



City of Biddeford
Personnel Committee
September 16, 2025 at 4:00 PM
City Hall Council Chambers and Zoom

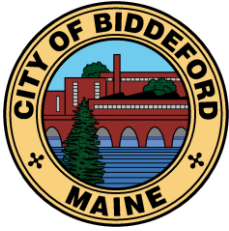
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Meeting ID: 966 9402 6998

Password: 449626

1. Call to Order
2. Approval of Minutes
 - 2.a June 26 2025 Personnel Committee Meeting Minutes
3. Discussion
 - 3.a WCSIP – Worker’s Compensation Safety Incentive Program Update
 - 3.b Substance Abuse Policy Update Brief
 - 3.b Substance Abuse Policy Update Red Line Version
 - 3.b Substance Abuse Policy Update 7.29.25
 - 3.c Request for RFP re: Wage Study Brief
 - 3.d Non-Union Employee Survey re: City Hall Hours Brief
 - 3.d City Hall Staff Work Schedule Survey 3rd Draft
4. Other Business
5. Adjourn



PERSONNEL COMMITTEE MEETING

June 26, 2025

2pm (Council Chambers & Zoom)

Meeting Minutes

ITEM 1 Call to Order

Committee Chair and Councilor William Emheiser called the meeting to order at 2:01PM with Councilors Scott Whiting and Norman Belanger also present. Councilor Doris Ortiz was absent and excused from this meeting. Also present were Diana DePaolo (Director of Human Resources), Daniel Hammond (Safety & Training Coordinator), Lynn Abbott (HR Specialist), Shelly Gibson (Deputy Director of HR, via zoom), and Sarah Hulbert (Administrative Assistant). Several other employees were also present.

ITEM 2 Approval of Minutes

Councilor Whiting made a motion to approve the minutes from March 18th, 2025. Councilor Belanger seconded the motion. The motion was approved unanimously.

Councilor Whiting made a motion to approve the minutes from May 20th, 2025. Councilor Belanger seconded the motion. There was one adjustment to the minutes regarding a word clarification. With that adjustment, the motion was approved unanimously.

A motion was made by Emheiser to adjust the order and start with 3.b.

ITEM 3 Discussion

3.b Non Union COLA FY26

Diana recommended a July 1 increase and the potential for a larger wage study, for the Personnel Committee to review first, including comparables. The brief includes the CPI, organizational considerations, and how to keep up with staff and municipal growth. Diana made a recommendation for 4% raises and spoke to the Acting City Manager prior to his vacation regarding this request. Diana explained that there is existing money in the budget and also in the Personnel Reserve, in addition to additional money that won't be used for FML given the City's choice to use a private plan.

This raise would not include seasonal employees but rather all 'regular' part-time employees.

Assistant Public Works Director, Joey Lovejoy shared his feedback, particularly in support of the 4-day work week. He also expressed frustration that he has more vacation than he is able to use and can't buy it back, while some of his subordinates that had access to that prior practice are able to do so. He expressed the lack of incentive with unlimited sick time, especially when it isn't used. He suggested that additional money be put into retirement as an alternative.

Chief Fisk expressed that vacation buyback is a real challenge as department heads can't take 6 weeks off but the union heads can which feels complicated.

Chief Best stated that Non-Union staff will be appreciative of an upcoming wage study because there are compression issues within the Fire Department that need to be addressed.

Mike Koerner stated that if the COLA is a cost-of-living increase, is it really considered a raise, without any attention to merit?

Councilor Belanger recommended the 4%, in addition to a wage study, and to look at the cost of vacation buyback. He asked the HR team to determine what cost that buyback could have for the City and any subsequent recommendations, in the interest of remaining competitive as an employer.

Councilor Emheiser agreed and said that a cost adjustment in the immediate term would be prudent, with a proper wage study to look at other potential increases to happen in the coming months.

Councilor Belanger made a motion to recommend the 4% COLA FY26 increase to the Council. Councilor Whiting seconded the motion. The motion passes unanimously.

It was stated that an additional \$27,000 would need to be found for the COLA's.

3.a Workplace Safety Policy

Daniel gave an update regarding our current policy in the Non-Union manual, stating it is brief and doesn't expand into other areas. This piece of workplace safety will build towards the third-tier compliance which saves the City substantial funds on workers' compensation. This draft was also shared with the City's Safety Committee and most of what is mentioned in it is already being done (and at times, even more). Regardless, Daniel wants to be sure the City has a baseline for expectations and training.

Director of Public Works Jeff Demers commented that these updates and accountability meetings have really helped his team. This sentiment was shared by other employees in the audience.

Councilor Belanger made a motion to approve the Workplace Safety Policy with a few edits (Page 4, seasonal issues, parking lots/snow and ice removal – should include all vehicles; taking out the zones about colors because they are too confusing; change policies to the order they are in the document), Councilor Whiting seconded the motion. The motion is approved unanimously.

ITEM 4 Other Business

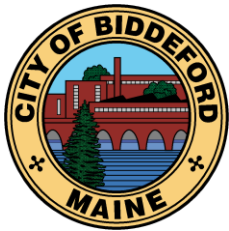
Councilor Emheiser asked Diana to prepare a proposal for the committee to review regarding the wage study, including a range of cost. It should also include information about merit-based increases, strengths, drawbacks, etc.

ITEM 5 Adjourn

Councilor Emheiser adjourned the meeting at 2:33 PM.

Personnel Committee Members:

Councilor William Emhiser, Chair
Councilor Norman Belanger
Councilor Doris Ortiz
Councilor Scott Whiting



CITY OF BIDDEFORD

205 Main St.
P.O. Box 586
Biddeford, Maine 04005

PERSONNEL COMMITTEE

Meeting Date: September 16, 2025
Meeting Time: 4:00 PM
Agenda Item No: 3.a
Item Description: Worker's Compensation Safety Incentive Program Update
Submitted by: Daniel Hammond, Safety & Training Coordinator

Key Terms:

WCSIP – Worker's Compensation Safety Incentive Program

Executive Summary:

The City of Biddeford Recently met requirements to enter the third tier of the Maine Municipal Associations WCSIP program. This will result in a 10% discount on the City's Worker's Compensation bill for the 2026 policy period.

Detailed Review:

Daniel Hammond has been working to get the City into tier 3 of the WCSIP program since he stepped into the Safety & Training Coordinator role in September of 2024. With the Personnel Committee's assistance and support over the past 6 months, new policies have been created and implemented regarding Incident Reviews and Workplace Safety. With these policies now in place the City has officially been verified to be complying will all the requirements for tier 3 of the WCSIP Program. This will result in a 10% discount on our Worker's Compensation bill for the 2026 policy period. The discount will remain in place for subsequent years if we continue to maintain compliance with all the requirements as identified below.

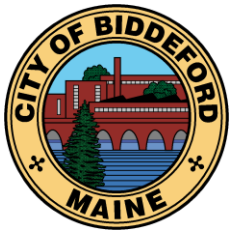
Verification Questions	TIER I	TIER II	TIER III
All departments are in compliance with the ME Dept. of Labor Bureau of Labor Standards: Safety Policies are in place Training is current for all staff Facility and equipment inspections have been completed	<input type="checkbox"/>		
Key personnel assigned safety responsibilities	<input type="checkbox"/>		
A process to communicate safety concerns to all employees is in place	<input type="checkbox"/>		
Leadership is aware of and reviews first report of injury, incidents and accidents	<input type="checkbox"/>		
A slip trip and fall safety policy is in place		<input type="checkbox"/>	
A lifting and back safety policy is in place		<input type="checkbox"/>	
An office ergonomics safety policy is in place		<input type="checkbox"/>	
A comprehensive PPE Program in place or Job Safety Analysis are completed		<input type="checkbox"/>	
Agrees to respond to MMA corrective action recommendations within 90 days		<input type="checkbox"/>	
A safety committee holds meetings at least quarterly and minutes are documented		<input type="checkbox"/>	
Annual administrative review of safety policies is documented		<input type="checkbox"/>	
Leadership attends/participates in Safety Committee meetings or Management reviews and signs off on Safety Committee minutes			<input type="checkbox"/>
Preferred providers are used			<input type="checkbox"/>
A written accident/incident review policy is in place			<input type="checkbox"/>
A wellness program or similar alternative is offered to employees			<input type="checkbox"/>
A return-to-work policy (light-duty) for all departments is in place			<input type="checkbox"/>

Funding Source:

N/A

Staff Recommendation:

N/A



CITY OF BIDDEFORD

205 Main St.
P.O. Box 586
Biddeford, Maine 04005

PERSONNEL COMMITTEE

Meeting Date: Tuesday, September 16, 2025
Meeting Time: 4pm
Agenda Item No: 3.b
Item Description: Substance Abuse Policy Update Brief
Submitted by: Daniel Hammond, Safety & Training Coordinator

Supporting Information/Documentation:

- Substance Abuse Policy Update Red Line Version
- Substance Abuse Policy Update 7.29.25

Key Terms:

CDL – Commercial Driver’s License
DOT – Department of Transportation

Executive Summary:

Updates to the City’s Substance Abuse Policy have been proposed to ensure the policy contains information required to demonstrate compliance with Department of Transportation regulations. The updated policy was recently included in the Public Works Supervisors’ contract. To ensure consistency in policy between union and non-union employees, the policy should also be updated in the Human Resources Policies Procedures and Benefits Manual.

Detailed Review:

A recent review of the City’s Substance Abuse Policy identified that the policy lacked important information required to demonstrate compliance with Department of Transportation (DOT) regulations. The Substance Abuse Policy applies to employees that are required to hold and utilize a Commercial Driver’s License (CDL) for their employment. While the Public Works Department employs the majority of the City’s CDL holders (Truck Drivers, Operators, etc.), the Recreation Department also has some staff (Bus Drivers) that are required to abide by the policy.

The existing Substance Abuse Policy addresses several important topics including the City’s drug testing procedures, the types of substances that are tested for, the types of tests that are required, prohibited conduct and consequences for violation of the policy. The Red Line Version (supporting document) of the policy identifies where alterations and additions were made to the existing policy.

In addition to some small updates to existing language in the policy, the biggest new additions include:

- Identifying the screening cut off and laboratory confirmation cutoff levels for each of the substances that are tested for.
- Identifying the effects of alcohol and controlled substances.
- Identifying exactly when a Post Accident test must be administered.
- Identifying circumstances that would be considered a refusal to test.
- Information regarding substance use disorder and associated symptoms.
- Self-Reporting and Peer Reporting policies.

This updated policy was recently adopted in the Public Works Supervisors' contract, replacing the substance use policy that had been in their previous contract. The same policy will also be proposed as an update for the Public Works Non-Supervisors contract when it is renewed in 2026. By ensuring that the same Substance Abuse Policy is in place for all employees that are required to have a CDL for their job, we can ensure that all employees are treated fairly and held to the same standard. We can also ensure that our policy is in line with Department of Transportation regulations.

Funding Source:

N/A

Staff Recommendation:

Update the Substance Abuse Policy in the Human Resources Policies Procedures and Benefits Manual to be consistent with the Public Works Supervisors policy.

SUBSTANCE ABUSE POLICY

The City of Biddeford is committed to a drug and alcohol free workplace. ~~In order to~~To ensure the safety of its employees and the general public, as well as to comply with 49 CFR Part 382 and other pertinent federal laws, the City Council has adopted this policy. The City takes pride in its employees who perform critical duties in a truly effective manner with safety foremost in their minds. This policy strengthens our commitment to a safe workplace.

Program Administrator: The ~~City Manager~~ HR Director or their designee shall be the alcohol/drug testing Program Administrator. The Program Administrator is responsible for answering questions from drivers, employees, or the public in general. The Program Administrator will maintain the confidentiality of all information relating to drug and alcohol testing. The Program Administrator may provide such information as necessary to enable the appropriate Supervisor to take the appropriate action to ensure compliance with this policy. In addition, the Program Administrator is also responsible for compliance with the Program Administrator guidelines.

Scope of Policy: This policy applies to all regular full-time, part-time, and temporary employees who are required to hold a Commercial Driver's License (CDL) for their position. Employees in such positions may have a variety of responsibilities, including but not limited to, plowing and sanding of city roads, trash collection and disposal, transportation of materials and supplies, or the transportation of people. All applicants for employment positions requiring a CDL are required to pass a drug test as a prerequisite of employment, prior to final hiring. Any applicant who fails a drug test shall not be hired, although they may re-apply for employment in the future. All covered employees shall receive a copy of this policy, as well as a copy of the educational materials covered in the employee education session on alcohol and substance abuse.

Compliance with Regulations: All CDL employees subject to alcohol and drug testing must be in compliance with this policy at all times while working for the City. This includes all time spent operating commercial vehicles, as well as time spent maintaining or repairing those vehicles. Note regarding independent contractors: Independent contractors and their employees who must hold a CDL for the contracted activity are subject to the requirements of 49 CFR Part 382 and are responsible for compliance. The City will not provide or pay for tests or rehabilitation for independent contractors or their employees. The City shall make compliance with the law a condition of any contract which requires a CDL driver.

Substances Tested: When drug and alcohol screening is required by this policy, a breath test and/or urine test will be given to detect the following:

<u>Drug Name</u>	<u>Laboratory Screening Cutoff</u>	<u>Laboratory Confirmation Cutoff</u>
<u>Marijuana Metabolite</u>	<u>50 ng/mL</u>	<u>15 ng/mL</u>
<u>Cocaine Metabolite</u>	<u>150 ng/mL</u>	<u>100 ng/mL</u>
<u>Amphetamine/ Methamphetamine</u>	<u>500 ng/mL</u>	<u>250 ng/mL</u>
<u>Codeine/ Morphine</u>	<u>2000 ng/mL</u>	<u>2000 ng/mL</u>
<u>6-Acetylmorphine</u>	<u>10 ng/mL</u>	<u>10 ng/mL</u>

<u>Hydrocodone/ Hydromorphone</u>	<u>300 ng/mL</u>	<u>100 ng/mL</u>
<u>Oxycodone/ Oxymorphone</u>	<u>100 ng/mL</u>	<u>100 ng/mL</u>
<u>Phencyclidine</u>	<u>25 ng/mL</u>	<u>25 ng/mL</u>
<u>MDMD/ MDA</u>	<u>500 ng/mL</u>	<u>250 ng/mL</u>
<u>Alcohol</u>	<u>0.02 g/210L</u>	<u>0.02 g/210L</u>

1. Alcohol
2. Marijuana
3. Cocaine
4. Amphetamines
5. Phencyclidine (PCP)
6. Opiates

Effects of alcohol and controlled substances

Alcohol

Appearance: Liquid.

Use/ Abuse: Ingested.

Effects: Short-term effects may include lowered inhibitions, concentration problems, coordination issues, and mood changes.

Longer-term effects may include cognitive decline, kidney disease, stroke, alcoholic liver disease, cardiovascular problems, diabetes.

Marijuana

Appearance: Shredded green/brown mix of flowers, stems, seeds, and leaves from the Cannabis sativa plant. The mixture typically is green, brown, or gray in color and may resemble tobacco.

Use/ Abuse: Smoked as a cigarette (called a joint) or in a pipe or bong. Smoked in blunts, which are cigars that have been emptied of tobacco and refilled with marijuana, sometimes in combination with another drug. Marijuana is also mixed with foods or brewed as a tea.

Effects: The short-term: Problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination, serious impairments in learning, associative processes, and psychomotor behavior (driving abilities). Long term regular use: Dependence and withdrawal following discontinuation, psychological addiction or dependence.

Cocaine

Appearance: White, crystalline powder derived from coca leaves. Cocaine base (crack) looks like small, irregularly shaped white rocks.

Use/ Abuse: Snorted or dissolved in water and injected. Crack cocaine is smoked. Tolerance builds quickly, easy to overdose.

Effects: Restlessness, irritability, anxiety, paranoia, dilated pupils, insomnia, loss of appetite. Irregular heartbeat, ischemic heart conditions, sudden cardiac arrest, convulsions, strokes, and death.

Long-term use of inhaled cocaine has led to a unique respiratory syndrome, and chronic snorting of cocaine has led to the erosion of the upper nasal cavity. The crash that follows a high is mental and physical exhaustion, sleep, and depression lasting several days. Following the crash, users crave cocaine again.

Amphetamine/ Methamphetamine

Appearance: Tablets/ pills, powder. Crystal meth resembles glass fragments.

Use/ Abuse: Some amphetamines are legally prescribed and used to treat attention-deficit hyperactivity disorder (ADHD). Generally taken orally or injected. However, 'ice', the slang name of crystallized methamphetamine hydrochloride, has promoted smoking as another mode of administration. Meth may also be snorted or injected.

Effects: Amphetamine: Similar to cocaine, but slower onset and longer duration. Increased body temperature, blood pressure and pulse rates, insomnia, loss of appetite, physical exhaustion. Chronic abuse produces a psychosis that resembles schizophrenia: paranoia, hallucinations, violent and erratic behavior. Methamphetamine: Highly addictive, agitation, increased heart rate and blood pressure, increased respiration and body temperature, anxiety, paranoia. High doses can cause convulsions, cardiovascular collapse, stroke or death.

Opiates (including Codeine/ Morphine, 6-Acetylmorphine, Hydrocodone/ Hydromorphone, Oxycodone/ Oxymorphone)

Appearance: Tablets/ pills, powder. Liquid solution.

Use/ Abuse: Smoked, snorted, ingested. Injectable solutions, as well as tablets that have been crushed and dissolved in a solution may be injected.

Effects: Euphoria, relaxation, sedation, pain relief, and reduced anxiety. May also cause mental clouding, changes in mood, nervousness, and restlessness. Constipation, nausea, vomiting, impaired coordination, loss of appetite, rash, slow or rapid heartbeat, and changes in blood pressure.

Phencyclidine (PCP)

Appearance: Tablets/ pills, capsules. White crystal-like powder. Liquid solution.

Use/ Abuse: Ingested, smoked, snorted or injected.

Effects: Euphoria, numbness, slurred speech, lack of muscle coordination and balance, impaired concentration or speech, racing heartbeat,

excessive sweating,

rapid, involuntary eye movements, hallucinations flashbacks, shallow breathing, high temperature.

high blood pressure, nausea, vomiting, dizziness, drooling, blank stares.

MDMD/MDA (Ecstasy, Molly)

Appearance: Gel capsules (Molly), pills, tablets, powder, crystal, liquid.

Use/ Abuse: Ingested, snorted. Occasionally smoked.

Effects: Increased motor activity, alertness, heart rate, blood pressure, muscle tension, tremors, teeth clenching, nausea, sweating, euphoria, empathy, reduced inhibition, chills, blurred vision, confusion, anxiety, depression, paranoia, severe dehydration, sleep problems, and drug craving.

Prescription Drug Use: Employees covered by this policy may use prescription drugs and "over the counter" medications provided that:

1. The prescription drugs or their generic equivalent have been prescribed to the employee within the past 12 months by an authorized medical practitioner.
2. The employee does not consume prescribed drugs more often than as prescribed by the employee's physician.
3. Any employee who has been informed that the medication could cause adverse side effects while working shall inform their Supervisor prior to using these substances. The City, at all times, reserves the right to have a licensed physician determine if use of a prescription drug or medication by an employee produces an adverse effect. If such a finding is made, the City may notify the employee's doctor (with employee's permission) to determine if other

medications are available which would not seriously affect the employee's ability to work safely. If an appropriate substitute medicine is not available, the City may limit or suspend the employee's work activities to non-safety sensitive duties.

Test Required: All employees subject to this policy shall be tested for alcohol and/or controlled substances in the following circumstances:

1. **Pre-employment:** Drug tests will be conducted when an offer is made to hire an employee for a CDL position. The offer for employment is contingent on the applicant passing these tests. This includes existing employees who are applying for CDL positions.
2. **Random:** Drug and alcohol tests will be conducted on a random, unannounced basis. The number of annual drug tests shall equal 50 percent of the number of CDL required positions while the number of annual alcohol tests shall equal 10% of the CDL required positions. The City has entered into an agreement with a third-party administrator (TPA) to randomly select the CDL employees for testing and then notify the program administrator of the person or persons chosen.
3. **Post-accident:** As soon as is practicable after an accident, the Department Head and/or Supervisor shall ensure that the employee shall be tested for alcohol and drugs if:
 - a. The accident involved the loss of human life
 - b. The employee received a citation for a moving traffic violation arising from the accident and either
 - i. A vehicle is towed away from the scene, or
 - ii. Someone is medically evacuated from the scene.
 - c. The need for medical care should be prioritized over the need for a post-accident test.
 - d. Alcohol tests. If a post-accident alcohol test is not administered within two hours following the accident, the employer shall prepare and maintain a record stating the reasons the test was not promptly administered. If a post-accident alcohol test is not administered within eight hours following the accident, the employer shall cease attempts to administer an alcohol test and shall prepare and maintain the same record.
 - e. Controlled substance tests. If a post-accident controlled substance test is not administered within 32 hours following the accident, the employer shall cease attempts to administer a controlled substance test and prepare and maintain a record stating the reasons the test was not promptly administered.
 - f. A driver who is subject to post-accident testing shall remain readily available for such testing or may be deemed by the employer to have refused to submit to testing.

4.3. Reasonable suspicion: All employees who exhibit to two trained Supervisors signs and symptoms of alcohol and/or drug abuse while on the job, prior to reporting to work or just after work, will be required to submit to an alcohol and/or drug test. The Supervisor shall document the specific facts, symptoms or observations by completing a "Reasonable Suspicion Record" form.

Note: Do not allow an employee to drive themselves to the testing facility for a reasonable suspicion test. Instead, the Supervisor or another employee should provide transportation to the testing facility.

5.4. Return-to-duty: An employee who engaged in prohibited conduct must submit to an alcohol test and drug test to return to duty. which shall be conducted by the drug counselor. Upon satisfactory completion of the counselling and education required by the Substance Abuse Professional (SAP), the SAP will inform the employer that the employee is eligible to complete

a return to duty test. The results of a drug test must be negative to return to duty, and the results of an alcohol test must be less than 0.02 to return to duty.

6.5. Follow-up: An employee who previously tested positive and has returned to duty must submit to a combination of at least 6 alcohol and drug tests during the first year after returning to work. Follow-up tests will be unannounced and may continue for up to 60 months after returning to work, not to exceed 12 a year.

Testing Procedures:

- 1. Drug Testing:** Drug testing is accomplished by analyzing the employee's urine specimen (urinalysis). Specimens will be collected at an off-site facility selected by the City. Once the employee provides a urine specimen, it is sealed and labeled by a certified/authorized agent of the testing facility. A chain of custody document is completed in the presence of the employee and the specimen is shipped to a SEMSA certified laboratory. All urinalysis procedures are required to include split-specimen techniques. Each urine sample is subdivided into two containers and labeled as primary and split specimens. Both specimens are forwarded to the laboratory. Only the primary specimen is used in the urinalysis. In the event of a confirmed positive test result, the split specimen may be used for a second confirmation test if requested by the employee. During testing, an initial screening test is performed. If the test is positive for one or more drugs a confirmation test will be performed for each individual drug using gas chromatography/mass spectrometry (GC/MS) analysis. This test ensures that over the counter medications are not reported as positive results. If the analysis of the primary specimen results in a confirmed positive test, the employee may within 72 hours request that the split specimen also be tested at the SEMSA laboratory of their choice. The second test is at the employee's expense unless the test result is negative, in which case the City would reimburse the employee. All test results are reviewed by a medical review officer (MRO) prior to results being reported to the City. In the event of a positive test result, the MRO will first attempt to contact the employee and conduct an interview to determine if there are any alternative legitimate reasons for the positive results (such as over-the-counter or prescription medications). If the MRO determines there is a legitimate medical explanation for the presence of drugs, the result will be reported as negative. If the MRO is unable to contact the employee, then the employer will be contacted and requested to advise the employee to contact the MRO. Urine samples shall be provided in a private test room, stall or similar enclosure so that employees and applicants may not be viewed while providing the sample. Employees and applicants may be required to disrobe and will be given hospital gowns to wear while they are providing test samples in order to ensure that there is no tampering. Street clothes, bags, briefcases, purses, and other containers may not be carried into the test area. The water in the commode, if any, shall be colored with dye to protect against dilution of test samples. An applicant or employee may waive the right to privacy and provide the urine sample in the presence of a witness (of the same gender) and not be required to disrobe and wear a hospital gown.
- 2. Alcohol Testing:** Alcohol testing will be conducted using an evidential breath testing (EBT) device. The breath test must be performed by a certified Breath Alcohol Technician (BAT) trained in the use of EBT and alcohol testing procedures. Under certain circumstances, post-accident tests conducted by law enforcement personnel or medical personnel will be acceptable. Two breath tests are required to determine if an individual is over the alcohol concentration limit permitted. Any result of less than 0.02 concentrations is considered a negative result. Any result of 0.02 or greater requires a confirmation test. A confirmed test of 0.02 or greater is considered a positive result.

Prohibited Conduct: CDL employees shall not:

1. Report to work and/or remain on duty with an alcohol concentration of 0.02 or greater;
 2. Possess any alcohol while on duty;
 3. Use any alcohol while on duty;
 4. Use any alcohol within 4 hours before going on duty;
 5. Use any alcohol within 8 hours after an accident for which the CDL employee must be tested for alcohol concentration;
 6. Refuse to submit to the following alcohol and/or controlled substance tests; random test, reasonable suspicion test, post-accident test, or follow-up test;
 7. Report to or remain on duty when using any controlled substance, except when used under a physician's orders and when the physician has informed the CDL employee in writing that the use will not affect the safe operations of a commercial vehicle. In the case of a written warning by the physician, the employee shall report this to their Supervisor immediately;~~and~~
 8. Report to or remain on duty if the employee tests positive for controlled substance.
- ~~8.9. Dilute, substitute, adulterate or tamper in any way with a specimen sample provided for testing.~~

Failure to comply with these rules is a violation of this policy and may result in disciplinary action and shall result in referral to a substance abuse professional.

Refusal to test: An employee's failure to submit to testing may result in disciplinary action up to and including dismissal and is also grounds for referral to a substance abuse professional. Failure to submit to a test by an applicant will result in denial of employment. Specifically, the following circumstances will be considered a refusal to test:

- ~~1. Failure to report to the designated testing area within three hours of being notified to submit to an alcohol or drug test; and~~
- ~~2. Failure to accurately provide a sufficient sample to be tested, either breath or urine as the case may be, unless medically determined impossible to do so.~~
1. Failure to appear for any test after being directed to do so by your employer.
2. Failure to remain at the testing site until the testing process is complete.
3. Failure to provide a urine or breath sample for any test required by federal regulations.
4. Failure to permit the observation or monitoring of you providing a urine sample (Please note tests conducted under direct observation or monitoring occur in limited situations. The majority of specimens are provided in private).
5. Failure to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was not adequate medical explanation for the failure.
6. Failure to take a second test when directed to do so.
7. Failure to undergo a medical evaluation as part of "shy bladder" or "shy lung" procedures.
8. Providing a specimen that is verified as adulterated or substituted.
9. Failure to cooperate with any part of the testing process (e.g., refuse to empty pockets when directed by the collector, behave in a confrontational way that disrupts the collection process, fail to wash hands after being directed to do so by the collector).
10. Failure to follow the observer's instructions (during a direct observation collection) to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.

11. Possess or wear a prosthetic or other device that could be used to interfere with the collection process.
12. Admit to the collector or MRO that you adulterated or substituted the specimen.

Alcohol Concentration of 0.00 or greater but less than 0.02: Provided that the employee has not violated the **Prohibited Conduct** rule, any employee whose alcohol test results in a concentration of 0.00 or greater but less than 0.02 shall not be permitted to perform any safety-sensitive function for at least 24 hours following the test. The employee will not be paid for work time lost as a result of this section unless they work in another capacity for the City during that time period. The employee will not be required to undergo evaluation by a substance abuse professional if the test result is 0.00 or greater but less than 0.02, ~~nor will a return to duty test be required unless~~ If there is reasonable suspicion that the employee is ~~still~~ under the influence of ~~alcohol or other~~ drugs, reasonable suspicion procedures should be followed. **Note:** This section applies only in limited situations. For example, if an employee last consumed alcohol more than four hours before ~~work, but~~ work but still has a blood/alcohol level of 0.01 when they show up for work, they are not in violation of the Prohibitive Conduct rule but is subject to this section.

Notice and consent: Before a drug or alcohol test is administered, employees and job applicants will be asked to sign a consent form authorizing the test and permitting the release of test results to those officials with a need to know. The chemical screen consent form shall provide space to indicate current or recent use of prescription and over-the-counter medication.

All recruitment announcements for any position, including in-house recruitment and promotion, will disclose that a drug screening test will be required of the applicant.

Consequences of Violation of this Policy: Any employee who violates the **Prohibitive Conduct** and **Refusal to Test** rules of this policy shall be immediately removed from the safety-sensitive function and will be advised by the City of the resources available for evaluating and resolving drug and alcohol abuse problems. The employee is required to be evaluated by a ~~S~~ Substance Abuse Professional (SAP). All evaluation and rehabilitation shall be at the employee's cost unless otherwise agreed by the City. An employee shall not be allowed to return to the safety sensitive function until they have a return-to-duty alcohol test result of less than 0.02 or a return-to-duty drug test with a verified negative result.

1. In addition, any employee who violates the **Prohibitive Conduct** and **Refusal to Test** rules of this policy may be subject to disciplinary action up to and including dismissal. Before discipline, reassignment, or dismissal is imposed, the employee shall have the opportunity to participate for up to 6 months in a rehabilitation program. The employee is responsible for all costs associated with the rehabilitation program unless otherwise agreed by the City.
2. Employees may be subject to discipline up to and including discharge as provided below if they test positive for drugs/alcohol as specified elsewhere in this policy:
 - a. Reasonable suspicion testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a reasonable suspicion drug test is a dischargeable offense
 - b. Post-accident testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a post-accident drug test is a dischargeable offense
 - c. Random testing:

- i. 1st offense - A positive test shall result in a warning letter (subject to successful completion of rehabilitation)
 - ii. 2nd offense - A positive test is a dischargeable offense
 - iii. Refusal to submit to a random drug test is a dischargeable offense
 - d. Pre-employment:
 - i. 1st offense - A positive test shall result in disqualification
 - ii. ~~2nd offense - A positive test is a dischargeable offense~~
 - e. Return to duty testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a return to duty test is a dischargeable offense
 - f. Follow-up testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a follow-up test is a dischargeable offense
 - g. Further grounds for discipline or dismissal under City policy include, but are not limited to:
 - i. Refusal to submit to a rehabilitation program after testing positive
 - ii. Failure within six months to successfully participate in a rehabilitation program after receiving a positive test, or failure to pass a return-to-duty drug or alcohol test
 - iii. Evidence that the employee has substituted, adulterated diluted or otherwise tampered with their urine sample
 - iv. Failure to contact a substance abuse professional within five regular working days after being notified of a confirmed (MRO certified) positive test for the improper use of alcohol or unauthorized substances
 - h. During the period the City is awaiting an employee's test result for a post-accident test, reasonable suspicion test, or return-to-duty test, the City may transfer the employee to another position with or without a reduction in pay or benefits. The City also reserves the right to place an employee on paid or unpaid suspension. A determination as to whether an employee is placed in another position or placed on paid or unpaid suspension may be based on, but is not limited to: who is responsible for and/or the severity of the accident, if applicable; the observed condition of the employee, if applicable; the employee's work history; length of employment; current job performance, and the existence of past disciplinary actions. Action taken by the City under this subsection is a matter of City policy, and is not imposed by federal law.
 - i. Employee/applicant rights and responsibilities:
 - i. In the event of a confirmed positive test result, employees and job applicants shall have the opportunity to present an alternative explanation for the test result by contacting the Medical Review ~~Officer Board~~ (MRO~~B~~). This shall be done within 72 hours after notification of the confirmed result. No further action will be taken if there is a justified explanation, or there is a reasonable doubt as to the accuracy of the result or chain of custody of the sample.
 - ii. Any employee with a positive test result may upon written request to the program administrator have the right to any information relating to the test result and procedures. A job applicant may request information concerning the test result within 60 days after the decision on his employment application.
 - iii. Upon successfully participating in a rehabilitation program (within 6 months after it commences) and upon passing a return-to-duty drug and/or alcohol test, the employee is entitled to return to their previous job with full pay (but not back pay) and benefits, unless conditions unrelated to the employee's previous

test make the employee's return impossible. The rehabilitation or treatment provider in consultation with the City shall determine whether the employee has successfully participated in the rehabilitation program. The City is not required to hold the employee's job open for more than 6 months after the employee commences a rehabilitation program.

- j. Confidentiality of information: Unless the employee or applicant consents, all information acquired by the City in connection with the testing processes is confidential and may not be released to any person other than to the employee or applicant who is tested, the Program Administrator, officials with a need-to-know, and the rehabilitation provider. The foregoing shall not prevent the release of information that is required or permitted by state or federal law, or the use of the information in any grievance procedure, administrative hearing or lawsuit relating to the imposition of the test or the use of the test results.
- k. Documents provided: The City will provide each person subject to this policy a copy of the policy. The City will also provide printed material which describes the effects of alcohol and/or controlled substances on the individual's health, work, and personal life, as well as information on the signs and symptoms of alcohol or controlled substances and methods of treatment or intervention for drug or alcohol abuse.

What is substance use disorder? Drug addiction, also called substance use disorder, is a disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medicine. Substances such as alcohol, marijuana and nicotine also are considered drugs. When you're addicted, you may continue using the drug despite the harm it causes.

Drug addiction can start with experimental use of a recreational drug in social situations, and, for some people, the drug use becomes more frequent. For others, particularly with opioids, drug addiction begins when they take prescribed medicines or receive them from others who have prescriptions.

The risk of addiction and how fast you become addicted varies by drug. Some drugs, such as opioid painkillers, have a higher risk and cause addiction more quickly than others.

As time passes, you may need larger doses of the drug to get high. Soon you may need the drug just to feel good. As your drug use increases, you may find that it's increasingly difficult to go without the drug. Attempts to stop drug use may cause intense cravings and make you feel physically ill. These are called withdrawal symptoms.

Help from your health care provider, family, friends, support groups or an organized treatment program can help you overcome your drug addiction and stay drug-free.

Symptoms. Drug addiction symptoms or behaviors include, among others:

1. Feeling that you have to use the drug regularly — daily or even several times a day
2. Having intense urges for the drug that block out any other thoughts
3. Over time, needing more of the drug to get the same effect
4. Taking larger amounts of the drug over a longer period of time than you intended
5. Making certain that you maintain a supply of the drug
6. Spending money on the drug, even though you can't afford it

7. Not meeting obligations and work responsibilities, or cutting back on social or recreational activities because of drug use
8. Continuing to use the drug, even though you know it's causing problems in your life or causing you physical or psychological harm
9. Doing things to get the drug that you normally wouldn't do, such as stealing
10. Driving or doing other risky activities when you're under the influence of the drug
11. Spending a good deal of time getting the drug, using the drug or recovering from the effects of the drug
12. Failing in your attempts to stop using the drug
13. Experiencing withdrawal symptoms when you attempt to stop taking the drug

Life-changing complications. Dependence on drugs can create a number of dangerous and damaging complications, including:

1. **Getting an infectious disease.** People who are addicted to a drug are more likely to get an infectious disease, such as HIV, either through unsafe sex or by sharing needles with others.
2. **Other health problems.** Drug addiction can lead to a range of both short-term and long-term mental and physical health problems. These depend on what drug is taken.
3. **Accidents.** People who are addicted to drugs are more likely to drive or do other dangerous activities while under the influence.
4. **Suicide.** People who are addicted to drugs die by suicide more often than people who aren't addicted.
5. **Family problems.** Behavioral changes may cause relationship or family conflict and custody issues.
6. **Work issues.** Drug use can cause declining performance at work, absenteeism and eventual loss of employment.
7. **Problems at school.** Drug use can negatively affect academic performance and motivation to excel in school.
8. **Legal issues.** Legal problems are common for drug users and can stem from buying or possessing illegal drugs, stealing to support the drug addiction, driving while under the influence of drugs or alcohol, or disputes over child custody.
9. **Financial problems.** Spending money to support drug use takes away money from other needs, could lead to debt, and can lead to illegal or unethical behaviors.

When to see a doctor: If your drug use is out of control or causing problems, get help. The sooner you seek help, the greater your chances for a long-term recovery. Talk with your health care provider or see a mental health provider, such as a doctor who specializes in addiction medicine or addiction psychiatry, or a licensed alcohol and drug counselor.

Make an appointment to see a provider if:

1. You can't stop using a drug
2. You continue using the drug despite the harm it causes
3. Your drug use has led to unsafe behavior, such as sharing needles or unprotected sex
4. You think you may be having withdrawal symptoms after stopping drug use

If you're not ready to approach a health care provider or mental health professional, help lines or hotlines may be a good place to learn about treatment. The U.S. Department of Health and Human Services treatment facility locator at <http://findtreatment.samhsa.gov/> may also help you to find an appropriate provider. This site provides contact information for substance abuse treatment programs by state, city and U.S. Territory.

Employee Admission of Alcohol and Controlled Substances Use: The City encourages drivers who recognize that they may have a problem with drugs and/or alcohol to seek assistance for resolving that problem before they have a DOT violation due to a positive test result or because they engaged in other DOT prohibited conduct.

A driver who admits to a drug and/or alcohol problem may avoid a DOT violation. They will be given an opportunity to obtain a chemical use assessment from an appropriate drug and alcohol counseling and rehabilitation provider. The driver may utilize the Employee Assistance Program (EAP) to find an appropriate provider or complete their own search. All evaluation and rehabilitation shall be at the employee's cost unless otherwise agreed by the City. Prior to the assessment the driver must sign a release of information that will enable the City's Designated Employer Representative (DER) to receive the results of the assessment, and to receive subsequent reports related to the assessment, and the driver's successful completion of all recommendations for assistance.

The following conditions must apply to the driver's self-admission:

1. The driver's admission cannot be made during their on-duty time. It must occur prior to the driver's reporting for duty on any particular day.
2. The driver's admission cannot be made in an attempt to avoid a required DOT drug test. Self-reporting after being notified of a required test does not release the driver from the responsibility of taking the test, and it also does not qualify as a voluntary admission.
3. The driver must be removed from safety-sensitive functions, including driving.

A driver who self-identifies under this program will be given reasonable time to obtain the required assessment and assistance. The City will take no adverse action, such as discipline, reassignment or dismissal, against a driver who admits to drug and/or alcohol use as long as they:

1. Initiate the assessment process within five (5) days of the driver's disclosure.
2. Comply with all requirements of their rehabilitation provider and complete the return to work process within six (6) months of the driver's disclosure.

When the City's DER is satisfied that the driver has complied with their rehabilitation provider's recommendations for assistance, the driver may return to safety-sensitive functions, provided that:

Prior to returning to safety-sensitive functions, the driver will be required to provide a negative DOT drug and/or alcohol test result on a return-to-duty test. The drug test will be conducted under direct observation.

A driver who cooperates and successfully complies with this program will not be considered to have had a DOT violation of prohibited conduct.

A driver who self-identifies under this policy and who then fails to comply with the rehabilitation provider's recommendations will be considered to have engaged in prohibited conduct and will not be permitted to return to safety-sensitive function until they have successfully complied with the SAP return-to-duty process. A DOT violation of prohibited conduct will be recorded. Once in compliance with the SAP return-to-duty process, prior to returning to safety-sensitive functions, the driver will be required to provide a negative DOT drug and/or alcohol test result on a return-to-duty test. The drug test will be conducted under direct observation.

A driver who self-identifies under this policy and fails to comply with their rehabilitation provider's recommendations may be subject to disciplinary action up to and including termination of employment.

Peer reporting: If you have suspicion, reason to believe or actual knowledge that a coworker is using alcohol or controlled substances during working hours, or may be dealing with a substance use disorder, you must report it to your supervisor immediately. The safety of everyone depends on it. Supervisors with appropriate reasonable suspicion training will then assess the situation and determine the correct course of action. The purpose of such a report is not to punish the employee in question but to maintain safety and provide support to the employee. Depending on the circumstances and the assessment of trained supervisors, the individual in question may be extended the same benefits as those offered to individuals that self-report.

SUBSTANCE ABUSE POLICY

The City of Biddeford is committed to a drug and alcohol free workplace. To ensure the safety of its employees and the general public, as well as to comply with 49 CFR Part 382 and other pertinent federal laws, the City Council has adopted this policy. The City takes pride in its employees who perform critical duties in a truly effective manner with safety foremost in their minds. This policy strengthens our commitment to a safe workplace.

Program Administrator: The HR Director or their designee shall be the alcohol/drug testing Program Administrator. The Program Administrator is responsible for answering questions from drivers, employees, or the public in general. The Program Administrator will maintain the confidentiality of all information relating to drug and alcohol testing. The Program Administrator may provide such information as necessary to enable the appropriate Supervisor to take the appropriate action to ensure compliance with this policy. In addition, the Program Administrator is also responsible for compliance with the Program Administrator guidelines.

Scope of Policy: This policy applies to all regular full-time, part-time, and temporary employees who are required to hold a Commercial Driver's License (CDL) for their position. Employees in such positions may have a variety of responsibilities, including but not limited to, plowing and sanding of city roads, trash collection and disposal, transportation of materials and supplies, or the transportation of people. All applicants for employment positions requiring a CDL are required to pass a drug test as a prerequisite of employment, prior to final hiring. Any applicant who fails a drug test shall not be hired, although they may re-apply for employment in the future. All covered employees shall receive a copy of this policy, as well as a copy of the educational materials covered in the employee education session on alcohol and substance abuse.

Compliance with Regulations: All CDL employees subject to alcohol and drug testing must be in compliance with this policy at all times while working for the City. This includes all time spent operating commercial vehicles, as well as time spent maintaining or repairing those vehicles. Note regarding independent contractors: Independent contractors and their employees who must hold a CDL for the contracted activity are subject to the requirements of 49 CFR Part 382 and are responsible for compliance. The City will not provide or pay for tests or rehabilitation for independent contractors or their employees. The City shall make compliance with the law a condition of any contract which requires a CDL driver.

Substances Tested: When drug and alcohol screening is required by this policy, a breath test and/or urine test will be given to detect the following:

Drug Name	Laboratory Screening Cutoff	Laboratory Confirmation Cutoff
Marijuana Metabolite	50 ng/mL	15 ng/mL
Cocaine Metabolite	150 ng/mL	100 ng/mL
Amphetamine/ Methamphetamine	500 ng/mL	250 ng/mL
Codeine/ Morphine	2000 ng/mL	2000 ng/mL
6-Acetylmorphine	10 ng/mL	10 ng/mL
Hydrocodone/ Hydromorphone	300 ng/mL	100 ng/mL
Oxycodone/ Oxymorphone	100 ng/mL	100 ng/mL

Phencyclidine	25 ng/mL	25 ng/mL
MDMD/ MDA	500 ng/mL	250 ng/mL
Alcohol	0.02 g/210L	0.02 g/210L

Effects of alcohol and controlled substances

Alcohol

Appearance: Liquid.

Use/ Abuse: Ingested.

Effects: Short-term effects may include lowered inhibitions, concentration problems, coordination issues, and mood changes.

Longer-term effects may include cognitive decline, kidney disease, stroke, alcoholic liver disease, cardiovascular problems, diabetes.

Marijuana

Appearance: Shredded green/brown mix of flowers, stems, seeds, and leaves from the Cannabis sativa plant. The mixture typically is green, brown, or gray in color and may resemble tobacco.

Use/ Abuse: Smoked as a cigarette (called a joint) or in a pipe or bong. Smoked in blunts, which are cigars that have been emptied of tobacco and refilled with marijuana, sometimes in combination with another drug. Marijuana is also mixed with foods or brewed as a tea.

Effects: The short-term: Problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination, serious impairments in learning, associative processes, and psychomotor behavior (driving abilities). Long term regular use: Dependence and withdrawal following discontinuation, psychological addiction or dependence.

Cocaine

Appearance: White, crystalline powder derived from coca leaves. Cocaine base (crack) looks like small, irregularly shaped white rocks.

Use/ Abuse: Snorted or dissolved in water and injected. Crack cocaine is smoked. Tolerance builds quickly, easy to overdose.

Effects: Restlessness, irritability, anxiety, paranoia, dilated pupils, insomnia, loss of appetite.

Irregular heartbeat, ischemic heart conditions, sudden cardiac arrest, convulsions, strokes, and death.

Long-term use of inhaled cocaine has led to a unique respiratory syndrome, and chronic snorting of cocaine has led to the erosion of the upper nasal cavity. The crash that follows a high is mental and physical exhaustion, sleep, and depression lasting several days. Following the crash, users crave cocaine again.

Amphetamine/ Methamphetamine

Appearance: Tablets/ pills, powder. Crystal meth resembles glass fragments.

Use/ Abuse: Some amphetamines are legally prescribed and used to treat attention-deficit hyperactivity disorder (ADHD). Generally taken orally or injected. However, 'ice', the slang name of crystallized methamphetamine hydrochloride, has promoted smoking as another mode of administration. Meth may also be snorted or injected.

Effects: Amphetamine: Similar to cocaine, but slower onset and longer duration. Increased body temperature, blood pressure and pulse rates, insomnia, loss of appetite, physical exhaustion. Chronic abuse produces a psychosis that resembles schizophrenia: paranoia, hallucinations, violent and erratic behavior. Methamphetamine: Highly addictive, agitation, increased heart rate and blood pressure,

increased respiration and body temperature, anxiety, paranoia. High doses can cause convulsions, cardiovascular collapse, stroke or death.

Opiates (including Codeine/ Morphine, 6-Acetylmorphine, Hydrocodone/ Hydromorphone, Oxycodone/ Oxymorphone

Appearance: Tablets/ pills, powder. Liquid solution.

Use/ Abuse: Smoked, snorted, ingested. Injectable solutions, as well as tablets that have been crushed and dissolved in a solution may be injected.

Effects: Euphoria, relaxation, sedation, pain relief, and reduced anxiety. May also cause mental clouding, changes in mood, nervousness, and restlessness. Constipation, nausea, vomiting, impaired coordination, loss of appetite, rash, slow or rapid heartbeat, and changes in blood pressure.

Phencyclidine (PCP)

Appearance: Tablets/ pills, capsules. White crystal-like powder. Liquid solution.

Use/ Abuse: Ingested, smoked, snorted or injected.

Effects: Euphoria, numbness, slurred speech, lack of muscle coordination and balance, impaired concentration or speech, racing heartbeat,

excessive sweating,

rapid, involuntary eye movements, hallucinations flashbacks, shallow breathing. high temperature.

high blood pressure, nausea, vomiting, dizziness, drooling, blank stares.

MDMD/MDA (Ecstasy, Molly)

Appearance: Gel capsules (Molly), pills, tablets, powder, crystal, liquid.

Use/ Abuse: Ingested, snorted. Occasionally smoked.

Effects: Increased motor activity, alertness, heart rate, blood pressure, muscle tension, tremors, teeth clenching, nausea, sweating, euphoria, empathy, reduced inhibition, chills, blurred vision, confusion, anxiety, depression, paranoia, severe dehydration, sleep problems, and drug craving.

Prescription Drug Use: Employees covered by this policy may use prescription drugs and "over the counter" medications provided that:

1. The prescription drugs or their generic equivalent have been prescribed to the employee within the past 12 months by an authorized medical practitioner.
2. The employee does not consume prescribed drugs more often than as prescribed by the employee's physician.
3. Any employee who has been informed that the medication could cause adverse side effects while working shall inform their Supervisor prior to using these substances. The City, at all times, reserves the right to have a licensed physician determine if use of a prescription drug or medication by an employee produces an adverse effect. If such a finding is made, the City may notify the employee's doctor (with employee's permission) to determine if other medications are available which would not seriously affect the employee's ability to work safely. If an appropriate substitute medicine is not available, the City may limit or suspend the employee's work activities to non-safety sensitive duties.

Test Required: All employees subject to this policy shall be tested for alcohol and/or controlled substances in the following circumstances:

1. **Pre-employment:** Drug tests will be conducted when an offer is made to hire an employee for a CDL position. The offer for employment is contingent on the applicant passing these tests. This includes existing employees who are applying for CDL positions.
2. **Random:** Drug and alcohol tests will be conducted on a random, unannounced basis. The number of annual drug tests shall equal 50 percent of the number of CDL required positions while the number of annual alcohol tests shall equal 10% of the CDL required positions. The City has entered into an agreement with a third-party administrator (TPA) to randomly select the CDL employees for testing and then notify the program administrator of the person or persons chosen.
3. **Post-accident:** As soon as is practicable after an accident, the Department Head and/or Supervisor shall ensure that the employee shall be tested for alcohol and drugs if: The accident involved the loss of human life
 - a. The employee received a citation for a moving traffic violation arising from the accident and either
 - i. A vehicle is towed away from the scene, or
 - ii. Someone is medically evacuated from the scene.
 - b. The need for medical care should be prioritized over the need for a post-accident test.
 - c. *Alcohol tests.* If a post-accident alcohol test is not administered within two hours following the accident, the employer shall prepare and maintain a record stating the reasons the test was not promptly administered. If a post-accident alcohol test is not administered within eight hours following the accident, the employer shall cease attempts to administer an alcohol test and shall prepare and maintain the same record.
 - d. *Controlled substance tests.* If a post-accident controlled substance test is not administered within 32 hours following the accident, the employer shall cease attempts to administer a controlled substance test and prepare and maintain a record stating the reasons the test was not promptly administered.
 - e. A driver who is subject to post-accident testing shall remain readily available for such testing or may be deemed by the employer to have refused to submit to testing.
4. **Reasonable suspicion:** All employees who exhibit to two trained Supervisors signs and symptoms of alcohol and/or drug abuse while on the job, prior to reporting to work or just after work, will be required to submit to an alcohol and/or drug test. The Supervisor shall document the specific facts, symptoms or observations by completing a "Reasonable Suspicion Record" form.
Note: Do not allow an employee to drive themselves to the testing facility for a reasonable suspicion test. Instead, the Supervisor or another employee should provide transportation to the testing facility.
5. **Return-to-duty:** An employee who engaged in prohibited conduct must submit to an alcohol test and drug test to return to duty. Upon satisfactory completion of the counselling and education required by the Substance Abuse Professional (SAP), the SAP will inform the employer that the employee is eligible to complete a return to duty test. The results of a drug test must be negative to return to duty, and the results of an alcohol test must be less than 0.02 to return to duty.
6. **Follow-up:** An employee who previously tested positive and has returned to duty must submit to a combination of at least 6 alcohol and drug tests during the first year after returning to work. Follow-up tests will be unannounced and may continue for up to 60 months after returning to work, not to exceed 12 a year.

Testing Procedures:

1. **Drug Testing:** Drug testing is accomplished by analyzing the employee's urine specimen (urinalysis). Specimens will be collected at an off-site facility selected by the City. Once the employee provides a urine specimen, it is sealed and labeled by a certified/authorized agent of the testing facility. A chain of custody document is completed in the presence of the employee and the specimen is shipped to a SEMSA certified laboratory. All urinalysis procedures are required to include split-specimen techniques. Each urine sample is subdivided into two containers and labeled as primary and split specimens. Both specimens are forwarded to the laboratory. Only the primary specimen is used in the urinalysis. In the event of a confirmed positive test result, the split specimen may be used for a second confirmation test if requested by the employee. During testing, an initial screening test is performed. If the test is positive for one or more drugs a confirmation test will be performed for each individual drug using gas chromatography/mass spectrometry (GC/MS) analysis. This test ensures that over the counter medications are not reported as positive results. If the analysis of the primary specimen results in a confirmed positive test, the employee may within 72 hours request that the split specimen also be tested at the SEMSA laboratory of their choice. The second test is at the employee's expense unless the test result is negative, in which case the City would reimburse the employee. All test results are reviewed by a medical review officer (MRO) prior to results being reported to the City. In the event of a positive test result, the MRO will first attempt to contact the employee and conduct an interview to determine if there are any alternative legitimate reasons for the positive results (such as over-the-counter or prescription medications). If the MRO determines there is a legitimate medical explanation for the presence of drugs, the result will be reported as negative. If the MRO is unable to contact the employee, then the employer will be contacted and requested to advise the employee to contact the MRO. Urine samples shall be provided in a private test room, stall or similar enclosure so that employees and applicants may not be viewed while providing the sample. Employees and applicants may be required to disrobe and will be given hospital gowns to wear while they are providing test samples in order to ensure that there is no tampering. Street clothes, bags, briefcases, purses, and other containers may not be carried into the test area. The water in the commode, if any, shall be colored with dye to protect against dilution of test samples. An applicant or employee may waive the right to privacy and provide the urine sample in the presence of a witness (of the same gender) and not be required to disrobe and wear a hospital gown.
2. **Alcohol Testing:** Alcohol testing will be conducted using an evidential breath testing (EBT) device. The breath test must be performed by a certified Breath Alcohol Technician (BAT) trained in the use of EBT and alcohol testing procedures. Under certain circumstances, post-accident tests conducted by law enforcement personnel or medical personnel will be acceptable. Two breath tests are required to determine if an individual is over the alcohol concentration limit permitted. Any result of less than 0.02 concentrations is considered a negative result. Any result of 0.02 or greater requires a confirmation test. A confirmed test of 0.02 or greater is considered a positive result.

Prohibited Conduct: CDL employees shall not:

1. Report to work and/or remain on duty with an alcohol concentration of 0.02 or greater;
2. Possess any alcohol while on duty;
3. Use any alcohol while on duty;
4. Use any alcohol within 4 hours before going on duty;
5. Use any alcohol within 8 hours after an accident for which the CDL employee must be tested for alcohol concentration;

6. Refuse to submit to the following alcohol and/or controlled substance tests; random test, reasonable suspicion test, post-accident test, or follow-up test;
7. Report to or remain on duty when using any controlled substance, except when used under a physician's orders and when the physician has informed the CDL employee in writing that the use will not affect the safe operations of a commercial vehicle. In the case of a written warning by the physician, the employee shall report this to their Supervisor immediately;
8. Report to or remain on duty if the employee tests positive for controlled substance.
9. Dilute, substitute, adulterate or tamper in any way with a specimen sample provided for testing.

Failure to comply with these rules is a violation of this policy and may result in disciplinary action and shall result in referral to a substance abuse professional.

Refusal to test: An employee's failure to submit to testing may result in disciplinary action up to and including dismissal and is also grounds for referral to a substance abuse professional. Failure to submit to a test by an applicant will result in denial of employment. Specifically, the following circumstances will be considered a refusal to test:

1. Failure to appear for any test after being directed to do so by your employer.
2. Failure to remain at the testing site until the testing process is complete.
3. Failure to provide a urine or breath sample for any test required by federal regulations.
4. Failure to permit the observation or monitoring of you providing a urine sample (Please note tests conducted under direct observation or monitoring occur in limited situations. The majority of specimens are provided in private).
5. Failure to provide a sufficient amount of urine or breath when directed, and it has been determined, through a required medical evaluation, that there was not adequate medical explanation for the failure.
6. Failure to take a second test when directed to do so.
7. Failure to undergo a medical evaluation as part of "shy bladder" or "shy lung" procedures.
8. Providing a specimen that is verified as adulterated or substituted.
9. Failure to cooperate with any part of the testing process (e.g., refuse to empty pockets when directed by the collector, behave in a confrontational way that disrupts the collection process, fail to wash hands after being directed to do so by the collector).
10. Failure to follow the observer's instructions (during a direct observation collection) to raise your clothing above the waist, lower clothing and underpants, and to turn around to permit the observer to determine if you have any type of prosthetic or other device that could be used to interfere with the collection process.
11. Possess or wear a prosthetic or other device that could be used to interfere with the collection process.
12. Admit to the collector or MRO that you adulterated or substituted the specimen.

Alcohol Concentration of 0.00 or greater but less than 0.02: Provided that the employee has not violated the **Prohibited Conduct** rule, any employee whose alcohol test results in a concentration of 0.00 or greater but less than 0.02 shall not be permitted to perform any safety-sensitive function for at least 24 hours following the test. The employee will not be paid for work time lost as a result of this section unless they work in another capacity for the City during that time period. The employee will not be required to undergo evaluation by a substance abuse professional if the test result is 0.00 or greater but less than 0.02. If there is reasonable suspicion that the employee is under the influence of other drugs, reasonable suspicion procedures should be followed. **Note:** This section applies only in

limited situations. For example, if an employee last consumed alcohol more than four hours before work but still has a blood/alcohol level of 0.01 when they show up for work, they are not in violation of the Prohibitive Conduct rule but is subject to this section.

Notice and consent: Before a drug or alcohol test is administered, employees and job applicants will be asked to sign a consent form authorizing the test and permitting the release of test results to those officials with a need to know. The chemical screen consent form shall provide space to indicate current or recent use of prescription and over-the-counter medication.

All recruitment announcements for any position, including in-house recruitment and promotion, will disclose that a drug screening test will be required of the applicant.

Consequences of Violation of this Policy: Any employee who violates the **Prohibitive Conduct** and **Refusal to Test** rules of this policy shall be immediately removed from the safety-sensitive function and will be advised by the City of the resources available for evaluating and resolving drug and alcohol abuse problems. The employee is required to be evaluated by a Substance Abuse Professional (SAP). All evaluation and rehabilitation shall be at the employee's cost unless otherwise agreed by the City. An employee shall not be allowed to return to the safety sensitive function until they have a return-to-duty alcohol test result of less than 0.02 or a return-to-duty drug test with a verified negative result.

1. In addition, any employee who violates the **Prohibitive Conduct** and **Refusal to Test** rules of this policy may be subject to disciplinary action up to and including dismissal. Before discipline, reassignment, or dismissal is imposed, the employee shall have the opportunity to participate for up to 6 months in a rehabilitation program. The employee is responsible for all costs associated with the rehabilitation program unless otherwise agreed by the City.
2. Employees may be subject to discipline up to and including discharge as provided below if they test positive for drugs/alcohol as specified elsewhere in this policy:
 - a. Reasonable suspicion testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a reasonable suspicion drug test is a dischargeable offense
 - b. Post-accident testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a post-accident drug test is a dischargeable offense
 - c. Random testing:
 - i. 1st offense - A positive test shall result in a warning letter (subject to successful completion of rehabilitation)
 - ii. 2nd offense - A positive test is a dischargeable offense
 - iii. Refusal to submit to a random drug test is a dischargeable offense
 - d. Pre-employment:
 - i. 1st offense - A positive test shall result in disqualification
 - e. Return to duty testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a return to duty test is a dischargeable offense
 - f. Follow-up testing:
 - i. A positive test is a dischargeable offense
 - ii. Refusal to submit to a follow-up test is a dischargeable offense
 - g. Further grounds for discipline or dismissal under City policy include, but are not limited to:

- i. Refusal to submit to a rehabilitation program after testing positive
 - ii. Failure within six months to successfully participate in a rehabilitation program after receiving a positive test, or failure to pass a return-to-duty drug or alcohol test
 - iii. Evidence that the employee has substituted, adulterated, diluted or otherwise tampered with their urine sample
 - iv. Failure to contact a substance abuse professional within five regular working days after being notified of a confirmed (MRO certified) positive test for the improper use of alcohol or unauthorized substances
- h. During the period the City is awaiting an employee's test result for a post-accident test, reasonable suspicion test, or return-to-duty test, the City may transfer the employee to another position with or without a reduction in pay or benefits. The City also reserves the right to place an employee on paid or unpaid suspension. A determination as to whether an employee is placed in another position or placed on paid or unpaid suspension may be based on, but is not limited to: who is responsible for and/or the severity of the accident, if applicable; the observed condition of the employee, if applicable; the employee's work history; length of employment; current job performance, and the existence of past disciplinary actions. Action taken by the City under this subsection is a matter of City policy and is not imposed by federal law.
- i. Employee/applicant rights and responsibilities:
 - i. In the event of a confirmed positive test result, employees and job applicants shall have the opportunity to present an alternative explanation for the test result by contacting the Medical Review Officer (MRO). This shall be done within 72 hours after notification of the confirmed result. No further action will be taken if there is a justified explanation, or there is a reasonable doubt as to the accuracy of the result or chain of custody of the sample.
 - ii. Any employee with a positive test result may, upon a written request to the program administrator, have the right to any information relating to the test result and procedures. A job applicant may request information concerning the test result within 60 days after the decision on their employment application.
 - iii. Upon successfully participating in a rehabilitation program (within 6 months after it commences) and upon passing a return-to-duty drug and/or alcohol test, the employee is entitled to return to their previous job with full pay (but not back pay) and benefits, unless conditions unrelated to the employee's previous test make the employee's return impossible. The rehabilitation or treatment provider in consultation with the City shall determine whether the employee has successfully participated in the rehabilitation program. The City is not required to hold the employee's job open for more than 6 months after the employee commences a rehabilitation program.
- j. Confidentiality of information: Unless the employee or applicant consents, all information acquired by the City in connection with the testing processes is confidential and may not be released to any person other than to the employee or applicant who is tested, the Program Administrator, officials with a need-to-know, and the rehabilitation provider. The foregoing shall not prevent the release of information that is required or permitted by state or federal law, or the use of the information in any grievance procedure, administrative hearing or lawsuit relating to the imposition of the test or the use of the test results.
- k. Documents provided: The City will provide each person subject to this policy a copy of the policy. The City will also provide printed material which describes the effects of

alcohol and/or controlled substances on the individual's health, work, and personal life, as well as information on the signs and symptoms of alcohol or controlled substances and methods of treatment or intervention for drug or alcohol abuse.

What is substance use disorder? Drug addiction, also called substance use disorder, is a disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medicine. Substances such as alcohol, marijuana and nicotine also are considered drugs. When you're addicted, you may continue using the drug despite the harm it causes.

Drug addiction can start with experimental use of a recreational drug in social situations, and, for some people, the drug use becomes more frequent. For others, particularly with opioids, drug addiction begins when they take prescribed medicines or receive them from others who have prescriptions.

The risk of addiction and how fast you become addicted varies by drug. Some drugs, such as opioid painkillers, have a higher risk and cause addiction more quickly than others.

As time passes, you may need larger doses of the drug to get high. Soon you may need the drug just to feel good. As your drug use increases, you may find that it's increasingly difficult to go without the drug. Attempts to stop drug use may cause intense cravings and make you feel physically ill. These are called withdrawal symptoms.

Help from your health care provider, family, friends, support groups or an organized treatment program can help you overcome your drug addiction and stay drug-free.

Symptoms. Drug addiction symptoms or behaviors include, among others:

1. Feeling that you have to use the drug regularly — daily or even several times a day
2. Having intense urges for the drug that block out any other thoughts
3. Over time, needing more of the drug to get the same effect
4. Taking larger amounts of the drug over a longer period of time than you intended
5. Making certain that you maintain a supply of the drug
6. Spending money on the drug, even though you can't afford it
7. Not meeting obligations and work responsibilities, or cutting back on social or recreational activities because of drug use
8. Continuing to use the drug, even though you know it's causing problems in your life or causing you physical or psychological harm
9. Doing things to get the drug that you normally wouldn't do, such as stealing
10. Driving or doing other risky activities when you're under the influence of the drug
11. Spending a good deal of time getting the drug, using the drug or recovering from the effects of the drug
12. Failing in your attempts to stop using the drug
13. Experiencing withdrawal symptoms when you attempt to stop taking the drug

Life-changing complications. Dependence on drugs can create a number of dangerous and damaging complications, including:

1. **Getting an infectious disease.** People who are addicted to a drug are more likely to get an infectious disease, such as HIV, either through unsafe sex or by sharing needles with others.

2. **Other health problems.** Drug addiction can lead to a range of both short-term and long-term mental and physical health problems. These depend on what drug is taken.
3. **Accidents.** People who are addicted to drugs are more likely to drive or do other dangerous activities while under the influence.
4. **Suicide.** People who are addicted to drugs die by suicide more often than people who aren't addicted.
5. **Family problems.** Behavioral changes may cause relationship or family conflict and custody issues.
6. **Work issues.** Drug use can cause declining performance at work, absenteeism and eventual loss of employment.
7. **Problems at school.** Drug use can negatively affect academic performance and motivation to excel in school.
8. **Legal issues.** Legal problems are common for drug users and can stem from buying or possessing illegal drugs, stealing to support the drug addiction, driving while under the influence of drugs or alcohol, or disputes over child custody.
9. **Financial problems.** Spending money to support drug use takes away money from other needs, could lead to debt, and can lead to illegal or unethical behaviors.

When to see a doctor: If your drug use is out of control or causing problems, get help. The sooner you seek help, the greater your chances for a long-term recovery. Talk with your health care provider or see a mental health provider, such as a doctor who specializes in addiction medicine or addiction psychiatry, or a licensed alcohol and drug counselor.

Make an appointment to see a provider if:

1. You can't stop using a drug
2. You continue using the drug despite the harm it causes
3. Your drug use has led to unsafe behavior, such as sharing needles or unprotected sex
4. You think you may be having withdrawal symptoms after stopping drug use

If you're not ready to approach a health care provider or mental health professional, help lines or hotlines may be a good place to learn about treatment. The U.S. Department of Health and Human Services treatment facility locator at <http://findtreatment.samhsa.gov/> may also help you to find an appropriate provider. This site provides contact information for substance abuse treatment programs by state, city and U.S. Territory.

Employee Admission of Alcohol and Controlled Substances Use: The City encourages drivers who recognize that they may have a problem with drugs and/or alcohol to seek assistance for resolving that problem before they have a DOT violation due to a positive test result or because they engaged in other DOT prohibited conduct.

A driver who admits to a drug and/or alcohol problem may avoid a DOT violation. They will be given an opportunity to obtain a chemical use assessment from an appropriate drug and alcohol counseling and rehabilitation provider. The driver may utilize the Employee Assistance Program (EAP) to find an appropriate provider or complete their own search. All evaluation and rehabilitation shall be at the employee's cost unless otherwise agreed by the City. Prior to the assessment the driver must sign a release of information that will enable the City's Designated Employer Representative (DER) to receive the results of the assessment, and to receive subsequent reports related to the assessment, and the driver's successful completion of all recommendations for assistance.

The following conditions must apply to the driver's self-admission:

1. The driver's admission cannot be made during their on-duty time. It must occur prior to the driver's reporting for duty on any particular day.
2. The driver's admission cannot be made in an attempt to avoid a required DOT drug test. Self-reporting after being notified of a required test does not release the driver from the responsibility of taking the test, and it also does not qualify as a voluntary admission.
3. The driver must be removed from safety-sensitive functions, including driving.

A driver who self-identifies under this program will be given reasonable time to obtain the required assessment and assistance. The City will take no adverse action, such as discipline, reassignment or dismissal, against a driver who admits to drug and/or alcohol use as long as they:

1. Initiate the assessment process within five (5) days of the driver's disclosure.
2. Comply with all requirements of their rehabilitation provider and complete the return-to-work process within six (6) months of the driver's disclosure.

When the City's DER is satisfied that the driver has complied with their rehabilitation provider's recommendations for assistance, the driver may return to safety-sensitive functions, provided that:

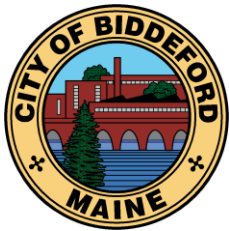
Prior to returning to safety-sensitive functions, the driver will be required to provide a negative DOT drug and/or alcohol test result on a return-to-duty test. The drug test will be conducted under direct observation.

A driver who cooperates and successfully complies with this program will not be considered to have had a DOT violation of prohibited conduct.

A driver who self-identifies under this policy and who then fails to comply with the rehabilitation provider's recommendations will be considered to have engaged in prohibited conduct and will not be permitted to return to safety-sensitive function until they have successfully complied with the SAP return-to-duty process. A DOT violation of prohibited conduct will be recorded. Once in compliance with the SAP return-to-duty process, prior to returning to safety-sensitive functions, the driver will be required to provide a negative DOT drug and/or alcohol test result on a return-to-duty test. The drug test will be conducted under direct observation.

A driver who self-identifies under this policy and fails to comply with their rehabilitation provider's recommendations may be subject to disciplinary action up to and including termination of employment.

Peer reporting: If you have suspicion, reason to believe or actual knowledge that a coworker is using alcohol or controlled substances during working hours, or may be dealing with a substance use disorder, you must report it to your supervisor immediately. The safety of everyone depends on it. Supervisors with appropriate reasonable suspicion training will then assess the situation and determine the correct course of action. The purpose of such a report is not to punish the employee in question but to maintain safety and provide support to the employee. Depending on the circumstances and the assessment of trained supervisors, the individual in question may be extended the same benefits as those offered to individuals that self-report.



CITY OF BIDDEFORD

205 Main St.
P.O. Box 586
Biddeford, Maine 04005

PERSONNEL COMMITTEE

Meeting Date: Tuesday, September 16, 2025

Meeting Time: 4:00pm

Agenda Item No: 3.c

Item Description: Request for RFP re: Wage Study

Submitted by: Diana DePaolo, Director of Human Resources

Key Terms: N/A

Executive Summary:

The Human Resources department would like to put out a Request for Proposal regarding a compensation study, based on previous committee meeting discussions and the established need outlined below.

Detailed Review:

The City of Biddeford has an opportunity to evaluate and enhance its current non-union wage scale. The last comprehensive wage study conducted by an external consultant was completed in 2016. Since that time, the City has made limited updates—primarily through annual cost-of-living adjustments (COLAs) and discretionary merit increases that were historically determined by the City Manager. However, there has been no formal mechanism for evaluating individual performance for compensation purposes or for ensuring equity and market competitiveness across all non-union positions.

Recent concerns have been raised by both employees and department heads, particularly among staff at the lower end of the wage scale. These concerns include:

- **Market Competitiveness:** Some staff have learned that their current wages are not aligned with those of peers in surrounding municipalities, particularly in comparable roles.
- **Hiring and Placement Inequities:** The City has faced challenges in placing new hires appropriately within the scale. Candidates with more experience may be placed higher on the scale but may not meet performance expectations once in the role. Conversely, less experienced hires may exceed expectations but are placed at the lower end of the scale with no path for early adjustment.
- **Lack of Merit-Based Flexibility:** Department heads currently lack the authority or mechanism to adjust wages for employees who significantly exceed performance expectations or who assume additional responsibilities—such as in the case of the Codes Department managing additional workloads due to natural disasters.

- **Subjective Decision-Making:** In the past, decisions regarding merit increases and salary adjustments were handled directly through the City Manager’s office, often without detailed explanation or a transparent process, leading to concerns about fairness and clarity.
- **Roles and Responsibilities:** The City has expanded and become more complicated to serve over the past several years. Almost no department has seen an increase in staff as the workload has expanded. The increased demand for task-related work is evident to staff, and there has been no increase to staffing or an adjustment to wages despite increasing work demands.

In recent years, the City has implemented a COLA adjustment each July 1. Prior to that, the City Manager determined various increases based on individual merit assessments. Currently, however, there is no formal merit-based structure in place, nor is there a clear methodology for internal equity review.

Additionally, HR staff are currently working through how to obtain and evaluate current Department Head comparables prior to the official survey being done by a consultant.

Recommended Options for Consideration:

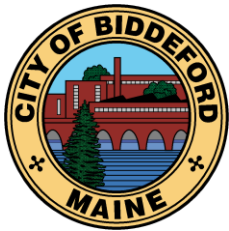
1. **Approve an External Compensation and Classification Study:**
 - a. This would provide an objective assessment of market competitiveness, internal equity, and position classification.
 - b. Although a study could not be completed before the July 1, 2025, fiscal year deadline, the City could consider retroactive implementation of any adjustments based on the study’s findings.

Funding Source:

N/A

Staff Recommendation:

The Human Resources Department recommends that the Personnel Committee approve the creation and distribution of a Request for Proposal regarding a wage study for City staff.



CITY OF BIDDEFORD

205 Main St.
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Biddeford, Maine 04005

PERSONNEL COMMITTEE

Meeting Date: Tuesday, September 16, 2025
Meeting Time: 4pm
Agenda Item No: 3.d
Item Description: Non-Union Employee Survey re: City Hall Hours
Submitted by: Diana DePaolo, Director of Human Resources

Supporting Information/Documentation:

- A draft version of the survey

Key Terms:

N/A

Executive Summary:

At the Council's request, the City is considering potential adjustments to City Hall's hours of operation. The Human Resources Department takes very seriously the impact that any change to building hours may have on employee recruitment, retention, and overall morale. Therefore, we will be distributing an employee survey to better understand how proposed schedule changes could affect staff in City Hall.

Detailed Review:

A change in City Hall hours could affect staff members and their personal and professional lives. Taking the step of conducting a survey is particularly important given that many employees were promised specific work hours and schedules at their time of hire.

We would appreciate your feedback on this process. Specifically:

- Are there particular questions or areas of concern you believe should be included in the survey?
- Do you have any general thoughts or considerations we should take into account before finalizing the draft?

Thank you for your input as we work to ensure any decision about building hours reflects both operational needs and the well-being of our workforce.

Funding Source:

N/A

Staff Recommendation:

N/A

City Hall Staff Work Schedule Survey

You may be aware that the City Council has recently been discussing City Hall business hours. While our current 4-day work week does not appear to be under consideration for change, there is a concern that having inconsistent business hours makes it difficult for the public to receive the services and support that they need. We would like to gather your feedback to help the City Council understand how potential changes to work schedules may affect City Hall staff and services.

This survey is anonymous. Please answer honestly. The survey should take about 5 minutes to complete.

Current Satisfaction

1. How satisfied are you with your current work schedule?

Very satisfied Satisfied Neutral Dissatisfied Very dissatisfied

2. How well does your current schedule support your ability to balance work and personal responsibilities?

Very well Well Neutral Poorly Very poorly

Preferences for Schedule Changes

1. If changes were made to the current schedule, which of the following would you prefer? (Select all that apply)

- No change to current schedule
- 7:00am – 4:00pm Monday through Thursday
- 7:30am – 4:30pm Monday through Thursday
- 8:00am – 5:00pm Monday through Thursday
- 7:00am – 5:00pm Monday through Thursday
- Flexible start and end times (within a set range)

2. On a scale of 1–5, how important is schedule flexibility to you? For this survey, 'schedule flexibility' means the ability to adjust your start and end times within a reasonable range, or to consider alternative workweek structures such as split shifts or a five-day work week if that works better for you. (1 = Not important, 5 = Extremely important)

1 2 3 4 5

Impacts on Work & Service Delivery

1. How do you think schedule changes might affect your ability to complete your work effectively?

2. How do you think schedule changes might affect service to the public, positively or negatively?

Impacts on Personal Life

1. How would changes to the start and end time of your work schedule impact the following?

Commute:

- Earlier start time would have positive impact
- Earlier start time would have negative impact
- Later start time would have positive impact
- Later start time would have negative impact
- Changes to the start time would have no impact
- Earlier end time would have positive impact
- Earlier end time would have negative impact
- Later end time would have positive impact
- Later end time would have negative impact
- Changes to the end time would have no impact

Comment: _____

Childcare/family responsibilities:

- Earlier start time would have positive impact
- Earlier start time would have negative impact
- Later start time would have positive impact
- Later start time would have negative impact
- Changes to the start time would have no impact
- Earlier end time would have positive impact
- Earlier end time would have negative impact

- Later end time would have positive impact
- Later end time would have negative impact
- Changes to the end time would have no impact

Comment: _____

Health and well-being:

- Earlier start time would have positive impact
- Earlier start time would have negative impact
- Later start time would have positive impact
- Later start time would have negative impact
- Changes to the start time would have no impact
- Earlier end time would have positive impact
- Earlier end time would have negative impact
- Later end time would have positive impact
- Later end time would have negative impact
- Changes to the end time would have no impact

Comment: _____

Work/life balance:

- Earlier start time would have positive impact
- Earlier start time would have negative impact
- Later start time would have positive impact
- Later start time would have negative impact
- Changes to the start time would have no impact
- Earlier end time would have positive impact
- Earlier end time would have negative impact
- Later end time would have positive impact
- Later end time would have negative impact
- Changes to the end time would have no impact

Comment: _____

Open Feedback

1. What concerns do you have about potential schedule changes?

2. What benefits do you see in adjusting the schedule?

3. Do you have suggestions for how City Hall could implement schedule changes in a way that supports both staff and the community?

Department/Status

1. Which department do you work in? _____

2. How long have you been employed at City Hall? _____

3. Employment status: Full-time Part-time Other

Closing

1. Is there anything else you would like the City Council to know?