



Treating people right

Follow-up Evaluation Letter Contents

Please issue the Follow-up Evaluation Letter within two days of the interview. The Department of Transportation REQUIRES that it contains the following elements:

1. It must be written on the SAP's own letterhead
2. Date of the Report Letter AND the date of the follow-up evaluation.
3. Address for the Company or Agency:
 - a. Name of Contact Person
 - b. Name of Company or Agency
 - c. Complete Mailing Address
 - d. Confidential Fax Number, if applicable
4. Identity of the employee: Full Name and Social Security Number
5. Reason Employee was referred to you (such as: "Tested positive for marijuana on February 19, 2004" or "Was a voluntary referral").
6. If the referral was for a positive test, the test date MUST be stated in the letter.
7. Identify the resources to which the Employee was referred.
8. A statement about the Employee's successful (or unsuccessful) completion of the assigned treatment or education MUST be in the letter.
9. FURTHER, you MUST provide a clinical characterization of the Employee's response to that treatment.
10. The INCLUSIVE dates of the treatment or education completed since the initial evaluation MUST be stated in the letter.
11. Continued treatment/education Must be outlined in the letter or there must be a statement that there is no continued need for treatment or education.
12. It is very helpful to the employer to state whether or not they should consider the Employee for a return to "safety-sensitive" work, subject to a return to work urine drug screen and/or alcohol breath test.
13. The SAP MUST provide a follow-up testing schedule. The minimum is 6 tests in a twelve-month period. The letter must specify urine drug screens and/or breath alcohol tests. The followUp period may be as long as sixty months.

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