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Drug and Alcohol Testing

Procedural Instruction

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1. Purpose

The Department of Home Affairs, including the Australian Border Force (ABF) (the Department), has a zero tolerance for the possession, use, or trafficking of prohibited drugs and is an alcohol-free workplace, unless otherwise authorised or permitted by this Procedural Instruction (PI).

As workers in a law enforcement agency, ABF workers are expected to demonstrate a standard of behaviour that reflects the importance of the services performed on behalf of the Australian Government and the Australian community. There are risks that Immigration and Border Protection workers¹ (IBP workers) may be vulnerable to compromise and these risks are increased for ABF workers engaging in the use of illicit substances or who are impaired by alcohol while on duty. This risk applies not only to front line operational staff, but also to office-based workers with access to sensitive information.

Drug and alcohol testing forms a component of the Integrity Framework and serves to ensure a safe working environment and mitigates integrity risks. Part 5 of the *Australian Border Force Act 2015* (the ABF Act) provides the legislative basis for drug and alcohol testing in the Department. Sections 34 to 36 of the ABF Act further provide the legislative basis for directing IBP workers to undergo alcohol screening tests, alcohol breath tests, and/or prohibited drug tests.

2. Scope

This PI applies only to those workers who are engaged by, and perform work for, the ABF, including individuals who are engaged to perform services for the ABF (including, but not limited to, contractors) (collectively referred to as 'ABF workers'), and outlines procedural requirements under the testing program.

IBP workers, other than ABF workers, are out of scope. Detailed information about drug and alcohol testing processes can be found on the drug and alcohol testing page.

3. Procedural Instruction

3.1. Overview

The ABF's position on drugs and alcohol is not limited to the handling and storage of prohibited drugs or alcohol as part of an ABF worker's official duties or during their participation in activities as part of departmental training.

ABF workers must not consume, or be impaired by alcohol while on duty, or on call. ABF workers must not consume illicit drugs at any time.

The *Australian Border Force (Alcohol and Drug Tests) Rule 2015* (the Rule) specifies the manner in which drug and alcohol testing is to be carried out. In carrying out the testing program, the Department will:

- act in accordance with legislative requirements;
- maintain confidentiality; and
- treat ABF workers, who are subjected to drug and alcohol testing, fairly and equitably.

Under the *Public Service Act 1999* (the PS Act), employees are required to display behaviours that are consistent with the Australian Public Service (APS) values, and comply with the APS Code of Conduct.

¹ Definition of Immigration and Border Protection worker as stated in subsection 4(1) of the *Australian Border Force Act 2015*, <https://www.legislation.gov.au>

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Contractors and consultants engaged by the ABF may be subject to similar obligations under the terms of their contract, and in accordance with the Australian Border Force (Immigration and Border Protection Worker Professional Standard) Directions 2024. If a contractor or consultant breaches these obligations, action may be taken under the terms of their contract, or under section 57 of the ABF Act.

ABF workers may be required to undergo a prohibited drug test, an alcohol screening test, or an alcohol breath test in the workplace:

- as part of random testing;
- in response to a certain incident as outlined in section 36 of the ABF Act; or
- as part of a targeted test on referral where approved by the Assistant Secretary, Integrity and Professional Standards Branch (I&PS) or First Assistant Secretary, Integrity, Security and Assurance Division.

Testing will be conducted by an authorised person, being an employee of an external testing company or an authorised departmental officer.

3.1.1. Authorisation for drug and alcohol testing

ABF workers may be directed to undergo testing by a person who has been authorised for that purpose by the Secretary. Officers in the Drug and Alcohol Coordination Unit (DCU) within I&PS, and relevant Senior Executive Service (SES) officers, are authorised persons for the purpose of issuing directions.

The Secretary makes other authorisations under the Rule to facilitate drug and alcohol testing. These include the authorisation of companies or individuals as authorised testers to conduct an alcohol screening and alcohol breath test, as well as the collection of body samples and conducting a screening for drugs or their metabolites. The Secretary makes authorisations for the use of certain devices for alcohol or drug tests.

3.1.2. Direction to attend for testing

A written direction under the ABF Act will be issued to an ABF worker when they are required to undertake testing. The direction will specify the types of tests to be undertaken and the time and location the test is to take place.

3.1.3. Failure to comply with a direction

ABF workers must comply with a direction given to them by an authorised person requiring them to undergo testing. Failure to comply may amount to non-compliance with this PI and a breach of the APS Code of Conduct

During the testing process, a referral to I&PS for consideration of a code of conduct investigation can occur, where an ABF worker:

- fails to present for testing;
- fails to complete relevant forms, including the consent form;
- fails to provide an appropriate sample for testing;
- withdraws consent to provide a body sample during the testing process; and/or
- conducts themselves in an obstructive or otherwise discourteous manner during the testing process.

Where an ABF worker provides a medical reason for failing to give a sample, this will be referred to the independent Medical Review Officer (MRO) for further advice. ABF workers will be required to provide evidence of the reasons for their failure to give a sample from their registered medical practitioner to I&PS within five working days of attending or being scheduled to attend testing.

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3.1.3.1. APS Specific

For ABF workers who are APS employees, failure to comply with a direction may constitute a breach of the APS Code of Conduct and may result in a sanction, up to and including termination of employment, being imposed under subsection 15(1) of the PS Act.

3.1.3.2. Non-APS Specific

For ABF workers who are not APS employees, failure to comply with a direction may constitute a breach of a direction under section 55 of the ABF Act. Such a breach may result in the termination of their engagement under section 57 of the ABF Act. Non-compliance may also be addressed under the terms of the contract engaging the non-APS IBP worker.

3.1.4. Impairment

The Department has a duty under the *Work Health and Safety Act 2011* (the WHS Act) to ensure, so far as is reasonably practicable, the health and safety of all IBP workers while at work. This duty extends to minimising the risk of accident, incident and injury in the workplace arising from the consumption of drugs and alcohol.

3.1.5. Additional requirements for operational workers

Additional requirements apply to workers holding a use of force permit under the Operational Safety Order 2021. ABF workers must not be impaired by alcohol (returning a Blood Alcohol Concentration (BAC) or Breath Alcohol Concentration (BrAC) over 0.00), drug or any other substance, prescribed or otherwise, that may impair performance or judgement while on duty, such as being issued or deploying with ABF Accoutrements or accessing an ABF Armoury.

3.1.6. Critical Incident

ABF workers directly involved in a critical incident may be required to undergo mandatory drug and alcohol testing, either in accordance with relevant State or Territory legislation or in accordance with Part 5 of the ABF Act. For further information relating to critical incidents and critical incident prompted testing, refer to the [Critical Incident - PI \(BC-6622\)](#).

3.1.7. Support for ABF workers

The Department will provide reasonable support to employees who voluntarily seek assistance with the problematic use of alcohol or drugs (including both prohibited drugs and legally available substances). Requests for assistance will be treated with confidentiality and in accordance with the *Privacy Act 1988* (Cth) (the Privacy Act), however, such requests are subject to any mandatory reporting obligations.

The nature and extent of any assistance requested will be considered on a case by case basis, having regard to all the circumstances, and must be consistent with this PI. Participation in formal rehabilitation processes, which will be at the ABF worker's personal expense, may be required.

Anyone seeking assistance with addiction should speak with their registered medical practitioner in the first instance.

ABF workers can also contact the Employee Assistance Program (EAP) by calling 1300 360 364 for confidential counselling. Additional information on the Department's response to requests for assistance can be sought by calling Support Connect on 1300 793 883.

In consultation with Support Connect, and where appropriate (such as where the employee has a self-reported addiction and is receiving support), I&PS will not treat drug or alcohol use as a misconduct issue. Despite this, in some circumstances, particularly those involving the abuse of prohibited drugs, the Department may be required to investigate the employee for a potential breach of the Code of Conduct or their employment suitability.

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3.2. Alcohol

ABF workers must not:

- have a BrAC of 0.02 (grams per 210 litres of breath) or higher while on duty, or performing services for the Department. A BrAC or BAC of under 0.02 recognises that individuals may occasionally consume products that contain alcohol (such as cough syrup); refer 3.1.5 'Additional requirements for operational workers' where a BrAC of 0.00 applies;
- be impaired by alcohol while on duty or performing services, regardless of the duty or services being performed;
- consume alcohol in any departmental workplace, unless they do so in accordance with this PI;
- consume alcohol in public while wearing a departmental uniform or other identifiable items (e.g. lanyard), unless they do so in accordance with this PI;
- return to duty or perform services following attendance at an approved hospitality event, if they are not in compliance with the prescribed BrAC;
- consume alcohol during unpaid breaks that are between periods of duty, such as lunch or dinner breaks; and
- store alcohol in the workplace on a regular or ongoing basis.

Storage of alcohol in the workplace is permitted only where alcohol is:

- in limited quantities, is unopened and will only be stored for a short period of time (e.g. wine purchased for personal use, is unopened, and is taken home that evening);
- purchased for an official hospitality event, approved social club event, Christmas party or other authorised event, and is stored in a secure location such as a lockable fridge or an SES office.

3.2.1. Events and consumption of alcohol

3.2.1.1. Official Hospitality Events

Official hospitality includes events that an ABF worker attends in an official capacity, or in connection with their official role, such as conferences, events hosted by other government agencies, foreign governments and at diplomatic posts. Alcohol may be consumed at an official hospitality event inside or outside a departmental workplace if the:

- event constitutes official hospitality in accordance with related policies on hospitality and entertainment; and
- attendance at the event by ABF worker is approved by the appropriate SES officer.

Only SES officers can approve the purchase and consumption of alcohol at these events.

ABF workers returning to their normal duties following an event must maintain a BrAC of below 0.02.

3.2.1.2. Social Club Events

Alcohol may be consumed by ABF workers at social club events inside or outside a departmental workplace in accordance with this PI. Social clubs are sponsored by an SES officer and the provision of alcohol at social club events must be approved by that SES officer.

3.2.1.3. Christmas parties and Authorised Events

For the purposes of this PI, examples of an authorised event may include:

- a Trivia Night; or
- social work drinks.

Christmas parties and authorised events are not deemed to be official hospitality events. The restriction on the consumption of alcohol in the workplace or during work hours does not apply to ABF workers who

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consume alcohol at a Christmas party or authorised event, providing the ABF worker has stopped performing their duties in order to attend the Christmas party or authorised event.

ABF workers should still note that for all Christmas parties and authorised events:

- under the PS Act and the Australian Border Force (Immigration and Border Protection Worker Professional Standard) Directions 2024, all IBP workers must behave in a way that upholds the integrity and good reputation of the Department, at all times (including both inside and outside the workplace);
- where an event is not held on departmental premises, ABF workers should not identify, or be identifiable, as ABF workers unless it is an official hospitality event; and
- ABF workers returning to their normal duties following an event must maintain a BrAC of below 0.02.

3.2.2. Travelling for work

ABF workers who are travelling for work must have a BrAC below 0.02 at all times where the ABF worker is in the course of performing duties. Under the PS Act, and in accordance with the Secretary's Professional Standards Direction, all IBP workers must behave in a way that upholds the integrity and good reputation of the Department, at all times (including both inside and outside the workplace).

3.2.3. Overseas Posting

ABF workers posted overseas must also adhere to this PI.

A drug that is lawful in another country (for example cannabis in parts of the United States of America) is still a prohibited drug if it falls within the definition of a prohibited drug as defined in section 4 of the ABF Act.

If the law within a country that an ABF worker is posted to is such that a substance is illegal (for example, alcohol), the ABF worker must adhere to the law of that country.

Whilst posted overseas, an ABF worker invited to an event where alcohol is being served, must have a BrAC below 0.02 at all times if they are in the course of performing their duties as an ABF worker.

Under the PS Act and the Australian Border Force (Immigration and Border Protection Worker Professional Standard) Directions 2024, all ABF workers must behave in a way that upholds the integrity and good reputation of the Department, at all times when posted overseas.

3.2.4. Rostered on-call

Where an ABF worker receives an official allowance to be on-call, they must have a BrAC of below 0.02 at the commencement of, and at all times during, their on-call duty period.

3.2.5. Recall to duty

If an ABF worker is unexpectedly recalled to duty by a supervisor or manager, the ABF worker must inform their supervisor or manager if they have been consuming alcohol. If the ABF worker, supervisor or manager reasonably believe that the ABF worker's BrAC is 0.02 or higher, the ABF worker must not be recalled to duty.

If the ABF worker determines that they cannot meet their obligations in relation to their capability to perform their duties, their decision must be respected, and they must not be recalled to duty. Failure by a supervisor or manager to comply with this requirement should be referred to I&PS and may be investigated as a breach of the Code of Conduct.

3.2.6. Alcohol testing outcomes

If the alcohol breath screening test indicates a concentration of alcohol below 0.02 BrAC, the ABF worker may return to their normal duties (unless they have been directed to undergo other tests).

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Where an ABF worker returns a result at, or above, the prescribed concentration of 0.02 BrAC following an alcohol breath screening test, they are to be subjected to a second confirmatory alcohol breath test. If the confirmatory alcohol breath test confirms a result at, or above, the prescribed concentration, the affected ABF worker will be immediately relieved of duty and directed to leave the workplace, escorted by their Responsible Manager (RM) or nominated alternate. The RM is responsible for ensuring the worker has a method of transport to return home safely following a positive BrAC. The ABF worker will be paid for the remainder of their work period or shift. The matter will be referred to I&PS for assessment.

The ABF worker will be subject to further alcohol testing at the commencement of the next work period or shift. If this further testing indicates a concentration of alcohol below the prescribed limit, the ABF worker may return to their normal duties and I&PS will be advised of the result. If the ABF worker returns another positive result then the ABF worker will be immediately relieved of duty, directed to leave the workplace and referred to I&PS for a possible breach of the Code of Conduct.

Where the alcohol breath test indicates the presence of alcohol at or above the prescribed limit, the ABF worker may request a blood sample be taken for the purposes of an alcohol blood test.

3.3. Drugs

Prohibited drugs fall within the definition of a prohibited drug as defined in section 4 of the ABF Act and include, but are not limited to:

- Cocaine;
- Heroin;
- Cannabis;
- Methamphetamines;
- Amphetamines;
- Methylenedioxymethamphetamine (MDMA – also known as ecstasy); and
- border-controlled performance and image enhancing drugs (PIED's).

The Secretary or the ABF Commissioner may prescribe additional drugs in the Australian Border Force (Prohibited Drugs) Instrument 2024 to fall within the definition of prohibited drug.

3.3.1. Drug testing

Drug testing is carried out in line with current Australian and New Zealand Standard AS/NZS 4308:2023 *Procedures for specimen collection and detection and quantification of drugs of abuse in urine* and Australian and New Zealand Standard AS/NZS 4760:2019 *Procedures for specimen collection and the detection and quantification of drugs in oral fluid*.

Collection is undertaken by people authorised to do so by the Secretary. This may include registered medical practitioners, registered or enrolled nurses, police officers, accredited collection companies or authorised departmental officers.

An ABF worker may be directed to provide a body sample permitted under the ABF Act and the Rule for the purposes of a prohibited drug test.

Drug testing of the body sample can be undertaken by either of the following processes:

- **On-site drug screening** – urine or oral fluid screening conducted on the day (only urine samples provide indicative results on the day, oral samples must be sent to a laboratory) or;
- **Laboratory-based testing** – urine/oral fluid or body sample sent to an accredited laboratory for screening and confirmation.

The body processes some drug classes quickly, so screening and testing is designed to detect drug metabolites.

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ABF workers must be afforded reasonable privacy while undergoing testing. Tests must not be conducted in the presence or view of persons whose presence is not a requirement of the process. The removal of outer clothing and visual inspection must be confined to what is necessary for the testing process. ABF workers are required to empty their pockets prior to testing.

If an ABF worker is requested to undergo urine screening and is unable to provide a sample on the first attempt, they will be given a reasonable amount of time to hydrate and re-attempt providing a sample. During this time, the ABF worker will remain within the testing area until their second attempt. If they are still unable to provide a urine sample, the DCU officer will direct the ABF worker to provide a saliva (oral fluid) sample. An on-site result is not provided when an oral sample is taken; the sample is sent to the laboratory for analysis, with results provided at a later date.

Hair testing

Hair testing can be undertaken as part of a targeted test. The test is undertaken in accordance with the recommendations in the *Society of Hair Testing Guidelines for Drug Testing in hair*. Where an ABF worker is requested to provide a hair sample as part of a targeted test, the collector will take two sections of hair of approximately 60 – 100 strands each (a single sample is around the thickness of a pencil) usually from the back of the crown, in a way to ensure that the removal is least noticeable when the hair is worn as normal.

Hair testing must be conducted in accordance with the Rule, which requires that the authorised person collecting the sample:

- use the least painful technique known and available to the authorised person to collect the sample;
- only collect the amount of hair necessary for the conduct of the test; and
- may collect the sample from any part of the employee's body, other than the genital area, anal area, or the buttocks.

3.3.2. Lawful use of prescribed medication and pharmaceutical products

The intent of testing under the program is not to:

- prevent or hinder an ABF worker in the correct and lawful use of prescribed, or over the counter, medication and/or pharmaceutical products; or
- prohibit the lawful use of usually prohibited drugs within controlled medical parameters (such as prescribed use) - these parameters must be set by a registered medical practitioner and conform to accepted treatment regimes.

ABF workers should use prescribed, or over the counter medication and pharmaceutical products as directed. Inappropriate use extends to use which exceeds the recommended amount of prescribed clinical and therapeutic activity, including usage for non-prescribed purposes and misuse of prescribed dosages.

3.3.3. Declaration of prescribed and over the counter medication and pharmaceutical products

Some common medications may be detected through testing and return a not-negative result in onsite testing or a positive result in laboratory-based testing. At the time of collection of a body sample, the ABF worker is asked to declare all medications taken in the preceding two weeks. Declarations of any medications used are voluntary as ABF workers are not required to provide details of medications they are taking, or details of their health or medical conditions. Despite this, it may be in the best interest of the ABF worker to declare their medications to ensure a quick assessment of the result.

ABF workers are able to contact the contracted external collection provider with any questions regarding the potential reactions of specific prescribed and/or over the counter medications on test results. Contact details for the contracted collection provider are available on the Department's [drug and alcohol testing page](#).

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ABF workers may be asked to provide evidence of legitimate and correct use of prescribed medications to a member of I&PS in order to corroborate any declarations made during testing. The provision of any evidence is voluntary. Any information collected for this purpose will only be used by I&PS for the purpose of investigating possible breaches under the PS Act or the Australian Border Force (Immigration and Border Protection Worker Professional Standard) Directions 2024.

3.3.4. Prescription drugs containing prohibited drugs

ABF workers who disclose the use of prescription medication that contain prohibited drugs to I&PS prior to or subsequent to testing will be required to provide the following within five working days of attending testing. This evidence includes:

1. A prescription, including the type of product prescribed, dosage and whether or not the dosage would have any impairing effects on the ABF worker; and/or
2. Participation in a clinical trial, including the type of product prescribed, dosage and whether or not the dosage would have any impairing effects on the ABF worker.

ABF workers who are considering using these types of medication, for example medicinal cannabis, should discuss their role (for example operational or a use of force permit holder) with their registered medical practitioner and any possible effects the prescribed product may have on their ability to perform their role. The registered medical practitioner should provide written confirmation of an ABF worker's ability to perform their role, without impairment, as a result of taking these types of medications.

Further information regarding an ABF worker's responsibilities in relation to declaring medications relevant to performing their duties can be found in the [Change of Health Circumstances - PI \(HR-6604\)](#) and the [Fitness for Duty - PI \(HR-2130\)](#).

It is recommended that ABF workers also review the [Declarable Circumstances - PI \(SM-1552\)](#) in order to determine whether the use of prescription medication should be declared, and that Use of Force Permit holders review the [Operational Safety Order 2021](#).

Where an ABF worker has declared a prescription medication containing a prohibited drug, the result shall be an "explained not-negative" (see 3.3.5) and the ABF worker will remain in the workplace pending the confirmatory laboratory analysis.

3.3.5. Outcomes – on-site drug screening

There are three possible outcomes as a result of on-site drug testing:

1. **NEGATIVE** – If drugs or their metabolites are not detected, and the integrity of the sample is not in question, no further action is required. The ABF worker will return to work. The ABF worker can choose to receive an emailed copy of the testing form stating a negative result.
2. **EXPLAINED NOT-NEGATIVE** – If drugs or their metabolites are detected, the DCU officer will confirm the result. If they declare use of a prescribed or over the counter medication, the DCU officer will then seek advice from the Senior Toxicologist employed by the service provider. If the Senior Toxicologist confirms that the detected drugs or metabolites are found in the declared medication then the result is an "explained not-negative".

The body sample will be split into two containers, and the two samples (called test A and B samples) are labelled and sealed, following chain of custody procedures. Samples are transported to the laboratory for confirmatory testing/analysis. The B sample is not tested, but stored by the laboratory. The DCU officer will complete a management action form with the worker advising that the ABF worker can return to work.

3. **UNEXPLAINED NOT-NEGATIVE** - If drugs or their metabolites are detected, the DCU officer will confirm the result. If they declare use of a prescribed or over the counter medication, the DCU officer will then seek advice from the Senior Toxicologist employed by the service provider. If the Senior

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Toxicologist advises that the detected drugs or metabolites are not found in the declared medication, then the result is an “unexplained not-negative”.

If the ABF worker declares the use of a prohibited drug, this will also result in an “unexplained not-negative”.

The body sample will then be split into two containers, and the two samples (called test A, B samples) are labelled and sealed, following chain of custody procedures. Samples are transported to the laboratory for confirmatory testing and analysis. The referee sample is not tested, but stored by the laboratory for 6 months.

The DCU officer will complete a management action form with the worker and RM, advising that the ABF worker will be directed to leave the workplace and placed on paid administrative leave pending the outcome of the confirmatory testing by the laboratory.

ABF workers are offered support services (including EAP) during the management action meeting to consider utilising at any stage following the test result. The worker’s RM is responsible for ensuring that the worker has a method of transport to return home safely following receipt of an unexplained not-negative result.

3.3.6. Laboratory-based testing

If the presence of drugs or their metabolites are detected during on-site screening, laboratory procedures are used for the unequivocal identification and quantification.

Laboratory testing is undertaken using mass spectrometry and gas or liquid chromatography. This provides results that measure the precise presence and concentration of prohibited drugs and/or their metabolites. This process can also determine if the results are consistent with declared medication. The B sample is not tested, but is stored by the laboratory for six months. Note: There are no cut-off levels for performance and image-enhancing drugs (PIEDs); the presence of any amount of such a substance is deemed a positive result.

3.3.7. Outcomes – laboratory-based testing and confirmatory laboratory testing of onsite samples

When the results are returned from the laboratory (generally within four working days), the next action will depend on the result received. If laboratory testing identifies issues with the integrity of a body sample, the laboratory may recommend re-testing. The ABF worker will be advised if re-testing is required.

There are three possible outcomes as a result of laboratory-based testing and confirmatory laboratory testing of onsite samples:

1. **NEGATIVE** – For all confirmed negative results, that is where the presence of drugs or their metabolites are not detected at all or the level is below the confirmatory cut-off, the ABF worker can resume normal duties immediately if they had been placed on leave with pay through a not-negative on-site screening, and a management action process.

A Cessation of Management Action Form (CMAF) will be completed by the DCU and forwarded to the ABF worker with a copy of their laboratory certificate within one business day of receipt. The CMAF may require acknowledgement and signatures from the DCU officer, the RM and the ABF worker. This finalises the process and no further action is necessary.

2. **POSITIVE (consistent with medication)** - If the laboratory confirms the presence of prohibited drugs or their metabolites, which is consistent with declared medication, and which does not suggest inappropriate use of pharmaceutical products, the ABF worker can resume normal duties immediately if they had been placed on leave with pay through a not-negative on-site screening and management action process.

A CMAF will be completed by the DCU and forwarded to the ABF worker with a copy of their laboratory certificate within one business day of receipt. The CMAF may require acknowledgement

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and signatures from the DCU officer and the ABF worker. This finalises the process and no further action is necessary.

3. **POSITIVE** - results indicating the presence of prohibited drugs or their metabolites over the cut-off levels or which are **not** consistent with prescribed medication and/or over the counter pharmaceutical products are a positive result. When a positive result is received, it will be referred to:
 - I&PS for consideration of a Code of Conduct investigation; and
 - the MRO for verification and advice.

The RM will be advised that the matter has now moved to the next stage and that they can inform the ABF worker that the matter will be referred to the MRO for independent advice.

3.3.8. Notification of laboratory results

Once the laboratory has analysed the samples, a report of the test results (a certificate) will be sent to the authorised officer within the DCU. For all negative and positive results that are consistent with declared medication, the certificate will be forwarded to the ABF worker by email. Confirmed positive results will be referred to I&PS, who will advise the ABF worker of the outcome in due course.

3.3.9. Medical Review Officer

The MRO is a specialised medical practitioner with qualifications and experience in toxicology, and drug and alcohol forensic medicine. The MRO is contracted to provide expert and independent advice, following a positive drug result or explained non-negative in cases of prescription drugs containing prohibited drugs. The advice from the MRO provides recommendations based on review of all available information, including any medications declared, or claims made by the ABF worker. To ensure privacy, an ABF worker is not identified by name during this process instead being referred to by their personnel number (AGS or Contractor number).

3.4. Additional information

3.4.1. Disputed results

An ABF worker may challenge the laboratory analysis results. They are able to request that the B sample be made available for independent testing by another accredited laboratory, at their own expense. All records of the original test must be made available to the selected laboratory for the re-analysis. Procedures, including chain of custody and testing of the referee sample, must align with the standard AS/NZS4308:2023.

Due to the possible degradation of the B sample over time, retesting using mass spectrometry need only detect the presence of the drug or its chemical indicators of their use. Accordingly, no confirmatory test cut-offs apply. The laboratory will provide results from testing to the DCU at damp@homeaffairs.gov.au.

The DCU may again refer the matter to the MRO for verification of the results and advice. A report from the MRO will be made available to the ABF worker.

3.4.2. Protecting the integrity of the testing

The Department and the contracted collection and analysis providers comply with the highest standards to ensure the integrity of the testing process.

A Breathalyser Calibration certificate on the AlcoQuant used is available on request from damp@homeaffairs.gov.au.

Containers with samples being sent to the laboratory for confirmatory testing are labelled with two unique identifiers and sealed with tamper-evident seals.

The chain of custody processes, as outlined in the Australian and New Zealand standards AS/NZS 4308:2023 *procedures for specimen collection and detection and quantification of drugs abuse in urine* and

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Australian AND New Zealand Standard AS/NZS 4760:2019 *procedures for specimen collection and the detection and quantification of drugs in oral fluid*, ensure a particular sample taken from an ABF worker can be verified as the same sample tested in the laboratory.

3.4.3. Security and destruction of body samples

For on-site screening of body samples, if there is no detection of prohibited drugs or their metabolites in the sample, then the sample is immediately disposed of in an appropriate manner.

For body samples that indicate the presence of prohibited drugs, destruction of samples is undertaken by the laboratory in accordance with the relevant Australian and New Zealand Standard (as per 3.4.2).

All other testing materials are disposed of by the collector according to biohazard procedures.

3.4.4. Voluntary disclosures and admissions

- **Voluntary disclosure:** occurs when an ABF worker reports that they use prohibited substances or misuse alcohol, prescribed or over the counter medications and/or pharmaceutical products to their manager or to I&PS before they receive a written direction to attend for drug and alcohol testing. Mandatory reporting protocols apply.
- **Admission:** occurs when an ABF worker admits that they use prohibited substances or misuse alcohol, prescribed or over the counter medications and/or pharmaceutical products after receiving a direction to attend for drug and alcohol testing.

Any ABF worker who is suffering from substance dependence is encouraged to discuss the matter with their supervisor or manager before being directed to present for workplace testing.

Admissions of illicit drug use will be subject to mandatory reporting where both the ABF worker and their supervisor or manager have responsibilities to act.

Generally, if an ABF worker provides information including documents or answers to questions during the testing process or any investigation undertaken by I&PS, in regards to a positive drug and alcohol test result that is self-incriminating, it will not be admissible in evidence against the ABF worker in a court of law, except in the following proceedings:

- in relation to a decision of the Secretary to terminate the employment or engagement of an ABF worker;
- under the *Safety Rehabilitation and Compensation Act 1988* ; or
- in tort (a civil wrong resulting in an injury to another person, e.g. negligence) against the Commonwealth that is initiated by the ABF worker.

3.4.5. Provision of information and records management

The Department will comply with obligations under the ABF Act and Privacy Act in relation to the collection, storage, use and disclosure of personal information. Records created as a result of this PI must be managed and saved in accordance with the Records Management – PS (TI-1094). For any result other than negative, information may be referred to other areas within I&PS, People & Culture Division (e.g. where there are concerns around fitness for duty) and the ABF worker's managers.

Documentation that is produced and shared with external parties, including copies of any drug testing forms created by the contracted collector, will only contain the ABF worker's unique ID, for example AGS or contractor number. An ABF worker's name is not disclosed in any referrals to the MRO.

Information revealed by the test will meet the definition of sensitive information that is personal information for the purposes of the Privacy Act.

Where the information is IBP information under the ABF Act, any record or disclosure of the information must comply with Part 6 of that Act.

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Personal information (that is not IBP information) can only be used or disclosed in accordance with the Privacy Act. For example:

- the ABF worker consents to the use or disclosure of information (Australian Privacy Principle (APP) 6.1);
- the ABF worker would reasonably expect the Department to use or disclose the information for the secondary purpose, and the secondary purpose is directly related to the primary purpose (APP 6.2(a));
- the disclosure is reasonably necessary for an enforcement related activity of an enforcement body (including the Department) (APP 6.2(e)), for example;
 - the prevention, detection, investigation or prosecution of a criminal offence or offences;
 - the prevention, detection, investigation or remedying of misconduct of a serious nature.
- it is required or authorised by or under Australian law, for example; conduct issues with respect to the PS Act;
- it is required or authorised or under the Australian Border Force (Immigration and Border Protection Worker Professional Standard) Directions (APP 6.2(b));
- a permitted general situation exists (see s16A of the Privacy Act), for example;
 - disclosure is necessary to lessen or prevent a serious threat to the life, health or safety of the ABF worker (or another individual) and it is unreasonable or impracticable to obtain the ABF worker's consent to disclose; or
 - the Department has reason to suspect that unlawful activity or misconduct of a serious nature that relates to the Department's functions or activities is being or may be engaged in and the Department reasonably believes that the disclosure is necessary for the Department to take appropriate action.

3.4.6. Complaints

ABF workers who wish to raise complaints regarding their own testing experience may do so:

- directly with the DCU officer at the time of testing;
- by emailing damp@homeaffairs.gov.au or integrity@homeaffairs.gov.au; or
- by emailing the I&PS Assistant Secretary.

All complaints will be handled sensitively.

4. Statement of Expectation

The APS Code of Conduct states that an APS employee must comply with any lawful and reasonable direction given by someone in the employee's Agency who has authority to give the direction under subsection 13(5) of the *Public Service Act 1999* (the Public Service Act).

Failure by an APS employee to comply with any direction contained in this PI document may be determined to be a breach of the APS Code of Conduct, which could result in sanctions under subsection 15(1) of the Public Service Act.

The Secretary's Professional Standards Direction, issued under subsection 55(1) of the *Australian Border Force Act 2015*, (the ABF Act) requires all IBP workers who are not employed under the Public Service Act to comply with any lawful and reasonable direction given by someone in the Department with authority to issue that direction.

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Failure by an IBP worker who is not an APS employee to comply with a direction contained in this PI document may be treated as a breach of the Professional Standards Direction, which may result in the termination of their engagement under section 57 of the ABF Act. Non-compliance may also be addressed under the terms of the contract engaging the contractor or consultant.

All IBP workers who make decisions or exercise powers or functions under legislation have a duty to do so in accordance with the requirements of the legislation and legal principles.

5. Accountability and Responsibility

Role	Description
Assistant Secretary, I&PS	The AS I&PS may direct the DCU to undertake a targeted test.
ABF worker	An ABF worker may be directed to attend drug and alcohol testing.
DCU officer	This officer will facilitate drug and alcohol testing of ABF workers, including the issuing of directions to present and undergo testing.
I&PS	Relevant sections within I&PS branch may investigate the circumstances surrounding positive drug or alcohol test results.
IBP worker	<p>If a worker reasonably believes that they are under the influence of drugs or alcohol, they must not report for duty.</p> <p>If an IBP worker reasonably believes that they have a problem with drugs and/ or alcohol, they must report this to their manager or supervisor and make a declaration through <u>Declarable Circumstances</u>.</p> <p>If an IBP worker reasonably believes another IBP worker is under the influence of drugs or alcohol, they must report it to the IBP worker's manager or supervisor as soon as possible.</p> <p>If an IBP worker reasonably believes that another IBP worker has a problem with drugs and/ or alcohol, they must report this to the IBP worker's manager or supervisor as soon as possible.</p>
Secretary	The Secretary may authorise people, companies, devices and training for the purpose of drug and alcohol testing.
Supervisor or manager	<p>If a supervisor or manager has reason to suspect one of their ABF workers is under the influence of or has a problem with drugs or alcohol or is informed about one of the above scenarios, then they have a responsibility to take action.</p> <p>They must ensure the risk to the Department, the employee and any other worker is managed.</p> <p>They should exercise discretion when initiating action with the worker such as:</p> <ul style="list-style-type: none"> ○ assessing whether or not it is necessary to speak with the ABF worker in private, and consider whether or not the presence of another manager or supervisor is necessary; ○ stating concerns about the ABF worker's behaviour, and allowing the ABF worker to respond; ○ referring the matter to I&PS under mandatory reporting requirements; ○ subsequent to a positive alcohol test, and if required, escorting the ABF worker from departmental premises, and arranging for their safe return home (e.g. arrange a taxi to take them home. Note: this will be at the expense of the ABF worker);

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Role	Description
	<ul style="list-style-type: none"> ○ discussing the behaviour, and any breach with the individual on their return to work, with emphasis on the information in this document, and the drug and alcohol testing supporting material published on the intranet. ○ All recurring behaviour must be reported to I&PS. <p>Where an injury is sustained by the worker, another worker, clients or a member of the public, the incident must be reported through the relevant HR system.</p>

6. Version Control

Version number	Date of issue	Author(s)	Brief description of change
0.1	15 December 2016	Alexander Armstrong	Simplification of language and update of template
1	6 November 2017	Sabine Kark	Consultation and incorporation of feedback
1.1	25 September 2018	Alison Vaughan	Review
1.2	14/11/2018	Alison Vaughan	Incorporation of feedback and update of template
1.3	01/02/2019	Alison Vaughan	Incorporation of feedback and final review
1.4	18/10/2019	Chris Gardiner	Clarification that reference to Christmas parties and other events includes approved social work drinks
1.5	06/06/2024	Rebecca Dowling	Updated to align with Secretary's announcement
1.6	14/08/2024	Rebecca Dowling	Updated to align with DAMP changes.
1.7	06/09/2024	Rebecca Dowling	Reviewed and updated to align with legal and operational advice

Attachment A – Definitions

Term	Acronym (if applicable)	Definition
Accepted treatment regime		Any treatment regime that is developed and implemented by a registered medical practitioner.
Alcohol blood test		A test of a person's blood to determine the amount of alcohol (if any) present. It may be requested by an ABF worker, at their own expense, who has undergone testing and returned a positive result for alcohol.
Alcohol breath test		A test of a person's breath to determine the amount of alcohol in the person's blood. This is usually conducted when an alcohol screening test shows the presence of alcohol in the person's breath.
Alcohol screening test		The initial screening test of a person's breath to determine the presence of alcohol in the person's breath.
Alcohol free workplace		A workplace in which: staff are not impaired by alcohol; alcohol is not consumed on the premises (except where authorised); and alcohol is not consumed during work hours (except where authorised).
Australian Border Force	ABF	As defined in section 4 of the ABF Act. The Australian Border Force, an operationally independent body within the Department of Home Affairs, is Australia's frontline border law enforcement agency and Australia's customs service. The Australian Border Force delivers critical border protection and national security outcomes while facilitating the movement of people and goods across the border.
Australian Border Force worker	ABF worker	An ABF worker is (a) employed as an officer of Customs; or (b) employed under the PS Act and whose reporting lines are to the Australian Border Force Commissioner; or (c) providing services or labour to the ABF as a contractor whose reporting lines are to the Australian Border Force Commissioner.

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Term	Acronym (if applicable)	Definition
Authorised person		An Immigration and Border Protection (IBP) worker authorised by the Secretary or the ABF Commissioner who may require an ABF worker to undergo an alcohol screening, breath or prohibited drug test.
Blood alcohol concentration	BAC	A measure of alcohol concentration measured in grams of alcohol per 100 millilitres of blood.
Body sample		Body sample means any of the following: (a) any human biological fluid; (b) any human biological tissue (whether alive or otherwise); or (c) any human breath.
Breath alcohol concentration	BrAC	A measure of alcohol concentration in expired breath measured in grams of alcohol per 210 litres of breath.
Certain Incident (including critical Incident)		For the purposes of the Drug and Alcohol Management Program an incident includes (see subsection 36(2) of the <i>ABF Act</i>): 1. when a person is killed or seriously injured as a result of an accident involving a motor vehicle or vessel; 2. when a person is killed or seriously injured while the person is held in custody in relation to an arrest under the <i>Customs Act 1901</i> , the <i>Migration Act 1958</i> or the <i>Maritime Powers Act 2013</i> or otherwise detained under any of those Acts.
Code of Conduct		Contained within section 13 of the PS Act. Sets out the standard of behaviour expected of agency heads and APS employees.
Confirmatory test		A test conducted by an accredited pathology laboratory on a body sample taken during testing, to confirm the presence or absence of specific drugs and their metabolites from an on-site screening test.
Cut-off level		When prohibited drug testing is conducted, a result below the cut-off level for that drug is a negative result. Cut-off levels for drug tests are in accordance with the relevant Australian/New Zealand standards. 'Cut-off level' is also used to describe the concentration of alcohol that IBP workers must remain below.
Drug and Alcohol Testing Coordination Unit	DCU	The team within I&PS which facilitates the testing of ABF workers.
Departmental assets		Information and resources including, but not limited to, information and technology systems (ICT systems), and devices, information, plant and equipment, vessels, aircraft and/or premises which are owned, managed, controlled, leased, contracted by or operated by the Department.
Departmental workplace		Has the meaning given in section 8 of the <i>Work Health and Safety Act 2011</i> (Cth):

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Term	Acronym (if applicable)	Definition
		<ol style="list-style-type: none"> 1. A workplace is a place where work is carried out for a business or undertaking and includes any place where an IBP worker goes, or is likely to be, while at work. 2. In this section, place includes: <ol style="list-style-type: none"> a. a vehicle, vessel, aircraft or other mobile structure; and b. any waters and any installation on land, on the bed of any waters or floating on any waters.
Drug and Alcohol Management Program	DAMP	The program of work that facilitates the alcohol and drug testing of ABF workers. The Drug and Alcohol Management Program helps to assure all IBP workers that they are part of a safe and high-integrity workplace, by drug and alcohol testing its workforce.
Employee Assistance Program	EAP	A free counselling service, provided to all departmental employees and their families.
Immigration and Border Protection worker	IBP worker	<p>As defined in subsection 4(1) of the <i>ABF Act</i>, an Immigration and Border Protection worker is:</p> <ol style="list-style-type: none"> (a) an APS employee in the Department; or (b) a person covered by paragraph (d), (e) or (f) of the definition of <i>officer of Customs</i> in subsection 4(1) of the <i>Customs Act 1901</i>; or (c) a person covered by paragraph (f) or (g) of the definition of <i>officer</i> in subsection 5(1) of the <i>Migration Act 1958</i>; or (d) a person who is: <ol style="list-style-type: none"> (i) an employee of an Agency (within the meaning of the <i>Public Service Act 1999</i>); or (ii) an officer or employee of a State or Territory; or (iii) an officer or employee of an agency or authority of the Commonwealth, a State or a Territory; or (iv) an officer or employee of the government of a foreign country, an officer or employee of an agency or authority of a foreign country or an officer or employee of a public international organisation; <p>and whose services are made available to the Department; or</p> <ol style="list-style-type: none"> (e) a person who is: <ol style="list-style-type: none"> (i) engaged as a consultant or contractor to perform services for the Department; and (ii) specified in a determination under subsection 5(1); or (f) a person who is: <ol style="list-style-type: none"> (i) engaged or employed by a person to whom paragraph (e) or this paragraph applies; and (ii) performing services for the Department in connection with that engagement or employment; and (iii) specified in a determination under subsection 5(2).

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Term	Acronym (if applicable)	Definition
Integrity and Professional Standards Branch	I&PS	Administers the <u><i>Integrity and Professional Standards Framework</i></u> , which sets out the standards of integrity and ethical behaviour required by all employees of the Department.
Impairment		For the purposes of this policy, impaired means an impairment in mental or physical ability that prevents official functions or duties being performed to the required standard, including to an acceptable standard of behaviour.
Laboratory Based Drug testing		Following collection, the body sample undergoes immunoassay screening and confirmatory testing in an authorised and accredited laboratory.
Medical Review Officer	MRO	A medical practitioner with qualifications and experience in toxicology, drugs and alcohol and forensic medicine contracted to provide expert and independent advice.
Metabolites		A drug metabolite is a by-product of the body breaking down, or “metabolizing,” a drug into a different substance. The process of metabolizing a drug is predictable and certain; everyone metabolizes drugs the same way. Therefore, the presence of a drug metabolite can be a reliable indicator that a person used the “parent” drug of that metabolite.
Not-negative result		Refers to an indicative result of an initial screening test in a prohibited drug test that is not negative, and which may indicate the presence of prohibited drugs.
Non-public access		Ongoing or unrestricted access to Departmental assets which are not available to members of the public.
On-site screening		A body sample is screened for the presence of drugs by the authorised collector using an authorised immunoassay device, at the place of collection.
Performance and image enhancing drugs	PIEDs	PIEDs are substances taken by people with the intention of changing their physical appearance and to enhance their sporting performance.
Prohibited drug		Prohibited drugs falls within the definition of a prohibited drug as defined in section 4 of the <i>ABF Act</i> or any drug specified in a legislative instrument under section 4(3) of the <i>ABF Act</i> .
Prohibited drug test		A test of a body sample of a person to determine the presence (if any) of a prohibited drug in the sample. This can include urine, oral fluid and hair testing.
Registered medical practitioner		A registered medical practitioner is defined as a person who has and maintains current registration with the Medical Board of Australia. The National Register of Practitioners is managed by the Australian Health Practitioner Regulation Agency (AHPRA).
Responsible Manager	RM	The EL2 directly responsible for the ABF worker being tested, if an EL2 is being tested then the RM is at the SES 1 level and so on up the reporting line.
Senior Executive Service	SES	Senior Executive Service employees are employees including Senior Directors, Branch and Division Heads, the Secretary Deputy Secretaries, and ABF Commissioner, who provide strategic leadership and co-ordination at a high level across the Department.
Toxicologist		A toxicologist is defined as a professional with expertise and experience in interpreting drug tests.
Trafficking		Defined in section 302.1 of the <i>Criminal Code Act 1995</i> , as: 3. a person traffics in a substance if:

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Term	Acronym (if applicable)	Definition
		<ul style="list-style-type: none">a. the person sells the substance;b. the person prepares the substance for supply with the intention of selling any of it or believing that another person intends to sell any of it;c. the person transports the substance with the intention of selling any of it or believing that another person intends to sell any of it;d. the person guards or conceals the substance with the intention of selling any of it or assisting another person to sell any of it; ore. the person possesses the substance with the intention of selling any of it. <p>For the purposes of paragraph b, preparing a substance for supply includes packaging the substance or separating the substance into discrete units.</p>

Attachment B – Assurance and Control Matrix

1.1 Powers and Obligations

Please note: Staff exercising any power, delegations or authorisations outlined in this PI (listed here) must check the latest delegation advice on the Intranet or the relevant instrument in LEGEND to ensure they currently hold the applicable power, delegation or authorisation.

Legislative Provision			Is this a delegable power?	If delegable, list the relevant instruments of delegation
Legislation	Reference (e.g. section)	Section Heading/Provision Description		
<i>Australian Border Force Act 2015</i>	s34	An authorised person may require an Immigration and Border Protection IBP worker to undergo an alcohol screening test.	Yes	ADMIN21/023 ADD2021/2435 417
<i>Australian Border Force Act 2015</i>	s35	An authorised person may give an Immigration and Border Protection IBP worker who is in the course of performing their duties as an Immigration and Border Protection IBP worker a written direction requiring the IBP worker to do one or more of the following: (a) undergo an alcohol screening test; (b) undergo an alcohol breath test; (c) provide a body sample of a kind specified in the direction for a prohibited drug test.	Yes	ADMIN21/023 ADD2021/2435 417
<i>Australian Border Force Act 2015</i>	s36	An authorised person may give an Immigration and Border Protection IBP worker a written direction requiring the IBP worker to do one or more of the following if subsection (2) or (3) applies: (a) undergo an alcohol screening test; (b) undergo an alcohol breath test; (c) provide a body sample of a kind specified in the direction for a prohibited drug test.	Yes	ADMIN21/023 ADD2021/2435 417
<i>Australian Border Force (Alcohol and Drug Tests) Rule 2015</i>	Part 2	Authorisation of alcohol or drug testing and analysis		
<i>Australian Border Force (Secretary – Alcohol and Drug Tests) Delegation 2023</i>		Secretary Delegations – Drug and Alcohol testing. Delegated powers to the Chief Operating Officer and First Assistant Secretary, Integrity, Security		ADMIN 22/134

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Legislative Provision			Is this a delegable power?	If delegable, list the relevant instruments of delegation
Legislation	Reference (e.g. section)	Section Heading/Provision Description		
		and Assurance; delegating Secretary functions or powers, excluding powers under sub-sections 30 and 32 of the <i>ABF Act</i> , under a law of the Commonwealth under paragraphs 53(1)(a) and (b) of the <i>ABF Act</i> .		

1.2 Controls and Assurance

Related Policy	Integrity and Professional Standards Frameworks – PS (SM-6697) <u>Declarable Circumstances - PI (SM-1552)</u>
Procedures / Supporting Materials	<u>FMG 1.02.02 - Official Hospitality and Business Catering – PI (FM 1264)</u> <u>Operational Safety - PI (BE-6645)</u> <u>Critical Incident - PI (BC-6622)</u> <u>Mandatory Reporting - PI (SM-1557)</u>
Training/Certification or Accreditation	n/a
Other required job role requirements	n/a
Other support mechanisms (e.g. who can provide further assistance in relation to any aspects of this instruction)	If you require further advice or assistance, please contact the Drug and Alcohol Coordination Unit at: damp@homeaffairs.gov.au
Escalation arrangements	EL1 or EL2 Pre-employment Screening Section – esc@homeaffairs.gov.au
Recordkeeping (e.g. system based facilities to record decisions)	Content Manager (TRIM) SIEBEL
Program or Framework (i.e. overarching Policy Framework or Business Program)	Integrity and Professional Standards Frameworks – PS (SM-6697)
Job Family Framework Role	All

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Attachment C – Consultation

1.1. Internal Consultation

- Integrity, Security and Assurance Division
- Records Management Section
- Legal Group
- People Division
- ABF Workforce Management and Transformation
- All staff through department-wide consultation

1.2. External Consultation

- Staff representatives through the National Staff Consultative Forum (NSCF)
- Community and Public Sector Union (CPSU)