

Human Resources

SUBSTANCE MISUSE

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South Yorkshire
Fire & Rescue
WORKING FOR A SAFER
SOUTH YORKSHIRE

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INTRODUCTION

ORGANISATIONAL AIMS

1. South Yorkshire Fire and Rescue (SYFR) is committed to the safeguarding, so far as is reasonably practical, the health, safety and welfare of its employees, and that of contractors, partners and the general public who may be affected by the organisation's operations. To complement its responsibilities under Health and Safety at Work and other relevant legislation, SYFR have introduced this substance misuse policy and associated employee awareness programme.
2. SYFR wishes to create and support a healthy and efficient working environment, not only through its obligation to comply with the Health and Safety at Work Act 1974, and the Misuse of Drugs Act 1971, but also through a supportive and rehabilitative approach towards alcohol, drugs and substance abuse problems. Misuse of alcohol, drugs and substances, which may or may not result in absence from work, not only has a significant effect on the member of staff, but can also impact on the operating capability of the organisation, the safety of its staff and the safety of South Yorkshire as a community. Therefore through this policy the organisation aims to help those affected with alcohol, drugs and substance related problems by offering support and also encouraging treatment where possible.
3. This policy covers all employees and contractors working for or on behalf of SYFR and includes the requirement not to be using or be under the influence of a substance during working hours.
4. This policy requires that alcohol, drugs or solvents are prohibited both during working hours and at other times where the effects are manifested during working hours. SYFR is committed to the creation and maintenance of a health and safety culture, based on welfare principles and achieved by working in partnership with its employees and representative bodies, by the allocation of adequate resources and comprehensive awareness raising and training programmes.
5. Collaboration with staff and their representative bodies, and information provided to contractors in respect of substance abuse, will contribute to the creation and maintenance of a safe working environment for all.
6. SYFR values the diversity of its workforce and respects the right of its employees to a personal and social life outside of work and to maintain and appreciate work/life balance. SYFR does, however, also recognise that the physical, emotional and psychological effects of the use or abuse of substances can inadvertently be brought into the workplace. This policy provides a framework to protect the safety, health and welfare of all employees and those with whom they come into contact and provides support for these employees who require help or advice in respect of substance abuse.
7. Prior to the implementation of this policy there will be an amnesty period during which employees who believe they may be misusing substances can seek counselling or support prior to the provisions of the policy becoming applicable.
8. The allocation of duties for safety matters and particular arrangements that are made

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to implement the policy are included in this Substance Misuse Policy and are also referenced in the Health and Safety Policy.

LEGAL REQUIREMENTS

Health and Safety at Work etc Act 1974

9. Under Section 2 (3) of the Health and Safety at Work etc Act 1974 (HSWA) there is a requirement for all companies or organisations who employ more than 5 persons to have a written statement of General Health and Safety Policy.
10. This Substance Misuse Policy is part of the sector's Health and Safety Policy, as it constitutes a requirement of HSWA. Section 2(1) of HSWA states that it is the general duty of both established and temporary employers to "ensure, so far as reasonably practicable, the health, safety and welfare at work of all employees".
11. Section 2 (2) (c) states that the employer has to provide "such information, instruction, training and supervision as is necessary to ensure, so far as is reasonably practicable, the health and safety at work of employees".
12. Section 7 (a) deals with the duties of the employee and states that it is the duty of every employee "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".
13. Section 7 (b) states that there is a duty on every employee to co-operate with his employer "so far as is necessary to enable that duty or requirement to be performed or complied with".

Misuse of Drugs Act 1971

14. The Misuse of Drugs Act 1971 Section 5 (1) states that "...it shall not be lawful for a person to have a controlled drug in his possession".
15. Regarding miscellaneous offences involving controlled drugs, Section 8 of the Misuse of Drugs Act 1972 states that the occupier of premises is committing an offence if "he knowingly permits or suffers (such) activities to take place on those premises". These activities relate to producing, supplying (or attempting to supply), preparing or taking controlled drugs.
16. Section 21 of the Misuse of Drugs Act 1971 states that "Where any offence under [the] Act committed by a body corporate is proved to have been committed with the consent of, or connivance of, or to be attributable to any neglect on the part of, any director, manager, secretary or other similar officer of the body corporate, or any person purporting to act in any such capacity, he, as well as the body corporate, shall be guilty of that offence and shall be liable to be proceeded against accordingly".

Management of Health and Safety at Work Regulations 1999

17. Regulation 3 of the Management of Health and Safety at Work Regulations 1999 (MHSWR) requires that a "suitable and sufficient" risk assessment be undertaken by employers to identify those at risk from the organisations operations. This includes

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the requirement to assess the possible risks created by employees/contractors who may have taken controlled drugs or alcohol. Appropriate health surveillance is also required by Regulation 6 where risks to health and safety have been identified by the risk assessment.

Road Traffic Act 1988

18. The Road Traffic Act 1988 states that it is an offence to drive or attempt to drive a motor vehicle while being unfit through drink or drugs.

Human Rights Act 1998

19. The Human Rights Act 1998 aims to ensure that the rights of an individual as well as that of the community are protected. This means that one individual's rights may often have to be balanced against another's.
20. Article 8 of the Human Rights Act 1998 covers an individual's right to private life and family. A Substance Misuse Policy is justified where public safety is at stake. The Human Rights Act 1998 also makes allowances for interferences where the aim is for the protection of health of others as determined by other existing Legislation.
21. The organisation will therefore undertake substance testing on the basis that the health, safety and welfare of employees, contractors or others may be jeopardized by an individual through the misuse of substances.

Data Protection Act 1998

22. Attendance at training or awareness sessions and the results of any drug or alcohol testing will be recorded on the employee's personal file.
23. The principles of data protection will apply in all matters pertaining to record keeping.

MEDICAL CONSIDERATIONS

24. It is known that substance misuse affects certain brain functions leading to lack of judgement, self-control and co-ordination, and also a loss of inhibition. All these factors can be a contributory cause of accidents in the workplace. Accidents can result in personal injury, injury to other employees, contractors, temporary staff, customers, visitors to site and the general public as well as damage to plant and equipment.
25. Misuse of substances can lead to a disruption of services which can undermine health and safety management objectives. The organisation recognises that substance misuse can lead to compound health risks especially when working with potentially dangerous equipment and/or substances.
26. SYFR recognises its responsibilities under the Disability Discrimination Act (DDA) the implications of which are as follows:-

The definition of disability under the DDA does not include addiction to alcohol or to any other substance, unless the addiction was a consequence of the administration of

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medically prescribed drugs or other clinical treatment. Addiction is not a disability itself so there is no obligation upon the employer to make adjustments or adaptations to the workplace or to duties of work. It is, however, possible that some adverse health effects may be caused by substance misuse, which can in themselves lead to medical conditions which may constitute a clinical condition recognised under the DDA.

CONSIDERATIONS FOR SYFR PERFORMANCE

27. SYFR recognises that the misuse of substances by employees, can adversely affect the performance of the organisation. Performance may be affected by increased absenteeism, and/or accidents: damage to property, equipment and vehicles: possibility of injury to employees and those with whom they come into contact.
28. The introduction of the substance misuse policy will safeguard the health, welfare and safety of employees and reduce the risk to those with whom they come into contact.

POLICY STATEMENT

29. SYFR has a responsibility towards employees to provide a safe and healthy working environment and recognises that this may be jeopardised by those who misuse alcohol, drugs or solvents within the working environment, or in a way that may affect themselves and others at work. SYFR aims to ensure its services and corporate interests are not compromised as a consequence of any such misuse.
30. SYFR will take appropriate action to protect the health, safety and welfare of its employees and of third parties with whom the organisation comes into contact.

SCOPE

31. This policy applies to all employees and prospective employees. The policy also applies to employees of agencies undertaking work for SYFR.

RESPONSIBILITIES

RESPONSIBILITIES OF THE EMPLOYEE

32. To comply with the provisions of the substance misuse policy employees have the following responsibilities and duties:-
 - To familiarise themselves with the policy and guidance information.
 - To be aware of their individual shift patterns and to ensure they present themselves during these times as free from the influence of any substances (other than prescribed medications declared to the Occupational Health Unit).
 - To be aware of their individual tolerance levels to alcohol.

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- To be aware of the drink/drive regulations if they drive to/from work or in the course of their duties.
- To refrain from the consumption of alcohol during meal breaks or split shifts.
- To refrain from taking illegal drugs or other banned substances.
- To inform the Occupational Health Unit of any prescribed medication they are taking.
- To check with their GP or dispensing pharmacist of any prescribed medication that may affect their capacity to safely and effectively undertake their duties in the workplace.
- To inform the Human Resources Section if they consider they have a disability.

RESPONSIBILITIES OF THE EMPLOYER

- To inform all employees of the substance misuse policy
- To provide training for management and supervisors in substance misuse testing.
- To provide counselling and welfare support for employees who require assistance with substance dependency
- To ensure all employees are "fit" for the duties they undertake and to test employees for substance abuse on a "with cause" basis.
- To ensure contractors, suppliers and/or visitors refrain from the consumption of alcohol whilst on SYFR premises or whilst engaged on SYFR business.
- To understand the provisions of the DDA and ensure compliance with it.

DEFINITIONS OF SUBSTANCES COVERED BY THE POLICY

33. This Substance Misuse Policy covers all types of substance misuse. This includes the misuse of substances, which are categorised as illegal drugs, legal drugs and medicines/restricted drugs.

Illegal Drugs

34. These can be categorised into three categories - depressants, stimulants and hallucinogens. These substances, termed as "controlled drugs" under the Misuse of Drugs Act 1971, are classified as either Class A, B or C (as defined in Schedule 2 of the Act).

Depressants

35. Opiates such as heroin, morphine and opium are in this category and are either sniffed, swallowed, smoked or injected. These drugs are also classed as narcotics and are classified as Class A. Use of these drugs can lead to increased tolerance

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leading to both physical and psychological dependency. Sustained use of these substances can cause a user to centre his lifestyle around the drug's procurement and use.

36. Cannabis is usually smoked or eaten and short-term effects can lead to loss of concentration and slowed reactions leading to impaired work performance. Longer-term effects can result in psychological dependence, respiratory problems and lung cancer.

Stimulants

37. Amphetamines are sniffed, swallowed or injected. These increase pulse rate and blood pressure. Use can result in anxiety and panic and increasing risk of both emotional and physical dependence with increasing use. Chronic effects can also lead to a reduced resistance to infection and a loss of appetite leading to weight loss.
38. Cocaine, and its derivatives, is either sniffed, smoked or injected. Use can lead to psychosis and delusions. Repeated use can lead to high risk of dependence. Extreme effects can be encountered when using cocaine when prepared as crack such as heart failure or heart attack.

Hallucinogens

39. These can include lysergic acid diethylamide (LSD) and hallucinogenic amphetamines (MDMA, Ecstasy). These drugs are generally ingested and effects can range from anxiety and panic to extreme perceptual disorders leading to reckless behaviour.
40. Phencyclidine (PCP, angel dust) can be sniffed or smoked and can lead to irregular breathing, hallucinations in the short term and severe depression and psychosis coupled with violent behaviour.

Legal Drugs

Barbiturates

41. Barbiturates are swallowed as capsules or injected. These can produce a high risk of dependence especially when mixed with other drugs or alcohol. These are only legally available on medical prescription through a Medical Practitioner.

Hallucinogens

42. Magic mushrooms can be eaten fresh or prepared by drying or brewing like tea for swallowing. The hallucinogenic effects shown are similar to those given by LSD.

Solvents

43. Solvents are volatile drugs that can include cigarette lighter fluids (and associated hydrocarbons), cleaning fluids, adhesives and aerosol preparations. Misuse of these items can lead to severe intoxication and disorientation with increasing risk of heart and brain damage with increasing use.

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Medicines/Restricted Drugs

44. Prescribed drugs can be misused. These are drugs that have been prescribed by a Medical Practitioner or have been obtained through a pharmacist, which can have considerable health risks if misused, especially if used in conjunction with other types of drugs.
45. Examples of medicines/prescribed drugs can be Tranquillisers such as Benzodiazepines (e.g.: Temazepam, Valium (Diazepam), Librium, Activan, Serenid, Normisson), which can be swallowed or injected. These drugs have severe risks of both physical and psychological dependence.
46. Other examples can be anti-depressants, sleeping pills and some medicines such as remedies for coughs and colds. Also included is the misuse of anabolic steroids.

Alcohol

47. All drinks containing alcohol such as beer, wine and spirits, including so-called "low alcohol" products, are included in this category.
48. Alcohol is absorbed into the bloodstream and is carried to all parts of the body including the brain. It affects the part of the brain, which controls judgement and physical co-ordination. Excessive and regular consumption can result in dependency and can lead to the medical condition of alcoholism based on the tolerance to the alcohol and the inability by the individual to limit intake. Nausea and vomiting can occur from an excess of alcohol and very large doses can lead to poisoning or death from suffocation.
49. Chronic effects of heavy, sustained use of alcoholic products can lead to alcoholic hepatitis, cirrhosis, liver cancer and other liver diseases. The risks of other diseases such as coronary heart disease, strokes and high blood pressure are also compounded by high usage. Alcoholics face a higher risk of developing stomach complaints such as peptic ulcers as well as suffering from psychological conditions such as anxiety, depression and irreversible mental deterioration.

Intended Use

50. For information SYFR are screening at or above the levels sanctioned below:

a.	Cocaine	300ng/ml
b.	Amphetamine	1000ng/ml
c.	Methamphetamine	1000ng/ml
d.	Cannabis	50ng/ml
e.	Opiates	2000ng/ml
f.	Benzodiazepines	300ng/ml
g.	Anabolic Steroids	N/A

NB: Please note that Anabolic Steroid testing will only take place if a manager or other has cause/reason and testing must be with agreement from the duty Area Manager. Drug and alcohol testing will still take place in this situation. The detections of anabolic steroids will be confirmed at the laboratory, as will the type of

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steroid e.g. asthma medication etc

HOW TO RECOGNISE ABUSE OF SUBSTANCES

51. The abuse of substances by employees may come to light in various ways. Employees and management should be aware that the following characteristics, especially when arising in combinations may indicate the presence of alcohol or substance related problem:-

High Accident Level

- At work.
- Elsewhere (e.g. driving, at home).

Absenteeism

- Instances of unauthorised leave.
- Unscheduled short-term absences, with or without explanation.
- Strange and increasingly suspicious reasons for absence.
- Frequent absences.
- Excessive level of sickness absence.
- Unusually high level of sickness (e.g.: for colds, flu, stomach upsets, etc).
- Leaving work early.
- Lateness (especially on returning from lunch).

Work Performance

- Difficulty in concentration.
- Individual tasks take more time.
- Problems with remembering instructions or own mistakes.

Behaviour

- Irritability.
- Depression.
- General confusion.

Misconduct

52. An employee's alcohol or drug problem may come to light as a mitigating factor in a disciplinary interview. It may be treated as a mitigating factor for certain "less serious" disciplinary offences such as poor time keeping or lateness, provided the person is prepared to undergo treatment.

SELF REFERRAL

53. In some instances, employees may seek help and advice themselves. Provision is made to ensure that facilities are available to ensure that each case is treated in the strictest confidence.

54. Employees who recognise that they may have an alcohol or substance misuse

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problem, or are at risk of developing one, are encouraged to refer themselves to the Human Resources Section for confidential help.

55. Employees may also talk in confidence to the Human Resources Section and/or their trade union representative, who may approach management or the Human Resources Section on their behalf
56. Employees may observe any or all of the above or may witness another employee taking alcohol or other substances whilst at work. Employees may also smell alcohol on the breath of a colleague or witness slurred speech or other behaviour which gives them cause for concern. In these circumstances, employees should not cover up for a colleague whom they know to have a suspect abuse problem as collusion may result in detriment to the affected employee or pose a risk to the welfare and safety of others. Employees who suspect a colleague has a substance misuse problem or is "unfit" for work should encourage that individual to self refer to the Human Resources Section or raise the matter with their manager.
57. Management will ensure that in the event of any accident, incident or occurrence where there are grounds to suspect that an employee may have been under the influence of substances a "with cause" test will be carried out.
58. Information on substance misuse is available from the Human Resources Section.

TYPES OF TESTING

59. SYFR employs a number of methods by which to undertake testing:-

Pre-Employment Testing

60. All prospective employees will be required to provide a response to questions related to the misuse of substances as part of the Pre-Employment Health Investigation by the Human Resources Section. Irrespective employees who fail a pre-employment urine drug screen may have their sample analysed at their own cost.
61. Prospective employees who fail a pre-employment urine drug screen can have their sample analysed by an appointed laboratory provided the cost is borne by the applicant. In these circumstances an appointed doctor will ask a SYFR manager to contact an appointed External Collection Service operated by Grendonstar Distribution Ltd to conduct urine drug 'chain of custody' collections at a suitable SYFR location.
62. 'Laboratory Analysis of Pre-employment Urine Drug Samples - Appendix G' explains this procedure.
63. If an applicant refuses a pre-employment drug test or fails to attend their appointment for substance testing then their application will be discontinued at this stage.
64. Applicants that test positive for drugs or alcohol at pre-employment testing will not have the opportunity to re-apply to SYFR in the future.

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For Cause Testing

65. In some of the cases listed below this process will automatically be undertaken as part of the current accident investigation procedure. The following list, which is not definitive, provides examples of a number of situations where it is foreseen that SYFR can invoke “For Cause” testing:
- a. Any accident which has resulted in death or major injury to an employee or member of the public.
 - b. Any accident, where an employee or member of the public is injured as a result of an action by an employee, which requires medical treatment (other than an accident which requires basic first aid).
 - c. Any accident or incident where there is non trivial damage to property, equipment and/or products, main body vehicle strikes – without specific reason and untoward observation. This will include “near misses” and “dangerous occurrences” as defined and requiring notification under the Reporting Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 1995. Managers should ensure that where testing has not taken place the mitigating circumstances are clearly stated on the accident form.
 - d. Any accident or incident which involves the use of any mechanical handling equipment (e.g. pallet truck, fork lift truck, etc).
 - e. After discovery of illegal substances or empty alcohol containers on SYFR Property
 - f. Reasonable suspicion relating to items items such as:
 - i. Abnormal behaviour (e.g. aggression, euphoria, hyperactivity or lethargy and tiredness for that person).
 - ii. Difficulty in walking normally.
 - iii. Incoherent speech.
 - iv. Smell of alcohol.
 - v. Bruising and/or injection marks.
 - vi. Third party observations from employees, contractors, visitors etc.

NB: If an employee is taken to hospital following an accident/incident permission must be obtained from the doctor before any testing is carried out.

Follow-up Testing

66. An employee who has been tested positive for drugs or alcohol or who has voluntarily

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come forward for confidential assistance for a drugs or alcohol problem may be subject to further periodic testing for a period of 12 months. SYFR will determine the period of time between each test administered at random in liaison with GDL, and will be considered on a case by case situation.

67. The testing will only be done on a 'case by case' basis following medical investigation to ensure that any prescribed course of counselling or rehabilitation is being followed (e.g. where a candidate has completed a counselling or rehabilitation programme and it is necessary to check progress and compliance).
68. Follow up testing is carried out in all instances where an employee tests positive between 0.5‰-0.79‰ and a course of mandatory counselling has been completed.

Prescribed/Non-Prescription Medicines

69. The disclosure of prescribed/non-prescription medicines is optional however employees have a duty under the Health & Safety at Work Act to inform their employers if they are taking medication which may affect their safety at work. If an employee feels their medication may or is affecting their safety at work they must provide this information to the head of Human Resources.
70. This information will be dealt with in the strictest confidence. This will enable these substances to be discounted from a sample analysis. Complete details of the medication involved need to be submitted using the 'Medication Advice Form – Appendix E'.
71. Any medicinal advice given by a personal Medical Practitioner should be disclosed to the Head of Human Resources or the Transactional HR Manager. A confidential record is then made concerning the name of the drug involved, the time and date of the enquiry and the result of the Medical Practitioner's advice.
72. It is important to note that where an individual is prescribed medicine by a Medical Practitioner or pharmacist, SYFR reserves the right to ensure that the medicines being taken will not influence safe working.
73. Where it is considered to do so, the person may, for the safety of others and themselves, be suspended from work on medical grounds.

Return to work will only be considered upon receipt of a written clearance from the organisations Medical Officer and a review of the risk. The latter may include an independent assessment by a third party expert.

ALCOHOL TESTING

Introduction

74. There are different methods of testing for alcohol in the body. Testing for alcohol generally relies on breath testing. To dispel any doubts over the validity of the testing methods, SYFR uses methods of testing that are concurrent with the methods employed by the British police forces and also approved by the Home Office.

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75. SYFR uses the AT-6810 electronic breath test device and breathalyzer disposable testing device, manufactured to Home Office approved standards. The electronic breath-alcohol testing device gives a direct ‰ BAC reading. Further details are given in the “Instructions for Use” information supplied with the devices by GDL.
76. The breath-alcohol testing devices are approved worldwide to indicate 0.8‰ Blood Alcohol Concentration (BAC) (0.8‰ being the current UK drink driving limit).
77. The SYFR limit is 0.8‰; this is given in Appendix A and is inline with current legislation and the drink drive limit. SYFR will notify all employees if a change in the levels at which testing is carried out are to be considered. For example, the latter could be due to changes in legal requirements and industry best practice.

Alcohol Testing Procedure

78. The SYFR Alcohol Testing Procedure is as follows:
 - a. The employee or contractor is informed that they have been identified to be breath tested for alcohol.
 - b. The employee or contractor attends a suitable location giving aural and visual privacy, where the breath test is to be administered.
 - c. The employee or contractor may be accompanied by a witness if they choose to be but this must not delay the administration of the test.
 - d. The employee or contractor is provided with a Donor Information Sheet, which explains in detail the testing procedure.
 - e. The employee or contractor is then required to sign a consent form regarding this impending test (Refer to Appendix C).
 - f. The breath test is administered according to the instructions.
 - g. If the breath test is **negative** i.e.: Indicating a zero reading, then the individual will be free to return to work.
 - h. If the breath test indicates a reading greater than zero, then the individual is asked to wait 20 minutes when a second breath test is administered.
 - g. The results of the second breath test are taken to be definitive.
 - h. If the second test is **positive** (i.e.: indicating a reading at or above the agreed alcohol level - see Appendix A) then the individual will be suspended with pay awaiting possible disciplinary proceedings. The employee will be escorted off the premises and suitable arrangements made for travel home. Employees or contractors will be advised they should not drive their own vehicle and that alternative travel arrangements can be made. If they choose to drive the vehicle then the police will be informed.
 - i. Evidence shows that when people have even a small amount in their blood, their ability, performance and judgement are impaired. This creates unacceptable risks

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to SYFR. Therefore if the second test is below the alcohol limit of 0.8‰ but between 0.5‰-0.79‰, SYFR reserves the right to require the employee to fulfil a course of mandatory counselling and undergo follow up testing.

- j. Where the most senior person on a site is considered to be in contravention of the Substance Misuse Policy, either for cause or suspicion, a responsible person onsite will refer the matter to the individual's immediate superior who will make the necessary arrangements for the individual to be tested.
- k. If an individual refuses to give a breath specimen the individual is informed that such a refusal is a failure to comply with this Policy and, as such, may invoke the Disciplinary Procedure.

DISCIPLINARY PROCEDURE

79. The disciplinary Procedure may be invoked the employee:

- Tests positive with a breath-alcohol device (confirmation by a second test) at or above SYFR limit.
- Consumes alcohol while at work or on SYFR premises.
- Declines to give a sample for testing when requested under "with cause" conditions.
- Provides a sample but refuses to sign the declaration form.
- Deadlines to undertake an approved course of treatment for a substance misuse problem or discontinues the treatment before completed.

SUSPENSION

80. Where suspension has been necessary due to an employee recognising that they may have an alcohol or substance misuse problem through their admittance and has sought help from SYFR, the employee will remain suspended until the initial assessment by a counsellor has taken place. The suspension may be lifted dependant on the information received from the counsellor. The employee will be invited to a meeting to discuss the outcome.

81. Where suspension has been necessary due to an employee being tested under 'for cause testing', suspension will be lifted dependant on the outcome of a disciplinary hearing.

TESTING BEYOND NORMAL WORKING DAY

82. Where for cause testing is required and this is nearing the end of an employee's normal working day or shift, the employee should automatically be tested for alcohol whilst still at work and will then be requested to remain at work until the drug tester is available. In instances where this may take the employee past their normal finish time the employee will be entitled to claim paid overtime.

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83. SYFR recognises that in some circumstances it may not be possible for the employee to remain at work past their normal finish time for the drug tester due to other commitments i.e. childcare. Where this situation arises the employee must give an alternative address/venue that the manager/on duty officer or HR can attend with the tester. (This should not be a pub or anywhere with a bar). The employee will be entitled to claim paid overtime.
84. Where an employee refuses to either remain at work or provide an alternative address/venue without a compelling reason it will be deemed that the employee declines to give a sample for testing when requested under "with cause" conditions and therefore the disciplinary procedure will be invoked.

COUNSELLING AND REHABILITATION

85. If an employee admits to a problem with alcohol or whether it is identified as a requirement of the Disciplinary Procedure, SYFR can arrange to provide employees with counselling.
86. Access to counselling is through Transactional Human Resources Section.

Alcohol Relapse

87. Where any employee having received treatment suffers a relapse, this may be considered to be misconduct.
88. Medical advice may be sought to determine how much further treatment or rehabilitation time may be required to affect full recovery. This treatment will be entirely at the SYFR's discretion.

Alcohol Recovery Unlikely

89. If, after an employee has received treatment, recovery seems unlikely, then SYFR may have to consider a capability termination.

DRUGS TESTING PROCEDURE

Introduction

90. There are different methods for testing for drugs in the body. Testing for drugs of misuse depends on the collection of urine samples for analysis which can be achieved by the use of a portable testing kit for preliminary screening or the sample can be sent to an approved laboratory for analysis.
91. To dispel any doubts over the validity of the testing methods SYFR uses methods of testing that are currently recognised throughout industry. SYFR uses Drug Check disposable drug testing kits provided by GDL for testing certified by the American Food and Drug Administration (FDA) and a NAMAS accredited Service approved laboratory for confirmation of samples.

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92. The disposable drug testing kit is also set to the established Substance Abuse and Mental Health Services Administration (SAMHSA) cut-off levels (mandatory reference guidelines) to avoid any risk of false positive results by environmental exposure. SYFR recognises that these methods are the current best practices and best available technology with which to implement the Policy.
93. All drug testing will be conducted by an appointed External Collection Service operated by GDL who provide competent persons especially trained in urine drug testing.
94. At present, the Drug Testing Procedure involves up to six stages depending on whether a positive result is obtained, all strictly controlled by a process referred to as "Chain of Custody". The stages involved are summarised here:
 - a. Sample Collection
 - b. Adulteration Testing
 - c. Preliminary Screening
 - d. Confirmatory Analysis
 - e. Reporting of Results
 - f. Medical Review.

Sample Collection

95. "Chain of Custody" is the name given to the procedures that are employed to ensure that a sample travels in an intact and secure manner from the donor to the laboratory and all the way through the laboratory process and up to, and including, the reporting of the laboratory results and medical review.
96. The individual will be asked to donate a sample of urine for Preliminary Screening using the procedures for sample collection given by SYFR approved laboratory.
97. The donor will witness the sample collection and also the record keeping and identification procedure for the sample. This is the only stage of the procedure that the donor will witness so it is important that the collection is undertaken properly and under the correct supervision.
98. An appointed External Collection Service operated by GDL provides Competent Persons especially trained in the sample collection and the "Chain of Custody" process.

Adulteration Testing

99. The whole procedure will be carefully witnessed to prevent adulteration or substitution of other substances by the donor. A small quantity of the sample urine is poured into a second drug free collection cup and will be tested immediately for adulteration by

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inspection of colour, temperature, etc. The original urine sample container will be sealed in front of the donor.

Preliminary Screening

100. Competent persons will test the urine sample in the second collection cup using the disposable drug testing kit. If the sample proves to be negative then the procedure will be terminated, the sample disposed of and the result recorded as being negative. If the sample proves to be positive then the sealed sample will undergo further analysis by the approved laboratory.

Confirmatory Analysis

101. If the sample proves to be positive the original sealed urine sample container is opened and the urine is divided and placed into two vials, which are uniquely labelled and sealed with tamper evident seals. The two sample vials will be sent to the approved laboratory for confirmatory analysis.
102. The laboratory will firstly ensure that the sample vials have not been tampered with to confirm the "Chain of Custody". One of the sample vials is then opened for laboratory preliminary analysis to exclude adulteration and then the sample is subject to extensive analysis to screen for the range of drugs using immunoassay techniques. The second sample vial will be retained in storage by the laboratory for reference purposes.
103. If the approved laboratory immunoassay tests prove positive then specific methods are then used to determine the sample contents (these being Gas Chromatography and Mass Spectrometry). These methods are used as part of the confirmatory analysis procedure.

Reporting of Results and Medical Review

104. All stages of the analysis are carefully monitored by SYFR approved laboratory toxicologists. Once the results are known then they will be reported to the Medical Review Officer, who will interpret the results of the analysis, which will be subsequently and confidentially reported to the relevant SYFR representative.

Drug Testing Methods

105. Drug testing methods:
 - The employee or contractor is informed that they have been identified to be urine tested for drugs.
 - The employee or contractor attends a suitable location giving aural and visual privacy, where the urine sample is to be collected.
 - The employee or contractor may be accompanied by a witness (e.g. a trade union safety representative or nominated employee, if required).
 - The employee or Contractor is provided with a Donor Information Sheet, which

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explains in detail the testing procedure.

- The employee or Contractor is then required to sign a Consent Form regarding this impending test (Refer to Appendix D).
 - The urine sample is given by the donor to the competent person (via a special container).
 - The competent person, after dividing the sample into two portions, will test one portion by various methods to ensure that adulteration has not occurred.
 - If ascertained that adulteration has occurred then this may constitute a breach of the Disciplinary Procedure.
 - If an individual refuses to give a urine sample the individual is informed that such a refusal is a failure to comply with this Policy and, as such, may invoke the Disciplinary Procedure.
106. The sample will be tested by the Competent Person for the 6 most common groups of drugs of misuse using the disposable immunoassay technique:
- If the disposable immunoassay result is **negative** (refer to the instructions for use) then a photocopy of the result will be taken to show the result. The individual will then be asked to sign a record and will then be free to return to work.
 - If the disposable immunoassay result is **positive** (refer to the instructions for use) then a second, more comprehensive, confirmation analysis will be required (i.e.: despatch of sample to a NAMAS accredited approved laboratory).
 - During this time the individual will be suspended with pay awaiting the results.
107. The sample will be tested by the competent person for the 6 most common groups of drugs of misuse by sending the two sample vials to the approved laboratory for verification.
- If the approved laboratory result is **negative** (this may normally take up to 5 days for verification) then the individual will then be asked to sign a record, and will be free to return to work.
 - If the approved laboratory result is **positive** then the individual will be suspended with pay awaiting a Disciplinary Investigation. A copy of the sample result will be given to the individual.

Drugs Test Results

108. The following conditions are classified as gross misconduct and will be subject to the current Disciplinary Procedure. If employees:
- Screen positive for drugs (from SYFR approved laboratory Medical Review of sample).

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- Consume drugs at any time while on SYFR premises or on SYFR business (either in the UK or abroad).
- Refuse to give a urine sample for analysis.
- Provides a sample but refuses to sign the declaration form(s).
- Decline to undertake an approved course of treatment for a drug-related problem or discontinuing treatment before satisfactory completion.

Counselling and Rehabilitation

109. If an employee admits to a problem with drugs or whether it is identified as a requirement of the Disciplinary Procedure, SYFR can arrange to provide employees with expert courses of counselling.
110. Any employee can access, in confidence, details of the service through the Head of Human Resources or Transactional HR Manager.
111. SYFR offers counselling services through GDL operating to National Standards. This service can offer up to 6 one hour sessions over a 6 week period. It should be noted that all Counsellors operate to established UK recognised guidelines.
112. The courses require the commitment of the individual to the agreed course of treatment. Failure to commit to such treatment or failure to attend may result in the activation of the Disciplinary Procedure.

Drugs Relapse

113. Where an employee having received treatment suffers a relapse, this may be considered to be misconduct.
114. Medical advice may be sought to determine how much further treatment may be required or rehabilitation time may be required to affect a full recovery. This treatment will be entirely at SYFR's discretion.

Drugs Recovery Unlikely

115. If, after an employee has received treatment, recovery seems unlikely, SYFR may have to consider a capability termination

REVIEW

116. The policy will be reviewed on a regular basis to ensure it remains fit for purpose and in line with health and safety and other relevant legislation.
117. The Head of Human Resources and/or Transactional HR Manager will hold overall responsibility for the policy but its operation and development will be in liaison with the risk and health and safety advisors, trade unions and other stakeholders.