

on the job

This is the third in a series of briefings to assist managers of drug treatment services in developing effective management policies and procedures.

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Drugs and alcohol in the workplace

THE BASIC PRINCIPLES

Drug and alcohol use by employees, volunteers or management committee members is an issue for an organisation only if it impacts on their work. If alcohol or drug misuse is affecting an employee's performance, an employer should follow capability procedures. If conduct or behaviour is affected, disciplinary procedures should be followed. If an alcohol or drug problem is not affecting an employee's work, it should be seen as a health problem.

Drug treatment services

Issues of drugs and alcohol in the workplace are further complicated in drug services where:

- the organisation is in the "business" of working with drug or alcohol misuse
- the clients are themselves experiencing problems with their drug or alcohol misuse
- the nature and approach of the service may (at least partially) dictate attitudes to drug or alcohol misuse (e.g. a drug service with a harm minimisation approach may create a culture in which employee's use of drugs and alcohol is seen as acceptable, compared to an abstinence-based drug service).

THE LEGAL SITUATION

Under the Health and Safety at Work Act 1974 employers have a duty to ensure the health, safety and welfare of their employees and employees are required to take reasonable care of themselves and others who could be affected by their actions at work. Knowingly allowing an employee to continue working when under the influence of alcohol or drugs could make an employer liable to prosecution.

Employers should also be aware of the:

- Road Traffic Act 1988, which prohibits use of a motor vehicle whilst unfit to drive through the use of a substance.
- Misuse of Drugs Act 1971 (section 8), which makes it an offence if a manager of a premises "knowingly permits or suffers" the production or supply of any

controlled drugs or the smoking of cannabis or opium to take place.

THE RELATIONSHIP BETWEEN THE WORKPLACE AND DRUG AND ALCOHOL MISUSE

The potential impact of alcohol and drug misuse on the workplace

Problems that can arise where employees are misusing substances can include:

- poor performance
- increased staff turnover
- absenteeism
- "presenteeism" – an employee may be at work but under-perform due to alcohol or drug use at lunchtime or from the previous night
- increase in complaints
- increased stress and low morale.

It is important to recognise that signs similar to those of potential alcohol or drug misuse could also be caused by other factors, such as stress or personal problems.

The potential impact of the workplace on alcohol and drug misuse

Drug services need to recognise that work can contribute to drug and alcohol problems. For example:

- stress caused by high workloads
- dealing with difficult situations (e.g. child protection issues)
- the pressures of dealing with a difficult client group
- attempts to belong/identify with the service user group
- working in the sector of drug misuse might influence an employee with previous drug misuse problems to relapse.

A WORKPLACE DRUG AND ALCOHOL POLICY

An effective drug and alcohol policy should:

- be a clear statement, which sets out a service's policy and procedure for dealing with drug and alcohol use

- emphasise that an alcohol or drug problem should be seen as a health problem, unless an individual's work is affected
- apply to everyone in the service, including temporary staff and subcontracted staff
- clarify confidentiality to encourage staff and colleagues to disclose drug or alcohol problems to services
- delineate responsibility and give guidance to managers about when disciplinary or capability procedures should be started
- be agreed by employers and relevant staff representatives
- be supported by training that raises awareness about drug or alcohol misuse in the workplace and helps managers and personnel to deal effectively with staff drug or alcohol problems
- establish referral procedures
- recognise that relapsing back into drug and alcohol misuse after treatment can be common
- be reviewed regularly (every 12 months)
- recognise different working patterns (e.g. not allowing evening workers to drink alcohol before their shift).

Employing former and current drug and alcohol misusers

The main impetus behind any such recruitment should be ensuring that staff are competent to perform the job for which they are being employed. Other issues to consider when taking on or continuing to employ a current or former drug or alcohol misuser include the use of medication prescribed for drug misuse. Although not drug misuse itself, prescribed medication for drug misuse, may impair an individual's performance at work and may preclude an individual from doing some tasks. It may be necessary for the employer and employee to agree the range of tasks that can be undertaken, and for this agreement to be reflected in the employee's contract and personnel record.

Helping an employee

If an employee seeks help from an employer about a drug or alcohol problem, this should be treated in the same way as a health issue. However, if an employee's drug or alcohol misuse is negatively affecting their work, then the employer should deal with this in the same way as they would deal with any other under-performance or conduct issue.

An employee's drug or alcohol problem should be kept as confidential as possible within the service and other employees should only be told on a need-to-know basis (sharing the minimum information necessary to serve the best interests of the employee with a drug or alcohol problem). The first stage should be an informal

discussion between the staff member whose work is affected and their manager. The employee should be encouraged and supported to improve their performance or conduct and it should be made clear what improvements are expected and by when. If improvement is not sufficient, formal disciplinary (misconduct) or capability (poor performance) procedures should be followed. In the case of gross misconduct, where the error was serious or potentially serious, immediate dismissal following an investigation may be appropriate.

Time off for drug or alcohol treatment should be dealt with in the same way as sickness absence. If an employee returns to work after treatment or a period of sick leave due to alcohol or drug problems, it is important that they are supported appropriately (e.g. changing their responsibilities and allowing time off for on-going support).

ALCOHOL AND DRUG TESTING

Testing or screening samples (usually breath, saliva, urine or blood) is a way of detecting alcohol or drug use by employees or potential employees. Drug and alcohol testing should not be viewed as the solution to all drug and alcohol problems in the workplace, as results are not conclusive. If it is used, it must be part of a broader workplace policy, which includes support rather than punishment, education and training and agreement from all sectors of the workforce and management committee.

New guidelines from the Information Commissioner will outlaw blanket testing of employees and restrict checks to staff, where there could be a specific safety risk (e.g. machine operators).

Some establishments in which drug service staff are required to work (e.g. prisons or possibly companies) may want the option of testing staff. An establishment that requires only that external specialist drug workers are subject to drug testing, would not be acceptable. However, a drug service will have to consider whether to accept contracts for work in an organisation, which requires all staff to be subject to testing. Drug services may need to include testing requirements in conditions of employment. ■



**National Treatment Agency
for Substance Misuse**

NEXT ISSUE

Recruitment and retention