

GSN

GLOBAL SAFETY NETWORK



THE February 2016
MAGAZINE

Feature Story
Legalized
Pot Industry
Targets Our
Youth

Inside:

*Heroin
Big Problem
in the
Big Easy*



CLIENT NOTES

1st Quarter Random Testing must be completed by 3/31/16

Random testing for the 1st quarter must be completed by March 31, 2016.

If an employee selected for testing is known to be unavailable during the selection cycle (legitimate extended absence, long-term illness, etc.), document the reason and make-up the rate shortfall by using a pre-selected alternate. If no alternate was pre-selected, contact GSN and we will select one for you. Also, no employee should be excused from testing because of operational difficulties. See your industry specific regulations and interpretations for legitimate exceptions.

Once the employee is notified to report for testing, and the employee does not proceed immediately to test, the opportunity for the random test is over. See 382.305(l) and 382.107 (Refuse to submit) for guidance.

Refer to your Agency or Modality specific regulations for your industry requirements as to when to conduct testing. For example, FRA has "hours of service" testing considerations.

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Heroin Big Problem in the Big Easy

Local cops say heroin's resurgence is now worse in New Orleans than in any other areas of the nation.

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Legalized Pot Industry Targets Our Youth

A large part of these sales are attributed to consumption by those under the age of 21. In fact, Marijuana use by school kids between the ages of 12 and 17 is 58 percent higher in Colorado than the national average, according to the RMHIDTA (Rocky Mountain High Intensity Drug Trafficking Area).

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*Medical Marijuana:
Read the Warning Label*

Understanding marijuana (Cannabis) as a medicine is a jump too far in responsible, safe, and effective legal medicine, according to Harold Patin, former DEA agent and founder of Global Safety & Security. Will there be more harm than help? Patin offers his expert opinion as to the impact of medical marijuana upon the American way of life.

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What Make Heroin Addictive

In 1972 researchers at John Hopkins University discovered that neurons in the human brain have specific receptor sites for opiates such as heroin, according to a report on Frontline (PBS TV Show).

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THE LEAD Heroin Big Problem In the Big Easy

“A great relationship is not about perfection; it is about working together on the imperfections.”

Deacon Claude Smith

The GSN Magazine is published and distributed electronically 11 times a year on the third Tuesday of each month (except June) by Global Safety Network (GSN). Its purpose is to provide current information that will empower GSN clients to mitigate unnecessary risks in their organizations.

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Editorial Staff

Global Safety Network EDITORIAL

YOUR ASSOCIATES DETERMINE YOUR FUTURE Choose Your Friends Wisely

Who you choose as friends says a lot about who you are. Your relationships can lift you up or bring you down. They can serve as positive assets or negative liabilities.

It is like the old saying my grandmother often told me, "Show me your friends and I will tell you who you are." So what do your closest friends tell people about you?

Research indicates within five years you will gravitate to the average way your five best friends think and behave. Gradually you will become more and more like them.

Think about it. Considering your current group of best friends, what will you be like in five years?

Are you happy with that outlook or do you want something better?

Do these relationships empower you to grow to your full potential?

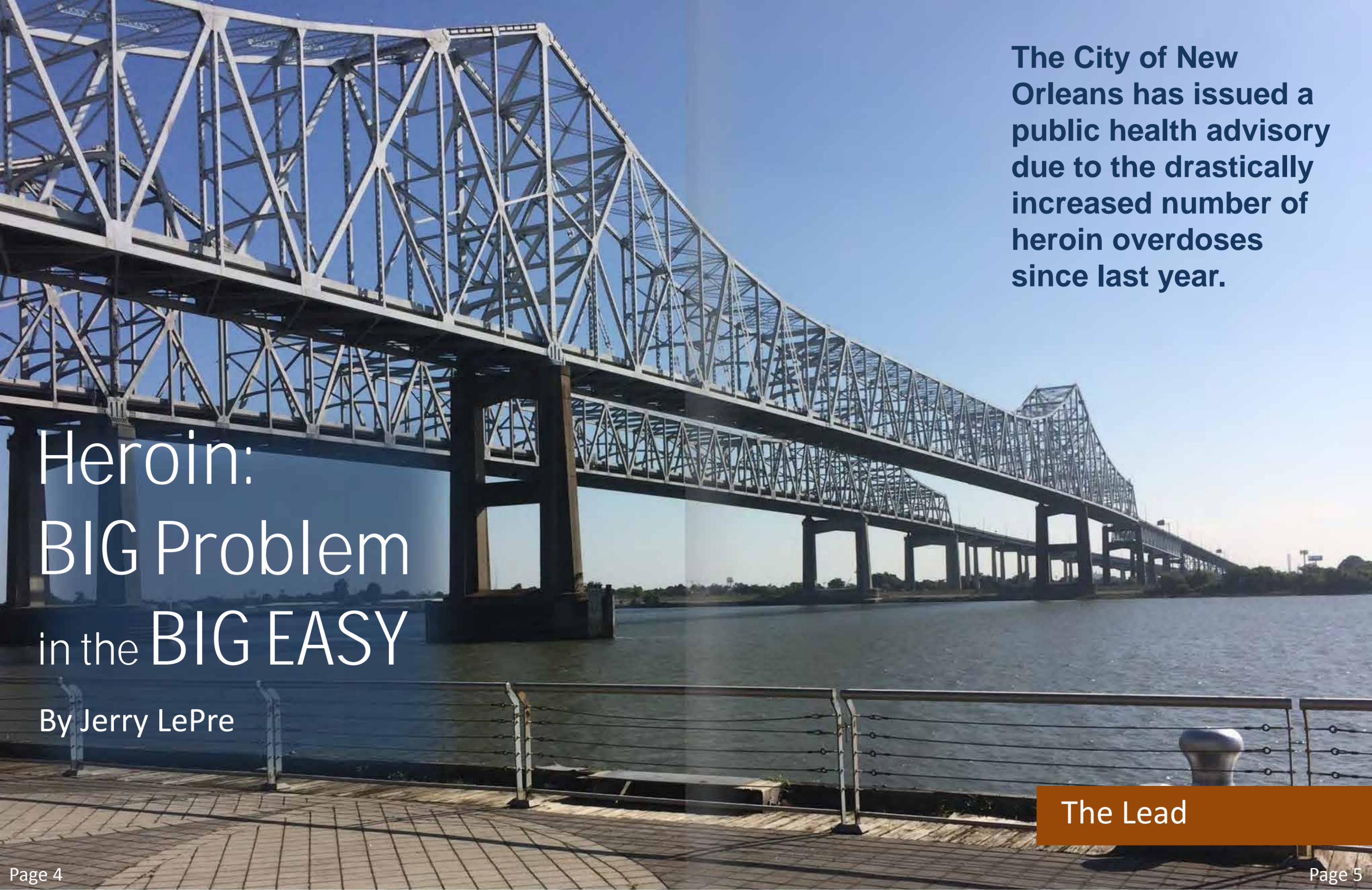
Will your friends inspire and empower you to reach your goals?

When you evaluate your best and closest relationships, how do they rate? Do these people have positive attitudes? Are they successful? Are they inspiring? Are they hard working?

Pastor Jonathan Stockstill of Bethan Church in Baton Rouge, LA said, "Friends determine your future. Peers determine your potential. Companions determine your course."

If your closest friends are negative, complacent, complaining, whining, and lazy, it is time to build relationships with a new set of positive friends. Building new friendships with valued people empower growth with synergy.

"The best mirror is an old friend," poet George Herbert said.



The City of New Orleans has issued a public health advisory due to the drastically increased number of heroin overdoses since last year.

Heroin: BIG Problem in the BIG EASY

By Jerry LePre

The Lead

Billie Holiday, Jimi Hendrix, Janis Joplin, John Belushi, River Phoenix, Sid Vicious, and Kurt Cobain -

All of these celebrities have lost their lives due to heroin, according to the Drug Enforcement Agency (DEA).

Yet, heroin has undergone a national resurgence spawned by a new generation of teenagers and young adults who don't connect with these celebrity heroin deaths of the past. Deaths that led to heroin's decline in the mid-90s. Even the more recent heroin overdose death of actor Philip Seymour Hoffman has not stopped the surge.

Thus, it is easy to understand why the New Orleans area is playing a large role in this resurgence. After all, alcohol and drugs have been part of New Orleans' culture for years, and heroin use has been prevalent since the drug first arrived in the Big Easy over a century ago, according to Gambit, a local New Orleans newspaper.

In fact, according to several retired deputies from the Jefferson Parish Sheriff's Office, local cops say the heroin resurgence is now worse in New Orleans than in any other areas of the nation. As a result, the city has issued a public health advisory due to the increase in the number of heroin overdoses since last year, which has been linked to five deaths in the first two weeks of 2016. During the press conference, City officials said the number of overdoses have jumped from an average of 2 to 2.5 per day to more than 4 per day with some days reaching as high as 10.

In terms of addictiveness, heroin ranks at the top of the list with crack cocaine, which is also a huge drug problem in New Orleans. According to Forbes Magazine, in addition to the heroin resurgence, New Orleans has one of the highest crack problems in the U.S. which has led to the Big Easy leading the nation in murder - 95 per 100,000 people - that are known to be directly related to drugs.

Heroin: BIG Problem in the BIG EASY

"Kids aren't as afraid of heroin as they once were," Robyn Dewhirst, director of assessment and early intervention at the Council on Alcohol and Drug Abuse (CADA) for Greater New Orleans said. "The impression is that smoking it is no big deal, and the fear of becoming a proverbial junkie is just not there."

According to Dewhirst, instead of shooting heroin by injecting a cooked solution of the drug with a syringe, the teenagers of New Orleans and other urban cities are more likely to snort it by inhaling lines of the powdered drug through their nostrils like cocaine or smoking it with prescription medications such as Adderall or pain killers.

These methods are preferred since users believe the risk of overdosing is reduced. However, the risk of addiction remains the same.

Many teens are turning to heroin for a cheaper, longer-lasting and more intense high. A heroin user in New Orleans can now get high for hours for just \$5. A "20-bag" (\$20 worth of heroin) is enough to get a user high for two days while half a gram of cocaine, chopped into four or five lines, costs about \$30.

According to FBI data, after hurricane Katrina, the New Orleans area was swamped with cheap and potent heroin as new dealers were trying to gain turf in the local market. Post-Katrina there are a lot more people with a direct pipeline to the very potent Mexican heroin, which is common in the Crescent City.

New Orleans has been called the city that care forgot. But it is time New Orleans does not forget to care about the BIG PROBLEM of heroin.

NOLA first responders are using naloxone, a drug that gets people breathing again, at a record pace. "We've using it more and more, over double what we would typically see in a normal day."

Dr. Jeffrey Elder
Director of New Orleans EMS

Legalized Pot Industry Targets Our Youth

"It's not about pot as a leafy plant to smoke, but about edibles clearly designed to appeal to children."

Ben Cort

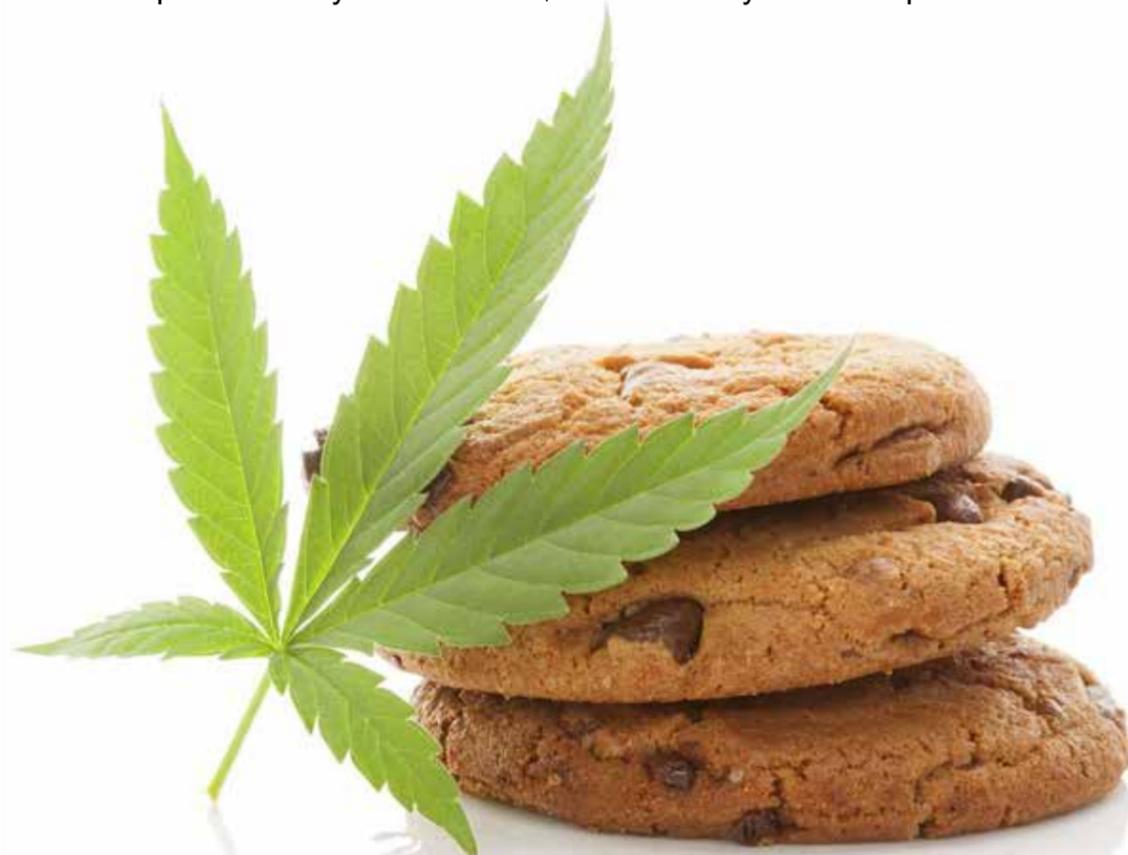
*Director of the Colorado Center for
Dependency, Addiction and
Rehabilitation at the University of
Colorado*

Feature

Legalized Pot Industry TARGETS OUR YOUTH

Legalized Pot is BIG business that
Is taking direct aim at our kids.

Last year, the industry reported sales of \$700 million in Colorado, according to the Centennial State's Department of Revenue. Of this total, 45 percent (\$313 million) was for recreational use while 55 percent (\$387 million) was for medical purposes. The revenue department also stated that in the first quarter of 2015, the more than 300 retail cannabis shops reported sales of \$118 million. It is projected that sales for 2015 will exceed \$470 million, which surpasses last year's total of \$313 million by about 50 percent.



A large part of these sales are attributed to consumption by those under the age of 21. In fact, Marijuana use by school kids between the ages of 12 and 17 is 58 percent higher in Colorado than the national average, according to the RMHIDTA (Rocky Mountain High Intensity Drug Trafficking Area). The percentage for college age adults is 54 percent higher than the national average. RMHIDTA's report also indicated a 34 percent increase in drug-related suspensions from Colorado schools during the past five year period.

The reason for the large increase in under age usage can be contributed to the fact that the legalized pot industry is taking aim on our children by providing a variety of edible products. Marijuana is available in concentrated products such as brownies, chocolates, cookies, lollipops, gummies and cherry drops. These items are produced by extracting the psychoactive ingredient of the plant for a very powerful effect.

Many of the pot edibles are practically identical to mainstream products—so much so that once out of the wrapper, it's nearly impossible to tell them apart. However, when child advocacy groups along with some legislators tried to pass laws that would require pot edibles to clearly show a basic marker, they were met with heavy resistance.

"This is the reality for our kids. But they don't even know what THC means."

Diane Carlson
co-founder of Smart Colorado, a youth advocacy group

Medical Marijuana:

Read The Warning Label



Opinion

HAROLD PATIN GUEST OPINION

Understanding marijuana (Cannabis) as a medicine is a jump too far in responsible, safe, and effective legal medicine.

Will there be more harm than help? There are long developed sensible protocols designed to evaluate what may be a useful, helpful medicine, or just a harmful intoxicant with many long term unknown effects.

The marijuana plant is really called Cannabis. So, the key chemicals created in Cannabis are called Cannabinoids. These chemicals are only made by nature within the Cannabis plant. These chemicals are psychotropic, meaning they enter the brain and have distinctive effects. These effects can be mind- altering, intoxicating, psychedelic, addicting, or maybe beneficial. The only way to determine the safety & efficacy is by scientific studies. This is what happens when an investigative new drug (IND) goes through the FDA process.

There are over 80 Cannabinoids contained in the Cannabis plant. The exact chemical structures vary depending on what strain of Cannabis you encounter. Basically, most all drugs, including most prescription drugs, are derived from plants. Perhaps we can add some medicines to the Pharmacopeia from Cannabis, but there is a right way & a wrong way. The tried and true FDA method is the right way. Physicians must also consider their Hippocratic Oath, **do no harm**.

The Cannabinoids which are getting attention are THC & CBD. THC is tetra hydro cannabinol and CBD is cannabidiol. THC and the several forms like Delta-9-THC and several others, has long been identified as the key intoxicant. Some researchers have also found that THC has anti emetic (stops vomiting) properties and appetite stimulating properties. No research shows that THC has any beneficial effect on cancer. There are studies that THC has effects which are not helpful for PTSD.

The trend in treating psychiatric disorders has moved heavily in favor of medication rather than psychotherapy (talk therapy) over the last decade. I think it is due to being less expensive and we should allow more talk therapy and medication when needed. PTSD patients and those suspected of this condition, should be thoroughly evaluated by a psychotherapy team and treated with talk therapy and medication as the evaluation determines.



Medical Marijuana: Read The Warning Label

CBD appears to have beneficial effects on nervous disorders, such as spasticity, seizures or Parkinson's Disorder. There are studies presently underway to determine if this is really safe & effective. Best of all, there are many drugs available NOW to treat all of the above. Available at your local drug store on a prescription from your physician and covered by most insurance plans. There are even drugs made based on the Cannabinoids. These are Marinol (R) and Cesamet (R), based on the THC molecule. These 'pure' drugs are taken in pill form with consistent dosages.

Also, drugs based on the CBD molecule are Sativex (R) & Epidiolex (R). These drugs are now undergoing trials but would be available now as compassionate relief. It is expected that these drugs will be cleared soon. Sativex is available, legally in the UK, EU and Canada. Epidiolex is available in California.

It is important to point out that real science is not a couple individuals thinking that smoking marijuana is really a medicine and it has safely helped them. Science relies little on anecdotal data. The FDA method is real science. We must consider the side effects and the long term effects of any IND. Smoking should not be considered medicine, since it obviously adds to problems with the respiratory system.

Marijuana, Cannabis, pot, whatever you call it is a Schedule 1 Controlled Dangerous Substance. It may be used for research only by Registrants under DEA rules with a protocol for research approved by the FDA & DHHS. As some molecules show medical promise, they may be included in other schedules that allow for prescriptions and dispensing by pharmacies. (Marinol is Schedule 3 & Cesamet is Schedule 2).

Then the American Legion magazine article 8/2015) mentions the use of marijuana for the eye disease, glaucoma. This is unwise, since we should rely on eye treatment experts to choose the right treatment for eye diseases. Presently, ophthalmology physicians do not recommend marijuana to treat glaucoma. There are many medicines now available to treat glaucoma and sometimes surgery is needed. That is the way to treat disease. Trust the professionals. Trust the medics, experts, not a patient who thinks they know more than all the scientists.

If we look at the history of science and medical advances, we can find many, many examples of treatments which did not work. We continued our advances in science and discovered so many things about chemistry, biology, the cell, DNA, the brain, heart, and every part of us, our universe and our lives. Glaucoma is a serious eye disease involving intra ocular pressure and possible damage to the optic nerve. Studies have been done on the use of cannabinoids to treat glaucoma.

OPHTHALMOLGY CONCERNS:

In 2003, the American Academy of Ophthalmology released a position statement stating that cannabis was not more effective than prescription medications. Furthermore, no scientific evidence has been found that demonstrates increased benefits and/or diminished risks of cannabis use to treat glaucoma compared with the wide variety of pharmaceutical agents now available.

In 2012 the American Glaucoma Society published a position paper discrediting the use of cannabis as a legitimate treatment for elevated intra ocular pressure, for reasons including short duration of action and side effects that limit many activities of daily living.

The VA Hospitals have fallen into a huge problem of servicing our veterans. We are now praying that the new VA leader can get us back to properly caring for our veterans. We do not need the VA doctors to discuss, recommend, prescribe or dispense marijuana to our needy veterans. Instead, doctors can prescribe other medically-sound solutions that are covered by insurance and VA plans.

RESOURCES

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What Makes Heroin Addictive?

In 1972 researchers at John Hopkins University discovered that neurons in the human brain have specific receptor sites for opiates such as heroin, according to a report on Frontline (PBS TV Show).

The researchers determined that morphine, the primary ingredient in opiates, has a similar makeup to endorphins, which our bodies produce naturally to respond to pain and stress.

According to the National Institute on Drug Abuse (NIDA), our opioid receptors are located all throughout the brain, including the brain stem, which controls many processes critical for life, including arousal, breathing and blood pressure.

When morphine from heroin enters the brain, it acts as an imposter, mimicking the actions of endorphins, according to Frontline. However, heroin is more powerful than endorphins since it provides a feeling of euphoria that cannot be reproduced naturally. Those who try heroin often become addicted to the pleasurable rush with some becoming addicted after using it the first time.

PHYSICAL EFFECTS

Heroin can cause cardiac arrest, respiratory failure, a rise in temperature, irregular heart beat and other medical issues. Because heroin can shut down the central nervous system, people overdose and die from this drug.

RISK FACTORS

The likelihood of developing addiction is influenced by a combination of genetic and environmental factors. People who are predisposed to opioid addiction often don't know they are until it's too late.

However, some of the known risk factors include:

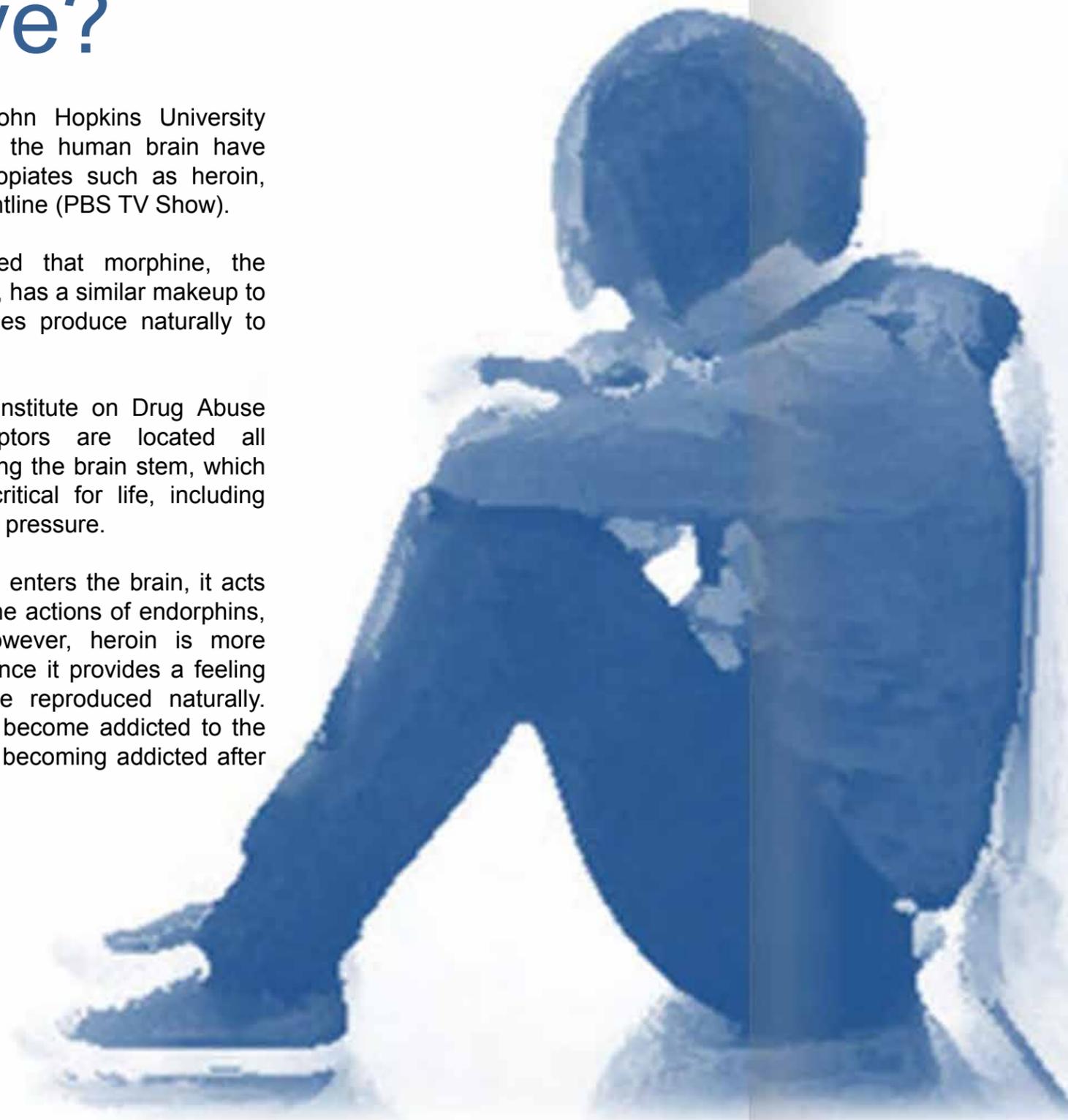
- People with a close relative who suffered from an opioid addiction;
- People suffering from anxiety or depression; and
- People with a personal or family history of alcohol or drug abuse.

WARNING SIGNS

At first, those under the control of heroin may try to hide the problem. This can be due to shame, embarrassment or denial.

Regardless, if you, or someone you know, experience the following signs, it may be an indication of heroin addiction:

- Mood swings, depression, anger and irritability;
- Marital or relationship problems;
- Social isolation, loss of friendships;
- Poor performance at school or work;
- Financial problems;
- Borrowing money; and
- Selling personal or family possess.





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¹U.S. Immigration and Customs Enforcement; ²Fair Credit Reporting Act; ³ Department of Transportation.

Are your employees aware of what is considered a refusal to test?

Compliance Corner

By Jamie Bork
GSN Director of Compliance

Department of Transportation (DOT) regulations prohibit participants (employees) from refusing a test. Here's a partial list of Part 40 refusals (Event), the party ultimately responsible for the final determination (Decision Maker) and the DOT Instructions for handling them:

EVENT	DECISION MAKER	DOT INSTRUCTIONS
Fail to appear at a urine collection site when directed to report	Employer / DER * [after review of the collector documentation]	If the employee did not get to the site or spent too much time getting there, it is a refusal.
Fail to remain at the urine collection site	Employer / DER * [after review of the collector documentation]	If the collector reports that the employee left the collection site before the testing process was complete, it is a refusal.
Fail to provide a urine specimen	Employer / DER * [after review of the collector documentation]	If the collector reports that the employee left the collection site before providing a required specimen, it is a refusal.
Fail to permit a monitored or observed urine collection	Employer / DER * [after review of the collector documentation]	If the employer ordered an observed collection or if the collector required the collection to be monitored or observed, it is a refusal if the employee does not permit it to occur.
Fail to provide a sufficient amount of urine	MRO	If the MRO finds that there was no medical reason for the employee to provide an insufficient amount of urine, it is a refusal.
Fail or decline to take an additional drug test the employer or collector has directed	Employer / DER * [after review of the collector documentation]	If the employer or collector directs the employee to take an additional test, as required or permitted by the DOT, and the employee does not, it is a refusal.

For more information, employee may be provided with a document directly from the DOT.
<https://www.transportation.gov/sites/dot.gov/files/docs/ODAPC%20EmployeeHandbook%20En.pdf>

12 Engaging C's for Leaders

What's

POP N

By Jerry LePre

GSN Director of Communications

Who Stay at the TOP!

Effective leaders recognize the strengths, weaknesses, and learning style of each team member. Upon this foundation, leaders develop practical processes to enhance strengths while overcoming weaknesses. Through influence and by example, leaders instill discipline to engage, inspire, and encourage their teams to keep focused on the integrity of the vision. They provide connection, correction, and direction through 12 C's of Leadership.

Continued on Next Page

“Leadership is the capacity to translate vision into reality.”

- **Warren Bennis**
Author and Professor

1. Character

The *character* of integrity is of utmost importance for a leader when it comes to developing trust with those they influence. Integrity is the cornerstone of success. Upon this solid rock, a great leader builds the foundation

2. Communication

Unlike managers who inform their followers of only need-to-know-facts, effective leaders are great communicators who successfully use *communication* to unite each member with the mission, vision, and shared values.

3. Competence

People won't follow a person who lacks *competence*. Leaders earn respect and credibility through prior accomplishments and a thorough understanding of roles, functions, goals, resources, mission, vision, and values.

4. Conviction

"People don't follow words, they follow *conviction* and without *conviction* the words are meaningless," author Jennifer Ott said.

5. Connection

The best leaders connect the vision (purpose) and the mission (path) with values (principles). This *connection* unites the right people at the right time with the right resources for the right reasons.

6. Compassion

Empathy in motion describes *compassion*. A compassionate leader shares the emotions of followers and desires to help and support them in overcoming any trials by obtaining shared goals.

7. Confidence

Confidence inspires *confidence*. People are drawn toward people who exhibit *confidence*. Great leaders initiate, nurture, and perpetuate a positive and confident culture through inspiration, motivation, and engagement while avoiding conceit, arrogance, and inflated egos.

8. Consistency

Stability, dependability, and reliability are the result of consistent behavior. *Consistency*, when combined with honesty, transparency, and integrity, builds trust while instilling a sense of security.

9. Courageous

The strength of a leader is defined by how he or she responds with courage during times of challenges, adversities, setbacks, and controversies. *Courageous* leaders grow despite obstacles. They bravely accept the consequences for their actions and decisions. They aren't afraid to make the right decision even if it isn't popular.

10. Creativity

The vision of effective leaders flows from their creative perspective. These leaders instill and nurture *creativity*, innovation, and imagination in those they influence. They create opportunities.

11. Captivate

Effective leaders are magnetic. They attract diversified people to come together for a common vision. They understand how to use their magnetism to *captivate*, engage, and inspire followers without abusing authority.

12. Common Sense

The ability to perceive and understand complicated issues from a perspective shared by nearly everyone while making sound practical decisions that are understood by all defines the term *common sense*.

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