

SUBSTANCE MISUSE POLICY

Department / Service:	Human Resources
Originator:	Occupational Health and Wellbeing Manager
Accountable Director:	Director of People and Culture
Approved by:	Joint Negotiating and Consultative Committee
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This is the most current document and should be used until a revised version is in place	
Target Organisation(s)	Worcestershire Acute Hospitals NHS Trust
Target Departments	All Wards and Departments
Target staff categories	All staff categories including temporary, locum workers, contractors and volunteers

Policy Overview:

The Trust aims to ensure that it provides a safe and productive work environment that promotes the health, safety and well-being of all staff.

This policy aims to provide guidance and procedures for the management of alcohol, drugs and other substance misuse problems in the workplace to enable a consistent approach for managers and employees regarding drug/substance misuse and alcohol problems.

Key amendments to this Document:

Date	Amendment	By:
April 2015	Review of policy content and updating including the following:	Sarah McDonald/Julia Cross
	Inclusion of clause re driving	Dr E Jackson
	Legislation altered to include Equality Act 2010 and Road Traffic Act 1988	Dr E Jackson
August 2017	Document extended for 12 months as per TMC paper approved 22 July 2015	TMC
November 2017	Policy reviewed to include latest processes in Occupational Health	Deb Drew/Barbara Todd
2 nd April 2020	Document extended for 6 months due to current situation with COVID-19	

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1. Introduction

- 1.1 Worcestershire Acute Hospitals NHS Trust recognises that substance misuse is both a medical and social problem. As a health promoting employer, the Trust acknowledges that alcohol, drug and other misuse affects performance, behaviour and relationships at work and at home and wishes to provide a framework within which such misuse can be managed.
- 1.2 Drug or alcohol misuse by anyone working in the NHS is wholly unacceptable as it may present a risk to patients or colleagues as well as the individual themselves.
- 1.3 The Trust has a legal duty to ensure the health, safety and welfare at work of its employees, patients and visitors, as far as reasonably possible. Accordingly, the Trust views the promotion of good health as an integral part of its employment policy.
- 1.4 This policy sets out the principles for managing issues around the misuse by employees of drugs, alcohol and other substances, such as over-the-counter medicines, solvents and other substances that could adversely affect work performance and/or health and safety, in order to ensure a fair, reasonable and consistent approach.
- 1.5 It aims to:
- i) Provide guidelines for managers and employees regarding alcohol, drug and substance misuse
 - ii) To set out the rules regarding the use of intoxicating substances and ensure staff are aware of the likely consequences to their employment if misusing them
 - iii) To create a climate that encourages staff who may be misusing substances to come forward and seek help
 - iv) Promotes the rehabilitation of any employee experiencing problems or issues with alcohol, drug or substance misuse who is also committed to accepting help
 - v) Provide a framework to enable instances of misuse to be handled in an appropriate and consistent manner. Early identification of dependency is more likely to lead to successful treatment.
 - vi) To ensure that staff have access to advice and assessment and that confidentiality is maintained at all times within the limits of what is practicable and within the law. It may be necessary, in order to provide effective support, for information to be shared with others, e.g. the Occupational Health and Wellbeing Service.
 - vi) To provide a framework for addressing issues that arise so that employees know how they can expect to be treated to ensure their treatment is consistent.

2.0 Scope of this document

- 2.1 This policy applies to all staff and workers including volunteers and those on secondment/work experience, and is available on the Trust intranet.
- 2.2 This policy covers the habitual or frequent consumption of alcohol and alcohol dependency, the inappropriate, illegal or excessive use of drugs or other substances (whether medically or non-medically prescribed) the effects of such use, possession and/or dependency.

3.0 Principles

3.1 The approach the Trust will adopt towards instances of alcohol or drug/ substance misuse will be governed by whether or not there is an underlying addiction problem which is recognised by the employee.

3.2 Where there is an addiction problem that is recognised by the employee, the Trust will offer support and help to the individual whilst ensuring that they understand the possible consequences at work of continued substance misuse. Managers should seek to bring about a safe and sympathetic environment for the encouragement of employees with alcohol or other substance related problems to seek help and support and not feel that there is any hostility towards them.

- 3.3 Staff must not consume alcohol or misuse drugs or other substances during working hours, including unpaid breaks, nor must they attend work under the influence of alcohol or other substances.
- 3.4 Staff who attend for work under the influence of alcohol, drugs and other substances, legal or illegal, may require further investigation and may if proven lead to disciplinary action, which may include dismissal.
- 3.5 In the case of any employee considered incapable of performing duties safely or competently due to consumption of alcohol or drugs, the manager will take the appropriate action which may be:
- Sending/taking the employee safely home for the rest of the work duty period.
 - Formally suspending the employee if the incident is of a more serious nature
- 3.6 A manager who has reason to believe that an employee has a problem relating to alcohol and/or drugs/ other substances should encourage the individual to seek help immediately and refer them to the Occupational Health and Wellbeing Department for guidance.
- 3.7 Employees who suspect they have an alcohol or other substance related problem are encouraged to seek specialist help voluntarily and may be advised where this information can be obtained. (A list of specialist help organisations is shown in Appendix 1). Employees are encouraged to discuss this with their manager and such information will be treated confidentially, sensitively and sympathetically, with due regard to the wellbeing of the employee as well as patients, clients and other staff.
- 3.8 Employees who seek help, and follow advice, the matter will be treated as a medical problem. Employees who have, or suspect they may have, an alcohol or substance misuse problem will be given help and support in finding and following a programme of treatment either from the Occupational Health and Wellbeing Service or from a recognised external agency.
- 3.9 If an employee is unfit or unsuitable to resume the same job during or following treatment, the Trust will seek medical advice and will where appropriate seek to find a temporary suitable alternative role within the Trust

- 3.10 The misuse of alcohol or drugs will not exonerate an employee from any ensuing investigation as a result of their actions or omissions which may lead to performance management or disciplinary action.
- 3.11 Employees are not obliged to work with someone who has consumed alcohol or drugs if they consider that by doing so they put themselves or others at risk. Anyone in this position should immediately report their concerns to their immediate line manager who must ensure that the matter is investigated.
- 3.12 Employees must not drive whilst under the influence of any intoxicating substance. This includes driving to/from work and driving during work time. Some prescribed medications may affect ability to drive and it is the employee's responsibility to seek advice from their GP regarding this.
- 3.13 Staff who drive during the course of their work should not consume alcohol or other substances whilst on duty. These staff should also be aware that The Road Traffic Act 1988 states that *"any person who, when driving or attempting to drive a motor vehicle on a road or other public place, is unfit to drive through drink or drugs shall be guilty of an offence. An offence is also committed if a person unfit through drink or drugs is in charge of a motor vehicle in the same circumstances."* The employer may be held liable for the acts of an employee who drives during the course of their work whilst under the influence of alcohol or drugs, whether using a Trust pool car or their own transport.
- 3.14 Possession of or dealing in un-prescribed drugs at work will normally be reported to the police and the employee may be suspended from duty.
- 3.15 The Trust will not authorise the provision of alcohol at events during working hours.
- 3.16 Any matters arising under this policy will be dealt with in the strictest confidence.
- 3.17 Any alcohol or substance (other than prescribed medicines) consumed prior to work must have ceased to have any effect before reporting for work. It may well be the case that excessive consumption of alcohol or recreational misuse of drugs outside of working hours could have a negative impact on an employee's performance while at work, or put another person, whether patient or another work colleague, at risk. (See Appendix 2 for more information).
- 3.18 If an occasion arises when an employee finds him/herself in a position where to report for duty would be compromise their safety or others they are encouraged to behave in a responsible manner and request leave rather than report for duty in an unfit state. This will either be taken as annual leave or unpaid leave. This provision seeks to support the spirit of this policy, which is to promote sensible and responsible attitudes towards alcohol and/or drug use.

4.0 Definitions

- 4.1 In this policy, misuse refers to:
 - misuse of legally obtained medicines/drugs
 - use of other illegal drugs
 - misuse of other substances including alcohol and solvents
 - other unclassified drugs that could affect performance at work

4.2 Substance misuse covers 3 main areas:

- **Inappropriate use**, where use may aggravate an existing condition or situation, or is done in potentially dangerous or inappropriate circumstances
- **Habitual use**, where the individual becomes dependent on the psychological/physiological effects of the substance to the extent that the desire for these effects becomes a dominant concern to the detriment of other aspects of their lives
- **Excessive use**, which can lead to physical and mental illness, or antisocial behaviour.

4.3 All employees should be aware that under Section 7 of the Health and Safety at Work Act 1974, “it shall be the duty of every employee while at work to take reasonable care for the health and safety of himself/herself and of other persons who may be affected by his/her acts or omissions at work”.

4.4 Alcohol and substance misuse in the workplace is defined as consuming or otherwise taking either type of product during working time and/or on work premises. This can interfere with the safe and efficient functioning or performance of an employee’s duties.

4.5 This policy does not deal with social drinking where this has no effect on work performance and/or behaviour. When there are effects on work performance and/or behaviour it is for line managers (with support from Human Resources) to decide whether it is appropriate for the case to be dealt with in accordance with the Trust’s Disciplinary Policy and Procedure.

5.0 Responsibilities and Duties

Overall responsibility for this policy rests with the Trust Board. Operational responsibilities are delegated as follows:

5.1 Executive Directors

The lead Executive Director for this policy will be the Director of People and Culture. In addition all Executive Directors will be responsible for ensuring that:

- All employees are informed of the terms of the policy and the procedures that apply to them – by directing them to the intranet
- The policy is implemented and operated effectively
- Managerial action is fair and equitable and is monitored effectively through HR casework monitoring, JNCC subgroup and/or People and Culture Committee.

5.2 Managers

5.2.1 Managers and Supervisors carry responsibility for effectively and fairly implementing and operating this policy within the sphere of their control, maintaining confidentiality of information at all times. They must ensure that patient care is not in any way compromised through the effects of substance misuse.

- 5.2.2 Managers should ensure that staff are aware of the standards required in their area of work.
- 5.2.3 It is the duty of managers to investigate any circumstances that they may become aware of or that are brought to their attention.
- 5.2.4 This policy is intended to complement all Professional Codes of Conduct and Fitness to Practice (Misconduct) or directives of professional staff organisations which relate to alcohol/substance misuse in the workplace. Managers or colleagues have a duty to report such concerns to their line manager and this may result in a member of staff being referred to their professional body. Individuals should be conscious of the fact that they should notify their professional body of any issues that may affect their own fitness to practice.
- 5.2.5 All managers should be aware of the changes in work performance, attendance and behaviour which may be associated with alcohol, drug or substance misuse related problems. Examples are where an employee's work begins to deteriorate and the manager believes that alcohol or other substances may be a factor, the employee will be actively encouraged to recognise the problem and advised that they should seek more specialised help and/or treatment.
- 5.2.6 The manager will be expected to take immediate positive action whenever inappropriate drinking or other drug/substance related problems are brought to their attention and will not allow it to continue without following it through in the most sensitive and appropriate manner. It is not appropriate to ignore the issue as a means to protect the employee and the manager's lack of action may cause the situation to deteriorate. This may leave the manager exposed to disciplinary action.
- 5.2.7 Managers should be able to provide information and guidance on how individuals can find help.
- 5.2.8 Where a pattern of behaviour causes concern, the manager will inform the employee that a referral to Occupational Health and Wellbeing is to be made.
- 5.2.9 Employees' rights to confidentiality and privacy will be protected and confidential information and records of an employee receiving help from Occupational Health and Wellbeing or any outside agency will not be released without the individual's consent.
- 5.2.10 Where work colleagues and/or supervisors/managers identify signs of a pattern of alcohol/substance misuse or identify a pattern of deterioration in work performance that may be linked to alcohol/substance misuse, managers will arrange to meet with the employee.
- 5.2.11 At any stage, employees will have the right to be accompanied by a trade union representative or work colleague. After the initial meeting, the employee will be advised of the help available from an appropriate agency. When discussing these issues, it will be made very clear that the Trust wishes to assist the employee and the employee will know at every stage what action has been discussed and agreed. A programme of improvement should be agreed with the employee and the employee should be advised that failing to meet any improvement targets or failing to

comply with the Substance Misuse Policy may result in the case being managed in line with the Trust's Disciplinary Policy.

5.2.12 Where the current role is deemed to be unsuitable, due to the nature of the role and responsibilities, the following options may be agreed with the employee:

i) Redeployment on recommendation of Occupational Health into an alternative role; this may include the option of undertaking a role at a lower band. This could be for a limited period until a permanent post is found or the employee is able to move back into their substantive role.

ii) Where no permanent redeployment is possible or where this has been an ongoing issue and redeployment has not worked in the past, this will be referred to the Disciplinary Policy or Sickness Absence and Wellbeing Policy as appropriate.

5.3 Occupational Health and Wellbeing Department

5.3.1 The Occupational Health and Wellbeing Department will provide support, guidance and counselling where appropriate to any employee who may be experiencing problems with substance misuse and provide advice to managers handling such circumstances.

5.3.2 In addition, the Occupational Health and Wellbeing Department will aim to raise awareness of the effects of substance use and misuse among employees through the promotion and provision of health and wellbeing and lifestyle information.

5.3.3 All referrals to Occupational Health and Wellbeing should be made following the normal procedure, clearly stating the concerns identified. If the employee refuses to comply with the referral process without good reason, the matter should be dealt with under the Trust's Disciplinary Policy.

5.3.4 Occupational Health and Wellbeing will provide the necessary support including counselling if appropriate for the staff member and arrange tests and further referrals as appropriate. Where appropriate, they will refer them to their own GP or signpost them to an external agency help, guidance and support. Alternatively, staff may approach an external agency directly (see Appendix 2).

5.3.5 As appropriate, with the consent of the individual, an appropriate blood/urine tests may be undertaken to form part of an objective investigation to determine an appropriate course of action. This will be undertaken under strict OH protocols via an independent accredited drug testing service. Where the employee refuses assistance offered through Occupational Health and Wellbeing, the manager will be notified and will then decide upon the further course of action through the Disciplinary policy.

5.3.6 Occupational Health and Wellbeing will keep the manager informed in writing of the outcome of the referral and the course of action.

5.3.7 Specific recommendations may be made regarding the alteration of work schedules (e.g reduced overtime or night duty) or restricting certain types of work for an agreed period, subject to review.

- 5.3.8 The usual terms of Occupational Health and Wellbeing policy will apply to confidentiality.
- 5.3.9 Where possible appointments for counselling, outpatients or self-help sessions should be made outside working hours. If this is not possible, this should be discussed with the line manager.
- 5.3.10 If further deterioration occurs, or previous behaviour returns, the manager should consult with the staff member and arrange a further referral to Occupational Health and Wellbeing. If there is no evidence of improvement in the individual's behaviour or they do not take up the assistance provided in line with the agreed action plan, the Trust's Disciplinary Procedure should be followed.

5.4 Human Resources Department

The Human Resources Department will provide support and advice to managers and staff concerning substance misuse. This will include clarification, information and interpretation of this policy and procedure to Managers, staff and their representatives where appropriate.

5.5 Employees

- 5.5.1 All employees have a duty of care to themselves, patients and others who may be affected by their actions or behaviour.
- 5.5.2 Individual employees have a responsibility to ensure they report for work and remain in a condition to perform their duties free from the effects of alcohol, drugs or any other substance, whether on Trust premises or at external locations when on Trust business.
- 5.5.3 Alcohol remains in the blood long after an alcoholic drink is consumed and this must be remembered when drinking outside working hours, including the previous evening. Alcohol should not be consumed during meal breaks if the employee is returning to work.
- 5.5.4 Staff who are 'on call' must ensure they are not under the influence of alcohol during the 'on call' period as they may be required to attend work.
- 5.5.5 Staff working under a professional code of conduct (e.g. NMC, GMC, HPC) have a responsibility to self-refer to their professional body any issues that may affect their fitness to practice (e.g. drink driving, or criminal offences in relation to drugs and alcohol).
- 5.5.6 Staff taking medication should seek advice on any adverse impact on work performance or behaviour, particularly with regard to safety. Advice from Occupational Health and Wellbeing should be sought where appropriate.

Prescribed/ over the counter medicines: Prescribed/over-the-counter medicines may cause impairment to an individual's performance at work. Individuals should therefore seek advice from their GP or pharmacist regarding the side effects of any medicines they are taking. If appropriate, they should discuss any problems with the

Occupational Health and Wellbeing Department and/or inform their manager of any possible side effects of the medication before commencing duty.

5.5.7 Employees are encouraged to refer themselves for appropriate help if they have any alcohol or substance misuse problems.

5.5.8 Employees are encouraged to urge colleagues to seek help if they suspect that they have a problem with drug, alcohol or substance misuse.

5.5.9 The Trust prohibits the possession, transfer, sale or use of unauthorised drugs, alcohol or illegal substances on its premises. Any employee found to be in possession of an illegal substance will be suspended from duty and a full investigation will be carried out under the Trust's disciplinary procedure. Under the Misuse of Drugs Act 1971, the Trust has a duty to deal with such issues and all drug related issues will be reported to the police and could lead to criminal proceedings.

5.5.10 In the interests of clients, staff and visitors, if an employee knows or strongly suspects another employee is involved in substance misuse, they should bring it to the attention of an appropriate manager.

5.6 The Role of Trade Unions

5.6.1 Trade Union representatives will:

- 1) To advise members who may have alcohol or substance related problems to seek help voluntarily
- 2) To signpost members to appropriate support or agencies (e.g. Occupational Health)
- 3) To accompany members to meetings with their managers

6. Policy Detail

6.1 Substance misuse may be the cause or the symptom of a variety of problems at work. Early identification of a problem is more likely to increase the chance of success of any subsequent programme of assistance. Managers should therefore be aware of and monitor the following behavioural and performance aspects which **may** indicate a potential problem.

- **Absenteeism** - Especially frequent or an increase in sick leave, recurrent illnesses, unauthorised absences, absence on certain days (e.g. around weekends), poor timekeeping/frequent lateness, longer breaks and/or absence from duty whilst at work
- **Incidents/accidents** - An increasing or high level of incidents/accidents
- **Low/deteriorating performance standards** - Including missed deadlines, lack of concentration, slow working, poor judgement, lack of attention to detail, increased complaints, unreliability, forgetfulness
- **Interpersonal skills** - Reacting unpredictably to criticism and/or problems, irritability, borrowing money, physical/verbal abuse of other
- **Appearance** - The smell of alcohol/solvents/other substances, shaking flushed face, runny nose, dilated/constricted pupils, poor hygiene

This list is not exhaustive and some of the above indicators could result from other health problems. Care should be taken when interpreting the above signs.

People who are developing or already have a dependence on alcohol or drugs frequently hide the evidence and deny the existence of a problem. Concealment may stem partly from concern as to how the issue will be treated and its possible effect upon job security, future career or relationships with other employees. Identifying the symptoms in people and getting them to acknowledge their problem is the first step towards potential recovery.

6.2 Procedure

- 6.2.1 If an employee reports for duty and is considered by his/her manager to show symptoms of substance misuse, the manager will send the employee home for the rest of the work duty period or suspend the employee in consultation with Human Resources.
- 6.2.2 Identifying people in the workplace who may have problems related to alcohol or drug/substance misuse is not easy. Listed above are the common indications of the presence of an alcohol or drug/substance abuse problem. **It must be stressed however that these are only indications – care should be taken in interpreting these signs as they may be symptomatic of stress or other medical conditions.**
- 6.2.3 In all cases, a careful and sensitive discussion with the employee will take place as appropriate such as on their return to work following absence. Guidance is available from Human Resources on how to conduct this meeting. This will normally be a 1:1 meeting with the manager however the employee has the right to be accompanied by a Trade Union Representative, or work colleague.

The tone will be supportive and is designed to encourage the individual to seek help voluntarily if necessary and encourage the employee to agree to a management referral to the Occupational Health and Wellbeing Department or other appropriate sources of help. It may be appropriate to provide the details of a number of organisations which can help (see Appendix 2) All conversations will be in strictest confidence, except in cases where the health & safety of the individual, patients or colleagues may be breached, which cannot remain confidential and may mean that further action will need to be taken.

The outcomes of the meeting may include the following:

- If it is identified that there may be a continuing substance misuse problem, the manager will refer the employee under the Trust's Sickness Absence Health and Wellbeing Policy to Occupational Health and Wellbeing to seek appropriate treatment if necessary. Should the employee accept that there is a problem; the Trust will undertake to provide, as far as possible, support and guidance to the employee during the period of remedial action. This includes allowing authorised leave from work for treatment and counselling. At this stage the matter should be dealt with under the Trust's Sickness Absence Health and Wellbeing Policy.
- If an employee with a substance misuse problem accepts the opportunity to receive help, but afterwards reverts to previous poor levels of work performance or conduct, the matter may be dealt with, as appropriate, under

the Trust's Performance Management or Disciplinary Policy. Further medical advice should also be obtained from the Occupational Health and Wellbeing Department.

- If there is a continuing substance misuse problem affecting work and the employee does not accept that they have a health issue or will not engage with a support programme/rejects an offer of assistance, and does not acknowledge the circumstances relating to their work performance/conduct, the manager will make a full assessment of the situation, in consultation with HR, and decide whether it is appropriate to take disciplinary action at this stage or allow the employee to continue working in the knowledge that the situation will be constantly under review. Where the risks to the employee or other staff/clients/patients are high, it may be appropriate to suspend the employee from work pending an investigation (see Disciplinary Policy and Procedure).

It is the responsibility of the manager to continually monitor the situation and involve the support of Occupational Health and Wellbeing appropriate in the circumstances.

- The Trust has a responsibility to ensure that standards of work and conduct are maintained in the workplace. Although the Trust wishes to support and help staff identified as having alcohol or other drug/substance related problems wherever possible, the Trust may need to deal with the following situations under the Disciplinary Policy and Procedure. However, it is for the manager to decide whether the matter should be dealt with under the Disciplinary Policy and Procedure given the facts of each case. Advice from Human Resources should be sought in all cases.
- In some instances, support to the employee and disciplinary action may both be appropriate, for example:
 - 1) Where all offers of help and support have been rejected by the employee but their conduct and/or standards of work performance continue to be unacceptable.
 - 2) Where the manager considers that the employee may be putting themselves, other employees, contractors, patients, clients or members of the public at risk.
 - 3) Where alcohol consumption or other substance misuse leads to behaviour contrary to appropriate standards of safety and/or conduct
 - 4) Where an employee reports for work after having consumed alcohol/drugs/illegal substances and is considered to be a threat to health, safety or professional standards.
 - 5) Where the manager/supervisor has reason to believe that a member of staff has broken the law while on employer's premises and/or during the course of Trust work i.e:

- a) as a result of internal and police enquiries, a manager or supervisor has reason to believe that illicit drugs are on Trust premises or in the possession of Trust staff while they are on Trust business.
- b) whilst on Trust business a member of staff who attempts to drive a motor vehicle has been found by the police to be unfit to drive through drink or drugs, or where a member of staff who has been found by the police to be unfit through drink or drugs is in charge of a motor vehicle in the same circumstances. This also applies to any circumstance where a member of staff is in the charge of a motor vehicle owned by the Trust.
- c) where a member of staff has been convicted of a criminal offence connected with the misuse of alcohol, drugs or other substances during the course of their work.
- d) where theft of drugs held by the Trust has been alleged.

In the circumstances outlined above, the employee may be suspended from duty and a full investigation carried out under the Trust's Disciplinary Policy and Procedure. Breaking the law and/or being convicted of a criminal offence may be considered to constitute gross misconduct.

The Trust needs to ensure that its reputation and integrity is not damaged by employees possessing illegal substances. Under the Misuse of Drugs Act 1971, the employer has a duty to deal with such issues. Possession, dealing and/or use of controlled drugs (not including prescribed medicines) will be reported to the Police.

NB - Line managers should address poor work performance or poor attendance, which may be due to drug/substance or alcohol use or misuse as a capability issue (refer to the Trust's Performance Management Policy and seek advice from Human Resources).

6.4 Referrals to Occupational Health and Wellbeing

In certain circumstances, an employee may feel it appropriate to refer themselves to Occupational Health and Wellbeing, with or without their manager's knowledge. Appropriate guidance and support will be provided in such circumstances.

If, as a result of the 1:1 meeting and/or where the manager suspects a substance misuse problem, the manager should refer the employee to the Occupational Health and Wellbeing Department and the employee must be informed of this.

The employee may be asked to give a blood/urine sample for testing. Prior to any sample being given the employee must provide their written consent.

The results of any tests will assist the OH Practitioner in their assessment of the employee's fitness to work, and any recommendations for a rehabilitation programme. The aim of treatment and rehabilitation is to ensure optimum recovery and return to work. Allocation to other duties during and after rehabilitation may be

appropriate dependant on the individual circumstances of the case. Timescales will be established to allow effective monitoring of an individual's progress.

The aim of treatment and rehabilitation is to ensure optimum recovery and return to work. Allocation to other duties during and after rehabilitation may be appropriate dependant on the individual circumstances of the case. Timescales will be established by Occupational Health to allow effective monitoring of an individual's progress.

Medical confidentiality will apply to these tests and managers will only be informed as to whether an employee is fit or unfit for work. Consent will be sought before breaking confidentiality, except in certain very exceptional circumstances, where there is potentially a risk of serious harm to the employee or to others.

Refusal to accept support from Occupational Health, or refusal to participate in any rehabilitation/treatment could lead to disciplinary action. Where help is refused, or there is no acknowledgement of a problem the Trust will have no choice but to deal with the behaviour or conduct issue under the Disciplinary process.

6.5 Treatment Rehabilitation

6.5.1 The rehabilitation programme for the individual may involve referral to an external agency to obtain appropriate and confidential treatment for the employee, with monitoring as necessary by Occupational Health and Wellbeing acting on behalf of the Trust who should keep line management informed of fitness for duty.

6.5.2 During this time allocation to other duties during and after rehabilitation may be appropriate dependant upon the circumstances and specialism of the employee.

6.5.3 Paid time off to attend for treatment may be recommended. The employee should access support outside working time but if this creates a problem for attending this should be discussed with the line manager. Advice should be sought from the Human Resources Department.

6.5.4 It should be made clear that the primary aim of treatment and rehabilitation is to ensure optimum recovery and return to work.

6.5.5 Relapse after treatment for substance misuse is common and line managers should be aware that all interventions and follow up, this may still occur. The circumstances of the relapse and the response by the employee will influence how the manager should respond. Nevertheless the safety of patients and other staff and the quality of care delivered will be affected if employees relapse to alcohol and substance misuse frequently. Managers should therefore discuss with the employee and those involved in their treatment the limits to rehabilitation which could acceptably take place in their current workplace. Advice may also be sought from the Human Resources Department.

6.5.6 Section 6 of the Equality Act 2010 defines a disability as 'a physical or mental impairment which has a substantial and long-term adverse effect on an employee's ability to carry out normal day-to-day activities'. Addiction to, or dependency on,

alcohol, nicotine or any other substance (other than in consequence of the substance being medically prescribed) is not to be regarded as impairments for the purposes of the Act. However advice and guidance should be obtained from the HR department and the Occupational Health and Wellbeing Service and Trades Unions.

6.6 Legislation

This policy takes into account the following legislation:

- Health and Safety at Work Act 1974 (Section 2)
- Management of Health and Safety at Work Regulations 1999
- Equality Act 2010
- Human Rights Act 1998
- Misuse of Drugs Act 1971
- Road Traffic Act 1988

This policy is supported by the following policies and procedures:

- Disciplinary Policy
- Performance Management Policy
- Sickness Absence and Wellbeing Policy
- Smoke free environment policy

7. Implementation of Document

7.1 The policy will be implemented immediately upon approval.

7.2 Dissemination

The policy will be placed in the Trust's HR Document library on the Intranet and will be publicised through Chief Executive's briefing, the Trust's weekly update, policy update briefings for managers and notified to the Trust Board by the People and Culture Committee.

7.3 Training and awareness

Information and Support will be provided by the Trust on the Health and Wellbeing intranet pages to enable managers and employees to:

- be better informed regarding the effects of substances and their misuse
- be aware of the help and support available both within and outside the Trust
- fulfil their legal, personal and social responsibilities

Training is available for managers on both Sickness Absence, Performance Management and Disciplinary. Training and support is available for staff via the Self Care Programme.

8. Monitoring and compliance

Key control:	Checks to be carried out to confirm compliance with the policy:	How often the check will be carried out:	Responsible for carrying out the check:	Results of check reported to:	Frequency of reporting:
WHAT?	HOW?	WHEN?	WHO?	WHERE?	WHEN?
All staff identified as experiencing health problems associated with the policy will be referred for the correct support via Occupational Health and Wellbeing.	Check with Occupational Health and Wellbeing on a case and case basis.	Annual	Human Resources and Occupational Health and Wellbeing	People and Culture Committee	Annual

9. Policy Review

This policy will be reviewed after 2 years

10. Consultation

The policy has been developed by a sub-group of the Joint Negotiating and Consultative Committee and has been subject to consultation with staff representatives.

11 Approval process

The policy has been approved by the Joint Negotiating and Consultative Committee

12. Equality requirements

An Equality Impact Assessment has been undertaken in accordance with Trust policy and attached as Supporting Document 2.

13. Financial risk assessment

There are no significant financial risks associated with this policy. The financial risk assessment is attached as Supporting Document 3.

APPENDIX 1

SPECIALIST HELP ORGANISATIONS/ AGENCIES

Staff are encouraged to contact their GP for advice in the first instance.

The organisations listed below can help provide information and advice on alcohol related problems and can put you in touch with local advisory services in your area.

Alcoholics Anonymous:

Tel: 0845 769 7555

Website: www.alcoholics-anonymous.org.uk

E-Mail: help@alcoholics-anonymous.org.uk

Alcohol Concern:

Suite B5
West Wing
New City Cloisters
196 Old Street
London
EC1V 9FR
Tel: 0207 566 9800

Website: www.alcoholconcern.org.uk

This site provides information and articles on a range of topics surrounding alcoholism.

Al-Anon:

020 7403 0888

www.al-anonuk.org.uk

Provides support for colleagues and families of those affected by alcohol problems.

Adfam National:

0207 553 7640

www.adfam.org.uk

The largest non-statutory organisation that works with and on behalf of families affected by drug and alcohol problems. Helpful for the family of the alcohol or drug user.

ASCA – Addiction Support and Care Agency:

Website: <http://www.addictionsupport.co.uk/>

Richmond: 233 Lower Mortlake Road, London, TW9 2LL

Tel: 0208 940 1160

Surbiton: 96 Ditton Road, Surbiton, KT6 6RH

Tel: 0208 339 9899

Cocaine Anonymous

Tel: 0300 111 2285
Website: www.cauk.org.uk

Drinkline

Tel: 0800 917 8282
E-Mail: contact@drinkaware.co.uk Website: www.drinkaware.co.uk
Free and confidential telephone helpline for people who need help or support with their own or someone else's drinking. Line opened 9am until 11 pm Monday to Friday.

Worcestershire and contact details of the local Drug and Alcohol Treatment

Swanswell registered charity

Head Office
Hilton House, Suite 5
Corporation Street
Rugby, Warwickshire
CV21 2DN
T. 01788 559 400
F. 01788 559 419
www.swanswell.org

Worcester – 01905 721 020
Kidderminster - 01562 510 330
Redditch - 01527 406 920
Evesham - 01386 423 407
Email: worcsadmin@swanswell.org

Website www.swanswell.org

Facebook page [SwanswellUK](#)

Twitter [@swanswell](#)

National 24-hour helpline numbers:

National Drugs Helpline: 0800 776 600

Narcotics Anonymous Uk helpline number 0300 9991212
www.ukna.org

NHS 111 (previously NHS Direct)

Talk to FRANK (previously National Drugs Help Line)

0300 123 6600
www.talktofrank.com
Free, confidential, 24 hours a day drugs helpline



Turning Point – drug and alcohol service:

Tel: 0207 481 7600

Website: www.turning-point.co.uk

SMART Recovery UK

SMART stands for Self Management and Recovery Training. This is a local abstinence based support programme

Contact details & website

07935 914949 / 07583417501

www.smartrecovery.org.uk

Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	• Race	No	There could be risks to some groups due to cultural and religious differences
	• Ethnic origin	No	
	• Nationality	No	
	• Gender	No	
	• Transgender	No	
	• Religion or belief	No	
	• Sexual orientation	No	
	• Age	No	
	• Disability - learning disabilities, physical disability, sensory impairment & mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	N/A	
4.	Is the impact of the policy/guidance likely to be negative?	N/A	
5.	If so can the impact be avoided?	-	
6.	What alternatives are there to achieving the policy/guidance without the impact?	N/A	
7.	Can we reduce the impact by taking different action?	N/A	

NB:

Where an inappropriate, negative or discriminatory impact has been identified please proceed to conduct a Full Equality Impact Assessment and refer to Equality and Diversity Committee, together with any suggestions as to the action required to avoid / reduce this impact.

Advice can be obtained from the Equality and Diversity Leads in HR and Nursing Directorates (details available on the Trust intranet).

Supporting Document 2 - Financial Risk Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of Document:	Yes	/	No
1.	Does the implementation of this document require any additional Capital resources	No		
2.	Does the implementation of this document require additional revenue	No		
3.	Does the implementation of this document require additional manpower	No		
4.	Does the implementation of this document release any manpower costs through a change in practice	No		
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	No		
	Other comments:			

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration before progressing to the relevant committee for approval