

The County of San Bernardino
Department of Behavioral Health

Client Substance Use Screening Procedure

Effective
Approved

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Purpose

To provide Department of Behavioral Health (DBH) staff with a procedure to collect substance use screening samples from clients and obtain results without compromising sample or program integrity, for programs with mandated screening requirements other than pre-medication laboratory testing.

Definitions

Controlled Site is the best location for taking urine samples and ensuring the integrity of the sample. A controlled site may include such features/options as:

- Using toilet bluing in the urinal or toilet tanks or food-coloring dye for public facilities where introducing bluing into the tank is difficult
- Turning off hot water
- Prohibiting access to any water such as from a shower or sink
- Ensuring there are no soap dispensers, to avoid adulterating the sample

Individualized Substance Abuse Screening Plan (ISASP) is random screening required for Conditional Release Program (CONREP) participants at the Intensive Level and while in a Statewide Transitional Residential Program (STRP). The ISASP specifies in the treatment plan the number of service screenings to be provided randomly each month.

Observed Test is one administered by a staff member of the same sex as the client. Observed tests are not required for some programs in which client privacy may be allowed. An observed test may be indicated for clients the staff clinician believes may alter or substitute the specimen to be provided.

Staff Monitor is a specific staff member who monitors the collection process from beginning to end. A Staff Monitor requirement will be indicated only in applicable programs.

Staff Training

Supervisors in programs requiring substance use screening will ensure staff receive training in:

- Identification of symptoms giving reasonable suspicion for substance use screening as defined in the [Client Substance Use Policy](#)

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Client Substance Use Screening Procedure, Continued

Staff Training (continued)

- Proper specimen collection practices
- Available substance abuse treatment services
- Substance abuse management such as:
 - Monitoring and documenting substance screenings
 - Screening outcomes
 - Responding/taking action indicated in relation to the client's potential risk

Refresher training should also be regularly scheduled for staff to maintain proficiency in substance abuse management and specimen collection practices.

Note: Infectious Diseases – Bloodborne Pathogens training should also be completed according to individual program compliance and with the [Infectious Diseases – Bloodborne Pathogens Policy](#) and [Procedure](#).

Collection Supplies

Specimen collection supplies are to be kept in a secure area at the program clinic. The secure area must preclude client access.

The following specimen supplies should be maintained at the clinic or as required by the program:

- Specimen containers, including those with a wide mouth for collecting specimens from female clients
- Adulterant dipsticks
- Bar-coded client labels (usually ordered for each client as part of the intake process for those programs which use them)
- Temporary labels
- Plastic shipment bags
- Requisition/Program forms specific to the certified toxicology laboratories where testing will occur
- Tamperproof evidence tape
- Sure-Screen strips for PATS
- Protective shipment boxes with absorbent gel, which are sometimes pre-paid
- Nitrile or vinyl gloves (available through the County supply process); avoid latex gloves

Note: Some programs will order supplies directly from the laboratory using supply order forms provided by the lab. Shipments go to an identified designee at the program.

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Client Substance Use Screening Procedure, Continued

Testing Frequency

How often samples are taken for screening may differ for specific programs. The following should also be considered when determining when to request a sample:

- Clients whose behavior suggests recent drug use or relapse will be tested
- Testing should be used to confirm specific type and level of drug use for clients who disclose recent drug use or relapse
- Substance use screening frequency might be increased for clients with a history of chronic chemical abuse or for pregnant and breast feeding women
- Consider, particularly for chronic chemical abusers, unannounced home visit testing
- Substance use screenings are recommended upon the client's return from an unescorted community outing, for those clients in residential programs
- The CONREP program requires random screening depending on the client's treatment level
- PATS requires:
 - Continuing clients to be tested on a random schedule, ranging from one (1) to twelve (12) times during the first three (3) months of treatment
 - Clients admitting to recent drug use must rely on clinical judgment to determine whether testing is needed, after specific type and level of drug use are confirmed

Note: Some programs may require a full drug screen panel for all newly admitted or readmitted clients.

General Testing Process

The following protocol will be employed for collecting urine substance use samples. Each is amplified in detail herein.

Step	Action
1	Plan the client specimen collection.
2	Collect the specimen.
3	Maintain the integrity of the specimen.
4	Maintain chain of custody of the specimen when required by the program.
5	Send the specimen to the laboratory when required by the program.
6	Take prompt action for clients who test positive.

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Client Substance Use Screening Procedure, Continued

**Specimen
Collection
Planning**

Treatment staff will follow these steps to plan client specimen collection:

Step	Action
1	Ensure the client has been provided with: <ul style="list-style-type: none"> • Copy of the written outpatient treatment guidelines in the client's primary language regarding prohibited substance use and substance abuse screening required by the program • Copy of the treatment plan in the client's primary language, including the signed agreement to submit to substance use screening • The ISASP, applicable to the CONREP program
2	Check the CONREP program ISASP, for the frequency at which random substance use screenings will occur for the client. (See the Testing Frequency block above.)
3	Document in client's chart or in treatment notes: <ul style="list-style-type: none"> • Frequency of screenings • Outcomes of screenings
4	Determine if an observed test is appropriate.
5	Select a controlled site to collect the specimen (or, if necessary a public restroom or other facility). Applicable to CONREP, ADS and STAR programs.
6	Notify the Staff Monitor a specimen needs to be collected.
7	Print or arrange to have printed a bar-coded label sheet with the following information on each label: <ul style="list-style-type: none"> • Program name • Client's name and number associated with the program to serve as the unique identifier <p>Note: Temporary numbers may be used as the unique identifier if an individual client number has not yet been assigned.</p>
8	Write the client's name on the label and record the temporary bar-coded label number for each specimen on the copy of the requisition form to be retained by the program.

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**Urine Specimen
Collection
Procedure**

The specimen collection process is a treatment interaction between the individual and the program wherein the individual shares responsibility for specimen integrity and/or chain of custody. Follow the steps below to collect urine specimens for substance use screening:

Note: Some programs may also use alcohol breathalyzers and/or mouth swab tests as clinically indicated.

Step	Action
1	<p>Advise the client that a substance use test is to be done.</p> <p>Note: Clients refusing to test will be considered to be positive for drugs and/or alcohol.</p>
2	<p>Go with the Staff Monitor, when applicable, and client to the selected location.</p> <p>Note: The Staff Monitor or Clinician will observe the entire collection process and note any unusual client appearance or behavior.</p>
3	<p>Prepare the client as follows:</p> <ul style="list-style-type: none"> • Staff Monitor shall ask the client to remove any unnecessary outer garments, such as a coat, that might conceal items or substances which could be used to adulterate the specimen • Personal belongings such as purses or briefcases should remain with the outer garments • Clients may retain their wallets • Direct or Staff Monitor shall direct clients to wash and dry hands prior to providing and collecting the specimen, to preclude introducing adulterants • Direct or Staff Monitor shall direct clients to remain present to ensure no access is made to water fountains, faucets, soap dispensers, cleaning agents, etc.
4	<p>Prepare the location as follows:</p> <ul style="list-style-type: none"> • Ensure there is not a soap dispenser in the room • Ensure water taps are turned off • Same-sex monitor shall place bluing or blue food coloring in the toilet just prior to the client providing the sample. • Staff Monitor or Clinician shall, when mandated, remain in the restroom to visually monitor the collection of the specimen <p>Note: There should be no access to any other source of hot or cold water, such as a shower or sink in the enclosure where the sample is provided.</p>

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**Urine Specimen
Collection
Procedure**
(continued)

Step	Action
5	The Staff Monitor or Clinician will don any personal protective equipment used for universal precautions, as specified in the Infectious Disease/Bloodborne Pathogens Policy and Procedure .
6	<p>Ask the client, in this sequence to:</p> <ul style="list-style-type: none"> • Void into the specimen container • Not flush the toilet • Hand the container to the Staff Monitor or Clinician once the specimen has been collected • Flush the toilet after the Staff Monitor or Clinician has observed that the toilet water remained blue <p>Note: Toilet water any color but blue is considered to be a positive test, as is any other urine adulteration or substitution.</p>
7	<p>The Staff Monitor or Clinician will:</p> <ul style="list-style-type: none"> • Check the volume of the specimen, which should be full (Proceed to Step 8 if the specimen volume is insufficient.) • Remind the client to wash his/her hands • Remind the client to flush the toilet when a sufficient volume has been collected <p>Note: Ensure only one client at a time has access to the collection site.</p>
8	<p>When the specimen volume is insufficient for testing, direct the client to:</p> <ul style="list-style-type: none"> • Drink liquids • Wait a period of time prior to another collection attempt • Reschedule the specimen collection as needed • Expect an observed specimen collection at the rescheduled time

**Urine Specimen
Integrity
Procedure**

The steps below will immediately follow urine specimen collection, to ensure specimen integrity:

Step	Action
1	Observe the specimen temperature to be between 90.5 and 99.8 degrees F, or roughly body temperature.

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Urine Specimen Integrity Procedure
(continued)

Step	Action
2	For programs using "Sure-Screen" strips to test only for drugs and not for alcohol: <ul style="list-style-type: none"> • Affix the strip to a clean container lid • Direct the client to tightly secure the lid to the container • Turn the container on its side for up to five (5) minutes • Read the test result • Send the specimen to the assigned medical lab for testing. (See Specimen to Lab Transport Procedure below.) • Pour the urine sample into the toilet and flush when it is not being sent to a lab for testing • Dispose of the container and testing strip in a provided trash can • Dispose of containers with urine samples containing blood in a bio-hazard waste container
3	Observe the color to be that of "normal" urine.
4	Consider collecting a second specimen as an observed test if there is any suspicion that the first sample has been contaminated.

Specimen Chain of Custody Procedure

Immediately begin chain of custody action at the time the specimen is collected, as follows:

Step	Action
1	Keep the specimen in view at all times prior to sealing and labeling, during the process of assuring specimen integrity. The client must also simultaneously keep the specimen in view.
2	Direct female clients to transfer the collected specimen into the secondary specimen container to be sent to the laboratory when an initial wide-mouthed container is used to collect the specimen.
3	Direct the client to securely fasten a lid/cap on the specimen container. (For Sure-Screen tests, see Urine Specimen Integrity Procedure Step 1 above.)
4	Direct the client to securely seal the specimen container with a tamperproof evidence tap over the lid/cap and down the sides of the container, or the Staff Monitor may do this.

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Specimen Chain of Custody Procedure (continued)

Step	Action
5	Verify with the client the accuracy of the client information on the container labels prior to using them.
6	Remove three (3) labels from the label sheet for each specimen collected and place each on the following locations: <ul style="list-style-type: none"> • Specimen container • Program Requisition Form for the lab • Program copy of the requisition form
7	Direct the client to verify: <ul style="list-style-type: none"> • Identification label from Step 5 above was the same one attached to the container • Container is securely sealed with evidence tape
8	Direct the client to initial the label on the container.

Specimen to Lab Transport Procedure

Follow these steps to prepare the specimen container for transport to the certified laboratory:

Step	Action
1	<p>Ask the client these questions:</p> <ul style="list-style-type: none"> • Are you taking any prescribed medications from a Physician outside of the program? • Since your last screening, have you: <ul style="list-style-type: none"> ○ Taken any Over the Counter (OTC) medications, such as cold tablets, pain relievers? ○ Ingested alcohol? ○ Used any controlled substances or street drugs? <p>Note: This is an opportunity to invite the client to disclose/identify substance abuse as a continuing or new problem prior to the test results. Clients disclosing recent drug use or relapse should still be tested to confirm the specific type and level of drug used.</p>
2	<p>The Staff Monitor or Clinician shall document on the laboratory form/requisition the answers to the questions in Step 1 to include:</p> <ul style="list-style-type: none"> • Names of all drugs or substances taken • In what form the drugs were taken; table, elixir, injection, etc. • In what dosage the drugs were taken • When the drugs were taken, including frequency and dates <p>Note: CONREP program staff shall consult Section 1460.8-9 of the CONREP Policy and Procedure Manual for specific documentation instructions. PATS documentation is completed by the Medical Director.</p>

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Client Substance Use Screening Procedure, Continued

**Specimen to
Lab Transport
Procedure**
(continued)

Step	Action
3	Use one laboratory form for each client, and keep a second copy on file at the program clinic for tracking purposes.
4	Place the specimen container and the document into a plastic bag; use a two-pocket bag if possible.
5	Seal the plastic bag, which will be used to transport the specimen to the laboratory.
6	Place the transport bag in a secure area of the program clinic pending courier pick-up, under the control of the Staff Monitor if possible. Note: Perinatal specimens will be refrigerated when stored while awaiting pick-up.
7	Specimens should be picked up on the same day collected. Note: For programs with regular courier pick up schedules, specimen collection should occur in a timely manner for same day pick up. Programs should contact the laboratory to arrange specimen pick-ups outside the regular schedule.

**Clients Who
Test Positive**

Treatment staff will follow these steps for clients who test positive for illicit or unauthorized drugs or for alcohol.

Step	Action
1	Promptly document the positive results in the client's chart/treatment notes. Include such information as: <ul style="list-style-type: none"> • Date of the test results • Substance tested positive
2	Promptly conduct a clinical and if appropriate, medical review of all pertinent information, in collaboration with the Clinic Supervisor and/or treating Physician/Psychologist as applicable.
3	Promptly consider the options available for the client. These may include but are not limited to: <ul style="list-style-type: none"> • Program sanctions • Program revocation • Referral for substance abuse treatment • Referral to a higher level of care • Termination of Behavioral Health services • Other clinically appropriate action discussed in collaboration with the Clinic Supervisor

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Clients Who Test Positive
(continued)

Step	Action
4	Identify treatments matching the needs of the client based on the overall treatment history. This may or may not involve referral to outside agencies as applicable to the program requirements.
5	Document the above decisions in the client's chart.
6	Monitor and document client attendance at the treatment program. Note: For clients engaged in AA, NA or similar programs, rigorous effort will be made to verify attendance and sponsors.

Treatment Modalities

Different treatment modalities are required for different programs and clients. Treatment modality should be selected in accordance with program requirements. For example;

- CONREP advice applicable to clients with increased organicity is the use of traditional drug/alcohol rehabilitation programs is often precluded. Instead, modalities should be considered which use a more concrete and behavioral focus, rather than insight and sharing
- For clients or particularly for Mentally Disordered Offenders (MDO) engaged in AA or NA or similar external programs, staff should be rigorous about obtaining verification of attendance and sponsors
- Medical administration of antabuse is another option in dealing with chronic chemical abusers

References

County of San Bernardino Probation Department Drug Screening Procedure
 Department of Behavioral Health Alcohol and Drug Services/Perinatal & Addiction Treatment Services Substance Abuse Screening Procedures
 Community Corrections Bureau Procedure #97-05-121J Juvenile Community Corrections Aftercare Procedures
 CONREP Policy and Procedure Manual
 MedTox Diagnostics, Inc. Sure-Screen Instructions

Related Policy or Procedure

Standard Practice Manual CLP0834-1: [Client Substance Use Policy](#)
 Standard Practice Manual SFT7030: [Infectious Disease/Bloodborne Pathogens Policy](#)
 Standard Practice Manual SFT7030-1: [Infectious Disease/Bloodborne Pathogens Procedure](#)