

# **ALCOHOL AND DRUGS MISUSE POLICY & PROCEDURE**

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Version: 1.0

# ALCOHOL AND DRUGS MISUSE

## 1. Introduction

- 1.1. Central Scotland Valuation Joint Board (CSVJB) is committed to ensuring the provision of a safe and healthy working environment and to support this, CSVJB will act as far as is reasonably possible, to prevent the misuse of alcohol and drugs.
- 1.2. Under the Health and Safety at Work etc. Act 1974, CSVJB has a duty to ensure, so far as is reasonably practicable, the health, safety and welfare of staff, This includes making appropriate provisions to ensure that staff who are known to be misusing substances do not affect the safety of themselves and others whilst at work.
- 1.3. Under the Management of Health and Safety at Work Relations, 1992 CSVJB has the responsibility to assess the risks to the Health and Safety of its employees. If CSVJB knowingly allows an employee under the influence of drug misuse to continue working and his or her behaviour places the employee or others at risk, they could be prosecuted. Our employees are also required to take reasonable care of themselves and others who could be affected by what they do at work.
- 1.4. Under the Transport and Works Act 1992, it is a criminal offence for certain workers to be unfit as a result of taking drugs and/or drinking alcohol while working.
- 1.5. CSVJB's Alcohol and Drugs Misuse policy and procedure sets out CSVJB's arrangements with respect to any member of staff or contractor where accomplishment of their duties is, or may be, impaired as a result of drinking alcohol or taking drugs.
- 1.6. These arrangements aim to:
  - make clear CSVJB's position on the use/misuse of alcohol/drugs;
  - Promote a supportive, recovery focussed environment where staff feel they are able to come forward for support;
  - promote the health and well-being of employees and to minimise problems at work arising from the effects of alcohol and/or or drugs;

- assist in the identification of employees with possible problems relating to the effects of alcohol and /or drugs at an early stage in order to provide support as required;
- assist those with an alcohol and/or drugs problem to seek appropriate support to avoid the detrimental effects on health, work performance or conduct;
- offer employees known to have alcohol or drug-related problems referral to an appropriate source for diagnosis and treatment if necessary.
- offer support to staff who may be experiencing difficulties as a result of a family members or partners misuse of alcohol and/or drugs.

1.7. In addition CSVJB will, in consultation with the Staff Consultation Forum (SCF):

- advise existing employees and new employees of the risks to health arising from the effects of alcohol or drugs;
- encourage employees who may have alcohol and/or drug-related problems to take advantage of the range of recovery focussed support available locally;
- enable supervisors and managers to identify support needs for employees who have advised they or a family member have an alcohol and/or drugs problem.
- in cases where alcohol and /or drugs problems are identified provide encouragement to staff to agree upon a programme of support in consultation with the occupational health advisor.

## **2. Policy Statement**

- 2.1. CSVJB will take reasonable steps to raise employee awareness of the impact of alcohol and drug misuse and will remain committed to meeting its statutory obligations in relation to Health and Safety at Work
- 2.2. CSVJB recognises that dependency upon alcohol or drugs should be treated sympathetically, fairly and confidentially.
- 2.3. CSVJB does require that no employee or contractor will:

- Report or endeavour to report for duty under the influence of alcohol or drugs
- consume alcohol or drugs and behave in a manner contrary to the standards of safety and conduct of CSVJB

2.4. Any breach of these requirements may be dealt with in line with CSVJB's Disciplinary procedures.

### **3. Alcohol Misuse**

3.1. CSVJB requires employees and contractors to arrive at work free from the effects of alcohol, and remain so for the duration of their working hours.

3.2. CSVJB considers it unacceptable for a member of staff or contractor to be (or appear to be) unfit for work through the misuse of alcohol. Any member of staff or contractor who, in CSVJB's opinion, is unfit to work due to the effects of alcohol will be sent home.

3.3. Arrangement will be made for the staff member to be taken home safely where required outlining that they should attend a meeting the next day at which they can be accompanied by a Staff Consultation Forum representative or work colleague. A representative from Clackmannanshire Council HR should where possible also be in attendance.

3.4. No alcohol is permitted to be consumed during working hours. This includes tea breaks and lunch breaks. The only exception being occasional functions where prior approval has been given by the Assessor or Assistant Assessor. Staff who fail to observe the provisions of this policy may be subject to CSVJB's disciplinary procedures.

### **4. Drugs Misuse**

4.1. The misuse of drugs (as defined under the Misuse of Drugs Act 1971) includes the use of any illegal drugs and the misuse of any prescribed drugs, over the counter medication, solvents, all synthetic and herbal products known as New Psychoactive Substances or other substances including "legal highs".

- 4.2. Employees and contractors must not attend for work whilst under the influence of any drugs/substance, which have not been medically prescribed.
- 4.3. Any member of staff or contractor who, in CSVJB's opinion, is unfit for work due to drugs/substance/prescription drug misuse will be sent home.
- 4.4. Under the Misuse of Drugs Act, CSVJB may commit an offence if it is aware that illegal drugs are being used or distributed on its premises. CSVJB therefore has an obligation to inform Police Scotland in such instances.
- 4.5. It is a criminal offence to possess or deal in any illegal substances. Any member of staff proven to have done so on CSVJB premises may be summarily dismissed for gross misconduct.

## **5. Medically Prescribed or Pharmacy Advised Medication**

- 5.1. All employees must be made fully aware that:
  - If they consult their medical practitioner or a pharmacist and some form of medication is prescribed they must advise the medical practitioner or pharmacist of the nature of their work so that appropriate information on possible side effects and their effect of safety and efficiency at work may be given.
  - If they are in doubt as to their fitness to carry out their duties while on medication, they must consult their Line Manager, who should obtain advice from Clackmannanshire Council Human Resources.
  - If taking prescribed medication they should consider informing the relevant first aider in order to ensure appropriate action is taken during an emergency.

## 6. Monitoring and Review

6.1. Both Senior Management and Staff Consultation Forum representatives shall monitor the effectiveness of these procedures on an ongoing basis.

Policy Name	Alcohol and Drugs Misuse
Policy Lead	Jane Wandless
Equality Impact Assessment	
Full EQIA required	Yes <input type="checkbox"/> No* <input checked="" type="checkbox"/>
* This policy outlines the measures and support in place for employees who may have an alcohol or drugs problem. The measures are applicable to all members of staff	
Date Full EQIA complete	N/A
Date Approved	17 <sup>th</sup> June, 2016
Review Date	

## **Appendix 1- Alcohol Misuse**

A quarter of employees in any large workforce typically drink above NHS guidelines, while a third of employees admit being at work with a hangover from the night before, impacting productivity and safety.

For every one person who misuses drugs or alcohol, it is estimated that 3 people are affected.

### **Attitudes to alcohol in Scotland - from Scottish Social Attitudes Survey 2013**

- 84% of Scots thought alcohol causes either a 'great deal' or 'quite a lot of harm in Scotland'.
- Most people disapprove of excessive drinking - only 19% thought that 'getting drunk is a perfectly acceptable thing to do on weekends'.
- Over four in ten (44%) non-drinkers perceived that others think they are odd for not drinking.
- Around half of Scots did not know the number of units in a pint of beer, measure of spirits or a glass of wine.
- 42% of men and 43% of women correctly identified the recommended daily consumption limits for their gender.

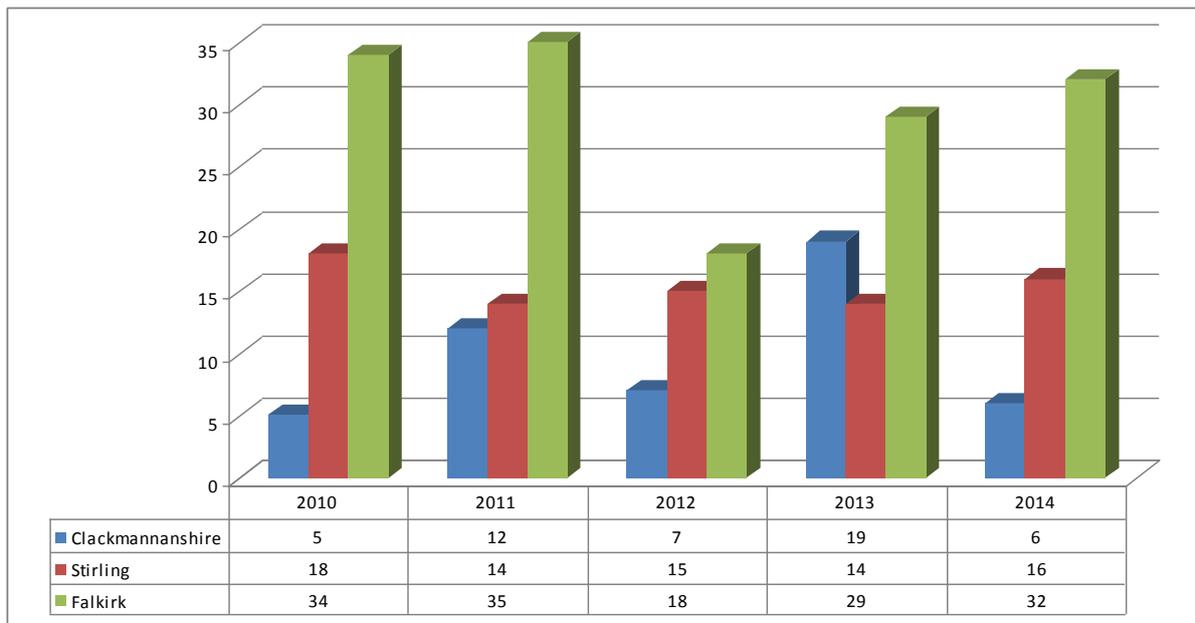
### **Alcohol consumption in Scotland - from Scottish Health Survey 2014**

- Nearly 1 in 4 men (23%) and around 1 in 6 (17%) women drink at harmful or hazardous levels (defined as men drinking more than 21 units per week and women drinking more than 14 units per week).
- Men drink an average of 13.6 units of alcohol a week, and women drink an average of 7.4 units a week.
- 18% of women and 14% of men don't drink alcohol.

### Alcohol-related deaths in Scotland - from National Records of Scotland

- There were 1,152 alcohol-related deaths in 2014 (where alcohol was the underlying cause of death).
- 784 of those deaths were men, 368 were women.
- Of the 1,152 alcohol-related deaths in 2014, 6 were within the Clackmannanshire Council area, 16 were within the Stirling Council area and 32 within the Falkirk Council area.
- Table 1 below shows the trends in alcohol related deaths in Clackmannanshire, Stirling and Falkirk since 2010.

**Table 1: Alcohol related deaths**



- Over the years since 1979, there have been roughly twice as many male deaths as female deaths.
- 482 deaths were people aged 45-59, 395 deaths in the 60-74 age group, 146 deaths in the 30-44 age group, and smaller numbers for other age groups.
- The 45-59 age group has had the largest number of alcohol-related deaths in almost every year since 1979.
- Although alcohol-related deaths have declined in recent years, rates remain higher than they were in the early 1980s and higher than those in England and Wales (from MESAS 4th annual report).

### **Alcohol-related hospital stays in Scotland - from Alcohol-related Hospital Statistics Scotland 2013-14**

- There were 36,206 alcohol-related hospital stays in 2013/14.
- 92% resulted from an emergency admission.
- 71% of alcohol-related stays were men.
- Rates were highest in the 55-59 age group for men and 50-54 age group for women.
- Rates were over 7 times higher for people living in the most deprived areas compared with the least deprived.
- Sunday is the busiest day for emergency admissions (5,305), although the number is relatively similar across all days.
- Saturdays and Sundays are the busiest days for admissions of patients aged 15-19.

### **Alcohol-related GP consultations in Scotland - from ScotPHO**

- There were an estimated 94,630 alcohol-related primary care consultations by 48,420 patients in 2012/13.
- Consultation rates were highest for those aged 65 and over.

### **Alcohol-related crime in Scotland - from Scottish Crime and Justice Survey 2012/13**

- In 6 out of 10 cases (59%) of violent crime, the victim said the offender was under the influence of alcohol.
- In the past 10 years, half of those accused of murder were under the influence of alcohol and/or drugs at the time of the murder.
- Two thirds of young offenders were drunk at the time of their offence (from Scottish Prisoner Survey 2013).

### **Cost of alcohol harm - from The Societal Cost of Alcohol Misuse in Scotland for 2007**

- Alcohol harm costs Scotland £3.6 billion a year in health, social care, crime, productive capacity and wider costs.

- Alcohol costs Scottish employers £308 million a year (employee absenteeism and presenteeism).
- Alcohol costs every local authority area in Scotland millions of pounds a year - see our local alcohol cost profiles in the Resources section.

## **Appendix 2- Guidance for Managers**

### **Identifying Alcohol or Drugs misuse**

Managers/Supervisors should be aware that the misuse of alcohol or drugs may manifest itself in many ways. Such characteristics, especially when arising in combination, MAY, indicate the presence of an alcohol or drug related problem.

Signs could include:

- Incidents of unauthorised leave
- Frequent Friday and/or Monday absence
- Leaving work early
- Lateness
- Excessive levels of sickness absence
- High accident levels
- Difficulty concentrating
- Work requires increased effort
- Problems with remembering instructions
- Irritability or aggression
- Depression
- A deterioration in relationships with colleagues, clients or management
- Dishonesty and theft
- Unkempt appearance
- Smell of alcohol
- Unexplained dips in productivity

As a manager/supervisor there are a number of steps you can take if you feel there is a problem related to misuse of alcohol or drugs:

### **Dealing with staff who have advised they have an alcohol or drug problem**

Where a member of staff has acknowledged that they have an alcohol or drug problem and wish assistance a confidential meeting should be arranged with their line manager, the member of staff, their representative and Clackmannanshire Council HR Adviser.

The line manager in conjunction with Clackmannanshire Council HR should arrange referral to Occupational Health. Thereafter referral may, via the Occupational Health or the staff members GP, be made to specialist addiction services

Where it is identified that there is an issue related to alcohol or drugs then a suitable programme of help and treatment should be sourced by the employee with support from Occupational Health and or their GP

Agreement should be reached with the member of staff regarding absence from work on a paid or unpaid basis as appropriate to attend any support programmes.

Referral will not affect the staff member's job unless they are unfit to fulfill the duties. Where appropriate reasonable short term adjustments may be made to the duties of the member of staff.

Where an employee having received treatment suffers a relapse, CSVJB will consider the case on its individual merits. Further medical advice will be sought from Occupational Health in an attempt to ascertain how much more treatment/rehabilitation time is required for a recovery.

Where having received treatment and recovery seems unlikely CSVJB may be unable to support the employee and disciplinary action which may result in dismissal may take place.

### **Dealing with staff who have advised a member of their family or partner have an alcohol or drug problem**

Where a member of staff has advised a member of their family or their partner has an alcohol or drug problem a confidential meeting should be arranged with their line manager, the member of staff, their representative and Clackmannanshire Council HR Adviser.

The line manager in conjunction with Clackmannanshire Council HR should identify what support can be put in place and where appropriate arrange referral to Occupational Health.

The staff member will be provided with details of appropriate support agencies who may be able to provide further support and guidance.

### **Dealing with staff who attend work under the influence of alcohol or drugs**

Ensure there are no immediate safety concerns i.e. review the staff member's' role in order to assess immediate risk. Are they expected to operate machinery, drive vehicles for work purposes etc. Restrict access where required to any hazardous materials or substances.

Make arrangements for the staff member to be taken home safely where required outlining that they should attend a meeting the next day at which they can be accompanied by a union representative or work colleague. Clackmannanshire Council HR should where possible also be in attendance.

The line manager in conjunction with Clackmannanshire Council HR should arrange referral to Occupational Health.

Where it is agreed that there is an issue related to alcohol or drugs then a suitable programme of help and support should be sourced by the employee with support from Occupational Health and/or their GP.

At the scheduled meeting be supportive but be clear about CSVJB rules and the implications of not tackling possible alcohol misuse, especially where safety is an issue.

Depending on the outcome of the meeting there may be a requirement to invoke CSVJB's disciplinary procedures.

Disciplinary action should only be used as a last resort if issues related to alcohol or drugs misuse are identified.

CSVJB may agree to suspend disciplinary action in cases of misconduct if the employee agrees to follow a suitable course of intervention.

Serious or repeated infringement of the policy may be interpreted as gross misconduct and may result in dismissal.

## **Appendix 3 - Guidance/Information**

### **HSE Publications:**

The following are available from: [www.hsebooks.com](http://www.hsebooks.com).

- INDG91(L) Drug Misuse at Work — A Guide for Employers
- INDG240 Don't Mix It: A Guide to Employers on Alcohol at Work

### **Alcohol Concern**

[alcoholconcern.org.uk](http://alcoholconcern.org.uk)

### **Alcohol Focus Scotland**

[alcohol-focus-scotland.org.uk/](http://alcohol-focus-scotland.org.uk/)

### **Know the Score**

[knowthescore.info](http://knowthescore.info)

### **Scottish Drugs Forum**

[sdf.org.uk](http://sdf.org.uk)

### **Forth Valley Substance Misuse Service**

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