

## **KEYSTONE LOCAL SCHOOL DISTRICT BOARD OF EDUCATION'S RANDOM DRUG TESTING POLICY**

The Keystone Local School District Board of Education (“Board of Education” or “Board”) desires to implement a Random Drug Testing Policy to promote the health, safety and welfare of students within the District. This Policy reflects the commitment of the Board of Education and the community to establishing a truly drug and alcohol free school environment. This Policy applies to all of the following students in grades 9-12:

1. student athletes,
2. students participating in one or more extra-curricular/co-curricular activities and
3. student drivers (i.e., students possessing District driving and/or parking privileges).

The program does not affect the current policies, practices, or rights of the Board regarding student drug and/or alcohol possession or use, where reasonable suspicion is established by means other than drug and/or alcohol testing through this Policy.

Although students risk the loss of the above-named privileges, the Random Drug Testing Policy is designed to be non-punitive with regard to academics. No student will be suspended or expelled from school or penalized academically as a result of a certified positive test conducted by the District under this Policy. The results of random drug tests will not be documented in any student’s academic records. Such results will not be disclosed to criminal or juvenile authorities unless otherwise required by law.

### **PURPOSES OF THIS POLICY SHALL BE:**

1. To provide a healthy and safe environment to all students to which this Policy applies.
2. To discourage all students from using drugs and alcohol.
3. To provide students with the opportunity to become leaders in the student body for a drug and alcohol free school.
4. To provide solutions for the student who does use drugs and alcohol.
5. To encourage students to remain drug and alcohol free.

All students and parents/guardians/custodians must sign an “Informed Consent Agreement” for drug testing in order to be eligible for the above-named privileges. Once a signed form is on file with the District, it remains valid for all privileged activities while the student remains enrolled at the District.

The Principal/designee will make all final decisions regarding any drug testing issues within his/her building.

## **DEFINITIONS**

### **STUDENT ATHLETE**

Any student in grades 9-12 participating in a Keystone High School athletic program and/or contests under the control and jurisdiction of the Board of Education and/or the Ohio High School Athletic Association (“OHSAA”). This Policy also includes cheerleaders and other club sports that are approved by the Board of Education.

### **EXTRA-CURRICULAR/CO-CURRICULAR ACTIVITIES**

Any student in grades 9-12 participating in a club, group, student organization and/or activity that is Board of Education approved that does not involve a grade.

### **STUDENT DRIVER**

Any student in grades 9-12 possessing District driving and/or parking privileges.

## **DRUG TESTING EFFECTIVITY PERIODS**

### **STUDENT ATHLETES**

In-season start dates will begin as published by the OHSAA or sanctioning organization and continue until the completion of awards program for that sport for the District. There are three athletic seasons: Fall, Winter, Spring. A participant whose activity is not in-season at the time of the participant’s violation of this Code shall be considered an off-season participant. Students may be tested during the off-season. A student is not considered an “off-season” athlete until they have been a member of an interscholastic sport.

### **EXTRA-CURRICULAR/CO-CURRICULAR ACTIVITIES**

In-season extracurricular/co-curricular activities for an elected or appointed position begins with election/appointment through the expiration of the term of the office/season/activity. In-season extracurricular/co-curricular activities for all other clubs, groups, student organizations and/or activities begins with the first meeting through the end of the school year, including all activities scheduled during summer.

## **STUDENT DRIVERS**

Student drivers will be subject to random drug and alcohol testing during the entire school year (i.e., the first day of classes in the fall until the last day of classes in the spring).

## **RANDOM SELECTION**

A system of selecting eligible students for drug and alcohol testing in which each eligible student shall have a fair and equitable chance of being selected each time selections are required.

## **ILLEGAL/ILLCIT DRUGS**

Nicotine (Tobacco), Marijuana, LSD, Amphetamines, Methamphetamines, Methadone, Anabolic Steroids, Methaqualone, Barbiturates, Benzodiazepines (Valium), Opiates, Cocaine, Propoxyphene (Darvon), MD/MA (Ecstasy), Phencyclidine, Tricyclic, Buprenorphine, Oxycodone, and/or any substances included in 21 U.S.C. 802(6). This definition also includes all prescribed and over-the-counter drugs being used in any way other than for medical purposes in accordance with the directions for use provided for in the prescription or by the manufacturer.

## **ALCOHOL**

Any intoxicating liquor, beer, wine, mixed beverage, or malt liquor beverage as defined in the Ohio Revised Code Section 4301.01. The term "alcoholic beverage" includes any liquid or substance, such as "near beer" which contains alcohol in any proportion or percentage. The term "alcoholic beverage" does not include a substance used for medical purposes in accordance with directions for use provided in a prescription or by the manufacturer and in accordance with school district policy and rules related to the use of prescription and non-prescription drugs, provided the substance is a) authorized by a medical prescription from a licensed physician and kept in the original container, which shall state the student's name and directions for use or b) an over-the-counter medicine.

## **TYPES OF TESTING**

### **TEAM/GROUP TESTING**

At the beginning of each season, all students will submit to drug and alcohol testing. This testing will be completed within the first two weeks of the season on a specified date and time. The collection process will take place on Board property or at a Board of Education approved testing facility. The Head Coach is responsible for ensuring that all student athletes and their parent/guardian/custodian properly sign the Informed Consent Agreement prior to testing. The Principal/designee is responsible for ensuring that all other eligible students and their parent/guardian/custodian properly sign the Informed Consent Agreement prior to testing. Any student moving into the District shall be tested prior to the time he/she joins the team and/or club,

group, student organization and/or activity and/or prior to the time he/she is issued District driving and/or parking privileges.

### **RANDOM TESTING**

Random testing shall be done throughout the drug testing effectivity periods. Each group of eligible students may have up to 20% of its eligible students tested per random selection. A student may be tested more than once per drug testing effectivity period. In the event of a positive result, the specimen will be sent to a laboratory for confirmation of results and a Certified Medical Review Officer will determine the results.

#### Random selection of eligible students:

The Principal/designee, will use a system to ensure that students are selected in a random fashion. This system may include computer generated random numbers or names or by pulling numbers from a pool of numbers equal to the number of eligible students.

#### Scheduling of random testing:

Random testing will be unannounced. The day and date will be selected by the Building Administrators. Random testing may be done weekly.

### **“Opt In” Student Drug Testing Program**

Parents/Guardians/Custodians that have students who are not involved in extracurricular/co-curricular activities or athletics or who do not possess District driving and/or parking privileges may have their students participate in the drug testing program at the expense of the Board. Interested Parents/Guardians/Custodians should contact the Principal/designee for additional information.

### **Reasonable Suspicion Testing**

School officials will have the right to have a student tested for use of drugs and/or alcohol when there is the “reasonable suspicion.” This applies to all student-athletes, all students participating in extracurricular/co-curricular activities and all student drivers.

### **REFUSAL TO TEST**

Refusal to submit to a random or reasonable suspicion test will constitute a violation of this Policy and will be treated as a positive test result.

### **COLLECTION PROCESS (Urine Screens)**

The student will be notified to report to the collection site. A specimen from the student will be collected as follows and all students must follow this process:

- All students must have a picture ID or be identified by the Principal/designee. No exceptions will be allowed.
- Drug testing area must be secured during the testing.
- Only lab technicians, designated District Administrators and students will be present in the drug testing area.
- Privacy must be kept for all students.
- The Principal/designee is responsible for ensuring that all of the forms are completed and signed by both parent/guardian/custodian and student. No student is to enter the collection site until forms, and proper ID are completed.
- When students arrive and cannot give a sample, they will need to start drinking water, pop or juice.
- No bags, backpacks, purses, cups, containers or drinks will be allowed to enter the collection area. All coats, vests, jackets, sweaters, hats, scarves or baggy clothing must be removed before entering the collection site. Only pants and t-shirts or dresses may be worn in the collection area. Any infringement of the rules will result in the student taking the test over.
- Students processed by the lab technician who cannot produce a sample will be kept in a secured area to wait until they can test. If they leave this area they will not be allowed to test and this will be considered a “refusal to test.”
- Students will be asked to hold out their hands and a sanitizer will be put on their hands or will wash hands with water. The bathroom personnel will add a dye to the toilet.
- Students will be asked to urinate directly into the collection cup given to them by the lab personnel. The lab technician will stand outside the stall and listen for normal sounds of urination.
- The lab checks every sample for adulterations, such as additives that the student drinks or adds to his/her urine to change the sample. Any and all adulterations of the specimen will be detected and considered the same as a “refusal to test.” A retest will be required within 24 hours.

- Any suspicion of tampering with the sample will be brought to the tester's attention. The sample will be screened or sent to the lab for immediate confirmation of tampering.
- The sample must be taken in one attempt and be at least 30 ml in size. The student must hand the cup to the lab technician.
- Students are not to flush the toilets or urinals. In the event that a student flushes the toilet he/she will be required to give a new sample immediately or the sample will be invalid.
- With student watching, the lab technician will recap the sample and hand it to the student who must then return it to the intake technician. In the event that the student does not hand the cup directly to the intake technician, the sample is invalid and a new sample must be taken. If the student leaves the collection area or has contact with anyone, the sample will be invalid and the student will have to give another sample.

This collection procedure is subject to change because of procedural requirements by the testing agency. The Board reserves the right to change the collection procedure to coincide with the testing guidelines set forth by the testing agency.

When using rapid screens, all non-negative screens will be sent out with a chain of custody to a certified laboratory for confirmation. A Certified Medical Review Officer will verify the positive test.

Any student that tests positive will have to be tested weekly for the term of a five (5)-week program with drug counseling at the expense of the student and/or parent/custodian/guardian. Testing will be done by Great Lakes Biomedical only so long as this is the company the Board selects.

## **RESULTS OF A POSITIVE TEST**

Any positive urine alcohol and/or drug test results will be made known to the Building Administrator, who in turn will notify the parents/guardians/custodians and student.

## **IF A POSITIVE TEST OCCURS:**

### **The 1st Violation**

For the first positive result or refusal to test, the student athlete will be given the option of:

A) The student will have to make an appointment with a certified chemical dependency counselor (or at an agency certified by the Ohio Department of Health and Human Services and/or the Ohio Department of Alcohol and Drug Addiction Services) for chemical dependency assessment and

then follow the recommendations of the counselor. The student and/or parent/guardian/custodian is responsible for all expenses and for providing the Building Principal with documentation that the student completed all recommendations of the counselor. The student will be denied participation for a minimum of **20%** of the season. A student athlete who tests positive shall meet with the Athletic Director, Head Coach and a District Administrator to determine reinstatement. A student who participates in an extra-curricular/co-curricular activity shall meet with the club, group, student organization or activity's advisor(s) and a District Administrator to determine reinstatement. A student driver shall meet with the High School Principal and another Administrator to determine reinstatement of District driving and/or parking privileges. The student may be required, at the student and/or parent/guardian/custodian's expense, to submit to weekly or random testing for the remainder of the drug testing effectivity period. The student shall forfeit all leadership roles.

For Example:

**Student Athletes:** The student athlete will be denied participation of 20% of the current season, with any remaining percentage of the denial of participation applied to the next season of participation if needed. NOTE: The student may continue to practice with the team and sit with the team during home and away contests. The student may not wear a team uniform during this denial of participation.

**Extracurricular/Co-curricular Activities:** The student will be denied participation in 20% or 36 school days of all extracurricular/co-curricular activities, with any remaining percentage/days of denial of participation applied to the next season of participation if needed. NOTE: The student may not attend club meetings and or participate in off-campus trips or special events. The student may not wear a uniform during this denial of participation.

**Driving and Parking:** The student will be denied 20% or 36 days of driving/parking privileges.

**In order for participation and privileges to be reinstated after the 20% penalty, the student must agree to submit to five (5) follow-up drug tests within 6 months at the student and/or parent/custodian/guardian's cost. The drug testing dates will be determined by the Principal/designee.**

OR

B) Denial of all privileged activities for that school year.

### **The 2nd Violation**

The student is denied participation for **50%** of the season. A student athlete who tests positive shall meet with the Athletic Director, Head Coach and a District Administrator to determine reinstatement. A student who participates in an extra-curricular/co-curricular activity shall meet with the club, group, student organization or activity's advisor(s) and a District Administrator to determine reinstatement. A student driver shall meet with the High School Principal and another Administrator to determine reinstatement of District driving and/or parking privileges. The student **WILL** be required, at the student and/or parent/guardian/custodian's expense, to submit to weekly or random testing for the remainder of the current season. The student will have to make an appointment with a certified chemical dependency counselor (or at an agency certified by the Ohio Department of Health and Human Services and/or the Ohio Department of Alcohol and Drug Addiction Services) for chemical dependency assessment and then follow the recommendations of the counselor. The student and/or parent/guardian/custodian is responsible for all expenses and for providing the Building Principal with documentation that the student completed all recommendations of the counselor.

Failure to complete these requirements may result in permanent denial of participation in privileged activities during the student's career at Keystone High School.

### **The 3rd Violation**

The student may be permanently denied participation in athletics, extracurricular activities and District driving and/or parking privileges immediately.

**Violations are cumulative throughout the student's secondary school career. (Grades 9-12).**

### **SELF REFERRALS**

A student may give a self-referral, which may be done only once in four (4) years. **Self-referrals can only happen before a test is done.**

A self-referral occurs when a student asks a coach, advisor, director, counselor, administrator or any other school personnel for help and an assessment prior to any known violations of this Policy. A self-referral will not be subject to any disciplinary action provided that:

The student completes a drug assessment and counseling program and verification is provided to the Principal/designee. The counselor and or agency must be certified by the Ohio Department of Health and Human Services and/or the Ohio Department of Alcohol and Drug Addiction Services. The student and/or parents/guardians/custodians must pay for this expense.

The student agrees to submit to five (5) follow-up drug tests within 6 months at the student and/or parent/custodian/guardian's expense. The testing dates will be determined by the



Principal/designee and testing will be completed by the District’s drug testing company. If the student tests positive during the follow-up drug tests, the student will be subject to first-time offence consequences.

**KEYSTONE HIGH SCHOOL  
INFORMED CONSENT AGREEMENT**

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_

**AS A STUDENT:**

- I understand and agree that participation in athletic activities, extra-curricular/co-curricular activities and parking and driving privileges are privileges that may be withdrawn for violations of the Keystone Local School District Board of Education’s Random Drug Testing Policy.
- I have read the Keystone Local School District Board of Education’s Random Drug Testing Policy and thoroughly understand the consequences that I will face if I do not honor my commitment to the Policy.
- I understand that when I participate in any athletic program, extra-curricular/co-curricular activity and/or District driving and/or parking privileges I will be subject to initial and random urine drug and alcohol testing, and if I refuse, I will not be allowed to practice or participate in any athletic activities, extra-curricular/co-curricular activities, or have District parking or driving privileges. I have read the Informed Consent Agreement and agree to its terms.
- I understand this Informed Consent Agreement is binding while I am a student in the Keystone Local School District.

\_\_\_\_\_  
STUDENT SIGNATURE

\_\_\_\_\_  
DATE

**AS A PARENT/GUARDIAN/CUSTODIAN:**

- I have read the Keystone Local School District Board of Education’s Random Drug Testing Policy and understand the responsibilities of my son/daughter/ward as a participant in athletic, extracurricular/co-curricular activities and/or student parking and/or driving privileges in the Keystone Local School District.
- I understand that my son/daughter/ward, when participating in any athletic program, extracurricular/co-curricular activity and/or student parking and/or driving privileges will be subject to initial and random urine drug and alcohol testing, and if he/she refuses, will not be allowed to practice or participate in any athletic activities, extracurricular/co-

curricular activities or be permitted to park or drive on property owned by the Board of Education.

- I have read the Informed Consent Agreement and agree to its terms.
- I understand this Informed Consent Agreement is binding while my son/daughter/ward is a student in the Keystone Local School District.

\_\_\_\_\_  
PARENT/GUARDIAN/CUSTODIAN SIGNATURE                      DATE

\_\_\_\_\_  
PARENT GUARDIAN/CUSTODIAN PRINTED NAME      CELL OR WORK PHONE

We hereby consent to allow the student named on the reverse side to undergo urinalysis testing for the presence of illicit drugs, alcohol, or banned substances in accordance with the Keystone Local School District Board of Education’s Random Drug Testing Policy.

We understand that testing will be administered in accordance with the guidelines of the Keystone Local School District Board of Education’s Random Drug Testing Policy.

We understand that any urine sample taken for drug testing will be tested only by a Board-approved company.

We hereby give our consent to the company selected by the Keystone Local School District Board of Education, its employees, or agents, together with any company, hospital, or laboratory designated to perform urinalysis testing for the detection of drugs and/or alcohol.

We further give our consent to the company selected by the Keystone Local School District Board of Education, its employees, or agents, to release all results of these tests to designated School District employees or agents. We understand that these results will also be available to us upon request.

I, the student, hereby authorize the release of the results of such testing to my parent/guardian/custodian.

We hereby release the Keystone Local School District Board or Education, its employees or agents from any legal responsibility or liability for the release of such information and records.

This will be deemed a consent pursuant to the Family Educational Rights and Privacy Act of 1974, 20 U.S.C. 1232g as amended, and the Ohio Revised Code 3319.321, for the release of the test results as authorized by the Informed Consent Agreement and/or as required by law.

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STUDENT SIGNATURE

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DATE

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PARENT/GUARDIAN/CUSTODIAN SIGNATURE

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DATE

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PARENT GUARDIAN/CUSTODIAN PRINTED NAME

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CELL OR WORK PHONE