ALCOHOL/DRUG WORKPLACE POLICY FOR THE PUBLIC SERVICE

The Alcohol/Drug Policy in the Workplace for the Public Service was ratified by the Council of Ministers in September 2001. This policy has been drawn up, following widespread consultation by the Drug and Alcohol Coordinator’s Office in partnership with the Personnel Office.

1 INTRODUCTION

In keeping with the alcohol and drug strategies, 1999-2004, the Government is introducing this policy which is designed to encourage and promote the health, welfare and safety of all staff. This policy is principally concerned with such alcohol and drug use which interferes with the individual’s ability to perform the tasks for which they are employed. In introducing the Policy it is in no way suggested or implied that alcohol and drug misuse are greater problems in the Public Service than in any other workplace nor is it implied that the use of illicit drugs is condoned. This policy is intended to provide a framework for best practice in this area, and in appropriate cases, a possible alternative to the disciplinary process.

2 AIM

The main aim of this policy is to have clear procedures to manage alcohol and drug misuse in the workplace. The primary responsibility is to promote a safe and healthy working environment for all staff.

3 OBJECTIVES

- To promote the health, welfare and safety of all staff;
- To raise awareness by educating staff on the health, legal and other risks associated with alcohol and/or drug misuse;
- To treat alcohol and/or drug misuse primarily as health problems;
- To ensure that anyone with an alcohol or drug problem can request help;
- To promote a climate which removes the tendency to conceal, deny and cover up alcohol and drug problems;
- To endeavour to prevent the occurrence or recurrence of alcohol and drug misuse;
- To provide training for line managers/supervisors/trade union/staff representatives;
- To apply the Policy to every individual irrespective of gender, position, role, status or length of service.

4 RELATED DOCUMENTS

This Policy document should be read in conjunction with the following documents:

- Attendance at Work Procedures
- Capability Procedures
- Disciplinary Procedures
- Health and Safety at Work Policy and legislation
- Employment Act (1991)
- Departmental and Professional Codes of Conduct
- Misuse of Drugs Act 1976
5  ALCOHOL POLICY DETAILS

Available evidence shows that alcohol use can increase the risk of accidents and lower safety standards, can impair judgement and increase the risk of errors and poor work quality. In order to ensure a safe and healthy environment in the workplace the following specific details should be adhered to within the public service.

5.1  DEFINITIONS

Alcohol Misuse is defined as use which:

interferes with the ability of staff to work; and/or
puts the health, safety and welfare of the individual at risk; and/or
impinges on the health, safety and welfare of colleagues and/or of the general public.

Problem Drinking is a specific form of alcohol misuse and can be defined as a condition where a staff member’s consumption of alcohol is having an adverse effect on health and/or performance and where the person concerned needs some form of help.

5.2  ALCOHOL CONSUMPTION

a) Subject to paragraph 5.2 (b), no alcohol shall be consumed or misused on government premises. Staff should also refrain from consuming or misusing alcohol during working hours whilst off government premises.

b) Exceptions to 5.2. (a); Sensible consumption of alcohol may be permitted:

1) where government premises have been licensed for such a purpose.
2) on government premises if it is part of business entertainment and/or special work related social occasions such as leaving or retirement parties.
3) as part of business entertainment at lunch or other times.

c) In some areas of employment any consumption of alcohol is inappropriate due to the nature, terms and conditions of employment. See also departmental and professional codes of conduct.

d) Alcohol consumption which renders the individual unsafe or unable to work satisfactorily is not acceptable.

Note: Disciplinary procedures may apply should a staff member’s work be adversely affected by alcohol consumption.

5.3  IDENTIFICATION

Alcohol misuse may indicate problem drinking. The sooner this is identified the quicker help can be obtained. The next stage is for the staff member to realise the possibility of an alcohol problem and to seek help. Managers are never expected to diagnose, but should be aware of the signs which may indicate an existing or potential alcohol problem.
5.4 POSSIBLE SIGNS OF ALCOHOL MISUSE IN THE WORKPLACE:

- Marked mood changes;
- Excessive sick leave and punctuality problems;
- Patterns of persistent and/or recurrent absenteeism;
- Financial difficulties;
- Errors;
- Deterioration in physical appearance and personal hygiene;
- Slurred speech;
- Decreased efficiency;
- Tiredness and lethargy;
- Memory lapses;
- Smell of alcohol.

**Remember:** All the signs shown above may be caused by other factors and conditions, such as stress, and should be regarded only as indications that a staff member *may* be misusing alcohol. A detailed professional assessment is necessary to determine alcohol dependence. More detailed signs and symptoms will be presented at the training sessions for managers.

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**DRUG POLICY**

6 DRUG POLICY DETAILS

There is no evidence to suggest that the public service has particular problems in relation to drug and substance misuse. Where they occur, however, they can lead to serious problems with personal health, safety and performance at work. In order to ensure a safe and healthy environment the following specific details should be adhered to within the public service.

6.1 DEFINITIONS

Drug Misuse is defined as any use of illegal drugs and/or misuse of prescribed drugs and substances such as solvents. In the workplace it can manifest as use which:

- interferes with the ability of staff to work; and/or
- puts the health, safety and welfare of the individual at risk; and/or
- impinges on the health, safety and welfare of colleagues and/or of the general public.

6.2 USE OF ILLEGAL DRUGS AND MISUSE OF OTHER DRUGS/SUBSTANCES

a) Staff must not be in possession of or consume illegal drugs, or misuse prescribed drugs or substances such as solvents on/off government premises during working hours.

b) Evidence of illegal drug production, possession or supply on government premises must be reported to the police.

c) Drug misuse which renders the individual unsafe or unable to work satisfactorily is not acceptable.

Note: Disciplinary procedures may apply should a staff member’s work be adversely affected by drug misuse.
6.3 **MISUSE OF DRUGS ACT 1976\(^2\)**

All staff should be aware of the legislation which affects the above procedures. The principal legislation on the Isle of Man for controlling the misuse of drugs is the Misuse of Drugs Act 1976. The Act makes the production, supply and possession of controlled drugs unlawful except in certain specified circumstances (for example, when they have been prescribed by a doctor). A person who knowingly permits the production or supply of any controlled drugs, the smoking of cannabis or certain other activities to take place on his/her premises could be committing an offence.

The Act lists the drugs that are subject to control and classifies them in three categories according to the penalties related to them.

It is possible that in certain circumstances charges may be brought against an employer or an employee under this Act. It would be up to the courts to decide on the circumstances of each case.

6.4 **IDENTIFICATION**

The sooner drug misuse is identified the quicker help can be obtained. The next stage is for the staff member to realise the possibility of a drug problem and to seek help. Managers are never expected to diagnose, but should be aware of the signs which may indicate an existing or potential drug problem.

6.5 **POSSIBLE SIGNS OF DRUG MISUSE IN THE WORKPLACE\(^4\):**

- sudden mood changes;
- unusual irritability, lethargy or aggression;
- a tendency to become confused;
- abnormal fluctuations in concentration and energy;
- deterioration in physical appearance and personal hygiene;
- decreased efficiency;
- errors;
- excessive sick leave and punctuality problems;
- patterns of persistent and/or recurrent absenteeism;
- a deterioration in relationships with colleagues or management;
- financial difficulties.

Remember: all the signs shown above may be caused by other factors, such as stress, and should be regarded only as indications that a staff member may be misusing drugs. A detailed professional assessment is necessary to determine drug dependence. More detailed signs and symptoms will be presented at the training sessions for managers. It is recognised that an individual may have drug and alcohol problems i.e. cross dependence.
7 PROCEDURES

As far as possible alcohol and drug misuse will be managed as health problems under capability procedures. Every effort will be made to help the individual. However if there are ongoing difficulties at work, where appropriate, the normal disciplinary procedures may be invoked.

7.1 REFERRAL METHODS

7.1.1 SELF REFERRAL

Staff members can seek confidential professional help, advice or support from any of the agencies outlined in Appendix 1.

7.1.2 MANAGEMENT/STAFF ASSOCIATION/TRADE UNION REFERRAL

Staff members may be encouraged to seek confidential professional help, advice or support by their managers and/or trade union representatives. There must be documented evidence of alcohol/drug related problems or reasonable grounds to believe that the individual may require such help. This does not forego the possibility of disciplinary proceedings where an incident has occurred which would normally lead to same.

7.1.3 MEDICAL REFERRAL

Staff members may be referred by their general practitioner or occupational health medical advisers for help.

_The individual always has the right to refuse or accept the offer of help from the agencies listed. Management reserves the right, however, to refer to the Occupational Health Advisers in accordance with the terms and conditions of employment._

7.2 GUIDELINES FOR STAFF AND MANAGEMENT

7.2.1 GUIDELINES FOR STAFF

Staff members who recognise, suspect or believe that they may have or be developing alcohol/drug problems can self refer in total confidence to the agencies listed in Appendix 1. To protect confidentiality attendance can be arranged in an individual’s own time. However, where necessary, appointments can be arranged during work hours in consultation with the manager. If prolonged absence from work is needed, for example, if residential treatment is required, staff members can, if they wish, waive their own right to confidentiality by informing management of the length of time required off for treatment. Staff members can also refer themselves for help via their own General Practitioner or Occupational Health Medical Adviser.
7.2.2 STAFF CONCERNS

Staff members may of course suggest to colleagues that they might use the Policy to seek help. A staff member can also raise concerns regarding a colleague to managers, supervisors, or trade union/staff association representatives in confidence. Alcohol/drug problems often put the health, welfare and safety of colleagues at risk and by “covering up” the individual is prevented from gaining the necessary insight to get help. This is commonplace at home, and in work. All staff members should feel confident that management will be constructive and sympathetic. The Training and Awareness Sessions will help build confidence that problems will be sensitively, confidentially and professionally handled.

7.2.3 GUIDELINES FOR MANAGERS/SUPERVISORS

Dealing with performance problems is part of the management/ supervisory role. Managers will offer staff members advice, support and guidance in a sensitive and confidential manner. Therefore the role of the manager is:

To be familiar with and to implement the policy and procedures;
To be alert to and monitor changes in work performance and attendance, sickness and accident patterns;
To help to refer staff for professional assistance, if requested;
To use capability and disciplinary procedures only when appropriate to do so;
To identify any aspects of the work situation which could be contributing to alcohol and/or drug misuse;
To intervene as early as possible;
To be aware of the possibility of malicious complaints by colleagues and members of the public;
To evaluate the effectiveness of the policy.

WHAT TO DO IF AN ALCOHOL/DRUG PROBLEM IS SUSPECTED

GENERAL

Be well prepared.
Make sure you are fully aware of this Policy Document.
Be consistent - treat all staff members the same.
Carefully consider how issues are to be handled.
Seek advice from relevant personnel/human resources staff.

SPECIFIC

A OBSERVE - Look for patterns. It is accepted that anyone can have an “off” day. Alcohol/drug problems usually develop over a period of time and involve a decline in work performance, health, attitudes and ability.

B DOCUMENTATION - All attendance, punctuality and poor job performance should be documented. All written notes should be factual and objective. Record staff explanations.
C  MANAGEMENT CONSULTATION

Review your own role.
Clearly define performance problem and impact.
Were there previous attempts to resolve this issue or is this incident/pattern new?
Identify possible barriers to resolution.
What alternatives can be offered to staff to resolve the problem?
Develop a plan for initial or follow-up discussion(s).

D  INTERVENTION

Select a time and place which affords privacy.
Define the problem.
Explain that the goal of the discussion(s) is to help resolve difficulties.
Give choices (do not threaten or plead etc and never label or diagnose).
Emphasise the right of the individual to choose options.
Explain consequences, if any, if problems are unresolved.

E  REFERRAL

Individual may ask for help in the referral process.

F  FURTHER MONITORING

Set some objectives and/or a timescale for monitoring, review and further assistance if necessary.

INTOXICATION AT WORK

Where there are reasonable grounds for believing that a member of staff is intoxicated at work (either through alcohol or illegal drugs or through the misuse of prescribed drugs, or through the misuse of solvents) and that his/her condition is likely to cause any of the consequences specified in paragraphs 5.1 and 6.1 above, the staff member must at once be suspended from duty. In all cases, the health, safety and welfare of everyone concerned shall be paramount. In appropriate cases, assistance shall be called. In all cases, reasonable steps shall be taken to ensure the safety of the staff member and of others. As misconduct by the staff member may have occurred, in such circumstances, disciplinary proceedings may also apply.
It can be very difficult for a manager to decide when an alcohol and/or drug problem becomes a disciplinary issue rather than one of support. The above chart shows the interaction between the two. Although it depicts both processes, a staff member may move from one side to the other several times, prior either to recovery, or, in the worst case, to dismissal. It is very difficult to be specific as regards the number of times a staff member may avail of help under this policy. If it becomes obvious that a staff member is incapable of doing the job, despite of an attempt or of repeated attempts at intervention, the normal capability or disciplinary procedures should apply, as appropriate.
8 TRAINING

8.1 THE MAIN OBJECTIVES FOR TRAINING OF STAFF ARE:

To provide a programme for managers/supervisors/trade unions/staff representatives to help with the recognition of alcohol/drug misuse and to enable them to manage staff with such problems in a sensitive, fair and appropriate manner;
To increase awareness by educating staff of the nature and related risks of alcohol and drug misuse;
To discuss the problems of alcohol and drug misuse in the workplace and their impact on health and safety, work performance and productivity;
To ensure staff understand this policy.

8.2 TRAINING PROGRAMME FOR MANAGER/SUPERVISORS/TRADE UNION/STAFF REPRESENTATIVES

All managers/supervisors must attend training sessions. Trade Union/Staff Representatives will also be invited to attend. The following topics will be covered:

- A basic factual knowledge of alcohol/drugs;
- The signs and symptoms of alcohol/drug misuse in the workplace;
- The Government’s policy;
- Personal attitudes;
- Basic interviewing skills for approaching and advising staff;
- Case Studies: a range of problems and courses of action;
- Linking up with local services and what they can offer.

8.3 EDUCATION PROGRAMME FOR STAFF

All staff members will be invited to basic awareness sessions where general information about the effects of the misuse of alcohol and drugs on health and safety will be outlined. Information leaflets will also be distributed to all staff. New staff will be made aware of this Policy as part of their general induction.

This written policy will also be available to all staff members.
9 CONFIDENTIALITY

Any staff member seeking help for alcohol/drug misuse under this Policy will be treated in a supportive way and as part of this commitment any information disclosed will be treated in total confidence. Personal information that emerges in the course of receiving help will never be disclosed to anyone in the workplace without written permission of the staff member concerned.

In certain exceptional circumstances it may be incumbent on the employer to report matters to other statutory bodies. An example of this would be where a criminal offence appears to have been committed on government premises and the police have to be informed.

Under a management type referral the only usual information disclosed will relate to an individual keeping or failing to keep appointments or if the individual requires time off work for treatment.

10 ADMINISTRATION

The administration of the policy will be the responsibility of each Chief Officer of the relevant Department/Board/Office.

11 COSTS

Attendance at local statutory and non-statutory agencies will be free of charge. Staff members are free to choose their own Health Advisers and/or their own General Practitioner. This will be at their own expense.

12 REVIEW AND MONITORING

This policy will be subject to review to ensure that it is kept up-to-date and that it serves the best interests of staff and the organisation at all times. This review process will be undertaken by Chief Officers in consultation with the Drug and Alcohol Co-ordinator. Views will be invited from staff members and their representatives.
DIRECTORY OF SERVICES

APPENDIX 1

DIRECTORY - LOCAL SERVICES

STATUTORY SERVICES

Drug & Alcohol Team
Confidential, Island-wide statutory service for individuals or the family of individuals who are having difficulties with alcohol, illegal substances, prescribed medication or over-the-counter medication. Counselling for abstinence or controlled drinking. Community detoxification also offered from alcohol, benzodiazepines, opiates. Open referral system.

Telephone: 686313

Probation Service
Offers both statutory and voluntary help to those persons suffering from the effects of alcohol or drug misuse. It deals primarily with court based work, both civil and criminal.

Telephone: 687323

NON-STATUTORY SERVICES

Alcohol Advisory Service
Phone: 627656
4 Market Hill, Douglas IM1 2BG
Free and confidential counselling service for those who have a problem with alcohol use, their relatives, friends and colleagues. Also offers information about alcohol and alcohol misuse, education, seminars, training programmes and consultancy.

D.A.S.H. - Drug Advice Service and Helpline
Telephone: 615622
Confidential counselling, advice and information. Telephone and face-to-face service.

Stauros Foundation
The Alpha Centre 7-8 Sherwood Terrace
Douglas IM2 4EN
Facilities and Service: Drop-in, fellowship and Christian counselling for drug and alcohol misusers.

Department of Health and Social Security (DHSS) Occupational Health Service
Nobles Hospital, Westmoreland Road
Douglas
Telephone: 642150
The Occupational Health Service aims to improve the health, safety, and well-being of all staff within the DHSS. The service is impartial, non-judgemental, and confidential, and can give advice and/or support for managers and their staff who may be experiencing indirect or direct, work related health problems in the workplace. Access to the service can be through agency, management or self referral by telephoning 642150 or 642328. An answer phone for confidential messages is in operation when the department is closed.

Local General Practitioners
Contact for advice, treatment and referral to specialist agencies.

Staff Welfare Officers
Telephone: 687027
The Staff Welfare service is a confidential advice, support and counselling service for all Government staff both civil and public service. The Staff Welfare Officers can be contacted on 687027. You can leave a message on the answer phone as the Staff Welfare Officers are the only people who have access to it.

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PRIVATE CLINIC

The Priory Clinic
Mount Murray
Main Road
Santon

The Priory Hospital in Cheshire offers a comprehensive addiction treatment service providing the full spectrum of intervention, residential and after-care services. A clinic is held on the Island at the above address. Appointments can be arranged at the above phone number.

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SELF-HELP GROUPS

Alcoholics Anonymous
Gives advice and help on problem drinking. The phone line acts as the first point of contact for information about meetings. Philosophy is basically to stop drinking one day at a time. Provides an extensive range of literature.

Al-Anon Family Group
Local Contact: 0171 403 0888

Al-Anon Family Groups provide a readily available community resource for all those close to a problem drinker. Al-Anon offers a recovery programme to people from all walks of life, whether or not the drinker recognises that a problem exists. At Al-Anon Group meetings (which are anonymous) members receive comfort and understanding and learn to cope with their problems through the exchange of experience, strength and hope.

Al-Ateen is part of Al-Anon and is aimed at teenagers with an alcoholic relative.

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REFERENCES

APPENDIX 2

1 5 Year Drug Strategy - Isle of Man 1999 - 2004
   5 Year Alcohol Strategy - Isle of Man 1999 - 2004

2 Misuse of Drugs Act 1976, Tynwald Library

3 Managers Guide to Drug and Alcohol Policy Implementation in the Workplace - The Forensic Science Service, United Kingdom, 2000

4 Drug Misuse at Work - A Guide for Employers - Health and Safety Executive, United Kingdom, 1998

5 Drink, Drugs and Work don't mix, Institute for the Study of Drug Dependence and Alcohol Concern, England, 1999