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Research in Action

James K. Stewart, Director

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Mandatory and Random Drug Testing in the Honolulu Police Department

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ACQUISITIONS

After more than 2 years of planning and consultations, the Honolulu Police Department (HPD) began a comprehensive drug testing program in October 1986. Unlike most police drug testing programs, the HPD program is not limited to testing for drug use based on reasonable suspicion.¹ Instead, it provides for three drug-test urinalysis groups. Two groups of officers are subject to frequent or periodic mandatory testing. The third and largest group is composed of tenured officers who may be randomly tested.

In general, police unions have strongly supported goals to maintain a drug-free workforce, but have stopped short of endorsing programs that involve random testing. The HPD drug testing program, however, was developed in cooperation with the union. The program also differs in that, unlike most police departments, the HPD affords officers an opportunity for treatment after a first positive urine test. The

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program also includes an unusual number of precautions to safeguard the chain of custody of urine samples and ensure accurate test results.

The HPD, with 1,800 sworn officers, received strong support for developing its program from the City of Honolulu. While the HPD program is not one that is easily replicated, other law enforcement agencies may be able to adapt some of Honolulu's procedures to meet their own needs.

Rationale for testing and using random selection

There are two main reasons why the HPD started a drug testing program. The first was related to public expectations about professionalism and integrity within the police department. Several drug-related incidents involving HPD officers occurred in 1984, including the arrests of several officers for off-duty possession and sale of controlled substances. As a result, there was a loss of public confidence in the department's ability to enforce drug laws. Drug testing was seen as one way to restore credibility.

The second was a concern about public safety, which might be jeopardized if the department did not do all it could to ensure that its members were fit to

perform their jobs. The department was aware of recent court decisions that held police departments responsible for ensuring that their officers were fit to carry weapons. In one case in New York City involving an officer who shot his wife and committed suicide, the court found the city liable because it "failed to address itself with due diligence to the problem of reasonably ensuring that police officers are fit to carry guns without endangering themselves or the public" (*Bonsignore v. City of New York*, 521 F. Supp. 397, 2d Cir. 1981).

At first, the HPD considered testing officers based on "reasonable suspicion" of drug use, rather than going the more controversial and expensive route of random testing. The courts had been allowing police to test tenured officers when a reasonable suspicion standard was applied.² This usually occurred in situations involving accidents, negligent acts, or observable signs of impaired work performance. But HPD administrators decided the reasonable suspicion standard left too much to human judgment and could be perceived as arbitrary.

The department opted, instead, for a program that was mathematically random and not subject to arbitrary manipulation or discrimination. The

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HPD tests for cocaine and marijuana only, since these are the primary drugs of abuse in Honolulu. Unlike other police departments whose random and mandatory testing programs have been challenged in court,³ HPD administrators worked with union representatives to develop procedures. This does not mean that program development has been trouble free, but so far, all procedural problems have been resolved either through negotiations with union representatives or as remedies of grievances filed. Although a court challenge is always possible, the department has reduced its chances of a civil suit, and none has been filed to date.

Program planning

Planning began in July 1984, when the department's research and development division was assigned to study employee drug testing methods and issues. By December, a preliminary report on the literature and legal issues was complete, and the police chief proposed that a drug testing program be developed. Over the next few months, department officials consulted with experts from private laboratories, the U.S. Army, and many other agencies. By May 1985, the department had completed its first draft of the drug testing program and opened discussions with the union. Honolulu officers are represented by the State of Hawaii Organization of Police Officers (SHOPO), an independent, nonaffiliated union.

Over the next 18 months, the program was revised three more times. The job of creating a fair, workable system involved four major tasks:

- Establishing the department's authority to test.
- Ensuring compliance with civil service regulations.
- Deciding on methods for testing urine

samples and determining who should perform the tests.

- Developing procedures to supervise and conduct the tests, handle and transport samples, document the chain of custody, and ensure confidentiality.

The draft policies were reviewed by the city's Corporation Counsel, the Department of Civil Service, and union representatives. At the same time, the department explored several possible ways to perform the tests: it would be necessary to conduct both screening tests of all urine samples in a batch and more sophisticated, expensive confirmation tests to verify positive results. Options included having the police department conduct screening tests inhouse, contracting with private labs, and using the city's health department to conduct tests.

The city was very supportive of the HPD program. A decision was made not to have the police or health department conduct tests because of the high cost of equipment, the potential drain on personnel, and concerns raised by the union over conflict of interest. Instead, the police department worked out a process to contract with two private laboratories. A local lab was retained to conduct screening tests, and the Mayo Clinic was selected to perform confirmation tests using gas chromatography/mass spectrometry (GC/MS), the most reliable method available. At that time, no lab on the island could perform GC/MS; also, administrators felt that the Mayo Clinic's outstanding reputation would help assure officers that every effort was being made to obtain accurate test results. (GC/MS is now being conducted by a laboratory in Honolulu.)

The HPD first wanted to demonstrate to the rank and file and the public that police administrators themselves were drug free and willing to be tested. The first pilot drug test in January 1986 was an unannounced cocaine and marijuana test of 50 administrators and managers. (None tested positive.)

Overview of current drug testing program

The drug testing program was established by the chief of police on October 15, 1986, as Honolulu Police Department Special Order 86-14. The order includes a policy statement, outlines basic responsibilities and procedures, establishes random and mandatory test groups, and describes the consequences of noncompliance and positive test results. In November 1986, the administrative bureau also distributed a publication that answers frequently asked questions about the program and the accuracy of urine tests for drugs.

Department policy on drug use.

Department policy prohibits "the illegal or unauthorized use of any controlled substance/drug." It states that "the prohibited drugs shall include all dangerous, harmful, and detrimental substances, marijuana, hallucinogens, and prescription drugs not properly prescribed for medical use." The policy further states that "all probationary or regular officers and helicopter pilots and/or observers shall submit to drug urinalysis screening tests." Preemployment medical tests are conducted by the city health department, and the police do not conduct drug screening tests of applicants. Recruits in the academy, however, are subject to drug tests. The HPD does not test civilian employees.

Administrative responsibilities.

Primary responsibilities for operating the testing program fall to 1) the major in personnel and 2) the major in Internal Affairs. The personnel officer is the overall coordinator and ensures that the program is administered equitably. This officer maintains records and correspondence on the program, and notifies the appropriate personnel of positive drug test results. Notification is given only after the second sample is confirmed by GC/MS.

The Internal Affairs officer ensures that all drug screening sites are monitored,

and investigates all cases involving confirmed positive results. This officer reviews investigative reports by element commanders on instances of refusal to submit a specimen or failure to appear for a test, and reports these instances to the personnel officer.

Element commanders (a captain or a lieutenant) or their designees (usually a lieutenant in charge of a watch) ensure that their personnel comply with the testing program and investigate refusals to take tests and failures to appear for testing. When informed of a confirmed positive test result, they must notify the affected officer and, according to civil service rules, place the officer on leave.

Drug urinalysis test groups

Mandatory test groups. Personnel with direct responsibilities for drug testing comprise "mandatory test level A." Members of group A are required to submit to testing on a regular basis. Included are all officers assigned to the Internal Affairs Unit, the personnel officer, and the assistant personnel officer. The decision to test group A is made by the deputy chief of police. The personnel officer must arrange the test within 48 hours of notification.

Officers in "mandatory test level B" frequently are required to submit to a drug urinalysis test. The personnel officer coordinates these tests, which generally occur more often than tests of "mandatory test level A" officers. The affected "level B" personnel are notified of a test through their element commanders. Members of this group include:

- Officers on initial probationary status.
- Officers directly involved in the investigation or authorized handling of illegal drugs.
- Helicopter pilots and observers.
- Canine handlers, Improvised Explosive Devices (IED) team members, and

Special Weapons and Tactics (SWAT) team members.

- Regular officers with a first confirmed positive test result.

Random testing groups. The "group assignment test level" is comprised of personnel who are subject to random testing. This includes all sworn personnel who are not in a mandatory test group.

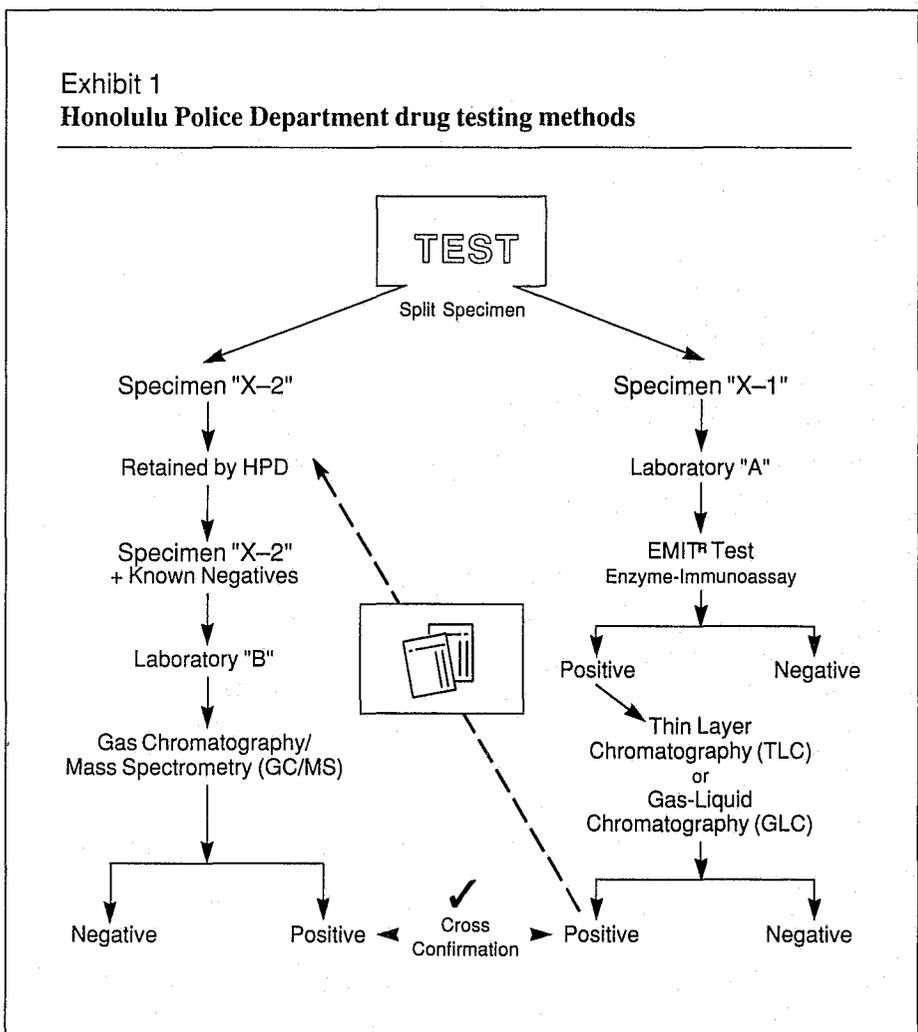
Officers in this category automatically belong to a random group based on their assignments in the department. Each of these random groups is given a reference number. For example, Watch B in

District 2 is assigned reference number 21. There are currently 26 random groups. Thus, it is groups—not individuals—that are randomly selected.

The selection of a group for testing is done by a probability sampling technique called "simple random selection with replacement." A computer-generated file of random numbers is used. The purpose is to ensure that each group has an equal probability of being selected each time a drug test is ordered.

Division commanders are given no more than 48 hours' notice that a group

Exhibit 1
Honolulu Police Department drug testing methods



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has been selected to report for testing. The group is notified verbally at rollcall. Officers then have 4 hours to submit a specimen. Only personnel on duty when notice is given are tested.

Testing procedures

Drug testing methods. A split sample is obtained from each officer tested. Sample X-1 is submitted to a local laboratory for screening. Sample X-2 is frozen and retained by the department, which stores it in a locked refrigerator in a secure area.

If sample X-1 shows positive results on the first screening test, it is tested again with a different screening method. If the second screening test is also positive, sample X-2 is sent to a different lab for confirmation. This series of tests, illustrated in exhibit 1, is explained below.

The first screening test uses an enzyme immunoassay technique (the EMIT^R test).⁴ This method depends on changes in enzyme activity when a drug is present. Immunoassay tests do not measure the quantity of drugs present, but indicate positive or negative results.

The amount of drug metabolites found in urine is usually measured in nanograms per milliliter (ng/mL). When EMIT thresholds for marijuana metabolites are set at low levels (e.g., 20 ng/mL or lower), it is possible for persons with positive test results to claim that the result occurred because of passive inhalation. To avoid this, the department requires that the EMIT tests be set at very high levels. For example, the department uses a threshold of 100 ng/mL for detecting marijuana. With this setting, positive results can only occur from marijuana smoking or ingestion and not from exposure to others who smoke it in a closed room, burning it, or handling it as evidence.

The use of one screening test (e.g., EMIT or another immunoassay test),

followed by a GC/MS test of positive samples, is a widely accepted practice. However, the HPD has added an interim step. Samples with positive results on EMIT are tested with either thin layer chromatography (TLC) or gas liquid chromatography (GLC). HPD administrators decided to add this second screening as a way of offering extra assurance to department members who lacked confidence in the immunoassay method. Further, the administration was aware that officers' careers and reputations depend on decisions that might have to be made and wanted to leave no room for error.

The EMIT, GLC, and TLC tests, when conducted and interpreted properly, can have a high degree of accuracy. Still, false positive readings are possible because of human, technological, or procedural errors, or because a detected substance has a molecular structure similar to the drug in question. When a person's job or freedom is in jeopardy, experts advise confirming positive screening test results with a different, more specific and more sensitive test. The most accurate method available for confirmation testing is GC/MS.

The GC/MS method can distinguish between closely related chemical compounds. This virtually eliminates the possibility of positive readings because of a cross-reaction with other substances. Since GC/MS tests require sophisticated equipment and highly skilled technicians, they are too expensive to use for screening. In the HPD program, if a specimen tests positive on both the EMIT and GLC or TLC, these results are confirmed by a second lab using GC/MS. The GC/MS test is performed on the frozen specimen.

As a quality control measure, any positive samples sent for confirmation are included with samples that had negative results. Only the HPD personnel officer knows which samples in the batch are negative. Results from the

GC/MS tests must match the results from the first lab exactly on all negative and positive samples before a specimen is deemed a definite positive.

Test site procedures and controls

Since some HPD substations are at least an hour's drive from headquarters, urine samples for EMIT tests are collected at the selected group's substation whenever possible. Officers are called off the road to report to the test area.

Before the program began, personnel officers visited and diagramed each substation. This was necessary for developing test site security, but it also gave officers an opportunity to ask questions and emphasized that the department was serious about moving forward with the program.

A document entitled "Drug Urinalysis Screening Program Procedures" gives test site personnel nearly 100 steps to follow in securing the test area; posting signs; collecting, sealing, and labeling samples; documenting the chain of custody; and, as much as possible, ensuring privacy. A separate document outlining drug test procedures is given to officers when they report to the test site. Officers sign this document and list on it any medications they may be taking.

Some of the safeguards in place at the test sites are listed below:

Securing the test area. Only personnel wearing badges are admitted to the test area once the test begins. Program personnel who are allowed to handle specimens wear yellow badges, other program personnel wear red, and officers being tested wear white.

Only three officers at a time are allowed into the test area, and only one is allowed in the restroom where the sample is obtained unobserved.

Internal Affairs oversees the positioning of test equipment, supplies, and signs; cordons off and posts signs at every possible exit and entry point; and checks all restrooms to be certain they are free of contraband and nonprogram personnel.

The division coordinator does a walk through to verify that the test area and restrooms have been secured.

An authorized observer from SHOPO, if present, is also briefed on procedures and may verify the secured perimeters and restrooms. This observer is not allowed in the secured area during actual processing.

Maintaining the integrity of the samples. A blue dye is added to the toilet water prior to the test, and specimen cups have disposable thermometer strips to measure the temperature of the urine, thus reducing the possibility of substituting another liquid or diluting the specimen.

Documenting the chain of custody. A specimen checkpoint log officer ensures that the same control number appears on the officer's sign-in sheet, badge, and two specimen cup evidence tags. The officer verifies this by initialing the evidence tags.

The officer signs for two bagged specimen cups. A specimen cup control officer affixes evidence tags to the cups. If the cups are contaminated in any way (e.g., they fall on the floor), the control officer escorts the officer back to the log officer, and the process begins again with a new control number, badge, and tags. The officer again affixes temperature strips to the cups.

The restroom monitor initials the tag on each specimen cup that contains at least 30 cm³ of urine and certifies that the reading on the temperature strip falls within the acceptable range.

Officers who produce the required samples turn them in at the specimen collection table. The control officer

ensures that the specimens are securely capped, attaches tamper-proof tape to each cup, places one cup in the lab transport container and one in the HPD transport container, and has the testee sign a specimen return form.

The checkpoint officer collects the white badges before the officers being tested leave the area to make sure they are not reused.

Until recently, voiding was observed by a laboratory employee of the same sex as the officer. On several occasions, both male and female officers had difficulty providing samples in the presence of an observer. In addition, the department became concerned that observation might conflict with privacy provisions of the Hawaii State Constitution. Because of these concerns, observation was discontinued, and the department began measuring the temperature of the urine to prevent and detect substitutions.

If an officer is unable to void, or provides less than the required amount, all items with his or her control number are clearly marked, initialed, and deleted from inventory. The officer must return within 4 hours to produce the required sample. At that time, the process begins again with a new control number, badge, and tags.

Disciplinary measures

Refusal to report for testing. The probationary period for HPD officers is 1 year. During this period, officers are not covered under the collective bargaining agreement. Dismissal from the force is likely for any probationary officer who refuses to be tested. The element commander, notified by Internal Affairs of the refusal, places the officer on leave in accordance with civil service rules, and an investigation is conducted. If the Administrative Review Board finds the officer in violation of directives, the chief will consider termination.

When regular officers refuse to be tested, they are also placed on leave until an investigation for violation of directives is completed. The personnel officer notifies the officer in writing of the consequences of this refusal, and assigns the officer to mandatory group B for a maximum of 12 months. In addition, the personnel officer requires that this officer take a second test within 5 days of the refusal. If the officer refuses to take or fails to appear for this second test, the personnel officer orders a third test within 5 days. A third refusal or failure to appear will result in the case being considered by the Administrative Review Board. The likely outcome is termination for three violations of a directive.

First confirmed positive result.

Probationary officers with confirmed positive test results are placed on leave according to civil service rules. After an investigation and finding of violation by the Administrative Review Board, the chief of police will consider termination. No rehabilitative opportunity is offered to probationary officers.

The first time a regular officer has a confirmed positive result, the following steps are taken:

- The personnel officer notifies the chief of police, the assistant chief for Internal Affairs, and the officer's element commander. Information on positive results is restricted and considered confidential.
- The element commander places the officer on leave.
- Internal Affairs conducts an investigation, and the case goes through the administrative review process.
- With the concurrence of the chief of police, the personnel officer instructs the officer to immediately enter a department-approved substance abuse treatment program.

The officer may take appropriate authorized leave to participate in

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Supreme Court rules on drug testing

In March 1989—more than 2 years after the Honolulu Police Department began its drug testing program—the United States Supreme Court ruled in two cases involving employee drug testing. In both cases, against fourth amendment challenges, the Court upheld the constitutionality of testing, but over strong dissents. Both cases were brought by employee unions. Neither case involved a specific action taken against someone who had already been disciplined, fired, or prosecuted because of a test.

In *Skinner v. Railway Labor Executives' Association*, No. 87-1555, March 21, 1989, the Court reviewed Federal Railroad Administration (FRA) regulations mandating blood and urine tests of employees involved in certain train accidents and authorizing tests of employees who violate certain safety rules. As part of its rationale for testing, the FRA had cited at least 21 significant railroad accidents involving drug or alcohol use, with 25 fatalities, 61 nonfatal injuries, and property damage of \$19 million.

In *National Treasury Employees Union v. Von Raab*, No. 88-1879, March 21, 1989, the Court examined United States Customs Service regu-

lations requiring urine tests of employees seeking transfer or promotion to three positions: 1) those with direct involvement in drug interdiction; 2) those requiring the carrying of firearms; and 3) those requiring the handling of classified information.

In both cases, the Court held that the tests constituted searches within the meaning of the fourth amendment, bringing it to the question of whether they were reasonable searches. Although most searches must be conducted under a warrant based on probable cause, the Court has recognized exceptions when "special needs" exist. In *Railway Labor Executives*, the Court, in a 7-2 decision, found the Government's interest in regulating railroad employees' conduct is such a special need and held that the FRA regulations were reasonable despite the absence of the "individualized suspicion" that is generally required. Justice Marshall, joined by Justice Brennan, dissented, objecting to the Court's "reading the probable cause requirement out of the fourth amendment."

In *National Treasury Employees Union v. Von Raab*, the Court, in a 5-4 decision, followed the line of reasoning in *Railway Labor Executives* and held that the Government had demonstrated that its compelling interest in safeguard-

ing the borders and the public safety outweigh the privacy expectations of employees involved in drug interdiction and those carrying firearms. However, the Court did not find the same strong justification for applying the rule to the broadly construed category of employees with access to classified information, and sent the case back for further consideration of this issue. Justice Scalia, joined by Justice Stevens, declined to join in the decision "because neither frequency of use nor connection to harm is demonstrated or even likely."

These recent decisions suggest that, because of the special needs of police and other government agencies, reasonable cause or individualized suspicion are not the only criteria permitting urine tests for drugs. However, the dissenting opinions sound several notes of caution. Drug testing policies cannot be arbitrarily applied to all classes of employees. Acceptable rationales for conducting urine tests for drugs may include evidence of drug problems in the department, a clear connection between drug use and potential harm to the public or other employees, or both.

treatment. This may include sick leave, vacation, compensatory time off, or leave without pay. While in treatment, the officer may return to a limited duty assignment that does not require carrying a gun or operating a vehicle, provided the officer has a negative test result and such an assignment is avail-

able. The expenses for the treatment program are the responsibility of the officer. The officer's medical plan may cover certain substance abuse treatment costs.

To return to full duty status, the officer must complete the treatment program,

receive a negative result on a drug test ordered by the department, and be cleared by the city and county physician. If returned to full duty, the officer is placed in mandatory group B for a maximum of 12 months.

Second confirmed positive result. The treatment program described above is not an option for a regular officer with a second confirmed positive test result. The officer is placed on leave, Internal Affairs investigates the case, and the Administrative Review Board weighs the evidence. Upon a finding of a violation, the chief of police will consider termination.

Experience with the program

As noted earlier, the first group to be tested in January 1986 comprised 50 administrators and managers. The next month, the 91st and 92d recruit classes were tested. Tests were not conducted between March and December 1986 while the final policy and procedures were being developed. In December 1986, the 93d recruit class and the narcotics/vice division (part of mandatory group B) were tested.

In January 1987, the first random group of patrol officers was chosen and tested. Since then, the mandatory groups have been tested frequently, and five more randomly selected groups had been tested by late 1988. The department has answered many inquiries from other law enforcement agencies about its testing procedures, but does not publish the results of its drug tests, even as statistical summaries. This extra precaution is taken to protect officers' anonymity to the fullest extent possible.

In 1987 and again in 1988, the department had a budget of about \$21,000 to conduct approximately 1,900 tests. These funds cover laboratory services only. Not included is the cost of the department personnel needed to supervise the process and secure the test sites. From 7 to 10 officers, including all personnel division and Internal Affairs employees, work all day on the program each time a random group is tested.

Although cooperation between management and the union has been exemplary,

officers have challenged various procedures throughout the first 2 years. For example, 9 days after the first random group was tested in January 1987, SHOPO filed a class grievance. From August to December 1987, the program was temporarily suspended while the department dealt with several chain-of-custody issues and other concerns raised by the union. In fact, most of the objections raised and grievances filed have related to maintaining the chain of custody or test site security. The validity of the tests used has not been challenged. As a result, the department developed additional forms to document the chain of custody, created a videotape on the program to help inform officers of testing procedures, and improved security at test sites.

Recommendations

Not every police department will need a comprehensive mandatory and random testing program. Some agencies will be able to accomplish their objectives with a program of limited tests based on reasonable suspicion. Others may place their highest priority on testing applicants. The type of program developed needs to be directly related to a department's own problems or objectives. Thus, the first recommendation is to clearly spell out the rationale for testing and obtain expert legal advice.

Second, the costs involved in operating a comprehensive drug testing program should not be underestimated. The HPD considers its program to be well worth the investment, but each agency must decide this. It is important to consider not only the cost of laboratory services, but the time and cost of the personnel needed to operate the program.

With officers' careers at stake, no department should select a lab based on price alone. Since most States are just beginning to regulate the laboratory industry, police administrators will need to educate themselves about the accu-

racy of various tests, and become familiar with the quality control and quality assurance measures in competent laboratories.

Third, it is important to put all program policies and procedures in writing, pilot test the program, and inform all officers of the department's expectations before the program begins. Even with the most careful planning, the department's procedures may never be final because of improvements in testing technology or pending court decisions. In addition, administrators should be prepared for exceptional situations (e.g., an officer may be delayed on the way to the test site, another may be unable to void, or another may make an error on a log entry).

After 2 years' experience with its program, the HPD believes it has made significant progress toward achieving its main objectives: restoring public confidence in the department's credibility, and improving procedures to ensure that its officers are fit for duty. The department has enjoyed the full support of the City of Honolulu, which recently developed a substance abuse policy for all city employees.

Finally, any department considering a random testing program should begin working with the officers' union or association in the early planning stages. Both the administration and the union will have to make concessions, but the HPD experience shows that agreements can be reached and a program can be developed that is in line with the mutual goal of ensuring a drug-free department.

Notes

1. This *Research in Action* does not include a detailed discussion of other departments' drug testing procedures or the legal issues that affect the development of police drug testing policies. For this discussion, see NIJ's *Issues and Practices* report, NCJ 105191, "Police Drug Testing," May 1987, by the Institute for Law and Justice, Inc.

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2. See, e.g., *Turner v. Fraternal Order of Police*, 500 A. 2d 1005, 1008 (D.C. App. 1985). See also, *Capua v. City of Plainfield*, 643 F. Supp. 1507, 1513 (D.N.J. 1986).

3. See, e.g., *Guiney v. Roache*, Civ. A. No. 86-1346-K (D.C. Mass. March 6, 1987). See also, *Caruso v. Ward*, 506 N.Y.S. 2d 789 (N.Y. Sup. Ct. 1986).

4. EMIT[®] tests are distributed by Syva Company, Palo Alto, California. Throughout this report, EMIT refers to Syva's registered trade name of tests for drugs of abuse.

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