



Supervisor Newsletter

Drug Free Workplace Refresher

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), an estimated 46 million U.S. adults age 18 or older experience substance use disorder (SUD). *Nearly two-thirds of this population, 30.1 million, are employed.* America's drug epidemic is worsening, making it more important than ever for employers to maintain a drug free workplace program. But ensuring that your program is legally compliant is critically important.

Laws governing drug free workplace programs vary by state and can sometimes change. But there are basic steps that employers and supervisors can and should follow to set a good legal foundation for compliance.

The following best practices are helpful for all organizations that strive for a drug free workplace:

1. **Consult your employment attorney, or the Council's attorney-on-retainer:** Consult with your attorney, or the Council's attorney whenever you alter your drug free workplace policy, or if you are considering negative employment action against an employee for a violation of your drug free workplace requirements.
2. **Set clear penalties:** Clearly stipulate the penalties for policy violations. State within the substance abuse policy who will be tested, when they will be tested, and what will happen to employees with a violation.
3. **Put it in writing:** Every employee should receive and sign a written copy of your drug free workplace policy. Verbal agreements and unsigned agreements have little legal standing.
4. **Provide training:** Ensure that all employees receive drug prevention education annually, and supervisors are trained on how to detect and respond to workplace drug and alcohol misuse. Maintain attendance logs of all trainings and/or copies of monthly training newsletters distributed.

5. **Document employee performance:** Maintain detailed and objective records on the performance of all employees. A documented performance issue often provides a basis for a reasonable suspicion drug test and for referring workers to employee assistance programs (EAPs).
6. **Don't rush to judgment:** Do not take disciplinary action against a worker or accuse a worker of a substance abuse policy violation simply because the employee's behavior seems impaired. Instead, try to clarify the reasons for the employee's impairment. If a drug test is warranted, obtain a verified, confirmed test result before taking any negative employment action.
7. **Protect privacy:** Hold discussions with employees about potential violations in private. Have another manager present to serve as a witness. Never accuse or confront an employee in front of his or her coworkers.
8. **Be consistent:** No individual employee or group of employees should receive special treatment. Inconsistencies in enforcement could be considered discrimination.

9. **Know your employees:** Getting to know your employees can make it easier to identify problems early on.
10. **Involve Employees:** Workers at all levels of your organization should be involved with developing and implementing your drug free workplace policy. This will reduce misunderstandings about the reasons for having a drug free workplace program and help ensure that your policies and procedures are fair to everyone.

Also remember that under federal law, workers with mental health conditions, including substance abuse disorders, may be protected against discrimination and harassment at work related to their condition, have workplace confidentiality rights, and have a legal right to reasonable accommodations that can help them perform and keep their job.

Employers and supervisors who follow these basic recommendations, and who strive to create programs that are fair, consistent, and supported by all stakeholders, will set a foundation for staying on the right side of the law.



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Overdose Deaths Continue

The latest report from the Centers for Disease Control (CDC), states that more than 82,000 Americans died from a drug overdose in the 12 months leading up to January of 2025, and there were *1,400 more overdose deaths* in January of 2025 than in January of 2024. While there has been some fluctuation in the number of overdose deaths in recent years, America continues to deal with a deadly overdose crisis.

Over the past several years, there has been an increasingly dangerous mix of drugs being sold on the streets of our country, including meth and cocaine along with animal tranquilizers like xylazine, but most overdose deaths are still being caused by fentanyl.

Rise of Fentanyl and Other Synthetic Drugs

Back in 2014, Mexican drug cartels began smuggling large quantities of fentanyl into American communities, often disguising the street drug as counterfeit prescription pills resembling Oxycontin or Percocet. Over the next 10 years, drug overdoses surged, killing hundreds of thousands of Americans. The problem

worsened, and from 2018 through 2022 deaths attributed to fentanyl quadrupled. Currently, more and more drug users of cocaine or methamphetamine are being poisoned by fentanyl-adulterated drugs. In the western part of the US, one in two deaths from drugs are currently linked to fentanyl contamination of cocaine or methamphetamine, and in the east, one in three fentanyl-related deaths occur in users of coke or meth. Fentanyl is cheap to produce, so it is usually the first choice used to cut drugs by cartels.

As mentioned in previous *Newsletters*, the availability of Narcan (naloxone), a drug that reverses overdose, has helped to reduce deaths from opioids in many cases. However, more *stimulants*, particularly cocaine and methamphetamine, are now being used with fentanyl and unfortunately, we don't yet have a drug like Narcan to reverse speedballing (ingestion of both a depressant and a stimulant).

Law enforcement in both the U.S. and Mexico continue the fight to control the production of fentanyl, but it only takes 66 lbs of the drug to produce 15 million lethal doses. And now, Mexican authorities are warning again of the rapid spread of another powerful drug that could worsen the U.S. overdose crisis: Nitazenes.

Plant-Based vs Synthetic Drugs

Nitazenes, (described in previous *Employee Education Newsletters*) are a group of synthetic opioids that are up to 40 times more powerful than fentanyl and because of their potency, stopping nitazenes could be even more difficult than stopping fentanyl.

America's overdose epidemic currently driven by synthetic drugs such as illicitly manufactured fentanyl and nitazenes is increasingly complex. Adding to the problem is the veterinary sedatives, such as xylazine and medetomidine which are creating zombie addicts and overdose nightmares. And this helps to explain why the overdose crisis exists and continues.

People have always used drugs to get high, but users did not overdose at epidemic proportions in the 1960s 70s, 80s, and early 90s. It is this dangerous and deadly accelerated shift from plant-based drugs, like heroin and cocaine, to synthetic, chemical-based drugs, like fentanyl and nitazenes, that has fueled the crisis.

Much is being done to combat the overdose epidemic in America including efforts to reduce supply and demand and expanding access to treatment, but more must be done.

Government Efforts

Border security has been enhanced with improved tracking tools and technology, but illicit drugs continue to pour into America. We have to continue to focus on stopping drugs at the source.

Policies have been enacted to close chemical loopholes by classifying fentanyl as a Schedule I drug and restricting related substances, but we must also work to create a national registry for pill presses.

Federal requirements for healthcare practitioners to obtain a waiver to prescribe medication for opioid use disorder have been removed to increase access to buprenorphine, but we need to continue to increase use of telehealth in order to expand treatment access.

All states should decriminalize fentanyl test strips to make it easier for individuals to test for the drug, and access to naloxone must increase.

These and other overdose prevention strategies that focus on primary prevention, evidence-based treatment, and recovery support must remain a top priority in America if we are ever going to be able to stop the epidemic.



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