



Illinois Department of Corrections

Administrative Directive

Number: 04.02.105	Title: Drug and Alcohol Detection, Sanctions, Intervention and Treatment	Effective: 4/1/2022
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Authorized by:	<i>[Original Authorized Copy on File]</i>	Rob Jeffreys Director
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Authority: 730 ILCS 5/3-2-2 20 IAC 501.Subpart C and 504 77 IAC 2060	Related ACA Standards: 5-ACI-5E-02 – 04, 11, 13 – 15
Referenced Policies: 05.01.113	Referenced Forms: DOC 0071 – Parole Violation Report DOC 0298 – Record of Individual in Custody Substance Abuse Testing and Violations DOC 0317 – Disciplinary Report DOC 0539 – Substance Abuse Intervention/Treatment Referral

I. POLICY

To deter and detect use of illegal drugs and alcohol or unauthorized amounts of prescription or over-the-counter medications, each facility and program site shall conduct drug and alcohol testing of individuals in custody in accordance with this directive in addition to conducting searches for contraband. Positive test results shall result in progressive discipline and interventions or treatment or both.

II. PROCEDURE

A. Purpose

The purpose of this directive is to establish written instructions for staff to identify individuals in custody under the influence of or using illegal drugs, unauthorized amounts of prescription or over-the-counter medications, or alcohol. This directive also provides guidelines for progressive discipline and interventions and treatment.

B. Applicability

This directive is applicable to all correctional facilities and program sites within the Department.

C. Facility Review

A facility review of this directive shall be conducted at least annually.

D. Designees

Individuals specified in this directive may delegate stated responsibilities to another person or persons unless otherwise directed.

E. Definitions

Alcohol – the intoxicating agent in beverage alcohol, ethyl alcohol or other molecular weight alcohols including methyl and isopropyl alcohol.

Community based services – alcohol and substance abuse services provided by a licensed provider in a free community setting. Services may range from alcohol and substance abuse education to placement

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in a residential treatment program.

Chief Administrative Officer (CAO) – for the purpose of this directive, shall mean the highest ranking authority at a facility or, for parole, the Chief of Parole.

Day reporting – a highly structured non-residential community program which utilizes supervision, sanctions and services to assist individuals in custody in the transition to the community.

Drugs – those substances identified in 720 ILCS 550/3 and 570/100 et seq. including cannabis.

Field test – an initial drug or alcohol screen which provides immediate results using urine or breath specimens.

Individual in custody – a person committed to the Department or confined in any of its correctional facilities. This includes residents who are on electronic detention and releasees who are on parole or mandatory supervised release.

Licensed treatment program – a program licensed under 77 Ill. Adm. Code 2060 to provide alcohol and substance abuse treatment.

Qualified professionals – persons identified in 77 Ill. Adm. Code 2060.309, such as certified alcohol and drug counselors, licensed physicians, licensed social workers or clinical social workers, licensed professional counselors or licensed clinical professional counselors.

Residential Substance Abuse Treatment – substance abuse program funded by the Illinois Criminal Justice Information Authority

Self-help groups – regularly scheduled groups based on self-help recovery principles, including but not limited to, Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) provided by approved volunteers, Department personnel or through community-based services.

Substance abuse education – individual or group opportunities for individuals in custody to learn the consequences of drug and alcohol abuse and addictive behavior.

Substance abuse intervention – includes, but is not limited to, substance abuse education or educational materials, self-help groups, follow-up testing, after-care planning and referral, day reporting for releasees and intensive parole supervision.

Substance abuse treatment – individual or group sessions focused on drug or alcohol abstinence, recovery, and relapse prevention delivered by qualified professionals.

Therapeutic community program – a highly structured minimum six-month licensed treatment program in an environment set apart from general population individuals in custody with services provided by qualified professionals.

Therapeutic program – a highly structured six-month licensed treatment program provided by a qualified professional.

F. General Provisions

1. The CAO of each correctional facility or program site shall designate:
 - a. Employee(s) to coordinate drug and alcohol testing;
 - b. Employee(s) to coordinate alcohol and substance abuse intervention and treatment; and

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- c. Certified Alcohol and Drug Counselor(s) or other qualified professionals to deliver substance abuse treatment.

NOTE: The Substance Abuse Coordinator and the Certified Alcohol and Drug Counselor or other qualified professional may be the same individual.

2. Drug Screening Coordinators at the facility or program site shall receive appropriate training authorized by the Agency Drug Screening Coordinator.
3. Substance Abuse Coordinators and Certified Alcohol and Drug Counselors or other qualified professionals shall receive appropriate training authorized by the Administrator for Substance Abuse Services.
4. The Drug Screening Coordinator shall ensure:
 - a. Testing methods and specimen collection procedures are consistent with standards established by the Agency Drug Screening Coordinator;
 - b. Testing occurs in accordance with the directions of the CAO, respective Deputy Director and the Director;
 - c. Documentation is maintained on specimen collection and, where appropriate, chain of custody;
 - d. A monthly report is prepared and submitted to the CAO, the Administrator for Substance Abuse Services and the Agency Drug Screening Coordinator in a format established by the Agency Drug Screening Coordinator; and
 - e. All individuals involved with the collection process receive appropriate training.
5. The Substance Abuse Coordinator shall ensure:
 - a. All requests and referrals for intervention or treatment are documented, including referrals as a result of discipline;
 - b. All requests or referrals for treatment are assessed by a Certified Alcohol and Drug Counselor or another qualified professional;
 - c. All individual in custody refusals of referrals for intervention and treatment are documented;
 - d. A Disciplinary Report, DOC 0317, or, for releasees, a Parole Violation Report, DOC 0071, is written for any individual in custody who fails to report for or who refuses to participate in mandatory intervention or treatment; and
 - e. A monthly report is prepared and submitted to the CAO, the Agency Drug Screening Coordinator, and the Administrator for Substance Abuse Services in a format established by the Administrator for Substance Abuse Services.
6. The Certified Alcohol and Drug Counselor or another qualified professional shall:
 - a. Provide an assessment and referral for the appropriate intervention or treatment of any individual in custody who requests or is referred by the Adjustment Committee;

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- b. Provide documentation for placement in the individual in custody's master file of the specific outcomes of referrals for interventions and assessments for treatment (for example, where the individual in custody was referred for intervention or treatment; and type and duration of intervention or treatment); and
 - c. Deliver or provide for delivery of educational and self-help interventions and treatment.
- 7. The CAO shall establish the nature and extent of drug and alcohol testing at the facility or program site. However, each fiscal year the Director may establish in writing a minimum percentage of all individuals in custody to be tested annually. The percentages, once established, shall remain in effect until changed in writing by the Director. Such testing shall include:
 - a. Reasonable suspicion testing when it is suspected that individuals in custody have used or are under the influence of drugs or alcohol;
 - b. Random testing of individuals in custody;
 - c. Periodic testing of individuals in custody; and
 - d. Follow-up testing of those individuals in custody with previous positive tests.
- 8. Procedures for specimen collection by correctional facilities or program sites shall be coordinated by the Agency Drug Screening Coordinator.
- 9. The CAO shall ensure individuals in custody are advised in writing by means such as posted notices, bulletins, orientation manual, mandatory supervised release (MSR) agreement, etc., that they are subject to drug or alcohol tests and that they are subject to disciplinary action in accordance with Department Rule 504 or revocation of parole or MSR for any drug or alcohol related offense such as:
 - a. Failure to submit to testing;
 - b. Failure to provide a urine specimen within two hours of notification, unless it is medically determined by the Agency Medical Director that the individual in custody is unable to provide a specimen within the established time frames;
 - c. Destroying or tampering with or attempting to destroy or tamper with drug or alcohol tests or testing equipment; or
 - d. Receiving a positive test result for which there is no medical justification.
- 10. The CAO shall further ensure individuals in custody are advised in writing by means such as posted notices, bulletins, orientation manual, etc., that if they are found guilty of a drug related offense, they are subject to a referral for voluntary or mandatory alcohol or substance abuse intervention or treatment or both in accordance with this directive. A drug related offense includes the offenses listed in Paragraph II.F.9. and possession or being under the influence of any alcohol or drugs or drug paraphernalia.
- 11. Information regarding formulas for random or periodic testing, specific dates of testing, test results, etc., shall be handled in a CONFIDENTIAL manner.
- 12. Nothing herein shall restrict the Department's ability to identify drug or alcohol usage of individuals in custody by means other than drug or alcohol testing or its ability to discipline

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individuals in custody, refer for intervention or treatment, or recommend revocation of parole or MSR absent drug or alcohol testing.

13. The following shall be in the individual in custody's master file or parole file and, where appropriate, on the automated system for testing, discipline, and alcohol and substance abuse intervention and treatment: refusals to provide a sample; destruction or tampering with a sample; positive drug or alcohol test results; the number of drug or alcohol related offenses; discipline; referrals for intervention or treatment; and refusals of intervention or treatment.

G. Requirements for Drug and Alcohol Testing

1. The CAO shall ensure a written local procedure is established regarding drug and alcohol testing, discipline for drug related offenses and intervention or treatment or both at the facility or program site in accordance with this directive.
2. The CAO may order drug or alcohol tests to be conducted on individuals in custody due to reasonable suspicion or on a random, routine, periodic or follow-up basis.

a. Reasonable Suspicion Testing

Reasonable suspicion exists when objective facts and circumstances warrant rational inference that a person is using or is under the influence of drugs, unauthorized amounts of medication or alcohol. Reasonable suspicion may be based, among other matters, upon:

- (1) Observable phenomena, such as direct observation of use or the physical symptoms of being under the influence of drugs or alcohol, including, but not limited to, slurred speech, unsteady walk, impaired coordination, smelling of alcohol;
- (2) A pattern of abnormal or erratic behavior;
- (3) Information provided by reliable and credible sources or which is independently corroborated; or
- (4) An individual in custody's possession of unauthorized drugs, alcohol or drug paraphernalia or discovery of same in an area controlled or occupied by the individual in custody.

b. Random Testing

- (1) The Information Services Unit (ISU) shall generate a computerized list of random individuals in custody and submit same to the Central Drug Screening Unit. Upon receipt, the list shall be sent to the CAO who shall distribute the list to the Facility Drug Screening Coordinator to administer random tests.
- (2) The tests of individuals in custody who are not on parole or MSR shall be completed within 24 hours of receipt of the list.
- (3) Releasees shall be notified where to report for testing within 24 hours of receipt of the list and the specimens shall be obtained within one week of receipt of the list.
- (4) Regardless of the frequency of previous testing, each individual in custody listed shall be tested unless he or she is unavailable for testing due to reasons such as

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documented medical reasons or an absence from the correctional facility which prohibits collection. If an individual in custody is off premises when randomly chosen, a specimen shall be obtained within 24 hours of return to the correctional center.

- (5) A report shall be submitted subsequently to the respective Deputy Director's office indicating the results of the test or the reason not tested, for example, transferred prior to testing.

c. Periodic Testing

The nature and frequency of periodic testing shall be determined by the CAO. However, individuals in custody shall be required to be tested upon entrance to and exit from a Residential Substance Abuse Treatment (RSAT) program. Programs such as RSAT that are funded through a grant shall abide by the grant's requirements. Other testing for correctional facilities or program sites may include, but not be limited to, testing of:

- (1) The individual in custody population or portions thereof;
- (2) Individuals in custody who have had access to the free community (for example, out on writ, furlough, outside work assignment, electronic detention, etc.);
- (3) Individuals in custody entering an after-care program; or
- (4) Individuals in custody assigned to drug intervention, therapeutic community program or other resident treatment programs.

d. Follow-up Testing

The CAO shall determine the frequency of follow-up testing of individuals in custody who have tested positive on previous occasions. The frequency shall be reasonable based upon information provided by the Agency Drug Screening Coordinator and recommendations of the treatment provider.

3. The specimen shall be collected in accordance with procedures established by the Agency Drug Screening Coordinator.

- a. The gender of staff performing direct observation of specimen collection shall be the same gender as the individual in custody providing the specimen.

NOTE: If direct observation of specimen collection is to be performed on a transgender or gender non-conforming individual in custody, direct observation shall be performed by the gender of staff designated on the individual in custody's identification card.

- b. Specimen collection shall be documented on the Record of Individual in Custody Substance Abuse Testing and Violations, DOC 0298, the Drug and Alcohol Testing Log book and the Inmate Drug Screening Client Server Application.

- c. The log shall include the following applicable information:

- (1) Collection date;
- (2) Individual in custody name and ID number;

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- (3) Gender;
- (4) Name of individual collecting the specimen;
- (5) Type of test (lab or field) and initial specimen field results;
- (6) For lab tests, date and time of specimen pick-up;
- (7) Lab results and date received, where applicable; and
- (8) Initials of person making log entry.

NOTE: Any individual in custody refusal to provide a specimen within two hours of notification or destruction or tampering with a sample shall be noted on the DOC 0298 and forwarded to the Adjustment Committee or parole agent for disciplinary action.

- 4. When the drug or alcohol testing results or reports are received:
 - a. The DOC 0298 shall be completed. If the individual in custody tested positive, the DOC 0298 shall be forwarded to the Adjustment Committee or parole agent for disciplinary action.
 - b. The DOC 0298 shall be placed in the individual in custody's master record file, center file or in the parole file, as appropriate.
 - c. The chain of custody documentation for lab tests shall be maintained by the Agency Drug Screening Coordinator and the Facility Drug Screening Coordinator.
 - d. If the test result is positive, the individual in custody shall be notified and asked for an explanation of the positive result. A Medical Review Officer shall determine whether a justifiable reason exists (for example, use of prescribed medication) for any positive result. Upon staff request, health care personnel shall evaluate alternative medical explanations for the positive test results.
 - (1) If justification exists for a positive result, the Agency Drug Screening Coordinator shall be notified in writing.
 - (2) If no justification exists for a positive result, the individual in custody shall be subject to disciplinary action or parole or MSR revocation and interventions or treatment or both.
- 5. Specimens shall be maintained and destroyed in accordance with procedures approved by the Agency Drug Screening Coordinator.
- 6. The Facility Drug Screening Coordinator shall ensure:
 - a. A complete Drug and Alcohol Test Log book shall be maintained for a period of at least one year; and
 - b. A monthly report is prepared and submitted in accordance with Paragraph II.F.4.d. which shall contain at a minimum the following information, separately, for both drug tests and alcohol tests:
 - (1) Number of tests requested in each category, reasonable suspicion, random, periodic and follow-up;

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- (2) Number of individual in custody refusals;
- (3) Number and type (lab or field) of tests performed;
- (4) Number of positive results; and
- (5) Category of substances detected such as alcohol, cocaine, PCP, THC (marijuana), opiates, amphetamines, etc.

H. Requirements for Discipline Due to Drug Related Offenses

1. Progressive discipline of individuals in custody for drug or alcohol related offenses shall be imposed in accordance with Department Rule 504, which may include, but shall not be limited to:
 - a. Oral or written reprimand;
 - b. Suspension or restriction or loss of privileges such as non-contact visits, visiting restrictions except for attorney and clergy visits, loss of audio/visual, etc., for a specific period of time;
 - c. Change of assignment or program;
 - d. Restitution for the cost of any positive tests;
 - e. Grade level reduction for a specific period of time;
 - f. Restrictive Housing or Administrative Detention placement or confinement for a specific period of time;
 - g. Revocation of Earned Program Sentence Credit;
 - h. Increase in supervision level of releasees;
 - i. Increase in security classification;
 - j. Delay in referral of individual in custody to Prisoner Review Board for recommended parole;
 - k. Transfer or revocation of work release or electronic detention status; or
 - l. A combination of these sanctions.
2. Individuals in custody who test positive within 60 days of being received at a Reception and Classification Center shall be exempt from having discipline imposed. However, the positive results shall be documented and the individual in custody may be retested after the 60-day period.
3. Progressive discipline for drug or alcohol related offenses for releasees shall be imposed, which may include, but shall not be limited to:
 - a. Oral or written reprimand;
 - b. Increase in supervision contacts;

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- c. Restriction of movement;
 - d. Placement on electronic detention;
 - e. Process parole or MSR violation; or
 - f. A combination of these sanctions.
4. The Adjustment Committee summary or parole agent's documentation shall include whether this is a first, second, third or more drug or alcohol related offense, etc., and the progressive disciplinary sanctions imposed. Drug or alcohol related offenses committed within correctional facilities shall be cumulative; however, any offenses committed while on parole or MSR shall be counted separately from those offenses committed prior to release.

NOTE: The offense number (first, second, third or more) shall be determined based on the number of offenses since March 1, 1998.

5. The Adjustment Committee or the parole agent shall document all drug related violations by completing Section 3 on the DOC 0298, initiated by the Facility Drug Screening Coordinator. If no testing was involved, the Adjustment Committee shall initiate the DOC 0298 to document referrals for intervention or treatment as needed. A copy of the completed DOC 0298 shall be placed in the individual in custody's master file or parole file and a copy shall be forwarded to the Facility Substance Abuse Coordinator, Facility Drug Screening Coordinator and Adjustment Committee/Parole Agent for appropriate referral for intervention or treatment or both.

I. Requirements for Intervention and Treatment Due to Drug Related Offenses

- 1. The CAO of each Transitional Security facility and program site shall maintain a listing of all available resources for drug intervention and treatment programs, including eligibility criteria and funding source.
- 2. Intervention and treatment may be requested by an individual in custody or may be recommended by staff. In addition, a referral for progressive intervention or treatment shall be made by the Adjustment Committee or parole agent in accordance with Paragraph II.H.4.
- 3. The Facility Substance Abuse Coordinator or Parole Commander shall ensure:
 - a. Requests or referrals for treatment are assessed by a Certified Alcohol and Drug Counselor or another qualified professional and documented on the Substance Abuse Intervention/Treatment Referral, DOC 0539;
 - b. Any individual in custody refusals of interventions or treatment shall be documented in the individual in custody's master file or the parole file;
 - c. Disciplinary action is initiated for failure to report to any mandatory alcohol or substance abuse program; and
 - d. A monthly report is prepared and submitted in accordance with Paragraph II.F.5.e. which shall include at a minimum the following information:
 - (1) The number of intervention referrals and the number of assessments and referrals for treatment due to first, second, third or more drug related offenses, including the type and duration of interventions or treatment;
 - (2) The number of refusals for intervention and the number of refusals for treatment that are a result of a drug related offense; and

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(3) The number of interventions or treatment completed.

4. Intervention and treatment shall be provided based on documented need and availability of services or community resources.
 5. Interventions may include options such as: substance abuse education, self-help recovery programs, after-care planning and referral, day reporting for releasees, intensive parole supervision and community-based services.
 6. Substance abuse treatment must be provided through a licensed substance abuse program.
 7. Individuals who receive positive drug and alcohol test results while in therapeutic community programs within a correctional facility shall be removed from the program until disciplinary sanctions have been applied.
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ATTACHMENT A

The following table provides guidelines for discipline, intervention and treatment. Suggested interventions and treatment may be escalated based on the severity of the substance abuse problem as determined by assessment.

Maximum Guidelines for Progressive Discipline and Intervention and Treatment				
Division	First Offense	Second Offense	Third Offense	Possession
Adult	Discipline: Per DR 504A, Table A Intervention: Follow-up testing. Education.	Discipline: Per DR 504A, Table A Intervention: Follow-up testing. Self-help group.	Discipline: Per DR 504A, Table A Intervention: Follow-up testing. Referral to therapeutic community program.	Discipline: Per DR 504A, Table A Refer for prosecution.
Adult Transition Center & Electronic Detention	Discipline: Per DR 504C, Table C Intervention: Follow-up testing. Education. Self-help group.	Discipline: Per DR 504C, Table C Intervention/Treatment: Follow-up testing. Self-help group. Refer to community based services.	Discipline: Per DR 504C, Table C Intervention/Treatment: Follow-up testing. Refer for mandatory participation in community based services.	Discipline: Per DR 504C, Table C Refer for prosecution.
Parole	Discipline up to: Reprimand. Increase supervision and contacts. Parole violation. Intervention/Treatment: Follow-up testing. Self-help group. Refer to outpatient program.	Discipline: Increase supervision and contacts. Restrict movement. Place on elect. detention. Parole violation. Intervention/Treatment: Follow-up testing. Self-help group. Refer to community based services.	Discipline up to: Parole violation. Intervention/Treatment: Follow-up testing. Refer for mandatory participation in community based services.	Discipline: Parole violation. Refer for prosecution.