



Leech Lake Band of Ojibwe  
**Employee Assistance Program**  
Phone Number 335-8377 Fax Number 335-4429

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## Supervisor's Checklist for Making Reasonable Cause Determination

*\* The purpose of this record is to document certain behaviors observed of an employee, which may suggest the use of alcohol and or controlled substances.\**

Employee Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Department: \_\_\_\_\_ Date of observation: \_\_\_\_\_

Time of observation: From: \_\_\_\_\_ am/pm To: \_\_\_\_\_ am/pm

**REASONABLE SUSPICION SUSPECTED FOR:** Alcohol \_\_\_\_\_ Controlled Substance \_\_\_\_\_

### **KNOWING THE SIGNS**

The indicators listed below are "warning signs" of drug and/or alcohol abuse and may be observed by supervisors:

#### **MOODS:**

- Depressed
- Anxious
- Irritable
- Suspicious
- Complains about others
- Emotional (e.g. outbursts of crying)

#### **ACTIONS:**

- Withdraws or improperly talkative
- Spends excessive amounts of time on the telephone
- Argumentative
- Has exaggerated sense of self-esteem
- Displays violent behavior
- Avoids talking with supervisors regarding work issues

#### **ABSENTEEISM:**

- Acceleration of absenteeism and tardiness, especially Mondays and Fridays, before and after holidays
- Frequent unreported absences, later explained as "emergencies"
- Unusually high incidence of colds, flu, upset stomach, headaches
- Frequent use of unscheduled vacation time
- Leaving work area more than necessary (e.g. frequent trips to the bathroom, water)
- Unexplained disappearances from the job with difficulty in locating the employee
- Requesting to leave work early for various reasons

**Observed and documenting current indications:**

*Place an X by all that apply*

	Constricted pupils
	Dilated pupils
	Scratching
	Red or watering eyes
	Involuntary eye movements
	Sniffles
	Excessively active
	Nausea or vomiting
	Flushed skin
	Sweating
	Yawning
	Twitching
	Violent behavior

	Drowsiness
	Odor of alcohol
	Nasal secretion
	Dizziness
	Muscular in coordination
	Unconsciousness
	Inability to verbalize
	Irritable
	Argumentative
	Difficulty concentrating
	Slurred speech
	Bizarre behavior
	Needle marks

	Possession of paraphernalia (such as syringe, bent spoon, metal bottle cap, medicine dropper, glassine bag, paint can, glue tube, nitrite bulb, or aerosol can)
	Possession of substance that appears to possibly be a drug or alcohol
	Other:

Describe observed behavior:

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**Determining Reasonable Cause**

If you are able to document one or more indicators above, ask yourself these questions to establish reasonable cause:

Y	N	Has some form of impairment been shown in the employee's appearance, actions or work performance?
Y	N	Does the impairment result from the possible use of drugs or alcohol?
Y	N	Are the facts reliable? Did you witness the situation personally, or are you sure the witness(es) are reliable and have provided firsthand information?
Y	N	Are facts capable of explanation?
Y	N	Are the facts capable of documentation?
Y	N	Is the impairment current, today, now?

**DO NOT** proceed with reasonable cause testing unless all of the above questions are answered with a **YES**.

**Taking Action:**

	Reasonable cause established
	Reasonable cause NOT established

**Witnessed by:**

Print Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Supervisor Information** *(prepared by):*

Supervisor Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

See attachment for processing documentation

## **Employee Reasonable Suspicion Process once reasonable cause has been established:**

1. Once the determination is made to send the employee to the testing facility the EAP will contact the supervisor submitting the claim, the supervisor will then be responsible for getting that employee to the testing site safely **absolutely under no circumstances is the RS employee aloud to drive themselves to the testing sight.**
2. If the employee tests NON-NEGATIVE it is the supervisor's responsibility to get that employee home safely. They will then be placed on unpaid leave until the presumptive results come back from the lab (this could take up to 72 hours).
3. If the employee has a CONFIRMED POSITIVE result the employee will need to complete a return to duty test before returning back to his or her daily duties. If the employee tests NON-NEGATIVE for a second time the employee will again be placed on unpaid leave until the presumptive results return and the levels have gone down since the first POSITIVE test. If the levels are higher it will be grounds for termination.
4. If the employee refuses to go to the testing sight for the RS test, that is a refusal to test and will be grounds for a 3 day suspension and will be a positive result see policy 100.13, section **who will be tested** b.) On the 4<sup>th</sup> day the employee will be tested before returning to their job.

**NOTE:** If the employee triggers a NON NEGATIVE test result upon completing the drug and alcohol test and presumptive return a NEGATIVE result, that employee will be paid for any lost hours of work and will be able to return to work immediately. The EAP Associate will submit a MEMO to the payroll department for reimbursement of lost hours.

**\*\*LLBO testing site is located at the Palace Casino-Hotel only, alternate testing sites will not be accepted unless you are a LLBO employee working in a twin cities office.\*\***