

# THE SCOTTISH AMBULANCE SERVICE



## **SUBSTANCE MISUSE POLICY**

Version 1.0

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## **1.0 Introduction**

- 1.1 Employers have a general 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. Staff also have a duty to co-operate with and implement their employer's policies in this respect.
- 1.2 This policy sets out the principles for managing issues around the misuse by employees of drugs, alcohol and other substances in order to ensure a fair, reasonable and consistent approach. It aims 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;
  - create a climate that encourages staff who may be misusing substances to come forward and seek help;
  - provide a framework to enable instances of misuse to be handled in an appropriate and consistent manner.
- 1.3 This policy is designed to promote the good health of all Service employees, to help protect staff from the dangers of alcohol and/or drug and other substance misuse and to encourage those with a problem to seek help. Early identification of dependency is more likely to lead to successful treatment.
- 1.4 This policy covers the use and misuse of intoxicating substances which include alcohol, drugs, prescription and over-the-counter medicines, solvents and other substances that could adversely affect work performance and/or health and safety.
- 1.5 This policy does not deal with social drinking where this has no effect on work performance or behaviour. Where there are effects on work performance or behaviour it is for management to decide whether to deal with this in line with Management of Conduct policy or within the framework of this policy.
- 1.6 This policy applies to all staff.

## **2.0 Aims and objectives**

- 2.1 To provide and maintain a safe work environment, free from the effects of the misuse of alcohol, drugs and other substances. 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.
- 2.2 To provide consistent and relevant guidelines for managers and employees regarding drug/substances misuse and alcohol problems.
- 2.3 To ensure that all staff fully understand that unauthorised use of drugs and other substances, legal or illegal, or being under the influence of alcohol is cause for investigation and may lead to disciplinary action, up to and including dismissal.

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- 2.4 To promote the rehabilitation of any employee who may have problems with alcohol, drug or substance misuse and is committed to accepting help.
- 2.5 To support the reduction of sickness absence levels.
- 2.6 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 Service.
- 2.7 To provide a framework for addressing issues that arise so that employees know how they can expect to be treated to ensure this treatment is consistent.

### **3.0 General Principles**

- 3.1 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 Service premises or at external locations.
- 3.2 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.
- 3.3 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.
- 3.4 Staff taking medication should seek advice on any adverse impact on work performance or behaviour, particularly with regard to safety. Advice from Occupational Health should be sought where appropriate particularly if it could have an impact on driving during the course of employment or clinical judgement.
- 3.5 Staff are encouraged to seek appropriate help if they have any alcohol or substance misuse problems. (See Appendix 2).
- 3.6 Staff are encouraged to urge colleagues to seek help if they know them to have a problem with drug, alcohol or substance misuse.
- 3.7 The Service 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 Services Management of Conduct policy. Under the Misuse of Drugs Act 1971, the Service 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.

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- 3.8 In the interests of staff and patients, if an employee knows or strongly suspects another employee is involved in substance misuse, they should bring this to the immediate attention of an appropriate manager.
- 3.9 Managers should ensure that staff are aware of the standards required in their area of work and it is the duty of managers to investigate any circumstances that they may become aware of or that are brought to their attention.
- 3.10 This policy is intended to complement any Professional Codes of Conduct or directives of professional staff organisations which relate to alcohol/substance misuse in the workplace. Such misuse may result in a member of staff requiring registration losing their registration or having limitations placed on their right to practise.
- 3.11 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 problem. Alcohol, drug or substances misuse is a health and social problem requiring treatment. However, there may be a long term effect on the professional capabilities of the individual.
- 3.12 Loss of driving licence due to a conviction for driving over the legal alcohol limit or being under the influence of drugs can have repercussions on employment. This would be considered in line with the Management of Employee Conduct policy.
- 3.13 The procedure guidelines on Alcohol and Substance Misuse (Appendix 1) provide managers with guidance on identifying, assessing and supporting employees with an alcohol or substance misuse problem.

### **4.0 Review of policy**

- 4.1 This policy and procedure (s) has been updated as part of continual improvement programme within the Service focusing on ensuring best practice in partnership with managers and staff representatives through a partnership working group. The policy will be formally reviewed on a continuing basis as part of this process, no later than the date on the front cover of this document.

## **APPENDIX 1**

### **Guidance for managers**

#### **1.0 Identifying the problem**

1.1 Alcohol/substance misuse problems may come to light in two ways:

- The employee may choose to seek help voluntarily. They can ask for confidential help from the counselling service, Occupational Health or may be referred to an outside agency.
- The employee's colleagues and/or supervisor/manager may identify a pattern of deteriorating performance or may detect obvious signs of alcohol/substance misuse.

1.2 No single characteristic exists to identify the problem but there are certain characteristics especially when occurring in combination or as a pattern over a period of time that may indicate an alcohol/substance misuse related problem (Appendix 3). There is a considerable responsibility on managers to be aware of potential signs and to take action.

1.3 Having identified a pattern of deteriorating work performance or signs of potential alcohol/substance misuse, the following action is recommended:

- Make a factual and accurate record of work deterioration as it happens – do not rely on memory;
- Be clear and precise and record nature of incident;
- Be objective and record actual events, not hearsay;
- Treat all documentation as confidential.

#### **2.0 Assessing the problem**

2.1 Before raising the issue with the employee, consider the possible courses of action and the most appropriate methods to deal with the situation. Consider the nature of the problem and possible causes i.e. examine whether there might be other causes of work deterioration e.g. lack of training, capability issues, organisational change; and do whatever possible to alleviate the situation.

2.2 Consideration of the above facts will help when deciding upon a course of action. We would encourage line managers to discuss and seek advice from their local HR contact at this stage and to ensure any action is taken in accordance with HR policy and guidelines.

### **3.0 Discussing the problem with the staff member**

#### 3.1 When preparing for the meeting, managers should:

- Ensure the meeting will be private.
- Have all the documentation ready which is relevant to the member of staff's deteriorating work performance.
- Have information on referral agencies prepared.
- Plan the structure of the interview in advance.
- Inform the member of staff of their right to be accompanied by a trade union representative or work colleague. If the staff member wishes alternative representation, such as a family member or friend, this should be discussed with the Head of Staff Governance.

#### 3.2 In the meeting:

- Restrict the discussion to issues concerning work attitude and performance if alcohol/drugs is a factor – describe the behaviour/actions you have noted remaining as factual as possible.
- Ask the member of staff directly if they have a drug/alcohol problem and if this is acknowledged offer support.
- Discuss an Occupational Health referral with the staff member.
- Agree a plan of action with the member of staff – this may include time off for medical attention, counselling or rehabilitation.
- If the employee rejects an offer of assistance either because they deny that there is a problem or because they do not wish assistance to resolve an acknowledged problem, the manager should advise the employee that the situation and their performance will be kept constantly under review and be clear about what standards they are expected to meet. Where it is identified that the risks to the employee or other staff/patients are high, it may be appropriate to consider suspension after a risk assessment has been completed.
- The staff member should also be made aware that further unsatisfactory behaviour will be dealt with as a performance/misconduct issue under the Service Managing Employee Capability policy.

#### 3.3 End the meeting with an agreement on specific action:

- An Occupational Health referral
- Provide details of Employee Assistance Programme
- An understanding of what to improve
- An understanding of what the next step is
- A reasonable time limit for improvement
- A detailed written record of the interview

#### 3.4 Remind the member of staff that discussion of the nature of the problem will be kept strictly confidential and confined to the individual, their manager, Human Resources and Occupational Health (as appropriate).

#### **4.0 Support for staff member**

- 4.1 If an employee acknowledges that there is a problem and they would like support a referral to Occupational Health should be discussed and the referral should include full details of the staff member's health, what role the staff member undertakes and any other appropriate information. If an employee denies having an alcohol/substance problem and gives no reason or explanation for their poor performance, or refuses to seek help or follow advice, the matter will be dealt with through the Service Managing Employee Capability or Management of Employee conduct policy.
- 4.2 Advice should be sought on what the nature of the health problem is; how this affects the individual's ability to carry out their role; what support can be provided by the Service, including any adjustments that may be required.
- 4.3 If a staff member is on sick leave as a result of this health issue, then the absence should be managed in line with the Attendance Management policy.
- 4.4 In some circumstances, depending on the nature of the staff member's role and the nature of the problem, it may be deemed necessary to discuss with the staff member drug or alcohol testing at regular intervals during their recovery/treatment. Testing must be justified and appropriate given the nature of the staff member's role. This would be conducted in conjunction with Occupational Health and only with the agreement of the staff member. This will not be random testing.

If a staff member fails drug or alcohol testing then this should be considered in line with 5.4 below.

- 4.5 For staff undergoing treatment, reasonable time off to attend appointments will be granted.
- 4.6 Staff may be considered to have a disability in line with the Equality Act 2010, for reasons related to a dependency on alcohol or drugs. While alcoholism and drug addiction by themselves are not covered, they may result in or be indications of other conditions that are covered. Managers should take medical advice on any 'consequential or related' illness and consider all reasonable adjustments

#### **5.0 Follow up**

- 5.1 Managers must ensure that regular meetings are held with the staff member during their period of recovery/treatment to ensure appropriate support continues and that ongoing monitoring continues.
- 5.2 If the staff member shows no improvement in performance after a reasonable time period, or there are issues of conduct, then a formal process in line with Managing Employee Capability or Management of Employee Conduct may be necessary.

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- 5.3 Every effort should be made to ensure a staff member retains their present role. If where doing so this may undermine the rehabilitation process or risk patient or staff safety, the Service will make every effort to find suitable alternative employment in line with the Redeployment policy.
- 5.4 There may, however, be instances where an employee is receiving treatment but no suitable alternative to their current role is available and the risk to themselves and/or others unacceptably high. In this case, the Managing Employee Capability policy should be followed.

## **APPENDIX 2**

### **Specialist help organisations**

There are many organisations throughout Scotland providing support and advice, below are a few of these:

#### **General**

National Drugs Helpline:  
Tel: 0800 77 66 00

Alcohol Focus Scotland:  
Tel: 0800 7 314 314  
[www.alcohol-focus-scotland.org.uk](http://www.alcohol-focus-scotland.org.uk)

Scottish Drugs Forum:  
Tel: 0141 221 1175; 0131 221 9300  
[www.sdf.org.uk](http://www.sdf.org.uk)

Turning Point Scotland:  
Tel: 0141 427 8200  
<http://www.turningpointscotland.com/contact/>

#### **Glasgow**

Glasgow Council on Alcohol (GCA)  
<http://www.glasgowcouncilonalcohol.org/contact-us/>

Drumchapel Addiction Centre  
7-19 Hecla Square  
Glasgow  
G15 8NH  
0141-274 4346

#### **Edinburgh and Lothians**

West Lothian Drug and Alcohol Service  
Tel: 01506 430225  
<http://www.wldas.com/>

Drug Prevention Group  
Tel: 0131 553 2841  
<http://www.charitychoice.co.uk/drug-prevention-group-6176>

#### **Dundee**

Dundee focus on alcohol  
Tel: 01382 456126  
<http://www.dundeepartnership.co.uk/content/focus-alcohol>

#### **Aberdeen**

Drugs action Aberdeen  
Tel: 01224 594700  
<http://www.drugsaction.co.uk/>

#### **Highland**

**Addiction counselling Inverness**  
Tel: 01463 220995  
<http://www.addictionscounsellinginverness.org/Other-Services---Links.html>

### **APPENDIX 3**

#### **Indications of the presence of a substance misuse problem**

Identifying people in the workplace who may have problems related to alcohol or drug/substance misuse is not easy. Listed below 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:

- Repeated patterns of depression, or fatigue from sleeplessness, which last two to three days
- Erratic performance
- Unusual irritability or aggression
- Overconfidence
- Inappropriate behaviour
- Sudden mood changes from extreme happiness to severe depression
- A tendency to become confused
- Reduced productivity
- Increased or excessive absenteeism
- Poor time-keeping
- Deterioration in relationships with colleagues or management
- Personal condition e.g. smelling of alcohol/under the influence of alcohol during working hours, hand tremors, lack of attention to personal appearance