

**June 2019**

**Human Resources**

**GUIDANCE NOTE**  
**Alcohol and Drugs in the Workplace**

## **Contents**

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<b>1.</b>	<b>Introduction</b>	<b>3</b>
<b>2.</b>	<b>Signs and symptoms of alcohol and drugs use and abuse</b>	<b>3</b>
<b>3.</b>	<b>Dealing with employees with a drugs or alcohol problem</b>	<b>5</b>
<b>4.</b>	<b>Additional information and guidance on unannounced planned testing</b>	<b>6</b>
<b>5.</b>	<b>Additional information and guidance on 'Cause for Concern testing'</b>	<b>7</b>
<b>6.</b>	<b>Confidentiality</b>	<b>7</b>
<b>7.</b>	<b>Workplace Adjustments</b>	<b>7</b>
<b>8.</b>	<b>Advice Available within Royal Greenwich</b>	<b>8</b>
	<b>Appendix I</b>	<b>9</b>

## **I. Introduction**

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- 1.1 This guide should be read in conjunction with the Alcohol and Drugs Policy (link to be inserted once loaded to the HR intranet). The purpose of the Alcohol and Drugs Policy (supported by this guide) is to ensure that all RBG employees (including temporary workers, agency staff and consultants, suppliers and sub-contractors) are aware that RBG has a zero tolerance approach to alcohol and drugs at work and forbids the consumption, use, possession, storage and sale of alcohol or illicit drugs on the council's premises and any RBG vehicles.
- 1.2 This guide will help managers and supervisors to effectively implement the Alcohol and Drugs Policy and ensure that employees are managed in an appropriate and supportive way.
- 1.3 The guide will not cover every situation but should provide some solid principles to work with. Further advice and guidance can be sort from HR Professional Services and Occupational Health.

## **2. Signs and symptoms of alcohol and drugs use and abuse**

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- 2.1 Where managers suspect an employee to be under the influence of alcohol they should confirm their suspicions by observations of the employee's speech, eyes, appearance, behaviour, gait, co-ordination, movements, and principally by the smell of alcohol on their breath. They should, as far as is reasonably practicable, obtain a second opinion from another manager (if necessary asking one to attend from another location). If in doubt use the GUESS acronym:

G Gait  
U Unsteady  
E Eyes Glazed  
S Speech Slurred  
S Smell

- 2.2 The physical signs of an employee being under the influence of drugs are less obvious than those for alcohol. Managers will need to consider both the long and short term changes in conduct, appearance, behaviour and work performance.
- 2.3 Managers should be aware that the following symptoms listed may not necessarily be as a result of alcohol or drug misuse, but in the absence of an acceptable explanation being offered by an employee, may indicate to the manager concerned that there is a potential problem to be investigated. The behaviours described will require action regardless of the cause.
- 2.4 *Irregular attendance at work/absence from place of duty:*
  - multiple instances of unauthorised leave

- excessive sick leave
- frequent absences or lateness around rest days / weekends / meal breaks
- excessive lateness, e.g. Monday mornings, returning from lunch, etc.
- leaving work early
- peculiar and increasingly improbable excuses for absence
- unusually high absenteeism rate for colds, flu, gastritis, etc.
- frequent unscheduled short-term absence, with or without explanation
- repeated absences from post, more than the job requires
- overlong breaks/unexplained absences from place of duty
- frequent single days with no reason given
- short spells attributed to gastritis, diarrhoea, debility or depression (whether or not these have been certified by a medical practitioner).

Work performance:

- work seems to require greater effort than the manager expects
- job takes more time than it normally should
- alternate periods of high and low productivity
- increasing general unreliability and unpredictability
- increased errors and generally poor performance; unusually clumsy
- high rate of reported sickness on duty and physical incapability of performing the job

Increased rate of accidents (including 'near miss' incidents):

- high incidence of accidents on and off duty (whether or not injury or absence from work results)
- road traffic accidents, particularly if tested by police.

Mood/personality:

- difficulty in recalling instructions, details etc.
- increasing difficulty in handling complex assignments
- difficulty in recalling own mistakes
- over-excitement/elation
- deterioration of relationships with colleagues at work
- sudden personality and mood changes
- irritability and depression
- loss of interest in work, hobbies, sport etc.
- lack of reliability, and the use of deception to cover mistakes and behaviour, e.g. avoiding supervisor or being seen when booking on duty.

Other signs:

- coming to work in an obviously abnormal condition
- aroma of alcohol or other unfamiliar substances, particularly in the early morning
- tremors, especially of the hands
- increasing unkempt appearance/lack of hygiene
- flushed face and bleary eyes; pin point or greatly dilated pupils
- drowsiness, loss of concentration and dizziness
- domestic problems, e.g. in relationships with members of the family and financial difficulties
- signs of stress
- financial problems
- unusual smells, stains or marks on the body or clothes
- evidence of drugs paraphernalia e.g. scorched tin foil, spoons, syringes, 'Rizla' packets with torn covers, square folds of paper.

Many of these signs and symptoms could be explained by a variety of factors, not necessarily connected with drugs or alcohol, but in the absence of an acceptable explanation being offered by the employee, they may indicate to the manager that there is a potential or actual problem to be investigated.

### **3. Dealing with employees with a drugs or alcohol problem**

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- 3.1 These guidelines are designed to assist managers in dealing with employees who have a drinking problem which is defined as any form of drinking, intermittent or continual, which adversely affects the health, safety, performance, conduct or efficiency of an employee as well as the safety and wellbeing of other employees and customers. Additionally, these guidelines should be followed for employees who take drugs or substances for non-medical reasons.
- 3.2 The guidelines are in place to reflect the fact that the council is concerned with the wellbeing of its employees. However, it is ultimately the employee who must take the greater responsibility for overcoming a drugs or alcohol related problem. A drug related problem includes any use of drugs or substances that are legal but may be subject to abuse, including those referred to as “legal highs” which adversely affect the health, safety, performance, conduct or efficiency of an employee as well as the safety and wellbeing of other employees and customers.
- 3.4 Managers have a duty to recognise those who are under the influence of or are unfit for work due to drugs or alcohol.

This is a complex and difficult issue and managers must seek advice from the relevant departments within the organisation, i.e. Occupational Health (OH) and HR

Professional Services. Managers should be clear that a drugs or alcohol problem is not a mitigating circumstance in a disciplinary case and that one offence can merit summary dismissal.

The dangers that drug or alcohol abuse, for whatever reason, can present, not only to the employee but to other employees and our customers / public, are such that it is important for these employees to be identified, assessed, and for suitable treatment to be arranged and any problems resolved.

#### **4. Additional information and guidance on unannounced planned testing**

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##### **Process**

- 4.1 Point 7.2 of the Alcohol and Drugs Policy sets out the Royal Boroughs decision that 10% of the workforce will be subject to unannounced planned testing per agreed session. For example, if 50 employees are due to be tested to reach the threshold of 10% and 4 people are on annual leave, employees from number 51-54 on the listing would be included in the random testing sample.
- 4.2 Service managers with support from HR Professional services will decide which roles are deemed to be customer facing / front line service or safety / business critical roles within the Council.

##### **Frequency**

- 4.3 The Council recognises the need for unannounced planned testing to be proportionate, timely and effective. It is proposed that unannounced planned random testing will take place once a quarter e.g. approx four times per year with no set interval. These unannounced random planned testings will have no set time within the quarter or a day or time of the week etc.
- 4.4 Due to the nature of random sampling it is possible, but highly unlikely for an employee to be called to participate in testing more than once a year. HR Professional Services and Occupational Health will keep such issues under regular review to ensure fairness and transparency.

##### **Testing**

- 4.5 The council will provide appropriate and private testing facilities, these may make use of current and existing facilities e.g. bathrooms at the Woolwich centre, Town Hall and Birchmere. These facilities will be secured both before and during the testing period.
- 4.6 If an employee is randomly selected as part of the unannounced planned testing and they are on sickness absence or leave, they will not be recalled to the next session as this would impact the random sampling.

- 4.7 The Collecting Officer should not be asked to predict interput results, if employees have any questions they should discuss these once the test results have been supplied. The Occupational Health provider will be able to answer any intitial questions.
- 4.8 Any attempt to influence the Collecting Officer or tamper with the collection process or equipement will be dealt with under the Disciplinary Procedure.

## **5. Additional information and guidance on 'Cause for Concern testing'**

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- 5.1 Managers and supervisors must complete the 'Cause for Concern' referral record form where there is cause for genuine concern in regards to an employee's fitness for work due to a suspicion that they may be under the influence of alcohol or drugs. Records must be kept securely and safely to ensure confidentiality.
- 5.2 Occupational Health should be contacted as soon as possible. It should be noted urgent Occupational Health appointments can be arranged at locations other than Woolwich Town Hall or the Birchmere Facility. For example, the employee may be asked to attend a session with the Occupational Health provider in the City and this would be deemed a reasonable suitable alternative for a majority of employees.

## **6. Confidentiality**

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- 6.1 Throughout the application of this policy, Managers may become aware of medical or other personal information concerning individual employees. Managers must take care to ensure that confidentiality is maintained throughout and that information is only disclosed to those persons who are authorised to receive it.
- 6.2 Results will only be shared with a defined group of professionals e.g. employees manager (or other managers in accordance with agreed council policies), HR Professional Services, Occupational Health Service etc.

## **7. Workplace Adjustments**

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- 7.1 The Council will make reasonable adjustments for employees with disabilities relating to sunstance misuse (e.g. flexible work hours, workload adjustments)
- 7.2 The Council will support Phased Return to work following an absence.
- 7.3 The Council will make every attempt to support reasonable time off to attend counselling appointments etc.

## **8. Advice Available within Royal Greenwich**

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- 8.1 Human Resources are available to offer general advice and guidance to managers.
- 8.2 Employees need to be formally referred by their line manager to Occupational Health via Human Resources and cannot self-refer. Occupational Health Advisers will provide impartial advice to managers following their assessment.
- 8.3 All employees can access the Employee Assistance Programme for free, confidential advice 24/7/365. Details below:

**Freephone:** 0800 243 458

**SIMS (For call back):** 07909 341229

**Local:** 020 8987 6550

**Minicom:** 020 8987 6574

**Website:** To access from work PC use following link **Employee Assistance Programme**

To log in from home or using a non RBG PC visit [www.workplaceoptions.com](http://www.workplaceoptions.com) and use the login details below.

- **Username:** royal
- **Password:** greenwich

**By e-mail:** [assistance@workplaceoptions.com](mailto:assistance@workplaceoptions.com)

## Appendix I

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### **Where to obtain help and advice**

Royal Greenwich offers a free and confidential employee assistance programme to all employees via Workplace Options. Workplace Options offers information, expert advice, specialist counselling and support online or via the telephone to help staff deal with all life events, crises and problems, including drug and alcohol abuse, addiction and resulting symptoms such as anxiety and depression. The company aims to answer questions immediately or refer staff to the most appropriate advisor, counsellor or source of information all completely confidential.

### **Workplace Options**

Tel: 0800 243458 (24-hours a day, 7 days a week)

<http://www.workplaceoptions.co.uk>

### **GL BaSIS Greenwich**

CGL BaSIS recognises that many people across all ages and social boundaries use alcohol and drugs. As long as you either live, work or study in Greenwich and are over 18 years old, CGL BaSIS will be able to support you. If you are drinking alcohol or using drugs, CGL BaSIS can help you to make the changes that you would like to make, and support you in working towards your goals. You may be concerned about your alcohol or drug use, or feel that you are no longer in control of it and that it is affecting your decision making abilities. They will also be able to offer support to individuals who are concerned, due to unforeseen events about their, drug and/or alcohol use and how to address this. For more information about the help and services available please visit:

<https://www.changegrowlive.org/content/cgl-basis-royal-borough-greenwich>

020 3696 2640

### **NHS Choices**

NHS Choices is the UK's biggest health website, putting you in charge of your health care

<http://www.nhs.uk/conditions/Alcohol-misuse/Pages/Introduction.aspx>

### **Alcohol Concern**

Alcohol Concern is a charity working in England and Wales trying to change the conversations and attitudes people have about alcohol, providing help and advice with drinking, including an on-line tool to measure your consumption.

<https://www.alcoholconcern.org.uk/>

### **Drinkaware**

Drinkaware is an independent charity (whose funding includes the drinks industry) which aims to reduce alcohol-related harm by helping people make better choices about their

drinking, providing impartial, evidence based information, advice and practical resources, raising awareness of alcohol and its harms.

<https://www.drinkaware.co.uk/>.

### **Alcoholics Anonymous (A.A.) Great Britain**

Tel: 020 7833 0022 (London helpline – 10am to 10pm)

Tel: 0845 769 7555 (24-hour, 365 days a year national helpline)

<http://www.alcoholics-anonymous.org.uk/>

A.A. provides a confidential helpline for people who are alcoholic or have a drinking problem, want to stop drinking and stay sober. It provides callers with local contacts and details of local groups that meet weekly in the London area, as well as literature that describes the Fellowship of A.A. and the suggested Twelve Step programme of personal recovery. The website provides further information and lists the calendar of events and service meetings.

### **Adfam**

Adfam provides support, advice and information for families affected by someone's drug or alcohol use. Adfam currently offer support via local treatment services in Greenwich, this includes one-to-one therapeutic sessions and group sessions.

Email: [e.spiegler@adfam.org.uk](mailto:e.spiegler@adfam.org.uk)

<https://www.adfam.org.uk/>

### **Al-Anon Family Groups UK & Eire**

Tel: 020 7403 0888 (confidential helpline, available 10am-10pm, 365 days a year)

[www.al-anonuk.org.uk](http://www.al-anonuk.org.uk)

Email: [enquiries@al-anonuk.org.uk](mailto:enquiries@al-anonuk.org.uk)

Al-Anon provides support and understanding to anyone whose life is, or has been, affected by someone else's drinking. It allows families and friends of alcoholics to share their experience at support groups in order to solve their common problems.

### **Narcotics Anonymous (NA)**

Tel: 0300 999 1212 (National UK helpline, open 24 hours a day, 7 days a week)

Tel: 020 7251 4007 (service office telephone for literature, etc.)

<http://www.ukna.org/>

Email helpline: [NAHelpline@ukna.org](mailto:NAHelpline@ukna.org)

Narcotics Anonymous is a non-profit society for whom drugs have become a major problem. It is an organisation of recovering addicts who meet regularly to help each other stay clean. Membership is open to anyone with a drug problem seeking help, regardless of what drug or combination of drugs they have used. NA offers a confidential helpline for people who think they may have a drug problem, want to stop using drugs and stay clean. It also provides information about weekly meetings in the London area, literature that describes NA and the 12 Step programme of recovery.

Other useful Websites

<http://www.hse.gov.uk/alcoholdrugs/>

Greenwich Health and Safety Management System

Royal Greenwich Intranet. See section 3.4.23 on Alcohol and Drugs