

January 8, 2010

COLLECTION SITE COMMENTS LETTER.

Dear Mr. Stephenson,

Our collection site has been providing specimen collection services for regulated and non-regulated workplace testing programs for 14 years. As the industry continues to move forward using software to produce non-regulated CCFs on demand at the collection site, we expect to be using such systems in the near future. We would prefer to adopt a system that could generate both federally regulated and non-regulated CCFs. We feel strongly that SAMHSA should allow the option to produce federal CCFs in a fashion to similar to producing non-federal CCFs for the following reasons:

Software systems that govern the collection process improve the collector's ability to strictly follow collection site guidelines and procedures, thereby improving process integrity and reducing fatal flaws.

CCFs printed using software at the collection site use the most up-to-date employer, laboratory, and MRO information, which ensures more reliable and timely routing and distribution of results and CCF copies. This is so important in this process!

The data collected on CCFs produced with collection site software and laser printers is much more legible than handwritten, carbonless forms. This further improves data integrity for all users of the CCF.

Collection site software allows use of more reliable and timely methods of CCF copy distribution. For example, most applications automatically make Copy 2 immediately available to the MRO via fax or the internet, which is far more reliable, legible, and timely than the manual faxing of a handwritten, carbonless Copy 2. My staff spends many hours re-faxing and resending information to appropriate people for the process to work correctly.

Collection site software systems allow employers and service providers to "order" tests electronically, which greatly reduces the possibility of data gathering errors (donor ID, name, DOB, employer, reason for test, etc.) by the collector. This will become even more important because the proposed CCF requires the collector to indicate the testing authority. Online ordering allows the employer to provide that information directly, rather than rely on the donor to relay the information to the collector correctly. Staff in my clinic spend many hours on the phone each week to sort out the correct information donors to make sure the collection is done correctly.

Software systems provide vastly improved record-keeping tools and access to historical information than paper-based filing systems. This is especially true of the ultra-thin carbonless paper stock used by most federal CCFs.

Since most non-regulated testing is rapidly moving to this newer technology, collection sites that have electronic capabilities will prefer to keep federal and non-federal procedures as similar as possible. Mandating a form that prohibits the use of this technology will require collection sites to maintain separate processes for procedures, training, and record-keeping.

We strongly urge SAMHSA to consider minor modifications to the proposed CCF to make it friendly to “on-demand” production with a laser printer for those sites that have the capability. Specifically, a laser-printed form would allow sufficient space on the front of each copy to print the public burden statement, as well as the option of using (not requiring) security seals to be included on Copy 1, and the option of having the Privacy Act statement printed on a separate sheet for the relatively small number of tests for federal employees that require it. Thank you for the opportunity to participate in the rule-making process and for taking these comments into consideration on this important topic.

Sincerely,

Beth Shuster
Rapid City Medical Center llp, dba EmergiClinic