Managing alcohol and other drugs as hazards in the workplace

Introduction

This resource has been developed by the Alcohol Advisory Council of New Zealand (ALAC), Accident Compensation Corporation (ACC), New Zealand Drug Foundation and The Department of Labour (DoL) to help the owners and managers of businesses in New Zealand address the negative impact of alcohol and other drug abuse in their workplaces.

Is alcohol and other drug use really a problem in the New Zealand workplace?

Over 50 per cent of New Zealand adults can be classified as ‘binge drinkers’; eight per cent of New Zealanders have used three or more illegal drugs in the last year; and about 15 per cent of New Zealanders are current cannabis users.

Therefore, it is inevitable that in any organisation, regardless of size, there will be a proportion of individuals experiencing problem drinking and drug use, and they are just as likely to be in the boardroom as on the factory floor, in the office or the sales force.

FACT BOX

Almost 48% of all those in full-time employment in New Zealand are binge drinkers. Binge drinking and drug use (even if it occurs outside of working hours) can impact negatively in the workplace.
What is ‘problem drinking & other drug use’ and what effect could it have in my workplace?

Problem drinking and other drug use, in terms of the workplace, is any drinking or other drug use that occurs, either inside or outside of working hours, which may cause impairment. For example, a worker who comes to work with a hangover is impaired.

Problem drinking and other drug use creates a range of problems in the workplace. These have the potential to affect employers, employees, members of the public, customers and visitors.

**Employees with alcohol and other drug problems face:**
- a higher chance of injuring themselves on the job
- a higher chance of losing or resigning their job.

**Work colleagues of employees with alcohol and other drug problems face:**
- increased risk of injury and dispute
- increased workload and levels of distress
- the possibility of needing to work harder, re-do work and/or cover for an impaired colleague.

**Employers are faced with:**
- lateness and absenteeism
- the potential for additional employee health costs
- impaired workplace performance resulting from:
  - poor decision-making and concentration
- reduced reaction times and efficiency
- increased error rates
- less than satisfactory business and customer relationships.

It is clear that alcohol and other drug use can affect productivity and profitability, and that affected employees can be a danger to themselves and others.
What is the economic impact in the workplace of alcohol and other drug misuse?

<table>
<thead>
<tr>
<th>Alcohol and other drug misuse causes:</th>
<th>Translates into employer costs in terms of:</th>
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<tbody>
<tr>
<td>Absenteeism</td>
<td>Lost time</td>
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<td>• days off</td>
<td>Lost productivity</td>
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<td>• lateness in the morning or after lunch</td>
<td>Lower profits</td>
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<td>• long lunch hours</td>
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<td>• sleeping on the job</td>
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<td>• unauthorised leave</td>
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<td>• patterns of absence, eg, after weekends</td>
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<tr>
<td>Impaired workplace performance</td>
<td>Lower productivity, reduced product and service quality, lower profits</td>
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<tr>
<td>• deterioration in quantity and quality of work</td>
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<tr>
<td>• impaired judgment and decision-making</td>
<td>Potentially reduced company reputation</td>
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<tr>
<td>• reduced reaction times and efficiency</td>
<td>Potentially reduced competitive strength</td>
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<td>• poor image presented to customers and in business relationships</td>
<td>Negative impact on customers’ image of the organisation</td>
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<td>• missed appointments or deadlines</td>
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<td>• increased error rates</td>
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<td>• poor concentration</td>
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<td>• unreliability</td>
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<td>• inability to remember instructions</td>
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<tr>
<td>Alcohol and other drug misuse causes:</td>
<td>Translates into employer costs in terms of:</td>
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<tr>
<td>Health issues</td>
<td>Employer’s share of medical insurance</td>
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<td>Use of sickness/medical benefits</td>
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<td>Workplace injuries and incidents</td>
<td>ACC costs</td>
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<td>Legal costs</td>
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<td>Inappropriate behaviour</td>
<td>Management time</td>
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<td>• eg, leading to disciplinary procedures</td>
<td>Costs of disciplinary process</td>
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<td></td>
<td>Negative impact on company morale</td>
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<tr>
<td>Job losses, turnover and recruitment costs</td>
<td>Management time</td>
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<td></td>
<td>Recruitment and training of replacements</td>
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<td></td>
<td>Loss of company knowledge</td>
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<td></td>
<td>Difficulties with justification for dismissal and risk of costs if the dismissal is challenged</td>
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<tr>
<td>Increased risk of theft and other crime</td>
<td>Property destruction (eg, vandalism)</td>
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<td>• eg, fraud to support a drug habit</td>
<td>Organisation-paid security and crime prevention</td>
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<td></td>
<td>Lower profits and quality</td>
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<td></td>
<td>Violence-related costs²</td>
</tr>
<tr>
<td>Negative effects on co-worker relations and company morale</td>
<td>Impact on morale and subsequent negative impact on performance, productivity and quality</td>
</tr>
<tr>
<td>• increased workload or stress levels for other workers</td>
<td>Deterioration in public perception of the organisation</td>
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<td>• increased possibility of trouble between co-workers or workers and supervisors</td>
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What are my legal obligations?

Employers have responsibility under the Health and Safety in Employment Act 1992 (HSE Act) to ensure the provision of a safe workplace. They must take all practicable steps to ensure the safety of their employees while at work.

The Act also requires employees to eliminate, isolate and minimize, in that order of priority, all significant hazards. In this instance, a significant hazard could be the behaviour of an employee who was affected by alcohol or drugs.

Workplace programmes to prevent and treat problem alcohol and drug use help employers fulfil these legal obligations.

**FACT BOX**

Definition of a hazard from the HSE Act (Amendment 2002):

i) a situation where a person’s behaviour may be an actual or potential cause or source of harm to the person or another person; and

ii) without limitation, a situation described in subparagraph (i) resulting from physical or mental fatigue, drugs, alcohol, traumatic shock, or another temporary condition that affects a person’s behaviour.

It is important to highlight that both **EMPLOYERS** and **EMPLOYEES** have a responsibility, both personally and legally. Drug and alcohol abuse in the workplace can only be effectively managed if both individuals and organisations work together. The encouragement of self-management and awareness is essential.
What can I do in my workplace?

Tackling problem alcohol and drug use is a daunting and often complex process but the first important step is to develop a robust alcohol and drug workplace policy in consultation with employees and their representatives covering aspects such as:

- drinking and drug use at work
- workplace discipline
- recognition and help for those with alcohol and drug-related problems
- alcohol and drug education
- training with supporting resources.

The policy should be part of an overall occupational health and safety strategy and should focus on prevention, education, counselling and rehabilitation.
An organisation’s alcohol and drug policy needs to:

- outline how the policy was developed, including the level of consultation and the aims and objectives of the policy
- outline roles and responsibilities: who is responsible for monitoring and implementing the policy?
- outline the implementation of the policy
- outline how it will control the hazard of alcohol and drugs in the workplace
- outline its approach to prevention, education, training, screening, assistance programmes and rehabilitation
- outline its formalised rules on alcohol and drugs, and define employee and employer responsibilities
- clearly communicate expectations and consequences to everyone
- raise awareness of services and support available to those requiring them.
A written workplace policy needs to be developed in consultation with all levels of the organisation

An effective workplace policy is not generic; it needs to reflect the specific group(s) and requirements of the organisation. It is critical to identify the factors in and out of the workplace that may be contributing to problem drinking and drug use and work towards eliminating or reducing them.

There are many reasons why some people choose to use alcohol or drugs—whether for enjoyment, to help them relax or reduce any levels of distress they experience. Peer pressure in the workplace may be a strong influence on a person’s decision whether to drink excessively or use drugs.

Other such factors could include:
- high levels of distress within work and personal life outside of work
- long hours or irregular shiftwork
- hazardous and dangerous work
- working to tight deadlines
- remote or irregular supervision
- general workplace culture; discrimination, harassment or lack of commitment to health and safety.

Implementation of the policy will include:
- training and raising awareness of all staff
- discipline processes
- rehabilitation: Employee assistance programmes (EAPs), support services and integration back to work. These are discussed in more detail in the following section of this booklet and include screening & monitoring (drug testing, peer monitoring and/or a combination of both).
Remember that the policy and programme provide a way to both protect your employees and your business. They form part of an overall organisational programme to address drugs and alcohol as hazards in the workplace. But, most importantly, the policy needs to be put into practice!

**What elements should our programme consider?**

**Training and awareness-raising**

For alcohol and drugs to be effectively managed there needs to be awareness across the organisation of the risks and responsibilities. Training and awareness-raising can be delivered internally as part of the broader health and safety approach, or this service can be contracted into the organisation. The overall aim is to ensure all individuals gain an awareness of drugs and alcohol as hazards in the workplace.

ACC, ALAC and New Zealand Drug Foundation, in collaboration with DoL, have developed training resources aimed at both employers and employees to assist them to take positive actions in maintaining the health and safety of everyone in the workplace and provide information to tackle the issue of impairment in the workplace.

For more information visit:
www.acc.co.nz
www.alac.co.nz
www.drugfoundation.org.nz

**Rehabilitation and support**

**Employee assistance programmes (EAPs)**

EAPs often form a core part of workplace-based alcohol and drug programmes. An EAP is a confidential service to assist employees in resolving personal problems that may be affecting their work performance. These may include marital, legal or financial problems as well as the use of alcohol and/or drugs. An EAP’s primary aim is to help a person return to satisfactory work performance.

In addition to counselling and referrals many EAPs offer other related services, such as supervisor training and employee education.

EAPs provide a recognised benefit to employees and, potentially, to their families. They demonstrate the employer’s respect and support for the staff, provide an alternative to dismissal for alcohol or drug-related misdemeanours and minimise the employer’s legal vulnerability by demonstrating efforts to support employees.

**Professional alcohol and other drug services**

Establishing an EAP may not be practicable for many small organisations. However, it is important that anyone with an alcohol or drug problem is referred to professional help. Where an employer does not establish an EAP it is good practice to find out about, and have information available, on appropriate services to which employees can be referred.
You may start with the local doctor (GP), workers’ health centre or other local health professionals who should be able to provide confidential advice, or referral, to an appropriate service.

**Return-to-work support**
It is important that supports are put in place to assist a worker identified with a problem to either remain at work or return to work after a period of rehabilitation.

**Input from workplace consultants**
Workplace consultants can provide a valuable resource in the management of problems related to problem alcohol and drug use. Consultants offer a range of services from education, health promotion and provision of links to EAP services and other relevant agencies.

**Broader-based health programmes**
There is much support for workplace-based intervention programmes which address problem alcohol and other drug use being included in a broader-based health programme. Programmes that look at general health issues are more likely to be attractive to a larger number of participants than programmes targeting only alcohol and drug users. Similarly, employees are more receptive to prevention messages embedded in broader health-promotion interventions, eg, stress, nutrition, cardiac care, etc, than those presented as a specific programme for the management of alcohol and other drug issues. It is also most important that workers are given information of where to get help or support, if they want or need it.
Screening and monitoring

Alcohol and drug testing at work
The use of alcohol and drug testing in the workplace has been much debated. Introducing alcohol or drug testing into a workplace raises a number of practical, legal and ethical issues that need to be considered as part of developing an appropriate approach.

If testing is determined to be the most effective control measure (for instance in safety critical industries), it will only be effective if it is implemented as part of a comprehensive alcohol and drug programme with appropriate safeguards, clear policy and procedures, and with provision of education and counselling.

Peer intervention approaches
A peer intervention programme encourages employees to take responsibility for their workmates in a supportive and non-disciplinary manner, thereby creating a workplace that is safe and comfortable for all. However, the important message that needs to be communicated is that an employee who has a hangover, or who is under the influence of alcohol or drugs, puts themselves and others at risk, is likely to be less productive and may have mood swings which will affect others.

Disciplinary Process
A disciplinary process, based on relevant HR policy, is required. The process must be transparent, agreed to by all levels of the organisation, and be consistently and fairly applied.
**Sources of information and advice:**

Alcohol Advisory Council of New Zealand — www.alac.org.nz

New Zealand Drug Foundation — www.drugfoundation.org.nz

Accident Compensation Corporation – www.acc.co.nz

Department of Labour – www.dol.govt.nz

Australian Drug Foundation – www.alcoholandwork.adf.org.au

National Centre for Education and Training on Addiction (Australia) – www.nceta.flinders.edu.au

Addictions Treatment Directory – www.addictionshelp.org.nz

Workplace drug and alcohol abuse prevention programmes (ILO)  

Code of practice on the management of alcohol- and drug-related issues in the workplace (ILO)  

Guidelines for drugs, alcohol in the workplace (WorkCover South Australia)  

Alcohol and drugs at work (UK Health and Safety Executive)  
www.hse.gov.uk/alcoholdrugs/index.htm

Working partners for an alcohol- and drug-free workplace (United States Department of Labor)  
www.dol.gov/dol/workingpartners.htm

Drug and alcohol program (Building Trades Group — Australia)  
www.btgda.org.au/

Cannabis use by forestry workers (OSH)  

Guidance note: alcohol and other drugs at the workplace (WorkSafe, Western Australia)  

Drug and alcohol abuse: an important workplace issue (ILO)  
References


7. The US Workplace Violence Research Institute includes increased use of alcohol and/or illegal drugs in a list of “violence prone behaviors”; Mattman, 2001.

