
DRUGS AND ALCOHOL POLICY – UT CAMPUS

Date of Initial Approval: 6/1/2017

Date Revised: 3/7/2024

Category: 3.0 Administration & Governance

Responsible Department: Compliance Office and Campus Security

Stakeholders Involved in Review: Office of Compliance, Medical Response Team, Leadership Council

PURPOSE & SCOPE

Rocky Vista University (RVU) is committed to cultivating a drug and alcohol-free work place and maintaining a standard of conduct for employees and students that discourages the unlawful or unauthorized use, possession, storage, manufacture, distribution, or sale of alcoholic beverages and any illicit drugs or drug paraphernalia in University buildings, public campus areas or at University affiliated events held on or off-campus. For RVU employees, compliance with this policy is a term and condition of employment. For RVU students and student organizations, compliance with this policy is a term and condition of continued enrollment and organizational registration.

POLICY STATEMENT

Pursuant to the requirements of the Drug-Free School and Community Act Amendments of 1989 30 CFR 86; HEA Sec. 120; (PL 101-226), RVU has adopted and implemented drug and alcohol policies and programs designed to prevent drug and alcohol problems within the University setting. The policies and programs are designed to identify problems at the earliest stage, motivate the affected individuals to seek help, and to direct the individual toward the best assistance available.

Alcohol and Drug-Free Policy

RVU is an alcohol and drug-free campus, with the exception of special events that are approved by the RVU President, Provost, or College Dean for the use of alcohol. As set forth in local, state, and Federal laws, and the rules and regulations of the University, the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on campus-controlled property is strictly prohibited. All drug and alcohol laws are vigorously enforced.

Disciplinary Sanctions

Through disciplinary procedures, the University will impose sanctions upon students and employees who unlawfully use, possess, sell or distribute drugs or unlawfully use or abuse alcohol on college property, or as part of any University employment or activity. Depending on the circumstances, these sanctions may range from a warning or a suspension, to a maximum of expulsion or termination of employment. Students and employees who violate the University's regulations are also subject to referral by the Campus Safety and Security Department to the appropriate legal entity for criminal prosecution.

Amnesty for Alcohol and/or Drugs in Sexual Misconduct Investigations

A student or employee may be hesitant to come forward and file a sexual misconduct investigation request out of concern that a complainant was using or was under the influence of alcohol or illegal drugs at the time of the alleged incident. RVU's primary interest in such situations is in investigating claims of alleged sexual violence.

Substance use itself does not assign culpability to a Reporting Party for sexual violence against them. Other rules violations will be addressed separately from a sexual violence allegation.

Drug and Alcohol Testing

RVU has Drug and Alcohol Testing policies for both employees and students. Please refer to the RVU Drug and Alcohol Testing Policy for Students or the RVU Drug and Alcohol Testing Policy for Employees for more information.

ROLES & RESPONSIBILITIES

COM Deans, Program Directors	Works with allegations of student violations, investigates, and decides on sanctions if student is in violation. (May consult with Provost)
Human Resources	Works with allegations of employee violations, investigates, and decides on sanctions if employee is in violation. (May consult with President)
Compliance Office	Ensures this policy is disseminated through annual notification as required by the Drug-Free Schools and Communities Act
Campus Safety and Security	Reports any known issues of use of drugs or alcohol to Deans, Program Directors, or HR. Mitigates risk of any harm whenever possible by removing person if disruptive or a danger to self or others.

RELATED PROCESSES, PROCEDURES, AND/OR DEFINITIONS

- Appendix 1- UTAH DRUG AND ALCOHOL LAWS AND REGULATIONS
- Appendix 2- HEALTH RISKS ASSOCIATED WITH THE ABUSE OF ALCOHOL OR DRUGS
- Appendix 3- ALCOHOL AND DRUG TREATMENT AND COUNSELING PROGRAMS

POLICY REVISION HISTORY

06/01/2017 Original policy put in place pursuant to the Drug-Free Schools and Communities Act
 03/07/2024 Revised to include roles and responsibilities and decision-making for the use of alcohol at RVU events.

**APPENDIX 1
Utah State Alcohol Law**

Utah State Law allows a person who has reached his/her 21st birthday to possess and/or consume alcoholic beverages. Students and employees may be required to present valid identification to verify the fact that they are 21 years of age and can legally consume alcohol. Thus, alcohol may be consumed only by people of legal age at approved functions on University premises. Furthermore, the distribution and consumption of alcohol at University events must comply with the guidelines set forth in the University’s Drug and Alcohol policy and all State and Local Laws.

Penalties for a DUI in Utah

41-6a-503 Penalties for driving under the influence violations.

(1) A person who violates for the first or second time Section 41-6a-502 is guilty of a:

- (a) class B misdemeanor; or
- (b) class A misdemeanor if the person:
 - (i) has also inflicted bodily injury upon another as a proximate result of having operated the vehicle in a negligent manner;
 - (ii) had a passenger under 16 years of age in the vehicle at the time of the offense; or
 - (iii) was 21 years of age or older and had a passenger under 18 years of age in the vehicle at the time of the offense.

(2) A person who violates Section 41-6a-502 is guilty of a third-degree felony if:

- (a) the person has also inflicted serious bodily injury upon another as a proximate result of having operated the vehicle in a negligent manner;
- (b) the person has two or more prior convictions as defined in Subsection 41-6a-501(2), each of which is within 10 years of: (i) the current conviction under Section 41-6a-502; or (ii) the commission of the offense upon which the current conviction is based; or
- (c) the conviction under Section 41-6a-502 is at any time after a conviction of: (i) automobile homicide under Section 76-5-207 that is committed after July 1, 2001; (ii) a felony violation of Section 41-6a-502 or a statute previously in effect in this state that would constitute a violation of Section 41-6a-502 that is committed after July 1, 2001; or (iii) any conviction described in Subsection (2)(c)(i) or (ii) which judgment of conviction is reduced under Section 76-3-402.

(3) A person is guilty of a separate offense for each victim suffering bodily injury or serious bodily injury as a result of the person's violation of Section 41-6a-502 or death as a result of the person's violation of Section 76-5-207 whether or not the injuries arise from the same episode of driving.

Amended by Chapter 214, 2009 General Session

How much do you have to drink (BAC*) for a DUI in Utah?

Under 21	Any detectable amount.
21 or older	.05% DUI (12/30, 2018 Law changed from .08% to .05%)

*BAC = blood alcohol content

What if you refuse to take a chemical test in Utah?

Utah has an implied consent law. That means that if you refuse to submit to a chemical test you will be subject to a possible fine and automatic license suspension. To learn more, see [Utah's implied consent law](#).

<https://le.utah.gov/xcode/Title41/Chapter6a/41-6a-S520.html>

Utah Drug Possession – Laws & Penalties

Marijuana: Utah is **one of only 19 states** that still punishes simple possession of marijuana with jail time. Under current Utah law, possession of as little as an ounce or less of marijuana can result in a six-month jail sentence.

Other Drugs:

You may be charged with possession if you are **determined to be in control of an illegal drug**. This means the drugs do not have to be in your pocket but may be in your glove box or in an easily accessible area. An illegal drug that is under your control is a possession charge under Utah law.

If you are charged with possession, the sentence you face depends on the substance you are caught with. All drug possession charges and penalties are classified by Schedule.

See Utah Law for penalties.

https://le.utah.gov/xcode/Title58/Chapter37/58-37-S8.html?v=C58-37-S8_2017050920170801

Federal Drug Trafficking Penalties

- Please see: <https://www.dea.gov/drug-policy-information>

RVU Drug Policy

The legal status of controlled substances, including marijuana, shall be determined by Federal Law, Not State Law. RVU will not tolerate or accommodate the use of any illegal drugs by its employees or students.

APPENDIX 2

HEALTH RISKS ASSOCIATED WITH THE ABUSE OF ALCOHOL OR DRUGS

The U.S. Department of Justice provides information on the effects of alcohol and commonly used drugs. This information is provided below and can also be found on the U.S. Department of Justice website at:

<http://www.justice.gov>

Alcohol Information

Alcohol: Alcohol consumption causes a number of marked changes in behavior. Even a low amount can 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 amounts of alcohol also increase the incidence of a variety of aggressive acts, including spouse and child abuse. Moderate to high amounts of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information.

Very high amounts cause respiratory repression and death. If combined with other depressants of the central nervous system, much lower amounts of alcohol will produce the effects described here.

Repeated use of alcohol can lead to dependence. Sudden cessation of alcohol intake is likely to produce withdrawal symptoms, including severe anxiety, tremors, hallucinations, and convulsions. Alcohol withdrawal can be life threatening. Long-term consumption of large quantities of alcohol, particularly combined with poor nutrition, can also lead to permanent damage to vital organs, such as the brain and the liver.

Females who drink alcohol during pregnancy may give birth to infants with fetal alcohol syndrome. These infants have irreversible physical abnormalities and mental retardation. In addition, research indicates that children of alcoholic parents are at a greater risk of becoming alcoholics themselves.

Because alcohol affects many organs in the body, long-term heavy drinking puts people at risk for developing serious health problems, some of which are described below.

Alcohol-Related Liver Disease: More than 2 million Americans suffer from alcohol-related liver disease. Some drinkers develop alcoholic hepatitis, or inflammation of the liver, as a result of long-term heavy drinking. Its symptoms include fever, jaundice (abnormal yellowing of the skin, eyeballs, and urine), and abdominal pain. Alcoholic hepatitis can cause death if drinking continues. If drinking stops, this condition often is reversible. About 10 to 20 percent of heavy drinkers develop alcoholic cirrhosis, or scarring of the liver. Alcoholic cirrhosis can cause death if drinking continues.

Heart Disease: Moderate drinking can have beneficial effects on the heart, especially among those at greatest risk for heart attacks, such as men over the age of 45 and women after menopause. But long-term heavy drinking increases the risk for high blood pressure, heart disease, and some types of stroke.

Cancer: Long-term heavy drinking increases the risk of developing certain forms of cancer, especially cancer of the esophagus, mouth, throat, and voice box. Women are at slightly increased risk of developing breast cancer if they drink two or more drinks per day. Drinking may also increase the risk for developing cancer of the colon and rectum.

Pancreatitis: The pancreas helps to regulate the body's blood sugar levels by producing insulin. The pancreas also has a role in digesting ingested food. Long-term heavy drinking can lead to pancreatitis, or inflammation of the pancreas. This condition is associated with severe abdominal pain and weight loss and can be fatal.

Drug Information

Methamphetamine: Methamphetamine releases high levels of the neurotransmitter dopamine which stimulates brain cells enhancing mood and body movement. It also appears to have a neurotoxic effect damaging brain cells that contain dopamine and serotonin, another neurotransmitter. Over time, methamphetamine appears to cause reduced levels of dopamine, which can result in symptoms like those of Parkinson's disease, a severe movement disorder. Users may become addicted quickly and use it with increasing frequency and in increasing doses. The central nervous system (CNS) actions that result from taking even small amounts of methamphetamine include increased wakefulness, increased physical activity, decreased appetite, increased respiration, hyperthermia, and euphoria. Other CNS effects include irritability, insomnia, confusion, tremors, convulsions, anxiety, paranoia, and aggressiveness. Hyperthermia and convulsions can result in death. Methamphetamine causes increased heart rate and blood pressure and can cause irreversible damage to blood vessels in the brain, producing strokes. Other effects of methamphetamine include respiratory problems, irregular heartbeat, and extreme anorexia. Its use can result in cardiovascular collapse and death.

Cocaine: Cocaine is a strong central nervous system stimulant that interferes with the re-absorption process of dopamine, a chemical messenger associated with pleasure and movement. Dopamine is released as part of the brain's reward system and is involved in the high that characterizes cocaine consumption. The physical effects of cocaine use include constricted peripheral blood vessels, dilated pupils, and increased temperature, heart rate,

and

blood pressure. The duration of cocaine's immediate euphoric effects, which include hyper-stimulation, reduced fatigue, and mental clarity, depends on the route of administration.

High doses of cocaine and/or prolonged use can trigger paranoia. Smoking crack cocaine can produce a particularly aggressive paranoid behavior in users. When addicted individuals stop using cocaine, they often become depressed, which may lead to further cocaine use to alleviate depression. Prolonged cocaine snorting can result in ulceration of the mucous membrane of the nose and can damage the nasal septum enough to cause it to collapse. Cocaine-related deaths are often a result of cardiac arrest or seizures followed by respiratory arrest.

Heroin: Heroin abuse is associated with serious health conditions including fatal overdose, spontaneous abortion, collapsed veins, and infectious diseases, including HIV/AIDS and hepatitis. Mental functioning becomes clouded due to depression of the central nervous system. Long-term effects of heroin appear after repeated use for some period of time. Chronic users may develop collapsed veins, infection of the heart lining and valves, abscesses, cellulitis, and liver disease. Pulmonary complications, including various types of pneumonia, may result from the poor health condition of the abuser, as well as from heroin's depressing effects on respiration.

Marijuana: Recent research findings indicate that long-term use of marijuana produces changes in the brain similar to those seen after long-term use of other major drugs of abuse.

Someone who smokes marijuana regularly may have many of the same respiratory problems as tobacco smokers. These individuals may have daily cough and phlegm, symptoms of chronic bronchitis, and more frequent chest colds. Continuing to smoke marijuana can lead to abnormal functioning of lung tissue injured or destroyed by marijuana smoke.

MDMA (Ecstasy): MDMA causes injury to the brain, affecting neurons that use the chemical serotonin to communicate with other neurons. The serotonin system plays a direct role in regulating mood, aggression, sexual activity, sleep, and sensitivity to pain. Many of the risks users face with MDMA use are similar to those found with the use of cocaine and amphetamines, such as: psychological difficulties including confusion, depression, sleep problems, drug craving, severe anxiety, and paranoia – during and sometimes weeks after taking MDMA; physical symptoms such as muscle tension, involuntary teeth clenching, nausea, blurred vision, rapid eye movement, faintness, and chills or sweating; and increases in heart rate and blood pressure, a special risk for people with circulatory or heart disease. There is also evidence that people who develop a rash that looks like acne after using MDMA may be risking severe side effects, including liver damage, if they continue to use the drug.

Rohypnol, GHB, and Ketamine: Coma and seizures can occur following abuse of GHB and, when combined with methamphetamine, there appears to be an increased risk of seizure. Combining use with other drugs such as alcohol can result in nausea and difficulty breathing. GHB may also produce withdrawal effects, including insomnia, anxiety, tremors, and sweating. In October, 1996, because of concern about Rohypnol, GHB, and other similarly abused sedative-hypnotics, Congress passed the "Drug-Induced Rape Prevention and Punishment Act of 1996." This legislation increased federal penalties for use of any controlled substance to aid in sexual assault.

LSD:

The effects of LSD are unpredictable. They depend on the amount taken; the user's personality, mood, and expectations; and the surroundings in which the drug is used. Usually, the user feels the first effects of the drug 30 to 90 minutes after taking it. The physical effects include dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth, and tremors.

LSD is not considered an addictive drug since it does not produce compulsive drug-seeking behavior as do cocaine, amphetamine, heroin, alcohol, and nicotine. However, like many of the addictive drugs, LSD produces tolerance, so some users who take the drug repeatedly must take progressively higher doses to achieve the state of intoxication they had previously achieved. This is an extremely dangerous practice, given the unpredictability of the drug. The National Institute on Drug Abuse (NIDA) is funding studies that focus on the neurochemical and behavioral properties of LSD. This research will provide a greater understanding of the effects of the drug.

APPENDIX 3**ALCOHOL AND DRUG TREATMENT AND COUNSELING PROGRAMS**

- RVU Counseling Services
 - Student Affairs 435-222-1270
- ESI Employee Assistance Group
 - [ESI GROUP : Welcome \(lifeadvantages.net\)](http://www.lifeadvantages.net)
 - 800-252-4555
- Alcoholics Anonymous
 - <http://www.utahaa.org/>
- Narcotics Anonymous
 - <http://nasouthernutah.org/>
 - 435-467-4403
- <https://www.narcotics.com/na-meetings/utah/>
- <https://alcoholicsanonymous.com/aa-meetings/utah/>
- <https://www.rehab.com/utah>