ɪDATIA

Iɴᴛᴇʀɴᴀᴛɪᴏɴᴀʟ Dʀᴜɢ ᴀɴᴅ

Aʟᴄᴏʜᴏʟ Dʀᴜɢ ꜰʀᴇᴇ

ᴡᴏʀᴋᴘʟᴀᴄᴇ Pᴏʟɪᴄʏ

Aᴄᴄʀᴇᴅɪᴛᴀᴛɪᴏɴ Pʀᴏɢʀᴀᴍ

PROGRAM POLICIES, PROCEDURES,
AND APPLICATION

Section I: Introduction

WHY IDATIA?

The goal of DATIA's iDATIA Accreditation program is to have a set of industry developed international standards for drug and alcohol free workplace programs. There is a demonstrated need for standards in drug and alcohol testing program management, especially for programs operating on international levels. A clear consensus of opinion exists that standards need to be adhered to on issues of how to approach drug and alcohol free workplace programs, how to deal with positive test results, what drugs to test for, how to confirm drug tests, etc.

DATIA's iDATIA Accreditation program serves to provide a set of criteria that follow proven U.S. standards, while adapting to international policies and procedures. As the international community advances their drug and alcohol testing practices, the iDATIA program will mirror this progress and expand its program accordingly. The iDATIA program, in conjunction with DATIA's international outreach efforts, will strive to advance the standards of drug and alcohol free workplaces worldwide.

Section II: Application

All applicants are required to complete the following application. If an applicant fails to meet any of the required components, then upon request, the application will be sent to DATIA's International and Standards committees for review. If an exemption is approved, accreditation will be awarded.

Section III: Renewal

Accreditation status will be renewable every two years on June 1. To renew, each organization must provide proof that they continue to utilize the same policy as approved on the initial application. In addition, if significant changes have occurred to iDATIA's standards, then each organization must attest, in writing, to adherence of these new standards. This is of utmost importance as international standards are being developed and advanced on a continual basis.

I-DATIA

INTERNATIONAL DATIA ACCREDITED DRUG AND ALCOHOL FREE WORKPLACE PROGRAM

Submitted by

_____
Company/Organization Name
(Referred to as Company/Organization throughout application)

To

The Drug and Alcohol Testing Industry Association

I-DATIA Review Division

_____
Date

As the industry standards, regulations, and legislation regarding the administration of drug and alcohol testing programs continue to develop, so will the criteria for becoming an International DATIA Accredited Drug and Alcohol Free Workplace Program (DAFWP). As such, the policies, procedures, and process of becoming I-DATIA may be revised. Please ensure that the application submitted for accreditation reflects the most current standards.

Applicants may contact DATIA at info@datia.org or 800-355-1257 for more information and to ensure that they possess the most recent I-DATIA application.

Incomplete applications will be returned for submission of additional application. No application will be reviewed until all required materials have been submitted to DATIA.

General Application Information

SECTION I: COMPANY/ORGANIZATION CONTACT INFORMATION

NAME OF APPLICANT COMPANY/ORGANIZATION: _____

ADDRESS: _____

_____

COUNTRY: _____

TELEPHONE: _____ FAX: _____

EMAIL: _____ WEB SITE: _____

NAME OF DAFWP ADMINISTRATOR: _____

TITLE: _____

Indicate your organization's number of employees: _____

Do you have an existing substance-free workplace program that has been in place for one or more years?   ❑ yes   ❑ no

When did your program begin? _____

SECTION II: VERIFICATION OF ADHERENCE TO I-DATIA PROGRAM STANDARDS

PART A: WRITTEN POLICY

1. Does the written policy identify a DAFWP administrator and describe that person's responsibilities and authority?
   YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

   _____

   _____

2. Does the written policy state that supervisors will be trained on their responsibilities before the DAFWP or testing is implemented?
   YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

   _____

   _____

3. Does the written policy identify who the policy applies to and the different scenarios under which testing should occur (i.e. pre-employment, post accident, random, etc.)?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

4. Does the written policy identify prohibited conduct and consequences for violating the DAFWP? (This must include an employee's refusal to submit to testing)
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

5. Does the written policy describe the prohibited use/misuse of alcohol, prescription medications, over-the-counter medications, and illegal drugs as part of the employee education program?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

6. Does the written policy identify methods of testing for drug and alcohol detection, drugs tested for, cut-off levels of each, and what testing procedure/protocols will be utilized?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

7. Does the written policy follow all local laws and regulations?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

8. Does the written policy address the confidentiality of program records and adhere to applicable rules and regulations to ensure the privacy rights of employees?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

9. Does the written policy express the commitment of management to provide a drug and alcohol free workplace?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

PART B: COMMUNICATION, AWARENESS, AND COMMITMENT

10. Does the written policy require that the policy and procedures be communicated to all employees and supervisors before implementation as part of the employee education?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

11. Does the written policy formalize the commitment of the company and employees to the DAFWP?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

PART C: SUPERVISOR AND EMPLOYEE EDUCATION TRAINING

12. Does the written policy provide for employee drug education and documentation of that training?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

13. Is the drug and alcohol prevention program an integral and ongoing part of the company's employee training and orientation program?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

14. Have supervisors been provided additional training on identifying drug and alcohol use and abuse? (If "reasonable suspicion" testing is allowed, have supervisors been trained appropriately to identify and recognize drug and alcohol abuse.)
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

15. Have procedures for providing supervisor and employee refresher training been established?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

    _____
    _____

PART D: DRUG AND ALCOHOL TESTING

16. Does the DAFWP require the company/organization to utilize a qualified Medical Review Officer (or international equivalent) to evaluate all non-negative test results without an admission of use?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

17. Within the DAFWP, are best practices of alcohol and drug specimen sample collection, testing methodology, chain-of-custody, and cut-off levels utilized?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

18. Is alcohol testing performed using an Evidentiary Breath Test (EBT)?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

19. Does the testing utilize an immunoassay screen or equivalent to verify if a drug is present and Gas Chromatography/Mass Spectrometry (GC/MS) or equivalent as a confirmatory test, without admission of use?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

20. Does the DAFWP include testing circumstances as identified in the written policy?
    YES - PAGE REFERENCE _____ AND IF NECESAARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

PART E: EMPLOYEE ASSISTANCE – OPTIONAL

21. Does the policy provide a plan of action to assist employees who test positive and have a substance abuse issue?
    YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:
    _____
    _____

22. Does the plan include appropriate information for referral to local assessment and treatment centers?

YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

_____

_____

23. Does the plan include a procedure for rehabilitation and/or referrals for assessment and employee assistance?

YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

_____

_____

24. If an Employee Assistance Program (EAP) policy exists is it included in the DAFWP policy; or if not, is it clearly stated that there is no EAP policy?

YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

_____

_____

PART F: DAFWP EVALUATION - OPTIONAL

25. Does your DAFWP define a baseline of indicators (absenteeism, turnover, accidents, productivity) to compare and evaluate the impact the policy has had on the company?

YES - PAGE REFERENCE _____ AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION:

_____

_____

26. Does the organization consider the DAFWP program evaluation and the impact it has had on the organization, which is measured by indicators of implementation, management and economic results?

YES – AND IF NECESSARY PLEASE PROVIDE AN EXPLANATION: _____

_____

SECTION III: DECLARATION AND RELEASE

By signing below, I attest that I am submitting this application on behalf of my Company/Organization to become an International DATIA Accredited Drug and Alcohol Free Workplace Program. I understand that information gathered in this application may be used by DATIA for statistical purposes and for evaluation of the iDATIA program and standards. I understand that DATIA will make every effort to keep specific information contained in this application concerning my company and its operations confidential. I further understand that DATIA reserves the right to verify any information contained in this application, and that providing false or misleading information or otherwise violating the rules and procedures of the iDATIA program may be grounds for the rejection of this application, revocation of accreditation, or other appropriate disciplinary actions. I understand that our company/organization must notify DATIA of any company changes that affect the information contained within this application.

Name of DAFWP Administrator: _____

Signature: _____

Date: _____

❏ A copy of our Drug and Alcohol Free Workplace Program in English is attached with this application (Required).

SECTION IV: I-DATIA FEES

❏ $300 iDATIA Accreditation Only ($75 non-refundable application assessment fee to be charged upon receipt of application – the balance to be charged upon application approval. Approval must be received within 6 months, otherwise a new application must be submitted.)

❏ $450 iDATIA Accreditation PLUS DATIA regular membership through September of the following year ($75 non-refundable application assessment fee to be charged upon receipt of application – the balance to be charged upon application approval. Approval must be received within 6 months, otherwise a new application must be submitted.)

❏ MC   ❏ VISA   ❏ AMEX

Card # _____   Exp. Date: _____

Name on Card: _____

Signature: _____