STEEL FABRICATION & MFG.
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Substance Abuse Program

September 4, 2019

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SECTION 1: General Substance Abuse Policy

It is the policy of Bish's to prohibit the unauthorized, possession, use or presence *of* or the sale, transfer, or being under the influence of drugs or alcohol on company property. This includes working after the apparent use of marijuana, regardless of marijuana's legal status.

A healthy and productive workforce safe working conditions free from the effects of drugs and alcohol, and the maintenance of the quality of our products are the utmost importance to the company and to all of us.

The abuse of drugs and alcohol causes increased injuries on the job, increased absenteeism, increased financial burden on health and benefit programs, increased workplace theft, decreased employee morale, decreased productivity, and a decline in the quality of products produced.

The following procedures set forth a fair and equitable testing program for drugs and alcohol in the work place. These procedures are hereby adopted for all company employees.

Procedure -Definitions

1. Alcohol - ethyl alcohol or ethanol.
2. Drug paraphernalia - including objects used to manufacture, compound, convert, produce, process, prepare, test, and analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce a drug into the human body.
3. Screen Tests - any test for drugs or alcohol utilizing testing of body fluids (blood, urine, hair, etc.) to detect a number of physical conditions, including the presence of drugs and/or alcohol. Qualitative tests determine the presence of drugs and/or alcohol; Quantitative tests determine the amount present.
4. Drugs - Any substance recognized as a drug in the United States Pharmacopoeia, the National Formulary, the Homeopathic Pharmacopoeia or other drug compendia, or supplement to any of these compendia.

Testing

Bish's reserves the right to conduct or require screen tests on any employee who is on company premises, engaged in company business, operating company equipment, or on applicants for employment, unless prohibited by applicable law.

Consequences of Test Refusal
1. Prospective employee: Refusal to give written consent for a drug screening test will terminate further action towards employment.
2. Employee: Refusal by an employee to submit to screen testing will be considered cause for discharge.

Screen-Testing will occur:

A. As part of an industrial accident investigation. Any employee involved in an industrial accident will be asked to submit to a drug screen.

B. As a result of a perceived change or observed impairment in job performance.

C. On any employee who is perceived to be under the influence of drugs or alcohol. The employee may be. removed from service and requested to undergo evaluation and appropriate-testing by medical personnel. Management may take disciplinary action on the basis of the medical information obtained. Refusal by the employee to undergo evaluation and testing will be considered cause for discharge. The personnel department is to be notified prior to any action being taken.

D. As part of pre-employment testing.

    a. Screen tests may be conducted as a regular part of the pre-employment examination for full-time and part-time applicants. Applicants may be asked at the time of application to agree to a physical examination and screen test. Refusal to give written consent will stop further action towards employment.

E. Random screen testing may be performed as part of a Reinstatement Agreement.

Positive Screen Test
A positive screen test shall mean either the presence of a drug or alcohol. Sample testing procedures shall conform to scientifically accepted analytical methods and procedures and shall include verification of confirmation of any positive test result by gas chromatography-mass spectroscopy or other comparably reliable analytical method, before the results of any test may be used as a basis for any action.

A. First Offense
When a screen test is positive for the 1st time but no evidence of drug or alcohol use on the job exists, the employee will be suspended without pay until all company required testing and treatment is completed. The employee will be required to obtain a written evaluation for drug abuse from a recognized professional and/or institution (at the employees' expense). If there is evidence of drug or alcohol use on the job, the employee may be disciplined or discharged and not be eligible for reinstatement.

B. Reinstatement

To be reinstated to a job, an employee must have a signed release from a doctor stating that they are fit for work. The employee must submit to another screen test and have a negative result within six weeks from the date they were suspended; otherwise, the employee will be discharged.

Before the employee returns to work, they will be required to sign a Condition of Reinstatement Agreement and random drug screening will be conducted for 1 year.

C. Second Offense

An employee who has been suspended for a positive drug test and allowed to return to work will be discharged for any subsequent positive drug screen.

SECTION 2: Guidelines for Supervisors (pages 6 & 7)
is for management and is not included in the employees copy of the program.

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CONDITION OF REINSTATEMENT

I understand that my reinstatement to employment by Bish's is conditioned upon and subject to my satisfactorily fulfilling the following terms:

1. Contacting the drug referral center, my personal physician, or a specialist of my choice for an evaluation at my expense. Obtaining a written drug or alcohol evaluation.
2. Securing a doctor's release to return to work or requesting a leave of absence for treatment. Regular medical leave of absence policies will be followed.
3. Following reinstatement, I hereby agree to submit to screen tests for drug or alcohol use on a periodic or random basis. ***If these tests show the presence of drugs or alcohol, I understand and agree that I shall be discharged immediately***.
4. I understand that upon my return to employment, I am required to meet all of Bish's established standards of conduct and job performance, and that I will be subject to disciplinary procedures for failure to meet such standards.
5. I understand that my failure to meet any of the above requirements will result in my immediate discharge.
6. Nothing contained herein shall be construed as a waiver of Bish's right to take normal disciplinary actions against me under existing policies and procedures for unsatisfactory work performance or misconduct. My use of or treatment for use of alcohol or controlled substances shall not constitute a mitigating circumstance.

Signed:

Employee Signature	Supervisor's Signature
Employee Printed Name	Date

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EMPLOYEE/APPLICANT CONSENT FORM

PHYSICAL EXAMINATION AND TEST
CONTROLLED SUBSTANCES (DRUGS) AND/OR ALCOHOL
(CONFIDENTIAL)

I hereby voluntarily consent to a physical examination and tests to be conducted by company designated physicians and/or other appropriate medical personnel contracted to perform this service by Bish's. I specifically voluntarily consent to the taking of samples of my blood, urine, hair, breath and other samples for testing to determine the presence of drugs and/or alcohol in my system.

I voluntarily authorize the release of medical information concerning the results of my physical examination and tests to company representatives who will use it to determine if I am in compliance with company work rules and policies on drugs and/or alcohol. I understand that I am entitled to a copy of this authorization. I also understand that refusal by me to sign this consent will be cause for discharge or ineligibility for employment. This authorization shall remain valid for a period of one year from the date shown below for new applicants, and at all times during the period of employment for existing employees.

Signed:

Employee Signature	Supervisor's Signature
Employee Printed Name	Date

EMPLOYEE/APPLICANT REFUSAL FORM

PHYSICAL EXAMINATION AND TEST
CONTROLLED SUBSTANCES (DRUGS) AND/OR ALCOHOL

I decline to authorize the company to perform a physical examination and tests for drugs and/or alcohol or the release of results to Company representatives. I understand that I am entitled to a copy of this refusal. I also understand that refusal by me to sign this consent will be cause for discharge or ineligibility for employment.

Signed:

Employee Signature	Supervisor's Signature
Employee Printed Name	Date