DRUG AND ALCOHOL POLICY

All employees and potential employees of the Home Care Agency are subject to both a pre-employment and random drug screening at the employer's expense.

<u>Substances</u>, to be tested for may include, but are not limited to the following: Marijuana, Amphetamines, (uppers, speed, bennies, hearts, etc.,); Methanol, Barbiturates (downers); Cocaine (crack); Heroin, Alcohol; Opium or any other illegal drugs or substance. Method of drug testing will be done by a urine sample.

It is a violation of agency policy to possess, sell, use or give away such substances during work hours or at any time as long as employed by the agency. Violation of this policy is grounds for <u>immediate</u> termination.

The Home Care Agency reserves the right, at it's option, to require random drug testing of it's employees periodically and without prior notice.

If an employee is suspected of being subject to the effects of alcohol or any drug, that employee will be referred for alcohol and drug screening immediately. If the employee refuses to submit to drug screening, that employee will be terminated immediately.

If an employee or potential employee is taking prescribed medications, written proof from that person's physician is required either on initiation of the prescription medication or upon submission of the employment application to the Home Care Agency. On written prescriptions the employee's name must be on the bottle, along with the pharmacy name and telephone number, time medications are taken and dosage.

Employees or potential employees who believe or have been told that their use of prescribed or illegal drugs may present a safety threat to their patients are to report such drug use to the appropriate company personnel.

Be it known that Client/Patient/Responsible person or anyone that asks is to be given a copy of this policy.

Your signature below indicates that you have read and understand this policy and will adhere to it.

Agency Administrator/Representative	Date	
Signature Client/Client Rep./Applicant/Employee	Date	

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