

WUTC
HEADQUARTERS INSPECTION FORM
ALCOHOL MISUSE PREVENTION PROGRAM
(2008 Camas Alcohol Inspection-Adopted 9-22-08)

Name of Operator:		Georgia Pacific Consumer Products LLC	
OP ID No. 31096		UTC Representative (s): Patti Johnson	
HQ Address:		Inspection Date(s):	
133 Peach Tree Street NE Atlantic, Georgia 30303		9-29 and 30, 2008 and 10/6/2008 for standard 10-1-2008, 10-6, 7 and 8, 2008 for follow up & D/A for old D/A manual	
Co. Official: Michael Tompkins Phone No.: (360) 834-8460 Fax No.: Emergency Phone No.:		401 Adams Camas, WA 98607	
Persons Interviewed		Title	
Phone No.			
Laurie Lehman	HR Generalist	360 834 8125	
Curt Christianson	HR NW Manager	360 834 8123	
Roy Rogers	Consultant	503 860 7435	

NOTE: letter to Steve Young, cc Curt Christianson, cc Greg Collins, cc Roy Rogers

The 2008 Drug and Alcohol inspection included a follow up inspection for the 2002 inspection, an inspection of Georgia Pacific's Camas Mill Drug and Alcohol manual revised July 7, 2008 and an inspection the of Koch's corporate Drug and Alcohol manual that had been customized for Georgia Pacific.

This is an inspection of GP Camas Mill Drug and Alcohol Manual. Koch's is the new owner and their corporate manual was adopted on September 22, 2008 and will be implemented after the October, 2008 training is complete.

Currently, GP is not part of a consortium, however, they are part of the whole Georgia Pacific Consumer Products LLC pool employees. Each Mill has a standalone DOT drug plan to ensure at least 25% of employees are tested annually.

Type of Facility:

Gas Transmission Pipeline
 Gas Distribution System

Hazardous Liquid Pipeline
 Liquefied Natural Gas

Alcohol Misuse Plan and Policy developed by: Alcohol Misuse Testing Program administered by:

Operator

Operator

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Contractor
 Consortium

Contractor
 Consortium

Contractor records maintained by:

Specimen collection conducted by:

Operator
 Contractor
 Consortium

Operator Personnel On-Site
 Operator Personnel Off-Site
 Contractor Personnel On-Site
 Contractor Personnel Off-Site

§199.202 Alcohol misuse plan		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.202	Does the operator maintain and follow a written Alcohol Misuse Plan (AMP)? YES Does the AMP contain:	Section I.A
<input checked="" type="checkbox"/> §199.202	Provisions for conducting alcohol tests in accordance with DOT procedures found in 49 CFR Part 40? YES	Note: Clarification of company policy vs. DOT requirements. Company policy should be identified by using bold and underlined type. Section I.A.4
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.202	Provisions that include types of testing, recordkeeping, reporting, education and training elements? yes	Section I.A.4

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§199.209 Other requirements imposed by operators		
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(a)</p>	<p>Does the plan address authority of operator or rights of employee with regard to use or possession of alcohol or rehabilitation? Zero Tolerance</p>	<p>Section I.A.5</p>
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO §199.209(b)</p>	<p>Does the operator conduct pre-employment alcohol testing? (not required) If yes, the operator must—</p> <p>Page 5 cannot be optional must treat everyone the same per 199.209 (2): 10-8-2008, 2008 manual updated</p> <p>§199.209 Other requirements imposed by operators.</p> <p>(b) Operators may, but are not required to, conduct pre-employment alcohol testing under this subpart. Each operator that conducts pre-employment alcohol testing must—</p> <p>(2) Treat all covered employees the same for the purpose of pre-employment alcohol testing (i.e., you must not test some covered employees and not others);</p>	<p>Section I.C.1.a</p>
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(b)(1)</p>	<p>Conduct a pre-employment test before the first performance of covered functions by every covered employee. New employee alcohol test optional. YES</p>	<p>Whether a <u>new employee</u> or <u>someone who has transferred</u> to a position involving the performance of covered functions. Section I.C.1.a and Section IV A 1 a GP policy</p>

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(b)(2)	Treat all covered employees the same for the purpose of pre-employment alcohol testing; YES	Section IV.A.1.b page 17
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(b)(3)	Conduct the pre-employment tests after making a contingent offer of employment or transfer, subject to the employee passing the pre-employment alcohol test;	Section IV.A.1.c page 17
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(b)(4)	Conduct all pre-employment alcohol tests using the alcohol testing procedures in DOT Procedures; and Reviewed Appendix C	DOT Procedures found in 49 CFR Part 40 Section IV.A.1.d, page 17 and Alcohol testing procedures are appendix C page 52
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.209(b)(5)	Not allow any covered employee to begin performing covered functions unless the result of the employee's test indicates an alcohol concentration of less than 0.04. 10-7-08 emailed from corporate confirmed that Mill has never had a positive gas employee test	Section IV.A.1.e page 17
§199.211 Requirement for notice		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.211	Does the plan specify operator's procedures for notification to employees prior to conducting alcohol testing? 9-30-2008 UTC given copy of old O&M dated 2006. No copy of DA manual in UTC office before that New DA manual has not been implemented; Training for new manual is planned for October. Even though manuals similar will not be implemented until training has occurred 2008 plan will not be	Plan must contain specific details on how this is accomplished and what information is provided to employees. Section III.B page 16

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	<p>implemented without notifying and training employees – plans are similar the new plan has more detail.</p> <p>Harris group wrote the original plan</p>	
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.211</p>	<p>Does the plan clearly delineate under what authority the alcohol testing is being conducted?</p> <p>Requested List who are covered employees and covered by both Drug and Alcohol. Laurie getting: 10-8-2008 Reviewed</p> <p>They have own pool. NOT part of a consortium.</p>	<p>Section III.A.1 & III.A.2 page 16</p>

§199.215 Alcohol concentration		
COMPLIANCE	CRITERION	GUIDANCE
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.215</p>	<p>Does the plan specify that no employee may report for duty or remain on duty with an alcohol concentration of 0.04</p> <p>Suggest - Plan says “cannot do safety sensitive function, this wording is in drug definition. Is clearer when covered tasks used: 10-8-2008, included in 2008 manual updated</p> <p>Remove 40.23 it refers to Drug safety sensitive task while 199.215 refers to Alcohol covered tasks. This is Alcohol section not Drug, 10-8-2008, included in 2008 manual updated</p>	<p>Section VI.B page 31</p>

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.215	Does the plan specify what actions will occur should the operator have actual knowledge that an employee has an alcohol concentration of 0.04 or greater?	Section VI.B P2 page 31
§199.217 On-duty use		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.217	Does the plan specify that on-duty use of alcohol is prohibited?	Section VI.C PG 30 ALSO Section 1 A 5
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.217	Does the plan specify that no employee may be allowed to perform or continue to perform a covered function, if an employee has used alcohol while on-duty?	Section VI.C page 31 and 1 A 5 page 4
§199.219 Pre-duty use		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.219	Does the plan contain provisions that prohibit the use of an employee who has used alcohol within 4 hours of reporting for duty?	Section VI.D page 31

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§199.219 Pre-duty use		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.219	Does the plan address that an employee who has been notified to respond to an emergency must not use alcohol once notified to report?	Section VI.D page 31
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.219	Does the plan address that an operator who has actual knowledge that an employee has used alcohol, once being notified to respond to an emergency shall not allow the employee to perform covered functions?	Section VI.F.2 GP policy pg 31 and also VI F 1 page 31 Requested copy of all negative alcohol tests: 10-8-2008, reviewed 10-7-08 emailed from corporate confirmed that Mill has never had a positive gas employee test
§199.221 Use following an accident		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.221	Does the operator's plan provide that an employee shall be prohibited from using alcohol following an accident, in which the employee's action contributed or cannot be completely discounted?	Section VI.E PAGE 31
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.221	Does the plan require that an employee may not use alcohol for up to 8 hours following an accident or until a test has been administered?	Section VI.E Page 36

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§199.223 Refusal to submit to a required alcohol test		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.223	Does the plan prohibit an employee's refusal to submit to a post-accident test? 199.225(a)	Section VIII.A.1 Also PG 38 Section D 2 a and Section IV B 2page 17
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.223	Does the plan prohibit an employee's refusal to submit to a reasonable suspicion test? 199.225(b)	Section VIII.A.1 and 2 also page 38 Section D 2 a & b
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.223	Does the plan prohibit an employee's refusal to submit to a follow-up test? 199.225(d)	Section VIII.A.2 page 36. Could only happen for those who have come forward and admitted a drinking problem others would be terminated.
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.223	Does the plan address that an employee's refusal to submit to a test shall result in that employee not being permitted to perform or continue to perform covered functions?	Section VIII.A.2 page 36
§199.225 Alcohol tests required		
	Does the operator's plan provide for the following:	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)	Post-Accident Does the plan specify alcohol testing for post-accident and address the following:	Section IV.B.1
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(1)	1. The operator shall conduct the testing as soon as practicable.	Section IV.B.2 and Section IV B 2page 17

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§199.225 Alcohol tests required		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(1)	2. Each surviving covered employee shall be tested if an employee's performance either contributed or cannot be completely discounted.	Section IV.B.1 and 2 page 17 and 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(1)	3. The decision not to administer a test must be based on the operator's determination that the covered employee's performance could not have contributed to the accident.	This determination should be based on the best available information at the time of the accident. Section IV.B.1 and 2 page 17 & 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(2)(i)	4. Is the test conducted within 2 hours?	Section IV.B.1 and 2 page 17
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(2)(i)	5. If test was not conducted within 2 hours, does the operator prepare and maintain a record stating why the test was not administered.	Section IV.B.2 page 17
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(2)(i)	6. Does the operator attempt testing up to 8 hours following an accident?	The operator may attempt to test up to 8 hours after which time all attempts must cease. Section IV.B.2 page 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(2)(i)	7. Is a record prepared and maintained as to why a test was not administered within 8 hours?	Section IV.B.2 page 18
<input checked="" type="checkbox"/> §199.225(a)(3)	8. The plan must state the employee shall remain readily available until a post-accident test is conducted.	Section IV.B.4 and 3 page 18

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§199.225 Alcohol tests required		
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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(3)	Does the plan specify that failure to remain readily available will be deemed as a refusal to test?	Section IV.B.3 page 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(3)	Does the plan address provisions regarding the need for medical attention?	Note: No operator shall delay medical treatment or delay emergency response Section IV.B.4 page 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(a)(3)	Does the plan provide provisions regarding the need to leave an accident scene to obtain assistance in responding to the accident?	Section IV.B.4 page 18
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(1)	Reasonable Suspicion Does the plan specify reasonable suspicion alcohol testing and address the following elements:	Section IV.C
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(2)	1. Decisions to test shall be based on specific contemporaneous, articulable observations concerning the appearance, behavior, speech or body odor of the employee.	Note: The supervisor who makes the determination of reasonable suspicion shall not conduct the breath alcohol test on that employee. Section IV.C.2.a pg 19 Appendix D page 65 and Appendix E page 67
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(1)	2. The observations shall be made by one supervisor trained in detecting symptoms of alcohol misuse and must be documented. Reviewed GP training material and sign in sheet	Section IV.C.2.a & IV.C.4.e

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§199.225 Alcohol tests required		
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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(3)	3. Does the plan authorize testing only when observations are made during, just before or just after performing covered functions?	When observations are required by §199.225(b)(2) Section IV.C.2.b page 19
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(i)	4. Is the test conducted within 2 hours?	Note: If test is not conducted within 2 hours, operator must document reason. Section IV.C.5 pg 21 Lacamas medical group would do alcohol testing in appendix A. Reality is they would do drug and Alcohol at same time
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(i)	5. If test was not conducted within 2 hours, does operator prepare and maintain a record stating why the test was not administered?	Section IV.C.5 pg 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(i)	6. Does the operator attempt testing up to 8 hours?	The operator may attempt to test up to 8 hours after which time all attempts must cease. Section IV.C.5 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(i)	7. Is a record prepared and maintained as to why a test was not administered?	Section IV.C.5 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(iii)	Does the plan specify that an employee may not perform or continue to perform under the influence or be impaired by alcohol until:	Section IV.C.6

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(iii)(A)	1. An alcohol test is administered with alcohol concentration of less than 0.02; or Section typo IV C 6 a should read .02 per code not .04. Reviewed 10-16-2008 manual corrected	Section IV.C.6.a

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§199.225 Alcohol tests required		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(iii)(B)	2. The start of employee's next regular shift, but not less than 8 hours following determination to test.	Section IV.C.6.b pg 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(iv)	Does the plan stipulate that no action be taken by the operator against an employee based solely on employee's behavior and appearance in absence of a DOT alcohol test?	Note: Clarification of company policy vs. DOT requirements. Company policy should be identified by using bold and underlined type.
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(b)(4)(iv)	Does the plan specify any independent authority imposed by the operator? Return-to-Duty	Section IV.D
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(c)	Does the plan specify return-to-duty provisions?	Section IV.D
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(c)	Does the plan specify prohibited conduct? Plan does not specify prohibited conduct. Reviewed 10-16-2008 manual updated	Section IV.D and Section 1 A 6 page 4
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(c)	Does the plan specify the employee be administered a return-to-duty alcohol test?	Section IV.D.3 pg 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(c)	Does the plan indicate that an employee must have a return-to-duty test with an alcohol concentration below 0.02? Section IV D 3 says safety sensitive duties should read covered tasks. Plan appears to	Section IV.D.3 pg 21

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(2)(i)	1. Operator's copy of test form. none	Must include results of test. Section XIII.C.2.a
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(2)(ii)	2. Documents of refusal to submit to alcohol tests. none	Section XIII.C.2.b
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(2)(iii)	3. Documents supporting employee's dispute to result of alcohol test. none	Section XIII.C.2.c
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(3)	Records related to other violations of Part 199. none	Section XIII.C.3
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(4)(i)	Records related to evaluations 1. Records of determination by SAP concerning covered employee's need for assistance. none	Section XIII.C.4.a
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(4)(ii)	2. Records demonstrating employee's compliance with SAP recommendations. none	Section XIII.C.4.b

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§199.227 Retention of records		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(5)	3. Records demonstrating operator's MIS annual testing data. Reviewed MIS annual testing data	Section XIII.D.a
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(6)(i)	Records related to education and training 1. Alcohol Misuse Awareness materials. Included in EBA material	Section XII.B.1 Obtain a copy of operator's policy on alcohol misuse.

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(i)	Records related to collection process 1. Collection log books (if used). none	Section XIII.C.1.a Each employer or its agent shall maintain these records
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(ii)	2. Calibration documentation for EBT devices. none	Each employer or its agent shall maintain these records Section XIII.C.1.b
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(iii)	2. Documents on BAT Training. Reviewed Breath Alcohol technician certification for Sheila Baughman on 11-6-1999, 12-5-2002 and 10-9-2006. Meets 40.33 requirements	Each employer or its agent shall maintain these records Section XIII.C.1.c

<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(iv)	3. Documents supporting decisions to administer reasonable suspicion tests. none	Each employer or its agent shall maintain these records Section XIII.C.1.d
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(v)	4. Documents supporting decision to administer post-accident tests. none	Section XIII.C.1.e
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(1)(vi)	5. Documents supporting medical explanation of inability to provide a breath for testing.	Section XIII.C.1.f
	Records related to results	

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§199.227/§40.333 Retention of records		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(1)	5. Alcohol MIS annual report data Reviewed MIS annual report data During the standard inspection GP had contractor painted. Reviewed contractor employee Drug/Alcohol testing	Each employer or its agent shall maintain these records Section XIII.B.1.e
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §40.333	Records to be kept for 3 years Information obtained from previous employers under §40.25 concerning drug and alcohol test results of employees. No information from previous employers , gas employees are promoted from other positions and their previous employer are GP and they were not DA tested, because they are already in pool During the standard inspection GP had contractor painted. Reviewed contractor employee Drug/Alcohol testing	Section XIII.B.4
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(2) / §40.333	Records to be kept for 2 years 1. Collection process records and training documentation.	Except calibration of EBT devices Section XIII.B.2.a & page 46 Section XIII.B.2.b
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(3) / §40.333	Records to be kept for 1 year 1. Records of all test results below 0.02 level. none	As defined by CFR 49 Part 40 Section XIII.B.3

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<p>§199.227(b)(1)</p>	<p>refusals to submit to required alcohol tests. Reviewed 10-17-2008 email from First Advantage</p>	<p>shall maintain these records. Section XIII.B.1.b page 45</p>
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(1)</p>	<p>3. Calibration documentation. No referrals, so no specific equipment to request calibration for.</p>	<p>Each employer or its agent shall maintain these records. Section XIII.B.1.c</p>
<p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(1)</p>	<p>4. Employee evaluations and referrals. Technically there are no referrals. Employee who says they have problem, goes to his/her medical Dr, a program is developed for them, then a SAP must clear to allow back to work.</p>	<p>Each employer or its agent shall maintain these records. Section XIII.B.1.d page 45</p>

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§199.225 Alcohol tests required		
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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(e)	2. An employee is to return-to-duty within 8 hours following administration of an alcohol test with an alcohol concentration of 0.02 or greater but less than 0.04.	Section IV.G.1.b & IV.G.1.a pg 22. No tolerance unless employee came forward and said needed assistance. GP would use medical and allow. All others terminated
§199.227/§40.333 Retention of records		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(a)	Does the operator maintain records in a secure location with controlled access? All records at Lammas Medical Group.	Section XIII.A.1 GP does not hire directly from outside into covered task position so never had contacted last employer for DA information. GP would if for some reason some one hired from outside
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)	Does the plan require the operator to keep the following records:	Do a review of records to verify that the plan is being carried out. Section XIII
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(b)(1)	Records to be kept for 5 years 1. Employee alcohol tests results with alcohol concentration of 0.02 or greater. Request if any. 10-16-2008 reviewed email from corporate verifying no positives test for any gas employee at GP	Section XIII.B.1.a page 45
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	2. Documentation of employee	Each employer or its agent

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(e)	Retesting Does the operator's plan specify retesting when:	Section IV.G
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(e)	1. An employee's alcohol concentration is 0.02 or greater but less than 0.04.	Section IV.G.1pg 22

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§199.225 Alcohol tests required		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(d)	Follow-Up Tests Does the plan specify follow-up testing provisions to include:	Section IV.E
<input checked="" type="checkbox"/> §199.225(d)(1)	1. Employees requiring assistance shall be subject to follow-up testing.	Assistance includes resolving problems associated with alcohol misuse. Section IV.E.1 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(d)(1)	2. Employees shall be subject to testing in accordance with SAP determination.	IV.E.1 page 21 Appendix A page 50 has name and number Request copy of MRO license. 10-16-2008 Reviewed letter dated 9-29-04 from American Association of MRO (do the certification) that he is certified until 2009. Also name and phone number to call pg 50 10-16-2008 Reviewed
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.225(d)(2)	3. Testing shall be conducted just before the employee is to perform; while an employee is performing; or just after the employee has ceased performing a covered function.	Section IV.E.4 page 22

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	<p>use words interchangeably. This is drug not alcohol. Reviewed 10-16-2008 wording changed to covered task</p>	
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	REviewed	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(6)(ii)	2. Documents of compliance with requirements of access to facilities and records. 199.231 Call testing site and MRO and could visit either	Section XII.B.2
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(6)(iii)	3. Documents on supervisor training for reasonable suspicion determinations. none	Section XII.B.3
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.227(c)(6)(iv)	4. Documents certifying training requirements. Reviewed Breath Alcohol Technician Training for Sheila Baughman for Nov 6, 1999, December 5, 2002 and 10-9-2006. OK	Section XII.B.2
§199.229 Reporting of alcohol testing results		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.229(a)/§40.25 and App H	Does the plan specify alcohol testing data to be maintained and reported to RSPA annually?	Note: Large operators must submit the report not later than March 15 each calendar year. Small operators will be randomly selected to report. This data is for the previous calendar year (Jan. 1 – Dec. 31). Section XIII.D.a pg 47
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.229(a) /§40.25 and App H	Does the operator provide documentation that information collected is being maintained? Request copy Reviewed Copies provided in timely manner	Section XIII.D.a page 47

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§199.229 Reporting of alcohol testing results		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Does the operator provide	Missed test - a test that is

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§199.229(a))§40.25 and App H	documentation that “missed” test information is being collected and maintained? none	not conducted within 8 hours. “Missed” test information must be submitted to OPS, (when the MIS information is submitted) for 3 years beginning in 1995. Section XIII.B.5
§199.231 Access to facilities and records		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(a)	Does the plan specify procedures regarding the release of employee information?	Section X
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(b)	Does the plan specify release of records pertaining to employee’s use of alcohol?	Records should include alcohol test results. Section X.B.1
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(b)	Does the plan address access to records by employee without payment restrictions?	Section X.B.2
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(c)	Does the plan specify access to records by the Secretary of Transportation, RSPA, or other DOT/State agency representatives?	Section X.B.2
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(d)	Does the plan specify release of records including operator’s alcohol testing results to the Secretary of Transportation, RSPA or other DOT/State agency representatives?	Section X.B.4

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§199.231 Access to facilities and records		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(d)	Does the plan stipulate the release of name-specific alcohol test results when requested by appropriate officials?	Section X.B.4
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(e)/§40.327(b)	Does the plan specify release of records to NTSB as part of an accident investigation?	Section X.B.5
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(f)/§40.81(g)	Does the plan address provisions for release of records by operator to subsequent employer?	Section X.B.6
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(f)/§40.320	Does the plan specify restrictions on release of records?	Section X.B.7 & X.B.8
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(g)/§40.323	Does the plan specify release of employee information to the employee, decision makers in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual?	Section X.B.7
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.231(h) /§40.321(b)	Does the plan address the release of an employee's records upon the specific, written consent of the information to an identified person?	Section X.B.8

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§199.233 Removal from covered function		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.233	Does the plan specify provisions on removal from covered functions for violations of alcohol misuse?	Prohibited Conduct - alcohol concentration of 0.04 or greater, actual knowledge of on-duty use, actual knowledge of pre-duty use (4 hours prior to work), use of alcohol resulting in an accident and refusal to submit to an alcohol tes Section VI.B 2 page 31
§199.235 Required evaluation and testing		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.235	Does the plan address the requirement for a referral or evaluation, following an employee engaging in prohibited conduct? Wording clarification made in manual on page 37	Section IX.B
§199.237 Other alcohol-related conduct		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.237	Does the plan specify provisions where an employee has an alcohol concentration of 0.02 or greater but less than 0.04 to perform covered functions until: Policy is page 38 D 1 And IX A 1. Once an employee is told he is to be drug or alcohol tested he can no longer disclose that he is using or drinking. Safety meeting, brochure, union book etc employees	Note: A covered employee may not perform or continue to perform covered functions if they have an alcohol concentration of 0.02 or greater. Section IX.D.1

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	taught zero clearance. Reviewed brochure, union book	
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.237(a)(1)	1. Employee's alcohol concentration is below 0.02, or	Section IX.C.2 page 38
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.237(a)(2)	2. The employee's next scheduled tour of duty, or at least 8 hours have elapsed?	Section IV.C.6.b page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.237(b)	Does the plan specify that no action against an employee can be taken solely on a test result of less than 0.04?	However, this doesn't prohibit an operator from exercising their independent authority. Section IV.C.7 page 21

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§199.239 Operator obligation to promulgate a policy on the misuse of alcohol		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(a)	Does the plan address educational materials that explain the alcohol requirements?	Section III.C.1 pg 16
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(a)(1) Start day 2 here	Does the plan stipulate that a copy of the material is provided to employees prior to the commencement of testing? In union contract that there is zero tolerance. And Reviewed EBA brochure Pre employment testing is optional. Only time they do is post accident and suspension	Section III.C.1.a
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(a)(2)	Does the operator maintain written documentation to verify notice? Reviewed documentation, each employee's signs off every year that they have read and it includes the drug and alcohol plan. This is documentation it is done.	Section III.C.1.b
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(a)(2)	Does the plan specify that materials provided to employees address the following:	Section III.C.2 page 16
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(1)	1. Identify of persons to provide answers about operator's materials.	Section III.C.2a page 16 and appendix A
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(2)	2. A list of covered employee categories.	Section III.C.2.b page 16

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		and Appendix A
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(3)	3. Guidance on period of coverage during work day that an employee is subject to testing provisions.	Note: Just before, during and just after ceasing to perform covered functions. Section III.C.2.c Reviewed various places where it is noted in DA manual

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§199.239 Operator obligation to promulgate a policy on the misuse of alcohol		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(6)	1. Procedures to be utilized to test for presence of alcohol.	Section III.C.2.f and Procedure in appendix C III
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(8)	5. Explanation of refusals and consequences.	Section III.C.2.h And page 32 section V11
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(9)	6. Consequences of employee violation of the prohibitions of the plan and removal from performing covered functions.	Section III.C.2.i and page 32 Also page 32 also Section I A 6 page 4 AOC VII 2 is GP policy and needs to be bold and underlined 10-8-2008 GP agreed to make change
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(10)	7. Consequences of testing at 0.02 or greater but less than 0.04	Section III.C.2.j page 17 and page 38 Section IX Disciplinary Actions Section D
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(b)(11)	8. Information on alcohol effects on individual's health, work, and personal life, signs and symptoms of alcohol problems, evaluating and resolving problems, referral to an EAP or management.	Section III.C.2.k page 17 and page 44 and in EAP brochure
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.239(c)	Does the plan discuss optional materials and authority for issuance of such materials?	Operators policy related to alcohol possessions, and levels invoked by an operator's independent authority. Page 45 Section VII A 4,

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		Reviewed all elements in list are documented in labor agreement
§199.241 Training for supervisors		
x YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.241	Does the plan specify that at least 60 minutes of training for supervisors, who make reasonable suspicion determinations? Reviewed sign in sheet and presentation slides for Drug and Alcohol training.	Section XII.B.2 page 45

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§199.241 Training for supervisors		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.241	Does the plan provide such training shall include training on the physical, behavioral, speech and performance indicators of probable alcohol misuse?	Section XII.B.2 page 45, training in house on cbt
§199.243 Referral, evaluation, and treatment		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(a)	Does the plan provide that employees who engage in prohibited conduct shall be advised of available resources to evaluate and resolve problems associated with alcohol misuse?	Section XII.A.3.c page 45. Reviewed bulletin boards etc. note only those come forward are subject to rehab
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(a)	Does the plan contain names, addresses, and phone numbers of SAPs, counselors, treatment programs, and third party provider networks?	It is acceptable if the plan provides that the Third Party provider network gives the name and phone number directly to the employee. Appendix "A" Page 50,
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(b)	Does the plan address that employees who engage in prohibited conduct shall be referred to a SAP for evaluation?	Section IX.B.1 Manual update to make clear distinction between employees who came forward with alcohol problem and that employees cannot "come forward" after notified to be tested.

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(1)	Does the plan specify a return-to-duty test is required when an employee engages in prohibited conduct described in §§199.215 through 199.223.	An employee must have a test result of less than 0.02 before returning to perform covered functions. Section IX.B.2.e page 37
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§199.243 Referral, evaluation, and treatment		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(i)	Does the plan specify evaluation by SAP to determine that the employee has properly followed any prescribed program?	Section IX.B.2.c page 37
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(ii)	Does the plan specify that an employee shall be subject to unannounced follow-up testing?	Section IX.B.2.f page 37
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(ii)	Does the plan stipulate that a minimum of six tests be conducted within the first 12 months following an employee's return-to-duty test?	Section IV.E.2 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(ii)	Does the plan specify that follow-up testing may include testing for drugs?	Drug testing must be determined by the SAP. Section IV.E.3 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(ii)	Does the plan specify that follow-up testing cannot exceed a 60 month period?	Section IV.E.1 page 21 says will test up to 60 months – says it backwards
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(c)(2)(ii)	Does the plan specify that the SAP may terminate follow-up testing after completion of the first six tests?	Section IV.E.2 page 21
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(d)	Does the plan specify evaluation and rehabilitation maybe provided by the operator, SAP under contract, or SAP not affiliated with the operator?	Section V.D.2 page 27

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§199.243 Referral, evaluation, and treatment		
COMPLIANCE	CRITERION	GUIDANCE
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.243(e)	Does the plan specify provisions regarding referral to SAPs and restrictions that may apply?	SAP can't refer an employee to the SAP's private practice, to a person or organization from which the SAP receives remuneration or in which the SAP has financial interests. Section V.D.2 page 26
§199.245 Contractor employees		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.245(a)	Does the plan specify that the contractor may carry out alcohol testing, training, and education?	Section XIV.A page 48 Reviewed Dennis Harding Painting Drug and Alcohol testing because during the standard inspection I observe them The manual was formally accepted on 9-22-2008 by management and will be implemented within the next 30 days.
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.245(b)	Does the plan stipulate that an operator is responsible for ensuring compliance with the alcohol provisions?	Section XIV.A page 48
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.245(c)	Does the plan specify that the operator, RSPA Administrator, and DOT/State agency representatives have access to property and records?	Section XIV.B.2 page 48

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<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A §199.245(c)	Does the plan have detailed specifications for monitoring contractor's compliance with the requirements of 49 CFR Parts 199 and 40?	<p>Section XIV.B.1 page 48 and Section XIV D page 49 PV says may needs to say will10-8-2008 2008 manual updated</p> <p>And Section XIV D 1q page 49</p>
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