



# Drugs, Alcohol and/or Other Substance Misuse Policy

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## POL079 – Drugs, Alcohol and/or Other Substance Misuse Policy

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The East of England Ambulance Service NHS Trust (EEAST) has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of age, disability, gender reassignment, race, religion/belief, gender, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups.

All Trust policies can be provided in alternative formats.

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## 1. Introduction

- 1.1 The health and safety of our employees is of the utmost importance, and here at EEAST we are committed to maintaining healthy, safe, and productive working conditions for all.
- 1.2 Drugs, alcohol and substance misuse has the potential to damage the health and wellbeing of our employees and the safety of our patients.
- 1.3 We understand that alcohol, drugs and/or other substance misuse, abuse and/or dependency are conditions which may require specific treatment and help. We aim to provide a culture and an environment in which all employees feel that they can seek help and support to aid their recovery.

## 2. Purpose

- 2.1 We recognise the impact that alcohol, drugs, and other substances may have upon an individual's ability to work safely and correctly and as such we aim to ensure a working environment free from the inappropriate use of drugs, alcohol, and other substances and where our employees are able to carry out their duties in a safe and efficient manner.
- 2.2 The purpose of this policy is to:
  - encourage individuals to identify any problems related to the influence of alcohol, drugs or other substances which may affect their workplace performance,
  - help individuals understand that support and assistance is available if they recognise that they have a problem,
  - motivate individuals who are experiencing problems with alcohol, drugs, and/or other substances to seek appropriate help at the earliest opportunity,
  - promote a 'safe space' culture and ensure that managers and employees are understanding and supportive when

confided in by colleagues experiencing problems with alcohol, drug, and/or other substances,

- ensure that we meet our legal obligations to protect employees with regard to health and safety regulations, such as the Health and Safety at Work Act 1974 and the Management of Health and Safety at Work Regulations 1999,
- strike a fair balance between measures to promote employee welfare and possible disciplinary implications.

### 3. Scope

- 3.1 This policy applies to all EEAST employees whilst they are acting on behalf of the Trust. It applies to all EEAST premises and work areas where Trust work is undertaken.
- 3.2 Agency workers, casual workers and volunteers should refer to the relevant sections of this policy and other appropriate Trust policies, e.g. Agency Workers Policy, Casual Workers Policy, Volunteer Responder Policy.

### 4. Duties

- 4.1 **All employees, agency workers, casual workers and volunteers** have a responsibility to:
- familiarise themselves with and comply with this policy,
  - ensure that they undertake their duties in a safe manner without endangering themselves, other employees, the public or patients (under the Health and Safety at Work Act),
  - not be in possession of or consuming alcohol, illegal drugs, and/or other substances on EEAST premises, in EEAST vehicles and/or whilst undertaking work-related duties,
  - attend work in a fit state to undertake their duties safely and to the best of their abilities (this includes not being under the influence of drugs, alcohol and/or other

substances e.g. psychoactive and legal medicines where these may impact performance, e.g., driving ability),

- meet the requirements for driving standards that are addressed in the Driving Licence Policy/Procedure,
- seek assistance from either their line-manager, Occupational Health (OH), the Employee Assistance Programme and/or an external agency (such as Alcoholics Anonymous, Frank) as soon as possible should they have a problem,
- report any concerns about a colleague's potential alcohol, drug and/or other substance misuse, abuse and/or dependency to their line manager so that appropriate support can be provided (See Section 8).

**4.2 Line managers** are responsible for:

- providing a positive example and managing/supporting individuals in line with this policy,
- being aware of the early signs of drug, alcohol and/or other substance misuse and the affect this can have on workplace health and safety.
- consider that there may be alternative causes for these signs, such as stress or depression, which may necessitate a different approach,
- addressing any issues if there is reasonable suspicion of abuse, misuse and/or dependency on drugs, alcohol, and/or other substances,
- establishing whether alcohol, drugs and/or other substance misuse is a contributory factor in any change of sickness absence levels, performance and/or behaviour,
- intervene at the earliest opportunity and keep accurate records of all incidents and investigations,

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- take fact-finding statements from witnesses where appropriate,
- refer an employee to OH as appropriate,
- prioritise the health and safety of all individuals and patients by ensuring that under no circumstance can any individual under the influence of drugs, alcohol and/or other substances be permitted to work,
- liaise and take advice from their HR representative to manage any relevant occurrences.

### 4.3 **HR representatives** are responsible for:

- providing guidance to individuals and managers regarding the application of this policy,
- ensuring that any instances of substance abuse and/or misuse are managed consistently,
- ensuring that any case which requires onward management via the Disciplinary Policy is done so appropriately.

### 4.4 **Occupational Health (OH)** are responsible for:

- advising, where possible, on fitness to work and if appropriate, work restrictions/modifications to assist in rehabilitation,
- Signpost to outside specialist agencies and/or counselling services as appropriate.
- supporting the individual and their manager regarding the effects of alcohol, drugs and/or other substance misuse, abuse and/or dependency on health and the potential consequences in the workplace,
- providing guidance on how best to support an individual who either has suspected or known alcohol, drug and/or other substance abuse, misuse and/or dependency related problems,

- liaising with GP's where appropriate, regarding treatment and management of an individual's health in relation to work.

*It is not the responsibility of OH to ascertain whether an individual is under the influence or not.*

4.5 **Line managers, HR representatives and trade union representatives** are responsible for providing advice and guidance on awareness and compliance of this policy and procedure.

## 5. Definitions (for the purposes of this policy)

5.1 This policy covers the use, abuse, misuse and/or dependency on alcohol, prescribed medication, over the counter drugs, solvents, and illegal drugs (usually taken for non-therapeutic purposes):

<b>Drugs</b>	A medicine or other substance which has a physiological effect when ingested or otherwise introduced to the body. This includes: <ul style="list-style-type: none"><li>• prescription medication,</li><li>• over the counter medication,</li><li>• illegal drugs.</li></ul>
<b>Substance</b>	This can refer to, but is not restricted to: <ul style="list-style-type: none"><li>• alcohol,</li><li>• drugs,</li><li>• prescription and over-the-counter medication,</li><li>• psychoactive substances.</li></ul>
<b>Misuse</b>	Intermittent or continuous use of intoxicating substances which interferes

	with an individual's work performance and/or the safety of themselves/others.
<b>Abuse</b>	Uncontrolled use of alcohol, illegal or prescribed drugs/substances that affects normal daily life.
<b>Dependency</b>	When an individual relies on drugs, alcohol and/or other substances in order to function.
<b>Problem</b>	This relates to the misuse, abuse and/or dependency on drugs, alcohol and/or other substances.

## 6. Policy in practice

- 6.1 We recognise that taking medications for health problems is an inevitable part of life, and that individuals may choose to drink alcohol responsibly in their personal lives.
- 6.2 However, the use of alcohol, drugs and other substances can lead to reduced levels of attendance at work, reduced productivity and performance, impaired judgement and decision-making and increased risks to the health and safety to the individual themselves and others.
- 6.3 All employees, agency workers, casual workers and volunteers are expected to arrive at work fit to carry out their duties and to remain able to perform their duties throughout the working day / shift, without any limitations or impairment due to the use, or after-effects, of alcohol, drugs, or other substances.
- 6.4 Any individual who is prescribed medication must seek advice from their GP or pharmacist about the possible effect on their ability to carry out their job and in particular on their ability to drive and/or operate machinery and whether their duties should be changed, or they should be considered for

temporary redeployment. If so, the individual should immediately discuss the relevant issues with their line manager and/or Occupational Health.

- 6.5 It is the individual's responsibility to check with the DVLA if their health condition affects their driving. For example, but not restricted to, a problem with alcohol, misuse of prescription drugs and use of illegal drugs,
- 6.6 Any abuse, misuse, or dependency, including being under the influence of alcohol, drugs, or other substances at work, could be treated as a fair reason for dismissal.
- 6.7 **Appendix A** includes a list of possible signs of drugs, alcohol and/or other substance misuse.

## 7. Employees who require support

- 7.1 Should an employee feel as though they have, or they are developing a problem with drugs, alcohol, or other substances, they should speak to their line manager for support and advice. If the employee feels unable to speak to their line manager, they can contact their HR representative or the Wellbeing Team for initial advice and for appropriate signposting.
- 7.2 Should an agency worker, casual worker, or a volunteer feel as though they have, or they are developing a problem, they should speak to their EEAST line manager for support and advice. If they need any treatment and/or medical support, they should contact their GP.
- 7.3 Their line manager/HR representative will make a written record of the discussion and arrange for a referral to be made to OH to ascertain whether there should be any work restrictions made, and for relevant support to be offered.
- 7.4 The appropriate manager, together with an HR representative, will offer support and manage any concerns by

referring the employee to the **Rehabilitation Agreement (POL079-01)**, see Section 13.

- 7.5 **Appendix B** includes a list of additional support and information.
- 7.6 If the employee rejects the offer of support under the Rehabilitation Agreement, then the manager should make a full assessment of the situation to determine whether it is appropriate to refer the matter for possible disciplinary action at that stage.

## 8. Raising concerns

- 8.1 The workplace can provide a unique opportunity for assistance and support, as it is often colleagues who are the first to notice any signs of alcohol, drugs and/or other substance related problems.
- 8.2 Should an employee have any concerns or reasonable grounds to believe that their colleague is risking the health, safety and welfare of themselves, other employees, patients, or members of the public, they have a duty to report this to a manager as soon as possible.
- 8.3 The name of the person who has reported their concerns will be anonymised on their statement, and their name will not be divulged to the person being reported unless they have given their written permission. The anonymised statement could then be used in any disciplinary process.

## 9. Identifying and managing concerns

- 9.1 Should a line manager have reason to believe an employee has an alcohol, drug and/or other substance related problem (**see Appendix A**), a concern has been raised by the individual's colleague, the line manager should, seek HR advice and:
- meet with the employee to discuss what behaviours are causing a concern,

- reassure the employee that the purpose of the meeting is to offer help and support where appropriate,
- where applicable, a referral to OH should be made for the appropriate support and advice to be given,
- if requested and where appropriate, allow a brief adjournment for the employee to seek representation from a trade union representative, or workplace colleague. This should not cause any unreasonable delay to the appropriate actions being taken on the day that a concern has been raised,
- if the employee accepts that they have a problem, the line manager should refer to, and manage, in conjunction with **Section 10**,
- if the employee denies that there is a problem, the line manager should refer to, and manage, in line with **Section 11**.

## 10. If an employee accepts that they have a problem

- 10.1 If an employee accepts during the initial meeting that they have a problem, they should be provided with an opportunity to discuss and explain the behaviours that are a cause for concern, and whether they feel they have a drug, alcohol and/or other substance dependency.
- 10.2 If a referral has not previously been made, the line manager should make a referral to OH for the relevant support to be offered and for any suggested potential work restrictions to be considered and implemented as appropriate.
- 10.3 The line manager should recommend that the employee may wish to contact their GP, or other services in order to receive further advice and/or treatment to aid their recovery.
- 10.4 The line manager will discuss the **Rehabilitation Agreement (POL079-01)** at Section 13 with the employee, who would be

expected to commit to the appropriate rehabilitation, and to signing and fully completing the agreement.

- 10.5 If at any point during the meeting, the line manager has concerns about the individual's ability to remain at work, and where the employee refuses to consider taking sickness absence, this must be immediately escalated to a more senior manager and an HR representative and progressed in conjunction with the Disciplinary Policy.

## **11. If an employee denies there is a problem**

- 11.1 If an employee denies during the initial meeting that they have a problem, they should be provided with an opportunity to discuss and explain the behaviours and or signs that are a cause for concern.
- 11.2 If the employee's explanation adequately explains the behaviours demonstrated, the line manager should make a record of the meeting, provide any relevant support, including an OH referral, and arrange a review meeting as appropriate.
- 11.3 If the line manager still has concerns in relation to the individual's fitness to remain at work, they must immediately escalate the potential breach of this policy, to a more senior manager and an HR representative to ascertain the appropriate course of action.

## **12. Attending the workplace whilst under the influence**

- 12.1 If a line manager has met with an employee at Section 10 or 11, and has escalated the matter to a more senior manager and HR representative, consideration should be given to:
- the severity of the individual's behaviour and the potential health and safety risks,
  - where appropriate, e.g., where the employee has or intends to drive illegally, contacting the police and/or suspending the employee in line with the Disciplinary Policy (**see Section 15**),

- taking any appropriate and alternative action(s) for agency workers, casual workers, etc.

12.2 When all appropriate actions have been taken, e.g., police attendance, the line-manager, together with the employee, should make arrangements for them to travel home (e.g., where the employee agrees by contacting their next of kin).

12.3 Where they have not already been involved, police must be notified if an offer to arrange transport home is declined and the individual attempts to drive their own vehicle.

### 13 Rehabilitation agreement

13.1 In cases where an employee accepts that they have a drug, alcohol and/or other substance related problem, the employee will be expected to commit to appropriate rehabilitation, and to signing and fully completing a **Rehabilitation Agreement (POL079-01)**.

13.2 The line manager should liaise with OH, with recommendations from the employee's GP where available, to establish the improvement expected to be demonstrated, and the expected rehabilitation timeframes. It is recommended that where the employee is engaging in the process, the Rehabilitation Agreement would be for a minimum period of six months and would not usually be for more than nine months (**see Section 13.10**).

13.3 The Rehabilitation Agreement outlines the specific improvement / conditions that the employee must meet, and the employee's agreement that they will be undergoing appropriate treatment and/or counselling.

13.4 If the employee has signed, and they are fully co-operating with the Rehabilitation Agreement, any progression under the Disciplinary Policy should be paused for the duration of the Rehabilitation Agreement.

- 13.5 The line manager should arrange regular review meetings, on at least a four-weekly basis, with the employee, to review progress on the Rehabilitation Agreement and discuss any additional available support. The line manager must write to the employee to confirm the meeting discussions and any agreed actions.

*You can ask a work colleague or a trade union representative to attend the meeting with you.*

- 13.6 If during and/or following treatment a relapse occurs and/or the employee fails to meet the specified requirements, one further opportunity to accept and co-operate with the Rehabilitation Agreement will be provided.

- 13.7 If the support is refused and/or the performance or actions of the employee are unacceptable, the case should be progressed in line with the Disciplinary Policy, or any paused disciplinary process re-opened.

- 13.8 If two periods of treatment are followed by a further relapse and/or the employee fails to meet the specified requirements, then no further opportunities to engage with the Rehabilitation Agreement will be offered, and, where appropriate, the case will be progressed in line with the Disciplinary Policy, or any paused disciplinary process re-opened.

*In this situation, guidance for accessing further assistance via GP'S and/or other external agencies will be provided (see Appendix B).*

- 13.9 If at any stage the employee refuses to comply with the Rehabilitation Agreement, the issue will be progressed in line with the Disciplinary Policy, or any paused disciplinary process will be re-opened after due and proper notice to the employee concerned, in an endeavour to remedy the situation.

- 13.10 If at the end of the Rehabilitation Agreement timeframes, the employee has demonstrated the expected improvement, the

line manager should meet with the employee to convey the expectations of work performance and/or behaviour in future. It must be emphasised that disciplinary action can be started or resumed at any time if work performance or behaviour warrants management action.

- 13.11 The employee should continue to monitor their own health and wellbeing, and raise any further concerns in relation to drugs, alcohol, or substance misuse immediately with their line manager.

## **14. Suspected or confirmed illegal behaviour**

- 14.1 Dispensing, distributing, possessing, using, selling, or offering to buy illegal drugs at work is prohibited. Any such activity (including reasonable suspicion of it) on Trust property, while using a Trust vehicle, or while undertaking Trust duties will be reported immediately to the police, in accordance with the Misuse of Drugs Act 1971.
- 14.2 Various offences relating to driving or attempting to drive a motor vehicle on a road or other public place, when unfit through drink and/or drugs and/or when under the influence of drink and/or drugs are set out in legislation. Any such activity (including reasonable suspicion of it) will be reported immediately to the police.
- 14.3 Conviction for drink-driving and/or drug-driving may harm Trust reputation and, where an employee's job requires them to drive, that employee may be unable to continue to do that job. Committing a drink-driving or drug-driving offence while at work, or at any time, may lead to disciplinary action and could lead to dismissal, in accordance with the Disciplinary Policy.
- 14.4 If an employee suspects that their colleague is/has been involved in any illegal behaviour they should immediately report it to a line manager.

14.5 If it has been identified that an individual is in possession of, or is dealing illegal drugs in the workplace, they will, without exception, be reported to the police by an appropriate manager, and in accordance with the Misuse of Drugs Act 1971.

14.6 The manager should seek HR advice in all circumstances.

## 15. Disciplinary Policy

15.1 Each case referred under this policy to the Disciplinary Policy should be dealt with on an individual basis.

15.2 It may be in the interests of EEAST to consider temporary redeployment or suspending an employee from work where there are potential concerns regarding the safety of other employees and/or patients, where there is a perceived risk(s) to Trust property or to aid an unhindered investigation. This must be in accordance with the Trust's Disciplinary Policy.

15.3 At any stage, should the employee refuse to attend Occupational Health, consideration should be given to managing in accordance with the Disciplinary Policy.

15.4 With the employee's written consent (see Section 20), and where this is appropriate and relevant, information held in relation to meetings under this policy and/or a copy of the Rehabilitation Agreement can be shared with appropriate individuals, e.g., investigator, hearing chair as part of any disciplinary investigation.

### 15.5 Loss of Driving Licence (where it is an essential criterion for the role)

15.5.1 The loss of a driving licence for drug, alcohol and/or other substance related incidents will be managed in accordance with the Disciplinary Policy and/or Driving Licence Policy / Procedure.

15.6 Except where Section 14.2 applies, drug, alcohol and/or other substance related problems would not, on their own, normally

constitute grounds for dismissal, unless the individual's actions or performance at work reach an unacceptable level (e.g., using or being under the influence of drugs, alcohol and/or other substances in the workplace).

## 16. **Sickness absence**

- 16.1 Any sickness absence which is related to drug, alcohol and/or substance related problems will be managed in accordance with the Sickness Absence Management Policy and in conjunction with this policy.
- 16.2 Where an employee has signed a Rehabilitation Agreement this will be reviewed as part of the health review meetings within the Sickness Absence Management Policy.
- 16.3 We understand that the nature, cause, and consequences of an addiction may be incredibly difficult for an employee to discuss and be open about. When an employee does share this information, their line manager will take appropriate HR and OH advice and will manage the situation supportively and with sensitivity.
- 16.4 Although dependence on drugs, alcohol and other substances does not constitute as impairment under the Equality Act, we recognise that the ill-health effects of the dependency may cause impairment, e.g., liver cirrhosis.
- 16.5 In most cases, and following appropriate advice from OH, an employee who has been absent from work whilst attending rehabilitation should return to their substantive role after successfully receiving help and/or treatment.
- 16.6 There may, however, be exceptional circumstances where a return to an employee's substantive role would be inconsistent with a full recovery from their problem, or with the Trust's responsibility towards protecting patient safety. This decision may or may not involve external agencies, such as the DVLA, and should be managed in accordance with the

Sickness Absence Management Policy, Redeployment Policy, and Procedure and/or the Disciplinary Policy as appropriate.

## 17. Casual Workers

- 17.1 If concerns are raised about a casual worker, or a casual worker reports they have a problem, and they are based within EO and EOC, the concern should be reported to the Operational Temporary Staffing Manager who will take any necessary actions, as appropriate, in accordance with the Casual Worker Policy.
- 17.2 Any concerns raised about or by a casual worker within other departments should be reported to the relevant department manager, who will take any necessary actions, as appropriate, in accordance with the Casual Worker Policy.

## 18. Agency Workers

- 18.1 If concerns are raised about an agency worker, or an agency worker reports that they have a problem, it is the responsibility of the line manager to immediately report this to procurement so that the agency can be notified, and appropriate action taken.
- 18.2 Should the agency worker be based within EO and EOC, it is the responsibility of the Operational Temporary Staffing Manager to immediately report this to procurement so that the agency can be notified, and appropriate action taken.
- 18.3 The agency will be responsible for taking appropriate action in line with their own procedures and updating the line-manager, procurement and/or the Operational Temporary Staffing Manager as appropriate.

## 19. Volunteers

- 19.1 If concerns are raised about a volunteer, or a volunteer reports they have a problem, it is the responsibility of the line manager and/or Community Response Manager to take

appropriate action in accordance with the Volunteer Responder Policy.

## 20. Confidentiality

- 20.1 Medical information about an employee is confidential and can only be disclosed to others within EEAST with the written consent of the employee.
- 20.2 All cases involving drugs, alcohol and/or other substance related problems will be managed confidentially, and any information must only be shared on a need-to-know basis by the appropriate manager and/ or HR representative.

## 21. Policy review

- 21.1 This policy will be reviewed on a two-yearly basis, or amended in the light of new legislation, relevant case law, or if significant changes to its effective operation are necessary.

## Appendix A – Possible Signs of Drugs, Alcohol and/or Substance Misuse.

At EEAST, we understand that should an individual have a problem with alcohol, drugs and/or substances, the sooner it can be identified, the more likely they will be to overcome it.

The following guidance is to aid line managers in helping identify work related problems that may be caused by alcohol, drug, or substance misuse.

### Appearance:

- Flushed Face.
- Unsteady on feet.
- Hand tremors.
- Smelling of alcohol.
- Increasingly unkempt appearance.
- Lack of personal hygiene
- Slurred speech.

### Efficiency:

- Missing deadlines.
- Difficulty concentrating on tasks.
- Difficulty in recalling instructions.
- Varying and sporadic quality of work.
- Increased number of mistakes.
- Worsening of decision-making ability.
- Inconsistent performance.
- Increasing unreliability.

### Accident Rate:

- Higher rate of accidents at work than other staff.
- Carelessness in handling equipment.
- Increased accidents outside of work environment.

### Employee Relations:

- Difficulty in respecting authority.
- Arguing with colleagues.
- Borrowing money from colleagues.
- Avoiding manager/colleagues.
- Sudden changes of mood/behaviour.
- Becoming easily confused.
- Deterioration in working relationships.
- Difficulty in taking criticism.

### Absenteeism:

- Arriving late for work.
- Numerous trips to staff room facilities.
- Early departures from work.
- Higher rate of unauthorised absence.
- Increased sick leave.
- Absences that show a pattern.
- Longer breaks.
- Unusual and improbably excuses for absence.
- Patterns of fatigue and/or depression.

## Appendix B – Support and Information

Please be assured that there is always support available to you, whether that is within EEAST or via external networks.

- Your line manager / Occupational Health / Wellbeing Team
- Your HR representative
- Employee Assistance Programme (Tel: 0808 196 2374) - in the moment advice and support, which includes family and financial advice.
- Your GP / 111 / A&E
- TASC (Crisis Support) 0800 373 0898) available 24/7.
- ACAD (Advice and Counselling on Alcohol, drug, and substances) <http://www.acad.org.uk/> - provides comprehensive advice and support for anyone who feels as though they may have a problem with drugs, alcohol and/or substances).
- Alcoholics Anonymous (0800 917 7650) <http://www.alcoholics-anonymous.org.uk/> - a support program for those who feel they have trouble with alcohol.
- Alcohol Change <https://alcoholchange.org.uk/> - provides information and support for people worried about how much alcohol they drink.
- Drink Line UK (0300 123 1110 – weekdays 9am to 8pm, weekends 11am to 4pm) – a helpline which offers support and guidance for those who feel they have a problem with alcohol.
- FRANK (0300 123 6600) [www.talktofrank.com](http://www.talktofrank.com) – provides information and a helpline regarding drugs.
- Mind <https://www.mind.org.uk/> - provides support and information to those experiencing mental health issues for any reason.
- UKNA (Narcotics Anonymous) [www.UKNA.org](http://www.UKNA.org) – a support program for those who feel they have a problem with drugs.
- The Ambulance Staff Charity [www.theasc.org.uk](http://www.theasc.org.uk) – a charity

that supports the wellbeing of the ambulance community.

- Time for Me (mobile and desktop platform) – a personal wellbeing tool that provides inspiration to take positive steps towards better wellbeing.
- Release [www.release.org.uk](http://www.release.org.uk) 020 7324 2989 – National charity that offers free and confidential advice about drugs and the law (also available via e-mail helpline [ask@release.org.uk](mailto:ask@release.org.uk))

EEAST also understands the importance of supporting employees who may have been affected by family members or colleagues who are experiencing problems with drugs, alcohol, and substance abuse.

- Adfam [www.adfam.org.uk](http://www.adfam.org.uk) – Information and support for friends and family of people with drug or alcohol problems.
- Al-Anon [www.al-anonuk.org.uk](http://www.al-anonuk.org.uk) 0800 0086 811 – offers support meetings across the UK for anyone whose life is affected, or has been affected, by someone else's drinking. Also provides online support meetings, and a confidential helpline.
- DrugFAM [www.drugfam.co.uk](http://www.drugfam.co.uk) 0300 888 3853 – Provides support to anyone affected by someone else's harmful use of drugs, alcohol, or gambling.
- Families Anonymous [www.famanon.org.uk](http://www.famanon.org.uk) 0207 4984 680 – Support for friends and family of people with drug problems.

## Appendix C

## Equality Impact Assessment

EIA Cover Sheet			
Name of process/policy	Drugs, Alcohol and/or Other Substance Misuse Policy		
Is the process new or existing? If existing, state policy reference number	Existing		
Person responsible for process/policy	HR		
Directorate and department/section	People Services		
Name of assessment lead or EIA assessment team members	EIA Panel		
Has consultation taken place? Was consultation internal or external? (please state below):	Internal consultation through HR Policy Subgroup members		
The assessment is being made on:	Guidelines		
	Written policy involving staff and patients	X	
	Strategy		
	Changes in practice		
	Department changes		
	Project plan	X	
	Action plan		
	Other (please state)		

Equality Analysis																						
<p>What is the aim of the policy/procedure/practice/event?</p> <p><b>This policy is to ensure EEAST provides a working environment free from the inappropriate use of drugs, alcohol, and other substances and where employees feel they are able to approach their managers for support and are able to carry out their duties in a safe and efficient manner.</b></p>																						
<p>Who does the policy/procedure/practice/event impact on?</p> <table border="0"> <tr> <td><b>Race</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Religion/belief</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Marriage/Civil Partnership</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Gender</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Disability</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Sexual orientation</b></td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td><b>Age</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Gender re-assignment</b></td> <td><input checked="" type="checkbox"/></td> <td><b>Pregnancy/maternity</b></td> <td><input type="checkbox"/></td> </tr> </table>					<b>Race</b>	<input checked="" type="checkbox"/>	<b>Religion/belief</b>	<input checked="" type="checkbox"/>	<b>Marriage/Civil Partnership</b>	<input type="checkbox"/>	<b>Gender</b>	<input checked="" type="checkbox"/>	<b>Disability</b>	<input checked="" type="checkbox"/>	<b>Sexual orientation</b>	<input checked="" type="checkbox"/>	<b>Age</b>	<input checked="" type="checkbox"/>	<b>Gender re-assignment</b>	<input checked="" type="checkbox"/>	<b>Pregnancy/maternity</b>	<input type="checkbox"/>
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<p>Who is responsible for monitoring the policy/procedure/practice/event? <b>HR</b></p>																						
<p>What information is currently available on the impact of this policy/procedure/practice/event?</p> <p><b>HR metrics/data, ER casework via the ER Tracker, including any pause due to support through this policy.</b></p>																						
<p>Do you need more guidance before you can make an assessment about this policy/procedure/ practice/event? <b>No</b></p>																						
<p>Do you have any examples that show that this policy/procedure/practice/event is having a positive impact on any of the following protected characteristics? Yes/No, if yes please provide evidence/examples:</p> <table border="0"> <tr> <td><b>Race</b></td> <td><input type="checkbox"/></td> <td><b>Religion/belief</b></td> <td><input type="checkbox"/></td> <td><b>Marriage/Civil Partnership</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Gender</b></td> <td><input type="checkbox"/></td> <td><b>Disability</b></td> <td><input type="checkbox"/></td> <td><b>Sexual orientation</b></td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>Age</b></td> <td><input type="checkbox"/></td> <td><b>Gender re-assignment</b></td> <td><input type="checkbox"/></td> <td><b>Pregnancy/maternity</b></td> <td><input type="checkbox"/></td> </tr> </table>					<b>Race</b>	<input type="checkbox"/>	<b>Religion/belief</b>	<input type="checkbox"/>	<b>Marriage/Civil Partnership</b>	<input type="checkbox"/>	<b>Gender</b>	<input type="checkbox"/>	<b>Disability</b>	<input type="checkbox"/>	<b>Sexual orientation</b>	<input type="checkbox"/>	<b>Age</b>	<input type="checkbox"/>	<b>Gender re-assignment</b>	<input type="checkbox"/>	<b>Pregnancy/maternity</b>	<input type="checkbox"/>
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Please provide evidence:

**This policy is designed to be inclusive of all employees.**

Are there any concerns that this policy/procedure/practice/event could have a negative impact on any of the following characteristics?

Yes/No, if so, please provide evidence/examples: **No**

<b>Race</b>	<input type="checkbox"/>	<b>Religion/belief</b>	<input type="checkbox"/>	<b>Marriage/Civil Partnership</b>	<input type="checkbox"/>
<b>Gender</b>	<input type="checkbox"/>	<b>Disability</b>	<input type="checkbox"/>	<b>Sexual orientation</b>	<input type="checkbox"/>
<b>Age</b>	<input type="checkbox"/>	<b>Gender re-assignment</b>	<input type="checkbox"/>	<b>Pregnancy/maternity</b>	<input type="checkbox"/>

Please provide evidence:

**Having reviewed and updated the policy and completed a full consultation process, no negative impact was raised, and with the evidence available there is no negative impact.**

**Action Plan/Plans – SMART**

Specific

Measurable

Achievable

Relevant

Time Limited

**Evaluation Monitoring Plan/how will this be monitored?**

Who – see Monitoring Table

How

By

Reported to

## Appendix D - Monitoring Table

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
Audit of employee experience, and that the policy and procedure is being applied consistently, fairly, and accurately for all employees experiencing problems with drugs, alcohol and/or other substances.	Head of HR People Partnering / Head of ER	Monitor ER Tracker data	Annually	Reports from ER Tracker, and any grievance s raised in relation to the applicatio n of this policy.	Reported to and discussed at People Committee where required	Head of HR People Partnering / Head of ER will address any actions or changes required.	Any change in practice will be identified and: <ul style="list-style-type: none"> <li>• process updated with HR People Partnering / ER team</li> <li>• HRBP, ER and line manager training implemented</li> <li>• policy updated where required</li> </ul>