

HHS Drug Testing Guide

HHS Policy for Frequency and Duration

Child Abuse Assessments and Drug Testing

Drug testing requested by an Iowa Department of Health and Human Services (HHS) child protection worker should be performed whenever possible during the child abuse assessment. If the drug test is authorized and scheduled before the conclusion of the assessment but cannot be administered before the completion of the assessment or the results have not yet been received, document in the written report that an addendum will be submitted.

General drug testing guidelines:

- One test per client is allowed during a child abuse assessment.
- Any type of test (urine, oral swab, sweat patch, hair) may be authorized.
- At the request of HHS, a health practitioner may perform drug testing of a child before or during a child abuse assessment when the practitioner has determined that it is medically indicated.
- Drug testing should not be authorized during a family assessment.

Ongoing Case Management and Drug Testing

Initial Phase

Case management may authorize a maximum of 1 random drug test (urine or oral swab) per week for 60 days during the following:

- Case initiation. (START Summary, 2025)
- During intensive part of substance use treatment. (START Summary, 2025)
- Observation of return to use indicators (START Protocol, 2025).
- When a substance use concern is identified as impacting child safety throughout life of the case.

Considerations

- Geographical location of families and availability of testing site locations may impact weekly collection.
- If an individual is completing lab verified drug testing with their substance use treatment provider, probation officer or in a residential setting and drug testing results are available to us this can be used as supplemental information.
- Sweat patch may be utilized versus the urine/oral swab with supervisor approval and should only be authorized when all other reasonable options have been exhausted.

Stabilization Phase

Frequency of testing may be reduced to every other week or less often when parents are doing well as shown by treatment participation, consistent test results of substance not detected, and/or absence of concerning behavior. Testing method of collection may include urine, oral swab or sweat patch. Consultation with supervisor is required prior to entering the stabilization phase of testing.

Handling Relapse and/or Return to Use

Recognizing relapse as a possible phase in recovery, HHS protocol requires:

- Immediate discussions with parents to understand circumstances of relapse.
- Prompt reassessment and potential adjustments to child safety and treatment plans.
- Close collaboration with treatment providers to enhance supports, modify interventions and re-stabilize family circumstances effectively (START Summary, 2025).
- In consultation with a supervisor, parents may return to initial phase of weekly testing.

HHS will continue to monitor for behavioral indicators and utilize screening tools in determining drug testing authorizations.

HHS Laboratory and Collection Services Contracts

HHS contracts with the Central Iowa Juvenile Detention Center (CIJDC) to provide drug testing services statewide. These services are designed to support case planning, monitor treatment progress, meet court compliance requirements and ensure child safety. HHS contracted testing panels follow SAMHSA standards for drug detection and cutoffs. HHS staff will utilize urine testing and oral swabs as the collection method for weekly, bi-weekly and monthly testing. Hair, sweat patch and instant urine testing may only be authorized when the primary collection methods are insufficient or unavailable. Use must be supported by case-specific factors and supervisory consultation and approval.

Medical Review Officer (MRO) Service

The Laboratory utilizes the services of a Medical Review Officer (MRO) through a company called Cynergy for the review and interpretation of laboratory-based drug test results. The MRO is a licensed physician with appropriate medical training and certification in toxicology and substance use testing review. The MRO reviews and verifies positive, adulterated, substituted, and invalid test results. The MRO conducts confidential interviews with individuals to determine whether an alternative medical explanation exists for any non-negative laboratory result. The MRO will make 2 contact attempts within 2 business days and will release the result on the 3rd business day. The MRO will utilize the phone number listed on the CCF form to contact the client. Negative results do not require MRO review.

Collection Methods

Urine testing (lab-based or instant)

- Standard 9-Panel, 9-Panel with Alcohol, 14-Panel
- Best used for routine screening, commitment monitoring and ongoing case management.
- Urine drug tests typically detect substance use within the past 1–3 days, but certain drugs like tetrahydrocannabinol (THC) can remain detectable for a longer period—especially with frequent or chronic use.

Oral fluid (saliva) testing

- Best for immediate suspicion of impairment.
- Detection window for oral swabs is within the last few minutes up to 48 hours.
- Oral swabs can be good for situations where immediate action is needed.

Hair follicle testing

- Best for detecting chronic or repeated use over time.
- The detection window for hair testing is up to 90 days.
- **Example:** Parent has been absent from involvement for several months and re-engages reporting sobriety for a period of time. A non-custodial parent discovered later in the case and there is history of substance use with behavioral indicators. The parent engages in a romantic partnership and there is a history of substance use with behavioral indicators present for their partner. Hair testing is court ordered.

Sweat patch testing

- Best for detecting recent use and allows for cumulative testing while the patch is worn.
- Reserved for when frequent, observed testing is not feasible, but monitoring is still necessary.
- **Example:** Person being requested to test lives in a rural area, lacks transportation, has unstable housing, or employment commitments that prevent them from reliably attending fixed site testing or in-home collections.

Collection Locations and Modes

- Fixed sites across all service areas with varying hours weekly.
- In-home collections attempted within 72 hours of request with SAM approval.
- Emergency collections attempted within 24 hours of request with SAM approval.

Authorization

When utilizing randomization testing, provide clients with CIJDC website or phone number to call.

- Website: <https://www.cijdc.com/today.pdf>
- Phone: 1-866-227-8161