Do you remember the people in your life who have had the most impact on you? What made them remarkable? One of the key factors in making change is an established relationship. Whether personal or impersonal it makes a difference. This is not much different than the relationship of intervention after the positive drug test result of a student. The person providing services must be one that has established a relationship with the pool of students through class visits, presentations, being at related events, or by personal knowledge with the ability to speak in very common terms. The aftermath includes intervention, care, and aftercare.

Once you have a verified result by a SAMHSA certified laboratory and a medical review officer the next steps are the most crucial to implement real change in the students behavior. First, summons your care team. The care team consists of the program coordinator, a case manager, a counselor, and an intervention specialist. Some teams can be very effective with just the coordinator and case manager. Second, have your game plan ready. The case manager should take the lead and contact all possible support system links that may be needed. Have your calendars, parental awareness materials, a copy of the policy, the drug test results on hand, and having those drug specific educational materials ready for the family’s usage is crucial. This is because I have learned that being over prepared at initial contact is reassuring, especially with a defiant parent, student, or both. Next, be open to have a round table facilitated discussion for the student and caring adults to voice concerns during the initial session. Be open to having a family component during certain stages of the aftermath. Always have the person who will be working with the youth and family at the initial contact in order to show a unified front with the chain of command. After the initial session, there should be a time when incrementally the case manager should check in on the students’ progress.

Your policy should reflect that we are working with a demanding demographic of this modern generation. Often times our policies state minimum time periods for care after a positive test, this is understandable but not feasible. There is a difference of care time for an experimental user compared to that of the frequent user. The policy should allow for this one recurring factor. We must remember the positive test is an undisputable sign of an at-risk youth. The length of aftercare at a year or until the end of the students’ tenure in that particular school system is reasonable. Check-ups during care condition the student for your follow-ups to come during aftercare.

Once, the care has been resolved you should follow-up for aftercare at graduating intervals of 15, 30, 90, 180, 275, & 360 days after such time every 180 days if youth is still in your school system. These follow-ups should include any updated scientific information for review and some short reading materials. Parents don’t necessarily have to be made aware of the exact aftercare dates if the policy does not demand such. This is for one basic reason, you are the Go-Between. Your purpose is to provide the student with support. This modern generation is better at communicating with a relational approach as opposed to an authoritarian mentality.

The above information is for practical use. The background of 3 years as the team has given me the opportunity to learn the most effective way of facilitating change in the student with a positive drug test result.