ANNUAL PROGRAM REVIEW OF THE ALCOHOL AND OTHER DRUGS PROGRAM AT OHLONE COMMUNITY COLLEGE DISTRICT

Background:

Congress passed the Drug-Free Schools and Campuses regulations (Education Department General Administrative Regulations or EDGAR, Part 86). As a condition of receiving funds or any other form of financial assistance under any federal program, an institution of higher education (IHE) must certify that it has adopted and implemented a program to prevent the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees. If audited, failure to comply with the Alcohol and Other Drug (AOD) Abuse Prevention Regulations may cause an institution to forfeit eligibility for federal funding. The biennial report must be completed each even-numbered year (Ohlone wants to do it annually) and must be available for examination by anyone who requests it.

According to the Higher Education Center’s publication, Complying with the Drug-Free Schools and Campuses Regulations, A Guide for University and College Administrators, http://www.higheredcompliance.org/resources/resources/dfscr-hec-2006-manual.pdf the required review is intended to meet the following objectives:

1. “To determine the effectiveness of, and to implement any needed changes to, the AOD prevention programs
2. To ensure that campuses enforce the disciplinary sanctions for violating standards of conduct consistently”

This report includes the academic years 2013-14 and 2014-15 time period.

The Program Review Committee (Biennial Review), has decided to review Ohlone’s AOD Program on an annual basis in order to maintain consistency and be proactive in spotting any developing trends or areas for improvement. The committee met on September 22, 2015.

The committee is made up of:

- Ron Travenick, Vice President of Student Services
- Deborah Griffin, Director of Financial Aid and Veterans Affairs
- Mike Holtzclaw, Dean Science, Engineering, and Mathematics Division
- Sally Bratton, Director Student Health Center
- Rosemary O’Neil, Personal Counseling and Life Coach Services
- John Worley, Police Chief
- Vy Anderson, Senior Human Resources Analyst
- Shairon Zingsheim, Associate Vice President of Human Resources

This group represents administrators from Student Services, Academic Affairs, Administrative Services and the President’s office (Human Resources).

The Agenda for the review is attached (Attachment A)

This report was prepared after the review and reflects the discussions and documents reviewed and provided during the review.
Description of Ohlone College:

The Ohlone Community College District is a multi-campus single community college district located in the southern portion of the San Francisco Bay in California. Serving almost 18,000 students per year, the District has a main campus in the City of Fremont and a newly constructed campus in the City of Newark.

Ohlone College (pronounced "oh loh nee kol ii" [MP3]) is an ethnically diverse institution that promotes innovation and continuous improvement in departments and divisions. The College is named for the native population living in the area when Mission San Jose was founded. The Fremont campus is located just south of the historical Mission. The Newark campus is located near Interstate 880 and emphasizes programs in health, environment, and technology.

Ohlone College is non-residential.

More detailed information about the College can be found at:
http://www.ohlone.edu/org/aboutohlone/

A. Statement of Alcohol and Other Drug (AOD) Program Goals

Ohlone Community College strives to maintain a campus free from the illegal use, possession, or distribution of controlled substances which is reflected in many different publications and communicated to all students, faculty and staff in multiple publications:

1. Governing Board Policies and Procedures:
   http://www.ohlone.edu/org/board/policy/bptoc.html
   a. Alcoholic Beverages
   b. Drug Free Environment and Drug Prevention Program
   c. Tobacco-Free Campus
   d. Code of Ethics
   e. Standards of Student Conduct

2. College Catalog: http://www.ohlone.edu/catalog/20152016/

3. Class Schedules:

Description of AOD Program Elements:

1. Creating a culture of overall wellness is a goal of the AOD program. The College makes a concerted effort that engages students as well as faculty and staff.

The following items identify some of the ways that Ohlone College provides a campus environment with alcohol free options and encourages good health and practices (note that these are just a few examples):

   a. Campus Policy
The overall campus policy promotes alcohol free events and activities. Students serving as representatives of the College at any event are also prohibited from using alcohol. The exception is that of Foundation sponsored events when those of legal drinking age may consume alcohol. All events on campus are heavily supervised to prevent alcohol and other drug use. When alcohol is allowed at a campus venue the college requires an alcohol permit issued by the local Alcohol Board of Control.

b. Alcohol and other Drugs Screenings
Students are given a screening tool (SBIRT) that screens for their alcohol and other drug use and a test called “The Alcohol Use Disorders Identification Test” before they see the College’s Personal Counselor and Life Coach. Depending on the results, students are provided with counseling and other resources and/or referred to community organizations for help. [Attachment B].

c. Employee Wellness programs
The College offers an Employee Wellness Program at a minimal cost of $5.00 per month for membership: http://www.ohlone.edu/instr/pe/employeewellness/

d. Student Health 101
Student Health 101 is an online health and wellness magazine published by College Health Services, LLC. Ohlone’s health insurance provider distributes Student Health 101 to inform students about important health issues. Staff can also view these online magazines at: http://www.studenthealth101.com/privacy.html

e. On-site Workshops
The College offers monthly workshops focused on a number of health and wellness topics to include: healthy lifestyles, financial health, mental health etc.
http://www.ohlone.edu/org/hr/workshops/

f. Employee Assistance Program (EAP)
Employees have access to professional counseling, resources for wellness, and can be referred for services if necessary. http://www.ohlone.edu/org/hr/benefits/eap.html

2. Statement of AOD program goals and a discussion of goal achievement:

Goal 1: To keep the number of alcohol and other drug-related incidents low (goal of 1-2 incidents per year or less). Ohlone has a history of very low alcohol and drug-related incidents because Ohlone is proactive at communicating the alcohol and drug-free policy and encouraging students who need assistance to obtain assistance. The number of alcohol and other drug-related incidents for one year has not exceeded 9 incidents, which was in 2012. In 2013, Ohlone had 4 incidents, and in 2014, we had 6. No alcohol or drug-related fatalities have occurred on campus or as part of college activities.

Goal 2: To annually conduct a program review to identify trends and make improvements where needed

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Goal 3: To educate students and employees about the health risks of alcohol and other drugs
Goal 4: To ensure that all students and employees are notified about the AOD program
Goal 5: To support general wellness throughout the College and making healthy choices
Goal 6: To ensure sanctions are consistently enforced for any violations.

Goal achievement:

Goal 1: The team reviewed the Annual Safety Report and found that the number of alcohol and drug related incidents have been low and in fact has been on a decline. Regular monitoring of alcohol and drug incidents is in place so that any developing trends can be addressed promptly, rather than waiting for the annual or biennial review. [http://www.ohlone.edu/org/security/docs/2015annualcampussecurityreport.pdf]

Goal 2: The team decided to meet in or around September of each year to conduct an annual program review to analyze trends and make improvements if necessary. The next review is already scheduled for September 6, 2016.

Goal 3: This goal has been met. The Student Services department distributes an on-line health magazine called Student Health 101 (referenced earlier in this report). Students can read about a number of health related topics. The Student Health Center staff and its website has several resources for alcohol and drug issues. Employees attend workshops on health-related subjects sponsored by the College’s Employee Assistance Program. Human Resources refers employees experiencing issues in their personal life to the EAP for assistance.

Goal 4: This goal has been met. Notices are sent out every semester to students by Student Services and annually to employees by Human Resources. The committee will use the time of the program review in or around each September to ensure that notices are sent out or are soon-to-be sent out.

Goal 5: This goal is on-going. The prior resources assist with this goal, but the Student Health Center and Human Resources are watching for additional training opportunities and resources on an ongoing basis.

Goal 6: Chief Worley confirmed the number of violations and number and type of sanctions issued for violations of the alcohol and drug policies and laws and that the sanctions are consistently issued with consistent enforcement for violations. All drug offenses have been marijuana, and all violators were first-time offenders, with no repeat offenders. Since January of 2013, for a first offense involving marijuana (which is the only drug offense that has occurred), Ohlone has imposed sanctions of: (1) an arrest and transport to a custodial facility for being under the influence of marijuana (if medical assistance was needed, the student would be taken into custody and transported to the hospital); and (2) a citation with release if the student signs the citation for possession of marijuana. If a student possesses a drug that constitutes a felony, the student would be arrested and transported to a custodial facility. For all drug arrests and citations, the security employee notifies the VP of Student Services for appropriate disciplinary action. This has been imposed consistently for each first offense violation of marijuana. This consistent sanction has been effective in discouraging drugs on campus because no violator has repeated the violation to our knowledge.

3. Summaries of AOD program strengths and weaknesses
**Strengths:**
The number of departments and programs concerned and engaged in the promotion of a healthy lifestyle is impressive. Examples include, but are not limited to: the Student Health Center, Personal Counseling and Life Coach Services, Human Resources, Cafeteria, Employee Wellness program, and the Employee Assistance Program. Having a wide section of the organization focused on health and wellness has contributed to the success of this program, and we continue to watch for ways to improve.

**Weaknesses:**
The changes in key staff has affected how the program is reviewed and administered. The key departments need to continue to work together for a common goal. The duty to facilitate the process needs to be assigned to a particular position. As for the September 2015 meeting, the assigned person responsible for facilitating the review and improvement is Shairon Zingsheim, Associate Vice President of HR. An administrator in Student Services needs to be identified to facilitate and oversee compliance in the future. This decision needs to be made by spring 2016. In the meantime, the AVP of HR will facilitate until a Student Services administrator is identified.

4. **Procedures for distributing annual AOD notification to students and employees:**
   a. Students (persons who are currently enrolled as a student at any site or in any program) are made aware of the Board Policies and Procedures in a number of different ways:
      i. Class Schedule: There is a section labelled “Policies and Procedures” in the class schedule, which includes the alcohol and drug prevention program information. This section is reviewed annually to ensure currency and to incorporate any changes.
         http://www.ohlone.edu/org/admissions/classschedulesummerfall.html
      ii. The College Catalog: There is a section labelled “Policies and Procedures” in the College Catalog, which includes the alcohol and drug prevention program information. This section is reviewed annually to ensure currency and to incorporate any changes.
         http://www.ohlone.edu/catalog/20142015/20142015catalog-allpages.pdf
      iii. Email: An email is sent by the office of the Vice President of Student Services to students each semester to make students aware of the Policies and Procedures, which includes the alcohol and drug prevention program information. The fall notice goes out before the October deadline and also includes campus safety information and references updated crime statistics. The spring notice goes out following the spring term census which is usually in mid February.
         (Attachment C)
      iv. College Website: The College's website has links to the Board Policies and Procedures concerning the AOD program:
         http://www.ohlone.edu/org/board/policy/

   b. Employees (persons who are currently employed by the district to include temporary employees as well as student workers) receive an email sent to “Announcement”. All employees of the district have an email address, are added automatically to the
Announcement list when the employee’s email is set up by IT, and receive
“Announcement” emails. For employees with limited access such as custodians, the
“Announcement” email is printed out by the department administrative assistant and
placed in the mailboxes of those employees.

5. **Copies of the policies and procedures distributed to employees**
   Attached are copies of the policies and procedures distributed to employees on alcohol
   and other drug prevention program. *(ATTACHMENT D).*

6. **Recommendations for revising the AOD programs**
   a. At this time, there are no recommendations for revising the AOD programs, other than
   reviewing it each year to ensure it reflects current law and addresses any developing
trends. The College underwent a thorough audit conducted in summer 2015 by the
   College’s legal counsel. All policies and procedures are legally compliant, distribution is
   in compliance, and a review of the Annual Safety report indicates that the program is
   meeting its goals by discouraging alcohol and drug offenses by students and staff.

Prepared by Shairon Zingsheim, Associate Vice President of Human Resources

September 26, 2015
SEPTMBER 22, 2015

Agenda:

1. Review purpose of the AOD biennial review;

2. Review numbers
   - Review the Annual Safety Report (ASR) drug and alcohol statistics to identify trends for alcohol and other drugs violations;
   - Review disciplinary referral numbers to identify trends for alcohol and other drugs violations;
   - Review requests to Student Health Center and counseling for referrals to assistance programs like rehab programs to identify trends for alcohol and other drugs violations;

3. Determine the Drug and Alcohol program effectiveness
   - What are our goals and desired outcomes?
   - Is our policy/program achieving our goals and desired outcomes
     o If so, what goals have we achieved
     o If not, are changes needed to meet our goals
       ▪ What changes are needed
       ▪ How do we best implement changes to the program if the changes are needed;

4. Determine the number of drug and alcohol-related violations and fatalities that: (a) occur on Ohlone’s campuses, or as part of Ohlone’s activities; and (b) are reported to campus officials;

5. Determine the number and type of sanctions that are imposed by the college as a result of drug and alcohol-related violations and fatalities on the college’s campus or as part of any of Ohlone’s activities; and

6. Ensure that the sanctions required are consistently enforced on all violators
   - for example, no leniency for student athletes
   - do all individuals who commit a similar offense receive the same consequences?
   - Perhaps list examples of offenses for first offenders and what the consequences are to ensure consistency
   - What are consequences (or range of consequences depending on number of repeat violations) for repeat offenders?
7. Review Ohlone's Policies and Procedures on alcohol and drug prevention and distribution frequency and methods; and

8. Complete a compliance checklist, including recommendations for improvements.

I am including Jill and David for assistance in scheduling. The meeting will be one hour.

More info about the Act:

The Drug-Free Schools and Communities Act Amendments of 1989 (amends the Higher Education Act)


Drug and Alcohol Prevention Program

This law requires institutions receiving federal financial assistance to establish drug and alcohol abuse prevention programs for students and employees. Students and employees must receive materials annually that contain standards of conduct, a description of the various laws that apply in that jurisdiction regarding alcohol and drugs, a description of the various health risks of drug and alcohol abuse, a description of counseling and treatment programs that are available, and a statement on the sanctions the university will impose for a violation of the standards of conduct. We will review the current program and discuss ideas for improvement.

Biennial Review

The law also requires a biennial review of the program. Any biennial review must include a determination of the number of drug and alcohol-related violations and fatalities that occur on the institution's campus or as part of the institution's activities and the number and type of sanctions imposed by the institution as a result of drug and alcohol related violations and fatalities that occur on the institution's campus or as part of the institution's activities.

Campus is defined in the same manner as it is defined for campus safety reporting purposes, i.e. any building or property owned or controlled by the institution within a reasonably contiguous geographic area used in direct support of the institution's educational purposes or used by students and supporting institutional purposes. We will keep the biennial review on file in case of a possible audit. We are not required to send the review to the Dept. of Education.
The Alcohol Use Disorders Identification Test (AUDIT)/SBIRT

1. **How often do you have a drink containing alcohol?**

   (0) Never (Skip to Questions 9-10)  
   (1) Monthly or less
   (2) 2 to 4 times a month  
   (3) 2 to 3 times a week
   (4) 4 or more times a week

2. **How many drinks containing alcohol do you have on a typical day when you are drinking?**

   (0) 1 or 2  
   (1) 3 or 4
   (2) 5 or 6
   (3) 7, 8, or 9
   (4) 10 or more

3. **How often do you have six or more drinks on one occasion?**

   (0) Never  
   (1) Less than monthly
   (2) Monthly
   (3) Weekly
   (4) Daily or almost daily

4. **How often during the last year have you found that you were not able to stop drinking once you had started?**

   (0) Never  
   (1) Less than monthly
   (2) Monthly
   (3) Weekly
   (4) Daily or almost daily

5. **How often during the last year have you failed to do what was normally expected from you because of drinking?**

   (0) Never  
   (1) Less than monthly
   (2) Monthly
   (3) Weekly
   (4) Daily or almost daily

6. **How often during the last year have you been unable to remember what happened the night before because you had been drinking?**

   (0) Never  
   (1) Less than monthly
   (2) Monthly
   (3) Weekly
   (4) Daily or almost daily
7. How often during the last year have you needed an alcoholic drink first thing in the morning to get yourself going after a night of heavy drinking?

(0) Never  (1) Less than monthly
(2) Monthly
(3) Weekly  (4) Daily or almost daily

8. How often during the last year have you had a feeling of guilt or remorse after drinking?

(0) Never  (1) Less than monthly
(2) Monthly
(3) Weekly  (4) Daily or almost daily

9. Have you or someone else been injured as a result of your drinking?

(0) No  (2) Yes, but not in the last year
(4) Yes, during the last year

10. Has a relative, friend, doctor, or another health professional expressed concern about your drinking or suggested you cut down?

(0) No  (2) Yes, but not in the last year  (4) Yes, during the last year

***Add up the points associated with answers. A total score of 8 or more indicates harmful drinking behavior.
Health Behavior Assessment  NAME: ______________________  Date: ______

As part of our health service it is important to review issues that could affect the health of our patients. This information will help us provide you with the best treatment and the highest possible standard of care. We are asking you to complete this questionnaire that asks about your use of alcoholic beverages because alcohol use can affect your health and can interfere with certain medications. Please answer as accurately and as honestly as possible. All information will be treated in strict confidence.

In the following questions, a drink means one (12 ounce) can or bottle of beer, one glass of wine, one wine cooler, or a mixed drink with 1.5 oz. of hard liquor. Each counts as one drink; a mixed drink with double shots or a martini counts as two drinks.

Each counts as 1 drink:

1. How often do you drink anything containing alcohol?

  0  □  Never  (skip to Ques. #4)  3  □  Weekly
  1  □  Less than monthly  4  □  2-3 times a week
  2  □  Monthly  5  □  4-6 times a week
  6  □  Daily

2. How many drinks do you have on a typical day when you are drinking?

  0  □  1 drink  3  □  4 drinks
  1  □  2 drinks  4  □  5-6 drinks
  2  □  3 drinks  5  □  7-9 drinks
  6  □  10 or more

3. How often do you have four or more drinks on one occasion?

  0  □  Never  3  □  Weekly
  1  □  Less than monthly  4  □  2-3 times a week
  2  □  Monthly  5  □  4-6 times a week
  6  □  Daily

4. In the last year have you used drugs other than those required for medical reasons?
   Yes  □  No  □

5. In the last year, have you used prescription or other drugs more than you meant to?
   Yes  □  No  □

6. Which drug do you use most frequently? __________________________

Version: 8/1/2005
### The AUDIT: Self-report Version
Place an X in one box that best describes your answer to each question.

<table>
<thead>
<tr>
<th>Questions</th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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</thead>
<tbody>
<tr>
<td>1. How often do you have a drink containing alcohol?</td>
<td>Never</td>
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<td>4 or more times a week</td>
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<td>3 or 4</td>
<td>5 or 6</td>
<td>7 to 9</td>
<td>10 or more</td>
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<td>3. How often do you have four or more drinks on one occasion?</td>
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<td>4. How often during the last year have you found that you were not able to stop drinking once you had started?</td>
<td>Never</td>
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<td>Weekly</td>
<td>Daily or almost daily</td>
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<tr>
<td>5. How often during the last year have you failed to do what was expected of you because of your drinking?</td>
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<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
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<td>6. How often during the last year have you needed a drink the first thing in the morning to get yourself going after a heavy drinking session?</td>
<td>Never</td>
<td>Less than monthly</td>
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<td>7. How often during the last year have you had a feeling of guilt or remorse after drinking?</td>
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<td>Weekly</td>
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<td>8. How often during the last year have you been unable to remember what happened the night before because of your drinking?</td>
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<td>Less than monthly</td>
<td>Monthly</td>
<td>Weekly</td>
<td>Daily or almost daily</td>
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<tr>
<td>9. Have you or someone else been injured because of your drinking?</td>
<td>No</td>
<td>Yes, but not in the last year</td>
<td>Yes, during the last year</td>
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<tr>
<td>10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?</td>
<td>No</td>
<td>Yes, but not in the last year</td>
<td>Yes, during the last year</td>
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**Total**
| Zone I: Score 0-7 (Abstainers or very low risk users) | • Offer words and written advice about risks of alcohol and drug use;  
• Praise for current low risk practices;  
• Remind to stay within recommended allowances if they do drink:  
  o "Standard drinks" (size, quantity);  
  o Frequency;  
• Remind about conditions under which NO ONE should drink (ex. pregnancy, under-age, certain medical conditions, driving/using machinery) |
| Zone II: Score 8-15 (Mild-to-moderate risk users) | • Review and guide the patient through the educational pamphlet:  
  o "Standard Drink Sizes" and "Safe Drinking Levels" (recommended limits);  
  o Drinker’s Pyramid;  
  o Effects diagram;  
• Give feedback about results:  
  o Refer to patient's AUDIT score and point to the Drinker’s Pyramid;  
  o Refer to elements of the Brief Assessment that are of concern and point to the Effects diagram;  
• Provide encouragement to take immediate action to reduce risks;  
• Point out RISKS of continued use continued alcohol use beyond recommended limits or use of illicit substances: (Point to Effects diagram);  
• Instill HOPE: "You can do it" |
| Zone III: Score 16-19 (Moderate-to-high risk users) | • Review, give feedback & encouragement, point out risks, and instill hope (same as in Level II), PLUS:  
• Counseling that meets the patient's current Motivational Level:  
  o Pre-contemplation: Feedback about results, information about hazards;  
  o Contemplation: Benefits of changing, information about problems, review pros and cons (to increase ambivalence), risks of delaying, choosing a goal;  
  o Preparation: Choosing a goal, advice and encouragement;  
  o Action: Advice and encouragement, substituting healthy behaviors for unhealthy ones, reducing triggers, influence of family and peers;  
  o Maintenance: Encouragement  
• Possible Referral to Self-Help program;  
• Consider Referral to Level IV if not improving or for certain conditions (ex. serious medical or psychiatric co-morbidity) |
| Zone IV: Score > 20 (Very high risk users, probable dependence) | • Prepare the patient for Referral to Specialized Treatment:  
  o Give feedback about results (Use exceeds limits, specific problems already exist; probable dependence);  
  o Emphasize dangers to health (Draw connections to current medical & psychiatric conditions, possible harmful behaviors to loved ones and others);  
  o Provide clear messages about medical & psychiatric seriousness;  
  o Assure and encourage: Treatment is generally effective, but considerable effort will be needed on their part;  
• Determine if Detoxification is indicated (Administer the CIWA if potential for, or exhibiting symptoms of withdrawal);  
• Give information about available treatment services: Treatment modalities, available assistance and support (childcare, transportation, etc.), availability of free or reduced cost treatment for individuals without insurance;  
• Draw upon principles of Motivational Enhancement;  
• Repeat as necessary until appointments are kept;  
• Coordinate care as with other types of referrals (ex. orthopedic referrals, cardiologist referrals, etc.);  
• Continue to provide support and encouragement. |
# Brief Interventions for Alcohol: Sensible Approaches to Alcohol Consumption

<table>
<thead>
<tr>
<th>How Much Alcohol is in One Serving:</th>
<th>Conditions Under Which No One Should Drink:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A Standard Drink is:</strong></td>
<td>• Driving or operating machinery</td>
</tr>
<tr>
<td>• A 12 oz. bottle of beer</td>
<td>• Pregnancy or breast feeding</td>
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<tr>
<td>• A 5 oz. glass of wine</td>
<td>• Taking certain prescribed or over-the-counter medications</td>
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<tr>
<td>• A 1 ½ oz. shot of liquor</td>
<td>• Physician’s advice due to certain diseases, conditions or disorders</td>
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<tr>
<td></td>
<td>• If you can’t stop or control your drinking.</td>
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<tr>
<th>Sensible Drinking Limits:</th>
<th>Problems which may be Related to Alcohol Use:</th>
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<tbody>
<tr>
<td><strong>Women:</strong></td>
<td>• Difficulty coping with stress</td>
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<tr>
<td>• No more than 1 drink per day;</td>
<td>• Relationship problems</td>
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<tr>
<td>• No more than 7 drinks per week.</td>
<td>• Stomach problems</td>
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<td><strong>Men:</strong></td>
<td>• Diarrhea</td>
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<tr>
<td>• No more than 2 drinks per day;</td>
<td>• Sleeplessness</td>
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<tr>
<td>• No more than 14 drinks per week.</td>
<td>• Falls or other accidents</td>
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<tr>
<td><strong>All persons over 65:</strong></td>
<td>• Arrest for driving under the influence of alcohol</td>
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<tr>
<td>• No more than 1 drink per day;</td>
<td>• Financial problems</td>
</tr>
<tr>
<td>• No more than 7 drinks per week.</td>
<td>• Feeling confused after drinking</td>
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<tr>
<td><strong>All persons under 21:</strong></td>
<td>• Depression</td>
</tr>
<tr>
<td>• There is NO ACCEPTABLE DAILY LIMIT;</td>
<td>• Memory loss</td>
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<tr>
<td>• There is NO ACCEPTABLE WEEKLY LIMIT.</td>
<td>• Problems with medications</td>
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<td>• Automobile accidents</td>
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<td>• Feeling alone or left out because of drinking</td>
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<td>• High blood pressure</td>
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<td>• Trembling hands</td>
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<td>• Malnutrition</td>
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<td>• Cancer</td>
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<td>• Stroke</td>
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If you are in the At-Risk Drinking Zone (8-19 drinks per week depending on your gender or age), you need to consider whether to stop drinking all together or to drink less. Drinking may be affecting your life and your health. Ask your doctor for more information.

**DRUG ABUSE AScreenING TEST- DAST-10**

These Questions Refer to the Past 12 Months

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have you used drugs other than those required for medical reasons?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Do you abuse more than one drug at a time?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Are you unable to stop using drugs when you want to?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Have you ever had blackouts or flashbacks as a result of drug use?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Do you ever feel bad or guilty about your drug use?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Does your spouse (or parents) ever complain about your involvement with drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Have you neglected your family because of your use of drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Have you engaged in illegal activities in order to obtain drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Have you ever experienced withdrawal symptoms (felt sick) when you stopped taking drugs?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Have you had medical problems as a result of your drug use (e.g., memory loss, hepatitis, convulsions, bleeding)?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Interpretation (Each "Yes" response = 1)**

<table>
<thead>
<tr>
<th>Score</th>
<th>Degree of Problems Related to Drug Abuse</th>
<th>Suggested Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No Problems Reported</td>
<td>Encouragement &amp; education</td>
</tr>
<tr>
<td>1-2</td>
<td>Low Level</td>
<td>Risky Behavior- Feedback &amp; Advice</td>
</tr>
<tr>
<td>3-5</td>
<td>Moderate Level</td>
<td>Harmful Behavior- Feedback &amp; Counseling; Possible referral for specialized assessment</td>
</tr>
<tr>
<td>6-8</td>
<td>Substantial Level</td>
<td>Intensive Assessment and referral</td>
</tr>
</tbody>
</table>

*Drug Abuse Screening Test (DAST-10). (Copyright 1982 by the Addiction Research Foundation. Used with Permission)*
Panel 4

Should I Stop Drinking or Just Cut Down?

You should stop drinking if:

- You have tried to cut down before but have not been successful, or
- You suffer from morning shakes during a heavy drinking period, or
- You have high blood pressure, you are pregnant, you have liver disease, or
- You are taking medicine that reacts with alcohol.

You should try to drink at low-risk levels if:

- During the last year you have been drinking at low-risk levels most of the time, and
- You do not suffer from early morning shakes, and
- You would like to drink at low-risk levels.

Note that you should choose low-risk drinking only if all three apply to you.
Panel 5

**What’s a Low-Risk Limit?**

- No more than two standard drinks a day
- Do not drink at least two days of the week

*But remember. There are times when even one or two drinks can be too much.*

*For example:*

- When driving or operating machinery.
- When pregnant or breast-feeding.
- When taking certain medications.
- If you have certain medical conditions.
- If you cannot control your drinking.

*Ask your health care provider for more information.*
Panel 2

The Drinkers' Pyramid

AUDIT Scores

Types of Drinkers

- 0: Abstainers (40%)
- 1-7: Low-Risk Drinkers (35%)
- 8-19: High-Risk Drinkers (20%)
- 20+: Probable Alcohol Dependence (5%)
Panel 3

Effects of High-Risk Drinking

- Aggressive, irrational behaviour.
- Arguments, Violence.
- Depression, Nervousness.
- Alcohol dependence.
- Memory loss.
- Premature aging, Drinker's nose.
- Cancer of throat and mouth.
- Weakness of heart muscle.
- Heart failure, Anemia.
- Impaired blood clotting.
- Breast cancer.
- Frequent colds, Reduced resistance to infection.
- Increased risk of pneumonia.
- Vitamin deficiency, Bleeding.
- Severe inflammation of the stomach, Vomiting.
- Diarrhea, Malnutrition.
- Liver damage.
- Inflammation of the pancreas.
- Trembling hands.
- Tingling fingers.
- Numbness, Painful nerves.
- Numb, tingling toes.
- Painful nerves.
- Ulcer.
- Impaired sexual performance.
- In men:
- Impaired sexual performance.
- In women:
- Risk of giving birth to deformed, retarded babies or low birth weight babies.
- Impaired sensation leading to falls.

High-risk drinking may lead to social, legal, medical, domestic, job and financial problems. It may also cut your lifespan and lead to accidents and death from drunken driving.
What’s a Standard Drink?

1 standard drink =

1 can of ordinary beer
(e.g. 330 ml at 5%)

or

A single shot of spirits (whiskey, gin, vodka, etc.)
(e.g. 40 ml at 40%)

or

A glass of wine or a small glass of sherry
(e.g. 140 ml at 12% or 90 ml at 18%)

or

A small glass of liqueur or aperitif
(e.g. 70 ml at 25%)

How much is Too Much? The most important thing is the amount of pure alcohol in a drink. These drinks, in normal measures, each contain roughly the same amount of pure alcohol. Think of each one as a standard drink.
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<th>Acknowledge with praise</th>
</tr>
</thead>
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<td>AUDIT Score 8-15 (men) 7-15 (women) At provider discretion: Nonalcoholic Drug misuse limited to marijuana less than 5 days per month, as disclosed on screening interview (refer to GPRA Section B2.b)</td>
<td>Simple advice- brief intervention (B1)</td>
</tr>
<tr>
<td>AUDIT Score 15-19 OR Alcohol to intoxication 5 days per month, as disclosed on screening interview (refer to GPRA Section B1.b1) OR Self-report of illegal drug use or medication misuse without signs of dependence (refer to GPRA Section B1.c and B2.c, as well as Questions 4 and 5 on screening tool)</td>
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### Pennsylvania S-BIRT Project

#### Weekly Average
Multiply the answers to the following two questions:

A. **How often?**
   - On average, how many days a week do you drink alcohol?

B. **How much?**
   - On a typical day when you drink, how many drinks do you have? [ ]

#### From Men
- More than 14
- More than 4

#### From Women
- More than 7
- More than 3

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---

#### Daily Maximum
- How much?
  - What is the maximum number of drinks you had on any given day in the past month?

---

**IF YOU RECEIVE THESE ANSWERS**

- Your patient may be at risk for developing alcohol-related problems.
- Now complete AUDIT.
In the last year have you tried to cut down on the drugs or medication that you use? Yes ___ No ___

In the last year have you used prescription or other drugs more than you meant to? Yes ___ No ___

Which drug do you use most frequently? ______________________________________

Produced by the Institute for Research, Education and Training in Addictions  

ireta
You are receiving this message via our new alert system regroup as well as this email. If a safety issue arises that necessitates a safety alert be issued, you will receive that alert through the regroup system so that you are aware of the concern and can take preventative precautions for your safety.

Ohlone College strives to provide a safe environment in which students can focus on education and learning and staff can focus on teaching and work duties.

Each year, Ohlone College is required to notify you of the availability of two very important resources:
- the campus safety and crime statistics information in the Annual Security Report; and
- the college's alcohol and drug prevention program and policy.

These documents are available on Ohlone’s website and the exact links are provided below. Please review each of these documents at the links below.

The Annual Security Report has information on many topics in addition to the crime reporting statistics, including warning policies, awareness and prevention of crimes, victim’s rights, how to report a crime, resources for crime victims, information on prevention and reporting of sex crimes (including sexual assault, domestic violence, dating violence, and stalking), alcohol and drug prevention, hate crimes, emergency procedures, first aid tips, and parking requirements.

You may also view information on Campus Safety, Crime, and/or Alcohol and Drug Prevention Program in our catalog, class schedule booklets, or on our website.

Ohlone enforces laws against criminal activity, including the laws against sex crimes, domestic violence, dating violence, stalking, unlawful controlled substances, and underage drinking or any unlawful drinking on campus. Alcohol and unlawful controlled
substances are not allowed on campus.

Awareness and prevention programs for sex-related crimes are
carried out by Ohlone Campus Police Services staff throughout the
school year. You may obtain details by calling Campus Police
Services at (510) 659 6111 or by checking the website.

You may receive a printed copy of the crime report (Annual Security
Report) by contacting Campus Police Services on the Fremont campus
in Building 20 on Monday to Friday during business hours or on the
Newark campus in Room NC 1001 on Monday to Friday during business
hours.

For any additional information regarding crime information or crime
statistics, you may search the Campus Police webpage or contact
Campus Police Services via e-mail or by calling Campus Police
Services at (510) 659 6111.

The Student Health Center has many additional resources on crime
prevention and awareness and substance abuse, but the following are
some links to resources you may find useful.

List of Resource Links:

Campus Crime Enforcement and Policy:
http://www.ohlone.edu/org/security/regulations.html

Campus Crime Reports ("Annual Security Report"):
http://www.ohlone.edu/org/security/crimeatohlone.html

Student Discipline Process:
http://www.ohlone.edu/org/studentservices/policies.html

Sexual Assault Prevention and Awareness Information:
http://www.ohlone.edu/org/healthcenter/sexualassaultinfo.html

Drug and Alcohol information, Counseling, and treatment resources:
http://www.ohlone.edu/org/healthcenter/links.html

Alcohol and Drug Prevention Program Policy:
http://www.ohlone.edu/core/policy-alcoholdrugabuse.html

Thank you for helping keep Ohlone safe and following the laws and
rules.
Attached is the district's annual reminder that we are committed to providing and maintaining a drug and alcohol free work and learning environment. Our board policy and corresponding administrative procedure outline the district's Drug and Alcohol Prevention Program. You will find information on health risks associated with the use of drugs and alcohol, along with a list of resources and referrals should you or your family need support.

As a reminder, our Employee Assistance Program (EAP) provides for free counseling sessions for you and your dependents. More info about EAP can be found at: http://www.ohlone.edu/org/hr/docs/eap-flyer.pdf

The actual board policy and administrative procedures regarding Ohlone's Drug and Alcohol Prevention Program can be found at:


Please read the attached document and also review the documents posted on our website.
ATTENTION: STUDENTS AND EMPLOYEES

OHLONE COMMUNITY COLLEGE DISTRICT'S DRUG FREE ENVIRONMENT AND
DRUG PREVENTION PROGRAM


The District is committed to providing its employees and students with a drug free workplace and campus environment. It emphasizes prevention and intervention through education. The goal is to empower students and employees to make informed decisions about substance use and abuse to allow each to be healthy and productive and maximize each person's potential.

The District prohibits the unlawful possession, use, sale, or distribution of illicit drugs by students and employees on the District's property or as part of any of the District's activities, including but not limited to field trips, activities or workshops.

The unlawful manufacture, distribution, sale, dispensing, possession or use of alcohol or any controlled substance is prohibited on District property, during District-sponsored field trips, activities or workshops, and in any facility or vehicle operated by the District. Under Business & Professional Code Section 25608(a), any person who possesses, consumes, sells, gives, or delivers to any other person, any alcoholic beverage in or on any public building, campus, or any of the District grounds is guilty of a misdemeanor, except as provided for in AP 3560, Alcoholic Beverages. As a condition of employment, each employee is required to comply with these requirements.

Every person who consumes any alcoholic beverage must be at a minimum, 21 years of age. Ohlone will enforce the prohibition of underage drinking and the prohibition of unlawful drugs.

Consequences for Violations

Violation of this prohibition will result in the District taking appropriate action and imposing applicable legal sanctions under local, State, or Federal law for unlawful possession or distribution of illicit drugs and alcohol, up to and including termination of employment for employees, expulsion and/or other discipline of students, referral to federal, state, local and/or campus law enforcement for criminal law citation, arrest and/or prosecution of both employees and students, and/or as permitted by law, may
require satisfactory participation in programs, including but not limited to an alcohol or drug abuse assistance or rehabilitation program.

Health Risks

The health risks associated with the use of illicit drugs and the abuse of alcohol include:

- Death including by alcohol poisoning or drug overdose;
- Risk of addiction and withdrawal symptoms including pain, convulsions and depression;
- Liver, heart, kidney, pancreas, and brain damage and/or loss of brain cells;
- Impaired judgment and resulting safety and health risks including accidents, unwanted pregnancies or sexually transmitted diseases, and aggressive or violent behavior;
- Impaired performance including drowsiness, impaired memory, and impaired concentration;
- Sexual dysfunctions;
- Harm to a fetus, including spontaneous abortions, premature labor, and detached placentas;
- Psychological problems including depression, anxiety, paranoia, panic reactions, psychosis and hallucinations;
- Seizures;
- Strokes, cardiac arrest or cardiovascular problems;
- Lung damage or illnesses, bronchitis, or respiratory arrest, and Needle-related illnesses and complications such as hepatitis, HIV, muscle and nervous tissue death necessitating limb amputation, and infections.

Employee Notification of Workplace Criminal Drug Statute Violation

As a condition of employment, employees must notify the District within five days of any conviction for violating a criminal drug statute while in the workplace. The District is required to inform any agencies that require this drug-free policy within ten days after receiving notice of a workplace drug conviction. An employee who is convicted will receive discipline from Ohlone and/or Ohlone will require satisfactory participation in a drug abuse assistance or rehabilitation program.

Assistance, Resources and Referrals
Drug or alcohol counseling, treatment, or rehabilitation or re-entry programs or referrals are available to employees or students. The district provides confidential referrals through an Employee Assistance Program (EAP) for employees and their families needing assistance with drug or alcohol abuse. Please contact Shairon Zingsheim, Associate Vice President, Human Resources for more information or visit the Human Resources website for information on contacting CONCERN EAP.

Students should contact the Student Health Center or the Vice President of Student Services, Dr. Ron Travenick, for resources or for assistance. The Student Health Center also provides counseling, alcohol and drug abuse education information, and resources for students. For further information, please contact Sally Bratton or other staff at the Student Health Center (Building 7, (510) 659-6258) or visit: http://www.ohlone.edu/org/healthcenter/.

Online resources of possible interest:

www.alcoholscreening.org/
www.aa.org/ for Alcoholics Anonymous
http://www.drugabuse.gov/nidamed/ for National Institute of Drug Abuse (NIDA)
http://www.niaaa.nih.gov/Publications/PamphletsBrochuresPosters/English/default.htm for National Institute on Alcohol Abuse and Alcoholism, NIAAA
http://rethinkingdrinking.niaaa.nih.gov/ for NIAAA website -- offers drinking habits assessment and management tools for anyone who drinks
http://www.recovery.org for Alcohol Awareness Council offers addiction recovery programs

References: Drug Free Schools and Communities Act Amendment of 1989; 20 U.S. Code Sections 1011i; 1091(r); 1092(f)(1)(H); 1092(k); 1145g; 34 Code of Federal Regulations 86.1 et seq.; Federal Drug-Free Workplace Act of 1988; California Drug-Free Workplace Act, Cal. Gov. Code 8355; 41 U.S. Code Section 702; California Business & Professions Code Section 25608(a)

January 2014