



## Arkansas Department of Human Services Division of Children and Family Services

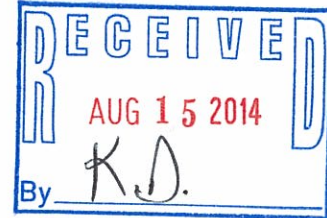
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August 15, 2014



Varnaria Vickers-Smith, Legislative Analyst  
Senate Interim Children and Youth Committee and the  
House Aging, Children and Youth, Legislative and Military Affairs Committee  
Arkansas Bureau of Legislative Research  
One Capital Mall, 5<sup>th</sup> Floor, Room R-516  
Little Rock, AR 72201

RE: Initial Filing - Regular Promulgation

Dear Ms. Vickers-Smith:

Please place the Division of Children & Family Services on the Children & Youth Committee agenda for review of the Rules as listed on the Questionnaire. The public comment period is from August 15, 2014 to September 14, 2014, with an effective date of October 20, 2014.

Enclosed are copies of the Questionnaire, Summary of Changes, Financial Impact Statement and Rule.

If you have any questions or comments, please contact Christin Harper, Policy & Professional Development Administrator, Division of Children and Family Services, P.O. Box 1437, (Slot S570), Little Rock, Arkansas 72203-1437; phone 682-8541; email [christin.harper@arkansas.gov](mailto:christin.harper@arkansas.gov) or fax 682-6968.

Sincerely,

A handwritten signature in blue ink that reads "Cecile Blucker".  
Cecile Blucker

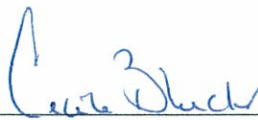
Director, Division of Children and Family Services

# BUREAU OF LEGISLATIVE RESEARCH

DEPARTMENT OF HUMAN SERVICES  
Division of Children and Family Services  
AMENDING ADMINISTRATIVE REGULATIONS

- TITLE: **New Rule**
- **CFS-150: Drug and Alcohol Screen Results**
- Revised Rule**
- **POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING and related procedures**
- PROPOSED EFFECTIVE DATE: October 20, 2014
- STATUTORY AUTHORITY: A.C.A. 9-28-103
- NECESSITY AND FUNCTION: **New Rule**
- **CFS-150: Drug and Alcohol Screen Results**
    - Developed to provide standard documentation method for drug and alcohol screening results.
- Revised Rule**
- **POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING and related procedures**
    - Revised to differentiate between a drug screen and drug test.
    - Revised to reflect current payment processing and drug screen order procedures.
    - Revised to clarify challenge procedures.
    - Revised to include national best practices as related to drug screens.

PAGES FILED:



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Signature

Name: Cecile Blucker

Title: Director

Section: Division of Children and Family Services

Department of Human Services

PROMULGATION DATES: August 15, 2014- September 14, 2014

CONTACT PERSON: Christin Harper  
DHS-DCFS Policy Unit  
Phone: (501) 682-8541  
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Email: christin.harper@arkansas.gov

**QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS**  
**WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE**

DEPARTMENT/AGENCY Department of Human Services  
DIVISION Division of Children and Family Services  
DIVISION DIRECTOR Cecile Blucker  
CONTACT PERSON Christin Harper, Policy & Professional Development Administrator  
ADDRESS P. O. Box 1437, Slot S570, Little Rock, AR 72203-1437  
PHONE NO. (501)682-8541 FAX NO. (501) 683-4854 E-MAIL christin.harper@dhs.arkansas.g  
NAME OF PRESENTER AT COMMITTEE MEETING Christin Harper  
PRESENTER E-MAIL christin.harper@dhs.arkansas.gov

**INSTRUCTIONS**

- A. Please make copies of this form for future use.
- B. Please answer each question **completely** using layman terms. You may use additional sheets, if necessary.
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:

**Donna K. Davis**  
**Administrative Rules Review Section**  
**Arkansas Legislative Council**  
**Bureau of Legislative Research**  
**One Capitol Mall, 5<sup>th</sup> Floor**  
**Little Rock, AR 72201**

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1. What is the short title of this rule? Revisions to Drug and Alcohol Screening Policy and Procedures

2. What is the subject of the proposed rule? To update the Division's client drug and alcohol screening policy and procedures.

3. Is this rule required to comply with a federal statute, rule, or regulation? Yes  No   
If yes, please provide the federal rule, regulation, and/or statute citation. \_\_\_\_\_

4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes  No   
If yes, what is the effective date of the emergency rule? \_\_\_\_\_

When does the emergency rule expire? \_\_\_\_\_

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act?

Yes

No

5. Is this a new rule? Yes  No

If yes, please provide a brief summary explaining the regulation. \_\_\_\_\_

Does this repeal an existing rule? Yes  No

If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. \_\_\_\_\_

Is this an amendment to an existing rule? Yes  No

If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. A.C.A. § 9-28-103

7. What is the purpose of this proposed rule? Why is it necessary?

• POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING

- o Differentiate between a drug screen and drug test;
- o Reflect current payment processing and drug screen order procedures;
- o Clarify challenge procedures;
- o Include national best practices as related to drug screens.

• CFS-150: Drug and Alcohol Screen Results

- o Developed to provide documentation method for drug screening results.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b).

AR Secretary of State Website

DHS/DCFS CHRIS public:

<https://ardhs.sharepointsite.net/CW/Notice%20of%20Rule%20Making/Forms/AllItems.aspx>

9. Will a public hearing be held on this proposed rule? Yes  No

If yes, please complete the following:

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

Time: \_\_\_\_\_

Place: \_\_\_\_\_

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)

September 14, 2014

11. What is the proposed effective date of this proposed rule? (Must provide a date.)

October 20, 2014

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12. Do you expect this rule to be controversial? Yes  No

If yes, please  
explain.

\_\_\_\_\_

13. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known.

We do not know of any specific groups of persons who would comment.

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**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY**

**DEPARTMENT** Department of Human Services  
**DIVISION** Division of Children and Family Services  
**PERSON COMPLETING THIS STATEMENT** Cecile Blucker  
**TELEPHONE NO.** (501)682-6248 **FAX NO.** (501) 682-6968 **EMAIL:** cecile.blucker@dhs.arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

**SHORT TITLE OF THIS RULE** Revisions to Drug Screening Policy and Procedures

- 1. Does this proposed, amended, or repealed rule have a financial impact? Yes  No
- 2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule? Yes  No
- 3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered? Yes  No

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;  
\_\_\_\_\_
- (b) The reason for adoption of the more costly rule;  
\_\_\_\_\_
- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;  
\_\_\_\_\_
- (d) Whether the reason is within the scope of the agency's statutory authority; and if so, please explain.  
\_\_\_\_\_

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

- (a) What is the cost to implement the federal rule or regulation?

<u>Current Fiscal Year</u>		<u>Next Fiscal Year</u>	
General Revenue	_____	General Revenue	_____
Federal Funds	_____	Federal Funds	_____
Cash Funds	_____	Cash Funds	_____
Special	_____	Special Revenue	_____

Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Other (Identify) \_\_\_\_\_  
\_\_\_\_\_

Total 0.00

Total 0.00

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

General Revenue \_\_\_\_\_  
Federal Funds \_\_\_\_\_  
Cash Funds \_\_\_\_\_  
Special Revenue \_\_\_\_\_  
Other (Identify) \_\_\_\_\_

Total 0.00

Total 0.00

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0.00

\$ 0.00

6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0.00

\$ 0.00

7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes  No

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
  - (a) justifies the agency's need for the proposed rule; and



- (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
  - (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
  - (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
  - (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
    - (a) the rule is achieving the statutory objectives;
    - (b) the benefits of the rule continue to justify its costs; and
    - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.

# DCFS SUMMARY OF CHANGES FOR AUGUST 2014 PROMULGATION

## **SUMMARY OF DCFS REGULAR PROMULGATION**

The purpose of this regular promulgation is to make revisions to the client drug screening policy in order to differentiate between a drug screen and drug test; to reflect current payment processing and drug screen order procedures; to clarify challenge procedures; and to include national best practices as related to drug screens.



**Arkansas Department of Human Services**  
**Division of Children and Family Services**  
**Drug and Alcohol Screen Results**

Client's Name \_\_\_\_\_

CHRIS ID Number \_\_\_\_\_

Date Drug Screen Administered \_\_\_\_\_

Time Drug Screen Administered \_\_\_\_\_

**DRUG SCREEN RESULTS**

- Negative       Positive       Client refused screen (*refusal of court ordered drug screens will be documented as a positive screen*)

If results are positive, please place a checkmark next to the applicable drug listed below.

<b>AMP</b>	<b>BARB</b>	<b>BZ</b>	<b>BU</b>	<b>COC</b>	<b>MTD</b>
<b>MET</b>	<b>OPI</b>	<b>OX</b>	<b>PCP</b>	<b>THC</b>	<b>K2</b>

Specimen Temp:                       Normal     Abnormal

If abnormal, please comment:

Adulteration noted/Specimen altered:     No             Yes

**Verified Prescription Drugs**

**Comments:**

**CHALLENGE INFORMATION**

- Client Challenged Drug/Alcohol Screen:     No             Yes
- Challenge sent to Designated Biotech Labs.  
Date Challenge Sent to Lab via FedEx: \_\_\_\_\_  
Identifier #: \_\_\_\_\_
- Client will secure own challenge screen at another qualified agency.

**ALCOHOL SCREEN RESULTS**

- Negative       Positive       Client refused screen (*refusal of court ordered drug screens will be documented as a positive screen*)

**Comments:**

**CLIENT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**DCFS STAFF SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Products Used:

InCup Drug Screen Kit by ABMC (American Bio Medica Corp) Kinderhook, NY (Drug Screen)  
K2 Screen by ABMC, NY (Drug Screen)  
ALCO Screen 02 Saliva Screen by Chematics Inc. North Webster, IN (Alcohol Screen)  
Material# 10131645      White: DCFS Staff      Yellow: Court      Pink: Client  
CFS-150 (R. 10/2014)

## POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING

1011/20141

### OVERVIEW

Drug and alcohol use are often contributing factors to child maltreatment. As such, there are times when drug and/or alcohol screening for clients is necessary to ensure appropriate interventions are provided to the family. However, drug and alcohol screening alone are neither treatment interventions nor child safety interventions. The use of drug and alcohol screens and the corresponding results are only one component in the assessment of child safety and risk as well as the strengths and protective capacities of families. It is also important to recognize that drug screens administered by DCFS staff are only presumptive screening tools. As such, only the results of a lab confirmed drug test (not a drug screen) can definitively confirm the presence of a specific drug.

The Division of Children and Family Services will conduct drug and alcohol screening of clients (e.g., parents, caretakers, youth) ~~to comply with court orders and~~ when appropriate during a child maltreatment investigation or during the course of ~~a protective service, foster care or adoption~~ any type of open DCFS case. It is considered appropriate to conduct a client drug or alcohol screen if DCFS staff has reasonable cause to suspect that a youth involved in a DCFS investigation or case is using drugs and/or alcohol or has reasonable cause to suspect a child's parents or caretakers are under the influence of drugs and/or alcohol to the point that their parenting abilities are negatively impacted. Reasonable cause to suspect may include past history of drug and/or alcohol abuse and/or observable client behavior indicating he or she may be under the influence of drugs or alcohol.

### FREQUENCY AND LOCATION OF DRUG AND ALCOHOL SCREENS

DCFS may request random drug or alcohol screenings when a youth, parent, or caretaker has a history or demonstrated evidence of drug or alcohol abuse. DCFS will also conduct drug screens for clients as outlined in court orders, when applicable.

If a client is participating in a substance abuse treatment program that requires frequent random drug screening or has a probation or parole officer who conducts frequent random drug screens, then drug screens conducted by DCFS are not appropriate. The results from the drug screens conducted by the substance abuse treatment program, probation officer, or parole officer will suffice as long as the substance abuse treatment program, probation officer, parole officer, etc. provides the written results of the drug screens to DCFS in a timely manner.

Appropriate locations for drug and/or alcohol screenings for clients 13 and older may include but are not limited to the county office, client home, and court house, as appropriate. While DCFS staff may conduct drug or alcohol screens on teenagers when necessary, all children younger than 13 for whom a drug screen or test is needed will be referred to a physician or medical facility to have an appropriate screen or test completed (e.g., hair shaft test). If parental consent for a necessary drug screen or test on a minor is not granted, DCFS will obtain an order of investigation to conduct a drug screen or test for children and youth. For drug screens or tests for children who are less than 13 years of age, DCFS staff will accompany them to a qualified agency for the screen or test.

### TYPES OF DRUG SCREENS UTILIZED BY THE DIVISION

DCFS staff will conduct only oral fluids and urine specimen drug screenings. Only drug and alcohol screens from the Division approved vendor will be used by DCFS staff. DCFS staff will only administer drug and alcohol screens according to training and procedures provided by the vendor.

Division staff will keep record of their completion of training and complete training updates as needed. An employee who has not completed the Division approved vendor drug screening training will neither administer a drug or alcohol screen to a client nor serve as a witness to drug or alcohol screen results (witnesses to drug screen results are only required when results of the drug screen are unclear and/or challenged by the client).

Written screening instructions provided by the Division approved vendor will be kept in a binder clearly identified as such in all county offices. County office personnel are responsible for maintaining all updates to the screening instructions that the Central Office Prevention and Support Unit provides to the field.

Court ordered (or otherwise deemed necessary) hair shaft tests, blood tests, or other drug screens that are not the standard DCFS oral fluids or urine specimen screens administered by Division staff will be handled on an individual basis.. All requests for payment of hair shaft tests, blood tests, or other non-standard drug screens will be made via the Area Financial Coordinator or designee to the Central Office Financial Unit. Such tests and screens will be paid with a state procurement card or purchase order with prior approval from the Central Office Financial Unit.

#### CLIENT REFUSAL OF SCREENS

If a DCFS caseworker has reasonable cause to suspect that the child's parents or caretakers are using an illegal substance, the caseworker may request that the parents or caretakers submit to a drug screening. If not previously court ordered, The pparents or caretakers may decline participating in their own the drug and/or alcohol screening. A and their ny refusal must be documented in CHRIS. The drug and/or alcohol screening may not be pursued further without a court order. However, if the adult client refuses to submit to any court ordered drug or alcohol screen, the screen will be documented in CHRIS as a positive screen, due to client refusal, and the refusal will be disclosed to the court.

#### ACTIONS FOLLOWING SCREEN RESULTS

Regardless of the results of the drug screen, DCFS staff will verbally share the results of the screen with the client. DCFS staff will also record the results of the screen with the client via the CFS-150: Drug and Alcohol Screen Results form.

If drug and/or alcohol screen results are positive, DCFS must assess how the drug and/or alcohol usage is impacting the parent/caretaker's ability to effectively parent and ensure child safety prior to making decisions about the placement of the child, parent-child visits, and/or other case plan requirements. A positive drug or alcohol screen in and of itself will not result in the postponement and/or withholding of visits between a parent and child in DHS custody unless the parent is under the influence of drugs and/or alcohol at the time of the scheduled visit and has observable behavior indicating impairment of parenting capacity or unless a court order specifies that a parent's positive screen will result in the withholding of parent-child visits.

#### CLIENT CHALLENGES TO DRUG OR ALCOHOL SCREEN RESULTS

If a client challenges the results of a Division administered drug or alcohol screen, DCFS will only pay for one client challenge of a positive drug screen. If the re-screening is positive, then the client must bear the cost of additional challenges to that screening. However, if the re-screening is negative, then the client may challenge the next positive drug screen and DCFS will cover the cost of that challenge. Challenges do not have to be in consecutive order.

If a client challenges the results of a Division administered drug or alcohol screen, the client may elect to have another entity (e.g., hospital for drug and alcohol screens, local police station for alcohol screens only) conduct another drug and/or alcohol screen rather than DCFS administering the screen for the challenge. The Division will accept the results of urine or blood sample screens from other qualified agencies as long as a DCFS employee is able to immediately accompany the client to the qualified agency and provided the qualified agency conducting the screen provides results in writing to DCFS.

#### CONFIDENTIALITY OF DRUG AND ALCOHOL SCREEN RESULTS

DCFS staff will conduct only oral fluids and urine specimen drug screenings. Hair samples, blood tests, or other tests that are court ordered will be handled on an individual basis under purchase order. All data, information, and results related to client drug and/or alcohol screening are confidential. Disclosure of information will only

be to those individuals whose official business duties necessitate disclosure or as required by law. Breaches of confidentiality will constitute grounds for disciplinary action to include the possibility of job termination.

## **PROCEDURE III-E1: Administering Client Urine Specimen Drug Screening**

10/2014

The DCFS employee Family Service Worker, County Supervisor, Area Director or Court will:

~~A. Refer for drug screening: clients who are court ordered for drug screening and clients who need drug screening based upon reasonable cause to suspect based on information gathered during the child maltreatment investigation, including from the CFS-6025: Health and Safety Assessment and/or the CFS-6026: Risk Assessment or during the course of a protective service, foster care or adoption case. Workers may request random drug screenings when the parent or caretaker shows evidence of involvement with illegal drugs.~~

The Family Service Worker, County Supervisor, or Area Director will:

- ~~A. \_\_\_\_\_ Notify the screener that the client is in the office for drug screening.~~  
~~B. \_\_\_\_\_ Report the results to the requesting party.~~

~~C. \_\_\_\_\_ If the result of the client's drug screen is positive for illegal/controlled substances, refer the client to available substance abuse treatment services.~~

The Tester will:

- ~~A. \_\_\_\_\_ Schedule a client's test no more than 48 hours after receiving the referral. Exceptions must be approved by the Area Director or above.~~  
~~B. \_\_\_\_\_ Administer the drug screen only according to procedures and training provided by the vendor. Written screening instructions provided by the vendor shall be kept in a binder clearly identified as such in all county offices. The screener is responsible for maintaining all updates to the screening instructions. In no instance shall an employee who has not completed drug screening training be allowed to administer a drug screen to a client.~~

To administer the drug screen, the Screener will:

- ~~A. Refer to screening information (for screen procedure, interpreting results and other screening information.~~  
~~A. Ask client to put away Put the client's his or her purse, bag, pouch and jacket, etc. away and ask client to empty all of the client's his or her pockets.~~  
~~B. O The screener will observe, but not touch, each of the client's pockets to ensure that they are empty. The only item the client may take into the restroom stall is the collection container.~~  
~~C. Escort the client to the restroom.~~  
~~C-D. Directly observe the clients wash their hands without soap.~~  
~~E. Give the client only the collection container. The client must not have access to the screen.~~  
~~F. Instruct the client to fill the cup to the marked line.~~  
~~G. O The screener will observe the client enter the restroom stall, close the stall door to give privacy to the person being screened client, but and remain immediately outside the restroom sta.~~  
~~1) Do!! The screener will not directly observe the client in the process of urination unless court ordered to observe.~~  
~~D-a) If court ordered to observe, the witness must be the same gender as the client.~~  
~~E-H. If the client has difficulty giving a specimen, have the client drink at least 8 - 10 ounces of water and wait up to two hours for the client to give a urine specimen. - As such, d Do not attempt to conduct the drug screen if a minimum of three hours are not left in the workday.~~  
~~F. Under normal circumstances, limit the entire screening process to not exceed 30 minutes (if the client has difficulty giving a specimen, refer to instruction E above).~~  
~~I. After the cup has been returned to the FSW screener or designee, visually examine the specimen.~~

- ~~G-1) Suspicion of adulteration and/or dilution will should be indicated-verified by use of the appropriate screenPH screen and temperature gauge.~~
- J. Verbally share and explain the drug screen results to the client.
- K. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
- L. If the client does not challenge the screening results:
- 1) Return the specimen cup to the client after the specimen has been screened and the results documented.
  - 2) Ask client to dispose of the contents in the toilet or urinal, flush, and discard the container in the designated trash container.
  - 3) Place the top copy of the CFS-150: Drug and Alcohol Screen Results Form in the client record.
  - 4) Give the client the bottom copy of the completed CFS-150: Drug and Alcohol Screen Results Form.
  - 5) Retain the middle copy for submission to court.
  - 6) Scan and email the completed CFS-150: Drug and Alcohol Screen Results Form to all parties to the case.
  - 7) Document drug and alcohol screen results and any other relevant information associated with drug and alcohol screen results in CHRIS as applicable.
- M. If the client challenges the screening results, please refer to Procedure III-E2: Urine Specimen Drug Screen Challenges.

The DCFS Supervisor will:

- A. Ensure all staff administering and/or serving as witnesses to drug screen results have successfully completed the Division approved drug and alcohol vendor training.
- B. Conference with the FSW as needed regarding need for screening and any subsequent action steps.

## **PROCEDURE III-E2: Client Urine Specimen Drug Screen Challenges**

10/2014

If urine specimen drug screen results are positive and the client challenges the result, the DCFS employee will:

- A. land sign the form. Also, have the client sign the form. If the specimen screening results are positive and the client challenges the result, offer to re-screen ~~inform~~ the client that the specimen will be sent to the lab for drug testing confirmation.
  - 1) However, if DCFS staff initially conducted the drug screen at the client's home, the DCFS employee may offer to re-screen the client at the county office that same day and have another DCFS staff person serve as a witness to the results of the second screening.
    - 1)
- B. The chain of custody will be maintained throughout the entire challenge process.
- C. Complete the county specific vendor challenge form.
- D. Write the client specimen identification number found on the county's vendor challenge form/ mailing strip on the CFS-150: Drug and Alcohol Screen Results Form (the client specimen identification number is the identifier used in the subject line of the email that the lab sends when emailing the FSW with the challenge results; this number is the only way to match the challenge results to the correct client so it is extremely important to record the client specimen identification number prior to mailing the challenge screen to the lab).
- E. Prepare the urine specimen for laboratory screening (lab will not process urine specimens that are received without proper identification).

~~2) DCFS will only pay for one client challenge of a positive drug screen. If the re-screen still shows a positive drug screen, the client must bear the cost of additional challenges to that screening. If the re-screening is negative, the client may challenge the next positive drug screen. At the point the client challenges a drug screen and DCFS pays for the challenge and the drug screen is still positive, the client must pay for challenges to any future positive drug screen. Challenges do not have to be in consecutive order.~~

~~H. If the result of the client's drug screen is positive for controlled substances and is challenged by the client, prepare the urine specimen for laboratory screening.~~

~~1) Notify the DCFS Prevention & Support Manager or designee that the collection will be sent for further screening, lab confirmation by faxing a copy of the Chain of Custody, prior to the urine specimen being sent to the lab.~~

~~2) Check for leakage of the collection device prior to mailing/sending the specimen for confirmation screening.;~~

~~3) Use the supplied FedEx mailer envelopes to send the challenged, positive, urine specimens to: the lab.~~

~~a) If samples taken on weekends or after FedEx facility closes during the week, refrigerate samples until they are delivered to FedEx facility for shipment.~~

~~4) To access challenge results, contact the Area Financial Coordinator or designee for instructions on how to access the lab confirmation results via the internet.~~

~~3) If challenge results are contested, documentation of the chain of custody of urine specimens taken from screen subjects shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.~~

~~—Scientific Testing Laboratories~~

~~—463 Southlake Boulevard~~

~~—Richmond, VA 23236~~

~~4) Lab contact number is 1-800-977-9130~~

~~—Lab will not process urine specimens that are received without proper identification.~~

~~I. If the client does not challenge the results of the screening, return the specimen cup to the client after the specimen has been screened and the results documented. The client will dispose of the contents in the toilet or urinal, flush, and discard the container in the designated trash container.~~

~~—WARNING: Do NOT dispose of a urine specimen that needs to be sent to Scientific Testing Laboratories for further screening.~~

~~J. Give the client a copy of the completed Controlled Substance Screening form with the results documented.~~

~~K. Send the DCFS worker a copy of the completed Controlled Substance Screening form with the results documented within 24 hours.~~

~~1) If contested, documentation of the chain of custody of urine specimens taken from screening subjects shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.~~

~~5)~~

~~a) Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody of those urine specimens.~~

~~i.~~

~~b) For a court ordered screening, a written report of the test results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.~~

~~ii.~~

~~c) This report must be certified by an affidavit subscribed and sworn to before a notary public.~~

~~iii.~~



- iv. This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.

If the alcohol screen results are positive and the client challenges the results, the DCFS staff will:

d)A. Inform the client he or she may immediately obtain a blood test from a qualified agency or immediately take a Breathalyzer test at the local police station.

e) Whenever a court orders scientific screening for drug or alcohol abuse and one of the parties refuses to submit to the screening, that refusal shall be disclosed to the court.

~~DCFS staff may conduct oral fluids drug and alcohol screens. The Screener must be trained by the vendor and follow instructions for screening procedure and interpreting results.~~

~~The Screener will:~~

- ~~A. Schedule a client's screening no more than 48 hours after receiving the referral. Exceptions must be approved by the Area Director or designee.~~
- ~~B. Refer to screening information for screening procedure and interpreting results.~~
- ~~C. Screener will remove the clear cap from the screening kit and give to client. The client will rub the collection screening pad inside his mouth against cheek and tongue according to instructions. Once completed, the Screener will re-cap the device and lay on a flat surface.~~
- ~~D. Under normal circumstances, limit the entire screening process to not exceed 15 minutes.~~
- ~~E. Document the results and sign the controlled substance screening form. Also have the client sign the form. If the specimen screening results are positive and the client challenges the result, offer to re-screen.~~
  - ~~F. If the screening results are challenged by the client prepare the oral fluids specimen for laboratory screening. (Refer to instruction H above.)~~
- ~~G. If the client does not challenge the results of the screening, return oral fluids screening kit to the client after the specimen has been tested and results documented. The client will discard the kit in the designated trash container.~~
- ~~H. Screener will refer to instructions M above regarding affidavits.~~

~~DO NOT dispose of an oral fluids specimen that needs to be sent to the screening laboratory for further screening.~~

### Procedure III-E3: Administering Other Client Drug and Alcohol Screens

10/2014

The DCFS employee will:

- A. Refer to vendor information for screen (e.g., K2 strip, ALCO screen) procedure and interpreting results.
- B. Remove the clear cap from the screening kit and give to the client who will then rub the collection screening pad inside his or her mouth against cheek and tongue according to instructions.
- C. Once client has completed swab, re-cap the device and lay on a flat surface.
- D. Under normal circumstances, limit the entire screening process to 15 minutes.
- E. Verbally share and explain the drug screen results to the client.
- F. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
- G. If the specimen screening results are positive and the client challenges the result,
  - 1) Offer to re-screen.
  - 2) If the second screening results are also positive and again challenged again by the client:
    - a) Prepare the oral fluids specimen for laboratory screening. Do not dispose of an oral fluids specimen that needs to be sent to the screening laboratory for further screening.

- b) Send the specimen to the lab per the vendor's instructions.
  - c) Access lab confirmation results (see Area Financial Coordinator for more information).
  - d) If challenge results are contested, documentation of the chain of custody of urine specimens taken from screen subjects shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.
    - i. Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody.
    - ii. For a court ordered screening, a written report of the results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.
    - iii. This report must be certified by an affidavit subscribed and sworn to before a notary public.
    - iv. This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.
- H. If the client does not challenge the results of the screening:
- 1) Return oral fluids screening kit to the client after the specimen has been tested and results documented.
  - 2) Ask client to discard the kit in the designated trash container.
  - 3) Observe client throwing away kit in designated trash container.

### **PROCEDURE III-E4: Maintenance and Re-ordering of Drug and Alcohol Screens**

10/2014

The county office will:

- A. Store the drug screen kits at room temperature (do NOT leave drug screen kits in vehicles for storage purposes as this will impair the effectiveness of the drug kits).
- B. Maintain an adequate supply of drug screening materials, to include copies of drug screening information, at all times.
- C. Monitor closely the specimen collection supplies (county office supply stock will not fall below 15 kits).
- D. Drug screen kits past their expiration dates will NOT be used and will be disposed of immediately (expiration date will be clearly marked on each drug screen kit).
- E. Use new supplies only after current supplies are depleted.
- F. If the county has several kits nearing expiration, order new drug and/or alcohol screen kits as well as challenge kits directly from the DCFS approved vendor.
- G. Address questions pertaining to Chain of Custody Challenged screening to the Central Office Prevention & Support Unit.

The Central Office Prevention and Support Unit will:

- A. Respond to the county office regarding questions related to DCFS approved drug screen and challenge kits.
- B. Serve as a liaison between the county office and DCFS approved drug screen vendor as necessary.

The Screener in each county office will:

- A. Maintain an adequate supply of screening materials, to include copies of drug screening information. The supplies will be kept in the county office.

~~B. — Monitor closely the specimen collection supplies. The supplies on hand should never fall below 15 kits. The expiration date should be clearly marked on each drug screening kit. Kits past their expiration dates will NOT be used. Notification of needed supplies and supply questions will be addressed to the Prevention & Support Manager or designee.~~

~~C. — Use new supplies only after current supplies are depleted. Contact the Program Manager if the county has several kits nearing expiration. Under no circumstances shall a kit be used past its expiration date.~~

~~D. — Store the drug screening kits at room temperature.~~

~~E. — Maintain and have DCFS Drug Screening information available for review at all times.~~

~~F. — Address questions pertaining to Chain of Custody Challenged screening to the Prevention & Support Unit.~~

## POLICY III-E: CLIENT DRUG AND ALCOHOL SCREENING

10/2014

### OVERVIEW

Drug and alcohol use are often contributing factors to child maltreatment. As such, there are times when drug and/or alcohol screening for clients is necessary to ensure appropriate interventions are provided to the family. However, drug and alcohol screening alone are neither treatment interventions nor child safety interventions. The use of drug and alcohol screens and the corresponding results are only one component in the assessment of child safety and risk as well as the strengths and protective capacities of families. It is also important to recognize that drug screens administered by DCFS staff are only presumptive screening tools. As such, only the results of a lab confirmed drug test (not a drug screen) can definitively confirm the presence of a specific drug.

The Division of Children and Family Services will conduct drug and alcohol screening of clients (e.g., parents, caretakers, youth) when appropriate during a child maltreatment investigation or during the course of any type of open DCFS case. It is considered appropriate to conduct a client drug or alcohol screen if DCFS staff has reasonable cause to suspect that a youth involved in a DCFS investigation or case is using drugs and/or alcohol or has reasonable cause to suspect a child's parents or caretakers are under the influence of drugs and/or alcohol to the point that their parenting abilities are negatively impacted. Reasonable cause to suspect may include past history of drug and/or alcohol abuse and/or observable client behavior indicating he or she may be under the influence of drugs or alcohol.

### FREQUENCY AND LOCATION OF DRUG AND ALCOHOL SCREENS

DCFS may request random drug or alcohol screenings when a youth, parent, or caretaker has a history or demonstrated evidence of drug or alcohol abuse. DCFS will also conduct drug screens for clients as outlined in court orders, when applicable.

If a client is participating in a substance abuse treatment program that requires frequent random drug screening or has a probation or parole officer who conducts frequent random drug screens, then drug screens conducted by DCFS are not appropriate. The results from the drug screens conducted by the substance abuse treatment program, probation officer, or parole officer will suffice as long as the substance abuse treatment program, probation officer, parole officer, etc. provides the written results of the drug screens to DCFS in a timely manner.

Appropriate locations for drug and/or alcohol screenings for clients 13 and older may include but are not limited to the county office, client home, and court house, as appropriate. While DCFS staff may conduct drug or alcohol screens on teenagers when necessary, all children younger than 13 for whom a drug screen or test is needed will be referred to a physician or medical facility to have an appropriate screen or test completed (e.g., hair shaft test). If parental consent for a necessary drug screen or test on a minor is not granted, DCFS will obtain an order of investigation to conduct a drug screen or test for children and youth. For drug screens or tests for children who are less than 13 years of age, DCFS staff will accompany them to a qualified agency for the screen or test.

### TYPES OF DRUG SCREENS UTILIZED BY THE DIVISION

DCFS staff will conduct only oral fluids and urine specimen drug screenings. Only drug and alcohol screens from the Division approved vendor will be used by DCFS staff. DCFS staff will only administer drug and alcohol screens according to training and procedures provided by the vendor.

Division staff will keep record of their completion of training and complete training updates as needed. An employee who has not completed the Division approved vendor drug screening training will neither administer a drug or alcohol screen to a client nor serve as a witness to drug or alcohol screen results (witnesses to drug screen results are only required when results of the drug screen are unclear and/or challenged by the client).

Written screening instructions provided by the Division approved vendor will be kept in a binder clearly identified as such in all county offices. County office personnel are responsible for maintaining all updates to the screening instructions that the Central Office Prevention and Support Unit provides to the field.

Court ordered (or otherwise deemed necessary) hair shaft tests, blood tests, or other drug screens that are not the standard DCFS oral fluids or urine specimen screens administered by Division staff will be handled on an individual basis. All requests for payment of hair shaft tests, blood tests, or other non-standard drug screens will be made via the Area Financial Coordinator or designee to the Central Office Financial Unit. Such tests and screens will be paid with a state procurement card or purchase order with prior approval from the Central Office Financial Unit.

#### CLIENT REFUSAL OF SCREENS

If not previously court ordered, parents or caretakers may decline participating in their own drug and/or alcohol screens. Any refusal must be documented in CHRIS. The drug and/or alcohol screen may not be pursued further without a court order. However, if the adult client refuses to submit to any court ordered drug or alcohol screen, the screen will be documented in CHRIS as a positive screen, due to client refusal, and the refusal will be disclosed to the court.

#### ACTIONS FOLLOWING SCREEN RESULTS

Regardless of the results of the drug screen, DCFS staff will verbally share the results of the screen with the client. DCFS staff will also record the results of the screen with the client via the CFS-150: Drug and Alcohol Screen Results form.

If drug and/or alcohol screen results are positive, DCFS must assess how the drug and/or alcohol usage is impacting the parent/caretaker's ability to effectively parent and ensure child safety prior to making decisions about the placement of the child, parent-child visits, and/or other case plan requirements. A positive drug or alcohol screen in and of itself will not result in the postponement and/or withholding of visits between a parent and child in DHS custody unless the parent is under the influence of drugs and/or alcohol at the time of the scheduled visit and has observable behavior indicating impairment of parenting capacity or unless a court order specifies that a parent's positive screen will result in the withholding of parent-child visits.

#### CLIENT CHALLENGES OF DRUG OR ALCOHOL SCREEN RESULTS

If a client challenges the results of a Division administered drug or alcohol screen, DCFS will only pay for one client challenge of a positive drug screen. If the re-screening is positive, then the client must bear the cost of additional challenges to that screening. However, if the re-screening is negative, then the client may challenge the next positive drug screen and DCFS will cover the cost of that challenge. Challenges do not have to be in consecutive order.

If a client challenges the results of a Division administered drug or alcohol screen, the client may elect to have another entity (e.g., hospital for drug and alcohol screens, local police station for alcohol screens only) conduct another drug and/or alcohol screen rather than DCFS administering the screen for the challenge. The Division will accept the results of urine or blood sample screens from other qualified agencies as long as a DCFS employee is able to immediately accompany the client to the qualified agency and provided the qualified agency conducting the screen provides results in writing to DCFS.

#### CONFIDENTIALITY OF DRUG AND ALCOHOL SCREEN RESULTS

All data, information, and results related to client drug and/or alcohol screens are confidential. Disclosure of information will only be to those individuals whose official business duties necessitate disclosure or as required by law. Breaches of confidentiality will constitute grounds for disciplinary action to include the possibility of job termination.

### PROCEDURE III-E1: Administering Client Urine Specimen Drug Screens

10/2014

The DCFS employee will:

- A. Ask client to put away his or her purse, bag, jacket, etc. and ask client to empty all of his or her pockets.
- B. Observe, but not touch, each of the client's pockets to ensure they are empty. The only item the client may take into the restroom stall is the collection container.
- C. Escort the client to the restroom.
- D. Directly observe the clients wash their hands without soap.
- E. Give the client only the collection container. The client must not have access to the screen.
- F. Instruct the client to fill the cup to the marked line.
- G. Observe the client enter the restroom, close the door to give privacy to the client, but remain immediately outside the restroom.
  - 1) Do not directly observe the client in the process of urination unless court ordered to observe.
    - a) If court ordered to observe, the witness must be the same gender as the client.
- H. If the client has difficulty giving a specimen, have the client drink at least 8 - 10 ounces of water and wait up to two hours for the client to give a urine specimen. As such, do not attempt to conduct the drug screen if a minimum of three hours are not left in the workday.
- I. After the cup has been returned to the FSW or designee, visually examine the specimen.
  - 1) Suspicion of adulteration and/or dilution will be indicated by the PH screen and temperature gauge.
- J. Verbally share and explain the drug screen results to the client.
- K. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
- L. If the client does not challenge the screening results:
  - 1) Return the specimen cup to the client after the specimen has been screened and the results documented.
  - 2) Ask client to dispose of the contents in the toilet or urinal, flush, and discard the container in the designated trash container.
  - 3) Place the top copy of the CFS-150: Drug and Alcohol Screen Results Form in the client record.
  - 4) Give the client the bottom copy of the completed CFS-150: Drug and Alcohol Screen Results Form.
  - 5) Retain the middle copy for submission to court.
  - 6) Scan and email the completed CFS-150: Drug and Alcohol Screen Results Form to all parties to the case.
  - 7) Document drug and alcohol screen results and any other relevant information associated with drug and alcohol screen results in CHRIS as applicable.
- M. If the client challenges the screening results, please refer to Procedure III-E2: Urine Specimen Drug Screen Challenges.

The DCFS Supervisor will:

- A. Ensure all staff administering and/or serving as witnesses to drug screen results have successfully completed the Division approved drug and alcohol vendor training.
- B. Conference with the FSW as needed regarding need for screening and any subsequent action steps.

## **PROCEDURE III-E2: Client Urine Specimen Drug Screen Challenges**

10/2014

If urine specimen drug screen results are positive and the client challenges the result, the DCFS employee will:

- A. Inform the client that the specimen will be sent to the lab for drug testing confirmation.

- 1) However, if DCFS staff initially conducted the drug screen at the client's home, the DCFS employee may offer to re-screen the client at the county office that same day and have another DCFS staff person serve as a witness to the results of the second screening.
- B. The chain of custody will be maintained throughout the entire challenge process.
- C. Complete the county specific vendor challenge form.
- D. Write the client specimen identification number found on the county's vendor challenge form/ mailing strip on the CFS-150: Drug and Alcohol Screen Results Form (the client specimen identification number is the identifier used in the subject line of the email that the lab sends when emailing the FSW with the challenge results; this number is the only way to match the challenge results to the correct client so it is extremely important to record the client specimen identification number prior to mailing the challenge screen to the lab).
- E. Prepare the urine specimen for laboratory screening (lab will not process urine specimens that are received without proper identification).
  - 1) Notify the DCFS Prevention & Support Manager or designee that the collection will be sent for lab confirmation by faxing a copy of the Chain of Custody, prior to the urine specimen being sent to the lab.
  - 2) Check for leakage of the collection device prior to mailing/sending the specimen for confirmation screening.
  - 3) Use the supplied FedEx mailer envelopes to send the challenged, positive, urine specimens to the lab.
    - a) If samples taken on weekends or after FedEx facility closes during the week, refrigerate samples until they are delivered to FedEx facility for shipment.
  - 4) To access challenge results, contact the Area Financial Coordinator or designee for instructions on how to access the lab confirmation results via the internet.
  - 5) If challenge results are contested, documentation of the chain of custody of urine specimens taken from screen subjects shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.
    - i. Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody of those urine specimens.
    - ii. For a court ordered screening, a written report of the results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.
    - iii. This report must be certified by an affidavit subscribed and sworn to before a notary public.
    - iv. This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.

If the alcohol screen results are positive and the client challenges the results, the DCFS staff will:

- A. Inform the client he or she may immediately obtain a blood test from a qualified agency or immediately take a Breathalyzer test at the local police station.

## **Procedure III-E3: Administering Other Client Drug and Alcohol Screens**

10/2014

The DCFS employee will:

- A. Refer to vendor information for screen (e.g., K2 strip, ALCO screen) procedure and interpreting results.
- B. Remove the clear cap from the screening kit and give to the client who will then rub the collection screening pad inside his or her mouth against cheek and tongue according to instructions.
- C. Once client has completed swab, re-cap the device and lay on a flat surface.
- D. Under normal circumstances, limit the entire screening process to 15 minutes.

- E. Verbally share and explain the drug screen results to the client.
- F. Document the results via CFS-150: Drug and Alcohol Screen Results Form and gather all required signatures on the CFS-150: Drug and Alcohol Screen Results Form.
- G. If the specimen screening results are positive and the client challenges the result,
  - 1) Offer to re-screen.
  - 2) If the second screening results are also positive and again challenged again by the client:
    - a) Prepare the oral fluids specimen for laboratory screening. Do not dispose of an oral fluids specimen that needs to be sent to the screening laboratory for further screening.
    - b) Send the specimen to the lab per the vendor's instructions.
    - c) Access lab confirmation results (see Area Financial Coordinator for more information).
    - d) If challenge results are contested, documentation of the chain of custody of urine specimens taken from screen subjects shall be verified by affidavit of one person witnessing the procedure or extraction, packaging, and mailing of the samples and by one person signing for the samples at the location where the samples are subject to the testing procedure.
      - i. Submission of the affidavits, along with the submission of the screening results, shall be competent evidence to establish the chain of custody.
      - ii. For a court ordered screening, a written report of the results may be prepared by the person conducting the screening, or by a person under whose supervision or direction the screen and analysis have been performed.
      - iii. This report must be certified by an affidavit subscribed and sworn to before a notary public.
      - iv. This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the screening procedures or results has been filed within 30 days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.
- H. If the client does not challenge the results of the screening:
  - 1) Return oral fluids screening kit to the client after the specimen has been tested and results documented.
  - 2) Ask client to discard the kit in the designated trash container.
  - 3) Observe client throwing away kit in designated trash container.

## **PROCEDURE III-E4: Maintenance and Re-ordering of Drug and Alcohol Screens**

10/2014

The county office will:

- A. Store the drug screen kits at room temperature (do NOT leave drug screen kits in vehicles for storage purposes as this will impair the effectiveness of the drug kits).
- B. Maintain an adequate supply of drug screening materials, to include copies of drug screening information, at all times.
- C. Monitor closely the specimen collection supplies (county office supply stock will not fall below 15 kits).
- D. Drug screen kits past their expiration dates will NOT be used and will be disposed of immediately (expiration date will be clearly marked on each drug screen kit).
- E. Use new supplies only after current supplies are depleted.
- F. If the county has several kits nearing expiration, order new drug and/or alcohol screen kits as well as challenge kits directly from the DCFS approved vendor.
- G. Address questions pertaining to Chain of Custody Challenged screening to the Central Office Prevention & Support Unit.

The Central Office Prevention and Support Unit will:



- A. Respond to the county office regarding questions related to DCFS approved drug screen and challenge kits.
- B. Serve as a liaison between the county office and DCFS approved drug screen vendor as necessary.