



North Queensland Airports Pty Ltd Policy

Drug & Alcohol Management Plan (DAMP)

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**Any alterations to this Policy must be approved by the:
GM People, Communications & Compliance**

The current copy of this Policy is held on Sharepoint

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DEFINITIONS IN ACCORDANCE WITH PART 99 – 99.010 DEFINITIONS

Accident means an occurrence that arises out of a person performing or being available to perform their duties if either or both of the following apply:

- The occurrence results in the death of or serious harm to a person.
- The occurrence results in serious damage to an aircraft or property.

Aerodrome testing area means:

- Any surface in a certified aerodrome or a registered aerodrome over which an aircraft is able to be moved while in contact with the surface of the aerodrome, including any parking areas; and
- Any part of the surface of a certified aerodrome or registered aerodrome:
 - That is not covered by paragraph (a),
 - That does not have a building on it; and
 - From which access to a surface mentioned in paragraph (a) may be had.
- A building located on a certified aerodrome or registered aerodrome that is used:
 - For maintenance of an aircraft or an aeronautical product; or
 - For the manufacture of aircraft or aeronautical products; or
 - By an air traffic service provider to control air traffic; or
 - By the holder of an AOC for flying training.
- Any part of an aircraft, aerobridge or other moveable structure in a certified aerodrome or a registered aerodrome.

Appropriately qualified alcohol and other drug professional means a person who:

- Materially works as a provider of clinical drug and alcohol treatment services; and
- Holds a bachelor degree, or postgraduate degree in at least one of the following fields:
 - Health sciences;
 - Medical science;
 - Social sciences; or
 - Behavioural sciences.

Approved External Testing Agency means Pathology collection agency accredited under ISO9001 Quality System Standard and National Association of Testing Authorities NATA.

Currently approved External Testing Agency - The Australian Drug Detection Agency (ADDA) is engaged by NQA to:

- Take body samples for CASA drug or alcohol tests;
- Conduct initial drug tests and alcohol tests; and/or
- Provide results and recommendation regarding tests carried out for NQA.

Approved Tester (see Approved External Testing Agency)

Comprehensive Assessment means an examination of a person's physiological and psychosocial indicators carried out:

- By a psychiatrist,
- By a medical practitioner who is a Fellow of the Australasian Chapter of Addiction;
- Medicine; or
- Jointly by:
 - A person entitled to practice as a medical practitioner under a law of a State or Territory; and
 - An appropriately qualified drug and alcohol professional.

DAMP Contact Officer is the person nominated to CASA by NQA and charged with overall responsibility for liaison with CASA about NQA's drug and alcohol testing responsibilities. The DAMP Contact Officer also oversees any review of the DAMP, monitors its application, and submits CASA DAMP Reports as required by CASA.

DAMP Medical Review Officer (MRO) is a person who meets the following criteria:

- Is a registered medical practitioner.
- Has competence in the field of interpreting drug and alcohol test results.
- Has knowledge of substance use disorders.
- Has knowledge of the contents of relevant provisions of the CASR's.

DAMP Supervisor, means

a person who:

(a) has had relevant training to form an opinion as to whether a person may be adversely affected by a testable drug or under the influence of alcohol; and

(b) is authorised by the organisation to do so for the purposes of Part 99 Civil Aviation Safety Regulations 1998 paragraph 99.050 (2) (c) namely a DAMP supervisor has reasonable grounds to believe that a SSAA employee may be adversely affected by a testable drug or by alcohol while performing, or available to perform, an applicable SSAA;

A DAMP Supervisor has access to the DAMP Medical Review Officer for advice and clarification as required.

Drug or Alcohol Intervention Program may consist of any of the following measures:

- Assessment
- Treatment, including any of the following:
 - Education;
 - Counselling;
 - Consultation with health care professionals;
 - Pharmacotherapy; or
 - Residential or non-residential treatment programs.
- Monitoring and follow up action.

Employees all permanent, casual and temporary employees, trainees, volunteers, consultant and contractors employed directly by NQA. (Individuals who are employed by a company contracted to and/or providing a service to NQA must comply with the permissible levels and testing regime. However they are the responsibility of their employer.)

Illegal (Illicit) Drugs means:

- Those drugs deemed to be illegal pursuant to current State legislation (e.g. cocaine, heroin, cannabis); and/or
- Controlled substances not prescribed to an Employee by a duly licensed physician.

Legal Drugs means:

- Those sold to the public on a non-prescription basis;
- Those prescribed to an Employee by a duly licensed physician; and/or
- Controlled substances or medications legitimately prescribed by a duly licensed physician.

Permitted Level means:

- For alcohol - a concentration of less than 0.02 grams of alcohol in 210 litres of Breath,
- For a testable drug - a concentration of the testable drug that is less than the confirmatory target concentration for that drug specified in the legislative instrument made by CASA for the purpose of Part 99.010 of the CASR and Australian Standard 4308:2001 Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine.

Positive Result means:

- For an initial drug test - a test result above the permitted level,
- For a confirmatory drug test - a test result above the permitted level, verified by an MRO as a verified positive result,
- For an initial alcohol test - a test result above the permitted level;
- For a confirmatory alcohol test - a test result above the permitted level.

Regular SSAA Employee means:

- SSAA employee who is reasonably likely to perform an applicable SSAA at least two (2) or more times every 90 days.

Safety Sensitive Aviation Activities (SSAA) are:

- Any activity undertaken by a person in an aerodrome testing area (including the persons presence in the area) other than as a passenger.
- Any of the following activities, wherever they occur:
 - Calculation of the position of freight, baggage, passengers and fuel on aircraft.
 - The maintenance, certification of maintenance or manufacture of aircraft, aeronautical products, and ground based navigation aids or radar.
 - The fuelling and maintenance of vehicles that will be used to fuel aircraft on aerodrome testing areas.

- Activities undertaken by an airport security guard or screening person in the course of their duties as a guard or person.
- Activities undertaken by a member of the operating crew of an aircraft in the course of their duties as a crew member.
- The loading and unloading of trolleys containing baggage for loading onto aircraft or unloading from aircraft and the driving of such trolleys.
- Activities undertaken by an air traffic controller in the course of the controller's duties as a controller, or the supervisor of such a person.
- Providing flight information and search and rescue alert services: to a pilot or operator of an aircraft immediately before the flight of the aircraft; or to a pilot or operator of an aircraft, during the flight of the aircraft; or as an intermediary for communications between a pilot or operator of the aircraft and an air traffic controller.
- The provision of aviation fire fighting services.

Serious incident is an occurrence that arises out of a person performing or being available to perform an SSAA if either or both of the following applies:

- The occurrence gives rise to a danger of death or serious harm to a person;
- The occurrence gives rise to a danger of serious damage to aircraft or property.

Suspension Event means an event where this program requires an employee to cease performing or being available to perform their duties.

Testable Drug The expanded list means any of the following:

- Morphine
- Codeine
- 6-Acetyl morphine
- Amphetamine
- Methyl amphetamine
- Methylenedioxymethylamphetamine
- Methylenedioxyamphetamine
- Cocaine
- Delta 9-tetrahydrocannabinol
- Benzoyllecgonine
- Ecgonine methyl ester

Workplace means any work area, property or vehicle where the NQA is conducting business or its undertakings and any function which an Employee is required to represent NQA.

1. POLICY STATEMENT

The health, wellbeing and safety of all personnel are of paramount importance to North Queensland Airports (NQA). All individuals have a right to be safe at an NQA workplace.

Alcohol and Other Drugs (AOD) when present in the workplace, have the potential to increase risk of harm in the workplace.

NQA therefore has a duty of care to minimise the risk of accident, incident and injury in the workplace arising from the consumption of alcohol or other drugs. The purpose of this policy is to outline the strategies and processes that will be used by NQA to manage the risks associated with use, or recent use, of alcohol or other drugs by persons in the workplace.

NQA takes a multi-strategy approach that incorporates:

- Awareness/Education/Training
- Testing
- Enforcement
- Performance management
- Support and rehabilitation

To ensure informed compliance is achieved NQA is committed to:

- Providing awareness material, education and training to employees and contractors about the health and safety risks associated with being under the influence of any form of alcohol or other drugs.
- Managing alcohol and other drug risks by fostering an attitude amongst all employees and contractors that it is not acceptable to attend work under the influence of alcohol or other drugs.
- Providing an atmosphere that encourages employees and contractors to seek assistance for alcohol and drug related issues.
- Providing employees with access to counselling.
- Ensuring that all employees are aware that the consumption, possession and sale of illegal drugs in the workplace will not be tolerated.
- Monitoring the workplace to ensure no employee is under the influence of drugs or alcohol.
- Investigating all accidents and incidents to ensure alcohol or other drugs are not a contributory factor.

2. INTRODUCTION

In 2008 CASA released Part 99 Civil Aviation Safety Regulations 1998 (CASR's) under which it became mandatory for aviation related organisations to develop and implement a Drug and Alcohol Management Plan (DAMP). Such organisations are referred to by CASA for the purpose of this legislation as 'DAMP Organisations'.

The previous AOD Policy and Procedures have now been combined with the CASA DAMP requirements detailed in Part 99 of the Civil Aviation Safety Regulations 1998 to form the NQA DAMP.

In addition to meeting its statutory obligations under Commonwealth legislation, NQA also seeks to achieve the following aims through this program:

AIMS

- To provide a safe and healthy workplace.
- To take a holistic approach to drug and alcohol management at NQA airports and not just focus on CASA regulated areas and activities.
- To ensure information to aid in identifying AOD issues is readily available.
- To provide training and education to assist in identifying AOD issues.
- To provide an atmosphere where it is recognised that working while under the influence of AOD is not acceptable.
- To provide appropriate support and encouragement to assist those with AOD consumption issues overcome those issues.
- To deal with any issues relating to AOD consumption in a consistent manner.
- To enforce this policy.
- To ensure compliance under The Queensland Work Health and Safety Regulations 2011.

3. APPLICATION

Provisions within this DAMP relate specifically to actions undertaken by NQA and does not include enforcement action undertaken by external agencies such as law enforcement agencies.

While CASA requirements for a DAMP are directed at persons who perform, or are available to perform, a safety sensitive aviation activity (SSAA), the NQA DAMP applies to all employees.

All NQA employees must comply with the NQA DAMP.

For the purpose of the NQA DAMP employees are deemed to be permanent, casual or temporary employees, trainees, volunteer staff, consultants and contractors **employed directly by NQA.**

NQA employees engaged in SSAA roles are not in specific roles listed in legislation but are covered by **99.015 (2)(a) any activity undertaken by a person, other than as a passenger, in an aerodrome testing area.** NQA employees involved in SSAA include staff from but not limited to:

- Assets;
- Operations;
- Commercial;
- People Communications and Compliance; and

- Other staff who do not work in an 'aerodrome testing area', but are indirectly involved in control of facilities, aircraft, or safety, security and emergency response which requires compliance with CASA legislation.

Key points for NQA employees to be mindful of are:

- When beginning work with NQA you must pass Alcohol and other drug (AOD) screening irrespective of if your role is deemed SSAA or not.
- To pass the initial pre-employment screening you must record 'zero' for both alcohol and negative for the nominated testable drugs
- Zero is deemed to be under 0.02BAC for alcohol and negative for drugs is below the nominated cut off limits for the testable drugs. (refer definitions for testable drugs)
- You will potentially be subject to testing throughout your employment and these levels must be maintained while are work or available to attend work such as on call.

Where individuals are employed by a company who in turn provide a service directly to NQA the onus is on those companies to demonstrate to NQA that their employees:

- If not having worked previously at the airport, have been screened negative for drugs and alcohol prior to deployment into a SSAA;
- Are aware of the permissible limits regarding alcohol and other drugs;
- Are aware of the existence of random testing;
- Are aware of the implications of any breeches by themselves and to the company including covering the cost of any confirmatory testing; and
- Will comply fully with NQA's DAMP requirements;
- Undertake Drug and Alcohol Education Program before they operate airside.

4. CONTENT

Fundamentally there are three (3) key elements underpinning this program:

- A Drug & Alcohol Education Program (DAEP);
- A Drug & Alcohol Testing Program;
- A Drug & Alcohol Response Program.

5. RESPONSIBILITIES

Governance

Firstly it must be stated that NQA ensures appropriate governance of the DAMP is maintained at all times. The General Manager People Communications and Compliance (GMPCC) has senior management responsibility to ensure the DAMP is compliant with relevant legislation and is custodian of the Plan.

5.1 RESPONSIBILITIES OF NQA APPOINTED DAMP CONTACT OFFICERS

- To liaise with CASA in relation to NQA's DAMP responsibilities.

5.2 RESPONSIBILITIES OF NQA APPOINTED DAMP SUPERVISORS

- If a DAMP Supervisor (APPENDIX 7) forms an opinion that an employee is adversely affected by (AOD) they must direct the employee to cease performing or being available to perform their duties and complete the DAMP Supervisor Assessment Checklist (APPENDIX 1). Action will then be taken in accordance with the testing Flow chart (APPENDIX 2).
- Ensure that AOD testing is arranged for any staff involved in a serious work related incident or accident.

5.3 NQA GENERAL RESPONSIBILITIES

NQA must:

- Ensure that all employees and contractors undertake the DAEP before they need to perform, or become available to perform their required duties.
- Ensure AOD screening of new employees has been carried out prior to deployment into SSAA as per CASA requirements.
- Include a copy of the NQA DAMP on the public websites.
- Securely maintain written records that demonstrate compliance with Part 99 including alcohol and drug test records. Such records to be made available to CASA for audit purposes as requested while ensuring Privacy legislation is not breached
- Not permit any employee to perform or be available to perform their duties in the following circumstances:

REASONABLE CAUSE OR SUSPICION (REFER APPENDIX 1) - Where a DAMP Supervisor has reason to believe the employee's faculties may be impaired due to the person being under the influence of a testable drug or alcohol.

INCIDENT/ACCIDENT (REFER APPENDIX 1) – Where the employee is involved in a serious work related incident or accident and either:

- For the period that suitable test conditions exist for conducting drug or alcohol tests on the employee - a test has not yet been conducted; or
- If tests have been conducted - NQA has not been notified of the test results; or
- If tests have been conducted - NQA have been notified of positive test results.
- Not permit an employee to again perform or be available to perform their duty until all mandatory pre-conditions have been met, when an employee has been required to cease performing, or being available to perform their duties because of an incident related to AOD.

NOTE: Reporting Incidents/Accidents must be done in compliance with NQA's incident notification and investigation protocols which includes completion of a Form 'A' *Incident Notification* and Form 'B' *Investigation process*.

5.4 RESPONSIBILITIES OF ALL NQA EMPLOYEES

- To disclose to their NQA Supervisor if he/she has consumed a level of AOD, that may affect his or her ability to carry out their duties. Note: While the focus is on nominated **testable drugs** under Part 99 Civil Aviation Safety Regulations 1998 it is expected that employees also disclose information relating to any

other drugs or substances consumed that have the potential to impact on their ability to carry out their required role.

- To obtain information from a qualified medical practitioner regarding the potential impact of prescribed medications.
- To not perform or be available to perform their duties if aware that they are adversely affected by alcohol or other drugs. This includes driving motor vehicles to and from a workplace.
- To not be in possession of or traffic any illegal drug while at an NQA Workplace or when conducting a NQA undertaking.
- To notify a DAMP Supervisor of any AOD concerns they have regarding co-workers.
- To comply with AOD testing as per the NQA DAMP.
- To cease performing or being available to perform their duties if they:
 - Do not comply with a request to provide a breath, oral fluid (normally saliva) and/or urine sample for alcohol and other drug testing as per the NQA DAMP.
 - Return a positive result for an alcohol or other drug test.
 - Interfere with a sample they provide for AOD testing.
 - Are involved in a serious incident or accident.
 - Are suspected with reasonable cause by a Supervisor of being affected by AOD.
- To not recommence their NQA duties until all mandatory preconditions have been met.

NOTE: In addition to NQA's grievance and disciplinary procedures, employees engaged in SSAA will be deemed to be committing an offence against Commonwealth legislation if found to be in excess of permissible limits or refusing to comply with directives from a CASA Approved Tester. Prosecution or infringement action may therefore be taken by CASA or the Commonwealth Director of Public Prosecutions.

6. DRUG AND ALCOHOL EDUCATION PROGRAM (DAEP)

ALL EMPLOYEES AND NQA CONTRACTORS are required to undertake a DAEP in accordance with information supplied by CASA.

The NQA DAEP contains the following components:

- NQA policy for AOD use.
- AOD testing in the workplace.
- Additional obligations under CASA regulations where SSAA are involved.
- Support services and assistance for people who engage in problematic use of alcohol and other drugs.
- Information about the potential risks to safety from problematic use of alcohol and other drugs.

NQA will also provide refresher education to all employees within 30 months of their previous training session in accordance with CASR Part 99.045. A copy of NQA's current DAEP is located on SharePoint (NQA's intranet) and CAPL / MAPL website.

DAMP SUPERVISORS - In addition to general employee training, specific education and training will be provided to Supervisors to assist in the recognition of and management of people who engage in problematic use of AOD. The list of supervisors who have undertaken DAMP Supervisors training and accreditation is provided at APPENDIX 7.

7. DRUG AND ALCOHOL TESTING PROGRAM

7.1 SUBSTANCES THAT WILL BE INCLUDED IN TESTING

NQA will test for alcohol and five (5) classes of **testable drugs** known to cause impairment:

- Opiates (e.g. heroin);
- Sympathomimetic amines (e.g. speed, amphetamines, ecstasy, ephedrine);
- Cannabis metabolites (e.g. marijuana);
- Cocaine; and
- Benzodiazepines (tranquilisers).

NOTE: In accordance with Australian Standards AS4308 and AS4760 any testing for these drugs is intended to identify the presence of the drug and not to determine the level of impairment matched to a quantity as is the case with alcohol.

Should an Employee be selected to attend an Approved External Testing Agency for alcohol or drug testing, the presence of substances such as masking agents and other non-targeted drugs may also be identified. For this reason anyone selected to attend an Approved External Testing Agency is strongly advised to declare any such substances they suspect may be in their system. Such a declaration is treated in confidence and covered by privacy provisions.

7.2 TESTING METHODOLOGY

Testing can be conducted by or on behalf of CASA, an individual self testing, or NQA's drug & alcohol testing service provider. All testing equipment used must be used in a manner not inconsistent with the manufacturer's instructions

CASA TESTING

CASA testing will be carried out by a CASA Approved Tester. Any drug and alcohol testing done under this program will be conducted as follows:

Alcohol - Breath testing using a device that meets either AS 3547:1997 Breath and Alcohol testing device for personal use; or NMI R126, Pattern Approval Specifications for Evidential Breath Analysers.

Other Drugs - Oral fluid testing in accordance with AS 4760:2006, *Procedures for specimen collection and the detection and quantitation of drugs in oral fluid*.

NOTE: CASA testers may vary testing methodology as they deem appropriate.

SELF TESTING

NQA employees are encouraged to 'self-test' for alcohol using a calibrated Alcolizer HHI breathalyser unit located throughout NQA work areas. Units are calibrated in accordance with AS 3547-1997 Breath alcohol testing device for personal use. (Refer APPENDIX 6 for equipment locations).

NQA TESTING

Carried out by an ***appropriately qualified alcohol and other drug professional*** using methodology consistent with CASA and the relevant Australian Standards (see Section 7.3). NQA's current service provider for drug and alcohol testing is The Drug Detection Agency (TDDA) and where not available QML is utilized.

Alcohol - Breath testing using a device that meets either AS 3547:1997 Breath and Alcohol testing device for personal use; or NMI R126, Pattern Approval Specifications for Evidential Breath Analysers.

Other Drugs - Urine in accordance with AS/NZS 4308:2001, *Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine*; or

- Oral fluid testing in accordance with AS 4760:2006, *Procedures for specimen collection and the detection and quantitation of drugs in oral fluid*.

NOTE: All urine testing will be carried out under controlled conditions and by an ***appropriately qualified alcohol and other drug professional, as per AS/NZS 4308:2001***.

7.3 WHEN TESTING WILL BE CONDUCTED

CASA APPROVED TESTER

CASA approved testers may undertake random testing within aerodrome testing areas, and/or of individuals undertaking SSAA. This is done as part of CASA's DAMP monitoring and auditing functions to ensure organisations and individuals are compliant with their legislative requirements.

NQA APPROVED TESTER

Drug and alcohol testing of NQA employees and contractors under this program will be conducted in the following circumstances:

- Prior to commencement of employment/deployment;
- Post Accident or Incident;
- Reasonable Suspicion;
- Prior to Return to Work following Suspension.
- Randomly

OTHER

- Randomly by State or Federal Police

NOTE: NQA Contractors are responsible for meeting all costs associated with the required AOD testing of their own staff.

- **Prior to Commencement of Work / Deployment**

All NQA employees and SSAA contractors will be required to undergo initial drug and alcohol testing (screening) in accordance with the following legislative requirements.

99.010 Definitions for Part 99

Regular SSAA employee means a SSAA employee who is reasonably likely to perform an applicable SSAA at least two (2) or more times every 90 days.

99.050 Requirements for drug and alcohol testing

Drug and alcohol testing will be conducted on SSAA employees as follows:

(a) When a person first joins the DAMP organisation, if the person will be working as a regular SSAA employee, or when an employee whose role in the organisation is to change to that of a regular SSAA employee on or after the commencement date, unless;

(i) The employee has been drug and alcohol tested; and

(ii) The tests were conducted less than 90 days before the employee is required to begin performing or being available to perform an applicable SSAA.

- **Post-Accident or Serious Incident**

A person will be assessed for testing for alcohol and testable drugs after a serious incident and/or accident involving a NQA employee or NQA Contractor. (Refer APPENDIX 1)

NOTE: Suitable test conditions exist where, after a serious incident or accident, testing can be conducted:

- Within 24 hours of the accident or incident for drug testing;
- Within 4 hours of the accident or incident for alcohol testing; and
- It is practicable to conduct a test.

- **Reasonable Suspicion**

A NQA employee or NQA Contractor will be required to undergo testing if a NQA DAMP Supervisor reasonably believes that they may be adversely affected by AOD while performing, or available to perform their duties. (Refer APPENDIX 1)

- **Prior to Return to Work**

A NQA employee or NQA Contractor will be required to undergo testing for AOD if returning to work after a period of suspension because of alcohol or other drug use or a related incident. A negative test result and a Comprehensive Medical Assessment by the Medical Review Officer are required before they are able to recommence duties.

- **Random**

In accordance with NQA's commitment to manage responsibly random testing may be undertaken by an appropriately qualified drug tester in a controlled environment. Such testing is compliant with AS 3547:1997 *Breath and Alcohol testing device for personal use*; or NMI R126, Pattern Approval Specifications for Evidential Breath Analysers, AS/NZS 4308:2001, *Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine* and with AS 4760:2006, *Procedures for specimen collection and the detection and quantitation of drugs in oral fluid*.

7.4 ALCOHOL AND OTHER DRUGS - TEST RESULTS

Alcohol testing is based on blood alcohol concentration (BAC).

The initial test for alcohol is done using breath to determine the probable BAC, i.e. BAC 0.02 = 0.02grams of alcohol in 210 litres of breath.

NOTE: Less than 0.02 is deemed to be Zero BAC.

Drug testing is based primarily on determining the presence above cut off limits or permitted levels of a testable drug. It is medically recognised that small quantities of substances can be found naturally in the body or present in some foods which chemically equate to various testable drugs. Testing methodology therefore allows for and discounts these small quantities and refers to them as **cut off limits**, or **permitted levels**.

NOTE: If a serious incident or accident has occurred and a full urinalysis is required it will also detect masking agents known to the Approved External Testing Agency as indicative of the use of testable drugs. Therefore should masking agents be detected and based on recommendations from the Medical Review Officer an employee may be asked to explain the presence of such masking agents.

POSITIVE RESULT MEANS

- For an initial drug test - a test result above the permitted level.
- For a confirmatory drug test - a test result above the permitted level, verified by an MRO.
- For an initial alcohol test - a test result of 0.02 or above.
- For a confirmatory alcohol test - a test result of 0.02 or above.

PRE- EMPLOYMENT/DEPLOYMENT TESTING FOR NQA EMPLOYEES

If a potential new employee records a positive result from undertaking a pre-employment test they will be asked to undertake a confirmatory urinalysis.

Depending on the results of the confirmatory urinalysis test and the nature of the primary intended role of the person, NQA:

- Reserves the right to either withdraw the offer of employment;
- Delay finalising employment;
- Recommend the person undergoes appropriate medical treatment. This decision will be made in consultation with the MRO and other appropriate Medical Practitioners.

PRE- DEPLOYMENT TESTING FOR CONTRACTORS

Positive results from employees working for Contractors are a matter between them and their employer.

NQA will not permit access to SSAA areas until a negative result is produced.

Contractor management are required to notify NQA of the number of contractor staff undergoing pre-deployment testing and the number of staff returning positive test results.

TESTING OF NQA EMPLOYEES AT WORK

Alcohol: If a positive result is obtained from an initial breath test, the employee is required to cease working and a second confirmatory breath test will be requested.

Drugs: If a positive result is obtained from an oral fluid test, the employee is required to cease working and a confirmatory urinalysis will be requested.

If a confirmatory alcohol or drug test returns a positive result, NQA will consult a DAMP MRO to determine if the presence and level of a testable drug detected by the test could be the result of legitimate therapeutic treatment or some other innocuous source. Staff will remain stood down until the MRO completes the assessment.

TESTING OF INDIVIDUALS EMPLOYED BY NQA CONTRACTORS AT WORK

If a positive AOD result is recorded, the nominated NQA DAMP Supervisor will request an individual contractor staff to cease duties and the matter is referred immediately to the company for action. The individual is not permitted to return until the Company can confirm the individual has returned a negative confirmatory test result and has complied with all DAMP MRO requirements. All on going assistance required by the individual to overcome any AOD issues is the responsibility of their employer.

8. DRUG AND ALCOHOL RESPONSE PROGRAM

8.1 SUSPENSION FROM DUTY/STAND DOWN

Refer to Part 11 - Disciplinary Action

NQA will not permit an employee to perform or be available to perform their duties in any of the following circumstances:

- If aware that a positive result for an initial (indicative) alcohol or other drug test has been recorded but this has not yet been confirmed in a follow-up (confirmatory) test.
- A positive result for a confirmatory test has been recorded for the employee and:
 - A DAMP Medical Review Officer has not determined that the result recorded could be because of legitimate therapeutic treatment or some other innocuous source; and
 - Mandatory preconditions for return to work have not been met.
- If aware that an employee who has been required to undertake an alcohol or other drug or alcohol test has:
 - Refused to take the test; or
 - Interfered with the integrity of the test.
- If a DAMP Supervisor reasonably suspects the employee's faculties may be impaired due to the person being under the influence of alcohol or other drug.
- If an accident or serious incident has occurred involving the employee:
 - Suitable test conditions exist but the test has yet to be conducted; or
 - If tests have been conducted and NQA has not been notified of the test results.

8.2 RETURN FROM SUSPENSION

Where NQA has not permitted an employee to perform and/or be available to perform, their duties as a result of a drug or alcohol testing related suspension event, an employee will not be permitted to return to work unless:

- The employee has undergone a Comprehensive Medical Assessment and is considered fit to resume performing, or be available to perform their duties by the NQA nominated MRO in consultation with the approved testing agency;
- Where a Comprehensive Medical Assessment recommends the employee participates in a drug or alcohol intervention program, the employee has begun the nominated drug or alcohol intervention program;
- Where the suspension event related to a drug test - a confirmatory drug test indicates an absence of testable drug.

8.3 COMPREHENSIVE MEDICAL ASSESSMENT

In the event of a positive confirmatory test the nominated Medical Review Officer (MRO) must conduct a Comprehensive Medical Assessment prior to providing a clearance to return to work. The MRO will request that a Comprehensive Clinical Assessment be undertaken by appropriately qualified alcohol and other drug professionals and interview the person concerned at his discretion in order to make the appropriate determination. The individual concerned will be unable to return to work until the MRO has provided a clearance. (See Section 10)

8.4 INTERVENTION PROGRAM

NQA will permit an employee to utilise flexible leave arrangements and have reasonable time to attend a nominated drug or alcohol intervention program or advisory service (APPENDIX 7), if:

- The MRO has advised NQA that the employee must attend the program; and/or
- The employee has requested assistance to attend as a result of self testing.

9. SELF-REFERRAL

NQA employees are encouraged to recognise problematic use of substances and to obtain the help they need.

Any employee, who seeks assistance from their Manager or from the NQA Employee Assistance Program (EAP), will be afforded all necessary help. The matter will be treated in the strictest confidence.

Personnel seeking assistance from NQA management will be offered that assistance by way of counselling or other treatment/rehabilitation program. They may be provided with flexible leave arrangements in order to complete any treatment/rehabilitation program.

10. ROLE OF THE MEDICAL REVIEW OFFICER (MRO)

The appointment of an MRO is a CASA requirement.

10.1 WHO IS AN MRO?

A Medical Review Officer is a medical practitioner that has:

- Competence in the field of interpreting drug and alcohol test results; and
- Knowledge of substance use disorders; and
- Knowledge of the contents of relevant standards and regulations.
- Holds current registration from CASA as an MRO

10.2 WHAT IS THE ROLE OF AN MRO?

As per CASR Part 99, NQA will consult a MRO in the following circumstances:

- If an alcohol or other drug test returns a positive test result for an employee of NQA - **to determine if test result could be the result of legitimate therapeutic treatment or some other innocuous source.**
- To review medical information concerning a person's failure to give a body sample for alcohol and other drug testing because of a claimed medical condition.
- To conduct a Comprehensive Medical Assessment to determine if the employee is fit to resume performing or being available to perform duties after an alcohol or other drug testing related incident. Part of the Comprehensive Medical Assessment process will include the completion of a Comprehensive Clinical Assessment by an appropriately qualified clinician.
- NQA has appointed local registered medical practitioners who, in conjunction with the Alcohol, Tobacco and Other Drugs Service will undertake Comprehensive Clinical Assessments as required (see APPENDIX 6).
- Referral for MRO Services see Appendix 8

11. DISCIPLINARY ACTION

While NQA will consult an appropriately qualified AOD professional in an effort to assist the person overcome AOD issues, NQA however reserves the right to initiate disciplinary action if required.

Should a positive result for alcohol or other drugs be recorded by a NQA employee performing or being available to perform their duties, then actions in accordance with provisions of the relevant Collective Agreements will be undertaken e.g.:

- Grievance Process – Cairns Airport Enterprise Agreement 2015 – Part 13 and
Mackay Airport Enterprise Agreement 2015 – Part 12
- Warning/Counselling Process. Cairns Airport Enterprise Agreement 2015 – Part 15 and
- Mackay Airport Enterprise Agreement 2015 – Part 13

NOTE: Where stand down provisions are enacted, an employee will utilise accrued leave including sick leave and annual leave, or leave without pay when necessary.

Where an individual is not covered by this Collective Agreement, NQA will refer them to their own Employer for action. NQA will not permit the individual to resume SSAA duties until satisfied that the action taken by their employer is consistent with that enforced by NQA for their staff.

12. PRIVACY

The NQA DAMP is consistent with the requirements of the *Privacy Act 1988* and NQA will comply with any obligations it may have under that Act in the handling of personal information collected under the program.

13. REVIEW, AUDIT AND COMPLIANCE

NQA will review this program annually or as directed by CASA, or due to legislative changes or response to any grievance or dispute.

To ensure the appropriate development, implementation and enforcement of the NQA program, CASA may audit NQA and require it to provide relevant documentation.

14. PROVISION OF INFORMATION AND RECORD KEEPING

14.1 CASA DAMP REPORTING

The information reported to CASA will be consistent with the requirements of CASR Part 099 including where specifically requested by CASA, NQA will supply information about the identity of a DAMP employee to a CASA approved tester within one hour of such a request being made.

14.2 RECORD KEEPING

NQA will keep all relevant records pertaining to this DAMP for a period of five (5) years. This information will be kept in a secure location.

Within six (6) months after expiry of the five (5) year record keeping period, NQA will ensure such records are destroyed or deleted.

NQA contractors are required to similarly keep records for all contractor staff deployed in SSAA roles.

15. VARIATIONS

NQA may at any time be required by CASA to make specific changes to this program, or to prepare a new program, to ensure ongoing compliance with the CASR's.

NQA may also implement variations or amendments to this program to ensure compliance in regards to other non-aviation specific legislation.

Controlled documents are kept on the NQA Internet and any major changes concerning NQA employees will be advised to team members via staff newsletters, toolbox talks etc.

16. FUNCTIONS

16.1 WORKPLACE FUNCTIONS

On rare occasions certain functions may occur in NQA workplaces where it is deemed appropriate to allow controlled limited consumption of alcohol. Such controlled consumption at NQA workplaces must be approved by the Chief Executive Officer (CEO). Approval will only be given if:

- The function is organised and conducted by NQA;
- Food is provided, along with low alcohol and non-alcoholic beverages. The quantity and nature of food, low alcohol and non-alcoholic beverages supplied will be determined by the CEO;
- Start and finish times are nominated and strictly adhered to;
- The area in which the function is occurring is clearly defined and controlled;
- Those requiring a BAC of zero do not consume alcohol if required to work during or immediately after the event;
- NQA owned and calibrated breathalysers to be readily available for 'self testing';
- One or more Employees are nominated as the person/s responsible for ensuring that the above conditions are followed;
- Acceptable standards of behaviour are applied and attendees leave in a safe and timely manner.

NOTE: EMPLOYEES ARE RESPONSIBLE FOR GETTING TO AND FROM THE EVENT IN AN SAFE AND LEGAL MANNER AT THEIR OWN EXPENSE.

16.2 EXTERNAL WORK RELATED FUNCTIONS

Employees are expected to conduct themselves in accordance with this policy and the NQA Code of Employee Conduct when representing NQA at external functions.

APPENDIX 1 see SharePoint – NQA Forms – Safety

DAMP SUPERVISOR ASSESSMENT CHECKLIST

(PLEASE TICK)

☐ SERIOUS INCIDENT/ACCIDENT

☐ REASONABLE SUSPICION

A serious incident or accident has occurred and/or the Supervisor has reason to believe an Employee is 'under the influence' of alcohol and/or drugs.

Employee being assessed:

Date and time of assessment:

Supervisor making the assessment:

	Yes	No
1. Did the incident involve operation of plant		
2. Has an injury occurred		
3. Was medical treatment required		
4. Damage to plant/equipment (estimated repair costs > \$2,000)		
5. Were external agencies required (e.g. Police, ATSB, WHSQ)		
6. Slurred speech		
7. Alcohol smell on breath		
8. Comments from colleagues		
9. Abnormal reflexes/ behaviour (for that person)		
10. Admission to being under the influence		
11. In possession of alcohol		
12. In the possession of illegal drugs and/or drug paraphernalia		
13. Work performance below normal		
14. Other reason/s		

DAMP SUPERVISOR ACTIONS

Prior to commencing interview Supervisor must inform Employee or their right to have an independent Employee representative present. Supervisor may elect to put TDDA's mobile service on standby to attend.

	Yes	No
1. Situation discussed with employee		
2. Employee stood down		
3. External testing requested - this may include requesting TDDA's mobile service to attend site		
4. Employee consent obtained		
5. Complete Authorisation Form to conduct tests		
6. Complete Referral and Chain of Custody Form		
7. Forms given to Escort		

EMPLOYEE ACKNOWLEDGEMENT

My Supervisor has fully explained his/her concerns to me and I consent/do not consent (*cross out which is not applicable*) to alcohol and drug testing.

Employee signature:

Supervisor signature:

Date and time:

NOTE:

Refusal will result in suspension from duty and down provisions being applied.

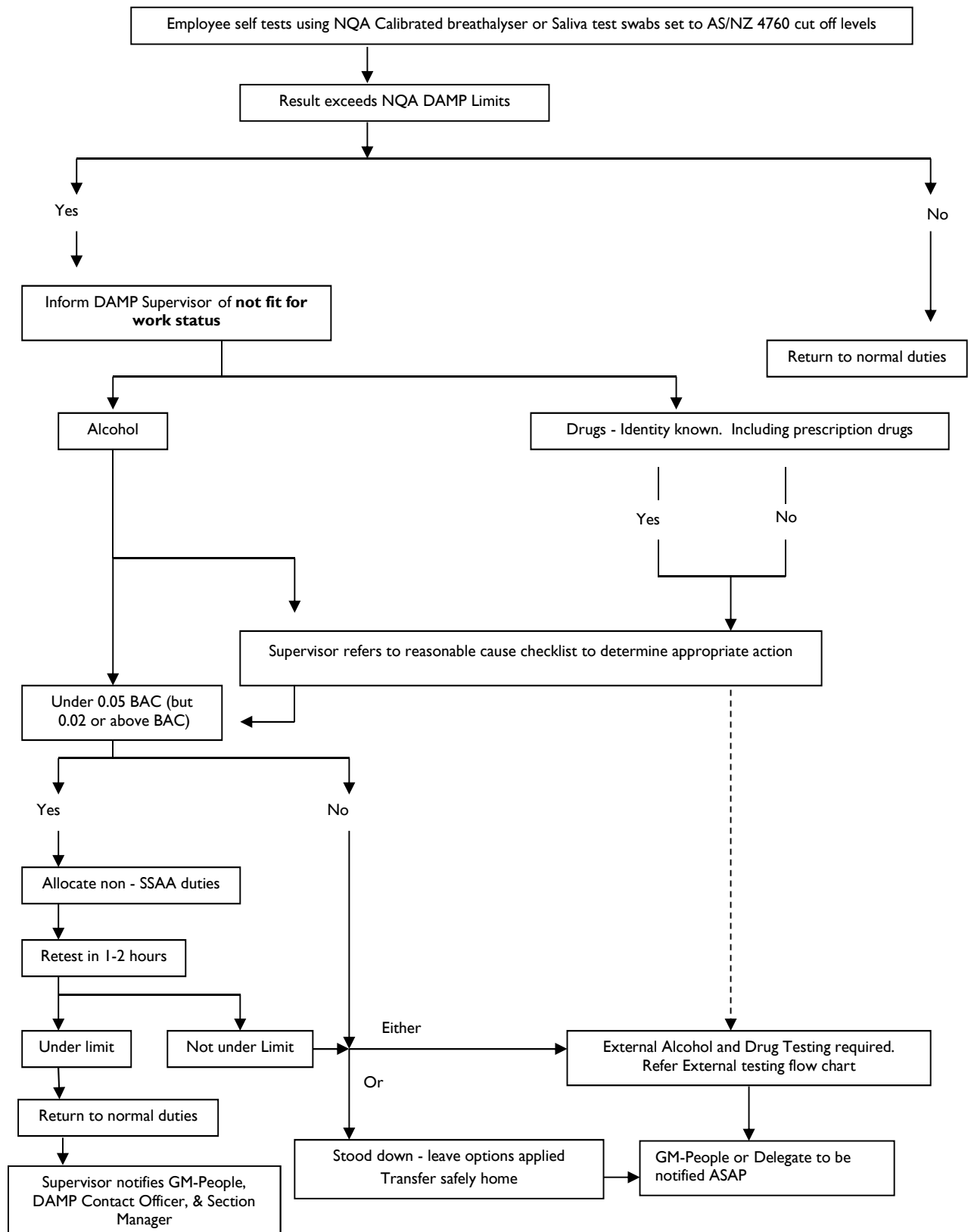
Supervisor must clearly document situation and forward checklist to GMPCC.

The Employee must not be permitted to drive themselves to the nominated testing location (or drive themselves home in the event of a positive test result).

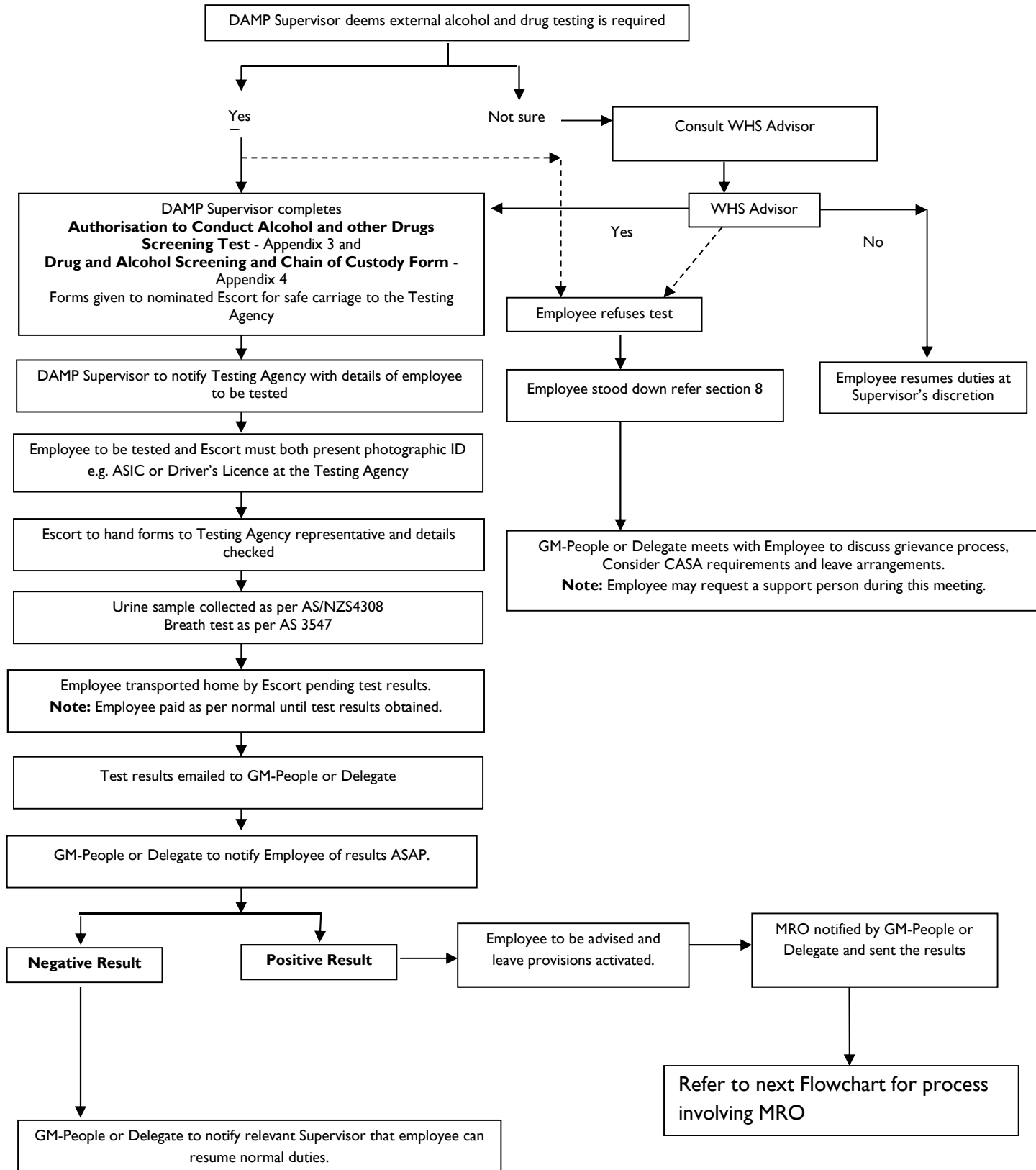
APPENDIX 2

FLOW CHARTS TESTING PROCESS

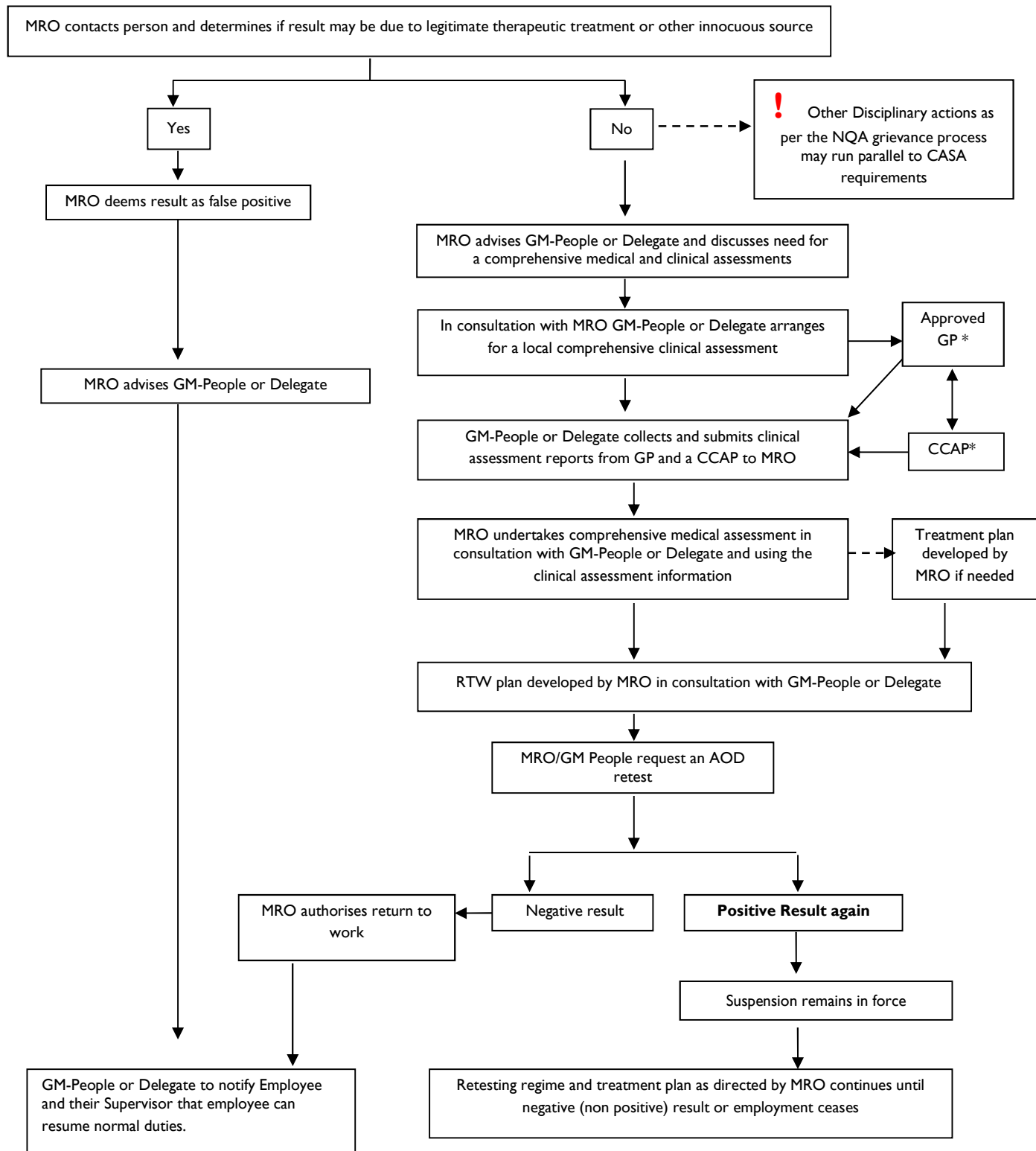
VOLUNTARY ALCOHOL AND DRUG TESTING IN THE WORKPLACE



EXTERNAL ALCOHOL AND DRUG TESTING



PROCESS INVOLVING MRO



* MRO, GP, OR CCAP MAY REQUEST AOD RETESTING AT ANY STAGE TO CLARIFY CONCERNS OR ANOMALIES .

MRO = Medical Review Officer, GP = Registered General Practitioner CCAP =Comprehensive Clinical Assessment Provider (such as ATODS) ATODS = Alcohol Tobacco and other Drug Service

APPENDIX 3 - see SharePoint – NQA Forms - Safety

AUTHORISATION TO CONDUCT ALCOHOL AND OTHER DRUGS SCREENING TESTS

(To be accompanied by DRUG AND ALCOHOL SCREENING REQUEST AND CHAIN OF CUSTODY FORM)

Date: _____

CAIRNS (preferred)

The Drug Detection Agency
268B Mulgrave Rd,
WESTCOURT 4870
Brendon Keevers
Brendon.keevers@tdda.com
0477 981 880
(07) 40414455

CAIRNS (backup)

QML Pathology
Laboratories
Corner Florence and
Grafton Streets
CAIRNS QLD 4870
(07) 4046 1505

MACKAY

CQR Health
4 Heidi Street
PAGET 4740
Jennifer Townley
Jennifer.townley@cqrhealth.com
(07) 49985232

MACKAY (out of hours backup)

CFT Security
Jim Cusack
cftmky@bigpond.net.au
0419 757 117

Name: _____

Date of Birth: ____/____/____

Address: _____

The above-named employee is required to undertake alcohol and drugs of abuse tests in accordance with AS/NZS 4308 and AS 3547. Please note: At Cairns Airport/Mackay Airport the permissible level for alcohol is a BAC reading of less than 0.02. For drugs of abuse, a permissible level is less than the confirmatory target for that drug specified in AS4760-2006.

Please conduct appropriate screening tests, which may include obtaining a sample of the above named employee's urine.

Cairns Airport Pty Ltd/Mackay Airport Pty Ltd will pay for the above-mentioned tests upon receipt of a tax invoice forwarded to the address below. All results for either airport are to be forwarded by email or post as soon as possible and addressed to: Cairns Airport Pty Ltd marked **Confidential and Urgent for the Attention: General Manager People, Communications & Compliance**.

NOTE: If any of the tests reveal additional health issues to the matters being requested, please advise the employee directly but do not include this information in the report to CAPL /MAPL

Supervisor Signature _____ Date ____/____/____

Supervisor Name _____ Phone _____

I, _____ consent to participate in the alcohol and/or drug screening tests outlined above and authorise the testing laboratory to reveal the results as requested.


Employee Signature: _____ Date ____/____/____

Employee Name: _____

Nerida Mitchell Cairns Airport Pty Ltd PO Box 57 AAC, Cairns Airport CAIRNS QLD 4870 Mobile: - 0408 189 610 Facsimile: (07) 4080 6704	Rob Porter Mackay Airport Pty Ltd PO Box 5806 MACKAY MC QLD 4741 Mobile: - 0417 048 295 Facsimile: (07) 4953 1929
--	--

APPENDIX 4

TDDA DRUG AND ALCOHOL SCREENING REQUEST FORM





SEAL NO	THE DRUG DETECTION AGENCY DRUGS OF ABUSE TESTING REQUEST/CONSENT FORM – TDDA 1.1			CLIENT ID NO QLD 34743																																				
FAMILY NAME	FIRST NAME	SEX <input type="checkbox"/> M <input type="checkbox"/> F	CLIENT CODE	DIV/SUB																																				
DATE OF BIRTH	IDENTIFICATION DETAILS	COLLECTION ONLY <input type="checkbox"/>	REPORT TO																																					
MEDICATIONS (To keep the details of your medications private, advise the collector) TYPE/WHEN																																								
COLLECTION SITE		TESTING VEHICLE REGO																																						
POC DEVICE <input type="checkbox"/> Urine <input type="checkbox"/> Oral Fluid Oral Fluid Device Used:	Lot No Expiry Date	ALCOHOL BREATH SCREEN Device Serial No Calibration Date																																						
REASON FOR TESTING																																								
<input type="checkbox"/> PRE EMPLOYMENT <input type="checkbox"/> POST INCIDENT <input type="checkbox"/> RE TEST <input type="checkbox"/> SECONDARY SCREEN <input type="checkbox"/> RANDOM <input type="checkbox"/> REASONABLE GROUNDS TO BELIEVE <input type="checkbox"/> VOLUNTARY <input type="checkbox"/> RANDOM REHAB																																								
INFORMED CONSENT: COLLECTOR TO READ AND EXPLAIN IN LANGUAGE UNDERSTOOD BY DONOR I consent to undergo a drug test(s) and/or breath alcohol test, to be undertaken by The Drug Detection Agency (TDDA). I acknowledge this is for the purpose of determining whether I have ever used an illicit drug(s) or any misused prescribed drugs, or legal designer drug(s) present in my urine and/or oral fluid, or determining whether I have any level of alcohol in my breath. Results of the drug test(s) and/or breath alcohol test will only be used for the purposes for which it was obtained, as set out in my employer's Drug and Alcohol Policy. I undertake to advise the nominated collector conducting the test(s) of any medication that I am taking. I also certify that I will not adulterate or attempt to cheat either of the tests and that the information provided on this form is true and correct with proof of identity. I understand that a refusal to sign this form and undergo a drug test(s) and/or breath alcohol test may be regarded as serious misconduct and in the absence of a reasonable explanation, may result in disciplinary action or any offer of employment withdrawn. I consent to the results of the drug and/or alcohol test(s) being communicated confidentially to my employer/prospective employer/employer's authorised personnel, and any client/customer of my employer/prospective employer who requests that such results be provided to them. I have read and had explained to me and understand the terms of this consent form. I understand that the white – employer's copy is not an interim report but merely notes of collector's observations. Donor _____ Date _____ Time _____																																								
TIME SAMPLE TAKEN	VISUAL CHECK <input type="checkbox"/>	TEMP READ WITHIN 4 MINUTES	YES <input type="checkbox"/> NO <input type="checkbox"/>	WITHIN RANGE YES <input type="checkbox"/> NO <input type="checkbox"/> 33-38 TEMP _____																																				
BREATH SCREEN RESULTS INITIAL READING Time _____ Reading _____ Negative <input type="checkbox"/> Detected <input type="checkbox"/>		ADULTERANT SCREEN <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Value</th> <th>Normal</th> <th>Abnormal</th> </tr> </thead> <tbody> <tr><td>CRE</td><td><input type="text"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>NI</td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>PH</td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>BL</td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>SG</td><td></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>				Value	Normal	Abnormal	CRE	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	NI		<input type="checkbox"/>	<input type="checkbox"/>	PH		<input type="checkbox"/>	<input type="checkbox"/>	BL		<input type="checkbox"/>	<input type="checkbox"/>	SG		<input type="checkbox"/>	<input type="checkbox"/>												
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		DRUG SCREEN <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Neg</th> <th>Requires further analysis</th> <th>Not Tested</th> </tr> </thead> <tbody> <tr><td>AMP</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>BZO</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>COC</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>MAMP</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>OPI</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>THC</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>SYN CAN</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td>OTHER</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </tbody> </table>				Neg	Requires further analysis	Not Tested	AMP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BZO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	COC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MAMP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OPI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	THC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SYN CAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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THC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																					
SYN CAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																					
OTHER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																					
		Lot No _____ Expiry _____																																						
I certify that the donor's identification has been positively verified by the means on this form and that the specimen referred to on this form is the specimen collected from the donor in compliance with AS/NZS 4308:2008, and Appendix A, if applicable or AS 4760:2006 (Section 2). Collector (Print) _____ Collectors Signature _____ Date _____																																								

TDDA conducts on-site screening, specimen collection, storage, handling and dispatch in accordance with Section 2 and Appendix A for onsite procedure per AS/NZS 4308:2008 and Section 2 for specimen collection storage, handling and dispatch for oral fluid per AS 4760:2006. Synthetic cannabis and oral fluid on site testing are not covered by this standard

CQR HEALTH DRUG AND ALCOHOL SCREENING REQUEST FORM

15751


Accreditation No.: 18233

CHAIN-OF-CUSTODY/REQUEST FORM FOR URINE/ORAL FLUID ANALYSIS

DONOR INFORMATION				REQUESTING AUTHORITY			
SURNAME:				NOMINATED REPRESENTATIVE:			
GIVEN NAME:				COMPANY:			
DOB: / /		Male: <input type="checkbox"/> Female: <input type="checkbox"/>		POSITION:			
ID#:				PHONE:		FAX:	
Email:				EMAIL:			
ADDRESS:				PURCHASE ORDER #:			
IDENTITY OF DONOR VERIFIED BY:				SPECIFY DRUGS REQUIRING TESTING:			
Photo ID: <input type="checkbox"/> Other: <input type="checkbox"/>				Alcohol <input type="checkbox"/> Amphetamines <input type="checkbox"/> Opiates <input type="checkbox"/> Benzodiazepine <input type="checkbox"/>			
ID Type:		ID Number:		Methamphetamine <input type="checkbox"/> Cocaine <input type="checkbox"/> THC <input type="checkbox"/>			

DONOR CERTIFICATION/CONSENT (to be completed by donor or parent/guardian)

I consent to the testing of my breath/urine/oral fluid sample for alcohol/drugs. I certify that the breath/urine/oral fluid specimen accompanying this form is my own and was provided to me by the authorized collector. Further, I certify that for any on-site testing performed, such testing was carried out in my presence and that the information on the labels is correct. Also I certify that the containers were sealed with tamper-evident seals in my presence and that the information on the labels is correct. Also I certify that the information provided on this form is correct and consent to the release of all test results together with all relevant details on this form to the nominated representative of the requesting authority indicated above.

I declare that I have taken the following medication, drugs or other non-prescription agents: _____

Donor/Guardian Signature: _____ Date: _____

☐ I consent to my personal information being used for the purpose of receiving correspondence from CQR Health.

COLLECTOR CERTIFICATION

I certify that I witnessed the donor signature and that the specimen identified on this form was provided to me by the donor whose consent and certification appears above, bears the same identification as set forth above, and that the urine/oral fluid specimen has been collected, divided, labelled and sealed in accordance with the relevant Australian Standard.

Name of Collector: _____ Date and time of Collection: _____

Collector's Signature: _____ Collection Site: _____

Adulteration test:	OX	NIT	S.G.	GLUT	pH	CRE	Temperature: °C	Colour:
N= Normal ABN= Abnormal								

Comments: _____

TEST RESULTS

Initial Testing Device/Method: _____ Batch Number: _____ Expiry date: _____

Alcolmeter Serial #: _____

Control Responses	Positive-OK	YES/NO	Negative-OK	YES/NO
Drug/Drug Class:	Alcohol Breath Analysis	AMP (Amphetamine)	MOP (Opiates)	BZO (Benzodiazepine)
			MET (Methamphetamine)	COC (Cocaine)
				THC (Cannabis)
Initial Test Result:				
2nd Test Result				

Key: N = Negative RFT= Requires further testing

Name of Collector: _____ Certificate #: _____ Signature: _____

SCOPE OF ACCREDITATION: THIS FACILITY COMPLIES WITH THE REQUIREMENTS OF ISO 15189:2007
17. Drugs for toxicological purposes in urine to AS/NZS 4308: 2008 Section 2 Specimen collection, storage, handling and dispatch.

CHAIN-OF-CUSTODY

Received by (Print)	Signature	Date/Time Received	Seal Intact	Labels Match
			YES/NO	YES/NO
			YES/NO	YES/NO
			YES/NO	YES/NO

Revision Date: January 2015
Version: Number 8

Employer Copy (White)

PAGE PRINT

QML DRUG AND ALCOHOL SCREENING REQUEST AND CHAIN OF CUSTODY FORM



Specialist Diagnostic Services Pty Ltd (ABN 84 007 190 043) /a QML Pathology APA No. 000042
11 Riverview Place, Metroplex on Gateway, Murarrie, Qld, 4172. Ph (07) 3121 4945
*A complete list of Collection Centres may be found on reverse of form

PATIENT LAST NAME GIVEN NAMES

PATIENT ADDRESS

COMMERCIAL ACCOUNT -
DO NOT BULK BILL

OCCUPATIONAL
PATHOLOGY
REQUEST

SEX DATE OF BIRTH

FILE No.

TEL(HOME)

TEL(BUS)

POSTCODE

TESTS REQUESTED

Urine Drug Screen On Site iCup2

DS8 Urine Temp °C:

Pos Identification YES NO Type

Drug Test Group

Result (tick)

Adulterant Test Result (Tick)

MOR - Opiate

☐ Pos ☐ Neg

☐ Abnormal ☐ Normal

AMP - Amphetamine

☐ Pos ☐ Neg

☐ Abnormal ☐ Normal

COC - Cocaine

☐ Pos ☐ Neg

☐ Abnormal ☐ Normal

THC - Cannabis

☐ Pos ☐ Neg

☐ Abnormal ☐ Normal

MET - Methamphetamine

☐ Pos ☐ Neg

☐ Abnormal ☐ Normal

BZO - Benzodiazepines

☐ Pos ☐ Neg

Breath Alcohol TestResult

PLEASE ENSURE THAT PATIENT TAKES RESULTS WITH HIM

IF POSITIVE TO ANY OF THE DRUG CLASSES PLEASE CONTACT COMPANY BEFORE PROCEEDING TO DO GCMS TESTING

☐ STANDARD PRECAUTIONS

☐ PRIVATE & CONFIDENTIAL

☐ CUMULATIVE REPORT

Phone 40806703 - Nerida Mitchell for confirmation

URGENT

PHONE

FAX

BY TIME

PHONE/FAX No:

Bill Code: 2358

COMPANY DETAILS

CAIRNS AIRPORT PTY, LTD.
PO BOX 57 AIRPORT ADMIN
CENTRE
CAIRNS AIRPORT QLD 4870

COPY REPORTS TO:

REQUESTING DOCTOR, WORKPLACE HEALTH AND SAFETY OFFICER

Account to be sent to Janice Van Der Zwaan
C/- PO Box 57 Airport Admin Centre
Cairns Airport QLD 4870

Nerida Mitchell CCA1G
PO Box 57 Airport Admin Centre
CAIRNS AIRPORT 4870.

For further information regarding this account,
please contact QML Occupational Pathology Services
on (07) 3121 4945.

X

PATIENT'S SIGNATURE AND DATE

Collect Date	Coll. Time	Test Codes	Branch	Ref. No.	Lab. No.	Description & Containers	Collector
LU AS BE	Received Date Rec. Time		B/C CAI	Clinic 2358 654			



Specialist Diagnostic Services Pty Ltd (ABN 84 007 190 043) /a QML Pathology APA No. 000042
11 Riverview Place, Metroplex on Gateway, Murarrie, Qld, 4172. Ph (07) 3121 4945
*A complete list of Collection Centres may be found on reverse of form

PATIENT LAST NAME GIVEN NAMES

SEX DATE OF BIRTH

FILE No.

PATIENT ADDRESS

POSTCODE

TEL(HOME)

TEL(BUS)

TESTS REQUESTED

IF POSITIVE TO ANY OF THE DRUG CLASSES CONTACT COMPANY BEFORE PROCEEDING TO DO GCMS TESTING RING "Nerida Mitchell" 07 4080 6703 FOR CONFIRMATION.

Urine Drug Screen On iCup2

DS8

Urine Temp °C:

REQUESTING DOCTOR, WORKPLACE HEALTH AND SAFETY OFFICER

Drug Test Group

Result (tick)

Adulterant (Tick)

MOR - Opiate

☐ Pos ☐ Neg

Ph ☐ Abn ☐ Norm

AMP - Amphetamine

☐ Pos ☐ Neg

Cr ☐ Abn ☐ Norm

COC - Cocaine

☐ Pos ☐ Neg

Ox ☐ Abn ☐ Norm

THC - Cannabis

☐ Pos ☐ Neg

BZO - Benzo

☐ Pos ☐ Neg

MET - Methamp

☐ Pos ☐ Neg

QML Pathology.
Specialist Diagnostic Services Pty Ltd (ABN 60 627 627 627)
1 Hiverview Place, Mooloolah on Gateway, Mooloolah, Qld 4702 Ph (07) 3121 4945

COMMERCIAL ACCOUNT - DO NOT BULK BILL

OCCUPATIONAL PATHOLOGY REQUEST

PATIENT LAST NAME: TAKER, NADINE SEX: F DATE OF BIRTH: 19/01/1971 FILE NO: 10000000000000000000

PATIENT ADDRESS: 10000000000000000000 POSTCODE: 4702 TEL: 0800 55 55 55 TELBUS: 10000000000000000000

TESTS REQUESTED:
Att Employee: Attend QML Clinic listed over page. Phone clinic before attending. BRING PHOTO ID.
QML Please Perform: Level 3 Supervision
• Instant Urine Drug Screen DS8
• Instant Breath Alcohol BET
• Record Urine Temperature: 37.0°C

CLINICAL NOTES & INSTRUCTIONS:
"If a non-negative result occurs, please phone Penny Gillespie on 0481 446 883. for permission to proceed. GCMS confirmation"

☐ STANDARD PRECAUTIONS ☐ FURTHER & CONFIDENTIAL ☐ QUALITATIVE REPORT

URGENT ☐ PHONE ☐ FAX ☐ EMAIL

PROXY CODE: 2885

COMPANY DETAILS
CAIRNS AIRPORT PTY LTD
PO Box 57 Airport Admin Centre
Cairns Airport QLD 4870

REQUESTING DOCTOR: INTERNAL USE ONLY (FOR QUALITY CONTROL)
Nerida Mitchell
PO Box 57 Airport Admin Centre
Cairns Airport QLD 4870

CCRY REPORTS TO: REQUESTING DOCTOR: INTERNAL USE ONLY (FOR QUALITY CONTROL)

For further information regarding this account, please contact QML Occupational Pathology Services on (07) 3121 4945.

PATIENT'S SIGNATURE AND DATE: _____

Collector Code	Collector Name	Test Codes	Phone	Alt. No.	Lab. No.	Signature & Date	Collector
100	10000000000000000000	10000000000000000000	2885	0702			

QML Pathology.
Specialist Diagnostic Services Pty Ltd (ABN 60 627 627 627)
1 Hiverview Place, Mooloolah on Gateway, Mooloolah, Qld 4702 Ph (07) 3121 4945
www.qmlpathology.com.au

PATIENT LAST NAME: TAKER, NADINE SEX: F DATE OF BIRTH: 19/01/1971 FILE NO: 10000000000000000000

PATIENT ADDRESS: 10000000000000000000 POSTCODE: 4702 TEL: 0800 55 55 55 TELBUS: 10000000000000000000

TESTS REQUESTED:
Att Employee: Attend QML Clinic listed over page. Phone clinic before attending. BRING PHOTO ID.
QML Please Perform: Level 3 Supervision
• Instant Urine Drug Screen DS8
• Instant Breath Alcohol BET
• Record Urine Temperature: 37.0°C

REQUESTING DOCTOR: INTERNAL USE ONLY (FOR QUALITY CONTROL)
Nerida Mitchell
PO Box 57 Airport Admin Centre
Cairns Airport QLD 4870

807712 PUB/MP/055, version 1.0 (Jan 11)

APPENDIX 5

LOCATION OF BREATHALYSERS AT CAIRNS AIRPORT

MODEL	LOCATION
Alcolizer HHI S/N 374537	Airport Safety Officers Office
Alcolizer HHI S/N 331185	Technical Services- Assets Office
Alcolizer HHI S/N 331184	Maintenance -Assets Office
Alcolizer HHI S/N 374554	Health and Safety Advisor

- Send to NQA Health and Safety Advisor when calibration is due

LOCATION OF BREATHALYSERS AT MACKAY AIRPORT

MODEL	LOCATION
Alcolizer HHI S/N 396874	Office / Admin
Alcolizer HHI S/N 396875	Maintenance Compound Office

NOTE:

- Testers to be recalibrated to AS 3547:1997 every six (6) months.
- Send to Aviation Regulatory Compliance coordinator when calibration is due.

APPENDIX 6

DESIGNATED DAMP PERSONNEL AND SUPPORT ORGANISATIONS

DAMP Contact Person 1 (Cairns) is **Nerida Mitchell**

Mob: 0408 189 610

Email: nerida.mitchell@cairnsairport.com.au

DAMP Contact Person 2 (Cairns) is **Janice van der Zwaan**

Mob: 0448 954 419

Email: janicevanderzwaan@cairnsairport.com.au

DAMP Contact Person 1 (Mackay) is **Nerida Mitchell**

Mob: 0408 189 610

Email: nerida.mitchell@cairnsairport.com.au

DAMP Contact Person 2 (Mackay) is **Rob Porter**

Mob: 0417 048 295

Email: rob.porter@mackayairport.com

DAMP Supervisors CAIRNS

Terminals Cairns

Alicia Prince	Mob 0417 634 353
Oni Marin	Mob: 0437 529 769
Luke Palmer	Mob: 0437 529 769
Vicky Briscoe	Mob: 0403 758 296
Meleana Krombholz	Mob: 0437 529 769
Scott Robinson	Mob: 0418 197 387
Ben Rodda	Mob: 0418 197 387

Assets / Maintenance - Cairns

Brent Davis	Mob: 0412 059 438
Stephen Roy	Mob: 0438 590 354

Airport Operations - Cairns

Colin Evans	Mob: 0400 508 097
Rob Keegan	Mob: 0428 783 367

DAMP Supervisors – MACKAY

Aviation Operations - Mackay

Phil Clark	Mob: 0407 570 208
Jason Horton	Mob: 0418 570 232

Terminals – Mackay

Adrian Miles	Mob 0401 565 396
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Airport Assets – Mackay

Adrian Miles	Mob 0401 565 396
Lyle Moss	Mob 0413 153 750

DAMP Supervisors NQA (covering both CAIRNS & MACKAY)

Assets/Projects – Cairns & Mackay

Jeff McEachern	Mob: 0438 797 336
Floyd de Kruijff	Mob: 0409 149 337
Andy Naylor	Mob: 0429 670 062
Paul Chenard	Mob: 0408 529 735
Steve Willis	Mob: 0417 631 881

Assets & Technical Services – Cairns & Mackay

Wayne Nash	Mob: 0438 840 436
Cliff Golding	Mob: 0427 302 769

Security - Cairns & Mackay

Tony Shephard	Mob: 0427 929 632
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Testing Agencies

Cairns

The Drug Detection Agency (TDDA)

268B Mulgrave Road,

WESTCOURT QLD 4870

Ph (07) 4041 4455

Brendon Keevers

Brendon.keevers@tadda.com.au

0477 981 880

Pre employment / Random / Post incident

QML Pathology

Corner Florence and Grafton Streets

CAIRNS QLD 4870

Ph: (07) 4046 1505

Pre employment (Back Up only)

Mackay

CQR Health

4 Heidi St

PAGET QLD 4740

Ph: (07) 4998 5232

Jennifer Townley

Jennifer.townley@cqrhealth.com

**Pre employment / Random / Post incident
during normal hours**

CFT Security

Jim Cusack

cftsecurity@bigpond.net.au

0419 757 117

**Back up Post incident/out of
hours**

Medical Review Officer (MRO for both Cairns and Mackay),

Dr Alex Lapenga (Synergy Occupational
Medicine)

c/- Smithfield Central Doctors 11/7-11 Mt
Millman Drive

Smithfield QLD 4878

Mobile:- 0407 339 599 (direct)

Smithfield Central Doctors

Telephone:- (07) 40 468 600

1Fax:- (07) 40 468 699

Email:- alex@synergymedicine.com.au

Or info@cairnshealth.com.au

Company Doctors**Cairns**

Barrier Reef Medical Centre *

356 McLeod St, CAIRNS QLD 4870

Telephone: (07) 4051 6299

* Comprehensive Clinical Assessments –

Dr Ian Bennett

Mackay

Caneland Medical Centre

2 Mangrove Rd

MACKAY QLD 4740

Telephone: (07) 4953 4333

Occupational Health Mackay

Palmer St

North Mackay 4740

Telephone (07) 4957 4724

Support Organisations

Employee Assistance Program (Acacia
Connection 1300 364 273

Queensland Alcohol and Drug Information
Service

Telephone: (07) 3236 2414 or 1800 177
833

Alcohol, Tobacco and Other Drugs Service*

31 Shields St, CAIRNS QLD 4870

Telephone: (07) 4050 3900

Alcohol, Tobacco and Other Drugs Service*

18 Nelson St, MACKAY QLD 4740

Telephone: (07) 4968 3858

* Comprehensive Clinical Assessments

APPENDIX 7

REFERRAL FORM FOR PRE-EMPLOYMENT / DEPLOYMENT TESTING



- | | |
|---|--|
| <p>1. The Drug Detection Agency
2688 Mulgrave Road
Westcourt
CAIRNS QLD 4870 Phone: 4041 4455
MOB: 0477 981 880</p> | <p>2. QML Pathology
11A Gas Works Shopping Centre
137 Shakespeare St.
MACKAY QLD 4740 Phone: 4957 4061</p> |
|---|--|

SERVICE REQUEST - PRE-EMPLOYMENT / DEPLOYMENT ALCOHOL AND OTHER DRUG SCREENING

Please conduct screening in accordance with Civil Aviation Safety Regulation (CASR) Part 99 - Drug and Alcohol Management Plans and Testing on:

Name: (person being tested)	
Address: (home)	
Phone:	

The screening test is required to cover:

- | | |
|------------|---------------------------------------|
| • Alcohol | • Amphetamines (speed, ice, ecstasy) |
| • Cannabis | • Opioids (heroin, morphine, codeine) |
| • Cocaine | • Benzodiazepines |

(Tick boxes) as required

- ☒ Instant Urine Drug Screen and a Breath Alcohol Test
☐ Oral Drug Screen Testing and a Breath Alcohol Test

Testing Agency to complete (Please check & tick boxes) as required	
Photographic ID	<input type="checkbox"/> Drivers Licence / Other :
Verbal Test Results	<input type="checkbox"/> Given results to person on completion of test
Written Test Results	<input type="checkbox"/> Available for collection next day / Other : <input type="checkbox"/> Request made to fax / post / email results

Please send all results and invoice to: Nerida Mitchell, Mackay Airport Pty Ltd / Cairns Airport Pty Ltd,
PO Box 57 AAC, Cairns Airport QLD 4870 (via Facsimile: 4080 6704)

Yours faithfully



Nerida Mitchell
GENERAL MANAGER - PEOPLE COMMUNICATIONS & COMPLIANCE

Phone: 0408 189 610
Fax: (07) 4080 6704

APPENDIX 8

REFERRAL FOR MEDICAL REVIEW OFFICER SERVICES

Please provide Medical Review Officer (MRO) Services as per the Civil Aviation Safety Regulation Part 99 for the following employee. Drug and Alcohol Screening pathology results are attached.

MRO Doctor ALEX LAPENGA, Synergy Occupational Medicine
 DAMP Supervisor Name: _____ Mobile: _____
 NQA DAMP Contact Officer: _____ Mobile: _____
 Signature _____ Date _____

SSAA employee

Surname	Given name(s):	
Date of birth:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Address		
Suburb	Post Code	
Daytime Phone:	Position:	
Mobile:		

Consent:-

- I understand that my nominated employers MRO may contact me to discuss my drug and or alcohol screen results.
- I understand that the purpose of this review is to determine if there are any legitimate therapeutic drugs which have registered a positive drug screen result or other innocuous source.
- I consent to the MRO discussing with and providing results to my employer including information provided by me during the telephone consultation.

Signature of Examinee _____ Date: _____

Please scan and email to your MRO alex@synergymedicine.com.au
[Contact mobile: 0407 339 599](tel:0407339599)
[Refer to DAMP for other contact details](#)

(Admin use only)

MRO:	<input type="checkbox"/>	Received results
	<input type="checkbox"/>	Contacted employee
	<input type="checkbox"/>	Contacted employer
Dispatch:	<input type="checkbox"/>	Send result and invoice via email to (Nerida. Mitchell@cairnsairport.com.au)
	<input type="checkbox"/>	File in clinic
Admin:	<input type="checkbox"/>	Confirmed that results sent
	<input type="checkbox"/>	Billed
	<input type="checkbox"/>	Files

Special Instructions:-

APPENDIX 9

SIGN OFF ACCEPTANCE AND COMPLIANCE FOR NEW EMPLOYEES

I (insert name) confirm that:

- I have been given a copy of the NQA Drug and Alcohol Management Plan (DAMP) and that I have read it;
- I have also undertaken the associated training and agree to participate in any future training; and
- I am aware of my obligations under the DAMP and agree to comply accordingly.

Signed

.....

Date

.....

Detach this sheet and return to the HR Section for retention on your personnel file.