a representative of their choice as an observer at the collection site.

Probable cause testing, including chain of custody safeguards, shall be conducted in the same manner as entry-level testing.

In the case of a positive test, applicants may elect to have the same sample tested at a State of New Jersey approved laboratory of their choice, at their own expense within three (3) days of notification of the initial test result. The applicant must arrange for the laboratory to pick up the sample directly for the office of the Board's physician.

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Prior to the applicant being tested, the applicant will be informed of his/her opportunity to submit medical documentation that may verify his/her use of a prescription medication. Such verification, however, will not preclude the administration of the drug test.

A positive test may result in discipline or discharge. The failure to submit to testing may result in discipline or discharge. The Board may also require the member of participate in counseling or a rehabilitation program as part of his continued service for the Washington Township Fire District No. 1. The expense for said counseling shall be paid by the member or his/her insurance carrier. If, in the event no insurance is available then, in that event, the Board shall have the sole discretion to determine to what extent, if any, it shall contribute to said expense. The Board will decide the nature of the discipline after a hearing. Pending the determination of the Board the member will be suspended for active status. Prior to the hearing the member will be given written notice of the probable cause. At the hearing the member may be represented by an attorney. If, in the event, a member is determined to have had a second offense under this policy, he/she shall be expelled from the service.

VII. CONFIDENTIALITY

The Board of Fire Commissioners will not release to any person, other than the applicant, medical personnel, supervising personnel or other personnel of the volunteer fire service on a need to know basis, any information related to the drug test unless:



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- 1 The applicant has expressly granted permission in writing for the Board of Fire Commissioners to release such information; and/or
2. The Board of Fire Commissioners is legally mandated to release such information.

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I voluntarily give my consent for any agent or other authorized designee of the Board of Fire Commissioners to collect urine and/or blood for drug screening to determine alcoholic content and/or the presence of drugs.

I understand that proper chain of custody determination shall be prepared to ensure the integrity of the testing procedure and to protect my rights. This process is designed to comply with medical and legal requirements.

I hereby authorize the agent or authorized designee to disclose the test results to the Board of Fire commissioners and/or its representatives. I understand that the results of this testing may affect my application for a fire-fighting position with the Washington Fire District No. 1.

Medication History: In order to ensure accuracy in this screening, it is essential to advise of your use of any prescription drugs, non-prescription drugs, over-the-counter medications, or any other chemical substance you have taken within the last month. Check which of the following, if any, you have taken in the last thirty (30) days:

	Yes	No
1. Allergy Medication	_____	_____
2. Asthma Medication	_____	_____
3. Cold Medication	_____	_____
4. Cough Medication	_____	_____
5. Depression Medication	_____	_____
6. Diet Pills	_____	_____
7. Mood Elevators	_____	_____
8. Muscle Relaxers	_____	_____
9. Heart Medication	_____	_____
10. Nausea, Vomiting, or Diarrhea Medication	_____	_____
11. Pain Medication	_____	_____
12. Seizure Medication	_____	_____
13. Sinus Medication	_____	_____
14. Sleeping Pills	_____	_____
15. Stomach, Colon or Digestive Medication	_____	_____
16. Tranquilizers	_____	_____

Please list in the space below any medications checked "yes" above, or other medications not listed. If you are not taking any medications, drugs, or other chemical substance, please write "none."

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If you elect not to sign the Substance Abuse Test Consent and refuse to comply with the screening procedure, your application for a fire-fighting position may not be considered. If you are a current volunteer fire-fighter, failure to sign this consent form upon two (2) of your superiors concurring that a probable cause exists, will subject you to a possible disciplinary action up to and including discharge. The Board of Fire Commissioners may also require that you participate in counseling or a rehabilitation program.

I have read and fully understand the above consent.

\_\_\_\_\_  
Signature

Date

WITNESS:

\_\_\_\_\_  
\_\_\_\_\_

Date

Type of request: Urine \_\_\_\_\_ Blood \_\_\_\_\_ Both \_\_\_\_\_

Reason: Entry-Level Testing \_\_\_\_\_  
Accident \_\_\_\_\_  
Probable Cause \_\_\_\_\_  
Return to Duty \_\_\_\_\_

**WASHINGTON TOWNSHIP BOARD OF FIRE COMMISSIONERS  
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The undersigned, an applicant for membership in the Washington Township volunteer fire department, which is within the jurisdiction of the commissioners of fire district no. 1, Washington Township, understands and agrees that his/her physical and mental condition is a material factor in the determination of whether he/she can perform firematic duties, and he/she consents to the conduct of a physical examination by warren hills health center, the physician for fire district no. 1. He/she further authorizes the release of any medical records or information from any physician, hospital, health-care provider or faciity to warren hills health center (and will execute a separate authorization upon request) and represents that the medical or surgical history which he/she presents to warren hills health center will be accurate and complete, recognizing that warren hills health center and the commissioners will rely thereupon. If so directed by warren hills health center, he/she shall report for a psychological or neurological examination, all of these examinations being prerequisite to his/her consideration for approval as a fire-fighter and member of washington township volunteer fire department. All references to warren hills health center mean and include any other physician designated by warren hills health center to act in their place and stead or pursuant to their direction.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_