



SECURITY OPERATIONS
& SYSTEMS

Mid Michigan College
**2025-26 Alcohol and
Other Drug Policy**
including
Prevention Programming

midmich.edu/safety-security

Table of Contents

Mid Michigan College's Alcohol and Other Drug Policy & Prevention Programming.....	3
Introduction	3
Policy Statement.....	3
Drug Classes, Definitions, and Health Risks.....	4
Drug Classes	4
Schedule I.....	4
Schedule II	4
Schedule III	4
Schedule IV	5
Schedule V	5
Definitions	5
Drug Misuse	5
Dependence	5
Physical Dependence.....	5
Psychological Dependence.....	6
Addiction.....	6
Health Risk	6
Narcotics	6
Stimulants.....	7
Depressants	8
Hallucinogens.....	8
Marijuana/Cannabis	9
Steroids.....	10
Alcohol.....	11
Available Counseling and Treatment Programs	12
Drug and Alcohol Abuse Prevention Strategies	12
Federal Legal Penalties.....	13
Federal Trafficking Penalties for Schedule I, II, III, IV and V (except Marijuana).....	13
Federal Trafficking Penalties for Marijuana	14
State Laws and Legal Penalties	15
Michigan Medical Marijuana Act & Michigan Regulation and Taxation of Marijuana Act	15
State of Michigan Consequences of Alcohol or Drug Violations	15
Penalties for Violation of Michigan Laws.....	16

Operating a Motor Vehicle with the Presence of Alcohol or other Drugs	16
Purchase, Consumption, or Possession of Alcoholic Liquor by a Minor (MCL 436.1703)	16
Use of a Controlled Substance (MCL 333.7404)	17
Possession of a Controlled Substance (MCL 333.7403)	17
Manufacturing, Creating, or Delivering a Controlled Substance, Prescription Form (MCL 333.7401)	18
Disciplinary College Sanctions.....	18
Students	19
College Employees - Drug Free Campus & Workplace Act.....	20
Distribution of Policy	22
Review of College Prevention Program and Policy	23
Policy Questions and Reporting Options.....	23
Closing.....	23

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Mid Michigan College's Alcohol and Other Drug Policy & Prevention Programming

Introduction

Mid Michigan College (Mid) is dedicated to providing a healthy environment for its community and as such, recognizes that improper or excessive use of alcohol and other drugs may be disruptive to our students, faculty and staff by negatively impacting their health and safety. Problems such as memory loss, harassment, sexual misconduct, assaults, disorderly/disruptive behavior, and sleep disruption tend to increase in correlation to the misuse of alcohol and/or other drugs. Due to the harm produced by excessive and illegal use, Mid Michigan College has established policies, intervention strategies, and sanctions to prohibit unlawful behaviors and address policy violations by members of the Mid community which includes its students and staff.

In accordance with the Drug-Free Workplace Act and Drug-Free Schools and Campuses Act, Mid Michigan College is required to have an Alcohol and Other Drug Policy and Prevention Program that is distributed annually in writing to all students, faculty and staff. The Policy must include: the standards of conduct that clearly prohibit the unlawful use, possession, sale, manufacture, or distribution of illicit drugs and alcohol by students and staff; information regarding the legal sanctions under local, state or federal law for the unlawful use, possession, sale, manufacture, and distribution of illicit drugs and alcohol; sanctions that the College will impose on students and employees along with a description of the sanctions, up to and including expulsion or termination; referral for prosecution for violations of the standard of conduct; a description of any drug or alcohol counseling, treatment, or rehabilitation/reentry programs that are available to students and staff; prevention, educational and intervention efforts; the possible health risks associated with the use and abuse of illicit drugs and alcohol.

Policy Statement

Mid Michigan College prohibits the use, possession, consumption, sale, distribution, and unlawful manufacture of illegal drugs, narcotics or controlled substances on Mid's campuses, while conducting College business or as part of College sponsored activities or events. Alcohol is prohibited on campus except when a written Exception Request is submitted for consideration and is approved by Mid's Board of Trustees. It is the responsibility of each student and employee to be familiar with the provisions of this policy and also the State of Michigan laws as they pertain to drug and alcohol use and abuse. This Policy places responsibility for individual and group conduct on the individuals who use drugs and consume alcohol. Using drugs and drinking alcoholic beverages are not excuses for irresponsible behavior. Individuals and groups are held accountable for their behavior whether or not they have consumed drugs or alcohol.

Michigan law prohibits the dispensing, selling or supplying of drugs or alcohol to any person under the age of 21. Students, employees and visitors to the College may not unlawfully manufacture, consume, possess, sell, distribute, transfer or be under the influence of alcohol, illicit drugs, or a controlled substance on College property, at College-related activities or events, while driving a College vehicle or while otherwise engaged in College business. College property includes all buildings and land owned, leased, or used by the College; motor vehicles operated by employees, including personal motor vehicles when used in connection with work performance on behalf of the College.

Any person taking prescription drugs or over-the-counter medication is individually responsible for ensuring that while taking the drug or medication, they are not a safety risk to themselves or others while on College property, at College-related activities or events, while driving a College or privately owned vehicle while engaged in College business. It is illegal to misuse prescribed drugs contrary to the prescription; give or sell the prescribed drug(s) to another person.

Pursuant to [34 CFR Part 84](#) and the Drug-Free Workplace Act, institutions that receive federal funding must certify to the Department of Education that it has in place a drug and alcohol abuse prevention program and policy and strives to provide a drug-free workplace that is secure and reliable for the entire campus community. Further, any employees who are directly engaged in the performance of work pursuant to the provisions of a federal funded grant or contract are required, under the Drug-Free Workplace Act, to notify their supervisor, in writing, if they are convicted for a violation of a criminal drug statute occurring in the workplace and must do so no more than five calendar days after the conviction. In turn, the College is required to notify federal agencies if an employee who is engaged in the performance of an awarded grant/contract is convicted of a criminal drug law violation.

Drug Classes, Definitions, and Health Risks

The College recognizes that both consumption of alcohol on college campuses and the occurrences of drug and alcohol abuse are serious issues. Various health risks are associated with the use of illicit drugs, the misuse of prescription drugs, or the abuse of alcohol. Addiction to alcohol or illicit drugs is a progressive disease which if untreated, may cause fatality. Health risks of alcohol or drug abuse have a wide range of consequences including but not limited to: liver damage/disease, psychosis, brain damage, and heart disease. The physical consequences of such abuse are serious and can be life-threatening. The psychological and social consequences of substance use and abuse can be equally devastating. Loss of friends, loss of job, divorce, and the creation of a dysfunctional family system are common consequences of substance abuse. Substance abusers often experience feelings of depression, anxiety, low self-esteem, guilt and loneliness.

Drug Classes

The Controlled Substances Act (CSA) ¹ places all substances which are in some manner regulated under existing federal law into one of five schedules. This placement is based upon the substance's accepted medical use, potential for abuse, and safety or dependence liability. They are as follows:

¹ The information in this section is taken directly from the U.S. Department of Justice's 2024 publication of "[Drugs of Abuse](#)"

Schedule I

- The drug or other substance has a high potential for abuse.
- The drug or other substance has no currently accepted medical use in treatment in the United States.
- There is a lack of an accepted safety use for the drug or other substance under medical supervision.
- Examples of Schedule I substances include heroin, gamma hydroxybutyric acid (GHB), lysergic acid diethylamide (LSD), marijuana, and methaqualone.

Schedule II

- The drug or other substance has a high potential for abuse.
- The drug or other substance has a currently accepted medical use in treatment in the United States or a currently accepted medical use with severe restrictions.
- Abuse of the drug or other substance may lead to severe psychological or physical dependence.
- Examples of Schedule II substance include morphine, phencyclidine (PCP), cocaine, methadone, hydrocodone, fentanyl, and methamphetamine.

Schedule III

- The drug or other substance has less potential for abuse than the drugs or other substances in Schedules I and II.
- The drug or other substance has a currently accepted medical use in treatment in the United States.

- Abuse of the drug or other substance may lead to moderate or low physical dependence or high psychological dependence.
- Anabolic steroids, codeine products with aspirin or acetaminophen, and some barbiturates are examples of Schedule III substances.

Schedule IV

- The drug or other substance has a low potential for abuse relative to the drugs or other substances in Schedule III.
- The drug or other substance has a currently accepted medical use in treatment in the United States.
- Abuse of the drug or other substance may lead to limited physical dependence or psychological dependence relative to the drugs or other substances in Schedule III.
- Examples of drugs included in Schedule IV are alprazolam, clonazepam, and diazepam.

Schedule V

- The drug or other substance has a low potential for abuse relative to the drugs or other substances in Schedule IV.
- The drug or other substance has a currently accepted medical use in treatment in the United States.
- Abuse of the drug or other substance may lead to limited physical dependence or psychological dependence relative to the drugs or other substances in Schedule IV.
- Cough medicines with codeine are examples of Schedule V drugs.

Controlled Substance Analogues (CSA) are substances that are not formally controlled substances but may be found in illicit trafficking. They are structurally or pharmacologically similar to Schedule I or II controlled substances and have no legitimate medical use. A substance that meets the definition of a Controlled Substance Analogue and is intended for human consumption, may be treated under the CSA as if it were a controlled substance in Schedule I.

Definitions

Drug Misuse

When controlled substances are used in a manner or amount inconsistent with the legitimate medical use, it is called drug misuse. The non-sanctioned use of substances controlled in Schedules I through V of the CSA is considered drug misuse.

Dependence

In addition to having misuse potential, most controlled substances are capable of producing either physical or psychological dependence.

Physical Dependence

Refers to the changes that have occurred in the body after repeated use of a drug that necessitates the continued administration of the drug to prevent a withdrawal syndrome. The experience of withdrawal can range from mildly unpleasant to life-threatening and is dependent on a number of factors, such as:

- The drug being used
- The dose and route of administration
- Concurrent use with other drugs
- Frequency and duration of drug use
- The age, sex, health, and genetic makeup of the user

Psychological Dependence

Refers to the perceived “need” or “craving” for a drug. Individuals who are psychologically dependent on a particular substance often feel that they cannot function without continued use of the substance. While physical dependence disappears within days or weeks after drug use stops, psychological dependence can last much longer and is one of the primary reasons for relapse.

Addiction

Addiction is defined as compulsive drug-seeking behavior where acquiring and using a drug becomes the most important activity in the user’s life. This definition implies a loss of control regarding drug use. The person with a substance use disorder will continue to use a drug despite serious medical and/or social consequences.

Health Risk

The Controlled Substances Act (CSA) regulates five classes of drugs:

- Narcotics
- Depressants
- Stimulants
- Hallucinogens
- Anabolic steroids

Each class has distinguishing properties, and drugs within each class often produce similar effects. However regardless of class, all controlled substances share a number of common features.

All controlled substances have misuse potential or are immediate precursors to substances with misuse potential. With the exception of anabolic steroids, controlled substances are misused to alter mood, thought, and feeling through their impact on the central nervous system (brain and spinal cord). Some of these drugs alleviate pain, anxiety, or depression. Some induce sleep and others are taken to energize.

Though some controlled substances are therapeutically useful, the “feel good” effect of these drugs contributes to their misuse. The extent to which a substance is reliably capable of producing intensely pleasurable feelings (euphoria) increases the likelihood that the substance will be misused. Each class’s legal status, effects on the mind, body, and overdose are outlined in the below section.

Narcotics

Also known as “opioids,” the term “narcotic” comes from the Greek word for “stupor” and originally referred to a variety of substances that dulled the senses and relieved pain. Though some people still refer to all drugs as “narcotics,” today “narcotic” refers to opium, opium derivatives, and their semi-synthetic substitutes. A more current term for these drugs with less uncertainty regarding its meaning, is “opioid.” Examples include the illicit drug heroin and pharmaceutical drugs like OxyContin, Vicodin, codeine, morphine, methadone, and fentanyl.

Legal Status: Narcotics/opioids are controlled substances that vary from Schedule I to Schedule V, on the drug dependence profile. Schedule I Narcotics, like heroin, have no medical use in the U.S. and are illegal to distribute, purchase, or use outside of medical research.

Effects on the Mind: Besides their medical use, narcotics/opioids produce a general sense of well-being by reducing tension, anxiety, and aggression. These effects are helpful in a therapeutic setting but contribute to the drugs’ abuse. Narcotic/opioid use comes with a variety of unwanted effects, including drowsiness, inability to concentrate, and apathy.

Effects on the Body: Narcotics/opioids are prescribed by doctors to treat pain, suppress cough, cure diarrhea, and induce sleep. Effects depend heavily on the dose, how it's taken, and previous exposure to the drug. Negative effects include slowed physical activity, constriction of the pupils, flushing of the face and neck, constipation, nausea, vomiting, and slowed breathing. As the dose is increased, both the pain relief and the harmful effects become more pronounced. Some of these preparations are so potent that a single dose can be lethal to an inexperienced user. However, except in cases of extreme intoxication, there is no loss of motor coordination or slurred speech.

Effects of Overdose: Overdoses of narcotics are not uncommon and can be fatal. Physical signs of narcotics/opioid overdose include constricted (pinpoint) pupils, cold clammy skin, confusion, convulsions, extreme drowsiness, and slowed breathing.

Common Street Names: Street names for various narcotics/opioids include, but are not limited to: Smack, Horse, Mud, Brown Sugar, Black Tat, Big H, Dover's Powder, Hillbilly Heroin, Lean or Purple Drank, OC, Ox, Oxy, Oxycotton, Sippin Syrup.

Stimulants

Stimulants speed up the body's systems. This class of drugs includes: prescription drugs such as amphetamines (Adderall and Dexedrine), methylphenidate (Concerta and Ritalin), diet aids (such as Adipex P, Benzphetamine, Fastin, Preludin) and other illicitly produced drugs such as methamphetamine, cocaine, and methcathinone

Legal Status: A number of stimulants have no medical use in the United States but have a high potential for abuse. These stimulants are controlled in Schedule I. Some prescription stimulants are not controlled, and some stimulants like tobacco and caffeine don't require a prescription. However, society's recognition of their adverse effects has resulted in a proliferation of caffeine-free products and efforts to discourage cigarette smoking. Stimulant chemicals in over-the-counter products such as ephedrine and pseudoephedrine, can be found in allergy and cold medication. As required by the Combat Methamphetamine Epidemic Act of 2005, retail outlets must stock these products out of the reach of customers, either behind the counter or in a locked cabinet. Regulated sellers are required to maintain a written or electronic logbook to record sales of these products. In order to purchase these products, customers must show a photo identification issued by a state or federal government. They are also required to write or enter into the logbook their name, signature, address, date and time of sale. In addition to the above, there are daily and monthly sales limits set for each customer.

Effects on the Mind: When used as drugs of abuse and not under a doctor's supervision, stimulants are frequently taken to: produce a sense of exhilaration, enhance self-esteem, improve mental and physical performance, increase activity, reduce appetite, extend prolonged periods of wakefulness, and "get high." Chronic, high-dose use is frequently associated with agitation, hostility, panic, aggression, suicidal or homicidal tendencies. Paranoia, sometimes accompanied by both auditory and visual hallucinations, may also occur. Tolerance, in which more and more of the drug is needed to produce the effects, can develop rapidly and psychological dependence can occur. In fact, the strongest psychological observed dependence occurs with the more potent stimulants such as amphetamine, methylphenidate, methamphetamine, cocaine, and methcathinone. Abrupt cessation is commonly followed by depression, anxiety, drug craving, and extreme fatigue, known as a "crash."

Effects on the Body: Stimulants are sometimes referred to as uppers and can reverse the effects of fatigue on both mental and physical tasks. Therapeutic levels of stimulants can produce exhilaration, extended wakefulness, and loss of appetite. These effects are greatly intensified when large doses of stimulants are taken. Taking too large a dose at one time or taking large doses over an extended period of time may cause

such physical side effects such as: dizziness, tremors, headache, flushed skin, chest pain with palpitations, excessive sweating, vomiting and abdominal cramps.

Effects of Overdose: In an overdose, unless there is medical intervention, high fever, convulsions, and cardiovascular collapse may precede death. Because accidental death is partially due to the effects of stimulants on the body's cardiovascular and temperature-regulating system, physical exertion increases the hazards of stimulant use.

Common Street Names: Street names for stimulants include, but are not limited to: Bennies, Black Beauties, Cat, Coke, Crank, Crystal, Flake, Ice, Skippy, Snow, Speed, Uppers and Vitamin R.

Depressants

Depressants will put you to sleep, relieve anxiety and muscle spasms, and prevent seizures. Barbiturates are long-established drugs and include butalbital (Fiorina), phenobarbital, Pentothal, Seconal, and Nembutal. A person can rapidly develop dependence on and tolerance to barbiturates. This means a person needs more and more of them to feel and function normally. This makes them unsafe, increasing the likelihood of coma or death. Benzodiazepines were developed to replace barbiturates, though they still share many of the undesirable side effects including increased tolerance and dependence. Some examples are Valium, Xanax, Halcion, Ativan, Klonopin, and Restoril. Rohypnol is a benzodiazepine that is not manufactured or legally marketed in the United States but it is used illegally. Lunesta, Ambien, and Sonata are sedative-hypnotic medications approved for the short-term treatment of insomnia and share many of the properties of benzodiazepines. Other CNS depressants include meprobamate, methaqualone (Quaalude), and the illicit drug GHB.

Legal Status: Most depressants are controlled substances that range from Schedule I to Schedule IV under the Controlled Substances Act, depending on their risk for abuse and whether they currently have an accepted medical use. Many of the depressants have FDA-approved medical uses. Rohypnol and Quaaludes are not manufactured or legally marketed in the United States and have no accepted medical use.

Effects on the Mind: Depressants used therapeutically do what they are prescribed for: induce sleep, relieve anxiety and muscle spasms, and prevent seizures. They also cause amnesia, leaving no memory of events that occur while under the influence, reduce reaction time, impair mental functioning and judgment, and cause confusion. Long-term use of depressants produces psychological dependence and tolerance.

Effects on the Body: Some depressants can relax the muscles. Unwanted physical effects include: slurred speech, loss of motor coordination, weakness, headache, lightheadedness, blurred vision, dizziness, nausea, vomiting, low blood pressure, and slowed breathing. Prolonged use of depressants can lead to physical dependence even at doses recommended for medical treatment. Unlike barbiturates, large doses of benzodiazepines are rarely fatal unless combined with other drugs or alcohol. But unlike the withdrawal syndrome seen with most other drugs of abuse, withdrawal from depressants can be life threatening.

Effects of Overdose: High doses of depressants or use of them with alcohol or other drugs can slow heart rate and breathing enough to cause death.

Common Street Names: Street names for depressants include, but are not limited to: Barbs, Benzos, Downers, GHB, Liquid X, Nerve Pills, Phennies, R2, Roofies, Tranks, and Yellows.

Hallucinogens

Hallucinogens are found in plants and fungi or are synthetically produced and are among the earliest known group of drugs used for their ability to alter human perception and mood.

Legal Status: Many hallucinogens are Schedule I under the Controlled Substances Act, meaning that they have a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety use under medical supervision.

Effects on the Mind: Sensory effects include perceptual distortions that vary with dose, setting, and mood. Psychic effects include distortions of thoughts associated with time and space. Time may appear to stand still, forms and colors seem to change and take on new significance. Weeks or even months after some hallucinogens have been taken, the user may experience flashbacks – fragmentary recurrences of certain aspects of the drug experience in the absence of actually taking the drug. The occurrence of a flashback is unpredictable and occur more frequently in younger individuals. With time, these episodes diminish and become less intense.

Effects on the Body: Physiological effects include elevated heart rate, increased blood pressure, and dilated pupils.

Effects of Overdose: Deaths exclusively from acute overdoses of LSD, magic mushrooms, or mescaline are extremely rare. Deaths generally occur due to suicide, accidents, dangerous behavior, or a person inadvertently eating poisonous plant material. A severe overdose of PCP and ketamine can result in: respiratory depression, coma, convulsions, seizures, and death due to respiratory arrest.

Common Street Names: Street names for hallucinogens include, but are not limited to: Acid, Fry, Mind Candy, Mushrooms, Shrooms, Special K, STP, X and ecstasy (or XTC).

[Marijuana/Cannabis](#)

Marijuana is a mind-altering (psychoactive) drug, produced by the Cannabis sativa plant. Marijuana contains over 480 constituents. THC (delta-9-tetrahydrocannabinol) is believed to be the main ingredient that produces the psychoactive effect.

Legal Status: Marijuana is a Schedule I substance under the Controlled Substances Act, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety use under medical supervision. Although some states within the United States have allowed the use of marijuana for medicinal purposes, it is the U.S. Food and Drug Administration that has the federal authority to approve drugs for medicinal use in the U.S. To date, the FDA has not approved a marketing application for any marijuana product for any clinical indication. Consistent therewith, the FDA and DEA have concluded that marijuana has no federally approved medical use for treatment in the United States. Thus it remains as a Schedule I controlled substance under federal law. Marinol, a synthetic version of THC and the active ingredient found in the marijuana plant, can be prescribed for the control of nausea and vomiting caused by chemotherapeutic agents used in the treatment of cancer and to stimulate appetite in AIDS patients. Marinol is a Schedule III substance under the Controlled Substances Act.

Effect on the Mind: When marijuana is smoked, the THC passes from the lungs and into the bloodstream which carries the chemical to the organs throughout the body, including the brain. In the brain, the THC connects to receptors on nerve cells called cannabinoid. It influences the activity of those cells. Many of these receptors are found in the parts of the brain that influence pleasure, memory, thought, concentration, sensory and time perception, and coordinated movement. The short-term effects of marijuana include: problems with memory and learning, distorted perception, difficulty in thinking and problem-solving and loss of coordination. The effect of marijuana on perception and coordination are responsible for serious impairments in learning, associative processes, and psychomotor behavior (driving abilities). Long term, regular use can lead to physical dependence as well as psychic addiction or dependence. Discontinuation will produce withdrawal symptoms. Clinical studies show that the physiological, psychological, and

behavioral effects of marijuana vary among individuals. A list of common responses to cannabinoids as described in the scientific literature is: dizziness, nausea, tachycardia, facial flushing, dry mouth, merriment, happiness, and even exhilaration at high doses; disinhibition, relaxation, increased sociability, talkativeness; enhanced sensory perception, giving rise to increased appreciation of music, art, and touch. Heightened imagination leading to a subjective sense of increased creativity; time distortions. Illusions, delusion, and hallucinations are rare except at high doses; impaired judgment, reduced coordination, and ataxia, which can impede ones' ability to drive or lead to an increase in risk-taking behavior. Increased appetite and short-term memory impairment are common.

Effects on the Body: Short-term physical effects from marijuana use may include: sedation, bloodshot eyes, increased heart rate, coughing from lung irritation, increased appetite, and decreased blood pressure. Marijuana smokers experience serious health problems such as bronchitis, emphysema, and bronchial asthma. Extended use may cause suppression of the immune system. Withdrawal from chronic use of high doses of marijuana causes physical signs including headache, shakiness, sweating, and stomach pains and nausea. Withdrawal symptoms also include behavioral signs such as: restlessness, irritability, sleep difficulties, and decreased appetite.

Effects of Overdose: No death from overdose of marijuana have been reported.

Common Street Names: Street names include, but are not limited to: Aunt Marcy, Blunts, Dope, Ganja, Grass, Hash, Herb, Mary Jane, Pot, Reefer, Skunk and Weed.

Steroids

Anabolic steroids are synthetically produced variants of the naturally occurring male hormone testosterone. They are abused in an attempt to promote muscle growth, enhance athletic or physical performance, and improve physical appearance. Testosterone, nandrolone, stanozolol, methandienone, and boldenone are some of the most frequently abused anabolic steroids.

Legal Status: Anabolic steroids are Schedule III substances under the Controlled Substances Act. Only a small number of anabolic steroids are approved for either human or veterinary use. Steroids may be prescribed by a licensed physician for the treatment of testosterone deficiency, delayed puberty, low red blood cell count, breast cancer, and the wasting of tissue as a result of AIDS.

Effects on the Mind: Case studies and scientific research indicate that high doses of anabolic steroids may cause mood and behavioral consequences. In some individuals, steroid use can cause dramatic mood swings, increased feelings of hostility, impaired judgment, and increased levels of aggression (often referred to as "roid rage"). When users stop taking steroids, they may experience suicidal depression. Anabolic steroid use may also cause psychological dependence and addiction.

Effects on the Body: A wide range of adverse effects is associated with the use or abuse of anabolic steroids. These effects depend on several factors including: age, sex, the anabolic steroid used, amount used, and duration of use. In adolescents, anabolic steroid use can stunt an individual's height. In boys, steroid use can cause early sexual development, acne, and stunted growth. In adolescent girls and women, anabolic steroid use can induce permanent physical changes, such as deepening of the voice, increased facial and body hair growth, menstrual irregularities, male pattern baldness, and lengthening of the clitoris. In men, anabolic steroid use can cause shrinkage of the testicles, reduced sperm count, enlargement of the male breast tissue, sterility, and an increased risk of prostate cancer. Users who inject steroids run the risk of contracting various infections due to non-sterile injection techniques and sharing of contaminated needles.

Effects of Overdose: Anabolic steroids are not associated with overdose. The adverse effects a user would experience develop from the use of steroids over time.

Common Street Names: Some common street names include: Arnolds, Juice, Pumpers, Roids, Stackers. And Weight Gainers.

To learn more about these classes of drugs, their appearance and more, visit [Campus Drug Prevention](#), or [Drugs of Abuse: A DEA Resource Guide, 2024 Edition](#).

Alcohol

The consequences associated with alcohol use and/or abuse can be far reaching and have a negative impact on an individual's physical and mental health. Alcohol consumption can cause a number of marked changes in behavior. Even low doses significantly impair the judgment and coordination required to drive a car safely, increasing the likelihood that the driver will be involved in an accident. Low to moderate doses of alcohol also increase the incidence of a variety of aggressive acts, including sexual assault. Moderate to high doses of alcohol can cause marked impairments in higher mental functions, severely altering a person's ability to learn and work. Very high doses cause respiratory depression and death. Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucination, and convulsions. Alcohol withdrawal can be life threatening and should be addressed through a doctor or licensed inpatient/outpatient treatment facility.

The Center for Disease Control and Prevention (CDC) has identified short and long term health risks related to alcohol use and abuse listed below²:

Short-Term Health Risk

Excessive alcohol use has immediate effects that increase the risk of many harmful health conditions. These are most often the result of binge drinking and include the following:

- Injuries, such as motor vehicle crashes, falls, drowning, and burns.
- Violence, including homicide, suicide, sexual assault, and intimate partner violence.
- Alcohol poisoning, a medical emergency that results from high blood alcohol levels.
- Risky sexual behaviors, including unprotected sex or sex with multiple partners. These behaviors can result in unintended pregnancy or sexually transmitted diseases, including HIV.
- Miscarriage and stillbirth or fetal alcohol spectrum disorders among pregnant woman.

Long-Term Health Risk

Over time, excessive alcohol use can lead to the development of chronic diseases and other serious problems including:

- High blood pressure,
- heart disease, stroke, liver disease, and digestive problems.
- Cancer of the breast, mouth, throat, esophagus, liver, and colon.
- Learning and memory problems, including dementia and poor school or work performance.
- Mental health problems, including depression and anxiety.
- Social problems, including lost productivity, family problems, and unemployment.
- Alcohol dependence or alcoholism.

²These health risks have been reproduced from the CDC's "[Fact Sheets-Alcohol Use and Your Health](#)".

Additional information about the physical and psychological consequences of substance use and/or abuse is available in the Mid Library, through the Student Wellness Coordinator, Human Resources, and at various Substance Abuse Agencies.

Available Counseling and Treatment Programs

Mid Michigan College strongly encourages individuals with a substance misuse problem to voluntarily seek assistance and appropriate treatment options. Mid has partnered with various external agencies who offer substance abuse counseling services on Campus, including the Mid Collegiate Recovery Education and Wellness Program, through CREW & Ten16 Recovery Network. Please visit the [Student Wellness & Community Resources webpage](#) for additional information and resources.

Free [online assessment and information](#) is available, as well as local assistance from the following:

Ten16 Recovery Network

(989) 773-9655-servicing Isabella County

(989) 802-0742-servicing Clare County

(989) 426-886-servicing Gladwin County

Community Mental Health

(989) 775-0604-servicing Isabella County

(989) 539-2141-servicing Clare County

(989) 426-9295-servicing Gladwin County

24 Hour Crisis Line (800) 317-0708

Drug and Alcohol Abuse Prevention Strategies

The College uses evidence-based interventions, collaborations, and incorporates healthy lifestyles to reduce the harmful effects of alcohol and other drug use. Prevention and awareness about substance abuse and use are *not only* campus-wide initiatives with assistance from the offices of Security Operations and Systems, Student Services, Student Life, and Human Resources but are also provided in collaboration with the Michigan State Police, Ten16 Recovery Network, and Clare/Gladwin Recovery Court. Outlined below are a few of the prevention and awareness activities that take place throughout the academic year:

- Alcohol-free events during the day and evening hours
- Substance Abuse Prevention information material available to students, faculty, and staff through the Director of Student Wellness and Human Resources and is readily available throughout the campuses
- Partnership with Ten/16 Recovery Network to offer the Mid Michigan College Collegiate Recovery Education Wellness program at Mid and online.
- Student Life Organizations direct events focused on Alcohol and Drug prevention; healthy living
- Clubs and sports are substance free
- Substance-free Fitness Center open during the day and early evening
- Educational and awareness programs and activities hosted by Mid and/or in conjunction with external agencies
- Efforts to create a healthy living lifestyle normative environment through the Wellness Committee
- Development and enforcement of Campus Policies; enforcing laws addressing high-risk and illegal substance use
- Early intervention and referral strategies through the Behavior Intervention Team (BIT)

Preventative measures are also implemented by Human Resources specifically to inform employees of the importance of Alcohol and Other Drug education:

- Safe College Compliance Modules: Drug Free Workplace.
- Annual Fall Employee Benefit Fair. Local organizations offer information and materials on many different drug and alcohol resources.
- New employee onboarding: new employees receive a brief overview of the Alcohol and Other Drug Policy, where the policy is located on the Mid's website, and reference/information about reporting any suspected drug and/or alcohol use by employees.

Federal Legal Penalties

Should a violation of any law take place on Mid campuses or at college sponsored activities or events, the College abides by all local, State and Federal laws and may ask an appropriate agency to impose any necessary sanctions. Any person who illegally sells, distributes, transports, possesses or consumes alcoholic beverages or controlled substances on College property may face immediate arrest and prosecution under applicable Federal, State and Local laws.

Federal Trafficking Penalties for Schedule I, II, III, IV and V (except Marijuana)

Drug:

- | | |
|----------------------------------|---|
| ● Cocaine (Schedule II) | 500-4999 grams mixture |
| ● Cocaine Base (Schedule II) | 28-279 grams mixture |
| ● Fentanyl (Schedule II) | 40-399 grams mixture |
| ● Fentanyl Analogue (Schedule I) | 10-99 grams mixture |
| ● Heroin (Schedule I) | 100-999 grams mixture |
| ● LSD (Schedule I) | 1-9 grams mixture |
| ● Methamphetamine (Schedule II) | 5-49 grams pure or 50-499 grams mixture |
| ● PCP (Schedule II) | 10-99 grams pure or 100-999 grams mixture |

Penalties:

- First Offense: Not less than 5 years, and not more than 40 years. If death or serious injury, not less than 20 or more than life. Fine of not more than \$5 million if an individual, \$25 million if not an individual.
- Second Offense: Not less than 10 years, and not more than life. If death or serious injury, life imprisonment. Fine of not more than \$8 million if an individual, \$50 million if not an individual.

Drug: Other Schedule I & II drugs (and any drug product containing Gamma Hydroxybutric Acid), any amount; Flunitrazepam (Schedule IV), 1 gram

Penalties:

- First Offense: Not more than 20 years. If death or serious injury, not less than 20 years, or more than life. Fine of \$1 million if an individual, \$5 million if not an individual.
- Second Offense: Not more than 30 years. If death or serious bodily injury, life imprisonment. Fine \$2 million if an individual, \$10 million if not an individual.

Drug: Other Schedule III drugs; any amount

Penalties:

- First Offense: Not more than 10 years. If death or serious injury, not more than 15 years. Fine of not more than \$500,000 if an individual, \$2.5 million if not an individual.
- Second Offense: Not more than 20 years. If death or serious injury, not more than 30 years. Fine of not more than \$1 million if an individual, \$5 million if not an individual.

Drug: All other Schedule IV drugs; any amount and Flunitrazepam (Schedule IV); other than 1 gram or more

Penalties:

- First Offense: Not more than 5 years. Fine of not more than \$250,000 if an individual, \$2 million if not an individual.
- Second Offense: Not more than 10 years. Fine of not more than \$500,000 if an individual, \$2 million if not an individual.

Drug: All Schedule V drugs; any amount

Penalties:

- First Offense: Not more than 1 year. Fine of not more than \$100,000 if an individual, \$250,000 if not an individual.
- Second Offense: Not more than 4 years. Fine of not more than \$200,000 if an individual, \$500,000 if not an individual.

[Federal Trafficking Penalties for Marijuana](#)

Marijuana

Enormous Amount: 1,000 kg or more mixture; 1,000 or more plants

- First Offense: Not less than 10 years, not more than life. Fine not more than \$10 million if an individual, \$50 million if other than an individual.
- Second Offense: Not less than 20 years, not more than life. Fine not more than \$20 million if an individual, \$75 million if other than an individual.

Large Amount: 100-999kg mixture; 100-999 plants

- First Offense: Not less than 5 years, not more than 40 years. Fine not more than \$5 million if an individual, \$25 million if other than an individual.
- Second Offense: Not less than 20 years, not more than life. Fine not more than \$8 million if an individual, \$50 million if other than an individual.

Medium Amount: 50-99 kg mixture; or 50-99 plants

- First Offense: Not more than 20 years. Fine \$1 million if an individual, \$5 million if other than an individual.
- Second Offense: Not more than 30 years. Fine \$2 million if an individual, \$10 million if other than an individual.

Small Amount: Less than 50 kg mixture; 1-49 plants (does not include 50 or more marijuana plants regardless of weight)

- First Offense: Not more than 5 years. Fine not more than \$250,000 if an individual, \$1 million if other than an individual.

- Second Offense: Not more than 10 years. Fine \$500,000 if an individual, \$2 million if other than an individual.

Hashish (small amount): 10 kg or less

- First Offense: Not more than 5 years. Fine not more than \$250,000.00, \$1 million if other than individual.
- Second Offense: Not more than 10 years. Fine \$500,000 if an individual, \$2 million if other than an individual.

Hashish Oil (small amount): 1 kg or less

- First Offense: Not more than 5 years. Fine not more than \$250,000.00, \$1 million if other than individual.
- Second Offense: Not more than 10 years. Fine \$500,000 if an individual, \$2 million if other than an individual.

State Laws and Legal Penalties

Michigan Medical Marijuana Act & Michigan Regulation and Taxation of Marijuana Act

The Michigan Medical Marijuana Act (MMMA) and the Michigan Regulation and Taxation of Marijuana Act, conflict with federal criminal laws governing controlled substances, as well as federal laws that require institutions receiving federal funds from contracts or grants to maintain a drug-free campus and workplace. Mid receives federal funding that would be jeopardized if those federal laws did not take precedence over state law. Thus, the use, possession, distribution or transportation of marijuana in any form and for any purpose violates this Policy and is prohibited on College property or at College sponsored activities or events.

State of Michigan Consequences of Alcohol or Drug Violations

The College acknowledges and respects the rights of individuals to use alcohol in a legal and responsible manner and supports the laws of the State of Michigan. We strive to create an environment that supports healthy decisions and lifestyles.

Michigan Laws for Alcohol and Other Drugs

Under Michigan's Public Health Code, it is illegal to operate a motor vehicle:

- While intoxicated or impaired by alcohol, illegal drugs and some prescribed medications
- With a bodily alcohol content of 0.08 or more (This crime is one of Michigan's driving while intoxicated offenses)
- With any amount of cocaine or a Schedule 1 controlled substance in your body

Additionally, for persons under the age of 21 it is also against Michigan law to:

- Drive with a bodily alcohol content of 0.02 or more, or with the presence of alcohol in the body, except for that consumed at a generally recognized religious ceremony
- To possess or transport an unopened alcohol container in a motor vehicle, regardless if it is in the driver or passenger area.
- To allow anyone to use their motor vehicle after they have been drinking.
- To use a fake I.D. to obtain alcohol.
- To purchase, provide or serve alcohol to anyone under the age of 21
- To serve anyone under the age of 21 at a private party; hosts of such parties can be held responsible for injuries that an intoxicated person causes or incurs, at or after leaving, a party

Pursuant to MCL 333.7404 et seq., also known as the Public Health Code Act 368 of 1978:

- Individuals shall not use a controlled substance or controlled substance analogue unless the substance was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of the practitioner's professional practice.

Pursuant to MCL 333.7403 et seq., also known as the Public Health Code Act 368 of 1978:

- It is illegal for a person to knowingly or intentionally possess a controlled substance, a controlled substance analogue, or a prescription form unless the controlled substance, controlled substance analogue, or prescription form was obtained directly from or pursuant to, a valid prescription or order of a practitioner while acting in the course of the practitioner's professional practice
- It is illegal to give or sell prescribed drugs to another person

Pursuant to MCL 333.7401 et seq., also known as the Public Health Code Act 368 of 1978:

- Individuals are prohibited from manufacturing, creating, delivering or possessing with the intent to manufacture, create, or deliver a controlled substance, a prescription form, or a counterfeit prescription form.

[Penalties for Violation of Michigan Laws](#)

Penalties for violating Michigan law vary depending on the crime and whether it is a first, second or third offense. For drug crimes the amount and nature of the drug are determining factors. Actual sentences may differ at the discretion of the Judge.

[Operating a Motor Vehicle with the Presence of Alcohol or other Drugs](#)

Michigan laws and penalties for drunk or drugged driving vary, but as general rule the law requires:

- Courts to decide drunk or drugged driving violations within 77 days after arrest
- A mandatory 6-month driver license suspension, with possible restricted license after 30 days
- Court to ordered participation in, and successful completion of, 1 or more rehabilitation programs; in instances of a second conviction the Court must order this rehabilitation
- Five days to 1 year of jail time, or 30 to 90 days of community service, or both for second convictions of drunk or drugged driving
- Harsher license sanctions for multiple drunk or drugged driving convictions
- Payment of fines and costs, driver responsibility fees, as well as license reinstatement fees

[Purchase, Consumption, or Possession of Alcoholic Liquor by a Minor \(MCL 436.1703\)](#)

A minor shall not purchase or attempt to purchase alcoholic liquor, consume or attempt to consume alcoholic liquor, possess or attempt to possess alcoholic liquor, or have any bodily alcohol content. A minor who violates this subsection is responsible for a state civil infraction or guilty of a misdemeanor as follows:

- For the first violation, the minor is responsible for a state civil infraction and must be fined not more than \$100.00. A Court may order a minor to participate in a substance use disorder service, to perform community service, and undergo substance abuse screening and assessment at their own expense. A minor may be found responsible or admit responsibility only once the civil infraction
- For a subsequent violation the minor is guilty of a misdemeanor. A minor may face imprisonment for not more than 30 days if the court finds that the minor violated an order of probation, failed to successfully complete any treatment, screening, or community service ordered by the court, or failed to pay any fine for that conviction or juvenile adjudication, or by a fine of not more than \$200.00, or both. A court may order a minor to participate in substance use disorder services, to perform community service, and to undergo substance abuse screening and assessment at his or her own expense.

Use of a Controlled Substance (MCL 333.7404)

A person shall not use a controlled substance or controlled substance analogue unless the substance was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of the practitioner's profession practice.

A person who is found to be in violation may be subject to penalties as follows:

- A controlled substance classified as schedule 1 or 2 as a narcotic drug is a misdemeanor punishable by imprisonment for not more than 1 year or a fine of not more than \$2,000.00 or both.
- A controlled substance classified in schedule 1, 2, 3, or 4 is a misdemeanor punishable by imprisonment for not more than 1 year or a fine of not more than \$1,000.00, or both.
- Use of a controlled substance classified in schedule 5 is a misdemeanor punishable by imprisonment for not more than 6 months or a fine of not more than \$500.00, or both.
- Use of marijuana, salvia divinorum, catha edulis is a misdemeanor punishable by imprisonment for not more than 90 days or a fine of not more than \$100.00, or both.

Possession of a Controlled Substance (MCL 333.7403)

A person shall not knowingly or intentionally possess a controlled substance, a controlled substance analogue, or a prescription form unless the controlled substance, controlled substance analogue, or prescription form was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of the practitioner's profession practice.

A person who is found to be in possession of a controlled substance classified as Schedule 1 or 2 that is a narcotic may be subject to penalties based on the amount found in their possession as follows:

- 1000 grams or more; is a felony punishable by imprisonment for life or any term of years or a fine of not more than \$1,000,000.00, or both.
- 450 grams or more, but less than 1000 grams; is a felony punishable by imprisonment for not more than 30 years or a fine of not more than \$500,000.00, or both.
- 50 grams or more, but less than 450 grams; is a felony punishable by imprisonment for not more than 20 years or a fine of not more than \$250,000.00, or both.
- 25 grams or more, but less than 50 grams; is a felony punishable by imprisonment for not more than 4 years or a fine of not more than \$25,000.00, or both.
- Less than 25 grams; is a felony punishable by imprisonment for not more than 4 years or a fine of not more than \$25,000.00, or both

A person who is found to be in possession of the following other drugs may be subject to penalties as follows:

- Possession of Methamphetamine/Ecstasy; is a felony punishable by imprisonment for not more than 10 years or a fine of not more than \$15,000.00, or both.
- Possession of a controlled substance classified as Schedule 1, 2, 3, or 4 (excepting those listed above) or a controlled substance analogue; is a felony punishable by imprisonment for not more than 2 years or a fine of not more than \$2,000.00, or both.
- Possession of a controlled substance classified as Schedule 5, or LSD; is a misdemeanor punishable by imprisonment for not more than 1 year and a fine of not more than \$2,000.00, or both.
- Possession of Marijuana; is a misdemeanor punishable by imprisonment for not more than 1 year or fine of not more than \$2,000.00, or both.

- A prescription form; is a misdemeanor punishable by imprisonment for not more than 1 year or a fine of not more than \$1,000.00, or both.

Manufacturing, Creating, or Delivering a Controlled Substance, Prescription Form (MCL 333.7401)

A person shall not manufacture, create, deliver, or possess with intent to manufacture, create, or deliver a controlled substance, a prescription form, or a counterfeit prescription form.

A person who manufactures and/or delivers a controlled substance classified in Schedule 1 or 2 that is a narcotic may be subject to penalties based on the amount as follows:

- 1000 grams or more; is a felony punishable by imprisonment for life or any term of years or a fine of not more than \$1,000,000.00, or both.
- 450 grams or more, but less than 1000 grams; is a felony punishable by imprisonment for not more than 30 years or a fine of not more than \$500,000.00, or both.
- 50 grams or more, but less than 450 grams; is a felony punishable by imprisonment for not more than 20 years or a fine of not more than \$250,000.00, or both.
- 50 grams or less; is a felony punishable by imprisonment for not more than 20 years or a fine of not more than \$250,000.00, or both.

A person who manufactures and/or delivers the following other drugs may be subject to penalties as follows:

- Manufacture/Delivery of controlled substances classified as Schedule 1, 2, or 3 (except marijuana; cocaine; narcotic); is a felony punishable by imprisonment for not more than 7 years or a fine of not more than \$10,000.00, or both.
- Manufacture/Delivery of controlled substance classified as Schedule 4; is a felony; punishable by imprisonment for not more than 4 years or a fine of not more than \$2,000.00, or both.
- Manufacture/Delivery of a substance classified as Schedule 5; is a felony punishable by imprisonment for not more than 2 years or a fine of not more than \$2,000.00, or both.
- Manufacture/Delivery of a prescription form or a counterfeit prescription form; is a felony punishable by imprisonment of not more than 7 years or a fine of not more than \$5,000.00, or both

A person who manufactures and/or delivers marijuana or a mixture containing marijuana may be subject to penalties based on the amount as follows:

- 45 kilograms or more or 200 plants or more; is a felony punishable by imprisonment for not more than 15 years or a fine of not more than \$10,000,000.00, or both.
- 5 kilograms or more, but less than 45 kg, or 20 plants or more, but fewer than 200; is a felony punishable by imprisonment for not more than 7 years or a fine of not more than \$500,000.00, or both.
- Less than 5 kilograms or fewer than 20 plants; is a felony punishable by imprisonment for not more than 4 years or a fine of not more than \$20,000.00, or both.

For more information regarding penalties in the State of Michigan, please see [Michigan Legislature](https://legislature.mi.gov/) or [Michigan.gov/msp](https://michigan.gov/msp).

Disciplinary College Sanctions

The use and/or abuse of alcohol and other drugs can increase the risk for behavioral and social problems and can have a negative impact on academic and work performance. Students and employees who illegally use alcohol or controlled substances on College property or at College sponsored activities or events will

face disciplinary action and/or prosecution under the law. Mid has adopted intervention strategies for addressing violations of this policy with students and employees based on the level of violation. The College has sanctions in place that are designed to be educational and rehabilitative, rather than punitive. The overall goal of these interventions and sanctions is to:

- Educate the individual on how their choices may negatively impact themselves or others
- Deter individuals from engaging in unhealthy and/or harmful behavior
- Motivate the individual to change their behavior so that they may contribute to a healthy and safe campus community

Intervention and sanctions include but are not limited to warnings, required educational programs, meeting with Student Conduct and or Student Wellness, improvement plan, external substance abuse assessment, enrollment in a treatment program, probation, suspension, expulsion, termination of employment, and referral for prosecution. Intervention and sanctions imposed will vary based on the circumstances and severity of the incident, as well as prior acts. The Student Conduct Office is charged with overseeing the conduct and resolution process for students. Human Resources has management of the conduct and resolution process for employees.

Students

The Conduct Office will work with students charged with violations of this Policy and will determine appropriate intervention strategies, educational measures and sanctions using the response levels listed below. Response levels are designed to guide the process for determining the most reasonable response to violations of this policy. Each reported incident will be reviewed individually. A response level will be assigned to help guide the intervention, education, and sanction process.

Alcohol Violations

Response Level 1 - Possession or Consumption with minimal disruption

First possession/consumption violation, possible interventions and sanctions may include establishment of a conduct record and meeting with Student Conduct, meeting with Student Wellness, participation in educational awareness program or activity, issuance of a warning.

Response Level 2 – Concerning or Disruptive Behavior

Second alcohol possession/consumption, or first alcohol possession/consumption involving disruption (e.g. creating disturbance in the classroom, verbal altercation, minor vandalism/ destruction of property etc.). Sanctions may include any listed in response level 1, external alcohol assessment (at own expense), mandated educational or reflective assignment, implementation of improvement plan and/or follow recommendations decided by Student Conduct and/or Wellness, disciplinary probation until terms of improvement plan completed.

Response Level 3 – Persistent Concerning Behavior or Single Serious Incident

Three or more alcohol possession/consumption, **or** two or more alcohol possession/consumption involving disruption, **or** first time serious incident (e.g. physical altercation, threat to self or others, selling or furnishing alcohol to minor, police involvement etc.). Sanctions may include any listed in response levels 1 or 2, College Suspension Review, consideration of deferred suspension (based on assessment and follow through with recommendations/treatments), referral for prosecution.

Response Level 4 – Egregious Behavior/Incident

Alcohol possession/consumption combined with egregious behavior (e.g. physical assault, sexual assault, significant vandalism/destruction of property, attempt or threat of severe harm etc.). Sanctions may include any listed in response levels 1,2 3, College Expulsion Review, referral for prosecution.

Drug Violations

Response Level 1 - Possession or Consumption with minimal disruption

First marijuana possession/use, first drug paraphernalia possession/use. Sanctions may include establishment of a conduct record and meeting with Student Conduct, meeting with Student Wellness, participation in educational awareness program or activity, issuance of a warning.

Response Level 2 – Concerning or Disruptive Behavior

Second marijuana possession/use, **or** second Drug paraphernalia possession/use, **or** first narcotic, opioid, or unauthorized prescription drug use. Sanctions may include any from response level one, mandated educational or reflective assignment, implementation of improvement plan and/or follow recommendations decided by Student Conduct and/or Wellness, Substance Abuse consultation (at own expense), disciplinary probation until terms of improvement plan completed.

Response Level 3 – Persistent Concerning Behavior or Single Serious Incident

Three or more marijuana possession/use/paraphernalia, **or** second narcotic, opioid, or unauthorized prescription drug use, **or** possession of controlled substance(s) in large amount. Sanctions may include any from response level 1 and 2, College Suspension Review, completion of Substance Abuse treatment program, consideration of deferred suspension (based on assessment and follow through with recommendations/treatments), Referral for prosecution.

Response Level 4 – Egregious Behavior/Incident

Delivery, manufacture, or sale of a controlled substance, including marijuana narcotic, opioid, or unauthorized prescription drug use with aggravating factors (e.g. physical assault/altercation, significant vandalism, destruction of property, attempts or threats of severe harm). Sanctions may include any from response levels 1, 2, 3, College Expulsion Review, referral for prosecution.

Notation: Disciplinary Probation means that should any subsequent conduct violation occur or if intervention and sanctions assigned are not completed within the timeframe allotted, a review will convene for suspension or dismissal from the College.

College Employees - Drug Free Campus & Workplace Act

Substance Abuse for Full-Time Faculty

The Faculty Senate Association and Mid jointly recognize that past alcohol and drug abuse are governed by the Americans with Disabilities Act and shall be treated as such pursuant to the application of the terms and conditions of the Agreement.

The College will not engage in drug testing of Faculty to determine if they are under the influence of alcohol or other drugs. This testing would include breath, urine, or blood. Specifically, the College is in agreement that it will not administer or require random testing prior to promotion, award of tenure, or as part of any physical or psychological examinations otherwise required. Any failure or refusal of an instructor to submit to such testing would not be grounds for discipline.

If an administrator observes an instructor experiencing performance difficulties and it is the opinion of the administrator that those difficulties are due to alcohol and/or drug abuse, the administrator will discuss the observed difficulties with the instructor at a specially scheduled appointment. The instructor shall be afforded the right to have an appropriate Association representative(s) present at this meeting. In each circumstance, the Association representative(s) shall be notified in advance that a meeting is scheduled. One of the possible outcomes of such a meeting could be an instructor referral to the College's Employee Assistance Program (EAP).

An instructor, while successfully participating in an alcohol or drug abuse program (verified by progress reports provided by the EAP), shall not be subject to discipline or discharge for alleged alcohol and/or drug abuse provided that there have not been any occurrences of work-related misconduct. If the College determines that an instructor is not successfully participating in the program, this determination shall be subject to the grievance procedure as outlined in Article IX of the Faculty Senate Master Agreement.

No adverse effects to the instructor's status shall result upon diagnosis itself or request for treatment. However, if the instructor refuses the diagnosis or declines treatment by the EAP or the instructor fails to respond to treatment (as documented by the Employee Assistance reports) and the result of such refusal/failure adversely affects the job performance, said instructor will be subject to discipline up to and including discharge.

In the scope of this Policy, the concern of the College is focused on alcoholism and drug abuse problems which cause poor attendance, and/or unsatisfactory job performance or misconduct.

Sanctions

Bargaining unit employees covered under the Faculty Senate Agreement receiving sanctions that result in disciplinary actions, as opposed to remedies, may utilize the grievance procedures outlined in their respective agreement.

Substance Abuse for Full-Time Hourly (ESPA)

If an employee is suspected of working while under the influence of drugs or alcohol, the College may choose to administer a drug test. The College agrees that it will not require tests based on suspicion or at random, except when required by the state or federal government for employees in safety sensitive positions. If the College has reasonable justification to warrant testing, the refusal by the employee to be tested may result in discharge.

If an administrator observes an employee experiencing performance difficulties and it is the opinion of the administrator that those difficulties are due to alcohol and/or drug abuse, the administrator will discuss the observed difficulties with the employee at a specially scheduled appointment. If the employee is covered under the Educational Support Personnel Agreement (ESPA), the employee shall be provided the right to have appropriate Association representative(s) present at any such meetings. In all occurrences, the Association representative(s) shall be notified in advance that such an interview is scheduled to take place.

While successfully participating in an alcohol or drug abuse program (as verified by progress reports provided to the College by the provider of the services), an employee shall not be subject to discharge or discipline for alleged-alcohol and/or drug abuse. If the College should determine that an employee is not successfully participating in the program, this determination shall be subject to the grievance-arbitration procedure as outlined in Article 16 of the ESPA Agreement.

An employee will experience no adverse effects to their status based upon diagnosis itself or request for treatment. However, if the employee refuses to accept treatment or fails to respond to treatment (as documented by the provider's Progress Reports), the employee will be subject to discipline, up to and including, discharge. All matters will be treated in a professional and confidential manner.

Alcohol and drug abuse problems which cause poor attendance and/or unsatisfactory job performance or misconduct may result in discipline or discharge.

All reports of actual or alleged alcohol and/or drug abuse shall be promptly reported to the respective employee.

Sanctions

Bargaining unit employees covered under the Educational Support Personnel Agreement would be disciplined under the due process requirements per their agreement. Bargaining unit employees who disagree with any sanctions shall utilize the grievance procedures outlined in their respective agreement. For sanctions, please refer to the Educational Support Personnel Agreement.

Substance Abuse for Non-Bargaining Unit Employees

If an employee is suspected of working while under the influence of drugs or alcohol, the College may choose to have a drug test administered. If the College has reasonable justification to warrant testing, the Employee's refusal to be tested may result in discharge.

Once the College has been made aware of an employee with drug/alcohol abuse issues, the employee, their Supervisor and the Associate Vic President (AVP) of Human Resources will meet to address the issue and discuss concerns regarding the employee's performance. A rehabilitation plan will also be discussed that may include treatment and a re-entry plan (as applicable).

If it is determined that an employee will be required to receive treatment from a licensed professional verification reports from the licensed professional shall be provided to the AVP of Human Resources outlining the employee's progress within the program. Based on the verification reports, if the College determines that the employee is not successfully participating in the program, additional disciplinary action may be taken, up to discharge of employment.

An employee, while successfully participating in an alcohol or drug misuse program (as verified by progress reports provided to the AVP of Human Resources) shall not be subject to discharge or discipline for alleged alcohol and/or drug abuse.

Employees who successfully seek treatment at an outside facility for a lengthy period of time would be allowed to return to their current position under the parameters of a detailed re-entry program as outlined by the AVP of Human Resources and the Employee's immediate supervisor. Failure to comply with the details of the re-entry program could result in disciplinary action, up to discharge of employment.

Sanctions

Non-Bargaining unit employees may also be subject to progressive discipline. The following illustration reflects the degrees of progressive discipline:

- 1st Offense: Written Warning
- 2nd Offense: Written Reprimand
- 3rd Offense: Paid or Unpaid Suspension
- 4th Offense: Discharge

The severity of an offense or failure to comply with any rehabilitation or re-entry processes may negate the normal progression of levels in the progressive discipline.

Distribution of Policy

A copy of this policy and prevention program is distributed annually at the start of each fall semester. It is emailed to all students, faculty and staff by College Compliance & Ethics. The email includes a notice of availability of the Policy and includes the Policy as a PDF attachment. A link for accessing the document online is also included. First-time students that attend after the Fall Semester will be provided a copy of this policy via email in the second week of their first semester. This email will include the same information

as the annual distribution. New employees who are hired after the Fall policy distribution are made aware of the policy through their on-boarding with Human Resources.

[Review of College Prevention Program and Policy](#)

The Drug Free Campuses and Drug Free Workplace Acts require institutions of higher education to conduct a biennial review of its programs. The Biennial Review is conducted on even-numbered years and is designed to determine effectiveness, implement needed change, and ensure that intervention and sanctions developed are consistently enforced. Within the Biennial Review, the College is required to disclose the number of alcohol and drug violations occurring on campus or at College sponsored activities or events, as well as the number and types of sanctions imposed on students and employees as a result of violations to this policy. Mid's most recent [Biennial Review](#) is available for review.

[Policy Questions and Reporting Options](#)

This Policy is provided through the Office of College Compliance & Ethics with assistance from Student Conduct and Human Resources, and is updated yearly before the start of each Fall semester. A copy of [this policy](#) is available on Mid's website.

For questions regarding this Policy, students should contact the Office of College Compliance & Ethics via email at sos@midmich.edu. Employees should contact Human Resources for any questions regarding this Policy via email at hr@midmich.edu.

To report possible violations of this or any other College Policy, members of the campus community should refer to the [Mid Cares webpage](#).

[Closing](#)

Mid Michigan College has a duty to protect our students, staff, and visitors from unsafe and unhealthy influences while on our Campuses. Factually, the use/abuse of alcohol and other drugs also increases the risk for behavioral and social problems and can create a negative impact on academic and work performance and relationships with co-workers, classmates, family, and friends. Conduct problems could result in disciplinary action, loss of employment or dismissal from academic classes and programs. The laws of the state of Michigan and the policies of Mid Michigan College prohibits the use, possession, consumption, sale, distribution, and unlawful manufacture of illegal drugs, narcotics or controlled substances on Mid's campuses, while conducting College business or as part of College sponsored activities or events. By keeping our Campus Community apprised and informed of current laws and policies, as well as the effects of alcohol and drug use/abuse on social and physical health, Mid furthers its commitment in cultivating a healthy, safe and secure environment for our students, staff, and visitors.