



Reducing the Risk of Impaired Driving Among Employees & Their Families



A Resource Guide for Employers

A compilation of information, techniques,
workplace/workforce examples, and other resources



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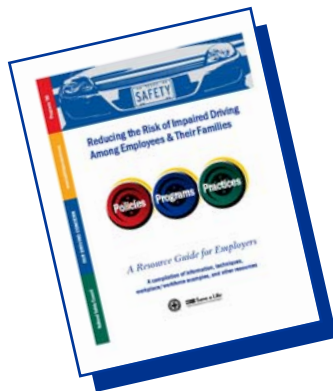
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A Message from the National Safety Council



Reducing the Risk of Impaired Driving Among Employees and Their Families

Policies, Programs, & Practices

Dear Texas Employer:

Together, we have the power to reduce the number of people killed by impaired drivers on our nation's roadways. Impaired driving is the cause of nearly half of traffic crash injuries and fatalities in the United States. In Texas alone, someone is killed or hurt in a crash involving alcohol about every 20 minutes. Alcohol contributes to nearly 4 out of 10 work-related traffic crashes.

By producing this handbook, the National Safety Council hopes to provide you with a tool to help you protect your employees, their families, and your business by promoting safe driving on and off the job.

Specifically, we hope this guide enriches your knowledge about the connection between traffic deaths and popular misuse of alcohol and other drugs, as well as strategies that are proven effective at encouraging employees or their family members to seek assistance from employee outreach programs like EAPs and drug-free workforce campaigns.

We also hope this handbook will spur your thinking about establishing a substance abuse prevention program in your workplace to help combat impaired driving. If you don't have one already, you may be surprised to learn that an effective program can save you \$26 for every \$1 invested in employee health care and related costs.

Please make the most of this guidebook and contact the NSC Texas Chapter if you would like more information. Please also support the Texas Department of Transportation and Texas law enforcement's efforts to stem impaired driving by participating in their annual promotions to build public awareness of impaired driving around certain holidays, when collision rates typically increase, and crack down on impaired drivers. Learn about the next promotion on the program's Web site, www.txdrivingconcern.org.

Your efforts make a difference. We thank you for joining the NSC and its Texas Chapter to prevent impaired driving and save lives.

Sincerely,

Janet P. Froetscher

Janet P. Froetscher
President & Chief Executive Officer, National Safety Council



Introduction: What Texas Employers Can Do to Reduce the Risk of Impaired Driving Among Employees and Their Families

A car swerves into a storefront, barely missing a school bus. Customers are seriously injured. Late on Friday night, a pick-up truck plows through a red light into a busy intersection with oncoming traffic.

Millions of motorists share Texas streets and highways every day. Impaired by alcohol, illicit drugs, over-the-counter medication and prescription drugs, many are in no condition to drive. Impaired driving is a severe and persistent threat to public safety. About every 20 minutes, someone is killed or hurt in Texas in a crash involving alcohol (Texas Department of Transportation, 2004). And for every person killed in a crash due to alcohol or other drugs in Texas, there are 24 injuries and 266 crashes involving property damage (Texas Commission on Alcohol and Drug Abuse, 2002).

Maintaining a drug-free workforce and supporting on- and off-the-job prevention and intervention efforts improves worker productivity, safety, and health. For the employer, benefits of having a drug-free workforce include decreased tardiness and absenteeism. From a risk management perspective, decreasing incidents and damages to company property reduces insurance premiums, liability claims, and legal fees.

This introduction presents key aspects of the impaired driving problem that we want you to know about including what impaired driving is, what causes it, how it impacts your business, and what you can do about it. Several business examples are provided that describe effective alcohol and other drug prevention and intervention efforts in action.

How is impaired driving defined?

Impaired driving – also referred to as drunk driving, driving while intoxicated (DWI), or driving under the influence (DUI) – means that a person’s ability to operate a moving vehicle is reduced or impaired by alcohol and/or other drugs by changing the function of the brain and body. Judgment, depth perception, coordination, and reaction time – all necessary for safely driving a car, truck, boat, snowmobile, aircraft, train, or other motor vehicle – negatively affect an impaired driver’s ability to perform critical driving tasks.

Alcohol is cited as a contributing factor in almost half of all fatal traffic crashes in Texas, claiming more than 1,300 lives every year.

Fatality Analysis Reporting System Encyclopedia, 2006

Acknowledgement

The National Safety Council acknowledges the Substance Abuse & Mental Health Services Administration (SAMHSA), Division of Workplace Programs and Department of Labor (DOL), Office of the Assistant Secretary for Policy, Working Partners for an Alcohol- and Drug-Free Workplace for information used in the development of this Guide and for resources referenced here that are available to businesses.



The **legal** definition of impaired driving refers to operating a motor vehicle while one's blood or breath alcohol concentration (BAC) is above the legal limit.

- In Texas, drivers are legally intoxicated and may be arrested and charged with DWI with a .08 BAC. However, driving ability can be impaired below .08 BAC. Law enforcement officers can arrest a driver suspected of impaired driving, regardless of a driver's BAC.
- Texas also has a zero tolerance law. For anyone under 21, it is illegal to drive with any evidence of alcohol.

What causes the impaired driving problem?

Alcohol misuse and abuse, illegal drug use, and over-the-counter (OTC) and prescription drug nonmedical misuse and abuse cause the impaired driving problem in Texas and across the nation.

According to SAMHSA's National Survey on Drug Use and Health (National Survey on Drug Use and Health/NSDUH, 2008):

- Combined national data from 2004-2006 indicate that 15.1% of current drivers aged 18 or older drove under the influence of **alcohol** in the past year and 4.7 % drove under the influence of **illicit drugs** in the past year.
- Compared with these national averages, estimates of driving under the influence of **alcohol and illicit drugs** in the past year among current drivers aged 18 or older in Texas are 15.7% for alcohol and 4.1% for illicit drugs.

Use, Misuse, and Abuse

When drugs are used in a manner or amount inconsistent with medical or cultural social patterns, it is called drug abuse. In legal terms, non-sanctioned or illegal use of substances is considered abuse. "Prescription drug abuse" or "nonmedical use" of drugs includes use of approved medications without a prescription, use for purposes other than prescribed, or use for the experience or feeling the drug can cause.

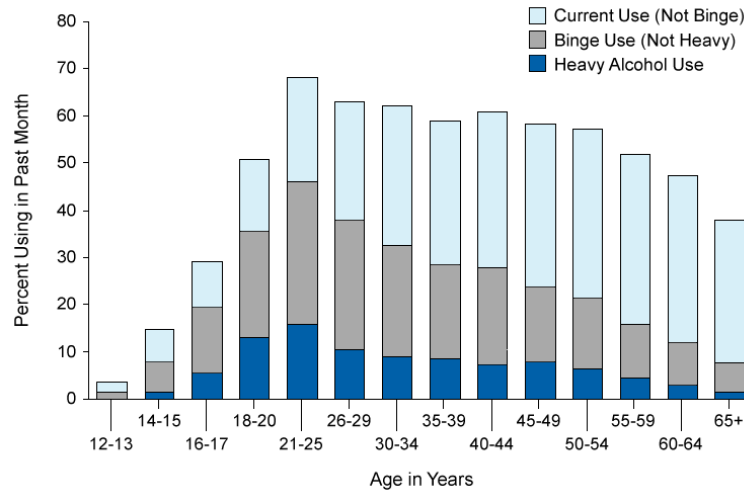
Alcohol use is common in our society. Drinking alcohol has immediate effects that can increase the risk of many harmful health conditions. In fact, excessive alcohol use is the third leading lifestyle-related cause of death for people in the U.S. each year (Journal of the American Medical Association, 2004).

In the bar graph on the following page (NSDUH, 2008), 14 age categories are divided into three sections corresponding to three types of alcohol use by age in years:

- Current (past month) use is at least one drink in the past 30 days.
- Binge use is five or more drinks on the same occasion (i.e., at the same time or within a couple of hours of each other) on at least one day in the past 30 days.
- Heavy use is five or more drinks on the same occasion on each of five or more days in the past 30 days.



Figure 1. Current, Binge, and Heavy Alcohol Use Among Persons Aged 12 or Older, by Age: 2007



NSDUH, 2008

- Slightly more than half of Americans aged 12 or older reported being current drinkers of alcohol in the 2007 survey (51.1%).
- More than one fifth (23.3%) of persons aged 12 or older participated in binge drinking at least once in the 30 days prior to the survey in 2007.
- In 2007, heavy drinking was reported by 6.9% of the population aged 12 or older or 17.0 million people.

Illicit (or illegal) drugs are classified by the Controlled Substances Act (CSA) for the Drug Enforcement Agency (DEA). The five drug classes (including marijuana/hashish, cocaine and crack, inhalants, and heroin) are based on the substance's medical use (including some prescription drugs), abuse potential, and safety or dependence liability:

- Narcotics
- Depressants
- Stimulants
- Hallucinogens
- Anabolic steroids

Each class has distinguishing properties. However, all controlled substances and other illegal drugs that fall into CSA definitions share a number of common features:

- Have abuse potential or are precursors to substances with abuse potential.
- With the exception of anabolic steroids, are abused to alter mood, thought, and feeling through action on the central nervous system (brain and spinal cord). Some of these drugs alleviate pain, anxiety, or depression. Some induce sleep and others energize.
- Though therapeutically useful, "feel good" effects of these drugs contribute to abuse. The extent to which a substance is reliably capable of producing intensely pleasurable feelings increases the likelihood of that substance being abused.



Prescription (Rx) and over-the-counter (OTC) drug misuse and abuse to get high is also a troubling trend. **Prescription drugs** include:

- **Painkillers**, such as drugs prescribed after surgery.
- **Depressants**, such as sleeping pills or anti-anxiety drugs.
- **Stimulants**, such as drugs for attention deficit hyperactivity disorder (ADHD).

OTC drugs do not require a prescription and can be bought in most grocery stores or pharmacies. Many people assume that no harm can come from abusing drugs for which a prescription is not needed, but health complications and addiction can occur with use. These drugs come in many different shapes and sizes ranging from liquid form (in the case of cough syrup) or pills. Examples of OTC drugs are:

- Aspirin
- Cold medicines (cough syrups and tablets)
- Diet pills
- Sleep assistants
- Motion sickness drugs

According to the National Safety Council (*Safety+Health* magazine, Volume 77, No. 6, 2008), deaths from prescription drugs have tripled in the last decade. Pain relievers are estimated to be the number one abused medication. Baby boomers are the age group most affected by drug poisoning deaths.

How does impaired driving affect the bottom line of your business?

America’s businesses pay a high price for alcohol and drug misuse and abuse. What employees do after hours affects a company’s bottom line – three times more fatal crashes involving impaired driving happen at night than during the day. Drivers between the ages of 21 and 44 – those of adult working age – are more likely than any other age group to be in fatal crashes where the BAC was .08 or higher (National Safety Council/Impaired Driving Fact Sheet, 2008).

The use of alcohol and other drugs greatly increases the chance of on- and off-the-job injuries. American business bears much of the cost in the higher premiums it pays for employer-based health insurance as a result of unidentified and untreated alcohol and drug problems. Over time, alcohol and drug misuse and abuse contributes to expensive medical conditions including liver disease, stroke, and cancer which ultimately effects employer health care costs.

Consider the effects of alcohol on operations and expenses of a typical company with

100 Employees

Among employees and dependents, 21 people have drinking problems.

Three extra work days will be lost each month due to sickness, injury, and absence related to problem drinking. These lost days cost an employer an average of \$5,020 per year in wages and \$39,241 in alcohol-related health care costs.

Two extra emergency room visits will cost \$2,383 plus \$5,307 for each day the patient is in the hospital.

George Washington University Medical Center, Ensuring Solutions to Alcohol Problems



What can you do to prevent impaired driving by employees and their families?

Employers benefit from implementing prevention, intervention, and treatment efforts for their employees because alcohol and other drug misuse and abuse affect an employer's bottom line in so many ways. Protecting employees from motor vehicle crash injuries due to impaired driving can be a profitable investment of time and resources. For example:

- Eliminating alcohol-impaired and unrestrained driving could reduce employer costs by \$18 billion annually (Network of Employers for Traffic Safety, 2000). On a per capita basis, that is \$1,300 per man, woman, and child in Texas.
- A workplace substance abuse prevention program can save a business an estimated \$1,850 in employer injury costs per employee. For every \$1 spent, \$26 are saved (Miller, 2007).
- Identification and intervention of a substance abuse problem can save an employer \$13,514 per year in health care and related costs (Texas Department of Transportation, 2004).

By producing and sharing this guide and resources on **policies, programs, and practices**, the National Safety Council provides you with a tool to help protect your employees, their families, and your business by promoting safe driving on and off the job. Workforce-based efforts that contribute to impaired driving prevention, acknowledging the connection between impaired driving and alcohol and other drug addiction, and encouraging employees who have problems to seek help are examples of ways that employers can take to help prevent impaired driving.

National Safety Council recommends...
that all employers address alcohol/other drug and impaired driving policies, programs, and practices to help protect their employees, families, and business on- and off-the-job.

Before considering your first or next step in an alcohol and other drug effort for your workforce, through **careful planning**, examine the needs of your business by taking steps to ensure that any policy, program, or practice you are considering will be effective in your organization. A **needs assessment** can:

- Determine the level at which alcohol or other drugs are affecting the workforce.
- Identify strengths, resources, and gaps.
- Examine appropriate policy and program options.
- Help determine cost-effective strategies for achieving organizational goals.

For more information on what you can do to increase safe driving practices of employees and their families, including free resources to help, visit our website at www.txdrivingconcern.com.



Alcohol

Alcohol is the most widely used drug in the U.S. It is a depressant that slows down the central nervous system.

How does alcohol use affect employees and their families?

Alcohol use is legal for persons age 21 and older and the majority of people who drink do so without incident. However, all types of alcohol use (from risky to problem use and addiction) greatly increases the chances of on- and off-the-job unintentional injuries. There is a continuum of potential problems, including numerous medical conditions, associated with alcohol consumption. The following health risks are identified by the Centers for Diseases Control at http://www.cdc.gov/alcohol/quickstats/general_info.htm.

Immediate Health Risks. Excessive alcohol use has immediate effects that increase the risk of many harmful health conditions. These immediate effects include the following:

- Unintentional injuries, including traffic injuries, falls, drownings, burns, and unintentional firearm injuries.
- Violence, including intimate partner violence and child maltreatment. About 35% of victims report that offenders are under the influence of alcohol. Alcohol use is also associated with 2 out of 3 incidents of intimate partner violence. Studies have also shown that alcohol is a leading factor in child maltreatment and neglect cases, and is the most frequent substance abused among these parents.
- Risky sexual behaviors, including unprotected sex, sex with multiple partners, and increased risk of sexual assault. These behaviors can result in unintended pregnancy or sexually transmitted diseases.
- Miscarriage and stillbirth among pregnant women, and a combination of physical and mental birth defects among children that last throughout life.
- Alcohol poisoning, a medical emergency resulting from high blood alcohol levels that suppress the central nervous system. Can cause loss of consciousness, low blood pressure and body temperature, coma, respiratory depression, or death.

Long-Term Health Risks. Over time, excessive alcohol use can lead to the development of chronic diseases, neurological impairments, and social problems. These include, but are not limited to, the following conditions and diseases:

How does alcohol affect a person?

Alcohol affects every organ in the body. It is a central nervous system depressant.

When a person drinks alcohol (such as beer, wine, whiskey, gin, rum, vodka, tequila), the alcohol (or ethanol) in the drink is absorbed into their bloodstream through the stomach. It is then transported to the brain and other organs before it is broken down by the liver.



- Neurological problems, including dementia, stroke and neuropathy.
- Cardiovascular problems, including myocardial infarction, cardiomyopathy, atrial fibrillation, and hypertension.
- Psychiatric problems, including depression, anxiety, and suicide.
- Social problems such as unemployment, lost productivity, and family problems.
- Cancer of the mouth, throat, esophagus, liver, colon, and breast.
- Liver diseases, including Alcoholic Hepatitis and Cirrhosis (among the 15 leading causes of all deaths in the U.S.).

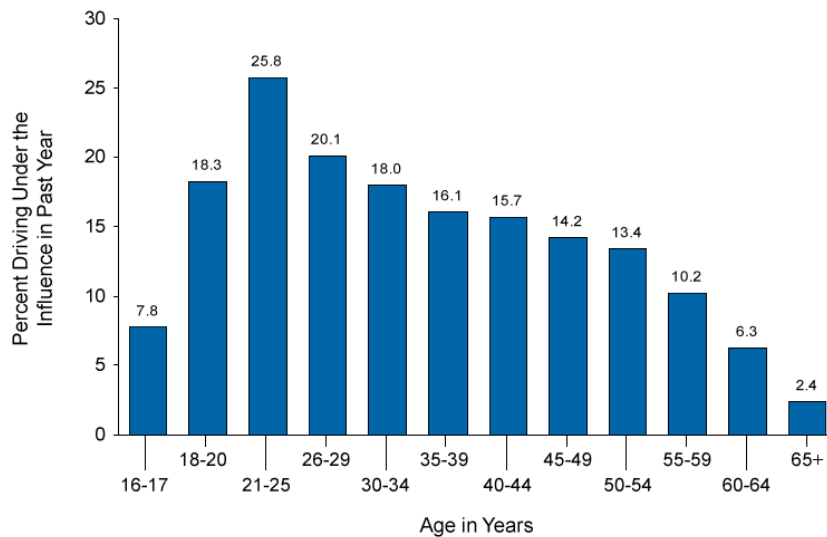
How alcohol affects driving. Since alcohol is the most frequently used drug, the potential impact that alcohol has on your employees, their families, and your business through driving-related situations is great. Alcohol affects a driver in the following ways:

- Dulls judgment and concentration
- Slows reaction time
- Leads to multiple, blurred, and restricted side and night vision
- Hinders muscle control and coordination
- Exaggerates emotions
- Increases drowsiness
- Increases risk taking due to feeling more confident
- Reduces the ability to do several tasks at the same time

Impairment begins with a first drink.
 All of the following can affect your body's ability to handle alcohol: age, body weight and fat, gender, mood, general health, fatigue, medications, number of drinks you've consumed, and the amount of food you've eaten.

In 2007, an estimated 12.7% of persons aged 12 or older drove under the influence of alcohol at least once in the past year. This estimate represents 31.4 million persons. The age breakdown of impaired drivers is reflected in the figure below (NSDUH, 2008).

Driving Under the Influence of Alcohol in the Past Year for Persons Aged 16 or Older by Age: 2007



NSDUH, 2008



Illegal (or Illicit) Drugs

Illegal (illicit) drugs are banned, by law, for use in this country. It is illegal to possess or supply (sell) banned drugs. Illegal drug use is associated with a wide range of social and health issues, many of which directly affect employees, their families, and your business.

Types of illegal drugs

Types of “popular” illegal drugs include:

- Marijuana and Hashish
- Cocaine
- Crack
- Hallucinogens/LSD
- PCP (Phencyclidine or Angel Dust)
- Inhalants
- Ecstasy
- Stimulants/Amphetamines (Speed)
- Tranquilizers
- Sedatives/Barbiturates
- Heroin

Some illegal drugs may have a medical use (not included on this list), meaning that they may only be used legally if prescribed by a doctor, but are illegal to use, possess, or supply in other circumstances.

How does illegal drug use affect employees, their families, and your business?

As with alcohol, drugs affect people differently depending on the:

- Drug – type, amount, purity, and method of use.
- Person – mood, body size, personality, expectations, sex, health, experience, and if alcohol or other drugs have been taken.
- Setting – people around, surroundings, place, and occasion.

Often, illegal drugs (such as ecstasy and speed) are illegally “home-made” with no controls on strength or purity. Manufacturers may cut or mix drugs with cheaper ingredients that can cause bad side effects, such as vomiting, convulsions, agitation, respiratory problems, dizziness, high blood pressure, hallucinations, coma, and death.

Your business, regardless of its size, will be affected by illegal drug use in employee turnover and absenteeism, fatalities and incidents, higher worker compensation costs, higher medical costs, and workplace theft and violence.

How do illegal drugs affect driving?

The setting can change very quickly when driving. An illegal drug’s effect on a driver’s ability can be unpredictable until it is too late. Also, because you cannot predict what is in illegally-made drugs, it is difficult to predict effects that certain drugs will have on a body or driving ability. It is safer to avoid such a situation.

When using alcohol AND drugs, you are much more likely to underestimate your BAC. If you take an illegal drug or combine illegal drugs with alcohol, your chances of having a crash are increased.



Prescription and Over-the-Counter Drugs

Some prescription and over-the-counter drugs can be addictive. Between 1995 and 2005, treatment admissions for prescription painkillers alone increased more than 300% (Treatment Episode Data Set [TEDS], 2006).

Why is the increase in poisoning deaths and prescription drug use occurring?

Greater availability of prescription drugs has been accompanied by increases in their misuse and abuse.

According to the National Institute on Drug Abuse in a statement to the Senate Judiciary Subcommittee on Crime and Drugs, 2008:

Several factors have recently contributed to the severity of prescription drug abuse, including drastic increases in the number of prescriptions written, greater social acceptance of using medications, and aggressive marketing by pharmaceutical companies. These factors together have helped create the broad “environmental availability” of prescription drugs.

To illustrate, the total number of stimulant prescriptions in the U.S. has soared from around 5 million in 1991 to nearly 35 million in 2007. Prescriptions for opiates (hydrocodone and oxycodone products) have escalated from around 40 million in 1991 to nearly 180 million in 2007, with the U.S. their biggest consumer. The U.S. is supplied 99% of the world total for hydrocodone (e.g., Vicodin) and 71% of oxycodone (e.g., OxyContin).

Another related theory presented in the National Safety Council’s *Safety+Health* magazine (Volume 77, No. 6, 2008) is that an increase in prescription drug misuse and abuse may be resulting from a crackdown in the workforce on more conventional illicit drugs.

It is customary now for many employers to conduct drug testing among potential and current employees. But these tests catch only illegal drugs such as cocaine and marijuana, not prescription opiates. As a result, the number of tests that come back positive for illegal drugs is low, suggesting that users may have moved to prescription medication.

Figures seem to support that theory. The number of new, nonmedical users of pain relievers has grown from just a little more than 500,000 in 1998 to an estimated 2.5 million in 2003, the National Safety Council said.

How does addiction occur?

When someone takes medication as prescribed, there is little chance for addiction. A problem occurs when more than a recommended dose is taken and the user obtains more prescriptions, possibly from more than one doctor. A mental addiction can evolve from a mental addiction to a physical one.



What are the most serious health risks related to OTC and prescription drugs?

There are serious health risks related to the misuse and abuse of OTC and prescription drugs that include painkillers, depressants, and stimulants.

- A single large dose of prescription or over-the-counter painkillers or depressants can cause breathing difficulty that can lead to death.
- Stimulant abuse can lead to hostility or paranoia, or the potential for heart system failure or fatal seizures.
- Even in small doses, depressants and painkillers have subtle effects on motor skills, judgment, and the ability to learn and remember.

Many teens and adults report mixing prescription drugs, OTC drugs, and alcohol which can cause respiratory failure and death. Even the misuse and abuse of OTC cough and cold remedies can cause serious symptoms such as blurred vision, nausea, vomiting, dizziness, coma, and even death. Certain cough suppressants, for example, containing dextromethorphan (DXM) are abused for their psychoactive effects, producing hallucinations, and “out-of-body” sensations. Overdose of DXM can also produce confusion, disorientation, motor impairment, blurred vision, nausea, rapid or irregular heartbeat, high blood pressure, and loss of consciousness.

Prescription drugs are most dangerous when taken to get high using methods that increase their addictive potential (such as crushing pills, then snorting or injecting them, or combining them with alcohol or illicit drugs). Some people also take prescription drugs for their intended purpose, though not as prescribed, increasing the risk of adverse reactions. Others may become addicted even when they take the drugs as prescribed.

How does OTC and prescription drug use affect employees and their families?

According to SAMHSA’s 2005 National Survey on Drug Use and Health:

- Nearly 75% of all drug users are employed, of which OTC and prescription drugs are a part.
- 8.2% of fulltime workers and 10.4% of part-time workers admitted to using drugs.

According to the National Safety Council (*Safety+Health* magazine, Volume 77, No. 6, 2008), little research exists on the relationship of prescription drug use and on-the-job safety. Thus, research in other work-related areas is important to note. Drug misuse and abuse affects other aspects of worklife, such as in higher rates of absenteeism, tardiness, family problems, and depression.

Addiction

Using back pain as only one example, with more than 30 million people suffering from chronic pain in this country, even a fraction of this group taking prescription drugs for their pain and becoming addicted could affect a large number of people.



What Employers Can Do to Help Prevent Impaired Driving

As an employer, you can help save lives by promoting alcohol and other drug prevention and intervention efforts, as well as safe driving on and off-the-job. Reducing the incidence of impaired driving can be a profitable investment.

Become knowledgeable about the effects of alcohol and other drugs on driving

First, know the effects of alcohol and other drugs on driving. Alcohol and other drugs alter the normal function of the brain and body, interfering with a skilled and experienced driver's ability to drive safely.

Examples of the ways in which alcohol and drugs affect driving performance are:

- Dull judgment/reasoning abilities and concentration
- Slow reflexes and reaction time
- Hinder muscle control, coordination, and motor skills, including exaggerate motions
- Affect short term memory and tracking ability
- Increase distraction and drowsiness
- Hinder maneuvering ability and ability to recognize traffic signals
- Lead to multiple, blurred, or restricted vision (including side and night vision)
- Increase confusion and anxiety
- Create a false sense of confidence in driving ability

Implement a comprehensive array of policies, programs, and practices

There are numerous policies, programs, and practices you may implement to prevent and deal with substance misuse and abuse, as well as impaired driving issues. Examples are listed below and provided to you in this guide.

- Establish a workforce-based effort that contributes to impaired driving prevention.
- Acknowledge the connection between impaired driving and alcohol/other drug use. Adopt strategies that encourage employees and dependents who have problems with alcohol and other drugs to seek help through Employee Assistance Programs (EAPs) and other drug-free workforce efforts.
- Support the Texas Department of Transportation's annual statewide holiday impaired driving enforcement campaigns, which combines advertising with stepped up enforcement of the state's DWI laws. This is an ideal time for your business to conduct an impaired driving education program and warn employees about the dangers of drunk driving and its expensive legal consequences.



Remind employees and families of these tips to plan ahead and avoid the risk of impaired driving:

- ❑ Think about your travel arrangements before you go out.
- ❑ If it is not safe to drive, stay the night.
- ❑ Before you go out, nominate someone in your group to take the responsibility to ensure everyone gets home safely.
- ❑ Make sure you always have money to catch a taxi/bus/train home.
- ❑ Always look out for your friends. You don't want anything to happen to them.
- ❑ Always make sure that a driver is safe to drive. If they are not safe to drive, catch a cab or get a ride with someone who's straight.
- ❑ Have a personal rule that you don't take drugs and drive – and that you don't go in a car with a driver who is on drugs.

Any drug that slows you down, speeds you up, or changes the way you see things can affect your driving.



Policies, Programs, and Practices: A Comprehensive Plan

While America's businesses still pay a high price for alcohol and other drug misuse and abuse, the good news is that employers are protecting their businesses, employees, and their families by implementing drug-free workforce efforts through a comprehensive array of policies, programs, and practices.

Emphasis on
PREVENTION,
with a plan for
intervention if and
when necessary.

Based on current research and best practices, we are providing you with information in this guide about policy, program, and communication and involvement ideas that you can implement in an effective plan. All of the ideas presented here can easily be adapted to the unique needs of your business and workforce – for any size business (small, medium, or large) or type of industry (type of work performed).

- **Policies** that include clear and comprehensive written statements about the employee's rights, the employer's rules and expectations regarding alcohol and other drugs, how to deal with impaired workers, conducting drug and alcohol testing, a provision for disciplinary actions, and parameters for other issues that affect employees and their employment.
- **Programs** that include support for individuals who need help for substance misuse and abuse problems, education for employees about substance misuse and abuse, and training for supervisors about their role in substance abuse efforts and in enforcing the policy.
- **Practices** that include communication and involvement strategies geared to all levels of a business (managers, supervisors, union representatives, and employees,) workplace events and drinking, designated driver and alternative transportation programs, and after work/off-the-job efforts that impact families and communities.

By addressing the continuum of alcohol and other drug misuse and abuse from before it begins (prevention) to dependency (intervention), a comprehensive substance abuse effort by your business can help prevent many problems, help create a culture of disapproval toward alcohol and other drug misuse and abuse, and contribute to safer work, family, and community environments.

Substance misuse and abuse policies, programs, and practices are natural compliments to other initiatives that help ensure safe and healthy workplaces and add value to America's businesses and communities.



Policies: Elements and Examples

A written policy is the foundation of a comprehensive drug-free workforce effort. In addition to addressing general substance misuse and abuse prevention and intervention topics, every policy should emphasize an employer's commitment to preventing impaired driving and traffic-related deaths and injuries. Every organization's policy should be unique and tailored to meet its specific needs. However, all effective policies have elements in common, including answers to the following questions.

Elements of an effective policy

- ❑ 1. **What is the purpose/goal of your policy?** A purpose/goal/rationale can be as simple as a company is committed to protecting the safety, health, and well being of its employees and customers, as well as recognizing that misuse and abuse of alcohol and other drugs compromises this dedication.
- ❑ 2. **Who will be covered by your policy?** Identify all those impacted by the policy, including workers, supervisors, managers, senior managers, vendors, and customers.
- ❑ 3. **When will your policy apply?** Be clear and specific about the parameters of the substance misuse/abuse policy in terms of work hours, special events, work-related travel, off-site activities, etc.
- ❑ 4. **What behavior will be prohibited?** A clear description of behaviors that are not allowed should be included in the policy, including clauses about use, possession, transfer, and sale of illegal drugs by employees.
- ❑ 5. **Will employees be required to notify you of drug-related convictions?** Describe the process an employee must take to communicate a conviction.
- ❑ 6. **Will your policy include searches?** Describe the parameters of searches that may be conducted at the worksite.
- ❑ 7. **Will your program include drug testing?** A statement should describe circumstances for how and whom alcohol and or drug testing will be conducted.
- ❑ 8. **What will the consequences be if your policy is violated?** An explanation of the consequences for policy violations (impairment) may include disciplinary actions up to and including termination and/or referral for assistance. Consequences should be consistent with personnel policies and procedures and any applicable state laws.
- ❑ 9. **Will there be Return-to-Work Agreements?** To facilitate reintegration, clearly delineate a process after treatment, suspensions, or missed work for alcohol or other drug related matters.
- ❑ 10. **What type of assistance will be available?** Include a description of assistance (EAP, medical, etc.) available to employees if a substance misuse or abuse problem occurs.
- ❑ 11. **How will employee confidentiality be protected?** To protect the employees' reputations, rights to confidentiality must be described.
- ❑ 12. **Who will be responsible for enforcing your policy?** Role and responsibilities for policy enforcement should be clearly identified.
- ❑ 13. **What training will be provided?** Include a clause on education/training for employees, supervisors, and others on alcohol and other drug topics and identifying impaired behavior.
- ❑ 14. **How will your policy be communicated to employees?** Employers should be certain that all employees are aware of the policy. Strategies include posting them in the workplace, periodically distributing copies, and discussing policies at meetings.



Policies: Elements and Examples

There are many policy-related issues and actions that a business may address and implement. In this section, a brief explanation of the following elements are presented:

- Motor vehicle record checks
- Alcohol and drug testing
- Crash reporting and investigation
- Disciplinary action system
- Substance use treatment coverage in health benefits
- Ignition interlocks
- Driver agreements

Motor vehicle record checks

Before hiring employees for job duties that require driving, employers should identify eligibility criteria for those jobs, such as what offenses (incidents and/or moving violations) would disqualify a job applicant. Background/driving record checks and personal reference checks (such as about driving habits) are especially important. Also, employers may consider driving experience in their hiring decisions in relation to teenage drivers or anyone who has not had a license for a minimum number of years.

Once hiring criteria are determined, establish screening requirements. Ask applicants to certify accuracy of their responses to screening questions with a penalty (such as dismissal) identified for false statements. Examples of screening points are:

- Inspection for a valid license and any driving restrictions.
- Driving record verification in regards to incident record, insurance, qualifications to operate vehicles required for job assignments, previous driver training, and medications that may impair driving ability.

New employees should agree to adhere to policies established by the employer and inform them of moving violations or at-fault accidents that occur during employment.

Alcohol and drug testing

Policies that include alcohol and drug testing programs are one way to protect your workforce from the negative effects of alcohol and other drug misuse and abuse.

Testing is implemented for many reasons, including to:

- Comply with Federal regulations and customer, contract, or insurance carrier requirements.
- Improve safety.
- Minimize the chance of hiring employees who may be users or abusers.
- Deter “recreational” drug use that could lead to addiction.
- Identify current users and abusers and refer them for assistance.
- Reduce the costs of alcohol and other drug abuse in the workforce.



Types of tests. The following types of testing are generally included in a comprehensive workforce alcohol and drug testing program.

- **Pre-Employment Test.** An individual is required to provide a specimen during the job application process. Generally, a negative drug result is required before an employer may offer employment to an individual.
- **Random Test.** An employer selects, using a truly random selection process, one or more individuals from all the employees included in the employer's workforce drug testing program. A random selection process precludes an employer from attempting to pre-select a particular employee for a drug test.
- **Reasonable Suspicion/Cause Test.** An employee is required to provide a specimen when there is sufficient evidence to indicate that the employee may have used an illicit substance. Typically, the evidence is based on the direct observations made by supervisors or co-workers that an employee has used or possesses illicit substances, exhibits physical symptoms of being under the influence, and has patterns of abnormal or erratic behavior.
- **Post-Incident Test.** An employee is required to provide a specimen after being involved in an accident or incident on-the-job. The results of such a test may provide evidence as to the cause of the accident or incident.
- **Return to Duty Test.** An employee is required to provide a specimen to ensure the employee is drug-free before being allowed to return to work.
- **Follow-up Test.** An employee is tested at random intervals after returning to work to ensure that the employee remains drug-free.

Crash reporting and investigation

As with any safety-related incident, a crash reporting and investigation process should be implemented by every business in which employees drive vehicles for their jobs. Drivers should be responsible for reporting incidents of any severity to their supervisor as soon as possible after an incident. Policies and procedures should outline the responsibilities of a driver in a crash situation. If an employee cannot make the report, a supervisor is then responsible for making the report.

When reporting a crash or incident, the following information should be documented:

- Tag number
- Date, time, and location of crash
- Injuries or fatalities
- Brief description of crash, road, and weather conditions
- Were seatbelts used and, if equipped, did airbags deploy
- Towing requirement and is the vehicle in storage
- Police response, if involved



Historically, businesses have adopted a reactive approach to work-related road/vehicle incidents by focusing on only skills based driver training as follow up in an attempt to improve safety. Work toward implementing a multi-faceted approach that addresses behavioral, cultural, and industry-specific issues that could show greater reductions in incident rates through prevention.

All crashes should be reviewed to...
determine cause and whether or not incidents were preventable.

Disciplinary action system

Usually related to consequences for employees of a positive drug test, a disciplinary action system should be defined in a policy. Disciplinary action should be considered for ANY moving violation or preventable crash that occurs on-the-job.

Depending on the approach determined by an employer, an employee who tests positive on a drug test may be referred for:

- Assistance.
- Disciplinary action (such as suspension or dismissal from work).
- Both assistance and disciplinary action.

Expulsion, and even suspension, from work is considered an extreme consequence. Discussing a positive test result with an employee with a possible referral for treatment are considered more common first steps. If an employee is in a safety-secure position, probation may be appropriate. A reintegration plan is needed after any suspension.

A Federal employee or an employee working for a DOT-regulated industry who tests positive on a drug test has the right to have their specimen tested by a second DHHS-certified laboratory to verify the positive result reported by the first DHHS-certified laboratory. Although it is not required, it is recommended that all employers include this right in their workforce drug testing programs. All employees who test positive have equal rights, so rehabilitation should not be selectively offered.

If your employees are represented by a union, you may not implement a policy and program unilaterally. The National Labor Relations Act requires that terms and conditions regarding any workforce drug testing program you institute be included in your collective bargaining agreement.

Drug-free workforce policies can always be challenged in the justice system. Many people use SAMHSA-approved labs to reduce the possibility of being challenged. There are Federal laws regarding drug testing, but there may also be laws unique to your State or locality. Consult with an attorney, one experienced with labor and employment matters in your State, before you institute a drug-free workforce effort.



Substance use treatment coverage in health benefits

Although health insurance is one of the primary methods of payment for substance use treatment, rates of persons without health insurance coverage have generally been increasing since 2000. Many people who need treatment for substance use do not receive it, and lack of health care coverage is one of the most common reasons given for not receiving treatment (NSDUH Report, 2007).

In June 2002, the American Psychiatric Association (APA):

- Adopted the position that “all substance use and substance related disorders are diagnosable mental illnesses for which effective treatments are readily available.”
- Therefore, “strongly opposes the exclusion of substance use and substance related disorders from legislation or programs that pertain to parity of insurance coverage, access to health care services, and quality of care.”
- Further stated that it “considers such exclusion ... discriminatory and contrary to the scientific findings of the clinical, research, health economics, and policy communities.”

Ignition interlocks to reduce alcohol-impaired driving recidivism (re-arrest) and alcohol-related crashes

Based largely on a systematic review of published studies (The Cochrane Database of Systematic Reviews, 2004), the Task Force on Community Preventive Services concluded that ignition interlocks, when installed and in use, are effective in reducing re-arrest rates for alcohol-impaired driving. The Task Force also noted, however, that the public health benefits of the intervention are currently limited by the small proportion of offenders who install interlocks in their vehicles, and that more widespread and sustained use of interlocks among this population could have a substantial effect in reducing alcohol-related crashes.

NOTE: The Task Force is an independent, non-governmental, volunteer body of public health and prevention experts, whose members are appointed by the Director of the CDC. Information on interlocks in this section is primarily from CDC’s Guide to Community Preventive Services, 2007 at CommunityGuide@cdc.gov.

What are ignition interlocks and how are they used? Ignition interlocks – about the size of a cell phone – are installed in a vehicle’s starter to prevent operation by anyone with a BAC above a specified safe level (usually .02 – .04 g/dL). A driver blows into the device and the vehicle will not start if a driver has measurable alcohol based on a predetermined level in their system. If a driver fails a retest, the vehicle’s horn will honk and/or lights will flash to alert law enforcement – the vehicle does not stop.



- Interlocks are typically used to prevent alcohol-impaired driving by people who have been previously convicted.
- Interlocks may be either mandated through the court system or offered as an alternative to a suspended license by a state licensing agency.
- The amount of time they are installed typically matches the period of license suspension – generally ranging from 6 to 24 months.
- Only a small percent of people eligible for ignition interlock programs typically participate.

Effectiveness of ignition interlocks on alcohol-impaired driving and crashes

- While installed, ignition interlocks are associated with a median 73% reduction in re-arrest rates for alcohol-impaired driving.
- After interlock removal, re-arrest rates return to levels similar to those of offenders who have not had interlocks installed.

Ignition interlocks may offer benefits to commercial motor vehicles and fleets, although they are currently not commonly used in these vehicles in the United States.

Driver agreements

Relevant to on- AND off-the-job driving situations, a driver agreement is a contract that can be used to set driving requirements between an employer and employee, as well as define a driver's rights and responsibilities. In family situations that involve parents and teens, ground rules are set in an agreement to ensure that driving conditions are as safe as possible for your teen even when you are not there.

- A driver agreement may be viewed as a commitment to safety – a part of your workforce policy or your family's plan.
- Use it to discuss risks and define restrictions, privileges, rules (such as regarding use of vehicle and trip conditions), and consequences that will occur for any violation.



A Sample Workforce Policy on Alcohol and Other Drug Misuse and Abuse

Statement of Need

(Company) has a strong commitment to the health, safety and welfare of its employees, their families and its customers. Widely available statistics and information establish that the incidence of drug and alcohol misuse and abuse is increasing and that the effect is devastating to lives, business and the community at large. (Company) is concerned because of the potential for misuse and abuse among some of our employees. The safety of our employees and the general public could be endangered. Our commitment to maintaining a safe and secure workplace requires a clear policy and supportive programs relating to the detection, treatment and prevention of substance misuse and abuse by employees.

Goal

It is the goal of (Company) to provide a safe workplace by eliminating the hazards to health and job safety created by alcohol and other drug misuse and abuse. We believe this goal to be in the best interest of our employees and our stockholders.

Scope

This policy applies to all company employees while on-the-job and to situations where an employee's off-the-job or off-premises conduct impairs work performance or damages public confidence in or harms the reputation of (Company). It is also intended to apply to employees of firms doing business with the company while on our premises.

Although (Company) has no intention of intruding into the private lives of its employees, we recognize that involvement with alcohol or other drugs off-the-job eventually takes its toll on job performance. Our concern is to ensure that employees report to work in a condition to perform their duties safely and efficiently in the interest of their fellow workers and customers as well as themselves.

Policy Statement

1. (Company) will not tolerate or condone substance abuse. It is our policy to maintain a workplace free from alcohol and other drug abuse and its effects.
2. It is the policy of (Company) that employees who engage in the sale, use, possession or transfer of illegal drugs or controlled substances, or who offer to buy or sell such substances; the use of alcohol during working hours; or the abuse of prescribed drugs will be subject to disciplinary action up to and including termination.
3. It is the policy of (Company) to commit the resources necessary to achieve and maintain a drug-free and alcohol-free environment.
(Company) expects the full support of this policy by all employees and all persons doing business with the company.

Procedure

To provide a safe drug-free and alcohol-free working environment, (company) will:

1. Establish definitive rules and regulations.
2. Provide increased awareness through training, education and communication on the subject of alcohol and other drug misuse and abuse.
3. Recognize that there may be employees who have an alcohol or other drug problem and stand willing to assist in the resolution of that problem by encouraging employees to seek help through employee assistance programs.



In addition, (company) may take any or all of the following actions:

1. Conduct alcohol and other drug screen tests both prospective to and during employment.
2. Inspect persons and their property in our employ or doing business with (company).
3. Cooperate with outside law enforcement agencies.
4. Take any other actions deemed necessary and appropriate by (company).

Company Responsibility

As a responsible employer and member of the community (company) will:

1. Create an awareness in employees and their families of the impact of substance misuse and abuse.
2. Administer programs that consider employee rights, are positive in their intent and are within legal boundaries.
3. Support the establishment of programs to assist employees with alcohol and other drug abuse or dependency problems.
4. Utilize all channels and resources available to it to educate and increase the awareness of employees and the general public.
5. Support local and national efforts to combat alcohol and other drug misuse and abuse and its effects.

Employee Responsibility

(Company) believes that each employee has the responsibility to:

1. Report to work at all times free of alcohol or other drugs and their effects.
2. Participate in and support company-sponsored drug and alcohol education programs.
3. Seek and accept assistance for alcohol and other drug-abuse-related problems before job performance is affected.
4. Support company efforts to eliminate alcohol and other drug abuse among employees where it exists.

Implementation

Each division, subsidiary or affiliate of (company) will be responsible for establishing and implementing detailed policies and procedures, specific to its needs, in support of this policy. Each of these policies is subject to central review for consistency with (company's) policy.

Responsibility for interpretation of this policy falls to the (company's) human resource department.

Acknowledgments

To the Minnesota Safety Council and [NETS](#) for this sample policy.



Program: Components and Examples

An alcohol and drug policy and program in any business should be closely related and aligned. While a policy may ultimately be the “center” or “foundation” of overall alcohol and other drug efforts at a business, program components and policy elements may be researched, designed, and integrated over time based on trends, problems, or needs. Often, a policy will reference nearly every program component.

NOTE: The term “program” is often used to describe overall alcohol and other drug efforts of a business, such as “drug-free workplace program.” In this guide, we use “program” to differentiate between policy and program where program refers to training, activities, services, opportunities, or projects.

In this section, a brief explanation of the following program components are presented:

- Employee assistance programs (EAPs)
- Screening, brief intervention, and referral to treatment
- Training and education
- Workplace peer intervention or peer-based prevention program

Employee assistance programs (EAPs)

EAPs are worksite resource, sponsored by an organization or a union, designed to enhance employee health and productivity through prevention, identification, and resolution of personal and family health, economic, and social issues, including substance abuse and mental health, that might interfere with work. An EAP can enhance the work climate of an organization and promote the health and well-being of everyone involved.

- Though some EAPs concentrate primarily on alcohol and other drug problems, most EAPs address a wide range of employee problems: stress, marital difficulties, financial trouble, and legal problems.
- Most EAPs offer a range of services: employee education (onsite or offsite), individual and organizational assessment, counseling, and referrals to treatment.
- EAPs can also train supervisors for your program.

Contracting with an EAP has been found to be a cost-effective approach to providing assistance to employees. There are also free and low-cost ways to provide assistance.

Different types of EAPs include:

- Internal/in house
- Fixed-fee contract
- Fee-for-service contracts
- Consortia
- Management-sponsored programs
- Peer-based programs
- Member assistance programs



To cut costs, some employers use SAMHSA’s helpline (1.800.WORKPLACE), partner with other organizations, or rely on community-based, drug-free coalitions. For help with finding local initiatives and coalitions:

- Look in the phonebook, under your city’s name, for entries like “Drug-Free Business Initiative” or “Coalition for Drug-Free Workplaces.”
- Call or write your State or county office for alcohol and drug abuse services, and ask the office if it has a list of groups near your workplace.
- Call or write your local mayor’s office, the police department’s community relations office, or the office of economic development, and ask if the office has a list of coalitions.
- Call or write your chamber of commerce or business or trade association, and ask if it has services to help employers start a drug-free workforce effort.

Screening, brief intervention, and referral to treatment

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders and those who are at risk of developing these disorders. Primary care centers, hospital emergency rooms, trauma centers, and other community settings provide opportunities for early intervention with at-risk substance users before more severe consequences occur.

- **Screening** quickly assesses the severity of substance use and identifies the appropriate level of treatment.
- **Brief intervention** focuses on increasing insight and awareness regarding substance use and motivation toward behavioral change.
- **Referral** to treatment provides those identified as needing more extensive treatment with access to specialty care.

A key aspect of SBIRT is the integration and coordination of screening and treatment components into a system of services. This system links a community's specialized treatment programs with a network of early intervention and referral activities that are conducted in medical and social service settings.

According to SAMHSA at <http://sbirt.samhsa.gov/>, SBIRT research has shown that large numbers of individuals at risk of developing serious alcohol or other drug problems may be identified through primary care screening. Interventions such as SBIRT have been found to:

- Decrease the frequency and severity of drug and alcohol use.
- Reduce the risk of trauma.
- Increase the percentage of patients who enter specialized substance abuse treatment.



In addition to decreases in substance misuse and abuse, screening and brief interventions have also been associated with fewer hospital days and fewer emergency department visits. Cost-benefit analyses and cost-effectiveness analyses have demonstrated net-cost savings from these interventions.

Orientation, education, and training

As you plan this component, ensure that orientation, education, and training are geared to all employees and levels of the organization.

An employee orientation, education and training

program component is a foundation for implementing a successful drug-free workforce effort. It should accomplish the following:

- Establish and help to communicate the drug-free workforce policy (all expectations), program components, and rules.
- Explain how to access assistance (such as self-refer to the EAP before problems appear on-the-job).
- Explain how employee performance problems will be evaluated and how referrals for assistance will be handled.
- Provide details regarding the circumstances, procedures, and other elements of drug testing (if testing is included in the policy).
- Explain confidentiality and other employee protections in the policy.
- Provide information about substance misuse and abuse such as types and effects of drugs, symptoms of use, and effects on performance.
- Explain the relationship of the employee assistance program to any drug testing, treatment, rehabilitation, and aftercare.

Having a plan...

for introducing and explaining the drug-free workforce effort to employees and informing them about substance misuse and abuse-related issues will be important to your overall success.

Be sure to include the hazards of substance misuse and abuse and benefits of avoiding misuse and abuse in your education efforts. At minimum, the education component should also:

- Provide print materials on the hazards of alcohol and drugs.
- Inform employees how to avoid substance misuse and abuse problems.
- Provide general health promotion material on stress management, healthful eating, and fitness as well as alcohol and other drugs.



As resources permit, organizations may select one of several evidence-based substance abuse prevention programs that present materials in the context of broader health and safety issues. Workplace, evidence-based programs are described in the brochure “SAMHSA NREPP Model Programs for the Workplace” at http://www.workplace.samhsa.gov/wpworkit/pdf/samhsas_nrepp_model_programs_for_the_workplace_br.pdf. Also, brief summaries of these programs are presented at the end of this section.

Supervisor training, especially in organizations with several or more supervisors, is highly recommended in a comprehensive plan. Supervisors should be provided with special training to ensure that they understand the workforce policy and their roles and responsibilities in preventing and addressing the misuse and abuse of alcohol and other drugs. The depth and scope of supervisor training should be developed in consideration of and relation to:

- Implementation of drug testing.
- Substantial prevalence of substance use.
- Organization resources to support the training.

Training should be customized to address the unique characteristics of your workplace (such as type of industry and job functions) and workforce.

Workplace peer intervention or peer-based prevention program

Less common than conventional EAPs, peer-based or coworker-based prevention, intervention, or employee assistance offer education, training, assistance, and referrals through peers and coworkers. This type of program requires extensive education and training for employees.

PeerCare is an example of a peer-based effort. It is a union-management partnership that uses employee occupational peer groups to change a work climate that tolerates or enables working under the influence of drugs or alcohol. In exchange for employee efforts, management moves from a punitive approach to supportive and restorative aid for substance abusers. Corporate volunteers are trained to:

- Educate the workforce about working drug and alcohol free.
- Identify workers who are drinking or using drugs.
- Remove them from the worksite.
- Motivate them to seek appropriate diagnostic and treatment services.

See more on PeerCare at

http://dwp.samhsa.gov/HealthWellnessSafety/docs/factsheet2_110306.pdf.



Sample Programs that Can Enhance Your Drug-Free Workforce Efforts

Substance abuse prevention programs identified to be effective by SAMHSA can further enhance your drug-free workforce and substance abuse prevention effort, create a health-promoting workplace environment, and support employee health and well-being. Programs that apply these characteristics in their design have been carefully implemented and rigorously evaluated with consistently positive outcomes for preventing substance abuse. They have met stringent standards set by the National Registry of Evidence-based Programs and Practices (NREPP). Technical assistance can be obtained from the program developers.

Examples of NREPP model workplace programs are:

- **Coping With Work and Family Stress** is a 16-session weekly group intervention designed to teach employees how to develop effective coping strategies for dealing with stressors at work and at home. Companies provide release time so that employees can participate in the program consistently.
- **Team Awareness** is a six-module workplace-training program that addresses behavioral risks associated with substance abuse among employees, their coworkers, and (indirectly) their families. This program has been shown to increase employee help-seeking for, and supervisor responsiveness to, troubled workers; to enhance the work climate; and to reduce problem drinking. The program is appropriate for businesses or organizations of any size.
- **The Healthy Workplace Program** is a set of workplace substance abuse prevention interventions that reduce unsafe drinking, illegal drug use, and prescription-drug abuse while improving the health practices of adult workers. Cast in a health promotion framework and rooted in social-cognitive principles of behavior change, the program integrates substance abuse prevention material with popular health promotion strategies, thereby defusing the stigma that often accompanies substance abuse and removing barriers to help-seeking behavior.
- **The Wellness Outreach at Work** program provides comprehensive health risk-reduction services to all employees at a workplace, using health screening, follow-up, and worksite health promotion programs. Alcohol education is integrated into the context of health-risk counseling.

For more information and technical assistance, see:

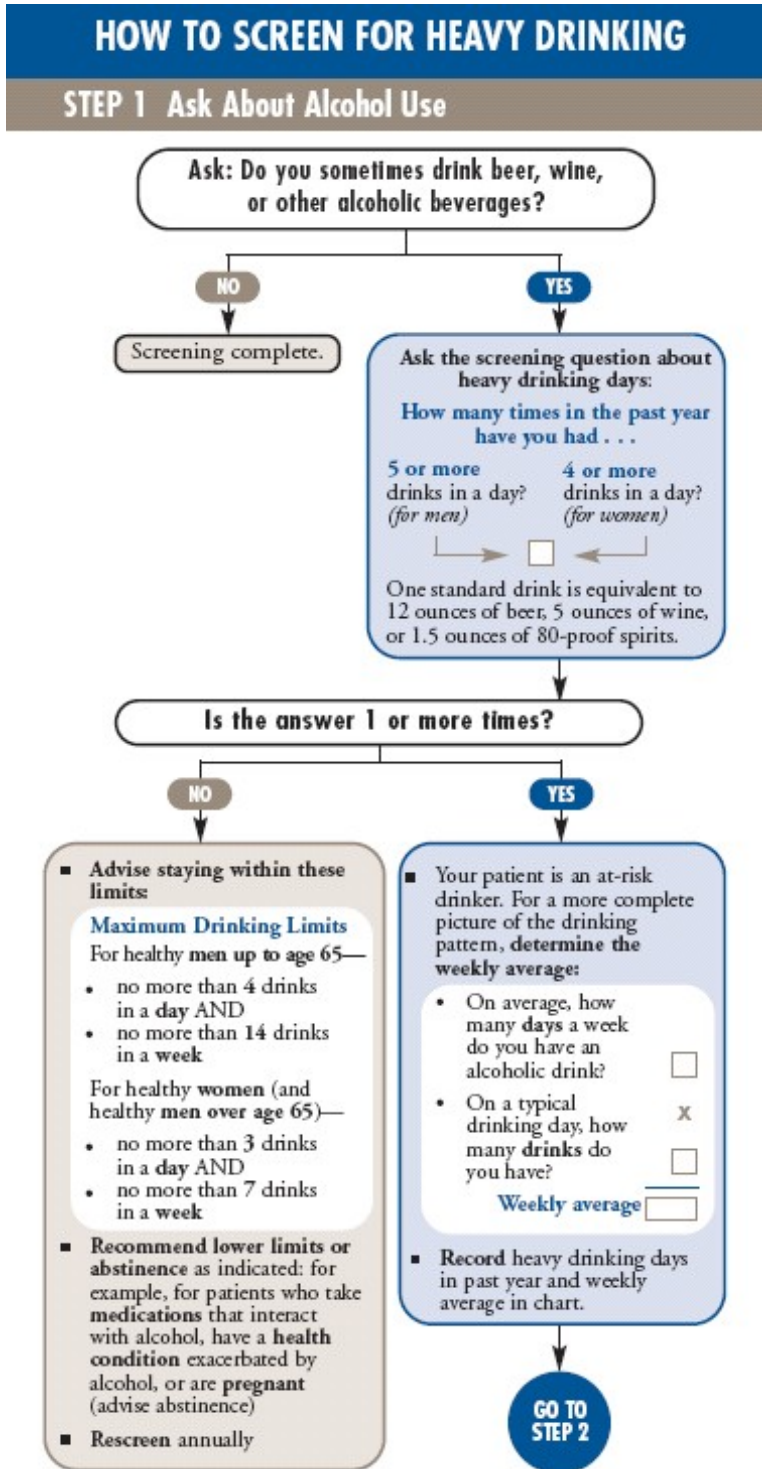
http://www.dsgonline.com/workplace_kit_testsite/pdf/nrepp.pdf



Screening, Brief Intervention, and Referral to Treatment: A Program Component

Screening, brief intervention, and referral to treatment (SBIRT) is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders and those who are at risk of developing these disorders.

The SBIRT process, from the National Institute on Alcohol Abuse and Alcoholism's Pocket Guide on SBIRT, is provided here and on the following pages.



For more information, see: <http://pubs.niaaa.nih.gov/publications/Practitioner/PocketGuide/pocket.pdf>.



OUR DRIVING CONCERN

HOW TO ASSESS FOR ALCOHOL USE DISORDERS

STEP 2 Assess For Alcohol Use Disorders

Next, determine if there is a *maladaptive pattern of alcohol use*, causing *clinically significant impairment or distress*.

Determine whether, in the past 12 months, your patient's drinking has **repeatedly** caused or contributed to

- risk of bodily harm** (drinking and driving, operating machinery, swimming)
- relationship trouble** (family or friends)
- role failure** (interference with home, work, or school obligations)
- run-ins with the law** (arrests or other legal problems)

If yes to **one or more** ➔ your patient has **alcohol abuse**.

In either case, proceed to assess for dependence symptoms.

Determine whether, in the past 12 months, your patient has

- not been able to cut down or stop** (repeated failed attempts)
- not been able to stick to drinking limits** (repeatedly gone over them)
- shown tolerance** (needed to drink a lot more to get the same effect)
- shown signs of withdrawal** (tremors, sweating, nausea, or insomnia when trying to quit or cut down)
- kept drinking despite problems** (recurrent physical or psychological problems)
- spent a lot of time drinking** (or anticipating or recovering from drinking)
- spent less time on other matters** (activities that had been important or pleasurable)

If yes to **three or more** ➔ your patient has **alcohol dependence**.

Does patient meet criteria for abuse or dependence?

NO

GO TO
STEPS 3 & 4
for
AT-RISK
DRINKING

YES

GO TO
STEPS 3 & 4
for
ALCOHOL USE
DISORDERS



OUR DRIVING CONCERN

HOW TO CONDUCT A BRIEF INTERVENTION

FOR AT-RISK DRINKING (no abuse or dependence)

STEP 3 Advise and Assist

- State your conclusion and recommendation clearly and relate them to medical concerns or findings.
- Gauge readiness to change drinking habits.

Is patient ready to commit to change?

NO

- Restate your concern.
- Encourage reflection.
- Address barriers to change.
- Reaffirm your willingness to help.

YES

- Help set a goal.
- Agree on a plan.
- Provide educational materials. (See www.niaaa.nih.gov/guide.)

STEP 4 At Followup: Continue Support

REMINDER: Document alcohol use and review goals at each visit.

Was patient able to meet and sustain drinking goal?

NO

- Acknowledge that change is difficult.
- Support positive change and address barriers.
- Renegotiate goal and plan; consider a trial of abstinence.
- Consider engaging significant others.
- Reassess diagnosis if patient is unable to either cut down or abstain.

YES

- Reinforce and support continued adherence to recommendations.
- Renegotiate drinking goals as indicated (e.g., if the medical condition changes or if an abstaining patient wishes to resume drinking).
- Encourage to return if unable to maintain adherence.
- Rescreen at least annually.

FOR ALCOHOL USE DISORDERS (abuse or dependence)

STEP 3 Advise and Assist

- State your conclusion and recommendation clearly and relate them to medical concerns or findings.
- Negotiate a drinking goal.
- Consider evaluation by an addiction specialist.
- Consider recommending a mutual help group.
- For patients who have dependence, consider
 - the need for medically managed withdrawal (detoxification) and treat accordingly.
 - prescribing a medication for alcohol dependence for patients who endorse abstinence as a goal.
- Arrange followup appointments, including medication management support if needed.

STEP 4 At Followup: Continue Support

REMINDER: Document alcohol use and review goals at each visit.

Was patient able to meet and sustain drinking goal?

NO

- Acknowledge that change is difficult.
- Support efforts to cut down or abstain.
- Relate drinking to ongoing problems as appropriate.
- Consider (if not yet done):
 - consulting with an addiction specialist.
 - recommending a mutual help group.
 - engaging significant others.
 - prescribing a medication for alcohol-dependent patients who endorse abstinence as a goal.
- Address coexisting disorders—medical and psychiatric—as needed.

YES

- Reinforce and support continued adherence.
- Coordinate care with specialists as appropriate.
- Maintain medications for alcohol dependence for at least 3 months and as clinically indicated thereafter.
- Treat coexisting nicotine dependence.
- Address coexisting disorders—medical and psychiatric—as needed.



Practices: Strategies and Examples

Supporting an alcohol and drug policy and program in any business should be the practices or strategies that are used to reinforce the messages and information those policies and programs are intended to convey. Management is ultimately responsible for leading the safety and health effort, of which alcohol and other drugs are a critical part, in any organization. In addition to management's role, the involvement of **ALL** employees in an organization will increase the success of any effort through a multi-faceted approach where everyone shares responsibility.

Of equal importance is communication. While management establishes and maintains policies and programs for alcohol and other drugs, their leadership and ability to effectively communicate expectations set the stage for an organization's culture in regards to alcohol and other drug misuse and abuse. In addition to the importance of involvement, of management

In this section, a brief explanation of the following practices are presented:

- General guidelines useful for employers, supervisors, and human resources staff
- Top level support – management leadership and involvement
- All employee involvement
- Communication
- Workplace parties, events, and drinking
- Designated driver and alternative transportation programs
- After work/off-the-job efforts that impact families and communities

General Guidelines Found to be Useful for Employers, Managers, Supervisors, and Human Resources Staff

From SAMHSA's Drug-Free Workplace Kit (Components of a Drug-Free Workplace), core practices identified as critical to the success of an alcohol and other drug misuse and abuse effort and are useful for implementation at all levels of a business are:

- Know the policy and program.
- Be aware of legally sensitive areas.
- Recognize potential problems.
- Document in a systematic and fair manner.
- Act in a confidential way.
- Refer to appropriate services.
- Reintegrate into the workforce.

If implemented, these core strategies help to ensure that strong foundation exists for a comprehensive and successful effort.



Top level support — management leadership and involvement

In an effective drug-free workforce effort, top-level management play essential roles. An important role of senior executives is to set direction while middle managers design practices and procedures needed to bring about desired results. Ways that executives can show their commitment to a drug-free workforce are:

Everyone — at all levels of the organization should be held accountable for performing assigned roles and responsibilities.

- ❑ Establish and put policies and programs in writing.
- ❑ Ensure that policies and programs are distributed/made available and communicated to everyone in the business.
- ❑ Visibly participate in programs and practices. Support a healthy, safe, and drug-free culture.
- ❑ Allocate resources (staff and budget) to create a safe and healthy culture.
- ❑ Actively encourage employee participation and involvement at all levels of the organization to help the effort to succeed. Workers and their representatives must be involved in the initial planning phase.

All employee involvement

The entire organization should know about the benefits and be actively supportive of and engaged in the drug-free workforce policy and program.

- Owners, top management, supervisors, and nonsupervisory employees at all levels should be involved in the implementation of the policy and program.
- Everyone in the workforce needs information about the problems associated with the use and misuse of substances. They all can benefit from education and training that reinforces and deepens that awareness, as well as activities that motivate them to adopt safer and healthier attitudes and behaviors.

For the policy and program to facilitate positive change, everyone must be supportive and involved. Research shows that the best way to encourage positive change is to involve everyone in understanding and actively supporting the process (Prevention and Youth Development Programs: Across Borders, 2003).

Communication

Successful programs ensure that managers, supervisors, union representatives, and employees are all knowledgeable about their roles, rights, and responsibilities under a drug-free workforce effort. Messages should be clear and consistent. Explain your drug-free workforce effort by using a variety of communication strategies, including:

- Written materials
- Charts
- Meetings
- Question-and-answer sessions
- A suggestion box



The method you choose to use to inform employees about drug-free workforce efforts can show that the organization places a high priority on its goals.

- A written communication (such as through intranet or printed form) from the CEO or other top management, for example, can speak in a strong, positive manner about the rationale and importance of a drug-free workforce to the organization and employee safety, health, and well-being.
- It can also share information about the history, mandates, and goals (such as the highest standards of safety) of the business that informed the entire process.

Employers who are successful know it is important to repeat messages periodically, watch how the policy and program works on a day-to-day basis, invite feedback, and revise as needed to meet the specific needs of their workforce.

Workplace parties, events, and drinking

The workplace is frequently a place where employees and employers celebrate special events. In addition, vendors, potential customers, and other constituencies important to business are often entertained during work-related events.

- Workplace parties and events typically mean lots of music, food, and drinks.
- If the drinks include alcohol, the potential for unfortunate consequences greatly increases.

Opinions vary regarding the appropriateness of making alcoholic beverages available at workplace parties or other company-sponsored events. However, it is important to remember that improper use of alcohol may expose employers to liability under tort, workers' compensation, or other laws. For example:

- An employer may be held liable if a person consumes alcoholic beverages at a company-sponsored event and subsequently causes a crash.
- Some employers have been held liable because negligent acts by employees under the influence of alcohol consumed at employer-sponsored events were found to be within the scope of their employment.
- In other cases, individuals have been held liable merely because they provided alcohol to social guests.

Each time an employee is involved in an impaired driving crash, businesses pay through increased absenteeism and use of health-care benefits. If the employee caused the crash or is arrested for impaired driving even if a crash did not occur, administrative and legal procedures such as court time and traffic school may require further time away from work. There is also emotional difficulty and decreased morale that employees experience when a colleague suffers from a severe injury or dies.



Depending on the nature of their business, some employers may have additional incentives to ensure their employees are educated about the potential legal vulnerabilities associated with impaired driving.

- Employers whose businesses serve or sell alcohol may be held liable if an individual consumes alcohol at their establishment and subsequently causes a crash. All employers run a risk if they serve alcoholic beverages at workplace celebrations and other company-sponsored events because they may be held liable if a person causes a crash subsequent to consuming alcoholic beverages at such an event.

NOTE: If an employer does decide to provide or allow alcoholic beverages at an office event, state laws regarding their use and resulting employer legal responsibilities should be consulted and addressed.

- Employers with employees who drive as part of their job – such as couriers, delivery persons and sales representatives – may also be subject to legal action if the impaired employee causes a crash while conducting business. These employers must consider the costs of insuring and maintaining company vehicles, in addition to the time managers spend resolving situations. The return on investment for employer-sponsored impaired driving prevention is considerable when compared to the financial burden caused by just one crash, especially for small businesses.

As presented in this guide and through ideas that can be located in other resources that are provided, there are several measures employers can take in attempts to minimize negative consequences of misuse and abuse of alcohol and other drugs, as well as impaired driving. Employers have power to protect their businesses by educating employees about the harmful effects of alcohol and other drugs and supporting prevention efforts in their communities. By doing so, employers do more than just protect their business assets – they contribute to a nationwide prevention campaign and help make communities safer for their friends and families and those of their employees.

NOTE: The information provided by the US Department of Labor in this section is not intended to be a substitute for legal advice and should not be regarded as a guarantee against liability. See http://www.dol.gov/asp/programs/drugs/workingpartners/sp_iss/send.asp for additional information on this topic.



Designated driver and alternative transportation programs

Workforce efforts that contribute to impaired driving prevention include designated driver and alternative transportation programs (such as taxis paid for by the employer or EAP) especially when workplace parties and other employer-sponsored events may include alcohol. Also, employers need to understand the importance of providing non-alcoholic options at such events and take other steps to send employees a safe and sober message about office parties, drinking, and other drug misuse and abuse.

What is a Designated Driver?

Being the designated driver doesn't mean the "least drunk" person drives home. It means that, before celebrations begin, an adult is designated to provide safe and sober transportation home and only drinks non-alcoholic beverages.

Mothers Against Drunk Driving
<http://www.madd.org>

In addition to company functions, employers can take a proactive role in promoting community-based designated driver programs by:

- Hosting brown-bag luncheons featuring local law enforcement, prosecutors or judges, victims, and health care practitioners to inform and educate employees on impaired driving consequences and laws.
- Placing designated driver messages into paycheck envelopes.
- Highlighting the designated driver message in company newsletters.
- Providing support or funding to local law enforcement or community groups that organize designated driver programs.
- Writing a letter to the editor of a local paper discussing what the company is doing to stop impaired driving.
- Starting a company-sponsored designated driver program.
- Placing designated driver materials in kitchens and snack, copy, and rest rooms.
- Distributing materials that discuss how alcohol and other drugs impair driving.

Employers can also consider taking steps to encourage the use of designated driver and alternative transportation programs at non-company gatherings popular with company personnel, such as regular "happy hours" or special events at local restaurants and bars.

For additional information on this topic, see the National Highway Safety Administration's (NHTSA) Web site at

<http://www.nhtsa.dot.gov/people/injury/alcohol/DesignatedDriver/comm1.html>.



After work/off-the-job efforts that impact families and communities

Because many workers who use alcohol or other drugs come to work not necessarily using substances but exhausted from off-the-job alcohol and other drug behaviors, prevention strategies should be expanded from substance misuse and abuse in the workplace to substance misuse and abuse in the workforce – as well as the community. Additionally, families of employees can benefit from the prevention and intervention efforts in schools and communities.

Employers can use and/or support the national campaigns, events, and efforts listed below to educate their workforce and families about alcohol misuse and to promote safe driving practices on and off the job.

- **0.08% blood alcohol concentration (BAC) laws** are effective in reducing alcohol-related crash fatalities.
- **Lower BAC laws** for young or inexperienced drivers for young or inexperienced drivers establish a lower illegal BAC for these drivers than for older or more experienced drivers.
- **Minimum legal drinking age laws** specify an age below which the purchase or public consumption of alcoholic beverages is illegal. Research shows that the minimum legal drinking age of 21 has reduced traffic crashes, injuries and deaths.
- **Sobriety checkpoints** are locations at which law enforcement officers systematically stop drivers to assess their degree of alcohol impairment.
- **Server intervention training programs** provide education and training to servers of alcoholic beverages with the goal of altering their serving practices to prevent patron intoxication and alcohol-impaired driving. These practices may include offering patrons food with drinks, delaying service to rapid drinkers, refusing service to intoxicated or underage patrons, and discouraging intoxicated patrons from driving.

In addition, mass media campaigns to reduce alcohol-impaired driving, school-based programs, instructional programs, social norming campaigns, peer organizations, designated driver promotion, and multifaceted community-based programs are efforts that can be supported by businesses.

See the Center for Disease Control’s “Guide to Community Preventive Services” for more information about selected population-based interventions to reduce motor vehicle occupant injuries at <http://www.thecommunityguide.org/mvoi/>.



Profile of a Midsize Company: Drug-Free Workforce Practices

Sundt, Inc. is presented as an example of a midsize company in the Southwest that integrates a comprehensive array of alcohol and other drug practices with emphasis on communication and involvement across its entire business.

Sundt, Inc.

Corporate Headquarters
2620 S. 55th Street
Tempe, AZ 85282 -1903
Phone: (480)293-3000
Toll Free: (800)280-3000

Information provided by:

Brian H. Murphy
Vice President Director of Quality and Safety
Tucson, AZ
Phone: (480)293-3112
E-Mail: bhmurphy@sundt.com

About Sundt, Inc.

- Founded in 1890, Sundt is a full-service contractor with 1,500 employees performing preconstruction, construction, and post-construction services primarily in the Southwest.
- It is recognized for commercial building, Federal government housing, commercial structures, underground work, and many landmark projects including the relocation of the London Bridge from Britain to the Arizona Desert, Los Alamos in New Mexico, the Kitt Peak Observatory in Southern Arizona, and Launch Pad 39-A in Cape Canaveral in Florida.
- 1% of employees drive with Commercial Driver's Licenses. 33% of employees drive company-owned or leased vehicles.
- General management, human resources, legal, risk management/loss prevention, and safety personnel are involved in addressing alcohol and other drug issues in the company. HR and safety personnel are involved most frequently.

Description of Practices

- Substance abuse efforts were initiated in 1981. Management saw, reflective of the times, that alcohol and other drug misuse and abuse were more prevalent in the construction industry, especially in regards to heavy drinking. The overall effort started with alcohol policies for the lunch hour.
- Management supports alcohol and other drug efforts, especially those of HR and safety staff who are most regularly involved. They understand the importance of prevention and intervention, if necessary, to the company's bottom line.
- The new employee orientation (part of hiring practices), addresses alcohol and other drug misuse and abuse issues, including impaired driving. This part of the Sundt's overall program was created by safety personnel, but is managed and implemented by HR. It is video-based with a 50-question test.

In 1981, Sundt was one of the first contractors to get involved in substance abuse and impaired driving efforts.



Description of Practices (continued)

- The alcohol and other drug policy is presented at employee orientation with required signatures as a commitment to understanding and agreeing to it.
- Educational programs are provided to employees if they operate company vehicles or are occasional drivers, such as with pick-ups on a worksite. Sundt uses an established ½ day defensive driving program with an in-house instructor with and a videotape, sometimes with classes of up to 25-30 employees.
- A pre-employment alcohol and drug screen is implemented. Random screening is determined by computer and implemented by job site (Sundt has a variety of sites). Referral by employees may confidentially identify someone that should be screened based on observable alcohol or other drug or peculiar behaviors.
- Major medical coverage includes treatment for substance abuse.
- A monthly paper includes articles on alcohol and other drug-related topics.

Greatest Challenge

- Communicating with all employees about alcohol and other drugs in a company with a fluid workforce can be a challenge keeping up with employees as they move from job to job with different functions.
- Sundt is addressing this challenge through a variety of communication strategies, policy elements, and program components specific to alcohol and other drugs. For example, payroll stuffers are sent out on health-related topics, ensure related topics are covered and/or reinforced. Also, as the workforce changes, HR's role in working with safety personnel has become increasingly important.

Major Success

- Alcohol and other drug efforts at Sundt showed an initial onset reduction of 51% in reported claims with about a 30% failure rate. They are now experiencing a 4% failure rate.
- Sundt believes that their comprehensive alcohol and other drug efforts are a deterrent to drug abusers who otherwise might seek employment there.

How Success Is Measured

- OSHA incident and lost time rates are low and are major success indicators.
- Sundt is not experiencing impaired driving incidents.

Other Types of Impaired Driving and Substance Misuse Efforts

- At after-hours company functions, alcohol use is managed with a 2-drink "ticket" minimum for employees and sub-contractors.



Resources

This section provides a listing of resources to assist Texas employers in reducing the risk of impaired driving among employees and their families. While an effort was made to select easily accessible/obtainable resources, some links or materials may not be available or may have become obsolete. This list is for informational purposes only and inclusion of an item on the list does not represent an endorsement of that product or organization. Some resources may have been inadvertently omitted.

This section is structured by organizations and the resources/materials available for each organization.

U.S. Department of Transportation (DOT)

Home Page: <http://www.dot.gov>

The mission of the DOT is to serve the U.S. by ensuring a fast, safe, efficient, accessible and convenient transportation system that meets our vital national interests and enhances the quality of life of the American people, today and into the future.

Resources

Office of Drug & Alcohol Policy & Compliance

<http://www.dot.gov/ost/dapc>

Find the DOT workplace drug and alcohol testing rules here. The Omnibus Transportation Employee Testing Act of 1991 requires drug and alcohol testing of safety-sensitive transportation employees in aviation, trucking, railroads, mass transit, pipelines and other transportation industries. DOT publishes rules on who must conduct drug and alcohol tests, how to conduct those tests and what procedures to use when testing.

National Highway Traffic Safety Administration (NHTSA)

<http://www.nhtsa.dot.gov> (Click "Traffic Safety", then "Impaired Driving")

NHTSA's mission is to save lives, prevent injuries and reduce economic costs due to road traffic crashes, through education, research, safety standards and enforcement activity. NHTSA runs national holiday campaigns such as "You Drink and Drive. You Lose," "Friends Don't Let Friends Drive Drunk," "Buzzed Driving Is Drunk Driving." Visit

<http://www.txdrivingconcern.org> for campaign materials that are tailored for Texas.

Federal Motor Carrier Safety Administration (FMCSA)

<http://www.fmcsa.dot.gov>

The primary mission of FMCSA is to reduce crashes, injuries, and fatalities involving large trucks and buses.

Print and Online Materials for Employers

Alcohol and Drug Rules: An Overview

<http://www.fmcsa.dot.gov/rules-regulations/topics/drug/engtesting.htm>

A general overview of the FMCSA alcohol and drug testing rules for persons required to obtain a commercial driver's license (CDL).



Procedures for Transportation Workplace Drug and Alcohol Testing Programs

http://www.dot.gov/ost/dapc/NEW_DOCS/part40.html?proc

The DOT rule, 49 CFR Part 40, describes required procedures for conducting workplace drug and alcohol testing for the Federally regulated transportation industry.

Employer Handbook – What Employers Need to Know About DOT Drug and Alcohol Testing [Guidance and Best Practices]

http://www.dot.gov/ost/dapc/testingpubs/Revised_Employer_Guidelines_August_25_2008.pdf

If you employ safety-sensitive workers who must have DOT drug and alcohol tests, or you manage a DOT drug or alcohol testing program, this publication can help you understand how to run an excellent program that meets DOT requirements. 61 pages.

Employers/Business Take A Stand Against Impaired Driving

<http://www.nhtsa.dot.gov/people/outreach/safesobr/13qp/resource/takeemploy.html>

Includes a list of ideas for employers to prevent impaired driving among employees, their families and the community.

The Visual Detection of DWI Motorists

<http://www.nhtsa.dot.gov/people/injury/alcohol/dwi/dwihtml/index.htm>

A short guide that explains major cues of motorists driving under the influence.

The Nation's Top Strategies to Stop Impaired Driving

<http://www.nhtsa.dot.gov/people/injury/alcohol/StrategiesStopID/index.html>

This document covers the major current national strategies: high visibility law enforcement campaigns, support for prosecutors and DWI courts, screening and brief intervention, and support for primary seat belt laws.

The Economic Burden of Traffic Crashes on Employers

<http://www.nhtsa.dot.gov/people/injury/airbags/EconomicBurden/index.html>

This report includes costs by state and industry, and by alcohol and restraint use. Provides information about savings produced by traffic safety programs.

U.S. Department of Labor (DOL)

Home Page: <http://www.dol.gov>

The DOL fosters and promotes the welfare of the job seekers, wage earners, and retirees of the U.S. by improving their working conditions, advancing their opportunities for profitable employment, protecting their retirement and health care benefits, helping employers find workers, strengthening free collective bargaining, and tracking changes in employment, prices, and other national economic measurements. In carrying out this mission, the DOL administers a variety of Federal labor laws including those that guarantee workers' rights to safe and healthful working conditions; a minimum hourly wage and overtime pay; freedom from employment discrimination; unemployment insurance; and other income support.



Resources

Occupational Safety and Health Administration (OSHA)

<http://www.osha.gov>

Safety and health conditions in most private industries are regulated by OSHA or OSHA-approved state systems. Nearly every employee in the nation comes under OSHA's jurisdiction with some exceptions such as miners, some transportation workers, many public employees, and the self-employed. In addition to the requirements to comply with the regulations and safety and health standards contained in the OSH Act, employers subject to the Act have a general duty to provide work and a workplace free from recognized, serious hazards.

Working Partners for an Alcohol- and Drug-Free Workplace

<http://www.dol.gov/workingpartners>

A public outreach initiative that assists employers to develop drug-free workplace programs. Although not required under any DOL laws or regulations, such programs are natural compliments to other initiatives that help ensure safe and healthy workplaces and add value to America's businesses and communities.

Print and Online Materials for Employers

Drug-Free Workplace Advisor

<http://www.dol.gov/elaws/drugfree.htm>

The Drug-Free Workplace Advisor assists users to build tailored drug-free workplace policies. Click through a series of steps to build a policy. It also provides guidance on how to develop comprehensive drug-free workplace programs, and information about coverage and requirements of the Drug-Free Workplace Act of 1988.

Training and Educational Materials from Working Partners for an Alcohol- and Drug-Free Workplace

<http://www.dol.gov/asp/programs/drugs/workingpartners/materials/materials.asp>

Find presentation materials, brochures, articles and fact sheets, posters to communicate with employees, supervisors and managers. Find handouts for employee education presentations. There are industry-specific materials. Some materials are in Spanish as well as English. Samples of what you will find on this web site:

Methamphetamine in the Workplace PowerPoint Presentation

http://www.dol.gov/asp/programs/drugs/workingpartners/sp_iss/meth_Workplace_Presentation_11-28-06.ppt

Includes data, hard-hit industries and occupations, signs and symptoms, prevention, resources.

Supervisor Drug-Free Workplace Training

PPTs:

<http://www.dol.gov/asp/programs/drugs/workingpartners/materials/supervisor-training.ppt>

Handouts:

<http://www.dol.gov/asp/programs/drugs/workingpartners/materials/supervisor-training-handouts.doc>

Ready-to-use slide presentation and handouts that employers can use as part of training for supervisors on recognizing symptoms of substance abuse and making referrals to help based on performance problems.



First Line Fact Sheet

http://www.dol.gov/asp/programs/drugs/workingpartners/First-Line_Fact_Sheet.pdf

One-page fact sheet to help supervisors, managers and foremen understand their role in preventing worker substance abuse and their role in enforcing their company's drug-free workplace policy.

Annual Drug-Free Work Week Materials

<http://www.dol.gov/asp/programs/drugs/workingpartners/DFWW-Introduction.asp>

This promotional week is in October. Find ideas for employers and employees, associations and unions, a useful tool box with articles to drop into your employee communications, talking points for speeches or emails, posters, fact sheets, and more.

Substance Abuse Information Database

<http://www.dol.gov/asp/programs/drugs/said/default.asp>

This database provides information about and access to hundreds of documents and resources that may assist employers and others to learn about workplace substance abuse issues and develop drug-free workplace programs. Examples of items cataloged include sample policies, research reports, training and educational materials, and legal and regulatory information.

Motor Vehicle Safety

<http://www.osha.gov/SLTC/motorvehiclesafety/index.html>

According to the Bureau of Labor Statistics' *National Census of Fatal Occupational Injuries in 2006*, more than 2,400 deaths a year result from occupational motor vehicle incidents (more than 42 % of the annual number of fatalities from occupational injuries). Fatal highway incidents remained the most frequent type of fatal work-related event, accounting for nearly one out of four fatal work injuries.

Guidelines for Employers to Reduce Motor Vehicle Crashes

http://www.osha.gov/Publications/motor_vehicle_guide.html

This document represents a joint effort by NETS, NHTSA, and OSHA to reduce motor vehicle-related deaths and injuries in the nation's workforce.

Centers for Disease Control and Prevention

Home Page: <http://www.cdc.gov>

The CDC's mission is to promote health and quality of life by preventing and controlling disease, injury, and disability. It accomplishes this by collaborating to create the expertise, information, and tools that people and communities need to protect their health – through health promotion, prevention of disease, injury and disability, and preparedness for new threats.

Resources

The National Institute for Occupational Safety and Health (NIOSH)

<http://www.cdc.gov/NIOSH>

NIOSH is the federal agency responsible for conducting research and making recommendations for the prevention of work-related injury and illness.

National Center for Injury Prevention and Control (NCIPC)

<http://www.cdc.gov/ncipc>

The NCIPC is the lead federal agency for injury prevention.



Task Force on Community Preventive Services

<http://www.thecommunityguide.org>

CDC and the Task Force on Community Preventive Services—an independent, nonfederal panel of community health experts—published systematic reviews of the literature for eight community-based interventions to reduce alcohol-impaired driving.

Print and Online Materials for Employers

Drunk and Drugged Driving

<http://www.cdc.gov/ncipc/duip/spotlite/3d.htm>

CDC data and prevention information on impaired driving.

Reviews of Effectiveness on Reducing Alcohol-Impaired Driving

<http://www.thecommunityguide.org/mvoi/>

Includes scientific reviews of .08 BAC, intervention training programs for servers of alcoholic beverages, designated driver programs, and many more.

Occupational Motor Vehicle Safety

<http://www.cdc.gov/niosh/topics/motorvehicle>

NIOSH events, research and resources for motor vehicle safety at work.

Older Drivers in the Workplace – Crash Prevention for Employers and Workers

<http://www.cdc.gov/niosh/docs/2005-159>

Fact sheet with data, employer tips, and worker tips.

Work-related Roadway Crashes – Prevention Strategies for Employers

<http://www.cdc.gov/niosh/docs/2004-136/default.html>

Fact sheet with data, employer tips, and resources.

SAMHSA – Substance Abuse and Mental Health Services Administration

Home Page: <http://www.samhsa.gov>

SAMHSA was established to help the nation's health care system improve prevention, diagnosis, and treatment of substance abuse and mental illnesses. SAMHSA works in partnership with states, communities, and private organizations to address the needs of those with substance abuse problems or mental illnesses and to assess community risk factors that contribute to these afflictions. SAMHSA is a program of the U. S. Department of Health and Human Services (DHHS).

Resources

Division of Workplace Programs

<http://www.workplace.samhsa.gov>

DWP has developed opportunities to address primary substance abuse prevention, early identification and intervention in adult and youthful employees, and through them to reach their families and the communities in which they live and work.

Center for Mental Health Services

<http://www.samhsa.gov/centers/cmhs/cmhs.html>

This is the Federal agency within SAMHSA that leads national efforts to improve prevention and mental health treatment services for all Americans.



Center for Substance Abuse Prevention (CSAP)

<http://www.samhsa.gov/centers/csap/csap.html>

CSAP works with States and communities to develop comprehensive prevention systems that create healthy communities in which people enjoy a quality life. This includes supportive work and school environments, drug- and crime-free neighborhoods, and positive connections with friends and family.

Center for Substance Abuse Treatment (CSAT)

http://www.samhsa.gov/centers/csat2002/csat_frame.html

CSAT promotes the quality and availability of community-based substance abuse treatment services for individuals and families. This program supports SAMHSA's free treatment referral service to link people with the community-based substance abuse services they need.

Co-Occurring Center for Excellence (COCE)

<http://www.coce.samhsa.gov>

This is the first national resource for the field of co-occurring mental health and substance use disorders.

Print and Online Materials for Employers

SAMHSA Drug-Free Workplace Kit

<http://www.workplace.samhsa.gov/WPWorkit/index.html>

The Drug-Free Workplace Kit provides public and private workplaces, from small to large and from local to global, with credible, authoritative, evidence-based information, resources, and tools for producing and maintaining drug-free workplace policies and programs.

National Clearinghouse for Alcohol & Drug Information

<http://www.workplace.samhsa.gov/WPWorkit/ncadi.html>

This is the Nation's one-stop resource for the most current, comprehensive information on substance abuse prevention and treatment. The Information Network offers more than 1,000 items on substance abuse prevention and treatment to the public, most of which are provided at no charge. Through the Information Network, SAMHSA distributes the latest studies, surveys, resource guides, DVDs, videocassettes, and other materials on substance abuse.

SAMHSA Model Programs for the Workplace

<http://nrepp.samhsa.gov>

SAMHSA maintains this searchable database of effective, evaluated programs for communities and organizations. It describes the program, costs, materials, evaluation, and more. In the "Settings" section, click on "Workplace" to see all workplace programs. Workplaces seeking to broaden their substance abuse prevention efforts can consider implementing an evidence-based prevention programs that SAMHSA has recognized as effective. These programs have been carefully implemented and rigorously evaluated, showing consistently positive outcomes.

SAMHSA's National Survey on Drug Use and Health

<http://www.oas.samhsa.gov/nhsda.htm>

This is the primary source of information on the prevalence, patterns, and consequences of drug and alcohol use and abuse in the general U.S. civilian non institutionalized population, age 12 and older. Some employment data is included.

SAMHSA's National Survey on Drug Use and Health – Employment Data

<http://www.oas.samhsa.gov/Work.htm>

Includes worker substance use by industry category, male construction worker's use of illicit drugs, substance use and employment among teens, and more.



U.S. Small Business Administration (SBA)

Home Page: <http://www.sba.gov>

The SBA helps Americans start, build, and grow businesses.

Print and Online Materials for Employers

Drug-Free Workplace Grants and Contracts

http://www.sba.gov/aboutsba/sbaprograms/sbdc/sbdc_drug_free.html

A Drug-Free Workplace Demonstration Program makes grants to eligible intermediaries to assist small businesses financially and technically in establishing drug-free workplace programs.

Ensuring Solutions to Alcohol Problems

Home Page: <http://www.ensuringsolutions.org>

This program, based at George Washington University in Washington DC, focuses on providing employers with research-based information to reduce alcohol problems among employees and their family members through:

- Recognizing the difference between safe and risky drinking.
- Screening for alcohol problems.
- Covering treatment through health insurance.
- Supporting treatment and recovery.

The website has extensive information about EAPs, health plans and insurance, and screening and brief intervention.

Print and Online Materials for Employers

Alcohol Cost Calculator for Business

<http://www.alcoholcostcalculator.org/business>

Developed by Ensuring Solutions to Alcohol Problems, it was recently updated with new data to help uncover hidden costs of alcohol to business.

Workplace Screening & Brief Intervention: What Employers Can and Should Do About Excessive Alcohol Use

http://www.ensuringsolutions.org/usr_doc/Workplace_SBI_Report_Final.pdf

A 22-page report on the cost-effectiveness of SBI, including SBI in Employee Assistance Programs and wellness programs, and return on investment.

Employee Assistance Programs: Workplace Opportunities for Intervening in Alcohol Problems

http://www.ensuringsolutions.org/usr_doc/Primer5_EAPs.pdf

A primer on effectively using EAPs to address alcohol and other drug problems.



National Safety Council (NSC)

Home Page: <http://www.nsc.org>

The NSC's mission is to educate and influence people to prevent accidental injury and death. Members of the NSC include 18,600 companies of all sizes and from a broad spectrum of industries, representing 33,300 locations and 8.5 million employees around the world. It serves as the nation's leading resource on industry trends, professional development, and strategies for advancing safety and health programs and practices.

Print and Online Materials for Employers

Our Driving Concern: Texas Employers Traffic Safety Program

<http://www.txdrivingconcern.org>

This program brings State of Texas and national resources to employers to reduce the impact of impaired driving and other risky driving behaviors on business.

Prescription for a Deadly Addiction, *Safety + Health* magazine, Vol. 77, No. 6, 2008

<http://downloads.nsc.org/pdf/Prescription.pdf>

Abuse of prescription drugs is growing. What effect does this have on the workforce?

Driver Safety Resources

<http://www.nsc.org/resources/issues/drivsafe.aspx>

Connect with NSC information about traffic safety issues for on and off the job.

Texas Department of Transportation (TxDOT)

Home Page: <http://www.txdot.gov>

TxDOT is providing safe, effective and efficient movement of people and goods.

Print and Online Materials for Employers

Traffic Operations Division and Traffic Safety Section

http://www.dot.state.tx.us/services/traffic_operations

Offers public education and information and campaign materials to improve driver behavior, including: "Drink. Drive. Go To Jail." and "Holiday Don't Drink and Drive." Many materials are available in English and Spanish.

Texas Alcohol Beverage Commission (TABC)

Home Page: <http://www.tabc.state.tx.us>

TABC strives to provide the public with information about alcoholic beverage laws and programs related to responsible behavior and the prevention of underage drinking.

Print and Online Materials for Employers

Seller Training

<https://www.tabc.state.tx.us/liccom/seller/default.htm>

The Seller Training Section regulates seller training schools that train retail employees on responsible alcohol service. For information about seller training, call (512)206-3420.

Underage Drinking

<http://www.2young2drink.com>

The agency co-sponsors a web site providing information and resources specific to underage drinking to promote public awareness about underage drinking in Texas.



Texas Workforce Commission (TWC)

<http://www.twc.state.tx.us>

The Texas Workforce Commission is the state government agency charged with overseeing and providing workforce development services to employers and job seekers of Texas. For employers, TWC offers recruiting, retention, training and retraining, and outplacement services as well as valuable information on labor law and labor market statistics.

Print and Online Materials for Employers

The A to Z of Personnel Policies

http://www.twc.state.tx.us/news/efte/table_of_contents-az.html

Covers policy information for employee handbooks including Drug-Free Workplace Policy, Employee Agreement and Consent to Drug and/or Alcohol Testing, Driver Policy and more.

Texas Department of Insurance (TDI)

<http://www.tdi.state.tx.us>

The Texas Department of Insurance envisions a financially stable and fair marketplace and an effective and efficient workers' compensation system.

Print and Online Materials for Employers

Worker's Health and Safety Resources for Employers

<http://www.tdi.state.tx.us/wc/safety/employers.html>

Consultations, trainings, video loans, and safety and health publications are available. Many materials available in Spanish.

Drug-Free Workplace Resource Guide

<http://www.tdi.state.tx.us/pubs/videoresource/drugfree.pdf>

A 13-page that includes information about whether to test for drugs, signs and symptoms of drug use, how Employee Assistance Programs can help, and creating a company drug policy.

Highway Safety Program in the Workplace

<http://www.tdi.state.tx.us/pubs/videoresource/wpbuildinghig.pdf>

A six-page document with advice on building a program in your workplace, including a worksheet on the cost of highway crashes to your operations.

The Council on Alcohol and Drugs Houston

<http://www.council-houston.org>

We reach people at home, at school, at work and in the community and meet individuals, families and businesses where they are in the cycle of addiction, from non-use, to addiction, to recovery.

Print and Online Materials for Employers

Workplace Services

http://www.council-houston.org/Workplace_Services/Workplace_Services.aqf

The Council reaches employers and employees through brown bag presentations, assessments and evaluations for employees who test positive in drug screens, consultations with companies, reviewing of drug policies, supervisor training, and more.



Characteristics of an Effective, Comprehensive Drug-Free Workforce Effort

Employers who have successfully implemented drug-free workforce efforts offer these suggestions to those starting to address substance abuse in their own organizations.

❑ ***Think things through***

Starting a drug-free workforce effort is not difficult, but to be successful, plan carefully. Think ahead, define program goals, and get advice from other employers with experience.

❑ ***Involve employees***

Work with your most valuable resource: your employees. They can help get the message out, clarify goals, and make sure the program fits into your workplace. Showing employees that you value their input vests them in the program and helps make it work.

❑ ***Have clear, written drug-free workforce policies that are applied uniformly***

Protect your business with procedural rules that are clear, fair, and consistently applied. The policy should include provisions for appeal. With these steps in place, employees are more likely to support the program and trust that the employer will carry it out fairly.

❑ ***Consider the collective bargaining process***

Where drug testing is mandatory in collective bargaining, rules for involvement of employee representatives are clear. Even when drug testing is not subject to collective bargaining or mandated, discuss a drug-free workforce policy with union representatives – they may have ideas and help in employee communication.

❑ ***Protect confidentiality***

Employees will support your drug-free workforce effort when confidentiality is protected. To ensure support and avoid legal problems, make confidentiality a priority and spell out the penalties for anyone who violates it.

❑ ***Ensure accurate testing and objective review***

If your program includes drug testing, ensure that samples are correctly collected, the chain of custody is flawless, tests are conducted by properly trained and supervised lab technicians using maintained equipment, lab performance/accuracy are independently reviewed, and results are communicated through a trained Medical Review Officer.



❑ *Ask for legal review*

Whether you write the first draft of your policy yourself or customize an existing policy, have your program, policy, and procedures reviewed by an attorney experienced in labor and employment matters in your State. An attorney can advise you on relevant laws governing drug-free workforce programs, employer testing, and other legal issues.

❑ *Eliminate stigma: address issues in context of health, safety, and productivity*

Communicate care and concern (not intimidation). Workforce substance abuse prevention and intervention policies and programs are part of a larger movement to promote the health, safety, and well-being of individuals, families, and communities and while also improving health, safety, and productivity in workplaces.

❑ *Ensure good communication and ongoing review*

Successful programs ensure that managers, supervisors, union representatives, and employees are knowledgeable about their roles, rights, and responsibilities under a drug-free workforce policy. Explain your drug-free workforce effort by using a variety of communication strategies.

Adapted from SAMHSA's Drug-Free Workplace Kit.

For more information, see:

<http://www.workplace.samhsa.gov/WPWorkit/prepare.html>

How to Address Concerns and Barriers: Implementing a Comprehensive Drug-Free Workforce Effort

Employers with successful drug-free workforce efforts report that they had barriers to overcome before implementing a successful program. Examples of common barriers you may face are listed here.

- ❑ **Is my company too small?** No organization is too small to be concerned about creating a workplace free of alcohol and other drug misuse and abuse. Problems related to alcohol and other drug misuse and abuse can arise in a workplace of any size and a workplace without a policy or program is where problems may occur.
- ❑ **Will a drug-free workplace effort cost too much money?** You can be part of the solution without spending a lot of money. Although smaller businesses usually have fewer resources for hiring outside trainers or paying for treatment, they can do something. Free or low-cost assistance is often available. Implementing a drug-free workplace effort in stages is another option. For example, you could begin by establishing a clear policy that defines the company's expectations.
- ❑ **Will I be sued?** Drug-free workforce policies, drug testing, and personnel actions tied to violating a any policy are widely accepted employment practices. As long as confidentiality is protected and the employer implements the policy in a fair and consistent manner, the chances of being sued are minimal. Have your policy and procedures reviewed by an attorney who is experienced in labor and employment matters in your State before you put the anything in place.
- ❑ **Do I need to bother? Wouldn't I know if employees were abusing alcohol or other drugs?** Abuse and addiction are serious, complex, and progressive illnesses. You may not "know" about an employee's condition until later stages of the disease process because that is when problems become most apparent.

Organizations that don't have drug-free workforce effort in place tend to be places where alcohol or other drug abusers want to work. In addition to all of the health, safety, and security risks that can arise, no employer wants to be the employer of choice for people who misuse or abuse alcohol or other drugs.

- ❑ **Will having a program create negative attitudes among employees?** Employees will be concerned and have questions about any new policy or program. Because of the sensitive nature of a drug-free workforce effort, it is important to involve employees, listen to their questions and concerns, and explain why the decision was made to implement it.

For more information, see:

<http://ncadi.samhsa.gov/govpubs/workit/ts3.aspx>

Can you spot an impaired driver on the road?

Drivers under the influence of alcohol often display certain characteristic driving behaviors. Keep these in mind to avoid a dangerous situation.

- Weaving, swerving, drifting or straddling the center line.
- Driving on the wrong side of the road.
- Driving at a very slow speed.
- Stopping without cause or braking erratically.
- Turning abruptly or responding slowly to traffic signals.
- Driving with the window down in cold weather.
- Driving with headlights off at night.

If you spot an impaired driver, stay a safe distance from their vehicle. Alert the police that there is an unsafe driver on the road.



Making our World Safer®



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Texas Department of Transportation