



*United States District Court
District of Hawaii
U.S. Pretrial Services Office*



*Carol M. Miyashiro, Chief
U. S. Pretrial Services Officer*

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**DRUG AND ALCOHOL TESTING PROCEDURES FOR VENDORS
U.S. PRETRIAL SERVICES OFFICE - DISTRICT OF HAWAII**

Utilizing a Purchase Order (PO) awarded to you by the U.S. Pretrial Services Office or the Blanket Purchase Agreement (BPA) awarded to your agency by the U.S. Probation Office, the Pretrial Services Office will be procuring specific substance abuse detection testing, urine collection, and/or treatment services from your agency. Please note that the Pretrial Services Office is financially obligated only to the extent of an order placed under the PO or BPA through a formal referral by the U.S. Pretrial Services Officer (USPSO). In the absence of a formal referral for specified services, your agency is not authorized to perform any services and will not be reimbursed for services rendered.

Each vendor is responsible for complying with the requirements described in the Statement of Work (SOW). To the extent the Pretrial Services Office “piggybacks” off the U.S. Probation Office’s BPA, all questions and issues pertaining to the terms and conditions of the BPA should be directed to the U.S. Probation Office.

Contact information for the Pretrial Services Office is provided and will be updated as necessary.

Please direct any questions or concerns to the following persons:

Terms of the BPA and U.S. Probation Office Lisa Jicha, Senior U.S. Probation Officer
808/541-1351

Terms of the NCPO and Pretrial Services Office Alison Thom, Senior USPSO
Request for supplies 808/541-1338

Pretrial Services billing and invoice issues Diane S. Ota, Data Quality Analyst
808/541-1342

Individual pretrial defendants Assigned U.S. Pretrial Services Officer

FAX documents to: 808/541-3507

U.S. PRETRIAL SERVICES OFFICE

The Pretrial Services Office and U.S. Probation Office, although “sister agencies,” are separate and distinct entities. The Pretrial Services Office is responsible for the supervision of persons charged with federal misdemeanor and felony crimes prior to conviction and sentencing. **These persons under pretrial services supervision (pretrial defendants) have not been convicted and/or sentenced and are presumed innocent. As such, pretrial defendants should never discuss the specifics of their charges with any collection and/or treatment personnel.** By contrast, the U.S. Probation Office supervises persons post-conviction (offenders); these offenders have already been convicted and sentenced and have completed any term of imprisonment that has been imposed.

Because the Pretrial Services Office and U.S. Probation Offices are separate, they receive separate budgets and are independently accountable for the funds expended on services and supplies. It is therefore critical that client records, billing, and alcohol/drug testing supplies are maintained separately and not co-mingled.

All questions, concerns, observed behavior and/or suspicions about a pretrial defendant or information received from a pretrial defendant must be referred to the assigned U.S. Pretrial Services Officer in a timely manner. Likewise, any billing questions or requests for supplies for pretrial defendants must be referred to the appropriate person at the Pretrial Services Office.

The primary contact person for the Pretrial Services Office is:

**Alison Thom Drug and Alcohol Treatment Specialist (DATS)
Senior U.S. Pretrial Services Officer
808/541-1338**

REFERRAL FOR SERVICES

Utilizing a PROB 45 Program Plan (PROB 45), the Pretrial Services Office will refer a pretrial defendant for services. (*See Attachment A*) The specific services to be rendered will be noted on the PROB 45. Vendors are not to exceed or deviate from the specified services, and any unauthorized services will be not reimbursed. The PROB 45 should include a photograph of the pretrial defendant to assist the vendor in confirming the defendant's identity. However, a photo may not be included if the U.S. Pretrial Services Officer confirms the defendant possesses a government-issued photo identification.

The vendor's personnel must verify the identity of the pretrial defendant each time he or she appears for treatment or drug/alcohol collection services. This should be accomplished with a valid photo identification, whenever possible.

The PROB 45 and other referral documents will be forwarded to the vendor by FAX or U.S. Postal mail. Confidentiality regulations prohibit the use of electronic mail (e-mail) at this time. E-mails are a prohibited means of communication if they contain the defendant's name or initials.

HIPAA / RELEASE OF CONFIDENTIAL INFORMATION

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 has changed the record keeping requirements and impacted the release of confidential information pertaining to alcohol/drug detection testing, urine collection, and treatment services. Whereas treatment and other records were previously considered confidential and could not be released to the client or any other person without the authorization of the Pretrial Services Office, HIPAA permits release under certain limited circumstances.

- (1) HIPAA gives the client (pretrial defendant) the right to request certain records directly from the agency providing the services. Only the pretrial defendant (not a third party) can request and receive the information. Defense counsel or others purporting to represent the pretrial defendant have no right to review and copy confidential records. Of course, nothing precludes the pretrial defendant from disseminating copies that he or she legally receives.
- (2) The pretrial defendant must execute a signed waiver with the service provider.
- (3) The following records are not subject to release:
 - ◆ Psychotherapy notes, including substance abuse counselors' therapy notes.
 - ◆ Information that a third party provides on a confidential basis. Please note that the U.S. Pretrial Services Officer can be considered a third party and can request that information remain confidential. If in doubt, consult the U.S. Pretrial Services Officer.
 - ◆ Information that could put a third party at risk.
- (4) The following records may be released to a pretrial defendant who signs a waiver:
 - ◆ Medication a pretrial defendant is prescribed and the monitoring of the medication.
 - ◆ Start and stop dates of counseling.
 - ◆ Frequency of treatment attendance and the modalities the pretrial defendant has been involved with.
 - ◆ Results of clinical tests.
 - ◆ Summaries of diagnosis, functional status, treatment plans, symptoms, prognosis and progress to date.
 - ◆ Monthly treatment reports.
- (5) **The assigned U.S. Pretrial Services Officer should be notified if/when a pretrial defendant requests their substance abuse testing and treatment records. Notification must be timely and can occur by telephone or fax.**

Please note that the Statement of Work, section C(f)(5), states that vendors will not act as an advocate for the client in any legal or administrative proceeding unless such action is approved in writing by the Chief U.S. Pretrial Services Officer.

The Administrative Office of the U.S. Courts (AO) has issued an *Authorization to Release Confidential Information (Drug or Alcohol Abuse Programs)* that meets the requirements of HIPAA (*see Attachment B*). All pretrial defendants will be required to sign this release form; failure to do so will be reported to the Court and treated as a violation of the conditions of pretrial release. A copy of the signed release will be forwarded with each referral. Each vendor will be responsible for obtaining the signature of the pretrial defendants on any vendor-specific release forms.

Please note, confidentiality regulations governing pretrial defendants are statutorily mandated, and are located in Title 18, United States Code § 3153 (c). **Because of the pre-conviction status of pretrial defendants, all pretrial services information is confidential and cannot be released to any third party, including a state or local court, without the explicit authorization of the Pretrial Services Office.** Release of information to the pretrial defendant is governed by HIPAA regulations, as noted above.

Correspondence

Written correspondence to/from the vendor and the Pretrial Services Office must be in the form of a fax or U.S. Postal mail. The use of electronic mail (e-mail) is prohibited under HIPAA if it includes the name of a defendant or the initials of a defendant. The U.S. Pretrial Services Officers have been instructed not to use e-mail to request updates about treatment services. Likewise, information from the vendors must be faxed or mailed to the Pretrial Services Office.

The AO is in the process of making changes to the Statement of Work which would allow e-mail correspondence under specific circumstances. Further, the AO is in the process of creating a secure e-mail system, which would be HIPAA compliant.

Contact the U.S. Pretrial Services DATS officer should you have questions about e-mail or other types of correspondence.

ALCOHOL/DRUG TESTING SUPPLIES AND INVENTORY

The Pretrial Services Office will provide each vendor with certain alcohol/drug testing supplies for use in the alcohol/drug detection testing and urine collection of pretrial defendants. Vendors must use the supplies provided; use of other alcohol or drug testing supplies is not authorized without prior approval.

The drug testing supplies provided by the U.S. Pretrial Services Office are not for use on any other clients, including offenders referred by the U.S. Probation Office. Under limited circumstances, the U.S. Pretrial Services DATS officer or the U.S. Probation Office DATS officer may provide authorization to a vendor to use drug testing supplies of the other agency. Drug testing supplies are required to be maintained separately and they cannot be co-mingled. All supplies must be kept in a secured area and protected from loss, theft, and waste.

Each vendor is required to safeguard and account for the drug testing supplies provided by the Pretrial Services Office. An inventory reconciliation process will occur quarterly and as otherwise needed, and each vendor will be required to document the quantity of drug testing supplies in its possession. This will enable the vendor to better predict what supplies will be needed and insure that the request for supplies is submitted in a timely manner. Furthermore, this will insure that the federal government's limited resources are accounted for and not subject to waste, fraud, or loss.

The Pretrial Services Office will provide the vendors with the following alcohol/drug testing supplies.

- (1) Non-Instrumented Drug Tests (NIDT) for alcohol and drug detection
- (2) Bottles for urine collection
- (3) Chain of custody forms required by the national contract laboratory
- (4) Mailing supplies for transport to the national contract laboratory
- (5) Specialized testing devices or supplies (e.g., droppers for Refractometer)

All drug testing supplies must be ordered through the Pretrial Services Office and are not to be ordered directly by the vendor. Vendors who order unauthorized supplies or are unable to account for the supplies previously provided, will be required to pay for these supplies.

“NO SHOWS” FOR SERVICES

As soon as possible, but no later than 24 hours following a drug test and/or scheduled counseling session, the vendor must notify the Pretrial Services Office of any pretrial defendant who fails to appear for their drug tests and/or counseling sessions.

The required method of notification is through a fax to the office. If requested by the U.S. Pretrial Services Officer or deemed appropriate by the vendor, a telephone call can be made directly to the assigned officer. However, a telephone call would be in addition to, rather than in place of, a fax notification.

MONTHLY CALENDAR

Vendors must prepare a monthly calendar to be submitted to the U.S. Pretrial Services DATS Officer via fax or e-mail noting the dates of the random drug tests. The monthly calendar should be provided prior to the start of each month. Any amendments to the drug testing schedule should be faxed to the U.S. Pretrial Services DATS Officer. The calendar may only be provided to the DATS officer.

COLOR CODE SYSTEM

The Pretrial Services Office has adopted the following color code system for all vendors:

ORANGE	Six (6) tests/month
RED	Four (4) tests/month
WHITE	Two (2) tests/month
BLUE	One (1) test/month

Please note this is the same color code system adopted by the U.S. Probation Office. **If pretrial defendants and probation offenders will be reporting for drug testing on the same days, vendors must be vigilant to use the proper chain of custody forms and testing supplies of the Pretrial Services Office for pretrial defendants only.** Chain of custody forms and drug/alcohol testing supplies cannot be used interchangeably.

The Pretrial Services Office reserves the right to modify the number of tests per color or color code system due to cost containment budgetary constraints.

EXTRA QUARTERLY TESTS

To insure the integrity of the “random” drug testing process, on a quarterly basis, each vendor will be directed to add an extra testing day for each of the color codes noted above. For example, ORANGE would have seven (7) tests, RED five (5) tests, WHITE three (3) tests, and BLUE two (2) tests.

DRUG TESTING AND TREATMENT SERVICES

For pretrial defendants who participate in drug testing as well as counseling services, vendors must insure that drug testing occurs in a random and unscheduled manner. Therefore, it is generally not appropriate to collect a drug test on a scheduled counseling day. These services are mutually exclusive of one another and therefore should be scheduled separately.

TERMINATION OF SERVICES

The Pretrial Services Office will submit a PROB 45 via fax which will note the effective date that any services previously authorized are to be terminated. Any billing for services that exceeds the PROB 45 or are not listed on the PROB 45, will not be paid by the Pretrial Services Office.

VENDOR MONITORING VISITS AND REPORTS

As noted in the Statement of Work, monitoring visits will be conducted within 90 days of the award of the BPA, and prior to exercising the option years. Additional monitoring visits may occur at the discretion of the U.S. Probation Office or Pretrial Services Office.

The U.S. Probation Office is primarily responsible for conducting these monitoring visits and may be accompanied by the U.S. Pretrial Services DATS Officer. A written report outlining the results, any deficiencies, and areas of compliance will be prepared, with a copy provided to the vendor. The vendor will be expected to address any concerns noted in the report in a timely manner.

In addition, the U.S. Pretrial Services DATS Officer will maintain periodic contact and may schedule community visits to insure the integrity of the substance abuse testing and treatment programs.

INTEGRITY OF ALCOHOL/DRUG TESTING PROGRAM

The integrity of a substance abuse testing program is critical to the mission of the Pretrial Services Office. Pretrial defendants are released from custody pending conviction and/or sentencing with the expectation that they abstain from alcohol and/or drug use. Pretrial defendants are prohibited from alcohol and/or drug use pursuant to a court order and noncompliance may result in the revocation of their release status. Moreover, pretrial defendants who use/abuse alcohol and/or drugs while in the community pose a safety risk to others and the detection of illicit drug use and timely intervention are therefore critical.

To minimize and prevent integrity breaches in the substance abuse collection and testing process, the following guidelines are provided:

- (1) All collectors must be properly trained and periodically retrained on the proper protocol for observing, handling, and testing a urine sample. The collection protocol is described in the Statement of Work. The Non-Instrumented Drug Tests (NIDT) testing protocol must be followed at all times.
- (2) All collectors must adhere to the established protocol at all times, even if they believe they “know” the pretrial defendant and do not suspect drug use. Collectors who allow themselves to “trust” and “like” a pretrial defendant, may not exercise the appropriate level of vigilance required to insure the integrity of the testing process.
- (3) Except in rare circumstances, urine samples must be observed. Observation is by a same-sex collector only. Unobserved collection has limited value. If an unobserved collection is unavoidable, the collector must follow the established protocol and send the sample to the national laboratory. An adulteration test will automatically be conducted by the national laboratory.
- (4) Collectors must be vigilant to observe and detect the use of any subterfuge devices by male and female pretrial defendants.
- (5) Collection personnel schedules should be periodically changed to insure that no one becomes too comfortable with the pretrial defendants or too complacent about the testing protocol.
- (6) Other collection personnel or management should periodically observe the urine collection process to insure the integrity of the process.
- (7) To the extent possible, two personnel should be involved in the collection process to insure that a sample is actually taken from a pretrial defendant, the sample is not altered or replaced prior to the testing, and a test using the NIDT is accurately conducted and recorded.

NON-INSTRUMENTED DRUG TESTS (NIDT) COLLECTION AND TESTING PROTOCOL

General Procedures

- (1) **Verify the NIDTs to be used**
Use NIDTs provided by and belonging to the Pretrial Services Office only! Verify the expiration date and use the NIDTs with the shortest shelf life first. Do not use any NIDTs that have expired; contact the Pretrial Services Office to arrange to return any expired NIDTs. Check the PROB 45 or any special instructions of the Pretrial Services Office to determine which NIDTs to use in testing. Record the NIDT on an NIDT Log for inventory and tracking purposes (*See Attachment C*).

- (2) **Complete the top portion of the On-Site Drug Testing Program Form**
(*See Attachment D*)
This form must be reviewed with and completed for each pretrial defendant subject to drug or alcohol detection testing. The pretrial defendant must list all medications taken within the past 72 hours. If he or she states “none,” the form must reflect “none.” Have the pretrial defendant sign and date the form, acknowledging an understanding of the on-site NIDT testing program. The collector must also sign and date the form.

- (3) **Observe the collection of the urine sample, adhering strictly to the collection protocol**
All urine specimens must be observed by a same sex collector. The collector must adhere to the established protocol for urine collection at all times. Any deviation from the protocol can render the urine specimen invalid. Any unobserved sample(s) must be sent to the national contract laboratory.

- (4) **Check the temperature of the specimen by using the temperature strip (optional)**
All urine temperatures should be in the range between 90 and 100 degrees. The time from urination to temperature is critical and in no case will exceed four (4) minutes. If the temperature of the urine sample is not within the normal limits, the specimen should be discarded and the defendant should be required to provide a second sample. The assigned U.S. Pretrial Services Officer should also be notified about the situation.

- (5) **Follow the instructions for use of the specific NIDT**
Specific instructions are provided for reference. (*See Attachment E*)

If the NIDT results NEGATIVE for alcohol or illicit drugs, the urine sample may be discarded. It is not necessary to fax the On-Site Drug Testing Form to the Pretrial Services Office if the results are negative.

If the NIDT results POSITIVE for alcohol or illicit drugs, prepare to forward the urine sample to the national contract laboratory for confirmation. Also, provide the Pretrial Services Office with a copy of the On-Site Drug Testing Form noting the presumptive positive via a fax within 24 hours.

All NIDT devices used must be recorded on a log, regardless of the negative or positive results, for inventory and tracking purposes.

- (6) **Complete the middle portion of the On-Site Drug Testing Program form**
List the type of NIDT device(s) used and whether the NIDT test resulted POSITIVE or NEGATIVE.

If POSITIVE, indicate which drug(s) caused the presumptive positive result. Prepare the specimen for shipment to the national contract laboratory. List the chain of custody number on the form and the date the sample was sent to the national contract laboratory. Also indicate the date the result was faxed to the Pretrial Services Office.

- (7) **Preserve the chain of custody at all times!**
The pretrial defendant must be present during all phases of the drug/alcohol testing procedures. Chain of custody protocol must be observed and preserved at all times.

- (8) **Refractometer**
This device measures the weight of water versus the weight of urine in a sample. Any measurement below 1.003 indicates a diluted sample and is to be sent to the national contract laboratory. Prepare to forward the urine sample to the national contract laboratory for confirmation. Also, provide the Pretrial Services Office with a copy of the On-Site Drug Testing Form noting the refractometer results via a fax within 24 hours.

IMPORTANT: NEVER DISCUSS THE RESULTS OF ANY DRUG TEST WITH A PRETRIAL DEFENDANT, EXCEPT TO ADVISE THE PRETRIAL DEFENDANT THAT ANY PRESUMPTIVE POSITIVE RESULT WILL BE REPORTED TO HIS/HER U.S. PRETRIAL SERVICES OFFICER. ANY QUESTIONS MUST BE DIRECTED TO THE PRETRIAL DEFENDANT'S ASSIGNED OFFICER.

PROCEDURES FOR COLLECTION AND FORWARDING OF URINE SPECIMEN TO NATIONAL CONTRACT LABORATORY

Once the urine specimen has been properly collected (following the established protocol outlined above and in the Statement of Work), the urine specimen shall be tested using the procedures for the specific NIDT device.

A Custody and Control Form (CCF) (*see Attachment F*) must be completed and the specimen forwarded to the national laboratory for testing in the following circumstances:

- ◆ If the urine collection process was UNOBSERVED;
- ◆ If the NIDT revealed a presumptive positive for any substance;
- ◆ If the urine specimen appears diluted or has a refractometer reading below 1.003;
- ◆ If the urine specimen appears odd in color or appearance, has an odd smells, or otherwise suspect; or
- ◆ If the U.S. Pretrial Services Officer has directed that a special test be conducted by the national laboratory

SECURING THE URINE SPECIMEN

- (1) The collector and donor must maintain visual contact of the specimen until the specimen is secured in the bottle. **The top of the bottle must be screwed on tightly to prevent leakage!**
- (2) The collector will date the security seal (found on the bottom portion of the CCF).
- (3) The collector will apply the tamper-evident security seal on the bottle, centering over the cap of the specimen bottle so that it extends down both sides of the container.

CUSTODY AND CONTROL FORM

- (1) **For pretrial defendants, use the BLUE Custody and Control Form (CCF) or the form stamped "PRETRIAL."**
- (2) **If UNOBSERVED, mark "U" (i.e., unobserved) on the CCF.**
Record the "U" on the Date Collected line, behind the date of Collection.
Forward the urine specimen directly to the national laboratory, regardless of whether the NIDT tested negative or presumptive positive.

SELECT: **PRIMARY TEST PANEL**

Complete the remainder of the CCF following outlined procedures.

- (3) **If OBSERVED, select the type of test to be conducted.**
 - A. If **presumptive positive**, SELECT: **CONFIRMATION ONLY (SPECIFIC)**
You must then record the type of drug that the NIDT indicated was positive. In

the case of a presumptive alcohol test, specify the confirmation as “alcohol.”

- B. Any other special tests must be approved in advance by the U.S. Pretrial Services Officer.
- (4) Collector fills in date and records his or her name and initials in designated area.
 - (5) Select that testing is requested by “**Treatment Program.**”
 - (6) Record the pretrial defendant’s name.
 - (7) Record PACTS number in appropriate area. The PACTS number is **required** and will be found on the program plan.
 - (8) Check “**Pretrial Services.**”
 - (9) For the Pretrial Services Office, the Reason for Specimen is always “**Urine Surveillance.**”
 - (10) Complete Medical Questionnaire. Do not leave blank; note “none” if appropriate.
 - (11) The collector instructs the donor to read and complete the “Offender/Defendant Certification” section.
 - (12) After ensuring that all information is complete, legible, signed, and dated, the collector will sign and date the “Specimen Collector Certification” area.
 - (13) The collector does not sign the “Specimen Transfer Certification” signature area.
 - (14) The collector removes the first and last copies of the CCF. These will be for the collector’s records and must be filed accordingly.

Copy # 1 and 3: Retain these in the office/file.
 - (15) The collector places bottle in the specimen insert compartment (absorbent material side) of the tamper-evident specimen transport bag. The second copy of the CCF is inserted into the other compartment of the specimen bag.

Copy # 2: Insert into specimen bag and accompany specimen to lab.
 - (16) Seal both compartments of the specimen bag and place the tracking label (located on the bottom of the CCF) across the seal.
 - (17) Place the sealed specimen bag in a secure refrigerator with access limited to only

collectors and other authorized personnel. All specimens collected throughout the day should remain there until preparing the specimens for shipment to the laboratory at the end of the day.

- (18) At the end of each day (but prior to the Federal Express pick-up), prepare the specimens for shipment to the laboratory. ***IT IS IMPERATIVE THAT URINE SPECIMENS ARE FORWARDED TO THE NATIONAL LABORATORY EACH DAY AND WITHOUT ANY DELAY!**

SHIPPING/MAILING SPECIMENS TO NATIONAL LABORATORY

- (1) Prepare specimens for shipping as noted above.
- (2) Call Federal Express (**1-800-463-3339**) to arrange for a pick-up.
- (3) Place individual, sealed CCF bags (containing the specimen bottle, absorbent material, and CCF) into the appropriately sized Federal Express shipping box.
- (4) Securely seal box.
- (5) Affix the pre-printed, pre-paid Federal Express shipping stamp (airbill). This stamp is preprinted for delivery to the national laboratory.
- (6) Because it may be necessary to track the location and/or arrival date of a specimen, keep all Federal Express receipts. It would be helpful to record the specimens that are shipped out in the respective Federal Express shipments, otherwise tracking would not be possible.
- (7) Give prepared shipment to Federal Express driver.

PROCEDURE FOR HANDLING PRESUMPTIVE POSITIVE RESULTS

A vendor (and its employees) must never discuss the results of a drug or alcohol detection test with the pretrial defendant at any time! If a pretrial defendant wants to know what will happen as a result of a presumptive test, the vendor must refer the pretrial defendant to the instructions on the On-Site Drug Testing Program form, which the pretrial defendant reviewed and signed before submitting a urine specimen. This form advises that a presumptive positive result will be reported to the U.S. Pretrial Services Officer and that positive and/or negative specimens may be sent to the national laboratory for further testing. If the pretrial defendant poses additional questions or asks for further information, refer the pretrial defendant to the Pretrial Services Office (808-541-3412).

IMPORTANT!

- (1) All presumptive positive urine samples must be forwarded to the national contract laboratory for confirmation testing.
- (2) All presumptive positive test results must be reported to the Pretrial Services Office via fax within 24 hours! If appropriate due to the pretrial defendant's reaction to the presumptive positive, the collector is encouraged to also notify the officer immediately by telephone.
- (3) **NEVER DISCUSS THE RESULTS OF ANY DRUG TEST WITH A PRETRIAL DEFENDANT! ANY QUESTIONS MUST BE DIRECTED TO THE PRETRIAL DEFENDANT'S PRETRIAL SERVICES OFFICER.**

MEDICATION

Pretrial defendants may be permitted to take prescribed medication as long as the U.S. Pretrial Services Officer has been provided with proof of the prescription(s) and medical necessity. The U.S. Pretrial Services Officer is responsible for verifying the validity of the medication, not the vendor. However, the collector must query the defendant about any medication recently used and accurately record the defendant's response.

Pretrial defendants with an alcohol restriction may not take any over-the-counter medication which contains alcohol.

The use of methadone or other synthetic drugs such as Marinol must be approved in advance by the U.S. Pretrial Services Officer. Contact the assigned officer immediately should a pretrial defendant seek the use of any synthetic drug.

Presumptive positive results due to medication(s) are to be sent to the national laboratory and handled in the same manner as a presumptive positive test, unless otherwise directed by the U.S. Pretrial Services Officer.

**ANY QUESTIONS MUST BE DIRECTED TO THE PRETRIAL DEFENDANT'S
PRETRIAL SERVICES OFFICER.**

BILLING AND INVOICES

The Pretrial Service Office must receive the invoice by the 10th of the following month. The invoice needs to include Part A, Part B, required defendant signature page(s), and Monthly Treatment Report(s). (*See Attachments G, H, I, J*)

All invoices are required to have an original vendor signature on Part A and all defendant signatures must be original.

The Statement of Work includes drug and alcohol testing in cost of residential substance abuse treatment. Therefore, the residential treatment vendor shall not submit additional billing for drug or alcohol testing for a defendant in residential treatment paid for by the U.S. Pretrial Services Office.

ANY QUESTIONS REGARDING BILLING SHOULD BE DIRECTED TO THE DATA QUALITY ANALYST OR THE U.S. PRETRIAL SERVICES DATS OFFICER.

TREATMENT SERVICES CONTRACT PROGRAM PLAN

Client Identifying Information

Client:	Tide, Roll	PACTS #:	2501	Photo Not Available
Address:	954 Buffalo Cr San Antonio TX 78229	Pretrial/Post Conviction:	Pretrial	
Officer:	Brink, Debra	Client Phone:	210-854-2121	
Officer Phone:	210-301-6324	DOB:	08/08/1976	

Provider Information

Provider:	ABC Treatment	Procurement No:	0311-2009-RNJJ
Provider Location:	ABC-Downtown	Effective Date:	04/21/2009
Attn:	Carol Williams	Termination Date:	
Location Address:	211 Constitution Avenue Washington DC 2000		
Phone:	202-555-5555		
Fax:	202-666-6666		

Authorized Services

Your agency is authorized to provide the following services beginning on the plan effective date indicated above. Any services provided outside of those listed below and/or outside the Effective and Termination Dates of the Plan will not be authorized for payment.

Services Ordered

Project Code	Description Of Services	Phase	Frequency (Units)	Interval	Copay Amount (per unit)
2010	Individual Substance Abuse Counseling		1.0	Weekly	\$0.00
2020	Group Substance Abuse Counseling		2.0	Monthly	\$0.00

Instructions to Provider Regarding Client Needs and Goals of Treatment

Officer: Brink, Debra

Referral Agent:

Client: Tide, Roll

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION
(DRUG OR ALCOHOL ABUSE PROGRAMS)

I, _____, the undersigned,
(Name of Client)
hereby authorize _____ to release confidential
(Name of Program)
information in its records, possession, or knowledge, of whatever nature may now exist or come to exist to the United States
Pretrial Services Office for the _____ United States District Court _____ District of _____ Hawaii _____.
(Name of Court) (State)

The confidential information to be released will include: date of entrance to program; attendance records; urine testing results; type, frequency and effectiveness of therapy; general adjustment to program rules; type and dosage of medication; response to treatment; test results (psychological, vocational, etc.); date of and reason for withdrawal from program; and prognosis.

The information which I now authorize for release is to be used in connection with my participation in the aforementioned program which has been made a condition of my pretrial release.

I understand that this authorization is valid until my release from supervision, at which time this authorization to use or disclose this information expires. I understand that information used or disclosed pursuant to this authorization may be disclosed by the recipient and may no longer be protected by federal or state law.

I understand that I have the right to revoke this authorization, in writing, at any time by sending such written notification to the program's privacy contact at:

(Name and Address of Program)

I understand that if I revoke this authorization to release confidential information, I will thereby revoke my authorization to further disclosure of such information. I also understand that revoking this authorization before I satisfy the condition of my supervision that requires me to participate in the program will be reported to the court. My revocation of authorization under such circumstances could be considered a violation of a condition of my pretrial supervision.

(Signature of Parent or Guardian, if Client is a Minor)

(Signature of Client)

(Date Signed)

(Date Signed)

(Name & Title of Witness)

(Date Signed)

ON-SITE ALCOHOL/DRUG TESTING DEVICE LOG DISTRICT OF HAWAII

NAME OF VENDOR: _____

MONTH: _____

#	DATE	CLIENT	NITD (List type)	RESULT (POS/NEG)	COLLECTOR	SENT TO LAB? DATE	COMMENTS
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							

Revised 2/2011

U.S. PRETRIAL SERVICES OFFICE DISTRICT OF HAWAII
ON-SITE DRUG TESTING PROGRAM - CONTRACT AGENCY

The U.S. Pretrial Services Office for the District of Hawaii utilizes Non-Instrumented Drug Testing Devices (hand-held tests) to detect for the prohibited use of controlled substances.

The hand-held devices are used to preliminarily determine the presence of any controlled substances in the urine. If the hand-held devices test presumptively positive for controlled substances, the urine specimen will be forwarded to the national laboratory for further testing and confirmation. Additionally, negative results may also be forwarded to the national laboratory for further testing and confirmation.

I agree to fully cooperate with the on-site drug testing program. I certify that the urine specimen I have provided on this date is my own and has not been adulterated or otherwise tampered with. I have read and understand this notice.

I have taken the following prescription and/or over-the-counter medication(s) within the past 72 hours: _____

(CLIENT MUST ALWAYS COMPLETE THIS! SPECIFY MEDICATION TAKEN OR NOTE "NONE.")

Client's name (Print)

Collector's signature

Client's Signature

Date

Date

PRESUMPTIVE TEST RESULTS

(All sections must be completed by vendor)

NIDT Device(s) Used: (1) _____ (2) _____ (3) _____ (4) _____

NIDT Test Result: **NEGATIVE** *(Check this if negative)*

POSITIVE *(If positive, note the type of drug detected)*

Amphetamine

Opiate/morphine

Methamphetamine

Benzodiazepines

MDMA

THC

Cocaine

Other: _____

TEMPERATURE: Is the specimen temperature within normal limits? **YES** **NO**
 (Between 90 and 100 degrees)

VENDOR REQUIRED TO SEND TO NATIONAL LABORATORY IF: PRESUMPTIVE POSITIVE, EVERY UNOBSERVED, OR WHEN COLOR OR TEMPERATURE APPEARS ABNORMAL

Specimen sent to national contract laboratory:

YES, Date _____

Chain of Custody #: _____

If presumptive positive, vendor must fax a copy of this form to the U.S. Pretrial Services Office.

Fax Number: 541-3507

Copy sent to the U.S. Pretrial Services Office:

YES, Date _____

U.S. PRETRIAL SERVICES OFFICE
DISTRICT OF HAWAII

ATTACHMENT TO TREATMENT SERVICES PROCEDURES

VENDOR INSTRUCTIONS ON ALCOHOL AND DRUG DETECTION
TESTING INSTRUMENTS

February 2011

The specific style and type of alcohol and drug detection testing devices and instruments will vary depending upon the procurement results, new developments in technology and the substance abuse detection market, drug use trends in the district, efforts to subterfuge, officer preference, and other factors.

The following devices are currently used by the U.S. Pretrial Services Office for the District of Hawaii and our authorized vendors. However, this is subject to change at any time. Instructions on new instruments and devices will be updated as needed.

MP RAPID TEST 4 PANEL TEST STRIP

Non-Instrumented Drug Test (NIDT) for COC / mAMP / THC / OPI

A 4-panel test is to be used to test all pretrial defendants unless otherwise instructed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five to 10 minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) red lines appear.** One red line should be in the control region (C), and another apparent red or pink line should be in the test region (T). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region (T) will vary, but it should be considered negative whenever there is even a faint pink line.

- ◆ **POSITIVE: ONE(1) red line appears in the control region (C).** No line appears in the test region (T). This positive result indicates that the drug concentration level exceeds the detectable level.
- ◆ **INVALID: Control line (C) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line © failure. Review the procedure and repeat the test with a new test strip.

MP RAPID TEST SINGLE PANEL TEST STRIP OXYCODONE

Non-Instrumented Drug Test (NIDT) for Oxycodone (single panel)

This test is to be used selectively; either based on conditions of supervision, history of drug use or treatment, or as directed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five to 10 minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) red lines appear.** One red line should be in the control region (C), and another apparent red or pink line should be in the test region (T). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region (T) will vary, but it should be considered negative whenever there is even a faint pink line.
- ◆ **POSITIVE: ONE (1) red line appears in the control region (C).** No line appears in the test region (T). This positive result indicates that the drug concentration level exceeds the detectable level.
- ◆ **INVALID: Control line (C) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line © failure. Review the procedure and repeat the test with a new test strip.

MP RAPID TEST SINGLE PANEL TEST FOR MDMA

Non-Instrumented Drug Test (NIDT) for MDMA

This test is to be used selectively; either based on conditions of supervision, history of drug use or treatment, or as directed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five to 10 minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) reddish/purple lines appear.** One red line should be in the control region (CNTRL), and another apparent red or purple line should be in the test region (MAMP/MDMA). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region will vary, but it should be considered negative whenever there is even a faint reddish/purple line.
- ◆ **POSITIVE: ONE (1) reddish/purple line appears in the control region (CNTRL).** No line appears in the test region. This positive result indicates that the drug concentration level exceeds the detectable level.
- ◆ **INVALID: Control line (CNTRL) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line (CNTRL) failure. Review the procedure and repeat the test with a new test strip.

MP RAPID TEST SINGLE PANEL TEST FOR METHADONE

Non-Instrumented Drug Test (NIDT) for Methadone

This test is to be used selectively; either based on conditions of supervision, history of drug use or treatment, or as directed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five to 10 minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) reddish/purple lines appear.** One red line should be in the control region (CNTRL), and another apparent red or purple line should be in the test

region (MAMP/MDMA). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region will vary, but it should be considered negative whenever there is even a faint reddish/purple line.

- ◆ **POSITIVE: ONE (1) reddish/purple line appears in the control region (CNTRL).** No line appears in the test region. This positive result indicates that the drug concentration level exceeds the detectable level.
- ◆ **INVALID: Control line (CNTRL) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line (CNTRL) failure. Review the procedure and repeat the test with a new test strip.

REDITEST TEST SINGLE PANEL TEST FOR METHADONE

Non-Instrumented Drug Test (NIDT) for METHADONE

This test is to be used selectively; either based on conditions of supervision, history of drug use or treatment, or as directed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ With arrows pointing toward the urine specimen, immerse the test strip vertically in the urine specimen for at least five seconds. Do not pass the maximum line (MAX) on the test strip when immersing the strip. Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) reddish/purple lines appear.** One red line should be in the control region (CNTRL), and another apparent red or purple line should be in the test region (MAMP/MDMA). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region will vary, but it should be considered negative whenever there is even a faint reddish/purple line.
- ◆ **POSITIVE: ONE (1) reddish/purple line appears in the control region (CNTRL).** No line appears in the test region. This positive result indicates that the drug concentration level exceeds the detectable level.

- ◆ **INVALID: Control line (CNTRL) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line (CNTRL) failure. Review the procedure and repeat the test with a new test strip.

REDITEST TEST 4-PANEL TEST

Non-Instrumented Drug Test (NIDT) for (COC/mAMP/THC/OPI)

A 4-panel test is to be used to test all pretrial defendants unless otherwise directed by the DATS officer.

Instructions for use:

- ◆ Remove the test strip from the sealed pouch in the presence of the pretrial defendant and use it as soon as possible.
- ◆ With arrows pointing toward the urine specimen, immerse the test strip vertically in the urine specimen for at least five seconds. Do not pass the maximum line (MAX) on the test strip when immersing the strip. Place the sample pad end into the urine specimen being careful to hold each pad in the urine without touching the plastic card.
- ◆ Place the test strip on a non-absorbent flat surface. Wait for the red line(s) to appear. The result should be read at five minutes. Do not interpret the results after 10 minutes.

Interpretation of results:

- ◆ **NEGATIVE: TWO (2) reddish/purple lines appear.** One red line should be in the control region (CNTRL), and another apparent red or purple line should be in the test region (MAMP/MDMA). This negative result indicates the drug concentration is below the detectable level. *Note - the shade of red in the test line region will vary, but it should be considered negative whenever there is even a faint reddish/purple line.
- ◆ **POSITIVE: ONE (1) reddish/purple line appears in the control region (CNTRL).** No line appears in the test region. This positive result indicates that the drug concentration level exceeds the detectable level.
- ◆ **INVALID: Control line (CNTRL) fails to appear.** Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line (CNTRL) failure. Review the procedure and repeat the test with a new test strip.

BREATH ALCOHOL TEST (.02%)

Non-Instrumented Drug Test (NIDT) for ALCOHOL

This test is to be used selectively; depending upon the conditions of supervision.

Instructions for use:

- ◆ Squeeze middle of unit to break the capsule.
- ◆ Rotate unit to distribute crystals in viewing area.
- ◆ Instruct the defendant to blow hard into unlabeled end for 10 seconds.
- ◆ Wait 30 seconds.

Interpretation of results:

- ◆ **NEGATIVE: Color of crystals do NOT change color.**
- ◆ **POSITIVE: Color of crystals change color.**
White = Alcohol content is less than .02%
Light Blue = Alcohol content is .02% or more

REFRACTOMETER

The U.S. Probation Office has provided a refractometer to several vendors to enhance the drug testing program. The U.S. Probation Office has agreed to allow the refractometer to be used on Pretrial defendants. The U.S. Pretrial Services Office will provide the vendor with the small plastic droppers to be used with the refractometer.

Instruction for use:

- ◆ Use a small plastic dropper to place three (3) drops on the small lens in the inset and press button for reading.
- ◆ Gently wipe the lens with soft tissue or toilet paper after each use.
- ◆ At the end of the day, the lens is to be gently wiped with an alcohol swab or antibacterial swab.

Interpretation of results:

- ◆ If the refractometer reading is below 1.003, the urine specimen must sent to the national laboratory for further testing.

**SAMPLE FORM
 IF PRESUMPTIVE POSITIVE ON NIDT
 COMPLETE MARKED AREAS**



Results Name & Address

US COURTS HIPT-HONOLULU
 300 ALA MOANA BLVD #7-222
 HONOLULU, HI 96850

ALISON THOM
 808-541-3412

Tests Ordered (Check all that apply)

- Primary Test Panel Secondary Test Panel Special Test Panel
- Confirmation Only (specify) _____
- Individual Special Tests (specify) _____

SPECIMEN ID INFORMATION

Case Officer Initials Date Collected / /

Collector's Name _____

01 Officer
 02 Treatment Program
 03 Other _____

Offender/Defendant Last Name _____

First Name _____

FACTS No. _____ Onsite/Test ID _____

- Reason For Specimen 01 Presentence Report 02 Substance Abuse Treatment 03 Mental Health Treatment
- 04 Urine Surveillance 05 Pretrial Report 06 Other (specify) _____

MEDICAL QUESTIONNAIRE

Medicine(s) Name _____ Reason for Use _____ Date Used _____

Offender/Defendant Certification

I certify the specimen I have provided on this date is my own and has not been adulterated. The specimen bottle was sealed in my presence. I have verified that the specimen number of the form, the barcode, and the specimen security seal are identical.

Specimen Collector Certification

I certify I collected the specimen identified by the specimen number on this form in accordance with the required collection procedures. I certify I applied the numbered security seal and barcode to the specimen bottle in the offender/defendant's presence. I have verified that the specimen number on the form, the barcode, and the specimen seal are identical.

Specimen Transfer Certification

I certify I prepared for transfer to Testing Laboratory the specimen identified by the specimen number on this form and have verified the identity of the specimen with its collection chain of custody documentation. I certify I applied the numbered security seal and barcode to the specimen bottle. I have verified the specimen number on the form, the barcode, and specimen security seal are identical.

Offender/Defendant Signature _____ Date _____ Collector's Signature _____ Date _____ Transferer's Signature _____ Date _____

Apply Barcode vertically on bottle



Use second seal & barcode for specimens screened on site.



Testing Laboratory _____

Collector's Initials _____ Date Collected _____



Testing Laboratory _____

Collector's Initials _____ Date Collected _____



B01617233 B01617233

B01617233
SPECIMEN NO.



B01617233
SPECIMEN NO.



COLLECTOR INSTRUCTIONS

- * COMPLETE - Specimen ID Information before collection
- * COLLECT - Specimen in accordance with Administrative Procedures
- * AFFIX - Security Seal and barcode to specimen bottle as illustrated above
- * ASK - Offender/Defendant to verify bottle was sealed in his/her presence
- * INITIAL - Initial security seal and enter date collected
- * ASK - Offender/Defendant to read, sign, and date Offender/Defendant Certification
- * SIGN - Specimen Collector Certification after sealing specimen bottle and applying security seal

Date _____

Page ____ of ____

**ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS
TREATMENT SERVICES INVOICE**

(PART A)

- | | |
|--|--|
| 1. Judicial District _____
2. Vendor _____
a. Address: _____

b. Telephone: _____ | 3. P.O./B.P.A.# _____
4. Service Delivery: From _____ To _____
5. Total # of Individuals Served: _____ |
|--|--|

Vendor's Certification: I certify that **all** expenditures and requests for reimbursement in this voucher are accurate and correct to the best of my knowledge and include only charges for services actually rendered to clients under the terms of the agreement and for which no other compensation has been received from sources other than the United States District Court.

Authorized Administrator

6. Project Code	7. Quantity	8. Unit Price	9. Total Price

Date _____

Page _____ of _____

**ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS
TREATMENT SERVICES INVOICE**

(PART B)

Subtotal all costs for each client listed below:

1. Client Name	2. Client Number	3. Dates of Service	4. Service Rendered	5. Quantity (Units)	6. Unit Price	7. Cost

