

APPENDIX A

P-2443, P-5621, P-6821, and P-9154

1 of 6

I. Pursuant to the Drug and Alcohol-Free Workplace and College Premises Policies, the following additional information is provided to Los Rios Community College District faculty, staff, and students about the use of alcohol and illegal drugs:

Disciplinary Sanctions

Violation of the Drug and Alcohol-Free Workplace and College Premises Policies shall result in the prompt imposition of sanctions. For faculty, administrators, or staff, these sanctions depend on the nature and severity of the offense and may range from a warning, a counseling memorandum, a written reprimand, required satisfactory participation in counseling or rehabilitation programs, probation, paid or unpaid suspension, termination of employment, and/or referral to proper law enforcement authorities for prosecution. For students, these sanctions also depend on the nature and severity of the offense and may range from a warning, a counseling memorandum, a written reprimand, required satisfactory participation in counseling or rehabilitation programs, probation, suspension, expulsion from the College, and/or referral to proper law enforcement authorities for prosecution. Any sanctions taken against faculty, administrators, or staff will be carried out in accordance with the applicable Collective Bargaining Agreement, the District's Policies and Regulations, and the Education Code. Any sanctions taken against students will be carried out in accordance with the District's Policies and Regulations and the Education Code.

Education Counseling and Rehabilitation Programs

The Employee Assistance Program (EAP) offers assessment, short-term counseling, and referral services for faculty, staff, and their dependents. In addition, the program is intended to provide crisis intervention, as well as training or consultation services for administrators and supervisors who need to know how to identify or make referrals for individuals whose substance abuse problems are affecting work performance and unit morale. Contact Employee Benefits for information about the available resources. Other facilities in the Sacramento Region offer similar counseling and treatment services for faculty, staff, and students as noted in Section II of this appendix.

Health Risks and Legal Sanctions

Alcohol and substance abuse can create serious health risks and result in misdemeanor or felony convictions and the imposition of a range of criminal penalties, including large fines and imprisonment. Please refer to Sections III and IV of this appendix for a more detailed description of these health risks, laws, and penalties.

II. Education Counseling, and Rehabilitation Programs

Numerous agencies and organizations provide counseling and rehabilitation programs for the use of drugs and alcohol. Contact Employee Benefits for additional resources.

Alcoholics Anonymous (AA)

AA provides free meetings. For meeting times and locations, visit their website at www.aasacramento.org or call their 24-hour hotline in Sacramento at (916) 454-1100.

APPENDIX A

[P-2443](#), [P-5621](#), [P-6821](#), and [P-9154](#)

2 of 6

Al-Anon

This group is for friends or family members of someone who struggles with alcoholism. For meeting times and locations, visit their website at <http://www.ncwsa.org>.

Narcotics Anonymous

For information, visit their website at <http://sacramentona.org/> or call their 24-hour hotline in Sacramento at (800) 600-4673.

New Dawn Chemical Dependency Recovery Center

New Dawn's chemical dependency programs are dedicated to helping individuals and their families find independence from chemical and/or alcohol dependency. They have specific programs dedicated to teens and adults with facilities located in areas around Sacramento, including Auburn, Sacramento, and Rancho Cordova. They offer a free intake/assessment. For more information, please call their toll-free number at (866) 969-4300 or visit their website at <http://www.newdawnrecovery.com/chemical-dependency/>.

Strategies for Change

Strategies for Change offers individual and family treatment of substance abuse including day treatment and intensive outpatient, outpatient, and youth substance abuse programs. Most insurance plans and Medi-Cal accepted. Private pay options are also available. There are two locations in Sacramento. For more information, please call (916) 473-5764 (North Sacramento) or (916) 395-3552 (South Sacramento), or visit their website at <http://strategies4change.org>.

Sacramento County Alcohol and Drug Services

This is part of the Division of Sacramento County Health and Human Services. They offer prevention, treatment, and recovery services for alcohol and drug abuse. Clients must attend a preliminary assessment prior to receiving services. For more information visit their website at <http://www.dhhs.saccounty.net/BHS/Pages/Alcohol-Drug-Services/Alcohol-and-Drug-Services.aspx>.

Yolo County Alcohol and Other Drug Services

They offer court-mandated treatment services in addition to services for pregnant and parenting women and a six-month chemical dependency program. For more information visit their website at <http://www.yolocounty.org/health-human-services/alcohol-drug-and-mental-health->.

WellSpace (formerly The Effort)

WellSpace offers outpatient individual and group counseling in Sacramento. There is a sliding scale fee based on income. For more information, visit their website at <http://www.wellspacehealth.org/> or call (916) 737-5555.

III. Health Risks

Substance abuse and drug dependency carry significant health risks.

Alcohol

Alcoholism is a disorder that has profound psychological, biological, and societal effects. It is usually characterized by one of three different patterns:

1. Regular daily intoxication;
2. Drinking large amounts of alcohol at specific times;
3. Periods of sobriety interspersed with periods of heavy daily drinking.

The disorder is usually progressive, and physical dependence can develop; if this happens, serious, sometimes life threatening symptoms can develop when alcohol is withdrawn. Short term effects of alcohol use can include depression, gastritis, liver disease, automobile accidents, and domestic violence. Chronic alcohol abuse can produce irreversible health changes, including dementia, sexual impotence, cirrhosis of the liver, and heart disease. Death can occur either as a complication of one of these chronic problems, or acutely, secondary to alcohol intoxication by poisoning or to aspiration of vomitus, or as the result of any automobile accident while driving intoxicated.

Marijuana (Cannabis)

Marijuana is the most commonly used illegal drug in the United States. Though physiological consequences do depend on frequency, duration, and quantity of use, marijuana use has been linked to impairment of short term memory, concentration, judgment, perception, and fine motor skills. Thus the use of this drug increases the risk of machinery or motor vehicle accident and injury for four to six hours after ingestion. Impairment of memory may last for three to six months, even if use of the drug is discontinued completely. The active chemical in marijuana (THC) remains stored in body fat cells long after ingestion. Marijuana use is associated with chronic anxiety, depression, and paranoid feelings. It can exacerbate or increase significantly underlying emotional problems. Frequent and/or ongoing use by children and adolescents may have long term developmental consequences resulting in lack of motivation, apathy, and difficulty managing current stresses and responsibilities, as well as making appropriate plans for the future. Pregnant women who use marijuana may be at a higher risk for giving birth to children with developmental or birth defects.

Hallucinogens

This category includes drugs such as lysergic acid diethylamine (LSD, also known as “acid”), mescaline, and peyote. These drugs cause delusions, hallucinations, and impaired perception of time and space. Phencyclidine (PCP or “angel dust”) and amphetamine variants known as “ecstasy” are included in this category, though they rarely cause hallucinations in the true sense.

APPENDIX A[P-2443](#), [P-5621](#), [P-6821](#), and [P-9154](#)4 of 6

They are, however, potent drugs that have mind-altering effects and impair perception and cognition. Hallucinogens can produce a “bad trip” with anxiety, agitation, hallucinations, and paranoia leading to impulsive behavior. After a “bad trip,” the person can be subject to “flashbacks,” which are recurrences of the experiences of the “bad trip” without taking any more of the drug. Psychosis and impaired thinking may result after long-term use.

Cocaine

The use of cocaine, an illegal stimulant drug, has risen dramatically in the United States. Other names for this drug are code, C., lady, and snow. Cocaine is a white powder that is snorted, injected into veins, or smoked freebase or as “crack.” Crack is a crystalline form of cocaine that is also known as “rock,” from its small, white, rock-like appearance. (“Speed balls” are cocaine mixed with heroin, which is a particularly dangerous combination.) Crack produces the most intense cocaine high; addiction can occur after using it only once or twice. Cocaine highs are characterized by feelings of extreme happiness and a sense of limitless power and energy. However, the physical effects include high blood pressure and heart palpitations. A cocaine “crash” follows the high and includes symptoms of depression, dullness, great irritability, and paranoia. Serious medical complications occur with cocaine use, such as heart attacks (even in young people), seizures, and strokes due to high blood pressure. The psychological effects of cocaine use include violence, paranoia, and personality changes as well as symptoms such as depression, anxiety, and confusion. Pregnant women using cocaine have increased risk of miscarriages and still-births. Newborns addicted to cocaine are irritable, unresponsive, prone to have malformed kidneys and genitals, and prone to have heart attacks and strokes. Addiction to cocaine controls aspects of the user’s life, impinges on the lives of those closest to the user, and occurs in people of all ages, classes, and educational levels.

Amphetamines and Other Stimulants

In addition to cocaine, a number of other drugs stimulate the nervous system and are very addictive. Most of them belong to the amphetamine family of drugs. Dexedrine (present in “diet” pills) may at times be prescribed by a physician, but its use as a legitimate medication is now infrequent. Street drugs of the amphetamine group include “ecstasy” and “ice.” Ice is a smokable amphetamine compound that is very potent, and the effects are long-lasting and devastating. The health risks of these and other stimulants are similar to those of cocaine use.

Narcotics, Including Heroin

Various medications are taken to relieve pain. Most non-prescription pain relievers (such as aspirin, Tylenol, Motrin, and Nuprin) are not considered addictive. However, there is a class of stronger pain relievers, available by prescription only, which are referred to as narcotics and most of which are opiates. Examples of these drugs include morphine, codeine, Tylenol No.3, Darvon, Darvocet, Percocet, Percodan, Demerol, and certain prescription cough medicines. These drugs differ from non-prescription pain relievers in their potential for abuse and dependence. With close medical supervision, these drugs may be safely used in specific medical circumstances for a limited time. However, addiction may occur and the person may not want to stop the drug even when the pain has stopped. Tolerance to the drug is shown by

APPENDIX A[P-2443](#), [P-5621](#), [P-6821](#), and [P-9154](#)5 of 6

an increase in the amount of drug necessary to relieve pain. This becomes progressive and leads to the craving or need for larger and larger doses, without which the person becomes extremely uncomfortable and physically ill. The time may come when the person “needs” such a large dose of the drug that it is poisonous or lethal. Under these circumstances, coma, suffocation, and death may ensue. The malignant course of this problem is similar to that of addiction to heroin.

Although heroin is not available by prescription, it is a narcotic that belongs to the same chemical family as the above drugs. The use of heroin is mainly by injection into a vein, which carries the additional medical dangers of contracting AIDS and hepatitis from unclean needles and syringes.

Sedatives and Tranquilizers

The barbiturates and the benzodiazepines are two of the most commonly used classes of sedatives. The barbiturates (such Phenobarbital, Seconal, and Amytal) are highly addictive and can be fatal if taken in excess. Although they still have medical uses, they have largely been replaced by the benzodiazepines, used for relief of anxiety and to promote sleep. The benzodiazepines include such drugs as Valium, Librium, Ativan, Xanax, Dalmane, Halcion, and Restoril.

While safe and effective at moderate doses for short periods of time (weeks), all the benzodiazepines have a potential for physical and psychological dependence if used at higher doses for longer periods of time. Frequently the benzodiazepines are abused by adults who become dependent on them because of their anti-anxiety effects. Other tranquilizers which may be abused include methaqualone (Quaaludes), Doriden, and Equanil. Intoxication may result from benzodiazepine use and resembles alcoholic drunkenness. Drowsiness, slurred speech, unsteady gait, and lack of coordination are common signs. The effects of the benzodiazepines (and the barbiturates and other sedatives) add to those of alcohol; taken together, they can lead to coma and even death. Withdrawal from benzodiazepines resembles alcohol withdrawal and is most apparent if the drugs are stopped abruptly. Withdrawal takes place within hours to days of stopping the drug. Once a person is addicted to benzodiazepines, a physician should supervise the plan for gradually stopping them, to minimize the serious effects of withdrawal.

IV. Legal Sanctions

Federal law and California law prohibit the solicitation, procurement, sale or manufacture of narcotics or controlled substances except as expressly permitted by law. Applicable legal sanctions under local, California, and Federal law for the unlawful distribution of alcohol and illicit drugs range from probation, diversion, and imprisonment in the county jail for less than one year, to imprisonment in Federal or State Prison.

The use of alcohol beverages must be in compliance with California law and is strictly limited to persons 21 years of age or older and is further limited to authorized events when consumed at the Colleges. The possession, transportation, and/or consumption of alcohol by individuals less than 21 years of age is strictly prohibited. Persons under 21 convicted of purchasing or consuming alcohol or possessing it in public face fines, license suspensions

APPENDIX A

[P-2443](#), [P-5621](#), [P-6821](#), and [P-9154](#)

6 of 6

and community service. A police officer can take the license from any driver suspected of driving under the influence of alcohol and drugs who refuses to take a blood alcohol test. Persons who possess alcohol at a Los Rios Community College when not authorized are also subject to fines and community service.

Misdemeanor convictions for campus drug use can result in a fine and incarceration of up to a year in a county jail. Relatively few drug-related infractions may be considered misdemeanor offenses, however. Most drug use convictions are defined as felony acts.

Felony convictions for campus drug use can result in a substantial fine and a lengthy jail sentence in state or federal prison. Convictions for manufacture, possession for sale, or use of substances such as the following examples are felony offenses: amphetamines (whites, uppers), barbiturates, codeine, cocaine/crack, heroin, LSD, methamphetamines (crank, crystal), marijuana, PCP, and Quaaludes.

Federal law specifies how and when the District will withhold financial aid from students convicted of drug violations.

LRCCD

Last Update: 7/10/15