

# **SUBSTANCE MISUSE POLICY**

**September 2015**

<b>Authorship :</b>	Yorkshire and Humber Commissioning Support HR Policy Lead - adapted for local use on behalf of NHS Harrogate and Rural District CCG.
<b>Committee Approved :</b>	CCG Senior Management Team and Joint Trade Union Partnership
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<b>Equality Impact Assessment :</b>	Completed – Screening
<b>Sustainability Impact Assessment :</b>	Completed
<b>Target Audience :</b>	All CCG staff
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<b>Version Number :</b>	1.0

**The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as ‘uncontrolled’ and as such may not necessarily contain the latest updates and amendments.**

## POLICY AMENDMENTS

Amendments to the policy will be issued from time to time. A new amendment history will be issued with each change.

<b>New Version Number</b>	<b>Issued by</b>	<b>Nature of Amendment</b>	<b>Approved by and Date</b>	<b>Date on Intranet</b>
1.0	Harrogate and Rural District Senior Management Team	New Policy	JTUPF – 23 September 2015 and CCG SMT – 24 August 2015	08 March 2016

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## **1 INTRODUCTION**

NHS Harrogate and Rural District CCG is committed to promoting the wellbeing of all its employees, and recognises that substance misuse cannot only affect their health but also attendance, work performance and relationships with colleagues, and safety of colleagues, stakeholder and patients.

## **2 ENGAGEMENT**

This policy has been developed by the Yorkshire and Humber Commissioning Support's workforce team in partnership with employees, managers and trade unions and approved at the Joint Trade Union Partnership Forum.

## **3 IMPACT ANALYSES**

### **3.1 Equality**

In applying this policy, the CCG will have due regard to 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, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

As a result of performing an Equality Impact Analysis this policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage.

An Equality Impact Assessment is attached at Appendix 1.

### **3.2 Sustainability**

The policy has been assessed against the CCG's Sustainability themes and no specific impact has been identified. The use of passenger rate encourages car sharing and there is a mileage rate for pedal and motor cycle use.

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix 2.

### **3.3 Bribery Act 2010**

The CCG follows good NHS business practice as outlined in the Business Conduct Policy and has robust controls in place to prevent bribery.

Under the Bribery Act 2010, it is a criminal offence to :

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and
- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.
- To bribe a foreign public official - A person will be guilty of this offence if they promise, offer or give a financial or other advantage to a foreign public official, either directly or through a third party, where such an advantage is not legitimately due.
- If commercial organisations fail to embed preventative bribery measures. This applies to all commercial organisations which have business in the UK. Unlike corporate manslaughter this does not only apply to the organisation itself; individuals and employees may also be guilty.

Due consideration has been given to the Bribery Act 2010 in the development of this policy document and consistent application of this policy will mitigate bribery in relation to change management.

#### **4 SCOPE**

This policy applies to all staff of the CCG. This includes employees, staff on honorary contracts and bank contracts. The principles of this policy also apply to independent contractors (including agency staff) working on a contract for services basis whilst they are working for the CCG.

#### **5 POLICY PURPOSE AND AIMS**

The purpose of this policy is to provide managers with guidance for managing the effects of alcohol and/ or substance misuse by employees, agency and contract staff. All such matters must be handled by managers with sensitivity and in confidence, with any information being released to other parties on a "need to know" basis only.

This policy also provides support for all staff with managing the effects of alcohol and or substance misuse. All employees have an obligation to take reasonable care of themselves and others who could be affected by their actions at work. The CCG recognises that this can be put at risk by employees who misuse alcohol and substances to such an extent that their health, work performance, conduct and working relationships are affected in addition to the health and safety of patients.

The CCG is concerned about and has an obligation to take care of the health, safety and welfare of its employees. This policy sets out the CCG's aims to protect and maintain the health, safety and welfare of employees and others in the workplace by reducing the risk of alcohol and/or substance misuse related harm in accordance with the Health & Safety at Work Act 1974.

## **6 DEFINITIONS**

6.1 Alcohol and / or substance misuse in the context of this policy is defined as :

'Behaviours resulting from the misuse of alcohol, drugs and other substances which harm or have the potential to harm the individual (both physically and/ or mentally) and, through the individual's actions, other people and the environment.'

6.2 Misuse can be divided into three different types:

- Inappropriate use, where use may aggravate an existing condition or situation, or is done in potentially dangerous or inappropriate circumstances.
- Habitual use, where an individual becomes dependent to the extent that the desire for the effects becomes a dominant concern in their life, to the detriment of other aspects of their life.
- Excessive use, which can lead to short or long term physical and mental impairment, illness or anti-social behaviour. Intoxicating substance changes the way the user feels mentally or physically.

It includes alcohol, illegal drugs, legal drugs, prescription medicines (e.g. strong pain medications such as codeine or opiates, anti-anxiety medication or sleeping tablets) solvents, glue, lighter fuel etc.

## **7 ROLES / RESPONSIBILITIES / DUTIES**

### **7.1 Individual Responsibilities**

All employees are individually responsible for taking all reasonable precautions to ensure their fitness for work. Employees have a responsibility for their own health and safety in the workplace and employees must take personal responsibility for their own alcohol and/ or substance use. Managers may, however, periodically wish to remind employees of their individual responsibility for this.

Under no circumstances should an employee report for work, while under the influence of alcohol or illegal drugs.

Employees must not sell, possess, purchase, supply or use alcohol or illegal drugs on CCG premises including any external premises at which they are working, based or visiting. This includes meal breaks on or off site/ CCG premises, which are classed as working time under the Working Time Regulations. Failure to adhere to the above constitutes gross misconduct and will be dealt with in accordance with the CCG's Disciplinary policy and may lead to prosecution although this will be applied reasonably dependent on circumstances for example, if staff purchase alcohol during their lunch break to be consumed with their evening meal at home with the bottle remaining sealed throughout their time at work this would not be dealt with as a disciplinary issue. Misuse of legal or prescription drugs or other legal substances during work time will also be dealt with in this manner.

Employees who are taking prescribed medication must inform their Manager if they think it may have an adverse effect on their ability to carry out their duties.

Employees must not drive vehicles which are leased by the CCG for them to use on CCG business or vehicles which are their property for the purposes of work whilst under the influence of alcohol or other illegal substances. This may lead to prosecution. Further guidance on drugs and driving, including prescription medication can be found at: <https://www.gov.uk/drug-driving-law>

All employees must be fit to commence their duties and must remain so throughout their working day.

Employees who have an alcohol or drug problem, or who suspect they may have a problem, are encouraged to seek help either by discussing the matter with their Line Manager, with occupational health, their GP, local alcohol/substance misuse agency or with a national helpline (see Appendix 5).

Employees should familiarise themselves with the Policy, its aims and their responsibilities in relation to alcohol and/ or substance misuse.

## **7.2 Manager's Responsibilities**

Managers have a responsibility to provide support to staff and appropriately investigate any issues in relation to substance abuse. Line Managers who suspect an employee of having an alcohol or drug problem should discuss the situation with the employee, urging them to seek advice and support. Managers are encouraged to discuss alcohol or substance misuse concerns involving their employees with the HR department before taking any action.

Appendix 3 gives details of the signs and effects of alcohol and / or substance misuse and Appendix 4 gives guidance for Line Managers.

Where a Manager suspects that an employee is under the influence of alcohol or substances at work, immediate medical suspension should be considered.

They should seek the opinion of another senior manager and notify their HR representative before any decision is made to suspend an employee. Section 22 of this policy makes reference to the procedure when suspending an employee.

Line Managers should be aware of the CCG's rules and the implications of not tackling possible alcohol and/ or substance misuse problems, especially where safety is an issue. Line Managers should ensure that their staff are aware of the policy and comply with it.

### **7.3 Role of HR**

The HR department will provide advice and support to managers and employees in the implementation and review of this policy.

## **8 IMPLEMENTATION**

8.1 The CCG Senior Management Team is responsible for formal approval and monitoring compliance with this policy. Following ratification the policy will be disseminated to staff via the organisation's intranet.

8.2 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

## **9 TRAINING AND AWARENESS**

9.1 This policy will be available to view on the CCG website. Training and support will be available to all line managers in the implementation and application of this policy.

## **10 MONITORING AND AUDIT**

10.1 The policy and procedure will be reviewed periodically by Human Resources in conjunction with managers and Trade Union representatives where applicable. Stress related absence will be reviewed as part of the monthly and quarterly workforce reports, recommending any action where required.

## **11 POLICY REVIEW**

11.1 This policy will be reviewed every three years by the Workforce team in conjunction with operational managers and trade union representatives. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation or guidance. Where review is necessary due to legislative change, this will happen immediately.

## **12 ASSOCIATED DOCUMENTATION**

- Absence Management Policy
- Disciplinary Policy and Procedure

## **PROCEDURE**

### **1 Support**

The CCG wants to encourage and support employees who may have an alcohol and / or substance misuse, dependency or problem by assisting them in seeking help and supporting them in overcoming alcohol and / or substance misuse related problems. Where these are suspected, the manager is encouraged to arrange a private, informal meeting to discuss their concerns, the information in this policy and the support that is available. Guidance on conducting this meeting can be found in Appendix 4.

In cases of alcohol and/ or substance misuse, Occupational Health advice will be sought and advice taken from other relevant parties (for example GPs, Social Services, Alcoholics Anonymous etc.) where appropriate. The consent of the member of staff should normally be obtained, but if there is a serious concern and they refuse to give their consent, the management referral should proceed.

Employees who have an alcohol and/ or substance misuse problem, or who suspect they may have a problem, are encouraged to seek help either by discussing the matter confidentially with their immediate manager, or an external agency (see appendix 5), Occupational Health, Human Resources or their General Practitioner.

Staff can also make a confidential self-referral to Occupational Health for help and support. Clinical details and advice to staff are kept in the strictest confidence and Occupational Health only divulge details with written agreement from the member of staff, except in cases where there may be a serious risk to that person, patients, other staff or the public. Requests for assistance will be treated in strict confidence and will in no way affect the employee's job security, benefits etc. Information will only be released to third parties on a "need to know" basis.

This document details various forms of support in sections 15 and 16, as well as further information which may be applicable dependent on the extent the effects the substance misuse has on the individuals performance and conduct at work.

## **2 Rehabilitation**

If an employee is required to complete a rehabilitation period in line with the Management of Attendance Policy, then normal arrangements (as outlined in that Policy) will apply. Where a rehabilitation period is attached as a sanction to a formal warning (for example reduced hours) the employee will be responsible for complying with this condition.

Every effort will be made to ensure the employee returns to his/ her job on completion of the rehabilitation programme. In cases where the employee is not considered fit to return to the same job or where doing so, may undermine recovery, efforts will be made to find suitable alternative employment. This may include, if necessary, where reasonable, a period of retraining.

If, after returning to employment during or following the rehabilitation programme there is a recurrence of the alcohol and or substance misuse issue, each individual case will be considered on its merits at that time. A further opportunity may be given to commence an additional rehabilitation programme if appropriate, however, disciplinary action may be considered if all avenues have been exhausted and no improvement has been made. This could include dismissal.

If a programme of rehabilitation is introduced then the employee can take sick leave whilst seeking support and will therefore be entitled to the benefits that accrue.

## **3 Involving the Police and Professional Bodies**

The possession of illegal drugs with the intent to distribute, use or supply is a criminal offence and the CCG has a duty to report this to the police immediately. If as a result of either an internal or police investigation there is evidence that illegal drugs are/ have been on the CCG premises including any external premises at which they are working, based or visiting or in the possession of CCG staff, then the matter will be dealt with as potential gross misconduct in accordance with the CCG Disciplinary Policy and may lead to termination of employment.

An employee who is charged with, or convicted of, a criminal offence (including receipt of a summons) must inform their line manager as soon as possible. In such circumstances the manager should seek advice from the Human Resources Department as to what course of action may be appropriate. Notification about criminal proceedings or a conviction will not necessarily lead to disciplinary action being taken. Following disclosure the CCG will determine what, if any, action will be taken after considering the facts of the case and the relevance of the charge or conviction to the job undertaken.

Incidents involving allegations of professional misconduct relating to alcohol or substances maybe reported to the appropriate professional body.

## **4 Corporate Hospitality and Work Related Social Functions**

At work related social functions the CCG expects employees to demonstrate responsible behaviour and to act in a way that will not have a detrimental effect or impact negatively on the CCG's reputation.

Employees must be mindful of their behaviour when attending all work related social events, even if they occur outside of normal working hours; ensuring they are respectful to colleagues and avoid offense and abuse.

## **5 Driving**

In line with the Road Traffic Act 1988, employees driving in the course of their work should never attempt to do so whilst under the influence of alcohol and/or drugs. No employee should feel that the nature of their job makes it difficult for them to abide by drink and/or drug driving legislation. Anyone who has a concern about this should consult their line manager. If an employee is convicted of a drink and/or drug driving offence they must report this to their line manager as soon as it is known. A decision will then be made, with HR advice as to the action to be taken and the employee may be subject to disciplinary action.

## **6 Performance and Conduct**

The CCG distinguishes between the employee for whom alcohol and / or substance misuse is a problem, and misconduct involving alcohol or substances which will be dealt with under the CCG's Disciplinary Policy. All issues will be treated with the strictest confidence.

Alcohol and/ or substance misuse can affect the performance of staff in several ways and it may not be appropriate to deal with every situation in the same way. There may be an immediate situation requiring resolution or an ongoing performance issue to be managed.

Some acts of misconduct while under the influence of any substance may be so serious that they must be considered as acts of gross misconduct rendering the employee liable to dismissal. (Please refer to the CCG's Disciplinary Procedure). This will include endangering the health and safety of themselves, colleagues or other persons.

Misconduct will also include being found to be illegally supplying, in possession of, or taking a controlled or uncontrolled drug at work or outside of work if that has a bearing on their suitability to continue in post.

The CCG will endeavour to offer help and assistance with any employee who has a substance misuse issue; however, it is also the responsibility of the employee to accept this help and assistance to improve their condition.

Should any individual refuse help or discontinue a programme of treatment, this should not in itself be grounds for disciplinary action. However, unacceptable behaviour and standards of work, or actions endangering patients, members of the public or other staff will be dealt with through normal disciplinary procedures. Every case will be individually considered.

If it is felt that the individual's state is not drugs or alcohol related and they need medical attention, then they should be taken to a first aider, a casualty unit or their GP depending on the circumstances.

Staff may deny having an alcohol and or substance misuse problem. If this happens, the situation should be dealt with by making clear what improvement is required in their performance, behaviour or absence, within a stated timescale and how the situation will be monitored. The member of staff should also be advised who they can approach confidentially for help and advice. Please refer to the CCG's Managing Work Performance, Management of Attendance and Disciplinary policies.

Following implementation of informal procedures, if there is no improvement within the timescales given, the relevant line manager must contact Human Resources, who will provide further advice and support on how to proceed in accordance with the CCG's Disciplinary, Managing Work Performance, and Management of Attendance policies.

## **7 Suspension**

All employees must be fit to commence their duties and must remain so throughout their working day. Where a Manager suspects that an employee is under the influence of alcohol or substances at work, immediate medical suspension should be considered. Medical Suspension (if necessary) would be dealt with under the Absence Management Policy and advice must be sought from HR.

Medical suspension applies where a manager has concerns with regards to an employee and their ability to undertake work without risk to themselves, the service or others. They may ask the employee to remain off duty until Occupational Health advice is sought. Alternative duties or place of work may also be considered at this point to support the employee.

Where an employee is suspended, the manager must ask the employee to leave the premises. Suitable arrangements should be made for the employee to be accompanied and ensure they can get home safely.

In situations where an employee is being investigated for misconduct relating to alcohol and/ or substance misuse, it may be deemed necessary to suspend the employee pending investigation; but only where there could be a risk to the employee, service, or others. Suspension pending misconduct investigations would be dealt with in accordance with the Disciplinary Policy.

## Equality Impact Assessment

<b>1. Equality Impact Analysis</b>									
<b>Policy / Project / Function:</b>	Substance Misuse Policy								
<b>Date of Analysis:</b>	July 2015								
<b>This Equality Impact Analysis was completed by: (Name and Department)</b>	Workforce Service								
<b>What are the aims and intended effects of this policy, project or function ?</b>	The purpose of this policy is to provide managers with guidance for managing the effects of substance misuse by employees, agency and contract staff. This policy sets out the CCG's aims to protect and maintain the health, safety and welfare of employees and others in the workplace by reducing the risk of alcohol and/or substance misuse related harm in accordance with the Health & Safety at Work Act 1974.								
<b>Please list any other policies that are related to or referred to as part of this analysis?</b>	<ul style="list-style-type: none"> <li>• Absence Management Policy</li> <li>• Disciplinary Policy and Procedure</li> </ul>								
<b>Who does the policy, project or function affect?</b>  Please Tick ✓	<table style="width: 100%; border: none;"> <tr> <td style="width: 80%;">Employees</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Service Users</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>Members of the Public</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>Other (List Below) agency and contract workers</td> <td style="text-align: right;"><input checked="" type="checkbox"/></td> </tr> </table>	Employees	<input checked="" type="checkbox"/>	Service Users	<input type="checkbox"/>	Members of the Public	<input type="checkbox"/>	Other (List Below) agency and contract workers	<input checked="" type="checkbox"/>
Employees	<input checked="" type="checkbox"/>								
Service Users	<input type="checkbox"/>								
Members of the Public	<input type="checkbox"/>								
Other (List Below) agency and contract workers	<input checked="" type="checkbox"/>								

## 2. Equality Impact Analysis: Screening

	Could this policy have a positive impact on...		Could this policy have a negative impact on...		Is there any evidence which already exists from previous (e.g. from previous engagement) to evidence this impact
	Yes	No	Yes	No	
<b>Race</b>		✓		✓	Considered – no impact
<b>Age</b>		✓		✓	Considered – no impact
<b>Sexual Orientation</b>		✓		✓	Considered – no impact
<b>Disabled People</b>		✓		✓	Considered – no impact
<b>Gender</b>		✓		✓	Considered – no impact
<b>Transgender People</b>		✓		✓	Considered – no impact
<b>Pregnancy and Maternity</b>		✓		✓	Considered – no impact
<b>Marital Status</b>		✓		✓	Considered – no impact
<b>Religion and Belief</b>		✓		✓	Considered – no impact
<b>Reasoning</b>					

**If there is no positive or negative impact on any of the Nine Protected Characteristics go to Section 7**

### 3. Equality Impact Analysis: Local Profile Data

#### Local Profile/Demography of the Groups affected as at Oct 2014

<b>General</b>	Total number of employees in the CCG is 28
<b>Age</b>	75% are aged 30-55 21.43% of staff are over 55 3.57% of staff are under 30
<b>Race</b>	89.29% staff employed in the CCG are White 3.57% staff are Black 3.57% staff are Asian 3.57% of staff have not stated/undefined their ethnicity
<b>Sex</b>	46.43% staff employed are male 53.57% staff employed are female
<b>Gender reassignment</b>	No information at this stage
<b>Disability</b>	89.29% of staff employed declared themselves as having no disability 10.71% did not declare /undefined No staff have declared a disability
<b>Sexual Orientation</b>	89.29% of staff described themselves as heterosexual 10.71% did not wish to respond /undefined
<b>Religion, faith and belief</b>	Christianity is the largest religious group declared by staff in the CCG (50%) 25% declared themselves Atheist 17.87% were undefined or did not wish to declare 3.57% of staff have other beliefs/religious beliefs 3.57% of staff declared themselves Buddhist
<b>Marriage and civil partnership</b>	78.58% of employees are married. No employees are in a civil partnership. 3.57% of staff did not wish to declare. The remainder (17.85%) are single/divorced/legally separated or widowed
<b>Pregnancy and maternity</b>	No information yet as the CCG has not been established long enough to build meaningful data

#### 4. Equality Impact Analysis: Equality Data Available

<p><b>Is any Equality Data available relating to the use or implementation of this policy, project or function?</b></p> <p>Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'.</p> <p>Examples of <i>Equality Data</i> include: (this list is not definitive)</p> <ol style="list-style-type: none"> <li>1. Application success rates <i>Equality Groups</i></li> <li>2. Complaints by <i>Equality Groups</i></li> <li>3. Service usage and withdrawal of services by <i>Equality Groups</i></li> <li>4. Grievances or decisions upheld and dismissed by <i>Equality Groups</i></li> <li>5. <i>Previous EIAs</i></li> </ol>	<p>✓ Yes</p> <p>No <input type="checkbox"/></p> <p>Where you have answered yes, please incorporate this data when performing the <i>Equality Impact Assessment Test</i> (the next section of this document).</p>
<p><b>List any Consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function</b></p>	<p>Consultation has taken place nationally and locally</p>
<p><b>Promoting Inclusivity</b>  <b>How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation</b></p>	<p>The policy supports promoting inclusivity as it is has the potential to have a positive impact on some some protected groups ( see above)</p>

## 5. Equality Impact Analysis: Assessment Test

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by The Equality Act 2010?

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a Genuine Determining Reason exists
<b>Gender</b> (Men and Women)	✓			Considered – no impact
<b>Race</b> (All Racial Groups)	✓			Considered – no impact
<b>Disability</b> (Mental and Physical)	✓			Considered – no impact
<b>Religion or Belief</b>	✓			Considered – no impact
<b>Sexual Orientation</b> (Heterosexual, Homosexual and Bisexual)	✓			Considered – no impact
<b>Pregnancy and Maternity</b>	✓			Considered, no impact
<b>Transgender</b>	✓			Considered, no impact
<b>Marital Status</b>	✓			Considered, no impact
<b>Age</b>	✓			Considered, no impact

## 1. Action Planning

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by *The Equality Act 2010* ?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:

## 2. Equality Impact Analysis Findings

<b>Analysis Rating:</b>	<input type="checkbox"/> Red	<input type="checkbox"/> Red/Amber	<input type="checkbox"/> Amber	<input checked="" type="checkbox"/> Green
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		<b>Actions</b>	<b>Wording for Policy / Project / Function</b>
<b>Red</b> <b>Stop and remove the policy</b>	<b>Red:</b> As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . It is recommended that the use of the policy be suspended until further work or analysis is performed.	<b>Remove the policy</b>  Complete the action plan above to identify the areas of discrimination and the work or actions which needs to be carried out to minimise the risk of discrimination.	No wording needed as policy is being removed
<b>Red Amber</b> <b>Continue the policy</b>	As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . However, a genuine determining reason may exist that could legitimise or justify the use of this policy and further professional advice should be taken.	<b>The policy can be published with the EIA</b>  List the justification of the discrimination and source the evidence (i.e. clinical need as advised by NICE).  Consider if there are any potential actions which would reduce the risk of discrimination.  Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a	As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . However, a genuine determining reason exists which justifies the use of this policy and further professional advice.  <b><i>[Insert what the discrimination is and the justification of the discrimination plus any actions which could help what reduce the risk]</i></b>

		later date.	
Equality Impact Findings (continued):			
		Actions	Wording for Policy / Project / Function
<b>Amber</b> <b>Adjust the Policy</b>	As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.	<p><b>The policy can be published with the EIA</b></p> <p>The policy can still be published but the Action Plan must be monitored to ensure that work is being carried out to remove or reduce the discrimination.</p> <p>Any changes identified and made to the service/policy/ strategy etc. should be included in the policy.</p> <p>Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.</p>	<p>As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.</p> <p><b><i>[Insert what the discrimination is and what work will be carried out to reduce/eliminate the risk]</i></b></p>
<b>Green</b> <b>No major change</b>	As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.	<p><b>The policy can be published with the EIA</b></p> <p>Another EIA must be completed if the policy is changed, reviewed or if any discrimination is identified at a later date</p>	As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.

<b>Brief Summary/Further comments</b>	
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<b>Approved By</b>		
Job Title:	Name:	Date:

## Sustainability Impact Assessment

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development plan or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

<b>Title of the document</b>	Substance Misuse Policy
<b>What is the main purpose of the document</b>	
<b>Date completed</b>	July 2015
<b>Completed by</b>	Workforce Service

<b>Domain</b>	<b>Objectives</b>	<b>Impact of activity</b> Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	<b>Brief description of impact</b>	<b>If negative, how can it be mitigated ? If positive, how can it be enhanced ?</b>
<b>Travel</b>	Will it provide / improve / promote alternatives to car based transport? Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)? Will it reduce 'care miles' (telecare, care closer) to home? Will it promote active travel (cycling, walking)? Will it improve access to opportunities and facilities for all groups?	n/a		
<b>Procurement</b>	Will it specify social, economic and environmental outcomes to be accounted	n/a		



<b>Domain</b>	<b>Objectives</b>	<b>Impact of activity</b> Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	<b>Brief description of impact</b>	<b>If negative, how can it be mitigated ? If positive, how can it be enhanced ?</b>
	(including health and safety at work, work-life/home-life balance and family friendly policies)? Will it offer employment opportunities to disadvantaged groups?			
<b>Community Engagement</b>	Will it promote health and sustainable development? Have you sought the views of our communities in relation to the impact on sustainable development for this activity?	n/a n/a		
<b>Buildings</b>	Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)? Will it increase safety and security in new buildings and developments? Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)? Will it provide sympathetic and appropriate landscaping around new development? Will it improve access to the built environment?	n/a n/a n/a n/a		
<b>Adaptation to Climate Change</b>	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?			

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated ? If positive, how can it be enhanced ?
<b>Models of Care</b>	<p>Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?</p> <p>Will it promote prevention and self-management?</p> <p>Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?</p> <p>Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?</p>	<p>n/a</p> <p>n/a</p> <p>n/a</p>		

### **SIGNS AND EFFECTS OF ALCOHOL AND SUBSTANCE MISUSE**

The following symptoms and indicators may be evident if an individual has a drug or alcohol problem :

- Frequent short term absence
- Poor timekeeping
- Unexplained absences from work area
- Sudden mood changes or unusual irritability or aggression
- Repeated accidents or mishaps
- Difficulty in recalling instructions or details
- Impaired job performance
- Appearing withdrawn or preoccupied
- Deterioration in relationships with colleagues, patients or management
- Deterioration of hygiene or physical health
- Clumsiness
- Difficulty walking
- Slurred speech
- Sleepiness
- Poor judgement
- Dilated pupils
- Glassy red eyes
- Loud talking

*This list is not exhaustive and it is important to remember that the above symptoms may also signify other problems.*

## **PROCEDURE FOR DEALING WITH EMPLOYEES WITH A SUSPECTED ALCOHOL OR SUBSTANCE MISUSE PROBLEM**

Where a Manager suspects an employee has an alcohol or substance misuse problem they should take the following steps :

### ***DO***

- Arrange to meet the employee in private
- Confirm that the meeting is informal
- Consider offering the employee the opportunity to be accompanied by a Trade Union representative or colleague at the meeting
- Discuss this policy and the help available
- Focus on work performance, attendance at work, relationships with colleagues and patients
- Be objective and factual
- Be consistent and specific
- Show concerns for the employee.
- Listen to what is said about personal problems
- Offer the opportunity of specialist help and advice if you feel there is a need
- Keep clear records of any discussions that have taken place
- Agree future action
- Arrange regular meetings to monitor progress
- Refer the employee to occupational health, giving time off for appointments
- Treat each employee individually

If at any point during the discussion clarity is required seek further advice from your HR representative.

### ***DON'T***

- Comment on the employee's private life
- Rely on impressions or rumours for which documented evidence is lacking
- Make vague accusations
- Be judgemental
- Argue about the employee's problems
- Leave any ambiguity about the employee's situation and what needs to be done to rectify it

## SOURCES OF HELP

### Occupational Health

#### York Site

Centurion House

Centurion Park

Tribune Way

Clifton Moor

YORK YO30 4RY

Tel: (01904) 725099

### Local Alcohol Helpline Numbers

### National Helpline Numbers

#### NHS Change 4 Life – Cutting Down on Alcohol

Online Tool - Tips and Advice for cutting down on alcohol.

Website: <http://www.nhs.uk/Change4Life/Pages/cutting-down-alcohol.aspx08009178282>

#### Alcoholics Anonymous

Self-help fellowship of men and women offering support and advice to people with alcohol problems or concerns.

Tel: 0845 769 7555

Email: [help@alcoholics-anonymous.org.uk](mailto:help@alcoholics-anonymous.org.uk)

Website: <http://www.alcoholics-anonymous.org.uk/>

#### FRANK (National Drugs Helpline)

Helps you find out everything you might want to know about drugs (and some stuff you don't). For friendly, confidential advice, Talk To FRANK.

Tel: 0300 123 6600

Email: [frank@talktofrank.com](mailto:frank@talktofrank.com)

Website: <http://www.talktofrank.com/>

## Drinkline

Drinkline offers the following services:

- Information and self-help materials
- Help to callers worried about their own drinking
- Support to the family and friends of people who are drinking
- Advice to callers on where to go for help

Tel: 0300 123 1110

Website: <http://www.patient.co.uk/support/drinkline>

## Narcotics Anonymous

N.A. is a non-profit fellowship or society of men and women for whom drugs had become a major problem. We are recovering addicts who meet regularly to help each other stay clean.

Tel: 0300 999 1212

Email: [meetings@ukna.org](mailto:meetings@ukna.org)

Website: <http://ukna.org/>