



Australian Government

Civil Aviation Safety Authority

CASR Part 99B
DRUG AND ALCOHOL MANAGEMENT PLANS

Guidance manual for DAMP organisations
(Updated June 2019)

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		Links to exemptions updated as required
		All references to DAMP reporting edited as DAMP reporting is no longer required under an exemption released in February 2015
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		Re added the page numbers
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1.1	Overview	5
1.2	What is a DAMP?	5
1.3	Who needs a DAMP?	6
1.3.1	DAMP exemptions	6
1.4	Mandatory components of a DAMP	6
1.5	Developing a DAMP – a systems-based approach	7
2	Drug and alcohol policy statement	7
3	Drug and alcohol education program	8
3.1	Purpose.....	8
3.2	Mandatory components	8
3.3	CASA eLearning.....	9
3.3.1	Is the CASA eLearning compulsory?.....	9
3.3.2	My organisation uses the CASA eLearning – what else do we need to do?	9
3.3.3	What if my organisation chooses not to use the CASA eLearning?	10
3.4	Who must complete the education program?	10
3.4.1	What about employees engaged on a one-off or short-term basis?.....	10
3.4.2	What if an employee has been educated under another organisation’s DAMP?	10
3.5	When must the education program be completed?	11
3.6	Does the education have to be given in a certain way?	11
3.7	Processes and procedures	11
4	Drug and alcohol testing program.....	13
4.1	Overview	13
4.2	Purpose.....	13
4.3	Who must be tested and when?	13
4.3.1	When an employee first joins an organisation	14
4.3.2	Reasonable grounds.....	14
4.3.3	After an accident or serious incident.....	14
4.4	What is the procedure for alcohol testing?	15
4.4.1	Who can conduct breath alcohol testing?	15
4.4.2	What happens if the initial test is positive?.....	15
4.5	What is the procedure for drug testing?.....	15
4.5.1	What drugs are tested for?	16
4.5.2	Who can collect a specimen?.....	16
4.5.3	Who can conduct an initial (screening) drug test?	16

4.5.4	Who can conduct a confirmatory drug test?	17
4.5.5	How do we confirm that a testing provider is accredited to the relevant standards?. 17	
4.5.6	What happens if a confirmatory drug test returns a positive result?	17
4.6	Exemption for DAMP organisations for collection and screening of specimens	17
5	Drug and alcohol response program	19
5.1	Purpose.....	19
5.2	When must an employee cease performing SSAAs?.....	19
5.3	When can an employee resume performing SSAAs?	20
5.3.1	Comprehensive assessment.....	21
5.3.2	Drug and alcohol intervention program	21
6	General administration	23
6.1	DAMP contacts	23
6.1.1	DAMP contact officer	23
6.1.2	DAMP supervisor.....	23
6.2	Medical Review Officer.....	24
6.3	Availability of the DAMP	24
6.4	Document control protocol	25
6.5	DAMP reporting	25
6.6	DAMP record keeping.....	25
6.7	DAMP review and audit.....	25
	Attachment 1 - drug testing procedure - urine.....	27
	Attachment 2 - drug testing procedure – oral fluid.....	28
	Attachment 3 - DAMP testing: when an employee first joins the organisation as a ‘regular SSAA employee’*	28
	Attachment 4 - DAMP testing when a DAMP supervisor has ‘reasonable grounds’ to believe that a SSAA employee may be adversely affected by a testable drug or alcohol.....	29
	Attachment 5 - DAMP testing after an ‘accident’ or ‘serious incident’	30
	Attachment 6 – How to find a NATA accredited testing provider	32

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1 Introduction

In this section:

- Overview
- What is a DAMP?
- Who needs a DAMP?
- Mandatory components of a DAMP
- Developing a DAMP – a systems-based approach

1.1 Overview

In March 2004, the Australian Transport Safety Bureau (ATSB) recommended the introduction of mandatory alcohol and other drug (AOD) testing for the aviation industry. The ATSB's report was prompted by a multiple-fatality aircraft accident in which AOD use by the pilot was identified as a possible contributing factor.

In response, the Australian Government directed CASA to develop an AOD management program for the aviation industry, similar to programs in place in other transport sectors. In March 2009, Part 99 of the [Civil Aviation Safety Regulations 1998](#) (CASR) was introduced. It contains two key subparts:

- **Subpart 99B** – which requires certain organisations and individuals to develop a drug and alcohol management program (DAMP). DAMPs are subject to audit, oversight and monitoring by CASA.
- **Subpart 99C** – which establishes a regime of no-notice AOD testing by CASA covering all individuals who perform safety sensitive aviation activities (SSAAs) as defined in section 33 (1) of the [Civil Aviation Act 1988](#) (the Act) and specified in CASR 99.015.

Note: CASR Part 99 can be found in Volume 3 of the current compilation of the [Complete CASRs](#) – produced by the Attorney General's Department. If you have any difficulties finding the Part, please contact the [CommLaw Help Desk](#).

1.2 What is a DAMP?

An organisation's DAMP describes how it meets the requirements of CASR Part 99B. It also provides a framework for the organisation to manage the risks of AOD use in its workplace. The exact structure and content of a DAMP should reflect an organisation's individual policies and procedures. For some, a DAMP might be a stand-alone package of documents. For others, a framework document containing links or references to the location of other material might be preferable.

Note: CASA has produced a [DAMP framework](#) and accompanying guidance notes to assist organisations in developing DAMPs.

1.3 Who needs a DAMP?

CASR Part 99B sets out the organisations and individuals (collectively referred to as 'DAMP organisations') that need a DAMP.

A DAMP organisation:

1. is one of the entities listed in CASR 99.030; and
2. has employees who perform, or are available to perform, any of the specified 'safety sensitive aviation activities' (SSAAs) set out in CASR 99.015.



Note: 'SSAAs' are defined in s 33(1) of the *Civil Aviation Act 1988* as 'activities that impact directly or indirectly on the safety of: (a) civil air operations in Australian territory; or (b) the operation of Australian aircraft outside Australian territory'.

1.3.1 DAMP exemptions

Not all organisations need a full DAMP. Micro-businesses with ten or less SSAA employees may be eligible to adopt CASA's standard DAMP. Please refer to the exemptions section of the [CASA DAMP website](#) for more information.

1.4 Mandatory components of a DAMP

CASR Part 99B requires organisations to implement the following DAMP programs:

- a drug and alcohol **education** program
- a drug and alcohol **testing** program
- a drug and alcohol **response** program.

More detailed guidance on what should be included in these programs is contained in sections 3, 4 and 5 of this guidance document. There are also a number of administrative elements that must be considered or included in an organisation's DAMP. These are set out in section 6 of this guidance document.

Note: organisations are required under CASR Part 99B to make their DAMP available to each SSAA employee before they begin to perform (or become available to perform) an applicable SSAA.

 CASR 99.045

 CASR 99.040

1.5 Developing a DAMP – a systems-based approach

CASA's surveillance approach is based on systems audits that examine selected elements of an organisation's management system. This involves reviewing the documented procedures that underpin the system and verifying their effectiveness.

Your organisation should therefore use a systems-based approach when developing a DAMP. In doing so, it is important to understand that a CASR Part 99B compliant DAMP cannot be a static document sitting on a shelf. Rather, the essential 'building blocks' of a DAMP are the series of **actions** your organisation takes on the ground to manage the risks associated with possible AOD use in your workplace. Examples include AOD testing your employees when they first join your organisation and educating them on the risks associated with AOD use in the workplace before they commence SSAAs.

In turn, your organisation's actions must be underpinned by clearly documented **procedures** that are easily accessible and understood by all relevant employees. Such procedures must form part of your organisation's DAMP and should set out clearly the 'how to's' for completing a task or process, that is:

- what will be done (the precise actions required)
- when it will be done
- who will do it
- what records must be kept and where.

2 Drug and alcohol policy statement

In addition to the mandatory programs set out in section 1.4 above, CASR Part 99B requires organisations to develop an organisation-specific drug and alcohol policy. This is essentially a plain English written statement setting out your organisation's policy on AOD use in the workplace. CASR Part 99B is not prescriptive about what this policy might look like (e.g. in terms of length and content) – this will vary across organisations. However, one of the mandatory components of an organisation's education program is to ensure that SSAA employees are aware of the existence and content of the organisation's policy (section 3.2 refers).

Note: CASR Part 99B does not specify how such 'awareness' should be achieved. CASA suggests that the policy statement be included in an organisation's DAMP framework document. Examples of other options might be:

- to include a copy in the employee's induction pack
- for HR to provide a verbal briefing on the organisation's AOD policy as part of induction training
- to display a copy in the organisation's amenities area
- a combination of the above.

Evidence of an organisation's chosen means of making employees aware of the AOD policy may be requested during a CASA audit.



CASR 99.010

Definition:

'Drug and alcohol education program'

3 Drug and alcohol education program

In this section:

- Purpose
- Mandatory components
- CASA eLearning
- Who must complete the education program?
- Required procedures

3.1 Purpose

The purpose of a drug and alcohol education program is to raise awareness within your organisation about the:

- effects of AOD use on an individual's performance
- risks to aviation safety associated with AOD use
- responsibilities of both the organisation and individual employees
- AOD testing conducted by the organisation and by CASA
- organisation's individual AOD management policy.

3.2 Mandatory components

To comply with CASR Part 99B, a drug and alcohol education program must include (at a minimum) the following components:

For **SSAA employees** - awareness of:

- the individual organisation's policy on AOD use
- AOD testing in your particular workplace
- support services for people who misuse AOD
- the potential risks to aviation safety from AOD misuse.

Additionally for **DAMP supervisors** – training to manage people who may engage in problematic use of, or be affected by, AOD.

This training should make DAMP supervisors aware of:

- Their role and responsibilities under the organisation's drug and alcohol management plan
- Signs and symptoms of employees who may be adversely affected by drugs and alcohol
- The steps to take when a potential safety risk arises
 - Identifying changes in behaviour and performance that may indicate AOD related problems
 - Documentation
 - Action



CASR 99.010
definition of

'Drug and
alcohol
education
program'

Note: in addition to the mandatory components above, the education program could also be an easy way to convey the following information to employees, as required elsewhere in CASR Part 99B:

- make SSAA employees aware they must not perform SSAAs if they are affected by AOD, and if they believe they are affected, encourage them to disclose this to a responsible manager
- inform SSAA employees that they will be required to provide a body sample for testing by the organisation and by CASA if requested.

3.3 CASA eLearning

CASA has developed an eLearning package to help organisations deliver appropriate SSAA employee and DAMP supervisor education. This package is available on the [CASA AOD website](#) and includes two modules:

- 'Alcohol and Other Drugs - Managing the Risk' (for SSAA employees)
- 'Alcohol and Other Drugs - DAMP Supervisor' (for DAMP supervisors).

Note: CASA recommends that DAMP supervisors complete both modules.

3.3.1 Is the CASA eLearning compulsory?

No. However, we recommend that the CASA eLearning forms the backbone of your organisation's education program, supplemented with relevant organisation-specific material. This is because the CASA eLearning:

- provides a consistent method of training your SSAA employees and DAMP supervisors
- is a simple way of meeting part of your organisation's DAMP education obligations
- is provided to you free of cost.

Note: while the CASA eLearning is not compulsory, it is a pre-condition of the [DAMP exemption for Micro-Businesses](#).

3.3.2 My organisation uses the CASA eLearning – what else do we need to do?

For **SSAA employees** - the CASA eLearning contains general information relevant to all DAMP organisations. In addition, you must ensure that all SSAA employees understand their responsibilities under your organisation's DAMP. At a minimum, this means you must demonstrate that your SSAA employees are familiar with:

- your organisation's policy on AOD use.
- how AOD testing takes place in your particular workplace.

For **DAMP supervisors** - completing CASA's DAMP supervisor eLearning module is one way of ensuring that the requirements of Part 99B are met.

3.3.3 What if my organisation chooses not to use the CASA eLearning?

Organisations are free to develop their own education program, as long as it covers the mandatory components set out in section 3.2 above.

3.4 Who must complete the education program?

All SSAA employees (including contractors, sub-contractors and volunteers) must complete your organisation's drug and alcohol education program. All DAMP supervisors must additionally complete role-specific training.

3.4.1 What about employees engaged on a one-off or short-term basis?

As noted above, CASR Part 99B requires that **all** SSAA employees complete the education program. However, CASA acknowledges that it is unworkable to require multiple employees engaged on a one-off or short-term basis to complete the same education program designed for permanent employees or others performing SSAAs on a regular basis.

Note: CASR Part 99 defines a 'regular SSAA employee' as someone who is reasonably likely to perform an SSAA at least two or more times every 90 days.

Regarding students and volunteers, refer to the Note under section 4.3 'Who must be tested and when?' below.

In such cases, it may be appropriate to use a short-form version of your organisation's education program. For example, you could produce a summary document covering the mandatory components set out at 3.2 above which an employee could read and sign before commencing SSAAs.

3.4.2 What if an employee has been educated under another organisation's DAMP?

They must still complete your organisation's drug and alcohol education program. Each DAMP organisation is responsible for educating those individuals employed to perform SSAAs for them. This is because there will be differences across organisations related to, for example, the policy on AOD use and testing programs that must be communicated to the employee via the education program.

An exception to this would be if the organisations have adopted the [CASA exemption EX05/18](#), allowing one DAMP organisation to accept the plan of another contracted DAMP organisation.



CASR 99.010

Definitions:

'regular SSAA employee'

'SSAA employee'

'DAMP supervisor'

3.5 When must the education program be completed?

SSAA employees must complete the education program **before** commencing SSAA duties. This requirement applies to new employees as well as existing employees whose role is changing to include SSAAs.

DAMP supervisors must complete training for that role before commencing it.

SSAA employees must complete a subsequent DAMP education program within 30 months of their previous completion of the DAMP education program, and DAMP supervisors must complete a subsequent DAMP Supervisor education program within 30 months of their previous completion of the DAMP Supervisor education program.

3.6 Does the education have to be given in a certain way?

How the education program is delivered is entirely up to your organisation. Possible options include:

- SSAA employees and DAMP supervisors completing the relevant CASA eLearning modules and receiving a copy of the organisation's policy on AOD and details of the organisation's testing program
- a one-on-one session with management as part of the organisation's induction process
- a group session - if a number of SSAA employees join at the one time (e.g. seasonal workers, intake of flight attendants)
- a presentation delivered by a training provider
- a combination of the above.

3.7 Processes and procedures

Your organisation needs a procedure in place to identify employees who will be performing SSAAs so that training can be delivered before they begin. Organisations should also record when initial training occurs and when refresher training is due.

For example, the education program requirement could be included on an induction checklist which is signed off by management when induction has been completed.

Drug and alcohol education program audit

Examples of documentation that may be requested during a CASA audit are:

- training register which records when and to whom initial SSAA employee and DAMP supervisor training was delivered, and demonstrates that such training took place before those individuals commenced SSAAs
- details of how subsequent training for SSAA employees and DAMP supervisors, including identified dates for refresher training, is tracked
- copies of any training material used (other than CASA material).

During the course of an audit, SSAA employees might be asked questions such as:

- when did you commence SSAAs?
- how and when was the organisation's drug and alcohol education program delivered to you?
- when and how were you made aware of the organisation's policy on AOD use?

4 Drug and alcohol testing program

In this section:

- Overview
- Purpose
- Who must be tested and when?
- How is AOD testing conducted and by who?
- Exemptions

4.1 Overview

There are two separate testing programs covered by CASR Part 99:

- **Part 99B testing**—AOD testing carried out under an organisation’s DAMP
- **Part 99C CASA testing**—no-notice AOD tests conducted by CASA approved testers.

Note: this guidance manual focuses on what DAMP organisations need to do to implement a CASR Part 99B compliant drug and alcohol testing program.

4.2 Purpose

The purpose of a DAMP testing program is to ensure that people under the influence of AOD while performing SSAAs are promptly identified and tested. It should also have a deterrent effect on problematic AOD use by employees, as well as encouraging them to self-disclose if they are affected by AOD in the workplace.

4.3 Who must be tested and when?

All employees (including contractors, sub-contractors, volunteers and students) who perform or are available to perform SSAAs must be tested in the following three circumstances:

NOTE: Student pilots or volunteers that are NOT employed by the organisation to perform SSAA, or are not under any form of employment contract or any contractual agreements that stipulate they are employed, whether paid or unpaid, to perform SSAA, or are NOT a ‘regular SSAA employee’ or contractor, are not required to be covered by the organisation’s DAMP.

For example: a student pilot contracting the services of a flying school for the purposes of obtaining training in order to gain a pilot’s licence, **where there is no contract or written agreement stating the student is employed by or engaged by the flying school as a volunteer.**



CASR
99.050(2)

4.3.1 When an employee first joins an organisation

When an individual is employed as a 'regular SSAA employee' they must be AOD tested when they first join and before they commence performing SSAAs. This requirement also applies to existing employees whose role changes to include SSAAs.

Note: CASR Part 99 defines a 'regular SSAA employee' as someone who is reasonably likely to perform an SSAA at least two or more times every 90 days.

Exceptions: there are two circumstances where 'first-join' testing is not required:

- under [CASA Exemption - use of pre-hiring drug and alcohol tests](#), a pre-hiring test can meet the testing requirement if the test was conducted in the preceding 90 days and the results were not positive
- if the employee has been otherwise tested (e.g. by another DAMP organisation) in the preceding 90 days and the results were not positive.

The organisation must still verify the test results, confirm that the tests were conducted in accordance with the standards, and keep records of the tests.

4.3.1 Reasonable grounds

Testing must take place when an appropriately trained DAMP supervisor has 'reasonable grounds' to believe that an SSAA employee may be adversely affected by AOD. What amounts to 'reasonable grounds' will vary depending on the circumstances. Some examples of possible 'reasonable grounds' include:

- excessive and/or unexplained absenteeism
- 'on-the-job' absenteeism (e.g. long breaks, frequent trips to the bathroom)
- a decline in the quality of work (e.g. misunderstanding instructions, missed deadlines, accidents or near misses)
- verified reports from people who have witnessed the individual's AOD use.

4.3.2 After an accident or serious incident

Testing must be conducted after an 'accident' or 'serious incident' involving a SSAA employee, if 'suitable test conditions' exist. 'Suitable test conditions' means that testing can be conducted within the following timeframes and it is 'practicable' to do the tests:

- alcohol testing within 8 hours of the accident or incident
- drug testing within 32 hours of the accident or incident.



CASR 99.010

Definition:

'regular SSAA employee'



CASR 99.010

Definitions:

'accident'

'serious incident'

'suitable test conditions'

Note: whether it is 'practicable' to conduct the test will vary depending on the circumstances and may depend on factors such as the:

- distance between the site of the accident or incident and testing facilities
- medical condition of the employee involved (e.g. the employee may require urgent medical treatment which would take priority over testing)
- time of day that the accident or incident occurs which means it is not possible to access an accredited testing provider in the required timeframe.

In such circumstances, organisations should document the reasons why it was not practicable to conduct testing of the employee. The employee must be prevented from performing SSAAs for a period of 32 hours from the time the accident or incident occurred.

4.4 What is the procedure for alcohol testing?

Alcohol tests must **only** be conducted by taking a breath sample on a device that meets one of the following Australian standards:

- Standard AS3547 – Breath alcohol testing devices for personal use.
- Standard NMI R 126 – Pattern approval specifications for evidential breath analysers.

Breath alcohol testing can be conducted in-house (i.e. on your organisation's premises) or by an external testing provider.

4.4.1 Who can conduct breath alcohol testing?

The person giving the breath alcohol test does not need any particular qualifications or accreditation, as long as the device meets one of the relevant standards and is used according to the manufacturer's instructions. Organisations conducting breath alcohol testing in-house should satisfy themselves that the person giving the test understands and adheres to the manufacturer's instructions for the particular device being used.

4.4.2 What happens if the initial test is positive?

A confirmatory alcohol test must be conducted in the time period specified by the device manufacturer's instructions. The 'permitted level' of alcohol is 0.02 grams of alcohol per 210 litres of breath. If the confirmatory alcohol test shows that this level is reached or exceeded, it is considered a positive alcohol test and the employee must immediately cease SSAAs. The organisation's drug and alcohol response program must then be implemented (section 5 refers).

4.5 What is the procedure for drug testing?

The procedure for drug testing under CASR Part 99B can be divided into three steps:



CASR 99.010

Definition:

'relevant standard'



CASR 99.060



CASR 99.010

Definitions:

'initial alcohol test'

'confirmatory alcohol test'

'permitted level'

1. Collection of a specimen (urine or oral fluid).
2. Initial (screening) test to detect the presence of a testable drug in the specimen.
3. Confirmatory test if the initial (screening) test returns a 'non-negative' or 'detected' result to confirm the presence and level of a testable drug.

The following Australian Standards must be met:

- Oral fluid – AS 4760 – Procedures for specimen collection and the detection and quantitation of drugs in oral fluid.
- Urine – AS/NZS 4308 – Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine.

4.5.1 What drugs are tested for?

Amphetamines, cannabis, cocaine and opiates. The cut-off levels are set out in the relevant Australian Standard.

4.5.2 Who can collect a specimen?

For both oral fluid and urine drug testing, specimens must only be collected by:

- a testing provider accredited to Australian standard AS 4760 - Section 2 (oral fluid) and AS/NZS 4308 - Section 2 (urine)
- a collector who has successfully completed a course of instruction for specimen collection and has received a statement of attainment trained in accordance with the [Australian Qualifications Framework](#)
- a trained collector, doctor, nurse or 'capable person' (using [CASA - Exemption of DAMP organisations for collection and screening of specimens](#)) (section 4.6 refers).

4.5.3 Who can conduct an initial (screening) drug test?

This depends on whether your organisation is testing using oral fluid or urine specimens.

For **urine testing**, an initial (screening) test can be conducted by:

- a testing provider accredited to Australian Standard AS/NZS 4308 – Sections 3 and 4 (laboratory testing) or Appendix A (on-site (point of collection) testing)
- a trained collector, doctor, nurse or 'capable person' (using [CASA - Exemption of DAMP organisations for collection and screening of specimens](#)) (section 4.6 refers).



CASR 99.010
Definition:

'relevant
standard'



CASR
99.010(1)
Note 2 re
'testable
drugs'

For **oral fluid testing**, an initial (screening) test can *only* be conducted by:

- a testing provider accredited to Australian standard AS/NZS 4760 – Section 4.

4.5.4 Who can conduct a confirmatory drug test?

A confirmatory drug test can **only** be conducted by a testing provider accredited to Australian standard:

- AS/NZS 4760 - Section 5 (oral fluid)
- AS/NZS 4308 - Section 5 (urine).

4.5.5 How do we confirm that a testing provider is accredited to the relevant standards?

Organisations should request evidence of the relevant accreditation from the testing provider. In most cases, this will be a copy of the provider's scope of accreditation certificate from the [National Association of Testing Authorities](#) (NATA). This certificate should set out the Australian Standard (and the specific sections of those Australian Standards) under which the testing provider is accredited.

Note: a single testing provider might be accredited to undertake all three steps outlined in section 4.5 above (collection, initial screening test and confirmatory test). See Attachment 6 of this guidance manual for a step-by-step guide to locating a NATA accredited testing provider.

4.5.6 What happens if a confirmatory drug test returns a positive result?

Your DAMP organisation must consult a Medical Review Officer (MRO) to determine if the result was due to a legitimate therapeutic treatment or some other innocuous source (for example pain relief medication containing codeine may trigger a positive result for opiates). If this is the case, the employee can commence (or resume) SSAAs **if the MRO deems that the employee is fit to do so**. If the result is not due to legitimate therapeutic treatment or some other innocuous source, the organisation's drug and alcohol response program must be implemented (section 5 refers).

4.6 Exemption for DAMP organisations for collection and screening of specimens

CASA acknowledges that many DAMP organisations have difficulty accessing appropriately accredited testing providers as required by CASR Part 99.

An exemption has been put in place to assist industry – [‘Exemption of DAMP organisations for collection and screening of specimens’](#). This exemption allows, under certain circumstances, for the collection of oral fluid and urine drug test samples, and on-site testing of urine drug test samples by a doctor, a nurse, a trained collector or a ‘capable person’ as outlined below.

Note: this exemption is designed to assist DAMP organisations operating in remote areas. It does not apply to any collection or screening of drugs carried out in a ‘capital city’ (as defined in the exemption). DAMP organisations should check the exemption to confirm that they are eligible to use it.

Doctor or nurse - must be registered and be performing duties which include the collection, storage, handling and despatch of biological specimens in a hospital, general practice or pathology practice.

Trained collector - must be appropriately qualified through the successful completion of a course of instruction in the relevant oral fluid or urine Australian Standard, and have a statement of attainment.

Capable person - may be used only if a doctor, a nurse or a trained collector is not ‘reasonably available’ due to the geographical remoteness of the DAMP organisation. If a capable person is engaged, they must notify CASA before undertaking any collection or screening under the exemption and affirm in writing that they have completed relevant training and has demonstrable competency in such collection or screening.

Note: evidence that the person engaged meets the above criteria should be requested and retained for your organisation’s records.

Note: on-site (point of collection) screening of oral fluid samples is not permitted under this exemption – oral fluid samples must be screened by a NATA-accredited testing provider.

Note: confirmatory drug testing (urine or oral fluid) must be conducted by a NATA accredited testing provider. Even if the organisation conducts initial testing under the exemption, it would need to use an accredited testing provider to perform the confirmatory test.

Drug and alcohol testing program audit

The following are examples of documentation that may be requested during a CASA audit:

- evidence that tests are conducted in accordance with the relevant Australian Standard and that the testing provider is appropriately accredited (for example a copy of the NATA scope of accreditation certificate)
- a specimen collector's statement of attainment
- a calibration certificate for the device used for alcohol testing and evidence that it meets the relevant Australian Standard
- testing records demonstrating that testing has been conducted on all SSAA employees as required under Part 99B
- documented evidence in relation to any accident or serious incident testing, e.g. incident reports, test results and engagement of a MRO if required.

Questions that could be asked during the audit include:

- who conducts the alcohol testing in your organisation? How do you ensure the manufacturer's instructions are followed? Who organises calibration of the device and how do they know when this is due?
- DAMP supervisors could be asked how they decide there are reasonable grounds for testing.

5 Drug and alcohol response program

In this section:

- Purpose
- When must an employee cease performing SSAAs?
- When can an employee resume performing SSAAs?

5.1 Purpose

The purpose of a drug and alcohol **response** program is to ensure that anyone performing SSAAs under the influence of AOD ceases performing those activities until it is deemed safe to resume them. An organisation's drug and alcohol response program is activated when impermissible AOD use has been identified and confirmed via its testing program.

5.2 When must an employee cease performing SSAAs?

An organisation must have a documented process in place to prevent an employee from performing (or being available to perform) SSAAs in the following circumstances:



CASR 99.065

- if the employee has:
 - recorded an initial positive result for an AOD test. The employee must immediately cease any SSAAs and not be permitted to return to any SSAAs until a confirmatory test returns a negative result
 - recorded a positive result for a confirmatory AOD test under testing conducted by the organisation or CASA, and the MRO has not determined that the test result is due to legitimate therapeutic treatment or some other innocuous source
 - refused a test or interfered with the integrity of a test
- if a DAMP supervisor has reasonable grounds to believe that an SSAA employee is under the influence of AOD
- if an 'accident' or 'serious incident' has occurred (section 4.3.3 refers).

5.3 When can an employee resume performing SSAAs?

If an SSAA employee has been suspended from conducting SSAAs due to a positive confirmatory AOD test, or for refusal to attend an AOD test or for interfering with the integrity of an AOD test, Part 99B requires an organisation to only permit an employee to return to an SSAA if the following range of circumstances apply:

- the employee has undergone a **comprehensive assessment** for drug or alcohol use (section 5.3.1 refers); and
- if recommended by the comprehensive assessment: the employee to begin participating in a nominated **drug or alcohol intervention program** (section 5.3.2 refers); and
- the employee is considered fit (after an assessment by the MRO or the employee's treating clinician) to resume SSAAs or being available to perform SSAAs; and
- in relation to suspension due to a positive drug test: at the time the employee is considered fit to resume SSAAs, the employee receives a negative confirmatory drug test and a MRO is satisfied that the negative confirmatory drug test indicates the absence of testable drug use.

Note: Part 99 is silent on whether an organisation should return an employee to SSAAs after a positive result for either a confirmatory alcohol test or a confirmatory drug test when an MRO has confirmed that the result was not the result of legitimate therapeutic treatment or other innocuous source. CASA plays no part in this decision. Rather, it is based on the individual organisation's policy on such matters.

If an organisation does elect to return an employee to SSAA duty in these circumstances, they must ensure that all the requirements of the DAMP response program have been met before that employee resumes SSAAs.



CASR 99.070

5.3.1 Comprehensive assessment

The purpose of a comprehensive assessment is to determine the extent of an employee's AOD use and recommend suitable treatment options. It involves an examination of a person's physiological and psychosocial indicators and must be carried out:

- by a psychiatrist; or
- by a medical practitioner who is a Fellow of the Australasian Chapter of Addiction Medicine; or
- jointly by a medical practitioner and an 'appropriately qualified drug and alcohol professional'.

Note: CASA has also developed a workbook, [Problematic Alcohol and Other Drug Use in the Australian Aviation Sector](#) (PDF 4MB) which is designed to provide further guidance to organisations interested in implementing a comprehensive assessment.

5.3.2 Drug and alcohol intervention program

Following a comprehensive assessment, the MRO may recommend a drug and alcohol intervention program tailored to the needs of the individual in question. It may include the following:

- an assessment
- treatment (e.g. education; counselling; consultation with health care professionals; pharmacotherapy; residential or non-residential treatment programs)
- monitoring and follow-up action.



CASR 99.010

Definitions:

'comprehensive assessment'

'appropriately qualified drug and alcohol professional'



CASR 99.010

Definition:

'drug and alcohol intervention program'

Drug and alcohol response program audit

Documentation that may be requested during a CASA audit includes:

- the section of the DAMP that documents the organisation's drug and alcohol response program
- details of who the organisation has appointed as a MRO or how an MRO would be appointed if required under Part 99B
- evidence that a comprehensive assessment was conducted in situations where one was required, including documentation relating to the recommendations resulting from that assessment
- evidence that the individual who carried out a comprehensive assessment was qualified to do so in accordance with Part 99B requirements
- rosters or work allocation demonstrating that employees did not perform, or were not available to perform, SSAA duties when they should have ceased SSAA duties
- evidence that a drug and alcohol intervention program was commenced before an SSAA employee was returned to SSAA duties.

Examples of questions that might be asked as part of the audit:

- who is responsible in your organisation for coordinating and managing your drug and alcohol response program?
- describe the system you have in place to stand someone down because of a positive AOD test and how you determine whether that person is suitable to resume SSAA duties.
- How do you implement a drug and alcohol intervention program for an employee, if one is required?

6 General administration

In this section:

- DAMP contacts
- Role of a Medical Review Officer (MRO)
- Availability of the DAMP
- Document control protocol
- DAMP record keeping
- DAMP review and audit

6.1 DAMP contacts

Implementing your organisation's DAMP is the responsibility of all employees from senior management to frontline staff. However, there are some key roles that need to be identified and recorded in the DAMP, as detailed below.

6.1.1 DAMP contact officer

An organisation's 'DAMP contact officer' is CASA's key liaison point on DAMP related matters. Your organisation's DAMP must identify and provide contact details for this person. You must notify CASA in writing of any changes to the position. A DAMP organisation contact form is available on the [CASA DAMP website](#).

Note: when nominating your organisation's DAMP contact officer, you should consider whether he or she is the right person (e.g. in terms of their seniority and experience in the organisation) as he or she will be the one to receive CASA audit requests and reports, positive test reports emerging from CASA AOD testing etc.

6.1.2 DAMP supervisor

A DAMP supervisor is an employee who:

- has received relevant training to form an opinion that a person may be affected by AOD
- is authorised by the organisation to require AOD testing of an SSAA employee where there are 'reasonable grounds' to believe that SSAA employee may be adversely affected by AOD.

An organisation's DAMP supervisor(s) must be identified in its DAMP. There is no limit to how many DAMP supervisors an organisation may have, as long as each DAMP supervisor has been appropriately trained. CASA recommends that as a rule of thumb, the ratio of DAMP supervisors to SSAA employees be roughly 1:10 (that is, one DAMP supervisor for every ten SSAA employees), to ensure that DAMP supervisor responsibilities can be effectively discharged.



CASR 99.010

Definition:

'DAMP contact officer'



CASR 99.010

Definition:

'DAMP supervisor'

6.2 Medical Review Officer

A DAMP MRO is a medical practitioner who has:

- competence in the field of interpreting drug and alcohol test results
- knowledge of substance use disorders
- knowledge of the contents of CASR Part 99B.

Although there is no requirement to nominate a particular MRO in your organisation's DAMP, you should at a minimum document how your organisation would locate a MRO if required.

Part 99B requires an organisation to consult a MRO in the following circumstances:

- if a confirmatory drug test conducted under the DAMP on an SSAA employee returns a positive result: to confirm whether or not the presence and level of the testable drug detected could be the result of legitimate therapeutic treatment or some other innocuous source
- to review medical information concerning a person's failure to give a sample for testing because of a medical condition
- to determine if the employee is fit to resume performing or being available to perform a SSAA.

6.3 Availability of the DAMP

Under CASR Part 99B, your organisation must ensure that its DAMP is 'made available' to each SSAA employee *before* they begin to perform (or become available to perform) a SSAA.

CASR Part 99B does not specify how the DAMP should be 'made available' to SSAA employees. From a CASA audit perspective, acceptable ways of making the DAMP available might be:

- alerting the employee to the location of a hard copy of the DAMP
- including links to an electronic version of the DAMP in an employee's induction documentation
- including an electronic version of the DAMP on a CD rom or USB stick as part of the employee's induction package
- a combination of the above.



CASR 99.010

Definition:

'Medical
Review
Officer'



CASR 99.040

6.4 Document control protocol

Under CASR Part 99B, an organisation must implement its DAMP using a document control protocol that ensures documents and policies remain current.

A controlled document is a reference document which, through the course of its life cycle, might be reviewed, modified and distributed several times. When any controlled document is revised, it supersedes its previous version. Revised documents should be recorded into a master document register controlled by the organisation. The revised document should be made into a PDF before being saved as the final updated version. Your organisation might already have a policy for document control in place which could be applied to the DAMP.

6.5 DAMP reporting

Under [CASA EX 143/17](#), DAMP organisations are no longer required to report information to CASA twice a year, as per 99.100.

6.6 DAMP record keeping

Regulation 99.105 requires a DAMP organisation to keep records used to provide information to CASA under regulation 99.100 for 5 years from the date the information was provided to CASA. Despite the DAMP reporting exemption, a DAMP organisation is still required to keep the records for that period as if it had provided the information to CASA.

In addition, organisations must:

- keep records in a secure location. Different levels of security may be applied to certain documents (for example test results may be stored with higher restrictions on access than education records)
- destroy or delete the records, or parts of records, that relate to drug or alcohol testing, within six months after the five-year retention period
- establish a process that ensures records are kept for the required time, stored securely and disposed of at the required times.

6.7 DAMP review and audit

Under CASR Part 99, DAMP organisations must regularly review their DAMP. At a minimum, such reviews must be conducted every five years, beginning on the date on which the DAMP was implemented -and at any other time directed by CASA.

It is important to note that while there is a requirement under CASR Part 99 for DAMP organisations to develop and implement a DAMP, CASA will not approve an organisation's DAMP. Instead, CASA may audit a DAMP organisation to ensure that the DAMP has been appropriately developed, implemented and enforced. An organisation may be required to provide a copy of its DAMP, as well as records demonstrating that the organisation is implementing it, and any other information relevant to the audit as specified by CASA. The organisation must comply with this requirement or face possible enforcement action.



CASR
99.080 (2) (c)



CASR 99.100



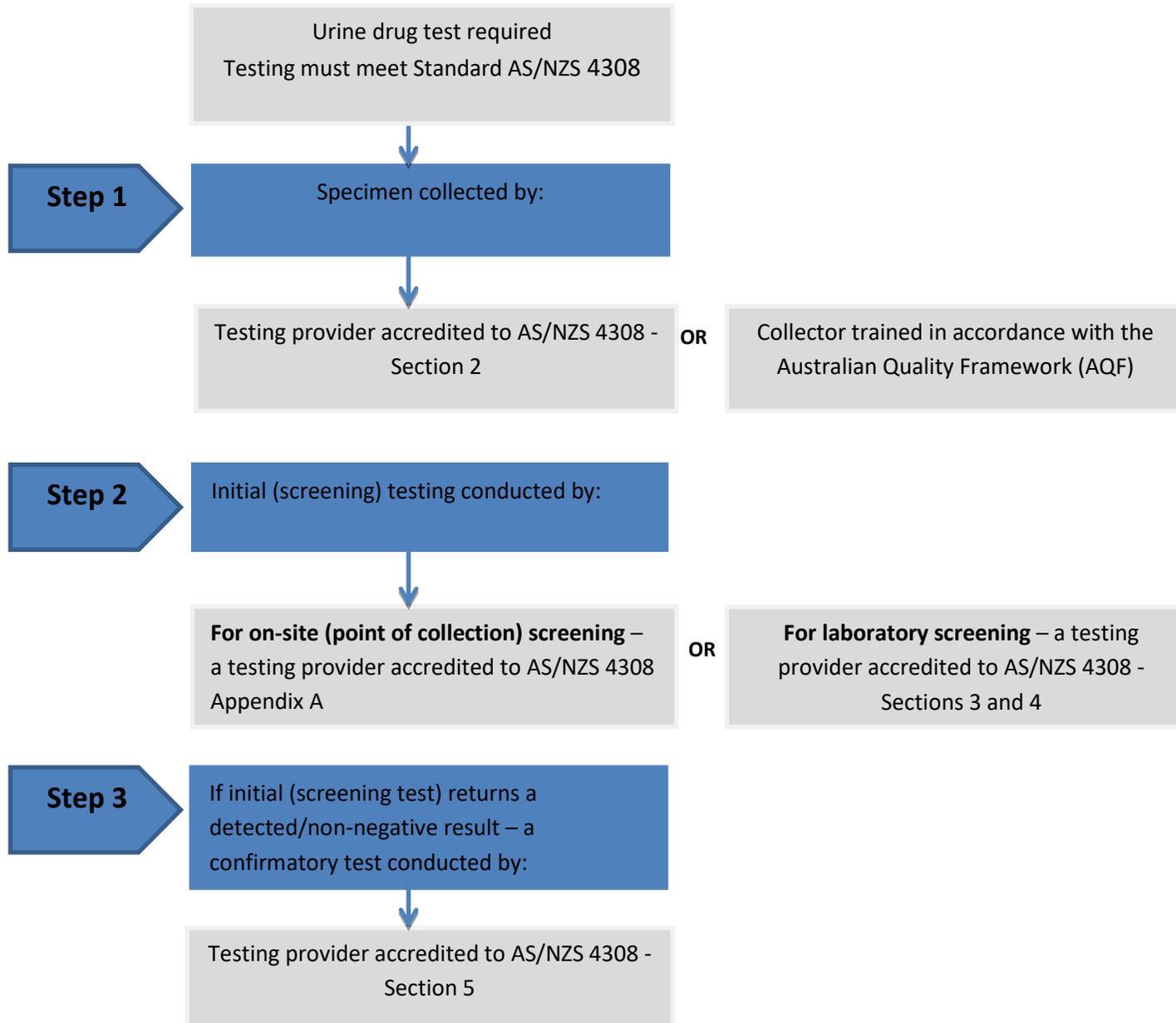
CASR 99.105



CASR 99.085

Examples of documentation required or evidence that may be gathered during the audit are included in the 'audit' text boxes at the end of the education, testing and response program sections above (sections 3.7, 4.6 and 5.3.2). It is important to note that these examples provide guidance on the type of material required and are not intended to be an exhaustive list.

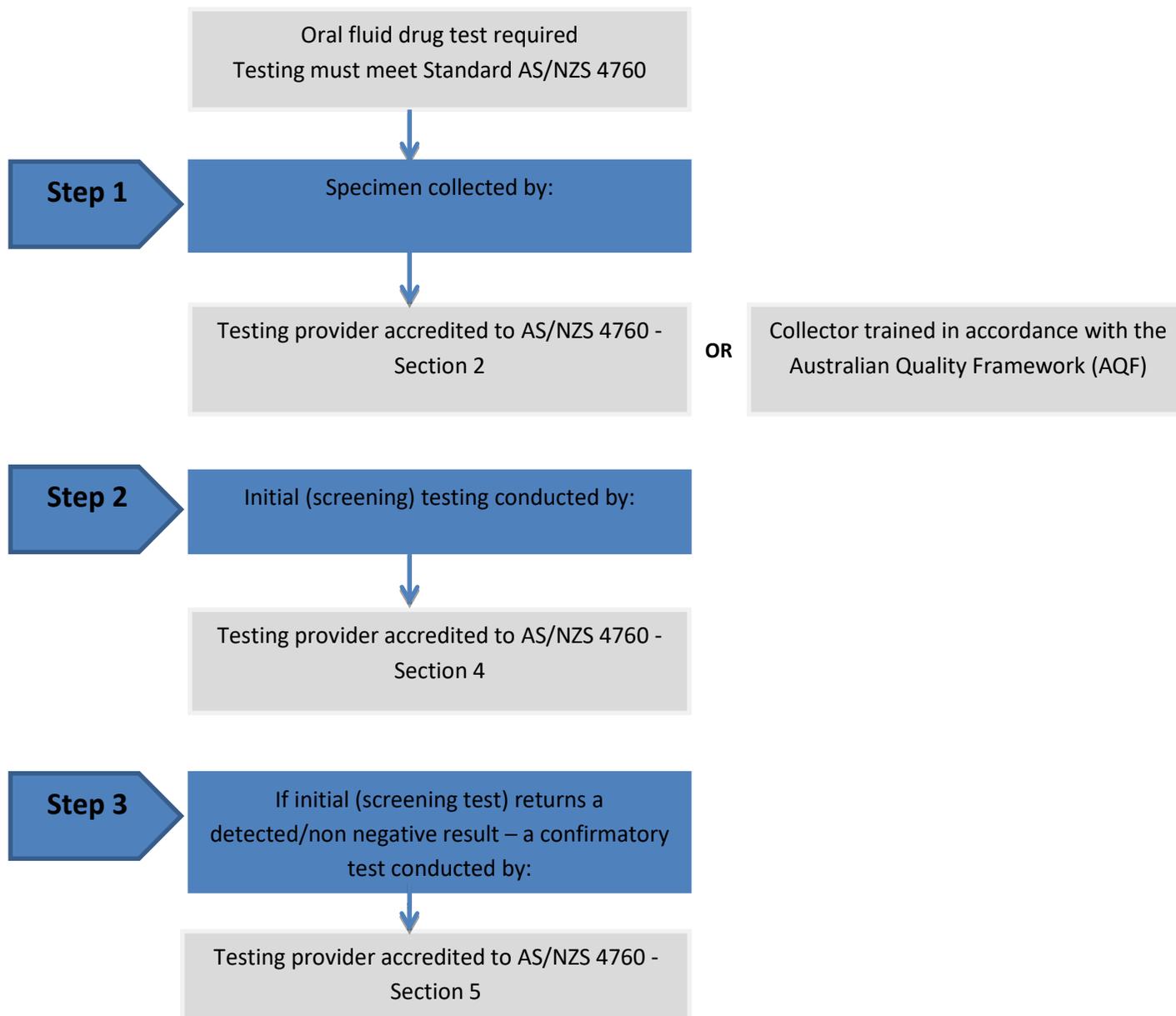
Attachment 1 - drug testing procedure - urine



*Note – An exemption has been put in place to assist DAMP organisations operating in remote areas that might have difficulty accessing appropriately accredited testing providers – **See section 4.6 of this Guidance Manual for further detail on this exemption.**

The use of this exemption is subject to certain eligibility (based on geographical location) and other requirements. Organisations should familiarise themselves with this exemption to confirm they meet these requirements.

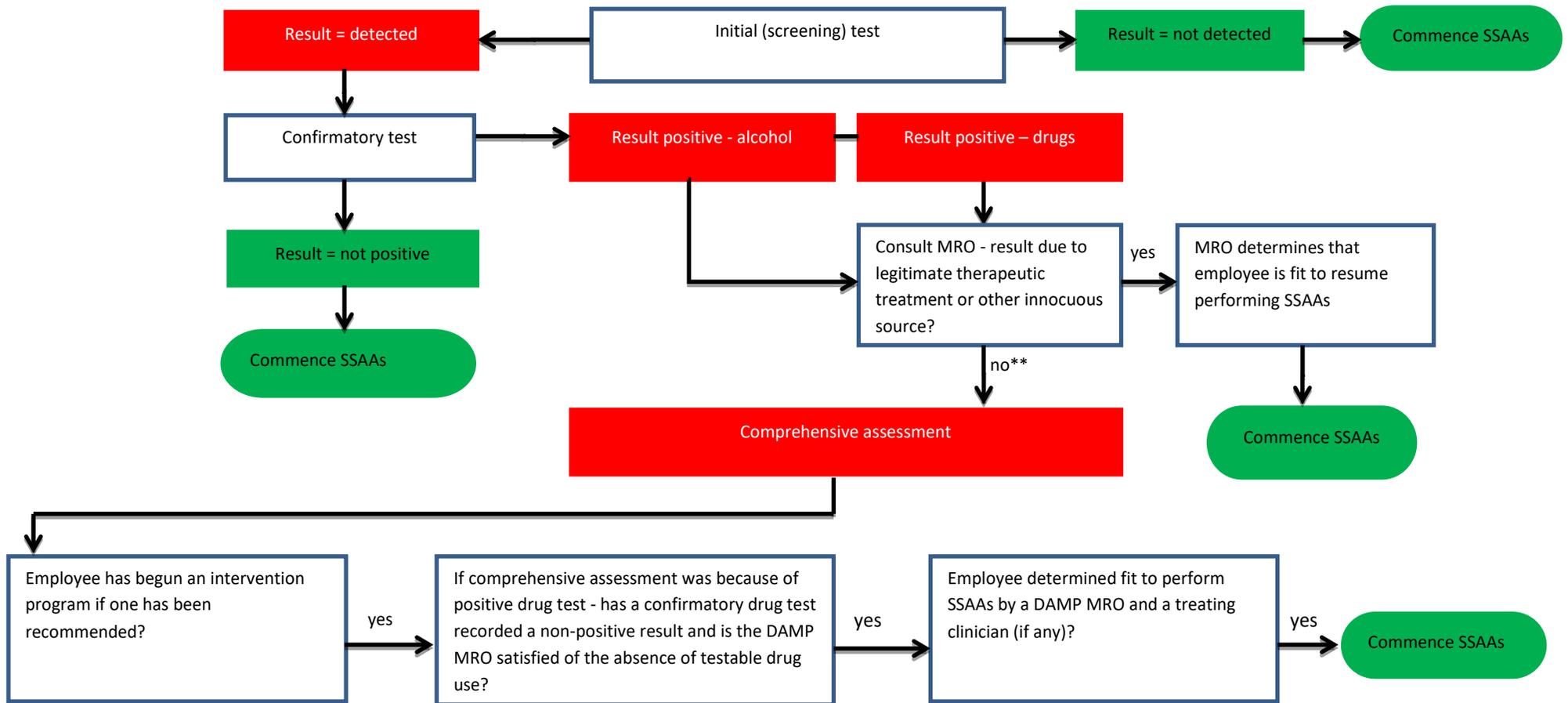
Attachment 2 - drug testing procedure - oral fluid



*Note – An exemption has been put in place to assist DAMP organisations operating in remote areas that might have difficulty accessing appropriately accredited testing providers – **See section 4.6 of this Guidance Manual for further detail on this exemption.**

The use of this exemption is subject to certain eligibility (based on geographical location) and other requirements. Organisations should familiarise themselves with this exemption to confirm they meet these requirements.

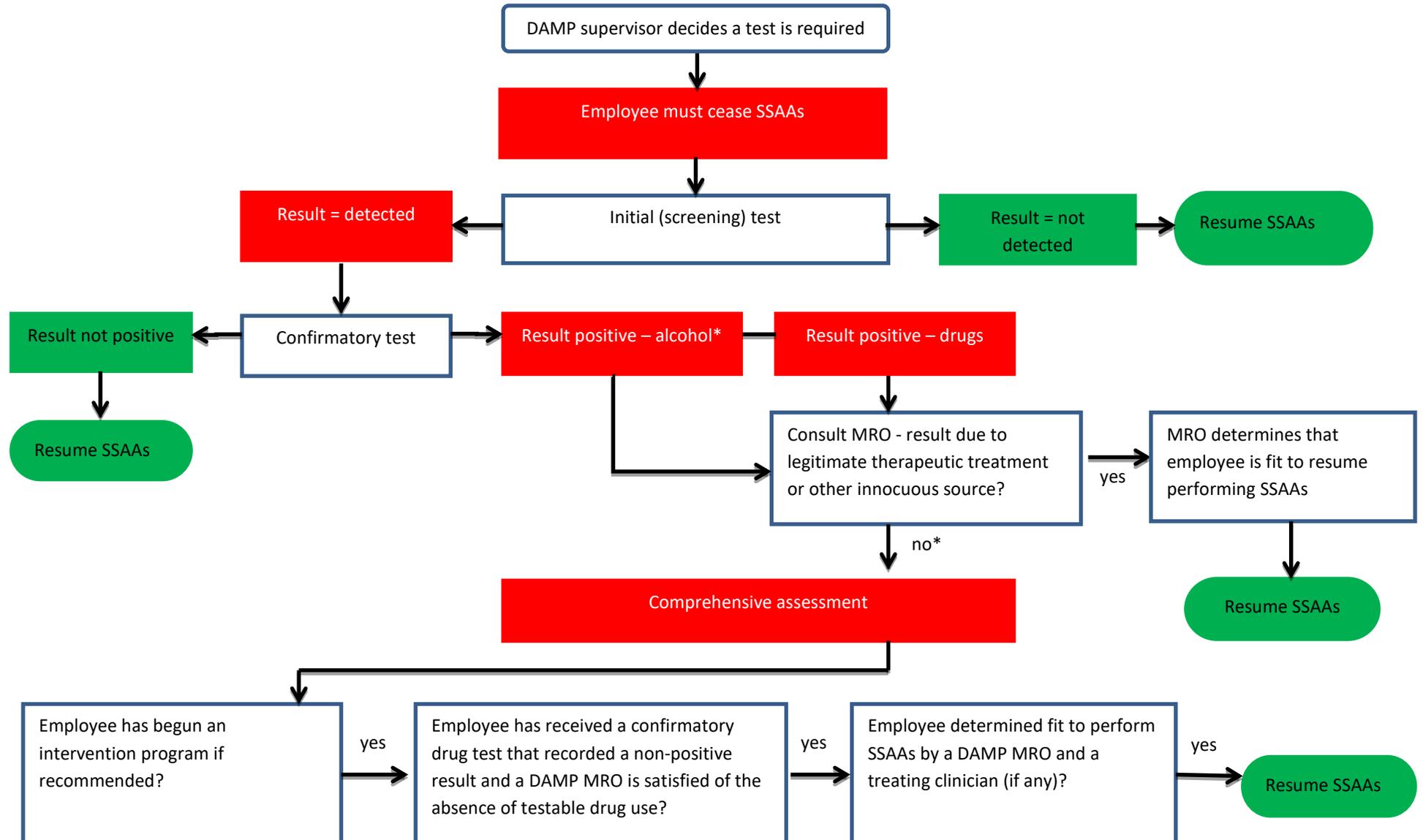
Attachment 3 - DAMP testing: when an employee first joins the organisation as a 'regular SSAA employee'*



* Existing employees whose role is changing to include SSAAs must also be tested before they commence performing such activities. Note that in certain circumstances the use of a pre-hiring drug or alcohol test is permitted. Organisations should familiarise themselves with the relevant exemption to confirm whether they are eligible to use it.

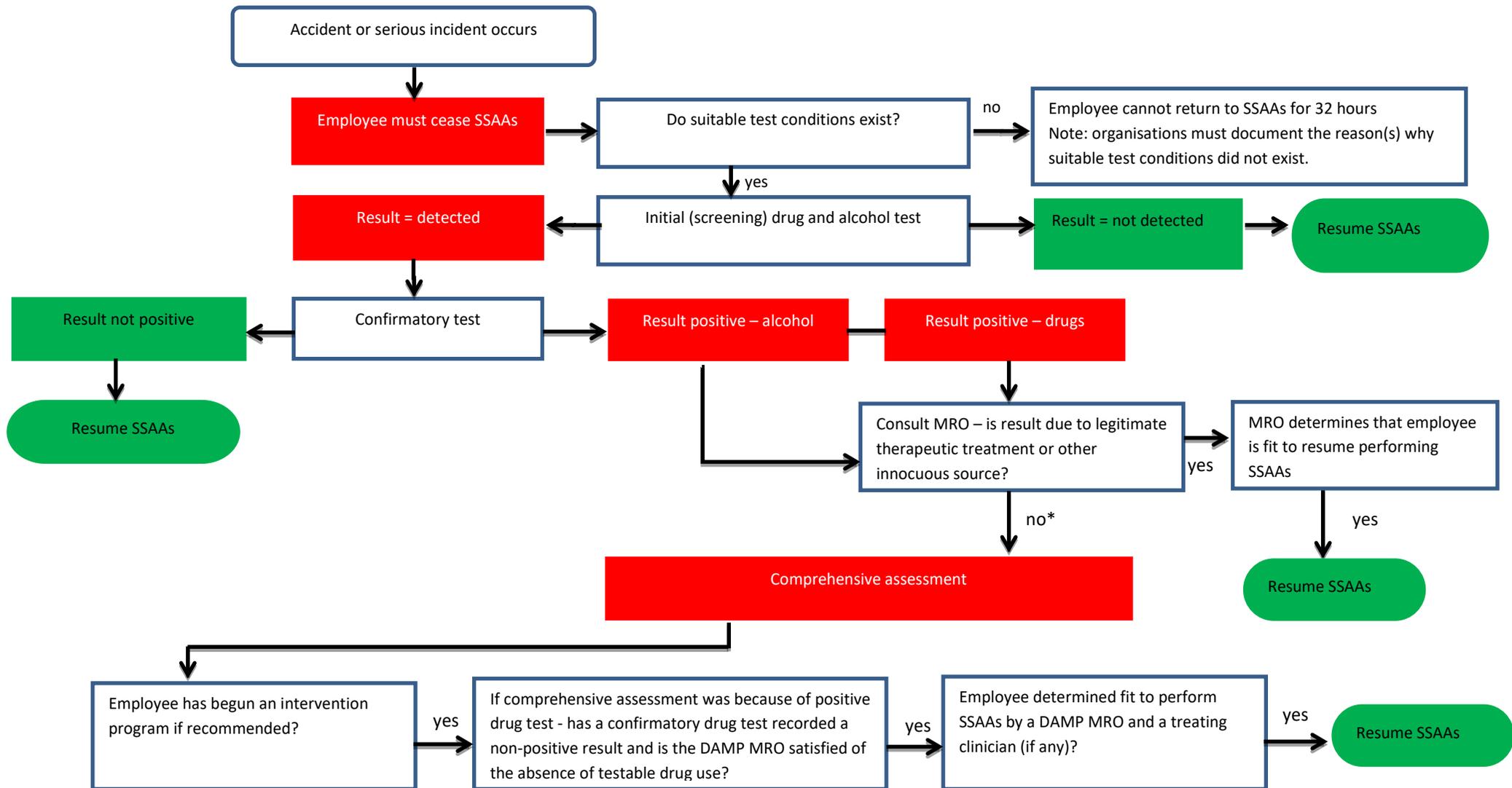
** CASR Part 99 is silent on whether an organisation should proceed to employ an individual who has returned a positive result for either a confirmatory alcohol test or a confirmatory drug test when an MRO has confirmed that the result was not the result of legitimate therapeutic treatment or other innocuous source. CASA plays no part in this decision. Rather, it is based on the individual organisation's policy on such matters. If an organisation elects to proceed with the hire, they must ensure that all the requirements of the DAMP response program (comprehensive assessment, intervention program begun if recommended etc.) have been met before that employee commences SSAAs.

Attachment 4 - DAMP testing when a DAMP supervisor has 'reasonable grounds' to believe that a SSAA employee may be adversely affected by a testable drug or alcohol



* Part 99 is silent on whether an organisation should return an employee to SSAAs after a positive result for either a confirmatory alcohol test or a confirmatory drug test when an MRO has confirmed that the result was not the result of legitimate therapeutic treatment or other innocuous source. CASA plays no part in this decision. Rather, it is based on the individual organisation's policy on such matters. If an organisation does elect to return an employee to SSAA duty in these circumstances, they must ensure that all the requirements of the DAMP response program (comprehensive assessment, intervention program begun if recommended etc.) have been met before that employee resumes SSAAs.

Attachment 5 - DAMP testing after an 'accident' or 'serious incident'



* Part 99 is silent on whether an organisation should return an employee to SSAAs following a positive result for a confirmatory AOD test after an accident or serious incident. CASA plays no part in this decision. Rather, it is based on the individual organisation's policy on such matters. If an organisation does elect to return an employee to SSAA duty in these circumstances, they must ensure that all the requirements of the DAMP response program (comprehensive assessment, intervention program begun if recommended etc.) have been met before that employee resumes SSAAs.

Attachment 6 – How to find a NATA accredited testing provider

1. Go to www.NATA.com.au

This will take you to the screen below. On the right side of the screen, under the 'Site Search' heading enter the standard number (in this case, '4308' for urine drug testing), and select 'type of test'.

The screenshot displays the NATA website interface. At the top, the header includes the NATA logo and the text "National Association of Testing Authorities, Australia". A navigation menu is visible below the header. The main content area is divided into several sections:

- Technical Infrastructure Alliance:** Logos for NATA, STANDARDS Australia, JAS-ANZ, and the Australian Government National Measurement Institute. Below the logos is the text "A Member of Australia's Standards and Conformance Infrastructure".
- Welcome to NATA:** A central section with a heading and a paragraph describing NATA's role. Below this are three columns of links under the headings "About NATA", "Accreditation Information", and "Accreditation Publications".
- Latest News Updates:** A section with a heading and a list of news items, including "Proficiency Testing Programs Needed" and "Chemical Testing Publications updated".
- Latest Technical Updates:** A section with a heading and a list of technical updates, including "DRAFT Document for comment" and "NATA Procedures for Accreditation updated".
- Site Search:** A search box on the right side of the page. The search term "4308" is entered, and the "Type of Test" radio button is selected. The search box is highlighted with a red rectangle.
- LIFE SCIENCES QUALITY MANAGERS FORUM:** A section at the bottom right with a heading and a paragraph of text, including a "More Info..." link.

The search box on the right side of the page is highlighted with a red rectangle. The search term "4308" is entered, and the "Type of Test" radio button is selected.

2. The search page will be displayed. Using the numbers at the top of the page, scroll through the results to find a facility that is in your geographical area, and click on the name of the facility.

The screenshot shows the NATA website's search results page. The header includes the NATA logo and navigation links. The main content area is titled 'Test Type Search' and displays a list of 8 facilities. Each facility entry includes its name, accreditation number, and a brief description of its services. A 'SITE SEARCH' sidebar is visible on the right, providing search tips and options to filter results by database, facility name, or test type.

Facility Name	Accreditation No.	Location
Capital Pathology	3448	Bega, NSW
Biome Analytical Services Limited	4105	Flemington, VIC
Coast Pathology Pty Ltd	18866	Singleton, NSW
ChiroPath Pathology Pty Ltd	2819	Kalgoorlie, WA
Lynette Pathology	2203	Bowral, NSW
PathWest Laboratory Medicine WA	2392	Nedlands, WA
St John of God Pathology	2913	Geraldton, WA
Western Diagnostic Pathology		Kalgoorlie, WA

3. Each facility has a page to provide contact details and further information. To comply with the Part 99 Regulations, testing providers must have specific certifications. To check that a testing organisation has these certifications, click on the option to 'View Detailed Scope'.

The screenshot shows the detailed page for 'Capital Pathology'. It provides comprehensive contact information, including the address, phone number, fax, and email. A 'View detailed Scope' link is prominently displayed at the bottom of the page. The 'SITE SEARCH' sidebar is also visible on the right.

Capital Pathology
 Accreditation No: 3448
 Bega Laboratory
www.capitalpath.com.au
 Contact: Ms C MacBean
 Phone: (02) 6492 2013
 Fax: (02) 6494 7130
 Email: cassie.macbean@capitalpath.com.au
 Address:
 Shop 7, Auckland Plaza, 85 Auckland Street
 BEGA
 NSW 2550
 Facilities: Category B (Branch)
 Last Modified: 19-DEC-12
 This facility complies with the requirements of ISO 15189:2007
[View detailed Scope](#)

4. Extra information will be revealed. For CASA Part 99 purposes, the important information is contained under section 10.46. This section outlines which services can be provided to the Australian Standard by this testing provider.

BEGA
NSW 2550

Facilities: Category B (Branch)
Last Modified: 18-DEC-12

This facility complies with the requirements of ISO 15189:2007

[View detailed Scope](#)

10.10 Microbiology

10.19 Miscellaneous
.01 Semen analysis (Screening Test)
Motility

10.30 Haematology
.01 Blood counts
.02 Visual examination of blood films
.03 Erythrocyte sedimentation rate
.05 Automated differential leucocyte counts
.09 Examination for malarial parasites
Thick and thin film examination, ICT kit
.40 Limited haemostasis related tests
.57 Screening test for infectious mononucleosis

10.60 Chemical pathology

10.61 General chemistry
.01 Analytes in general use in cardiac, liver function, lipid, renal and other profiles and metabolic studies

10.64 Medico-legal drug testing
.02 Drugs for toxicological purposes in urine to AS/NZS 4308:2008 - Section 2 Specimen collection, storage, handling and dispatch

Summary of Technical Units

MEDICARE ACCREDITATION NO: 38921

Status	Technical Unit	Type	Last Activity	Next Activity
Operative	Chemical Pathology/Microbiology	Reassessment	16/10/12	16/06/15
Operative	Haematology	Reassessment	16/10/12	29/06/15