



2019-2020

Luling Independent School District

**MANDATORY DRUG TESTING PROGRAM
GUIDELINES AND PROCEDURES**

2019-2020 School Year

Luling Independent School District

MANDATORY DRUG TESTING PROGRAM

PURPOSE OF THE DRUG TESTING PROGRAM

The District has a vital interest in maintaining a safe, secure and healthy learning environment for all its students. To fulfill that purpose and as a proactive measure to keep our schools drug free, the Board of Trustees adopted a random drug testing policy for secondary students participating in school-sponsored competitive extracurricular activities, which may be found in Board Policy FNF (Local). These Guidelines and Procedures have been adopted in order to further communicate the terms of this program to parents and students. To the extent these Guidelines and Procedures conflict with Board Policy, the Policy shall control.

By adopting a random drug testing policy, the District desires to: 1) provide for the health and safety of all students, 2) deter students from using drugs, 3) undermine the effects of peer pressure by providing a legitimate reason for students to refuse to use drugs, 4) prevent injury, illness, and harm resulting from drug use, and 5) encourage students who use drugs to participate in drug treatment programs.

STUDENTS SUBJECT TO DRUG TESTING

Students participating in school-sponsored competitive extracurricular activities shall be subject to this drug testing program as a condition of their participation. Since drug use can increase the risk of injury to students participating in school-sponsored competitive extracurricular activities, and since these students are often role models to other students, the District shall require all students in grades 6 through 12 who participate in school-sponsored competitive extracurricular activities to undergo random drug testing. The following activities are identified as school-sponsored competitive extracurricular activities (“covered activities”):

Baseball
Basketball
Cross-Country
Football
Golf
Powerlifting
Softball
Tennis
Track/Field

Volleyball
Band
Cheerleading, Mascot, Dance, Twirlers, Flags
Spirit Squads
FFA (Future Farmers of America)
UIL Academic Participants
UIL One-Act Play
Academic, Vocational and Agriculture activities

Participation includes practice, competition and involvement in events of covered activities. Participation does not include attendance at school events such as athletic contests, drama productions or social functions.

INFORMED CONSENT FOR TESTING

Before a student is eligible to participate in covered activities, a written parental consent form for random drug testing must be completed, executed, and on file with the designated school official. If the student is of legal age (age 18 or older), he or she must also sign the permission form. Consent forms are valid for the current school year only.

Because participation in extracurricular activities is a privilege and not a right, refusal to consent to random drug testing will result in the denial of participation in the identified extracurricular activities.

DISSEMINATION OF INFORMATION

This random drug testing policy shall be distributed to all students in grades 6 through 12 at the beginning of each school year, and written acknowledgement will be obtained from each student verifying that the policy has been received, read and understood. Newly enrolled students will receive a copy of the policy as they register at their campus.

Prior to the commencement of drug testing each school year, an orientation session will be held to explain the drug testing policy and review the consent forms. Additionally, students will receive an educational presentation regarding the harmful effects of drug and alcohol abuse.

TESTING PROCEDURES

- A. **Frequency.** Random drug testing shall be conducted on as many as 10 dates throughout the school year. Each school year the Board of Trustees or its designee will determine the percentage of students to be tested based on the number of participants in the covered activities, increases or decreases in student alcohol and drug use, and other relevant factors. The testing entity will select the dates for conducting the monthly random drug test; the selection of dates will not follow any recognizable pattern.
- B. **Random selection of students.** The District will provide the third party administrator with a list of all identified participants. Students will be chosen for testing by computer-generated random selection conducted by the third party administrator. The random selection process is intended to eliminate subjective factors from playing a role in the selection of the students to be tested.
- C. **Testing standards.** Testing will be conducted through accepted scientific means using approved practices and procedures established by the testing entity selected by the District. The testing parameters shall be set at industry standards as defined by the National Institute for Drug Abuse. The testing entity shall have greater than five years' experience in toxicology and chain-of-custody procedures.

The drug test shall be performed by urinalysis. The specimen shall be analyzed using immunoassay methodology. All presumptive positive results shall be certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) and confirmed by a second test of the same specimen using a gas chromatography/mass spectroscopy methodology (GC/MS) confirmation.

The testing entity may use quantitative results to determine if positive results on repeat testing indicate recent use of illegal drugs or the natural decline of levels of the illegal drug from the body. If the testing entity feels the quantitative levels do not reflect current use, then a negative result may be reported.

- D. **Collection of the sample.** Upon arrival at the District, the testing entity shall provide the names of the selected students to the supervising school official who shall arrange for these students to report to the collection area.

Personnel from the drug-testing laboratory shall collect samples under conditions that are no more intrusive than the conditions experienced in a public restroom. Students shall be tested in an isolated facility under the supervision of a school official of the same sex. Students shall provide a urine sample in a restroom or other private facility behind a closed stall. The supervising school official shall assist the testing entity representative in testing the warmth of the specimen and ensuring an accurate chain of custody. Neither the supervising school official nor

the testing entity representative shall directly observe the students providing their urine samples. Facilities shall be secure with only one student testing at a time to ensure secrecy and confidentiality of each individual.

The student shall be provided a form on which he or she may list any medications legally prescribed and taken in the preceding 30 days. The form shall be maintained in the student's confidential file and shall be available only to the medical review officer (MRO) upon request.

The urine sample shall be collected in a sealed split specimen collection container provided by the testing entity. The student shall provide the collected sample to the testing entity representative, and the school official shall confirm that the student's identification information on the sample is correct. The split specimen bottle shall be sealed and witnessed by the student. The testing entity representative shall take all specimens to the laboratory for analysis.

A copy of the specimen collection and chain-of-custody procedures used by the District and the testing entity shall be made available to any parent or student upon request.

- E. **Positive results.** Positive results shall accumulate throughout a student's middle school and high school participation in covered activities. A student who refuses to be tested when selected, who does not comply with testing procedures, or who is determined to have tampered with a sample shall be deemed to have a positive test result and shall be subject to the appropriate consequences depending on previous positive test results, if any.
- F. **Substances.** The district reserves the right to test for alcoholic beverages, amphetamines, anabolic steroids, barbiturates, benzodiazepines, cocaine, LSD, marijuana, methadone, opiates, ecstasy, phencyclidine and synthetic marijuana (including K-2, Spice).

TEST RESULTS

- A. **Confidentiality of results.** Student privacy will be protected in accordance with all applicable laws. Records of test results will be kept confidential and provided only to parents, administrators, personnel responsible for administering the extracurricular activity, other school officials with a legitimate interest in the information, or as otherwise required by law or overriding health and safety concerns.

Test results are kept separate from other school records. School personnel are only allowed to view the information if they have a legitimate educational interest in the results. Results will not be shared with law enforcement except as required by law. Upon written request of a parent/guardian or a student of legal age, test results may be released to treatment facilities.

- B. **Medical Review Officer (MRO).** The testing entity will provide an MRO for interpreting and verifying test results. The MRO services will be provided by a licensed physician who is certified by the Medical Review Officer Certification Council or the American Association of Medical Review Officers as having proven by examination to have had the appropriate medical training to interpret and evaluate drug test results and thus qualified for certification as an MRO.

The MRO may use quantitative results to determine if positive results on repeat testing indicate recent use of illegal drugs or the natural decline of levels of the illegal drugs or the natural decline of levels of the illegal drug from the body. If the MRO feels the quantitative levels do not reflect current use, then a negative result may be reported.

- C. **Notification.** Whenever a student's test result indicates the presence of a prohibited substance identified in this policy, the parent or guardian will be contacted by a school administrator within one school day of receiving the positive test result.

The school administrator will confer with the parent or guardian to determine if there is a medical explanation for the positive test result. If the medical explanation is verified by the MRO, the test result will be reported as negative. However, without prescription documentation provided by the parent or guardian and verification by the MRO, a positive test result will be considered confirmed and will result in consequences.

Upon receiving notice from the MRO that a student has a confirmed positive test result; the designated school official will contact the student and parents to discuss the consequences of the positive test result. The school official will notify the parent or guardian of the right to request a retest.

- D. **Retest.** Students that test positive may request a second test. A request for a retest must be made to the designated school official in writing within forty-eight (48) hours from the time the parents were first notified of a positive test result.

RELATIONSHIP TO THE STUDENT CODE OF CONDUCT

This drug testing policy does not in any way modify the disciplinary provisions of the Luling ISD Student Code of Conduct or Chapter 37 of the Texas Education Code. If a student sells, gives, delivers, possesses, uses, or is under the influence of marijuana, a controlled substance, a dangerous drug, or alcohol, the student will be subject to the disciplinary provisions of the Student Code of Conduct. A positive drug test is not in and of itself proof that a student has violated the Student Code of Conduct. For more information on the District's disciplinary rules regarding drugs and alcohol, please refer to the Luling ISD Student Code of Conduct.

CONSEQUENCES

Any student who tests positive for a drug in a test conducted under the provisions of this policy will face the following consequences. Upon receiving results of a positive drug test, the principal shall schedule a meeting with the student, the student's parent/guardian if the student is under the age of 18, and the activity sponsor to review the test results and discuss applicable consequences. Offenses are cumulative for the duration of a student's attendance during grades 6 through 12.

- A. **First Offense.** Upon a first offense of receiving a confirmed positive drug test, the student shall be suspended from any covered activity for 20 calendar days following the date the student and parent are notified of the test results by a school administrator. During the period of suspension, the student may participate in practices but not in any competitive activities or public performances.

In addition, the student must submit documentation that the student attended and successfully completed two hours of substance abuse counseling from an approved provider. The parent/guardian shall be responsible for counseling fees, if any.

If the student wishes to return to participation in the covered activities, the student must provide evidence of successful completion of the substance abuse counseling at the end of the period of suspension. The student shall be retested on the next five subsequent random test dates.

Failure to meet these requirements within the specified time lines shall result in the student being suspended from participation in all identified covered activities until documentation of completion of the counseling requirement is received by the designated school official.

- B. **Second Offense.** Upon a second offense of receiving a confirmed positive drug test, the student shall be suspended from any covered activity for 90 calendar days following the date the student and parent are notified of the test results by a school administrator. During the period of suspension, the student shall not be permitted to participate in practices, competitive activities, or public performances.

In addition, the student shall submit documentation that the student attended and successfully completed six hours of substance abuse counseling from an approved provider. The parent/guardian shall be responsible for counseling fees, if any.

If the student wishes to return to participation in the covered activities, the student shall provide evidence of successful completion of substance abuse counseling at the end of the period of suspension. The student shall be retested for the remainder of his or her eligibility to participate in covered activities.

Failure to meet these requirements within the specified time lines shall result in the student being suspended from participation in all identified covered activities until documentation of the completion of the counseling requirement is received by the designated school official.

- C. **Third Offense.** Upon a third offense of receiving a confirmed positive drug test, the student, if in high school, shall be suspended from participation in any covered activity for the remainder of the student's high school eligibility following the date the student and parent are notified of the test results by a school administrator. During the period of suspension, the student shall not be permitted to participate in practices, competitive activities, or public performances.

A middle school student shall be suspended from covered activities for 180 calendar days. During the period of suspension, the student shall not be permitted to participate in practices, competitive activities, or public performances.

- D. **Fourth Offense.** Upon a fourth offense of receiving a confirmed positive drug test, the student shall be suspended from participating in any covered activity for the remainder of his or her enrollment in the District.
- E. **End of the year suspensions:** If a student's suspension from participation in extracurricular activities is not completed by the end of a school year, the student shall complete the assigned period of suspension during the first semester of the following school year. Calendar days between the last instructional day of one school year and the first instructional day of the following school year shall not be included in the suspension period.
- F. **Substance abuse counseling.** The district will approve substance abuse counseling provided by a certified chemical dependency counselor or at any agency certified by the Texas Department of Health or the Texas Department of Alcohol and Drug Addiction Services. A list of approved substance abuse counseling providers may be obtained upon request.
- G. **Refusal.** Refusal to participate in a drug test after signing the consent form will result in the same consequences as if the student had received a positive test.
- H. **Academically non-punitive.** A positive drug test will not affect the student's grade in any curricular class associated with the extracurricular activities. However, if participation in the extracurricular activities is required for the class or affects the student's grade, the student may be required to satisfy participation requirements in alternate ways. The result of the drug tests will not be documented in the student's academic records.

APPEAL PROCESS

A student or parent may appeal a decision made under this policy in accordance with District policy FNG (LOCAL).
Consequences established in this policy shall not be deferred pending the completion of the appeal process.

Luling Independent School District

DRUG TESTING CONSENT FORM

FOR STUDENTS IN EXTRACURRICULAR ACTIVITIES

Consent for minor student:

I, _____, as parent and/or guardian of _____, a minor student enrolled in Luling Independent School District, have read and understand Luling ISD's policy regarding random student drug testing. I have received and had an opportunity to review Board Policy FNF (Local) and the Luling ISD Mandatory Drug Testing Program Guidelines and Procedures. Because my child participates in extracurricular activities, I understand that my child may be asked to provide a urine sample for drug analysis. I consent to such testing conducted as part of Luling ISD's drug testing policy.

I also understand that while production of a specimen may not be compelled, the giving of a specimen when requested by the District is a condition of continued participation in the identified extracurricular activities. I understand that if a test reveals an unexplained presence of a drug, the District may take action against my child up to and including termination of the privilege of participating in extracurricular activities. I understand that my child's refusal to submit to a test will have the same consequence as if the test result was positive.

I authorize the officers, employees, and agents of the District to communicate and share information regarding my child's drug test results with each other, or as otherwise required by law or overriding health and safety concerns. The District may also communicate such results at any administrative proceeding regarding the drug test.

Parent/Guardian Signature

Date

Student Signature

Date

Luling Independent School District

FORMULARIO DE CONSENTIMIENTO DE PRUEBAS DE DROGAS

PARA LOS ESTUDIANTES EN ACTIVIDADES EXTRACURRICULARES

Consentimiento para estudiante menor de edad:

Yo, _____, como padre o tutor de _____, un estudiante menor de edad matriculado(a) en el distrito escolar independiente de Luling, he leído y he comprendido la política de Luling ISD con respecto a las pruebas aleatorias de drogas para estudiantes. He recibido y he tenido la oportunidad de revisar la política FNF (Local), Luling ISD y los procedimientos del programa de prueba de droga obligatoria de Luling ISD. Porque mi hijo(a) participa en actividades extracurriculares, entiendo que a mi hijo le pueden pedir que proporcione una muestra de orina para análisis de drogas. Doy mi consentimiento a tal prueba realizada en el marco de la política de pruebas de drogas de Luling ISD.

También entiendo que mientras que la producción de una muestra no puede ser obligada, la entrega de una muestra cuando así se solicite por el distrito es una condición de participación en las actividades extracurriculares identificadas. Entiendo que si un test revela una inexplicable presencia de una droga, el distrito puede tomar medidas contra mi niño incluyendo terminación del privilegio de participar en actividades extracurriculares. Entiendo que si mi hijo se niega a someterse a una prueba tendrá la misma consecuencia como si el resultado era positivo.

Yo autorizo a los agentes, empleados y agentes del distrito de comunicarse y compartir información sobre los resultados de prueba de drogas de mi hijo(a) con los demás, o según como lo requiera la ley o los preocupaciones principales de la salud y seguridad. El distrito también podrá comunicar dichos resultados en cualquier procedimiento administrativo relacionado con el examen de droga.

Firma del padre/tutor

Fecha

Firma de alumno

Fecha

Luling Independent School District

DRUG TESTING CONSENT FORM

FOR STUDENTS IN EXTRACURRICULAR ACTIVITIES

Consent for student age 18 or older:

I, _____, am a student age 18 or older enrolled in Luling ISD. I have received and had an opportunity to review Board Policy FNF (Local) and the Luling ISD Mandatory Drug Testing Program Guidelines and Procedures. Because I participate in school-sponsored extracurricular activities, I understand that I may be asked to provide a urine sample for drug analysis. I consent to such testing conducted as part of the District's during testing policy.

I also understand that while production of a specimen may not be compelled, the giving of a specimen when requested by the District is a condition of continued participation in the identified extracurricular activities. I understand that if a test reveals an unexplained presence of a drug, the District may take action against me up to and including termination of the privilege of participating in extracurricular activities. I understand that refusal to submit to a test will have the same consequence as if the test result was positive.

I authorize the officers, employees, and agents of the District to communicate and share information regarding my drug test results with each other, my parents, or as otherwise required by law or overriding health and safety concerns. The District may also communicate such results at any administrative proceeding regarding the drug test.

Student Signature

Date

Luling Independent School District
FORMULARIO DE CONSENTIMIENTO DE PRUEBAS DE DROGAS
PARA LOS ESTUDIANTES EN ACTIVIDADES EXTRACURRICULARES

Consentimiento para estudiantes mayores de 18 años:

Yo, _____, soy un estudiante de 18 años de edad o mayor matriculado(a) en Luling ISD. He recibido y he tenido la oportunidad de revisar la política FNF (Local), Luling ISD y los procedimientos del programa de prueba de droga obligatoria de Luling ISD. Porque yo participo en actividades extracurriculares patrocinadas por la escuela, entiendo que me pueden preguntar que proporcione una muestra de orina para análisis de drogas. Doy mi consentimiento a tal prueba realizada en el marco de la política de pruebas de drogas de Luling ISD.

También entiendo que mientras que la producción de una muestra no puede ser obligada, la entrega de una muestra cuando se solicite por el distrito es una condición de participación en las actividades extracurriculares identificadas. Entiendo que si una prueba revela una presencia inexplicable de una droga, el distrito puede tomar acción contra mí hasta e incluyendo terminación del privilegio de participar en actividades extracurriculares. Entiendo que si me niego a someterse a una prueba tendrá la misma consecuencia como si el resultado de la prueba fuera positivo.

Yo autorizo a los agentes, empleados y agentes del distrito de comunicarse y compartir información sobre los resultados de prueba de drogas de mi hijo(a) con los demás, o según como lo requiera la ley o los preocupaciones principales de la salud y seguridad. El distrito también podrá comunicar dichos resultados en cualquier procedimiento administrativo relacionado con el examen de droga.

Firma de alumno

Fecha

Luling Independent School District

CONFIRMATION OF DRUG COUNSELING

This is to certify that _____ has completed a minimum of ____ clock hours in one or more of the following settings:

(Check all that apply)

- a series of individual counseling sessions concerning drug-use and abuse;
- a group counseling program providing intervention for drug use;
- a curriculum-based instructional program on drug-use prevention; or
- _____.

Counselor / Therapist Signature

Date

Counseling Agency

Address

Phone

*Verification may be made as deemed necessary by the designated
Luling ISD school official.*