****

 **OAKHAM TOWN COUNCIL**

**DRUG & ALCOHOL ABUSE POLICY**

**Amended by the Council**

**February 2017**

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**DRUG & ALCOHOL ABUSE POLICY**

INTRODUCTION-

The Council recognises that alcohol and drug abuse related problems are an area of health and social concern. It also recognises that a member of staff with such problems needs help and support from his/her Employer. The Council recognises that alcohol and drug abuse problems can have a detrimental effect on work performance and behaviour. The Council has a responsibility to its Employees to ensure that this risk is minimised. Accordingly, Council policy involves two approaches:

1. Providing reasonable assistance to the member of staff with an alcohol or drug abuse problem who is willing to co-operate in treatment for that problem; and
2. Disciplinary rules, enforced through disciplinary procedures, where use of alcohol or drugs (other than on prescription) affects performance or behaviour at work, and where either (1) an alcohol or drug dependency problem does not exist, or (2) where treatment is not possible or has not succeeded.

The Council has not the internal resources to provide or arrange treatment or other forms of specialist assistance. Such services are provided by GPs, hospitals and other agencies. Through this policy the Council will seek both to assist a member of staff in obtaining such specialist help, and to protect his/her employment.

ASSISTANCE FOR A MEMBER OF STAFF-

The Council will, where possible, provide the following assistance to a member of staff:

* Helping the member of staff to recognise the nature of the problem, through referral to a qualified diagnostic or counselling service;
* Support during a period of treatment. This may include a period of sick leave or approved other leave, continuation in post or transfer to other work, depending upon what is appropriate in terms of the staff member's condition and needs of the Council,
* The opportunity to remain or return to work following the completion of a course of treatment, as far as is practicable, in either the Employee's own post or an alternative post.

The Council's assistance will depend upon the following conditions being met:

* A Council appointed Occupational Health Service provider or Council Approved Doctor diagnoses an alcohol or drug dependency related problem,
* The member of staff recognises that he/she is suffering from an alcohol or drug abuse problem and is prepared to co-operate fully in referral and treatment from appropriate sources.

The Council and its Employees must recognise the following limits to the assistance the Council can provide:

* Where a member of staff fails to co-operate in referral or treatment arrangements, no special assistance will be given and any failure in work performance and behaviour will be dealt with through the Disciplinary Procedure;
* If the process of referral and treatment is completed but is not successful, and failure in work performance or behaviour occurs, these will be dealt with through the Disciplinary Procedure; and
* A member of staff's continuation in his/her post or an alternative post during or after treatment will depend upon the needs of the Council at that time.

PROCEDURES-

The procedures define management responsibilities and provide guidelines on:

* Where assistance to a member of staff should be provided and the nature of and limits to such assistance; and
* The application of the Council's Disciplinary Procedure.

**Use of External Agencies by the Council**

The Council where it deems appropriate may utilise the services of external agencies such as an Occupational Health Service provider or Approved Doctor, to provide the following:

* Advice and support to the Clerk and Members:

* + On whether an alcohol or drug related problem exists;
	+ Progress in treatment; and
	+ Re-establishment or continuation at work of a member of staff or other appropriate arrangements.
* Assistance to members of staff with alcohol or drug abuse related problems.

This does not include directly providing treatment or specialist help, which is the responsibility of GPs, hospitals and other agencies working in the field. The Occupational Health Service provider / Council Approved Doctor, in close liaison with these persons and agencies, will assist staff referred in the following ways:

* Through counselling encourage them to come to a better understanding of their problem and the benefits of seeking treatment or help;
* Providing advice and direction regarding obtaining treatment and specialist help; and
* Assisting in continuing at or achieving a return to work.

DISCIPLINARY ACTION-

In line with the Council's disciplinary rules, the following will be regarded as serious misconduct:

* Attending work and/or carrying our duties under the influence of alcohol or drugs; and
* Consumption of alcohol or drugs whilst on duty (other than where prescribed or approval has been given).

Breach of these rules will normally result in a formal disciplinary investigation into Gross Misconduct, (only in exceptional cases will either notice or the reduced disciplinary action of a final written warning be applied). Where a breach of these rules occurs, but it is established that an alcohol or drug abuse related problem exists, and the member of staff is willing to co-operate in referral to an appropriate service and subsequent treatment, the Council will suspend application of the Disciplinary Procedure and provide assistance as described above. Staff who do not comply with the treatment suggested or continue to abuse alcohol or drugs will be subjected to the application of the Disciplinary Policy.

SITUATIONS WHERE USE OF THE DISCIPLINARY PROCEDURE IS APPROPRIATE-

**Recognition of the existence of a possible alcohol or drug abuse problem-**

Abuse of alcohol or drugs can affect performance and behaviour at work, i.e. either through serious misconduct at work, (where there is a direct and demonstrable breach of the disciplinary rules regarding alcohol or drug abuse at work), or where there is a falling off of standards of work performance or behaviour, and abuse of alcohol or drugs is a possible cause; also by other means, where a member of staff seeks or agrees to accept assistance on a voluntary basis.

The Clerk will be responsible for responding to such situations, carrying out either counselling or disciplinary investigations and interviews, supported as appropriate by the Elected Members. In such interviews the possible existence of an alcohol or drug abuse problem should be explored. The Clerk is not required to diagnose the existence of an alcohol or drug abuse problem, merely to assess whether such abuse is a possible factor. Any requirements of the Disciplinary Procedure regarding allowing the member of staff representation will be observed.

**Diagnosing the existence of an alcohol or drug abuse problem-**

Should the interviews lead to the conclusion that an alcohol or drug abuse problem might exist and the member of staff accepts referral, the Clerk should refer the matter to Members, who may authorise contacting an Occupational Health Service provider or Council Approved Doctor, who will be responsible for establishing whether or not a diagnosis of alcoholism or drug dependence can be made.

The Employee must accept that attending work under the influence of Drugs and / or Alcohol, following their interview with the Clerk, they potentially render themselves liable for formal disciplinary action for Gross Misconduct.

However under normal circumstances disciplinary action should be suspended until diagnostic advice is obtained. Where appropriate, suspension arrangements in the Disciplinary Procedure should be followed. If the interview fails to lead to the conclusion that an alcohol or drug abuse problem exists, or the member of staff rejects, or fails to co-operate in referral, disciplinary action should be continued, where and as the situation justifies.

**Confirmation that an alcohol or drug abuse problem exists and treatment arrangements-**

If a positive diagnosis of an alcohol or drug abuse problem is made, and the member of staff agrees to co-operate in treatment, treatment arrangements should commence. Where necessary, the Occupational Health Service provider / Council Approved Doctor will advise the member of staff regarding treatment and will be responsible for monitoring progress with treatment and advising the Council. This advice should be available at least monthly following commencement of treatment and thereafter as appropriate. (Disciplinary action should be discontinued unless the member of staff fails to co-operate on the treatment arranged.) Should a diagnosis of alcoholism or drug dependence not be confirmed or should the member of staff refuse to co-operate in treatment, disciplinary action should be continued.

The Occupational Health Service provider / Council Approved Doctor will advise on whether a situation has been reached where there is a lack of progress with treatment or lack of co-operation by the member of staff. Members must review the facts and consider whether or not there needs to be a return to the use of Disciplinary Procedures.

Where medical certificates are submitted, sick leave should be given. Should the Employee continue to be fit for work during the period of treatment, he/she should be permitted to continue in his/her post or alternative work unless such an arrangement would have an adverse effect on Council services. In such circumstances, annual or unpaid leave should be approved or, exceptionally, suspension arranged.

If a member of staff has been off work during the period of treatment, before returning to duty, he/she will be seen by the Occupational Health Service provider / Council Approved Doctor who will advise the Council regarding capability for continuation in his/her own post and whether any special supervision or other arrangements are required.

Every effort should be made to comply with the advice provided by the Occupational Health Service provider / Council Approved Doctor. If it is not reasonably practicable to do so, and as a result, the member of staff is not able to resume duty, employment may be terminated on the grounds of incapacity (ill health).

If a member of staff is again involved in disciplinary situations resulting from alcohol or drug abuse related problems, a second referral to the Occupational Health Service provider / Council Approved Doctor and suspension of the disciplinary procedure may be appropriate. If they advise positively on the possibilities of further treatment or help and the willingness of the member of staff to co-operate, the disciplinary procedure may be suspended again to permit treatment and help to be undertaken. This second referral will not apply if the further disciplinary problems involve serious misconduct. Third and subsequent referrals are not permissible.

**Situations where a Disciplinary Situation does not exist-**

There may be situations where the possible existence of alcohol or drug abuse problems affecting a member of staff comes to the Council’s attention, although there is, or has been, no discernible effect on work performance or behaviour. This could arise if a member of staff confides in the Clerk about an alcohol or drug abuse problem, or the Clerk could see a need to approach a member of staff after observing possible "indicators" of an alcohol or drug abuse problem, i.e. an absence pattern or information provided by the member of staff's colleagues etc. In such situations, the Council would wish staff to feel they could seek help from their Employer (in complete confidence) without worry that their job security would be in jeopardy. Accordingly if the Clerk should be faced with a situation of this type they should:

* Counsel the member of staff and, if appropriate, arrange for the member of staff to be interviewed by the Occupational Health Service provider / Council Approved Doctor on the authority of the Council; and
* As in the procedure described above, the Occupational Health Service provider / Council Approved Doctor will play a facilitating role, i.e. seeking to establish whether a problem exists, advising and directing the member of staff towards appropriate forms of treatment and help.

These steps cannot be taken without the co-operation of the member of staff. If the member of staff does not wish to co-operate, no further action should be taken. Should a member of staff take up the opportunity of assistance on this voluntary basis there need be no further formal involvement of Management in terms of action or the right to learn of progress with treatment. It may be however that the member of staff would wish, or agree to, further involvement of Management as a means of assisting progress with treatment.

Use of the disciplinary procedures and/or the application of the approach described above would only be appropriate if subsequently, the member of staff is involved in a breach of disciplinary rules. Should the problems of the member of staff develop to an extent that his/her continuation in post or employment became impossible, it may be necessary to identify alternative work or arrange for termination, on the same basis as the Council operates for staff with problems of incapacity due to ill health.