
Drug, Alcohol and Substance Misuse Policy

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Purpose of Agreement	This Policy will explain the responsibilities and principle behind the Trust’s approach to managing the misuse of drugs, alcohol and other substances by employees.
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Version 3	April 2021	M. Tarrant	Policy Group	This version was reviewed and updated as part of an ongoing policy document review process

SUMMARY OF POLICY

This Policy will explain the responsibilities and principle behind the Trust’s approach to managing the misuse of drugs, alcohol and other substances by employees.

Under the Health and Safety at Work Act 1974, the Trust recognises its responsibility to protect patients, staff and visitors by ensuring that all staff members are competent to work and free from the adverse influence of drugs, alcohol or any other substance.

Whilst the health and safety of patients, staff and visitors must be paramount, if an employee admits to having a problem with drugs, alcohol or any other substance, a supportive approach will be taken in order to assist them to recover and return to work wherever possible. An employee seeking support should be referred to the Occupational Health and Wellbeing Service as soon as possible in order that the appropriate assessment, advice and support can be offered.

If a manager has reason to believe that an employee has attended for work while unfit to do so due to misuse of alcohol, drugs or other substances, the employee will be managed in line with Improving and managing conduct policy. There will be a distinction between an employee who admits to having a problem with alcohol, drug or substance misuse and engages in a programme of treatment to try to recover and return to work, and misconduct or impaired performance related to such misuse.

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Drug, Alcohol and Substance Misuse Policy

1. INTRODUCTION & PURPOSE

- 1.1 This Policy will explain the responsibilities and principle behind the Trust's approach to managing the misuse of illegal drugs, alcohol and other substances by employees. The Trust aims to ensure that it provides a safe and productive work environment that promotes the health, safety and wellbeing.
- 1.2 The Trust has a responsibility to provide its clients with the best possible service and ensure that all services are delivered effectively and without compromise, at the same time maintaining and promoting the Trust's reputation and integrity.
- 1.3 Employers have a duty under the Health & Safety at Work Act 1974 to ensure, as far as is reasonably practicable, the health, safety and welfare of its staff and others. This includes taking all reasonable steps to resolve drug (illegal, prescription or recreational), alcohol and other substance misuse related problems known within the workplace. Staff also have a duty of care to patients and colleagues and are therefore expected to co-operate with and implement the Trust policies in this respect. The Trust's position is one of not allowing the use, possession or supply of drugs, alcohol or substances by staff whilst on duty or allowing staff to continue working if they are found or if there is reason to suspect that they are under the influence of any substance or if they smell of alcohol.
- 1.4 This policy should be seen in the context of a desire to promote the general wellbeing of all employees and safety for patients, colleagues and others. The Trust recognises that a drugs or alcohol problem may be an illness to be treated in the same way as any other illness and dealt with as legitimate workplace matter in a non-judgmental way. The Trust is committed to providing confidential support and specialist help where needed, to any employee making a disclosure regarding their misuse of substances and their intention to manage the situation more effectively.
- 1.5 It is the Trust's intention to ensure that all staff are aware of this policy in order to prevent any such situations occurring, which could render them liable to formal action.

2. SCOPE & DEFINITIONS

- 2.1 This policy applies to locum, permanent, and fixed term contract employees (including apprentices) who hold a contract of employment or engagement with the Trust, and secondees (including students), volunteers (including Associate Hospital Managers), bank staff, Non-Executive Directors and those undertaking research working within Solent NHS Trust, in line with Solent NHS Trust's Equality, Diversity and Human Rights Policy. It also applies to external contractors, agency workers, and other workers who are assigned to Solent NHS Trust.
- 2.2 For the purpose of this Policy, substance misuse refers to use and misuse of intoxicating substances which include alcohol, drugs; prescription and over-the-counter medicines, novel psychoactive substances¹, solvents and other substances, either intermittently or

¹ Previously known as 'Legal Highs'

continuously which interferes with an individual's health, work capabilities or conduct, or which affects work performance and / or safety of themselves and others.

- 2.3 For the purposes of this policy being intoxicated can include the smell of alcohol on an individual's breath. Although this characteristic should not be used in isolation. See Appendix 1 for more guidance.
- 2.4 The Misuse of Drugs Act (1971) specifies the different categories of drugs according to their relative harmfulness when abused. Under this policy, the Trust is clearly stating that the possession, use or supply of illegal drugs is strictly forbidden whilst on duty. The Trust will contact the Police where an employee or visitor is found to be in possession, using or supplying illegal substances whilst on duty or visiting any of its premises.
- 2.5 The Trust also prohibits the use, possession or supply whilst on duty of Novel Psychoactive substances, the term given to substances that are used recreationally but are not controlled under the Misuse of Drugs Act (1971), not licenced for legal use, and not regulated as a medicine Medicines Act (1968). These are powerful drugs with long lasting effects often over 12 hours in some cases.
- 2.6 For the purposes of this policy where conduct is mentioned it equally applies to any procedure in place in the Trust which deals with absence management or poor performance, outside work criminal convictions.

3. AIMS AND OBJECTIVES

- 3.1 This policy should be seen in the context of a desire to promote the general wellbeing of all employees. It is designed to:
 - Provide a framework to enable instances of drug, alcohol and substance misuse to be handled in an appropriate and consistent way. It sets out the rules regarding the use of intoxicating substances to ensure staff are aware of the likely consequences of their employment if misusing them.
 - Prevent accidents and impaired performance at work which may be alcohol or drug related, safeguarding the safety and welfare of staff and patients.
 - Actively promote awareness and understanding of the effects of alcohol and drug related problems within the workplace, and to emphasise the potential dangers of such misuse for both the individuals' health and work performance and to encourage those with a problem to seek help.
 - Acknowledge that in some cases, alcohol or drug misuse may be used to help cope with other problems e.g., work/personal challenges. The policy therefore aims to ensure that all reasonable steps are taken to offer people the opportunity to seek help.

4. ROLES & RESPONSIBILITIES

- 4.1 All staff are expected to adhere to Trust Policies and the principles set out in the Trust Mission, Values and Policies.

4.2 Roles and responsibilities under this Policy are defined as follows:

Trust Board

Trust Board members are responsible for providing leadership of health and wellbeing acting as positive role models and supporting the effective use of the Policy and Protocol for Alcohol and Substance Misuse.

Staff have the following responsibilities:

- To ensure they report for work and remain in a condition to perform their duties free from the effects of drugs, alcohol or any other substances, whether on Trust premises or at external locations.
- Staff have the responsibility to seek help and support / engage with the trust when they recognise that they have a drug or alcohol problem.
- Alcohol remains in the body long after an alcoholic drink is consumed and this must be remembered when drinking outside of working hours, including the previous evening.
- Staff who are `on call` must ensure they are not under the influence of alcohol, drugs or other substances during the `on call` period as they may be required to make decisions / drive / attend work. See section 4 for more information for `On Call` staff.
- Staff taking medication should seek advice on any adverse impact on work performance or behaviour, particularly with regard to safety. They should also notify their manager of this. Advice from Occupational Health can be sought.
- If a problem or suspected problem relating to drugs, alcohol or substance misuse has been identified the member of staff has a responsibility to seek help, by attending for an Occupational Health appointment or a relevant external agency.
- Staff should inform their manager if they know or suspect that a staff member (including volunteers, students, contractors etc.) is under the influence of drugs, alcohol or other substance whilst engaged in a Trust activity.
- All staff must advise their line manager if they are charged with and/or convicted of a drugs / drink driving offence in order to be able to consider the impact upon their role and appropriate action. If the line manager is not informed further action may be taken under the relevant Trust policy.
- Not to bring illegal substances onto Trust premises.

Managers have the following responsibilities:

- Take proactive steps to offer regular opportunities for wellbeing conversations that encourage an open and honest dialogue emphasising the importance of early identification and treatment (wellbeing conversations should encourage disclosure, but respect privacy and support people to seek help when required).
- Publicise the policy and support available to staff, including through induction and after, ensuring policy compliance by reinforcing its requirements to staff.
- To encourage people to report third part concerns regarding individuals who they suspect may be intoxicated whilst at work to the manager in the first instance.

- Discuss suspected alcohol or substance misuse problems with member of staff and, where applicable refer staff to Occupational Health.
- If a member of staff divulges to their manager a drug/ alcohol /substance misuse problem, the manager should also refer to Occupational Health
- Offer support to staff to facilitate recovery. Work with Occupational Health:
 - to explore workplace adjustments where these are indicated and practical
 - to implement and would support the rehabilitation of staff affected by drugs, alcohol or substance misuse - Refer to Trust Special Leave Policy for time off for appointments associated with rehabilitation and treatment
 - Provide information and advice to staff on drug, alcohol and substance misuse as stated in the policy
- 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 (see Appendix 1).
- Investigate any circumstances that they may become aware of or that are brought to their attention. It may be appropriate to seek support from HR Consultancy team and Occupational Health.
- Inform the Chief Nurse/Chief Medical Officer of any drug / drink driving or other related convictions or outcome of HR process which is found to be related to drugs, alcohol or substance misuse.
- If further deterioration occurs, or previous patterns of behaviour return, the Manager is responsible for bringing this to the member of staff's attention and arranging a further Occupational Health referral. If there is no improvement the Trust's ~~Disciplinary procedure~~ Improving and managing conduct policy should be followed.
- In the case of individuals not directly employed by the Trust (e.g. volunteers, those seconded) the departmental manager will be the responsible officer in determining the appropriate action.
- The manager is responsible for ensuring the privacy and confidentiality of employee records associated with drug, alcohol and substance misuse.

Occupational Health has the following responsibilities:

- Provide information and advice to staff and managers on drug, alcohol and substance misuse as stated in the policy.
- Assess staff referred under the policy and provide advice on fitness to work and on adjustments to support the rehabilitation of staff affected by drugs, alcohol or substance misuse. Take into consideration potential contributory/underlying work-related factors, that may help to address root cause/s.
- Where appropriate make onward referral to other health care professionals/ agencies
- Monitor the progress of staff undergoing treatment for drug, alcohol or substance misuse in relation to fitness to work. Encourage individuals to have regular wellbeing conversations with their line manager to maximise the support that can be offered within the workplace. However, respecting privacy is paramount and the need for the individuals to feel comfortable with disclosure.

- If a substance misuse problem is identified during the Work Health Assessment screening process Occupational Health will assess the individual to ensure they are fit for employment.
- Provide the manager with a written report of the outcome of the referral and the course of action recommended. Specific recommendations may be made regarding the alteration of work schedules (e.g. restrictions on excess hours, shift working, temporary redeployment) or restricting certain types of work for an agreed period, subject to review.
- The usual terms of Occupational Health policy will apply to confidentiality

Human Resources have the following responsibilities:

- Provide training, advice and support to managers in relation to this policy and its applications.
- Advise and support managers when staff are suspected of being under the influence of drugs, alcohol or other substances, although the responsibility for the action rests with the manager.
- Support managers at formal meetings arising from this policy or other related policies.

Contractors and others working on Trust premises have the following responsibilities:

- To comply with the policy by ensuring they and their staff do not work on Trust premises under the influence of alcohol or non-prescribed/illegal drugs or other substances

5. PROCESS

- 5.1 An alcohol, drug or substance misuse problem at work will be regarded in the first instance as a health problem rather than as an immediate cause for dismissal or formal action. Those who know or suspect they have a problem are encouraged to seek help from their manager, People services, Occupational Health and Wellbeing Service, Alcohol or Drug Interventions Advisory services. All cases will be dealt with in the strictest confidence although information may be disclosed to appropriate third parties if there is a statutory obligation to do so or if an individual poses a risk to themselves or others. The individual will be informed in these circumstances.
- 5.2 If, however, whilst under the influence of alcohol, drugs or other substances at work, an employee behaves in a way which could be regarded as gross misconduct, for example carries out an assault, behaves indecently, causes malicious damage to property or threatens in any way the health and safety of a patient, a member of the public or another member of staff, please see the Improving & Managing Conduct toolkit for further guidance on what constitutes gross misconduct) formal action will be taken, up to and including dismissal. Where, due to the use or possession of alcohol, drugs or other substances, a registered healthcare professional breaches their Professional Code of Conduct, this will be reported to the appropriate professional body.
- 5.3 There may be cases where, despite every effort to provide support and guidance, an employee is unable to recover sufficiently in order to resume their work activities, relapses become a regular occurrence, it becomes obvious that the employee will be unable to manage their problem in the foreseeable future or the situation becomes unmanageable. In such cases, the appropriate policy will be invoked depending on the circumstances e.g., the Improving and

Managing Conduct Policy or Attendance and Wellbeing Policy and the employee's continuing employment with the Trust will be considered. Each case will be assessed on its merits and timescales set accordingly with input from the Occupational Health and Wellbeing Service to ensure they are realistic and achievable.

5.4 Recruitment of Staff

5.4.1 Individuals with former drug or alcohol problems should not be overlooked with regard to employment by reason of their substance misuse alone. Drug or alcohol dependence can affect anyone and the principles of ensuring that staff are competent to perform the job for which they are being considered should remain the main driver behind recruitment decisions in line with the Trust's policy on equality and diversity. However, due to the nature of the work and the potential vulnerability of service users, all potential applicants must be fit to work and post treatment, and without a current substance misuse problem. It is therefore the responsibility of the applicant to disclose any previous treatment prior to any offer of employment at their pre-employment check. Failure to disclose may lead to the termination of his/her contract of employment.

5.4.2 As part of the recruitment process the following should be considered:

- The nature and seriousness of substance misuse and when this occurred
- The attitude of the individual in relation to their rehabilitation
- The commitment of the person to their recovery from substance misuse
- Criminal convictions
- Rehabilitation of Offenders Acts
- Equality Act (Addiction is not a disability in itself so no adjustments are required. However, some adverse health effects or conditions may be interlinked and may need consideration under the Act e.g. depression).
- Nature of the job they will be performing. For example, if driving is required, there are additional considerations if former or current drug and alcohol misusers apply. Applicants who hold a driving licence are required to inform the DVLA of any medical condition that may affect their fitness to drive, including dependence on drug/alcohol / substance misuse problems. A licence is then likely to be refused and therefore may not be able to perform their work duties.

5.5. Drug Use in the workplace

5.5.1 Drug use refers to the use of illegal drugs, Novel Psychoactive substances and the deliberate misuse of prescribed drugs, non-prescribed drugs and substances such as solvents.

5.5.2 Drugs can alter the way a person thinks, perceives, feels and this can lead to impaired judgement or concentration. Drug use can also bring about the neglect of general health and well-being. This may adversely influence the performance of the member of staff.

5.5.3 It is recognised that the use of novel psychoactive substances and the misuse of legally prescribed and non-prescribed drugs or substances may also impair performance. The effects of which can be long lasting.

5.5.4 Characteristics of drug, alcohol and other substance misuse use are listed in Appendix 1.

- 5.5.5 It is not permitted for staff to be in possession, under the influence, deal in or take drugs within classes A, B or C in the workplace. A list of these drugs can be obtained from the Trust's Pharmacist.
- 5.5.6 Convictions of staff for drug offences can damage public confidence in Trust services, irrespective of the role performed by that member of staff and whether the offence was committed at work or socially. Consequently, the continued employment of any member of staff is at risk if they are convicted of a drugs offence. If the Trust is made aware of any drug-related convictions against an individual it will carry out an investigation and the Improving and Managing Conduct policy may be invoked.
- 5.5.7 Any recognised drug problem will be treated in strict confidence, subject to the provisions of the law.

5.6. Alcohol Consumption in the workplace

- 5.6.1 It is not permitted for staff (as opposed to clients/patients) to drink, smell of alcohol, or be under the influence of alcohol, whilst on duty or on Trust premises.
- 5.6.2 It is not permitted for staff off duty to drink alcohol in a public place whilst wearing a Trust uniform and / or identification badge.
- 5.6.3 Staff are asked to note that there is a perceived link between the smell of alcohol on the breath of staff and incompetence. Such perceptions can damage public confidence in Trust services. For these reasons' alcohol consumption during meal breaks and before coming on duty is not permitted.
- 5.6.4 Individuals, who are required to drive as part of their duties or required to drive clients/service users as part of their duties must not consume alcohol before coming on duty or while on duty. Alcohol remains in the body long after an alcoholic drink is consumed and this must be remembered when drinking outside of working hours, including the previous evening.

5.7. Alcohol consumption for on-call staff

- 5.7.1 The Trust recognises that it would be unreasonable to require staff not to consume alcohol during periods when they are not at work. However, when the individual is on call, and may be required to drive or deal with work related issues they will be covered by this policy in the same way as though they were at work.
- 5.7.2 The only exception to this would be for named individuals who are permanently on call for Major incidents, for which no payment is made. In these limited cases the consumption of alcohol must be kept below the legal requirements for safe driving.
- 5.7.3 Individuals who may be expected to see patients or clients whilst on call must not place themselves in a position where they smell of alcohol, or their professional competence is impaired.

5.8. Support for staff who have drug, alcohol or substance misuse problems

- 5.8.1 The Organisation recognises that drug and alcohol dependency is a health problem that requires special treatment and help. It also recognises that early identification is more likely

to lead to successful treatment. Solent NHS trust is therefore committed to supporting those staff that seek help with drug, alcohol and substance misuse problems and will maintain the strictest confidentiality when dealing with individuals, within the limits of what is practical and written within the law.

- 5.8.2 Employees seeking help will be supported in their treatment and every effort will be made to assist them to return to good health and efficiency as part of their rehabilitation.
- 5.8.3 Where an employees work responsibilities are seen to be an obstacle to their recovery, then redeployment may be relevant.
- 5.8.4 Help can be obtained through the Occupational Health Team or via an external agency. There are a range of support services available for employees and these include:
- Occupational Health – The employee or manager can seek advice and support from the Occupational Health Team. A duty Nurse system is in operation every morning Monday to Friday
 - GP - The employees GP can refer them onto local specialist substance misuse treatment and / or counselling services
 - Specialist substance misuse treatment agencies
 - Private sector substance misuse counselling and treatment agencies
 - These agencies should be officially registered and can offer assessment and treatment support.
 - Self-help groups – Organisations that provide peer-led group and individual support.
 - Employee Assistance Programme
 - Telephone helplines – can be useful for initial advice and times of crisis
 - Alcohol and Substance Misuse support agencies:
 - National Drugs Helpline
 - Southampton Alcohol Service
 - Portsmouth Recovery Hub
 - Alcoholics Anonymous
 - Drink line
 - Drug's helpline

6. Drug testing

- 6.1 It is not the policy of the Trust to undertake drug or alcohol testing on employees and if required by law testing will be co-ordinated by the Police.

7. TRAINING

- 7.1 The Trust will use all appropriate opportunities to promote health and wellbeing and increase awareness amongst its staff regarding alcohol, drug and substance misuse and the potential health issues and how to access support if required.
- 7.2 Managers will have access to support through HR Consultancy to help deal with any formal matters resulting from noncompliance issues relating to this policy.

8. RELEVANT LEGISLATION

- 8.1 The following legislation is relevant to this policy:

- The Employment Act 2002 (Dispute Resolutions) Regulations 2004
- Misuse of Drugs Act 1971
- Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Data Protection Legislation
- Human Rights Act 1998 (Article 8)
- Road Traffic Act 1988
- Transport and Work Act 1992
- Equality Act 2010
- Medicines Act (1968)

9. LINKS TO OTHER DOCUMENTS

9.1 This Policy should be read and used in conjunction with other relevant documents:

- Resolution policy
- Improving and Managing Conduct policy
- Improving & Managing Performance and/or Attendance and Wellbeing.
- Special Leave Policy
- Occupational Health & Wellbeing Service Managers guide
- Disclosure and Barring Service (DBS) Policy
- ACAS guidance
- HSE site - Managing drug and alcohol misuse at work.

10. REVIEW

10.1 This policy may be reviewed at any time at the request of either staff side or management, or in response to changes in Legislation / Guidance / best practice. It will be automatically reviewed on a 3-yearly basis.

Appendix A

SOLENT NHS TRUST PROCEDURAL GUIDELINES FOR MANAGERS

1. INTRODUCTION

The desire to promote the wellbeing of employees and to provide support for those who seek it, should be at the forefront for managers when dealing with drug, alcohol and substance misuse matters involving their staff. This does not however, preclude the use of formal action for breaches of this policy.

These guidelines aim to:

- Promote prevention and early intervention message
- Help managers to be alert to behaviours affecting work performance which may be caused by drug, alcohol or other substances.
- Be able to identify deteriorating work performance in terms of work-related problems
- Be aware of how to guide the employee towards professionals that can help.

2. THE PROCEDURE

All Staff are subject to the policy in various ways, such as:

- The individual voluntarily decides to seek help from a manager or specialist department within the Trust or outside agency
- A member of staff may show signs of an alcohol or drug related problem, which may manifest itself in a variety of ways (see section 2.1).
- If following an accident or incident at work there is a suspicion of alcohol abuse, the individual will be asked to attend the Occupational Health Department for an assessment.

A proactive and preventative approach is paramount to supporting people's health and wellbeing. Promoting a message of personal accountability and demonstrating supportive management behaviours is important. Managers should be offering people opportunities to have regular wellbeing conversations encouraging open and honest dialogue and early intervention if needed.

The Trust accepts that if a member of staff has an alcohol or drug related problem affecting work performance, then confidential guidance and assistance to overcome the problem should be offered. Such guidance and assistance may be from the Manager/supervisor, Occupational Health or other agencies.

Where staff agree to seek help, and follow advice, the matter will be treated as a medical problem in the first instance. Staff who have, or suspected they may have, an alcohol or substance misuse problem will be given every opportunity to seek help or advice from either the Occupational Health Service or from a recognised external agency.

If time off for rehabilitation / treatment is recommended please refer to the Trust Special leave Policy.

Occupational Health will see staff who have self-referred or been referred by their manager, and with the agreement of the employee may liaise with their GP / specialists in the management of alcohol or substance misuse.

Occupational Health will monitor the individual's progress whilst they are off sick and liaise with the manager and HR Consultancy team to facilitate their return to work.

It is accepted that where support and encouragement has been given and concerns / poor performance continues, recourse to the Trust's Improving and management conduct policy may be appropriate.

Where staff do not identify a problem or fail to seek help, refuse to attend appointments or have been offered assistance to overcome alcohol or drug problems and refuse to co-operate and exhibit unacceptable behaviour, recourse to the Trust's & Managing Conduct policy or Performance and/or Attendance and Wellbeing policy may be appropriate.

2.1 Identifying the problem

There is no single characteristic, which identifies a person with a drug, alcohol or substance misuse problem, and indeed alcohol or drugs are only two of many possible reasons for deteriorating job efficiency. Some staff will seek help voluntarily, but others may not do this. In this case, if the following characteristics occur in combination or as a pattern over a period of time, alcohol or drug related problems may be indicated.

Below are some indicators for consideration:

ABSENTEEISM

- Multiple instances of unauthorised leave:
 - Excessive sick leave (including frequent self-certified sick leave)
 - Frequent Monday and or Friday absences
 - Excessive lateness, e.g. returning late from meal breaks leaving work early
 - Increasingly improbable excuses for absence.
- High accident rate at home or at work
- Difficulty in concentrating
- Spasmodic work patterns
- Alternative periods of high and low productivity – increasing general unreliability and unpredictability.

REPORTING TO WORK UNDER THE INFLUENCE OF ALCOHOL OR DRUGS

- Attending work in an obviously inebriated condition
- Smelling of alcohol
- Hand tremors
- Increasingly unkempt appearance
- Lack of personal hygiene

DETERIORATING JOB EFFICIENCY

- Missed deadlines
- Mistakes
- Poor decision making.

POOR RELATIONSHIPS AT WORK

- Over-reaction to imagined or real criticism
- Irritability
- Complaints from colleagues

- Borrowing money from colleagues
- Avoidance of manager or associates.

DISHONESTY AND THEFT

- Theft is considered as gross misconduct under the Trust's Improving and managing conduct policy for which action could be taken up to including dismissal.

2.2 Action to take

Having identified a pattern of deteriorating work performance or obvious signs of drug / alcohol / substance misuse, the following is recommended before raising the issue with the employee. You should consider the possible risks and courses of action and the most appropriate methods to deal with the situation.

Consider the following:

- The nature of the problem and possible causes
- Examine whether there might be other causes of work deterioration
- Do you suspect:
 - Drug
 - Alcohol
 - Other substance
 - Multiple substances
- Why do you suspect misuse? (Consider the characteristics listed in the section above)
- Has an incident or near miss occurred?
- Have there been similar behaviour / issues before?
- What are the employee's duties / responsibilities?
- What equipment do they use?
- Do they require a high level of concentration for their work?
- What risks are they posing to themselves and others?
- Managers should be aware that Drug and Alcohol problems can co-exist with other health issues.

Where practical it is recommended that you seek advice from your HR Consultancy in respect of intended course of action, having considered the above points.

If a member of staff is intoxicated at work they will need to be sent home immediately. Managers are responsible for considering the safety of the individual and will therefore need to determine the risks and issues associated with the member of staff being sent home, whilst intoxicated. Managers will also need decide on what course of action happens after this – depending on whether long term issue or one-off excess.

2.3 For further information about drugs and alcohol please check SolNet Wellbeing page.

Appendix B: Equality Impact Assessment (EIA)

Step 1: Scoping and Identifying the Aims

Service Line / Department	Occupational Health - corporate	
Title of Change:	Drug, Alcohol and substance misuse policy 3yrly policy review and updates	
What are you completing this EIA for? (Please select):	Policy	<i>(If other please specify here)</i>
What are the main aims / objectives of the changes	Updates in line with legislation, good practice guidance and Solent health and wellbeing strategy	

Step 2: Assessing the Impact

Please use the drop-down feature to detail any positive or negative impacts of this document /policy on patients in the drop-down box below. If there is no impact, please select "not applicable":

Protected Characteristic	Positive Impact(s)	Negative Impact(s)	Not applicable	Action to address negative impact: <i>(e.g. adjustment to the policy)</i>
Sex	x			
Gender reassignment	x			
Disability	x			
Age	x			
Sexual Orientation	x			
Pregnancy and maternity	x			
Marriage and civil partnership	x			
Religion or belief	x			
Race	x			

If you answer yes to any of the following, you MUST complete the evidence column explaining what information you have considered which has led you to reach this decision.

Assessment Questions	Yes / No	Please document evidence / any mitigations
In consideration of your document development, did you consult with others, for example, external organisations, service users, carers or other voluntary sector groups?)	Yes	
Have you taken into consideration any regulations, professional standards?	Yes	

Step 3: Review, Risk and Action Plans

How would you rate the overall level of impact / risk to the organisation if no action taken?	Low	Medium	High
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What action needs to be taken to reduce or eliminate the negative impact?			

Who will be responsible for monitoring and regular review of the document / policy?

Occupational Health and Wellbeing Service

Step 4: Authorisation and sign off

I am satisfied that all available evidence has been accurately assessed for any potential impact on patients and groups with protected characteristics in the scope of this project / change / policy / procedure / practice / activity. Mitigation, where appropriate has been identified and dealt with accordingly.

Equality
Assessor:

Michaela Tarrant

Date:

20th April 2021
