NHS
Scarborough and Ryedale
Clinical Commissioning Group

SUBSTANCE MISUSE POLICY
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Authorship:	CSU Transition HR Policy Lead- adapted for local use by Yorkshire and Humber Commissioning Support on behalf NHS Scarborough and Ryedale CCG			
Committee Approved:	Senior Management Team			
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	Relevant	Screening	Full / Completed	Outcome
Equality Impact Assessment	*Yes*	*Yes*	*Yes*	*No Issues Identified*
Sustainability Impact Assessment	*Yes*		*Yes*	*No Issues Identified*
Privacy Impact Assessment	*No*	*No*	*No*	*Issues Identified / No Issues Identified*
Bribery Checklist	*Yes*		*Yes*	*No Issues Identified*
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Publication/Distribution	Website	Email Staff	Others (i.e. SBC)	
	Yes/No	*Yes/No*	*Yes/No*	

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.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on website
DRAFT	SRCCG	Draft policy for CCG	Senior Management Team	12/05/2015
DRAFT	SRCCG		JTUPF	22/04/2015

Approval Record

Applicable ☒	Committee / Group	Consultation / Information/ Ratification	Date taken to group	Date last Approved
☐	Audit and Governance Committee	Choose an item.		
☐	Business Committee	Choose an item.		
☐	Communications and Engagement Committee	Choose an item.		
☐	Council of Clinical Representatives	Choose an item.		
☐	Finance and Contracting Committee	Choose an item.		
☐	Governing Body	Choose an item.		
☐	Primary Care Co-Commissioning	Choose an item.		
☐	Quality and Performance Committee	Choose an item.		
☐	Remuneration Committee	Choose an item.		
☒	Senior Management Team	Ratification	12/5/15	12/5/15
☐	All Employees	Choose an item.		
☒	Yorkshire and Humber Social Partnership Forum	Consultation	22/4/15	22/4/15
☐	Other	Choose an item.		

Note: A new policy only needs to be ratified by the appropriate Committee (and the Governing Body if new) and for information only to the other committees after consultation.

Policies should following the following ratification process. The delegated committee for ratification is specified in Section 11.

Version control should also be managed as outlined below where x = current version number and y = the new version number.

Consultation and Ratification Process	Version Number
Reviewed policies should be circulated to staff for comment prior to ratification	V x.1
HR policies and policy changes directly impacting on staff should be sent to the Social Partnership Forum for Union consultation prior to ratification	V x.2
Reviews and minor amends should be ratified by the delegated Committee	V x.3
All new policies and policies where significant changes have been made should be ratified by the delegated Committee and Governing Body	V x.4
Ratified policy is circulated and published (if appropriate) on the website	V y.0

Contents

1 INTRODUCTION 5

2 ENGAGEMENT 5

3 IMPACT ANALYSES 5

Bribery Act 2010 ..... **5**

4 SCOPE 6

5 POLICY PURPOSE AND AIMS 6

6 DEFINITIONS 6

7 ROLES, RESPONSIBILITIES AND DUTIES 7

Individual Responsibilities **7**

Manager's Responsibilities **8**

Role of HR **8**

8 IMPLEMENTATION 8

9 TRAINING AND AWARENESS 9

10 MONITORING AND AUDIT 9

11 POLICY REVIEW 9

12 PROCEDURE 9

13 SUPPORT 10

14 REHABILITATION 10

15 INVOLVING THE POLICE AND PROFESSIONAL BODIES 11

16 CORPORATE HOSPITALITY AND WORK RELATED SOCIAL FUNCTIONS 11

17 DRIVING 11

18 PERFORMANCE AND CONDUCT 11

19 MEDICAL SUSPENSION 12

20 APPENDICES 13

21 REFERENCES 13

22 ASSOCIATED DOCUMENTATION 13

1 INTRODUCTION

1.1 NHS Scarborough and Ryedale 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, relationships with colleagues, and safety of colleagues, stakeholders and patients.

2 ENGAGEMENT

- Social Partnership Forum/Policy Subgroup.
- CCG Staff via Team meetings, Staff newsletter.
- CCG Senior Management Team.

3 IMPACT ANALYSES

3.1 The following impact assessments have been completed in respect of this policy:

- Data Protection Impact Assessment – No issues identified
- Equality Impact Assessment – No issues identified
- Sustainability Impact Assessment.- No issues identified

3.2 These assessments are recorded in the relevant registers and available to view on the CCG website.

Bribery Act 2010

3.3 The Bribery Act is particularly relevant to this policy. Under the Bribery Act 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.

3.4 These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG website) when considering whether to offer or accept gifts and hospitality and/or other incentives.

3.5 Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist.

3.6 The CCG follows good NHS business practice as outlined in the Business Conduct Policy and has robust controls in place to prevent bribery. Due consideration has been given to the Bribery Act 2010 in the development (or review, as appropriate) of this policy document and no specific risks were identified.

4 SCOPE

4.1 This policy applies to:-

- All employees of the CCG
- CCG Governing Body
- Contracted third parties (including eMBED and agency staff)
- Students and trainees
- Staff on secondment and other staff on placement with the CCG.

5 POLICY PURPOSE AND AIMS

5.1 The purpose and objectives of this policy are to protect the CCG along with its customers, service users, staff and other stakeholders, as well as the assets of the CCG, whilst ensuring delivery of its strategic and corporate objectives which are:

- To commission high quality services
- To engage patients, carers and other organisations in our planning and decision process
- To ensure value for money
- To be open and honest in our transactions, and accountable to our communities
- To respect our staff and promote a learning environment
- To improve health outcomes.

5.2 The purpose of this policy is to provide managers with guidance for managing the effects of 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.

5.3 This policy also provides support for all staff with managing the effects of the misuse of alcohol and substances. 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.

5.4 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 The misuse of any substance 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 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.

6.3 It includes alcohol, illegal drugs, legal drugs, prescription medicines (eg anti-depressants), solvents, glue, and lighter fuel.

7 ROLES, RESPONSIBILITIES AND DUTIES

Individual Responsibilities

7.1 All employees are individually responsible for taking all reasonable precautions to ensure their fitness for work. Managers may, however, periodically wish to remind employees of their individual responsibility for this.

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

7.3 Employees must not sell, possess, purchase, supply or use illegal drugs on CCG premises. 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 termination.

7.4 No alcohol should be consumed on any CCG premises at any time. Employees are not allowed to drink alcohol or consume, sell or give away illegal drugs while at work/on-call/on duty. This includes meal breaks on or off site/CCG premises, which are classed as working time under the Working Time Regulations.

7.5 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.

7.6 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, certain prescribed drugs or illegal substances. This may lead to prosecution.

7.7 Employees have a responsibility for their own health and safety in the workplace. Employees must take personal responsibility for their own alcohol and/or substance use.

7.8 All employees must be fit to commence their duties and must remain so throughout their working day. If an employee is unfit or becomes unfit, in the Managers opinion, because of drunkenness, drugs or substance abuse, they will not be allowed to commence work and immediate medical suspension will be considered. If they are sent home, suitable arrangements should be made for the employee to get home safely.

7.9 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, their TU representative, Occupational Health, their GP, local alcohol/substance misuse agency or with a national helpline (see Appendix 5).

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

Manager's Responsibilities

7.11 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.

7.12 Managers are encouraged to discuss alcohol or substance related involving their employees with the HR department before taking any action.

7.13 Appendix 1 gives details of the signs of alcohol and drugs misuse and Appendix 2 gives guidance for Line Managers.

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

7.15 If they believe the employee is unfit for work they should seek the opinion of a senior manager and notify their HR representative before any decision is made to suspend an employee.

7.16 Where an employee is suspended, the manager must ask the employee to leave the premises (suitable arrangements should be made for the employee to get home safely). Arrangements should be made to meet with the employee at an agreed date and time as soon as is practicable and this should be confirmed in writing. At this meeting the employee has the right to be accompanied by a Trade Union representative or work colleague.

7.17 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.

Role of HR

7.18 The HR department will provide advice and support to managers and employees.

8 IMPLEMENTATION

8.1 This policy will be communicated to all staff via team meetings, Staff Newsletter and available on the CCG website.

8.2 Failure to comply with this policy would be considered to be a breach of the terms and conditions of employment and may result in the matter being treated as a disciplinary offence under the CCG's disciplinary procedure.

9 TRAINING AND AWARENESS

9.1 A copy of the policy is available on the CCG website. Training needs will be identified via the annual appraisal process and training needs analysis.

10 MONITORING AND AUDIT

10.1 Line managers are responsible for monitoring individual's compliance with this policy.

10.2 The implementation of this policy will be reviewed on an annual basis by the Senior Management Team and reported to the Governing Body.

11 POLICY REVIEW

11.1 The policy and procedure will be reviewed at least every three years by the CCG in conjunction with managers, staff and Trade Union representatives if appropriate, with changes made as required and the outcome published. Where review is necessary due to legislative change, this will happen immediately.

11.2 The Senior Management Team has delegated responsibility for monitoring and reviewing the policy and will report any concerns to the Governing Body.

12 PROCEDURE

12.1 The potential effects of alcohol and substance misuse are detailed in Appendix 1 of this policy. Where a manager suspects a member of staff is being affected by alcohol or substance misuse, it is important to communicate with the employee as soon as possible about their wellbeing.

12.2 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 2.

12.3 It is essential to note that the behaviours and indicators of alcohol or substance misuse could equally apply to other illnesses. It is important to thoroughly examine each situation before acting. Managers are encouraged to seek HR advice and/or refer to the guidance in the Management of Attendance, Managing Work Performance or Disciplinary policies to ensure that the concerns are managed appropriately.

12.4 In cases of substance misuse, Occupational Health advice will be sought and advice taken from other relevant parties (for example GP's, Social Services, Alcoholics Anonymous etc) where appropriate. As this document continues various forms of support are detailed in sections 13 and 14, as well as further information which may be applicable dependent on to what extent the effects the substance misuse has on the individuals performance and conduct at work.

13 SUPPORT

13.1 The CCG wants to encourage and support employees who may have an alcohol misuse, alcohol dependency and/or substance misuse problem by assisting them in seeking help and supporting them in overcoming alcohol and/or substance misuse related problems.

13.2 Employees who have a 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 various external agencies (see appendix 5), Occupational Health, Human Resources or their General Practitioner.

13.3 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.

13.4 Managers, following discussion with the employee, should refer cases of suspected, or admitted substance misuse to Occupational Health. The consent of the member of staff should normally be sought, but if there is a serious concern and they refuse to give their consent, the management referral should proceed.

14 REHABILITATION

14.1 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, where reasonable, a period of retraining.

14.2 If, after returning to employment during or following the rehabilitation programme there is a recurrence of the 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.

14.3 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.

14.4 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.

15 INVOLVING THE POLICE AND PROFESSIONAL BODIES

15.1 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 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.

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

16 CORPORATE HOSPITALITY AND WORK RELATED SOCIAL FUNCTIONS

16.1 Employees whose role involves entertaining for business purposes or representing the CCG at events at which alcohol is served, are considered to be attending work related events, even though they may occur outside normal working hours. Therefore the employee must remain professional and fit for work at all times.

16.2 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

16.3 Impact negatively on the CCG's reputation.

17 DRIVING

17.1 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.

18 PERFORMANCE AND CONDUCT

18.1 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.

18.2 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.

18.3 All employees must be fit to commence their duties and must remain so throughout their working day. If an employee is unfit or becomes unfit, in the managers' opinion, because

of substance misuse, they will not be allowed to commence work or will be sent home to recover. On return to work they will be subject to a return to work interview which may, according to the circumstances, result in disciplinary action being instigated. (Please refer to the CCG's Disciplinary Procedure).

18.4 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.

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

18.6 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.

18.7 If it is felt that the individuals' 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.

18.8 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. If they choose not to accept this help and assistance and their condition continues to be cause for concern, then action may be taken under the appropriate policy, e.g. Managing Work Performance, Management of Attendance and Disciplinary policies.

18.9 Staff may deny having an alcohol 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.

18.10 HR advice and support is available to managers throughout the investigation process and, if there is no improvement within the timescales given, the relevant line manager must contact HR, who will provide further advice and support on how to proceed in accordance with the CCG's policies.

19 MEDICAL SUSPENSION

19.1 As with any problem affecting ability to work, initial action must be taken by the line manager. It is important to identify any ongoing problem at an early stage when help can be made available. It would not normally be necessary to suspend an employee pending investigation, unless there could be a risk to themselves, a patient or another member of staff. Medical suspension (if necessary) must be carried out in accordance with the organisation's Management of Attendance policy.

20 APPENDICES

- Appendix 1 — Signs of Alcohol and Substance Misuse
- Appendix 2 — Guidance for managers when dealing with employees with a suspected alcohol or substance misuse problem
- Appendix 3 — How the body metabolises alcohol
- Appendix 4 — Sensible drinking guidelines
- Appendix 5 — Sources of help

21 REFERENCES

21.1 See Appendix 5 for useful contacts of various external agencies.

22 ASSOCIATED DOCUMENTATION

- Management of Attendance Policy
- Disciplinary Policy and Procedure
- Managing Work Performance Policy
- Equality Impact Assessment
- Sustainability Impact Assessment