



TRAINING OUTLINE

COURSE TITLE: _____ **DATE:** _____ **INSTRUCTOR:** _____

LOCATION: _____ **TIME:** _____ **COMPANY:** _____

Safety training was conducted on the above date by the instructor indicated. The following line items identify the topics covered during the training session.

SUMMARY OF TRAINING

1) Introduction

- a) Dangers of Impaired Driving
- b) Statistics
- c) Reasonable Suspicion
- d) Standards
- e) Why Training

2) The Supervisor

- a) The Importance of Documentation
- b) Actual Knowledge
- c) Direct Observation
- d) Citations
- e) Employee Admission
- f) Signs and Symptoms
 - i. Signs of Substance Abuse
 - ii. Physical Signs
 - iii. Behavioral Signs
 - iv. Psychological Signs
 - v. The Dangers of Disregard

3) Drugs & Alcohol

- a) Addiction
- b) Alcohol
 - i. What is Alcohol?
 - ii. Blood Alcohol Content
 - iii. Hangovers
- c) Drugs
 - i. What Are Drugs?
 - ii. Depressants
 - iii. Stimulants
 - iv. Psychedelics
 - v. Dissociatives



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- vi. Cannabinoids
- vii. Opioids
- viii. Empathogens
- ix. DOT Banned Substances

4) Taking Action

- a) Prevention
 - i. Employee Education
 - ii. Assistance Programs
 - iii. Pre-Employment Testing
 - iv. Random Testing
- b) Identifying the Problem
 - i. Employee Confrontation
- c) Possible Alcohol Abuse
- d) Possible Drug Abuse
 - i. Refusal
- e) Confidentiality

5) Testing

- a) Site Requirements
- b) Further Testing

6) Post-Procedures

- a) Positive Test Results
 - i. Employee Assistance Programs
 - ii. Last-Chance Agreements
 - iii. Employee Termination
- b) Negative Test Results

7) Conclusion