



POLICY ON ALCOHOL AND SUBSTANCE ABUSE

1. INTRODUCTION

Heriot-Watt University as an employer has developed this policy as a positive strategy to tackling alcohol and substance related problems at work. Substances are defined as drugs, both prescribed and non-prescribed, and solvents¹. At all times the University wishes to maintain high standards of professional conduct amongst its employees.

This policy is not intended to intrude upon the privacy of individuals, particularly in health matters, where their condition does not affect their conduct or performance at work. The University is however concerned where health or behaviour impairs the conduct, safety or work performance of its staff and it recognises that the misuse of alcohol or substance abuse may be a cause of such impairment.

All facilities and guidance provided by the University under this policy will be arranged on the basis of confidentiality to the individual by those involved. Confidential support and advice will be provided to the Head of School/Section and the employee.

Whilst this is a joint policy on alcohol and substance abuse, the situation regarding substance abuse will be distinguished from that of alcohol where appropriate, due to the legal position on their possession and supply. There is also the issue that potential problems do not solely arise from the use of prohibited and other controlled substances. Certain prescribed drugs, such as tranquillisers etc. can cause difficulties with performance at work and can themselves create dependency problems and care in their use is essential. Recurrent substance abuse will be treated as a medical/social problem.

Heriot-Watt University will endeavour to ensure that an employee's use of either alcohol or substance does not impair the safe and efficient running of the University or the health and safety of its employees. It is fundamental that this policy is based primarily upon **prevention** and, if this fails, there should be the backup ability by relevant professional staff to detect and act upon the problem.

The abuse of alcohol, drugs and other substances respects no boundaries of sex, status and occupation and the Policy applies equally to all University staff without discrimination.

2. AIMS

The policy aims to:

- clarify the University's position on drinking/substance abuse at work and to minimise problems at work arising from alcohol and substances
- help those affected with alcohol and substance related problems by encouraging treatment where possible
- support staff in dealing with alcohol and substance misuse problems by providing a clear procedure
- identify the circumstances in which disciplinary action is instituted for alcohol and substance misuse

¹ Substances covered in this document are those which come under the "Misuse of Drugs Act"

- meet the University's legal obligations to ensure the health and safety of its employees, students and others at work.

3. LEGAL ISSUES IN RELATION TO EMPLOYMENT

There are various legal implications for the University where staff misuse alcohol or substances.

3.1 Health and Safety at Work Act 1974

The University could be committing a criminal offence under the Health and Safety at Work Act 1974 by "turning a blind eye" to an employee's drink or substance abuse problem. Under s.2 of the Act the University has a duty to ensure, so far as is reasonably practicable, the health, safety and welfare at work of all employees.

The attention of all employees should be drawn towards their own responsibilities to themselves and their colleagues under s.7 of the Act. It is an employee's legal duty 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.²

3.2 Misuse of Drugs Act 1971

Under the Misuse of Drugs Act 1971 it is an offence for an employer to knowingly allow substances to be used, kept or supplied on their premises. It is also illegal under the Act for an employer to ignore such occurrences. Possession, use or supply of illegal substances, or being complicit in such behaviour by others, is strictly forbidden in the workplace and will result in disciplinary procedures being instigated. The University may be made aware of such behaviour through outside sources as well as through an employee's actions at work.

3.3 Disability Discrimination Act 1995

Dependency on alcohol or any other substance does not, of itself, amount to a disability for the purposes of the Disability Discrimination Act, however impairments that are the result of an addiction or dependency are covered by the Act.

3.4 Police Involvement

Certain cases that occur during employment may give rise to criminal proceedings/prosecutions against an employee by the police. In some cases it is still possible to proceed with the disciplinary process on the basis of the known facts. Where there is concern that an employee may have acted outwith the law, the Secretary of the University will be advised and a decision will be taken on the appropriateness of police involvement.

Sometimes an employee's actions outside of employment may lead to criminal proceedings/prosecution. Each case must be carefully considered. The Secretary of the University will be advised before any decision is taken to initiate formal disciplinary procedures. The fact that an employee is subject to criminal proceedings does not automatically mean the disciplinary process should be invoked.

4. DRINKING AT WORK

² The Health and Safety Executive produces guidance notes on encouraging workers to seek assistance and treatment for alcohol and substance problems. These are available from the University Health Centre or the Safety and Risk Office.

The consumption of alcohol at work is not condoned. Those staff performing safety-critical roles, such as using potentially dangerous substances, dealing with specialised equipment, driving company vehicles, are not permitted to drink at work. It is expected that with the permission of the Head of School/Section alcohol will be available at special events. On such occasions, where alcohol is available suitable non-alcoholic alternatives must always be available. Staff should take responsibility for ensuring they are fit to carry out their duties at all times.

5. MANAGING ALCOHOL AND DRUG MISUSE

The policy and procedures distinguish between:

- overindulgence which results in socially unacceptable or even dangerous behaviour but which is not related to a physical or psychological dependence
- where a person's dependency continually or repeatedly interferes with his/her work.

The former type of behaviour will be treated as a conduct problem, which may merit disciplinary action or dismissal, while the latter will initially be seen as an ill-health issue and treated as such.

5.1 Non-Dependent Misuse of Alcohol or Substances

If it is established that an employee's misconduct in the form of drinking or being drunk at work or substance abuse is not due to a dependency, recourse to the disciplinary procedures may be appropriate.

The nature and appropriateness of disciplinary action will depend on such considerations as:

- the seriousness of the misconduct
- clear rules warning employees what will happen if an offence is committed
- consistency in applying rules
- type of work done by the employee e.g. the safety risks of an employee being under the influence of alcohol will be considered

The University will consider each case individually and endeavour to act reasonably. Off-duty drink or drug misuse may lead to disciplinary procedures if they affect job performance.

5.2 Alcohol or Substance Dependency

As well as obtaining medical advice the University will normally discuss the matter with the employee before deciding whether rehabilitation is feasible and only then decide a reasonable time frame for the employee to recover. All practicable steps will be taken to establish the true position.

The length of time which is acceptable before taking action will vary. The University must show that, bearing in mind all the circumstances, the timescale allowed was reasonable.

Relevant considerations will include:

- the employee's willingness and commitment to obtaining treatment
- the estimated duration of any absence during treatment
- the urgency to have the employee's work done
- the ease of providing cover or reassigning duties
- the availability of support agencies
- the detail of the treatment plan.

POLICY

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6. PROCEDURE

6.1 Establishing the Problem

The following characteristics, especially in combinations, may indicate the presence of an alcohol or substance related problem.

Absenteeism: instances of unauthorised leave, frequent Friday and/or Monday absences, leaving work early, lateness (especially returning from lunch), excessive leave or sickness absence, strange and increasingly suspicious reasons for absence, unusually high level of sickness for colds, flu, stomach upsets, unscheduled short-term absences, with or without explanation.

High Accident Level: at work, elsewhere, i.e. driving, at home

Work Performance: difficulty in concentration, work requires increased effort, individual tasks take more time, problems with remembering instructions or own mistakes.

Mood Swings: irritability, depression, general confusion.

Self Referral: In some instances, employees may seek help and advice themselves.

6.2 Intervention

The University will offer support to individuals who recognise they have an alcohol or substance abuse problem and also sanction action by colleagues and managers who wish to help those individuals.

Employees' work performance may also be adversely affected if they have a close friend or relative who has a drink or substance abuse problem. If this is the case, professional advice may be sought e.g. via through an individual's GP, via the Employee Helpline, Human Resources or Occupational Health.

6.2.1 Action by the Individual

Employees who know or suspect that they have an alcohol or substance problem are encouraged to seek help voluntarily. His/her first contact may be their GP, or one of the local voluntary services listed in Appendix 1. Within the University, help should be sought from the Head of School/Section, or from Occupational Health via the Human Resources Office.

6.2.2 Action by Colleagues

It is likely that an employee with an alcohol or substances problem will come to the notice of a School/Section through the observation of colleagues or through inadequate or deteriorating work performance. It is in the interest of the employee with such a problem to be offered help as soon as possible, as prompt action carries the best hope of successful treatment to be effective.

Staff are encouraged to address the issue directly, and not to cover up for colleagues with a drink or substance problem, as collusion represents a false sense of loyalty and may, in the longer term, impact on other employees. The first approach should normally be for colleagues to encourage the employee to recognise his/her problem and to seek advice, either through his/her GP or the agencies listed in Appendix 1. If this fails, colleagues are encouraged to alert the Head of School/Section to the situation so that more formal action may be taken. If this is done timeously, it is far more likely that the treatment will be effective.

6.2.3 Action by the Head of School/Section

A Head of School/Section who feels that an employee's unsatisfactory performance may be substance or alcohol-related, should keep accurate confidential records of poor performance and should initially interview the employee on a confidential basis. At the meeting the employee should have his/her unsatisfactory performance/conduct and behaviour, which is believed to be related to substance/alcohol misuse, discussed. The required work performance standards should be made clear, making sure the employee understands what is expected of him/her. The Head of School/Section should try to establish the cause of the problem (although it must be pointed out that individuals with a substance or alcohol problem will often go to great lengths to conceal the situation).

The employee should be informed that the University requires his/her performance to be improved to an acceptable standard and that failure to achieve this will result in the activation of the disciplinary procedures. The Head of School/Section should agree with the employee what follow-up action is to be taken, including recourse to treatment for their problem, and set regular meetings to monitor progress.

If, after sustained and supportive intervention, the employee denies that either alcohol or substances are the cause of the problem and the employee refuses to respond to advice, he/she should be treated as for any other disciplinary/capability problem, whichever is judged as appropriate by the Head of School/Section. As with all University policies on disciplinary or capability matters, an employee is entitled to be accompanied by a work colleague or trade union representative to a formal meeting at this stage.

If the disciplinary procedure is activated and there are strong signs that the employee's unsatisfactory performance is substance or alcohol-related and he/she will not admit or acknowledge this, further encouragement should be given at all stages of the disciplinary procedure to face up to the true underlying problem. The opportunity should also be taken to record concern for the health and possible predicament of the employee, to highlight the support available, and to request the employee to seek help as soon as possible. This will be via a referral to the Occupational Health Unit.

6.3 Treatment

The condition of individuals with alcohol or substance abuse problems may be capable of treatment to achieve the restoration of acceptable standards of work. Where appropriate advice is sought and followed, the University is willing to encourage and support individuals in following this course. While it is satisfied that the individual is supporting this action, the University will make available guidance, the provisions of its sick pay scheme and withhold disciplinary action if practicable. If appropriate, individuals may be suspended on full pay while undergoing treatment. However, the University's responsibilities to others, such as colleagues and students, and for the general performance of its functions, will occasionally give cause for an individual's case to be considered under the relevant disciplinary procedures. This latter case is most likely when the individual will not co-operate with appropriate treatment agencies, or comply with recommended treatment or regimes.

Where an employee acknowledges that he/she has a problem and is given help and treatment, this will be on the understanding that:

- whilst he/she is undergoing treatment he/she may be on sick leave and will be entitled to the usual University sick pay benefits
- every effort should be made to ensure that on completion of the recovery programme the employee is able to return to the same or equivalent work.

However, where such a return would jeopardise either a satisfactory level of job performance or the employee's recovery, the Head of School/Section with the Director of Human Resources (or his/her

representative) will review the full circumstances surrounding the case and agree a course of action to be taken. This may include the offer of suitable alternative employment, the consideration of retirement on the grounds of ill health through the relevant Sickness Absence Policy or dismissal through the relevant Disciplinary Policy. (Before a decision on dismissal is made, it should be discussed with the employee and an up-to-date medical report obtained, with the permission of the member of staff in line with the requirements of the Access to Medical Reports Act 1988, and/or the advice of the Occupational Health Adviser.)

6.3.1 Relapse

Where an employee, having received treatment, suffers a relapse, the University will consider the case on its individual merits. Further referral to the Occupational Health Adviser should be made, and further medical reports (with the permission of the member of staff) may be sought in an attempt to ascertain how much more treatment/rehabilitation time is likely to be required for a full recovery. At the University's discretion, more treatment or rehabilitation time may be given in order to help the employee to recover fully.

6.3.2 Recovery Unlikely

If, after an employee has received treatment, recovery seems unlikely, the University will have to consider the most appropriate course of action to resolve the situation. In such cases, dismissal may result but in most cases a clear warning will be given to the employee beforehand, and a full medical investigation will have been undertaken.

In certain cases, strictly at the discretion of management, early retirement may be considered.

7. OTHER SERIOUS MISCONDUCT CAUSED BY ALCOHOL OR SUBSTANCES

7.1. Intoxication on the Premises

If an employee is known to be, or strongly suspected of being intoxicated by alcohol or substances during working hours the Director of Human Resources (or his/her representative) should be consulted. Arrangements will be made for the employee to be escorted from the University premises immediately. Disciplinary action will be considered when the employee has had time to become sober. Consideration will be as described in paragraph 5.1 or 5.2, as appropriate, though intoxication, whether resulting from a dependency problem or not, is considered a serious breach of discipline.

7.2 Substance Abuse on the Premises

Employees who take substances on University premises which have not been prescribed on medical grounds will, in the absence of mitigating circumstances, be deemed to be committing an act of gross misconduct and may be subject to the disciplinary process as will any employee believed to be buying or selling substances, in possession of unlawful (i.e. unprescribed) substances, have stolen substances from the University or involved in the attempted manufacture of substances on University premises.

8. TRAINING AND DEVELOPMENT

The University is committed to provide training to help with the management of alcohol and substance abuse problems.

Training is available to Heads of School/Section, Line Managers and Supervisors in order to develop "early recognition" techniques for identifying any employee misusing alcohol or substances.

Effective interviewing and counselling skills will be developed so that employees can be dealt with promptly, tactfully and firmly.

9. REVIEW

This policy will be regularly reviewed and evaluated.

Reviewed: June 2004

APPENDIX 1

Agencies willing to help with Alcohol/Substance Problems

Employee Helpline
(free service available to all members of staff and their families)
0800 068 6729

Alcoholics Anonymous
38 Cockburn Street
EDINBURGH
0131 225 6090

Edinburgh and Lothian Council on Alcohol
40 Shandwick Place
Edinburgh
EH2 4RT
0131 225 8888

WEST (West Edinburgh Support Team) – for people with drug-related issues, their families and friends
12a Dumbryden Road
Edinburgh EH14 2AB
0131 442 2465

CDPS – Community Drug Problem Service (must be referred by a professional, eg a GP)
The Spittal Street Centre
22-24 Spittal Street
Edinburgh
EH3 9DU
0131 537 8345

Appendix 2

OCCUPATIONAL HEALTH PROCEDURE

CODE OF PRACTICE ON ALCOHOL AND SUBSTANCE ABUSE

INTRODUCTION

The Occupational Health Unit aims to play an active role in the implementation of the University Code of Practice on Alcohol and Substance Abuse, by providing medical advice and overseeing the employee's treatment through regular communication with the various agencies dealing with alcohol/substance addiction.

It will accept formal referrals via the Human Resources Office who will have been approached by the Head of School/Section, as well as self-referrals.

1.FORMAL REFERRALS

1.1. When disciplinary procedures have been taken or threatened against an individual who admits of having an alcohol or substance related problem, under the Policy on Alcohol and Substance Abuse, any further related disciplinary action will be suspended on condition that the individual admits to having an alcohol or substance related problem, agrees to sign the consent form, and follows the agreed programme of treatment.

1.2. The employee will be invited for an initial discussion with the Occupational Health Adviser.

1.3. If the employee admits to having an alcohol or substance related problem, he/she will be asked to agree to adhere to a specific course of action and sign the 'Consent form – alcohol and substance abuse treatment plan'.

1.4. If the employee denies having an alcohol or substance related problem, he/she will be referred back to the original source of referral.

1.5. The Access to Medical Reports Act 1988 will be explained to the employee who subsequently will be asked to sign a consent form to enable the Occupational Health Adviser to request ongoing medical report(s) from appropriate sources (General Practitioner, Hospital Consultant). Refusal to sign will lead to a withdrawal of support from the Occupational Health Adviser and the referring School/Section would be immediately informed.

1.6. Appointments will be made at appropriate intervals.

1.7. Regular reports will be sent to the Human Resources Office and Head of School/Section advising on the employee's progress and intention of further review. Equally any relevant information regarding the individual's progress at work must be passed on to the Occupational Health Adviser.

2.SELF REFERRALS

2.1. Employees who either suspect or know that they have an alcohol or substance related problem are advised to seek help from the Occupational Health Adviser.

2.2. Their disclosure of such information will remain confidential to the Occupational Health Adviser, unless the employee decides after discussion that it is in their interest to let the Human Resources Office or their Head of School/Section know.

2.3. Advice regarding the different sources of help will be given.

2.4. If the individual agrees to let the Occupational Health Adviser inform the Human Resources Office, he/she should be treated under the Policy on Alcohol and Substance Abuse (the same conditions as 1.5 above would apply).

3.FAILED TO COMPLY WITH THE AGREED TREATMENT PLAN

3.1. The Occupational Health Adviser will advise the Human Resources Office and the Head of School/Section of the discontinuation or non-adherence to the agreed course of treatment by the employee.

3.2. Normal disciplinary procedure will then be taken by the Human Resources Office.

4.NON ATTENDANCE

4.1. The Human Resources Office and Head of School/Section will be advised of any failure to attend an occupational health appointment.

4.2. Following a missed appointment, the Occupational Health Adviser may wish to discontinue any follow up.

4.3. As a result of non-attendance, appropriate disciplinary procedure may be initiated by the Human Resources Office.

Any recurrence of the problem with an employee who had previously satisfactorily completed a course of treatment will be dealt on merit. Further treatment may in certain circumstances be possible.

CONSENT FORM

ALCOHOL AND SUBSTANCE ABUSE TREATMENT PLAN

I, agree that I will let myself be guided by the treatment plan as outlined below through the Occupational Health Unit of the Heriot-Watt University.

I will agree to be referred to the following helping agencies:

.....
.....
.....

I will give my consent for the Occupational Health Unit to request regular reports from those helping agencies.

I give my consent for the Occupational Health Unit to report on my regular progress to the Human Resources Office and my Head of School/Section under the terms of the Alcohol and Substance Abuse Policy.

I understand that all information so gained will be kept confidential between myself and the Occupational Health Unit but that I give them permission to summarise my progress to the Human Resources Office and Head of School/Section on a regular basis under the terms of the Policy on Alcohol and Substance Abuse.

I agree to keep all my appointments with the Occupational Health Unit. I understand that the Human Resources Office and my Head of School/Section will be informed of any missed appointment and that subsequently, disciplinary action may be taken.

Signed Date

This specific consent will be reviewed in 6 months as will your adherence within the policy.