### Alcohol and Substance Misuse Policy

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<table>
<thead>
<tr>
<th><strong>Reference number</strong></th>
<th>WHHT HR073</th>
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<tbody>
<tr>
<td><strong>Version</strong></td>
<td>5</td>
</tr>
<tr>
<td><strong>Author &amp; Job Title</strong></td>
<td>Lucy Mayes, Employee Relations Adviser and Caroline Mabbs, Occupational Health Manager</td>
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<td>Director of Human Resources</td>
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<tr>
<td><strong>Approved by/Date</strong></td>
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<td>Workforce Committee</td>
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<td>Alcohol, dependency, misuse, substance</td>
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**CONTRIBUTION LIST**

Key individuals involved in developing this version of the document

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
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<tbody>
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</tr>
<tr>
<td>Lucy Mayes</td>
<td>Employee Relations Adviser</td>
</tr>
</tbody>
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Ratified by Committee: Quality and Safety Group - March 2017

**CHANGE HISTORY**

<table>
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<th>Version</th>
<th>Date</th>
<th>Author</th>
<th>Reason</th>
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<tr>
<td>2</td>
<td>2009</td>
<td>Liz Quick &amp; Helen Donovan</td>
<td>Out of date policy</td>
</tr>
<tr>
<td>3</td>
<td>2012</td>
<td>Tanishka Norris</td>
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<td>5</td>
<td>2017</td>
<td>Lucy Mayes and Caroline Mabbs</td>
<td>Review of Out of date policy</td>
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Values are essential to West Hertfordshire NHS Trust as they describe the way we work and our vision to deliver “the very best care for every patient, every day”. Our values are at the heart of what we do and ensure we provide consistency across the Trust and within all our services. All staff must adhere to the Trust values, whatever their role or duty and incorporate the values in all the work they do for WHHT.

Our values are **Commitment, Care and Quality**.

**Quality**
- Working together to provide the best possible service we can for our patients and their families
- Striving to deliver best practice and best possible outcomes for all
- Seeking to improve what we do as an organisation and completing all activities to agreed standards
- Expecting ourselves and each other to produce high quality work based on evidence of what works
- Acting in a professional manner at all times
- Being part of a team that takes pride in their work and their environment

**Care**
- Making sure that we consider the impact of our decisions on the care of all patients
- Treating everyone with kindness, compassion, courtesy and respect
- Listening, and communicating in a way that is clear, straightforward, effective and inclusive
- Recognising vulnerability and showing empathy
- Supporting and working with others to provide joined-up, compassionate care
- Caring for each other, looking after our own wellbeing and that of our colleagues

**Commitment**
- Doing things that are going to make a positive difference
- Being dedicated, motivated and optimistic and looking to the future
- Not being afraid to do things differently or to challenge
- Doing the right thing at the right time in the right place
- Being flexible when needed, going the extra mile and delivering on our promises
- Taking responsibility for personal development and performance

It is every employee’s responsibility to work in a way that is consistent with these values in delivering every element of their role, taking us forward in delivering our mission. Trust policies need to adhere and embed our values. Also see Trust Behaviour Standards on the Intranet for further information.
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1 INTRODUCTION

The Trust is committed to provide a safe and healthy working environment for all its employees and the highest possible standards of care to its patients. The Trust recognises that these standards can be put at risk by employees who misuse alcohol and other substances to such an extent that it may:

- Adversely affect the quality of the services provided by the Trust
- Undermine the confidence of colleagues, patients and visitors
- Impair employees' work performance by impairing their physical and psychological health

Any person identified as having problems relating to the misuse of alcohol or other substances will be treated sympathetically, reasonably and positively including the offer of appropriate advice and other necessary assistance in overcoming the problem. All issues concerning alcohol and substance misuse will be dealt with in confidence except in circumstances where there is an immediate danger to others.

2 OBJECTIVES

This policy is designed to promote the health and wellbeing of all employees and to minimise problems at work arising from alcohol and substance misuse within the context of the following general principles:

- To make known to employees the harmful effects of alcohol and substance misuse by education and information.
- To encourage safe and sensible drinking habits.
- To promote the early identification of those employees who have a misuse problem, so that they can be offered advice and be actively encouraged to seek appropriate assistance

The aim of this policy is to assist in the rehabilitation of individuals who misuse substances and to prevent injury or harm to others by encouraging them to seek help. This policy should be read in conjunction with the Trust’s Managing Attendance Policy.

3 SCOPE

This policy is applicable to all employees.

4 ROLES AND RESPONSIBILITIES

4.1 Line Manager Responsibilities

- To treat such matters with the utmost sensitivity and confidentiality as far is legitimately and legally possible
- Ensure that staff understand the policy and are aware of the rules and consequences regarding the use of alcohol, drugs and other intoxicating substances
- To be aware of the signs of alcohol and substance misuse and the effects on performance, attendance and health of employees
- Ensure the health, safety and welfare of employees and others
- Ensure that staff are aware of the support that is available to them should they have a problem through Occupational Health
• To monitor the performance, behaviour and attendance of employees as part of the normal supervisory relationship
• To intervene at an early stage where changes in performance, behaviour, sickness levels, attendance patterns are identified to establish whether alcohol or drug misuse is an underlying cause
• To provide support and assistance, where appropriate and for a reasonable period, to staff who are dependent upon intoxicating substances to help their recovery
• To allow reasonable absence from work necessary to receive treatment under the Trust’s sickness scheme, provided that there is full co-operation from the employee. The relevant certification procedures must be followed
• To instigate disciplinary measures where appropriate to do so
• To raise concerns about non Trust staff to the individuals employing organisation.

Where a manager is aware, or suspects, that an employee is misusing intoxicating substances they are strongly advised to seek advice from their HR Adviser on the approach to be adopted.

4.2 Employee Responsibilities

• To not report for duty under the influence of alcohol or any other misused substance. This also applies to staff that are on-call or on standby
• To not bring alcohol or substances for misuse onto Trust premises, for consumption or use at work
• To not be in possession of, consume or bring alcohol or substances for misuse onto Trust property, either for their own use or that of other employees including during breaks which are off site
• To raise any known problem of alcohol or drug misuse with the manager / another senior manager
• To co-operate with any support and assistance provided by the Trust to address an alcohol or drug misuse problem
• To inform a manager / supervisor or the HR Department if there is a concern about a colleague that may be alcohol or drug related.
• To inform a senior manager or the HR Department if there is a concern about a manager that may be alcohol or drug related

4.3 Occupational Health Responsibilities

• To promote in partnership with the Health and Wellbeing Manager the health and wellbeing of employees and to minimise problems at work arising from alcohol and substance misuse
• To provide advice and guidance on how best to help an individual who has a problem with behaviour or work performance which might be related to alcohol or substance misuse
• To provide impartial confidential advice to members of staff which may include referral to the Employee Assistant Helpline or to another agency such as their GP with the employee’s consent
• To maintain confidentiality unless it is essential in connection with the employee’s work and in these circumstances, consent from the employee will be sought to release information
• To seek employees consent for any relevant tests that may need to be obtained in order to ensure that health and safety at work is maintained.

4.4 Human Resources Responsibilities
To provide advice and assistance to employees and managers
To refer staff for help and support
Advise on the appropriateness or otherwise of the disciplinary procedure

4.5 Trade Union Responsibilities

To encourage employees to seek help voluntarily
To provide support to members
To advise members of their rights and responsibilities under the policy and to support employees at any formal meetings to discuss concerns

5 DEFINITIONS

Alcohol and substance misuse
The excessive use of alcohol, legal and illegal drugs, solvents or other substances in an excessive, habitual or harmful way that results in an impairment to the user’s health and safety, work performance, conduct at work or social functioning

Drinking Offences
Alleged misconduct caused or contributed to by alcohol or substance misuse

6 ALCOHOL AND THE LAW

Under sections 2, 3 and 4 of the Health and Safety at Work Act 1974, all employers have a general duty to ensure the health, safety and welfare of their employees. If an employer knowingly allows an employee under the influence of alcohol to continue working and this places the employee or others at risk, the employer could be liable for charges. Under section 7 of the Act, employees are also required to take reasonable care of themselves and others who could be affected by what they do. They, too, could be liable to a charge if their alcohol consumption put safety at risk.

7 DRUGS AND THE LAW

The Misuse of Drugs Act 1971 (and as subsequently amended) makes it an offence to possess, supply or produce controlled drugs without authorisation. It is also an offence for the occupier of premises to permit knowingly the production or supply of any controlled drugs or allow the smoking of cannabis or opium on those premises. Under common law it is an offence to ‘aid and abet’ the commission of an offence under the Misuse of Drugs Act. The Act lists the drugs that are subject to control and classifies them according to their perceived danger.

An employer who does nothing about an employee with a drug problem may be liable under the Health and Safety at Work Act 1974, for example, requiring an employee with a history of drug misuse to perform a job which requires a clear mind and a steady hand if it is to be done safely.

8 MANAGING AN EMPLOYEE SUSPECTED OF ALCOHOL OR SUBSTANCE MISUSE

8.1 Recognising Alcohol and Substance Misuse
Alcohol and drug misuse impairs judgement, concentration and co-ordination. The following indicators are signs of possible alcohol or drug misuse (it’s important to note that these can also be caused by other factors such as stress, physical illness, mental health problems or the effects of prescription drugs; each case should therefore be considered on its own merits):

- absenteeism
- poor time keeping
- poor performance
- erratic behaviour
- unusually irritable or aggression including sudden mood changes
- a tendency to become confused
- deterioration in relationship with colleagues

It should be noted that behind an alcohol or drug problem there may often be a personal or work related issue that needs to be acknowledged and supported so that assistance can be sought where possible.

If it is evident that an employee is misusing alcohol or other substances or it is suspected that work performance is being affected by the above, contact an ER Adviser to discuss arranging a meeting with the individual concerned.

### 8.2 Meeting to Discuss Concerns Regarding Alcohol or Substance Misuse

The manager and ER Adviser will hold a supportive meeting with the employee to discuss the suspected problem of misuse. The meeting should take place in a quiet environment where there will be no interruptions and allow plenty of time.

The employee will be advised in writing of the need to discuss their performance / conduct and that they may be accompanied by a colleague or union representative.

The purpose of the meeting is to determine from the employee whether there is a possibility of an alcohol or substance misuse problem or whether there is some other problem affecting performance or conduct.

Should the employee admit to having a problem, they should be offered the opportunity of professional help and advice via a referral to the Occupational Health Department. A further meeting following referral to Occupational Health should be convened to consider their advice and any further action / support needed.

Should the employee deny a problem, refuse help or discontinue with a programme of treatment they may be subject to disciplinary action up to and including their dismissal if their conduct at work or work performance is not satisfactory.

If, despite the full co-operation of the employee, there is no improvement the matter will be dealt with under the Managing Attendance or Disciplinary policy as appropriate and could lead to action up to and including their dismissal. The meeting will be recorded and confirmed in writing to the employee.

If there are concerns about alcohol or substance misuse and the employee has young dependants, advice should be sought from the safeguarding Team:

- Named Nurse for Safeguarding Adults: 07979 454891
- Named Nurse for Safeguarding Children 07747 792792
8.3 Treatment and Support Options

If the employee is already receiving treatment for their condition the Occupational Health Department will write, with the employees consent to their GP or specialist services for medical advice and also advise them of the potential sources of support available to them, which may include the Occupational Health Advisor or Physician and the Employee Assistance Programme. On some occasions it may be necessary to obtain the employee’s consent for medical tests to be conducted in order to establish their fitness to work.

If the employee is not undergoing treatment, the Occupational Health Physician or Advisor will, with the employees permission refer the employee to their GP for advice and treatment.

Treatment options that an employee may need to undergo include daily counselling sessions, in-patient detox and rehabilitation followed by extended outpatient therapy and or self-help groups and medication.

Reasonable time off for rehabilitation or counselling should be discussed and regular contact should be maintained by either the Manager or Occupational Health Department during this time. Advice from Occupational Health may include work restrictions for the period of treatment or redeployment.

If redeployment is a consideration, it is important that the reasons behind this decision are discussed with the employee. The period of redeployment should be defined and a review date set. Following recovery the situation should be monitored for an agreed period.

Following treatment the employee should be supported as much as possible back into the workplace. It is important they are seen by Occupational Health before their return to seek advice in respect of return to work options, which may include a phased return, return to work with adjustments, temporary redeployment. Refer to the Managing Attendance Policy and Procedure for options for employees when returning to work following a period of absence.

Despite the provision of a recovery programme, a relapse may occur. The nature of the relapse should be assessed in deciding how to respond. The risk of relapse within the work area will need to be considered when deciding on rehabilitation.

If following treatment or support via Occupational Health the employee’s behaviour is unsatisfactory or performance continues to be poor the appropriate procedures should be invoked.

9 DISCIPLINARY PROCEDURE FOR ALLEGED ALCOHOL AND SUBSTANCE MISUSE OFFENCES

‘Drinking Offences’ may, in some cases, be categorised as misconduct and consequently may be treated as such under the Disciplinary Procedure unlike problematic alcohol and substance misuse, which is treated as if it were an illness,

Such offences would normally include:
- being under the influence of alcohol whilst on duty
- drinking on duty
- possessing alcohol or substances for misuse at work
- being impaired whilst on duty due to the consumption of alcohol or other substances
If it is suspected that the employee is drunk or under the influence of alcohol or another substance, the manager should meet with the employee immediately to raise their concerns preferably accompanied by another employee.

If their suspicions are confirmed the manager should ask the employee to leave their place of work and report for work the next day with a view to providing the employee opportunity to put forward reasons for their alleged misconduct or mitigating factors which he/she might have been incapable of doing. The manager should as far as possible, ensure that the employee has a safe means of returning home.

Following a meeting with the employee a decision will be made by the manager in conjunction with their ER Adviser as to whether the Disciplinary Policy and Procedure is to be instigated. Consideration should be given as to whether a referral to Occupational Health would be appropriate. In more serious circumstances a decision may be made to suspend the employee. The decision to suspend will be made by an appropriate senior manager in conjunction with a senior member of the Human Resources Department.

10  LOSS OF DRIVING LICENCE

Employees who are required to drive as part of their terms and conditions of employment must report any offences to their line manager as soon as they are known. A decision will then be made in conjunction with Human Resources as to the level of action to be taken which may include proceeding down the Disciplinary Policy.

When an employee loses their driving licence, they should surrender their car parking permit. At this point their permit and charges will be suspended. Facilities will inform Payroll. The permit system is not able to issue retrospective refunds, therefore anyone who does not inform Facilities if they have been disqualified from driving will continue to be charged and not able to obtain a refund. When employees have their licence reinstated they will need to reapply for a car parking permit in line with the Car Parking Policy.

11  SOURCES OF SUPPORT, ADVICE AND GUIDANCE FOR ALCOHOL AND SUBSTANCE MISUSE ISSUES

11.1  Occupational Health

Watford Occupational Health Department, Ground Floor Shrodells Unit, Watford General Hospital. Tel: 01923 217997. 8.00 am – 4.00 pm Monday to Friday (closed weekends and Bank Holidays)

11.2  Employee Assistance Helpline

Trust employees can seek advice and support from the Employee Assistance Programme. This is a confidential support service, providing practical information, legal advice, telephone and face-to-face counselling. The service is free and available to all Trust employees, 7-days a week, by telephoning 0800 085 1376, or via email at assist@cic-eap.co.uk or via text relay (for people with speech or hearing impairment) on 18001 08000851376.

11.3  Turning Point Hertsreach

Turning Point Hertsreach provides a range of free and confidential and non-medical substance misuse services across Hertfordshire.
These services can be contacted as follows:

**HERTSREACH WATFORD**
- 76 High Street
- Watford
- WD17 2BP
- Tel: 01923 221037
- Email: hertsreach.watford@turning-point.co.uk

**HERTSREACH NORTH & EAST HERTS**
- The Training and Education Centre
- Ascots Lane
- Welwyn Garden City
- AL7 4HL
- Tel: 01707 362511
- Email: hertsreach.northeastherts@turning-point.co.uk

**HERTSREACH DACORUM**
- Charleston House
- 13 High Street
- Hemel Hempstead
- HP1 3AA
- Tel: 01442 240579
- Email: hertsreachdacorum@turning-point.co.uk

**HERTSREACH ST ALBANS**
- Vickers House
- 222 London Road
- St Albans
- AL1 1PN
- Tel: 01727 893344
- Email: hertsreachstalbans@turning-point.co.uk

11.4 National Helpline Numbers

**Alcoholics Anonymous**
National office supporting a national network of local Alcoholics Anonymous groups. Groups are formed by voluntary fellowships of men and women who are alcoholics and who help each other to achieve and maintain sobriety by sharing experiences and giving mutual support on a regular basis service.

[www.alcoholics-anonymous.org.uk](http://www.alcoholics-anonymous.org.uk)  Tel: 0845 769 7555

**Drinkline**
Helpline providing advice and information for people with alcohol problems and anyone concerned about alcohol misuse. Advice on sensible drinking and information on services to help people cut down on their drinking.

[www.drinkaware.co.uk](http://www.drinkaware.co.uk)  Tel: 0800 917 8282

**Talk to FRANK**
A government-funded free service, previously named the National Drugs Helpline, who can provide advice to the drug user or anybody concerned about the drug user. Has a database of local support and treatment services that can help the drug user.

[www.talktofrank.com](http://www.talktofrank.com)  Tel: 0800 776 600

**Narcotics Anonymous**
The largest self-help group for people who want to stop using drugs. Services are free.

[www.ukna.org](http://www.ukna.org)  Tel: 0300 999 1212
12 EVALUATION MEASURES – MONITORING AND AUDIT

The policy will be monitored through the number of management referrals to Occupational Health (anonymous data), number of self-referrals to Occupational Health (anonymous data) and the number of alcohol and drug related disciplinary investigations.

13 RELATED POLICIES

Managing Attendance Policy
Disciplinary policy

14 REVIEW OF THIS POLICY

This policy is expected to be reviewed within 3 years but if this is deemed unnecessary the policy will remain in force until such time as it is reviewed.

15 EQUALITY IMPACT ASSESSMENT

<table>
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<tr>
<td>Nationality</td>
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<td>Sexual orientation including lesbian, gay and bisexual people</td>
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<td>Age</td>
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<td>Marriage &amp; Civil partnership</td>
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<tr>
<td>Pregnancy &amp; maternity</td>
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<td>2. Is there any evidence that some groups are affected differently?</td>
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<td>3. If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?</td>
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<td>4. Is the impact of the policy/guidance likely to be negative?</td>
<td>n/a</td>
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<td>5. If so can the impact be avoided?</td>
<td>n/a</td>
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<td>6. What alternatives are there to achieving the policy/guidance without the impact?</td>
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<tr>
<td>7. Can we reduce the impact by taking different action?</td>
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