

# Alcohol, Drugs, Substance Misuse and Smoke Free Policy

## Policy reference – HR020

SUMMARY	The aim of this policy is to provide a process and framework for alcohol, drugs and substance misuse at the workplace. It also provides the necessary support to employees and line managers to manage each individual case in line with best practice.
AUTHOR	Human Resources
VERSION	2.0 FINAL
EFFECTIVE DATE	November 2018
APPLIES TO	Applicable to all CCG employees, contractors, agency staff, volunteers and visitors.
APPROVAL COMMITTEE	CCG Remuneration Committee
REVIEW DATE	November 2021

***This policy has been aligned to Greater Huddersfield and North Kirklees CCGs in light of shared staff working across the CCGs.***

**THIS POLICY HAS BEEN SUBJECT TO AN EQUALITY IMPACT ASSESSMENT**

**VERSION CONTROL SHEET**

<b>Version</b>	<b>Date</b>	<b>Author</b>	<b>Status/Approval Body</b>	<b>Circulation</b>
0.1	30.10.2014	Paul Appleyard	Draft	Draft circulated
0.2	05.11.2014	Stacey White	Draft	Following comments from policy working group and SMT
0.3	27.01.2015	Katherine Duke	Draft	Updated following SPF comments
1.0	26.02.2015	Katherine Duke	FINAL	Updated following Remuneration Committee
1.1	18.09.2018	Tazeem Hanif	Draft	Policy aligned to GH/NK CCGs and submitted to SMT for comment – policy agreed.
1.2	28.09.2018	Tazeem Hanif	Draft	Policy agreed electronically by Trade Unions at the Social Partnership Forum.
2.0	14.11.2018	Tazeem Hanif	Final	Policy approved by the Remuneration Committee, in line with the electronic policy approval process.

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## 1. Purpose

- 1.1. The Clinical Commissioning Group (“CCG”) recognises its responsibilities with regard to the health and welfare of its staff. Inappropriate use of alcohol, drugs and other substances can impact on the health and wellbeing of staff and have an effect on their personal and working lives.
- 1.2. The effects of alcohol, drugs or other substance misuse are likely to be detrimental to the CCG’s reputation and image and its ability to deliver high quality services.
- 1.3. The CCG is committed to providing a safe and productive environment and to promote the health, safety and wellbeing of its staff. Employees also have a duty to co-operate with and implement the CCG policies in this respect so there is shared ownership of health and safety. The CCG recognises that health and safety may be put at risk by employees and other staff who misuse alcohol, drugs or other substances to such an extent that their health, work performance, conduct and working relationships are adversely affected. A zero tolerance approach will therefore be taken with regards to abuse relating to this policy.
- 1.4. This policy therefore sets out the principles for managing issues around the misuse of alcohol, drugs and other substances in order to ensure a fair, reasonable and consistent approach. Staff have a contractual obligation to report to work free of alcohol, drugs or other substances. Staff behaviour which falls short of acceptable standards in this respect will be referred to the disciplinary process, or where mitigating circumstances apply, a supportive environment will be provided in line with the procedure set out in this policy. The policy aims to:
  - Set out the rules regarding the use of intoxicating substances and ensure staff are aware of the likely consequences to their employment if they misuse them;
  - Create a climate that encourages staff who may be misusing substances to come forward, seek help and accept treatment;
  - Provide a framework to enable instances of misuse to be handled in an appropriate, confidential and consistent manner;
  - Promote a healthy and safe working environment;
  - Comply with relevant legislation such as the Health and Safety at Work Act 1974, Misuse of Drugs Act 1971 and the Road Traffic Act 1998.
- 1.5. This policy covers habitual alcohol or substance misuse where the employee and other staff are dependent on the effects of the substance, to the extent that the drinking or drug use becomes a dominant concern in their lives and may be detrimental to others. In this instance appropriate support will be offered in line with this policy and provided with dignity and respect. It is the individual’s responsibility to comply with rehabilitation recommendations or the Disciplinary Policy and Procedure will be invoked.
- 1.6. The policy excludes indulgence in alcohol or substance misuse which affects health and safety in the workplace where there is not an underlying dependency; in this situation the Disciplinary Policy and Procedure may be invoked. Inappropriate use of alcohol or substances may be regarded as gross misconduct.
- 1.7. It is an offence under the Misuse of Drugs Act 1971 for an employer to allow its premises to be used for the production, supply or possession of controlled drugs unlawfully and reasonable action to prevent this should be taken.

## **2. Responsibility**

2.1 Good working relations are vital for the CCG to operate successfully and provide services. There is a joint responsibility for management, Trade Unions and staff to accept the responsibility of working together on issues in good faith and with the shared intention of facilitating good working relations.

### **2.2 Line Managers**

The key responsibilities for line managers include:

- Ensuring staff understand the policy and are aware of the rules and consequences regarding the use of alcohol, drugs and other substances;
- Providing advice to staff in relation to their roles and responsibilities under this policy;
- Awareness to any changes in behaviour which may indicate alcohol, drug and/or substance misuse and to monitor performance, attendance and sickness absence (see appendix 1);
- Obtaining advice from a HR representative in managing a situation where an employee or other staff are misusing alcohol, drug and/or substance;
- Promoting an open and honest culture where employees and other staff feel able to take personal responsibility for their own health and safety in relation to alcohol, drug and/or substance misuse and support others to do so;
- Encouraging staff to seek help voluntarily;
- Ensuring staff are aware of support available to them through work, for instance Occupational Health advice, and support and / or counselling through the Employee Assistance Programme;
- Providing support to staff who are being rehabilitated and engage appropriately with Occupational Health in relation to supporting an individual with a problem and enabling them to continue to carry out their role;
- Identifying and referring disciplinary matters connected to the misuse of alcohol, drugs, substance misuse as appropriate;
- Keeping records of meetings with employees and other staff in relation to this policy.

### **2.3 Employees and other staff**

It is the responsibility of the employee and other staff to ensure that they:

- Report for work and remain in a condition to perform their duties free from the effects of alcohol, drugs or any other substance, whether on organisation premises or external locations;
- Inform their line manager or another appropriate manager if they have an alcohol or substance misuse problem;
- Co-operate with any support and assistance provided by the organisation to address an alcohol or substance misuse problem;
- Inform an appropriate manager or HR representative if they know or strongly suspect that another employee or staff is under the influence of alcohol or drugs at work;
- Where attendance at events is required outside of working hours to remain professional. That the CCG expects staff to demonstrate responsible behaviour and to act in a way that does not have a detrimental effect or impact negatively on the CCGs reputation;

- Support and encourage colleagues to take personal responsibility should they have an alcohol, drug or substance misuse problem;
- Comply with relevant codes of conduct including professional codes of conduct.

## **2.4 Human Resources**

The Human Resource representative will provide advice and support on all aspects of this policy to ensure application and support.

## **3. Confidentiality**

- 3.1 Confidentiality will be maintained in all aspects of this policy and records will be stored and processed in line with Data Protection legislation and the Common Law Duty of Confidence.

## **4. Equality Statement**

- 4.1 In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, sex, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, carers and sexual orientation. A consistent Equality Impact Assessment is used for all policies and procedures.

## **5. Accountability**

- 5.1 The Chief Officer is accountable for this policy.

## **6. Implementation and Monitoring**

- 6.1 The Remuneration Committee is responsible for the formal approval of this policy. Following approval, the policy will be disseminated to staff via internal communication methods and available through the staff intranet.
- 6.2 The policy and procedure will be reviewed periodically by the HR Team in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen sooner.

## **7. Principles - Alcohol, Drugs and Substance Misuse**

- 7.1 It is prohibited for staff to report to work while unfit because of alcohol, drug and/or substance misuse. This includes heavy consumption the night before work, and staff should be aware of the time it takes for alcohol to leave their system. If a staff member finds they are unfit for duty due to unforeseen exceptional circumstances they should contact their line manager by phone to discuss the options, which may include agreement for annual leave or unpaid leave to be taken.
- 7.2 Where the individual is under the influence of alcohol, drug and/or substance misuse, and, in the opinion of a line manager (using appendix 1 as a guideline), is not fit to be at work, the individual will be instructed not to attend work until fit to do so. Staff members will be considered unfit for work if they attend work smelling of alcohol. Individuals must not consume alcohol or substances at any time whilst at work regardless of location, including during breaks (e.g. lunch). These instances will be investigated under the Disciplinary Policy and Procedure if they are not related to an underlying dependency problem.
- 7.3 Staff must not bring alcoholic drinks on the premises for consumption.
- 7.4 The CCG prohibits the possession, transfer, sale or use of unauthorised drugs, or illegal substances on its premises. Any staff member found to be in possession of an illegal substance will be suspended from duty and a full investigation will be carried out under the Disciplinary Policy and Procedure (incidents involving allegations of professional misconduct relating to alcohol or substances may be reported to the appropriate professional body. Under the Misuse of Drugs Act 1971, the CCG has a duty to deal with such issues and all drug related issues will be reported to the police and could lead to criminal proceedings.
- 7.5 Staff members must not drive whilst under the influence of any intoxicating substance. This includes driving to/from work and during work time. It should be noted that some prescribed medication will also affect an individual's ability to drive safely; it is the individual's responsibility to seek advice from their GP if required.
- 7.6 If a colleague has reasonable grounds to suspect a staff member has an alcohol, drug and/or substance misuse problem that affects the health and safety of any staff member or the individual's performance, they should inform the individual's line manager. There will be no repercussions for the individual raising concerns. Staff members who attempt to cover up in a work situation for a colleague who puts themselves, others or the reputation of the CCG at significant risk may be subject to disciplinary action.

## **8. Prescribed Medicines**

- 8.1 It should be recognised that both prescribed and over-the-counter medicines may cause impairment to an individual's performance at work. Staff should seek advice from their GP or pharmacist on any medicines they are taking and should not exceed the recommended dose. Staff should be encouraged to discuss any problems with Occupational Health if they feel this would be helpful and to take responsibility for ensuring they are fit to be at work. They should inform their line manager of any side effects of their medication that will impair their performance. For example, if it could have serious impact on driving during the course of work and/or affect their work performance. Line managers should seek HR and Occupational Health advice in relation to reasonable adjustments.

## **9. PROCEDURE**

9.1 Alcohol, drug and substance misuse issues are recognised as health issues which may affect an employee's capability to carry out their duties. The CCG will treat all staff members who have a misuse problem, in a supportive manner and every reasonable effort will be made to deal with them accordingly and make the same provisions for treatment as for any other illness, at the same time as maintaining a safe environment for staff, patients and visitors. Where the individual accepts responsibility for their behaviour and agrees to seek help, the matter will be dealt with in line with this policy. Where they do not accept responsibility or do not agree to follow/sustain a rehabilitation programme or behaviours persist (which are unacceptable to the CCG), action will be taken under the Disciplinary Policy and Procedure (which includes the right to be accompanied by a colleague or Trade Union Representative). Please refer to the flow chart in appendix 2.

### **9.2 Dealing with a Concern**

9.2.1 Alcohol, drug and substance misuse may come to the attention of a line manager in several ways, for example directly from the individual concerned, through information supplied by a colleague, misconduct, absenteeism or deterioration in work performance (please see appendix 1 for further signs). It is important that there is early intervention by appropriate manager(s) when alcohol or substance abuse is suspected and it is affecting an individual's work performance. Further advice can also be sought from HR or Occupational Health.

9.2.2 Once aware of a suspected problem, the line manager should meet with the staff member at the earliest opportunity to raise the concerns and establish if there is an underlying alcohol or substance misuse problem. The individual has the right to be represented by a work colleague or Trade Union Representative at this meeting. The line manager should also establish if there are any other issues affecting their performance or conduct. If the individual admits to having a misuse problem (for example misuse problem linked to mental health), an Occupational Health referral will be made and the misuse will be dealt with as a health condition. If the individual does not accept that they have an alcohol, drug and/or substance misuse problem, action will be taken in line with the Disciplinary Policy and Procedure.

9.2.3 Any staff member arriving or returning to work who is suspected of having consumed alcohol at or before work, or being under the influence of drugs or substances, should be removed from duty immediately. The staff member should not drive in line with the Road Traffic Act 1988 and should be supported to make alternative arrangements to get home safely.



### **9.3 Occupational Health**

- 9.3.1 An Occupational Health referral may be made by a line manager, with the consent of the individual.
- 9.3.2 The Occupational Health Service can offer support and advice to the individual; they may arrange referrals to other agencies with the individual's consent, monitor progress and, subject to the rules of confidentiality, provide advice for the line manager regarding the fitness to work for the staff member. They cannot treat an individual for an alcohol, drug and/or substance misuse problem. They will not be able to carry out immediate/urgent testing to 'prove' that an individual is unfit for work due to alcohol, drug and/or substance misuse if an individual's line manager suspects it.
- 9.3.3 The Occupational Health Service will carry out a confidential assessment of such health issues in relation to an individual's work and responsibilities. There will be an appropriate and ethical exchange of information which takes into account the sensitive nature of the condition between involved parties. This is to enable advice about fitness to work or reasonable adjustments according to health status can be provided.
- 9.3.4 At the Occupational Health clinician's discretion, when an individual has been seen in Occupational Health Service and is returning/continuing to work, testing of biological specimens (e.g. urine, blood and breath testing) may be suggested. This can only be arranged with the individual's consent. For testing there will be strict adherence to the acknowledged correct procedure.
- 9.3.5 Staff members are required to attend Occupational Health appointments in line with this procedure. The line manager will make a referral to Occupational Health giving full background to the case.
- 9.3.6 If the Occupational Health Service does not confirm the existence of an alcohol, drug and/or substance misuse problem, or any other health condition, the line manager should make an assessment on the basis of the information available to them and decide whether it is appropriate to commence an investigation in line with the Disciplinary Policy and Procedure or to deal with the matter under another policy, such as the Performance Management Policy.
- 9.3.7 If the Occupational Health Service confirms the existence of an alcohol, drug and/or substance misuse problem, they may refer the individual to their GP or direct them towards an appropriate agency (e.g. alcohol / substance misuse support services). Where the individual is recognised as suffering from alcohol, drug and/or substance misuse is prepared to accept responsibility and undergo an appropriate form of treatment programme; continued employment with the organisation will be maintained where possible during such treatment.

## **9.4 Treatment Programme**

- 9.4.1 Where a misuse problem is identified, the Occupational Health Service can refer the individual to an appropriate agency/GP to follow a treatment programme. Examples of what this may include are counselling, in-patient detox and rehabilitation followed by extended outpatient therapy and or self-help groups and medication. This will be managed in line with the Managing Sickness Absence Policy and clinical advice will be sought regarding their fitness for work. Reasonable time off for rehabilitation or counselling should also be discussed and regular contact made. The individual must take responsibility for following the treatment programme.
- 9.4.2 If the treatment programme is discontinued and there is repeat misconduct by the individual where treatment suggested by the Occupational Health Service/GP has not been accepted or followed, disciplinary action may be taken, which could result in a formal warning up to and including dismissal.
- 9.4.3 Where misuse is not eliminated or controlled sufficiently to allow resumption of normal working arrangements within a reasonable period of time with appropriate support, and no suitable alternative employment can be found, the matter will be dealt with as an issue of capability on ill health grounds or if appropriate, discipline.
- 9.4.4 Following successful treatment the employee should be supported as much as possible back into the workplace with the advice of Occupational Health, considering the risk of relapse. Continued awareness from the line manager will be required in case of a relapse and continued support should be provided. Line managers are expected to monitor performance and absenteeism during a period of rehabilitation. The line manager should inform the employee of performance and attendance expectations and it should be emphasised that appropriate policies will be followed if required.

## 10. Smoke Free

- 10.1 On 1<sup>st</sup> July 2007, the smoke free law was introduced to protect employees and the public from the harmful effects of second-hand smoke. The key points around this piece of legislation are:
- It is now against the law to smoke in virtually all 'enclosed' and 'substantially enclosed' public places and workplaces.
  - Public transport and work vehicles used by more than one person must be smoke free at all times.
  - No-smoking signs must be displayed in all smoke free premises and vehicles.
  - Staff smoking rooms and indoor smoking areas are no longer allowed, so anyone who wants to smoke has to go outside.
  - Managers of smoke free premises and vehicles have legal responsibilities to prevent people from smoking.
  - If you are uncertain where you can or can't smoke, just look for the no-smoking signs or ask someone responsible for the building.
- 10.2 The CCG prohibits smoking at work at any time on the organisation's premises. This includes the use of electronic cigarettes. If employees are smoking on work premises action will be taken under the Disciplinary Policy and Procedure.
- 10.3 Staff members who do smoke are encouraged to seek support to quit. Information on smoking can be accessed from the following resources: [www.smokefree.nhs.uk](http://www.smokefree.nhs.uk) or [www.canstopsmoking.com](http://www.canstopsmoking.com).
- 10.4 For staff members who do choose to find an appropriate place to smoke during working hours, they should do so during existing break allocations and it is not expected that additional 'smoke breaks' are taken. It is expected that these breaks are taken out of sight of potential visitors to the organisation and not near any entrances/exits to buildings.

## **11. Relationship to other policies**

- 11.1 Managing Sickness Absence Policy** - where a problem has been identified with an individual, the line manager should ensure that any steps to deal with the matter are consistent with the CCG's Managing Sickness Absence Policy where this is a health matter. Individuals have a responsibility for keeping their line manager informed of any medical or other condition or any other factor which might affect attendance. For example, taking prescribed medication.
- 11.2 Managing Sickness Absence Policy (Leave of absence on medical grounds)** – Where there is a concern affecting the ability to work, initial action must be taken informally by the line manager so support can be made available at an earlier stage. It would not be normal to suspend an individual pending investigation under leave of absence on medical grounds unless there it is deemed that they are a risk to themselves and other staff. Leave of absence (where necessary) must be carried out in line with the CCG's Managing Sickness Absence Policy.
- 11.3 Disciplinary Policy and Procedure** - clear reference is made in the organisation's Disciplinary Policy and Procedure to being unfit for duty through alcohol or substance misuse, which is likely to be regarded as gross misconduct and which may result in summary dismissal. Whilst individuals with an issue of alcohol and/or substance misuse should be regarded as suffering from an illness and treated accordingly, there may be occasions when such individual's commit offences of misconduct for which disciplinary action is the necessary outcome. Prior to any consideration of disciplinary action, an investigation of the circumstances will take place in accordance with the Disciplinary Policy and Procedure. Due consideration will be given to whether the individual has sought treatment or help.
- 11.4 Performance Management Policy** – Line managers should seek HR advice on the individual circumstances of each case to understand when it is appropriate to instigate the performance management. If an individual is being managed under the Performance Management Policy and the effect of drugs or alcohol misuse has an impact on the performance concern, the issue should be managed under the Alcohol, Drugs and Substance Misuse Policy for support in the first instance, including seeking Occupational Health advice. If following support under the Alcohol, Drugs and Substance Misuse policy, there is still an ongoing issue or concern with performance, the issue should then continue to be managed under the Performance Management Policy.
- 11.5 Health and Safety Policies** - under the Health and Safety at Work Act (1974) the organisation has a duty to ensure the health, safety and welfare at work of all its employees and other persons including visitors and contractors using the premises. Similarly employees and other staff have a duty to take reasonable care for the health and safety of themselves and all other persons who may be affected by their acts or omissions at work. Health and safety and the impact on the service must be taken into consideration where an individual is known to have a problem related to alcohol, drug and/or substance misuse which could potentially affect the way he/she works. The workplace (health, safety and welfare) regulations require that employers shall make suitable and sufficient assessment to the risks to the health and safety of its staff members, to which they are exposed whilst at work. Where risks are foreseeable the employer has a duty to devise measures which provide a safe work place.

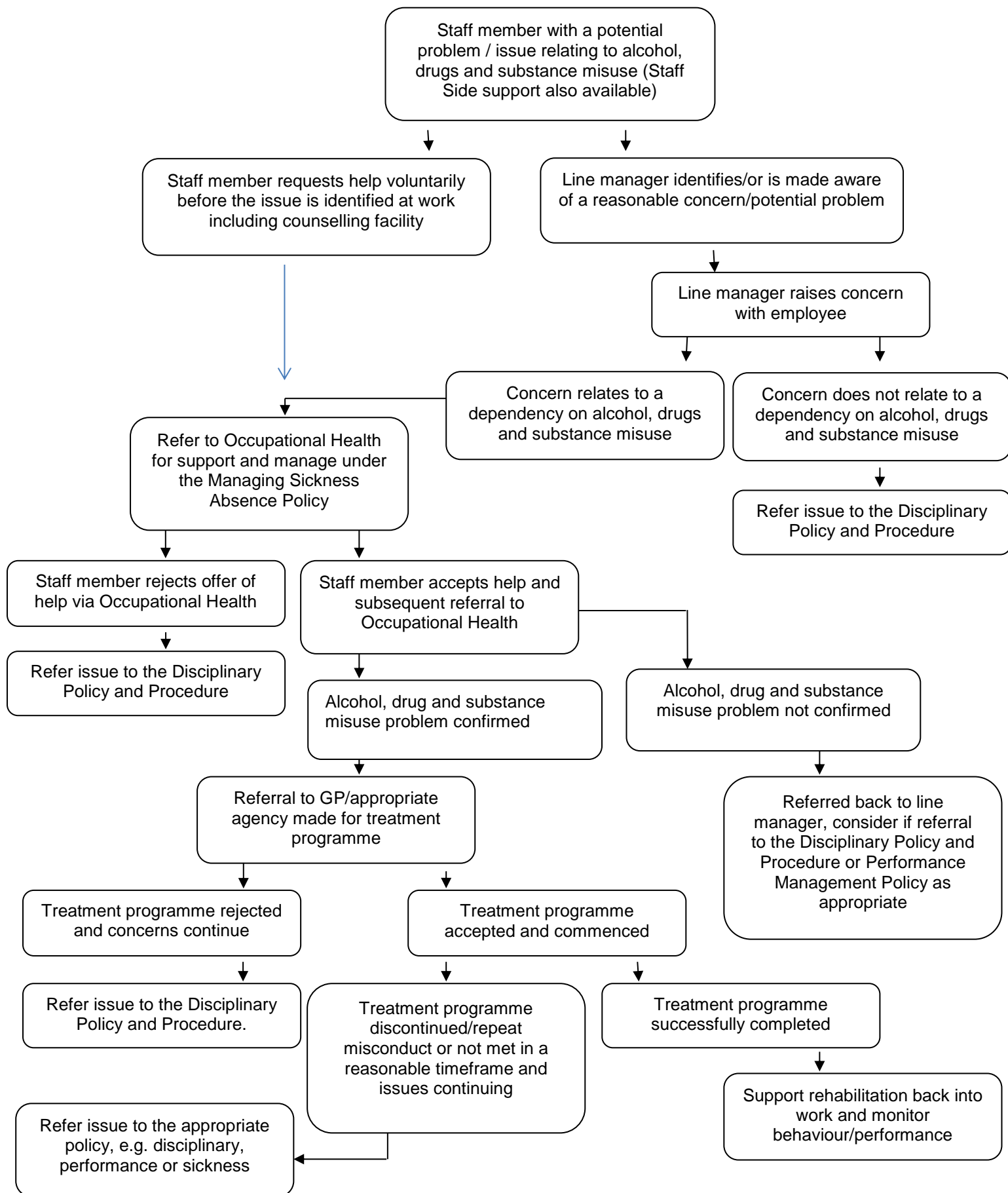
## **Appendix 1 – Signs of Alcohol, Drugs and Substance Misuse**

Signs of alcohol, drugs and substance misuse are not always obvious and may be confused with other conditions or problems. It is sensible to bear in mind the possibility of alcohol, drugs and substance misuse when the following behaviours are observed (this list is not exhaustive).

Please note that not all people with alcohol, drugs and substance misuse problems display all or any of these behaviours. Some of these behaviours may also indicate other issues which are not associated with alcohol, drugs and substance misuse. If in doubt, contact the Occupational Health Service and/or Human Resources for advice.

- Abnormal fluctuations in mood and energy, irritability, impaired concentration, lethargy;
- Tendency to become confused;
- Poor timekeeping;
- Repeated absences for trivial or inadequate reasons;
- Increase in short-term sickness absence;
- Impairment of job performance;
- Being prone to accidents, increased incidence of mistakes or errors of judgement;
- Deterioration of relationships with other people;
- Dishonesty and theft (arising from the need to maintain an expensive habit);
- Hand tremors, slurred speech, facial flushing, bleary eyes, poor personal care and hygiene;
- Smelling of alcohol or other substances.

## Appendix 2 - Flowchart



## Appendix 3 – Local and National Support Available for Staff

All CCG employees and their dependents can access the Employee Assistance Programme (EAP), free of charge, 24 hours a day, 7 days a week. The EAP is provided by Health Assured, and offers confidential advice and counselling on the phone, online and face to face.

The website is [www.employeeecare.com](http://www.employeeecare.com) and the 24 hours contact number is 0800 716 017. The username and password are both 73116.

Below is a list of services in the local area to support staff, along with some national agencies that you can contact no matter where you live. Some of the services listed below may not be available to everyone. They might be specific to a certain age group, or require a referral from GP or health professional so it's always best to check before you visit the service.

- [Drinkline](http://www.drinkaware.co.uk/alcohol-support-services/) is the national alcohol helpline. If you're worried about your own or someone else's drinking, you can call this free helpline, in complete confidence. Call 0800 917 8282 (weekdays 9am – 8pm, weekends 11am – 4pm).  
<https://www.drinkaware.co.uk/alcohol-support-services/>
- [Alcoholics Anonymous \(AA\)](http://www.alcoholics-anonymous.org.uk/) is a free self-help group. Its "12-step" programme involves getting sober with the help of regular support groups. AA's belief is that people with drink problems need to give up alcohol permanently. <http://www.alcoholics-anonymous.org.uk/> 0800 9177 650
- [Al-Anon Family Groups](http://www.al-anonuk.org.uk/) offer support and understanding to the families and friends of problem drinkers, whether they're still drinking or not. Alateen is part of Al-Anon and can be attended by 12- to 17-year-olds who are affected by another person's drinking, usually a parent. <http://www.al-anonuk.org.uk/> 0207 403 0888
- [Addaction](http://www.addaction.org.uk/) is a UK-wide treatment agency that helps individuals, families and communities to manage the effects of drug and alcohol misuse.  
<http://www.addaction.org.uk/>
- [Adfam](http://www.adfam.org.uk/) is a national charity working with families affected by drugs and alcohol. Adfam operates an online message board and database of local support groups.  
<http://www.adfam.org.uk/>
- The [National Association for Children of Alcoholics \(Nacoa\)](http://www.nacoa.org.uk) provides a free, confidential telephone and email helpline for children of alcohol-dependent parents and others concerned with their welfare. <http://www.nacoa.org.uk> Call 0800 358 3456 for the Nacoa helpline.
- [Lifeline](http://www.lifeline.org.uk/01484) - A drug and alcohol service, which works with people with problems with drugs or alcohol, to help them change their behaviour and reach recovery goals. Lifeline works with individuals, families and communities who have been affected by substance misuse. <http://www.lifeline.org.uk/01484> 353333
- [The Basement Recovery Project](http://www.thebasementproject.org.uk) - An independent self-help organisation that offers support and inspiration to people involved with alcohol and / or substance misuse, and the opportunity of a new sustained abstinent lifestyle. this understanding people can manage a life free from addiction. **01484 512363.**  
[www.thebasementproject.org.uk](http://www.thebasementproject.org.uk)
- [The Base](#) The Base is a drug and alcohol service for young people and young adults in Kirklees (up to the age of 21). We provide free, friendly and confidential support on drugs, [NPS](#) (previously known as 'legal highs') and/or alcohol issues.

## Appendix 4 - Equality Impact Assessment

<b>Title of policy</b>	Alcohol, Drugs, Substance Misuse and Smoke Free Policy		
<b>Names and roles of people completing the assessment</b>	Tazeem Hanif (HR Business Partner) Jayne O'Connell (Equality and Diversity Advisor)		
<b>Date assessment started/completed</b>	August 2018	10.09.2018	
<b>1. Outline</b>			
<b>Give a brief summary of the policy</b>	<p>The aim of this policy is to provide a process and framework for alcohol, drugs and substance misuse at the workplace. It also provides the necessary support to employees and line managers to manage each individual case in line with best practice.</p> <p>All matters are to be handled by line managers with sensitivity and in confidence and information released to other parties on a need to know basis only.</p>		
<b>What outcomes do you want to achieve</b>	To support staff with alcohol, drugs and substance misuse problems and seek support and treatment to make a successful return to work.		
<b>2. Analysis of impact</b>			
This is the core of the assessment, using the information above detail the actual or likely impact on protected groups, with consideration of the general duty to; eliminate unlawful discrimination; advance equality of opportunity; foster good relations			
	<b>Are there any likely impacts? Are any groups going to be affected differently? Please describe.</b>	<b>Are these negative or positive?</b>	<b>What action will be taken to address any negative impacts or enhance positive ones?</b>
<b>Age</b>	No		
<b>Carers</b>	No		
<b>Disability</b>	Yes - The prevalence of alcohol dependence among people with psychiatric disorders is almost twice as high as the general public and people with severe mental health disorders such as schizophrenia are three times as likely to be drug and/or alcohol dependent. Stressed mood can lead to increase alcohol consumption and 65% of suicides have been linked to excessive drinking.	Positive	The policy makes reference to misuse problems that are linked to health conditions where line managers are encouraged to make the appropriate referrals to support the individual.
<b>Sex</b>	No		
<b>Race</b>	No		
<b>Religion or belief</b>	No		



<b>Sexual orientation</b>	Yes - According to Stonewall research in 2014, 52% of young LGBT people report they have, at some point, self-harmed; 44% have considered suicide; and 42% have sought medical help for mental distress. Alcohol and drug abuse are often damaging forms of self-medication to deal with this underlying distress. A recent study by the LGBT Foundation found that drug use among LGB people is seven times higher than the general population, binge drinking is twice as common among gay and bisexual men, and substance dependency is significantly higher.	Positive	The policy makes reference to misuse problems that are linked to health conditions where line managers are encouraged to make the appropriate referrals to support the individual.
<b>Gender reassignment</b>	Yes - high levels of substance abuse are present in the Trans community.	Positive	The policy makes reference to misuse problems that are linked to health conditions where line managers are encouraged to make the appropriate referrals to support the individual.
<b>Pregnancy and maternity</b>	No		
<b>Marriage and civil partnership</b>	No		
<b>Other relevant group</b>	No		
<b>If any negative/positive impacts were identified are they valid, legal and/or justifiable? Please detail.</b>	<p>No anticipated detrimental impact on any equality group. The policy is applicable to all employees and adheres to the NHS Litigation Authority Standards, statutory requirements and best practice. Makes all reasonable provision to ensure equity of access to all employees. There are no statements, conditions or requirements that disadvantage any particular group of people with a protected characteristic.</p> <p>Support is available for staff through Occupational Health and the Employee Assistant Programme. For Line managers this can accessed through the Managing Sickness Absence Policy.</p>		

<b>4. Monitoring, Review and Publication</b>			
<b>How will you review/monitor the impact and effectiveness of your actions</b>	Will monitor cases of alcohol, drugs or substance misuse at workplace on the caseload analysis by protected characteristic. Clear distinctions should be made between those people who take prescription drugs and the causes/possible effects of this and actual substance misuse.		
<b>Lead Officer</b>	Tazeem Hanif	<b>Review date:</b>	November 2018
<b>5. Sign off</b>			
<b>Lead Officer</b>	Jayne O'Connell (Equality and Diversity Advisor)		
	<b>Date approved:</b>	10.09.2018	