

# Workplace alcohol and drug policy

## About this document

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Released under the Official Information Act

# 1. Background

## 1.1 Purpose

The objectives of this policy and procedure are to:

- Support the Department's values, commitments and culture.
- Promote individual wellbeing, health and safety.
- Reduce risk.
- Create a work environment where workers feel safe.
- Support the Department's obligation to be a good employer and maintain appropriate standards of integrity and conduct.
- Ensure workers are dealt with in a manner that follows due process. In the event of misconduct this may include disciplinary action.
- Promote health awareness amongst workers about the effects of misuse of alcohol and drugs (refer to [Potential Signs/Symptoms of Substance Misuse](#) (docDM-1044251)).
- Provide support and assistance to any individual who may have an alcohol, drug (see definition for Drug(s)/Substances), or other substance problem.

## 1.2 Audience

This policy applies to all workers while performing their duties, or outside of work hours where they are readily identifiable as a worker of the Department.

## 1.3 Introduction/Context

The Department's policy is to eliminate the risk of workers being under the influence of drugs or alcohol in such a way that they could pose a risk to safety and wellbeing.

This policy has been developed by management, the unions and employees with the aim of improving the wellbeing of our people and promoting zero tolerance for the misuse of alcohol and use of drugs in the workplace. The primary reason the Department of Conservation ("the Department") has developed these procedures is for the wellbeing of our work teams. Working for the Department, particularly in field activities, involves risk requiring acute judgements and a clear state of mind. Being free of alcohol or drugs is essential.

Misuse of alcohol and drugs can have a range of well-documented negative effects on the individual, their team and the Department, predominantly around safety. The obvious effects include health issues for the person, increased stress and work effort for their team members picking up the slack and dealing with poor performance and importantly the potential for serious safety consequences.

The core elements of the Department's programme are:

- There is zero tolerance toward the misuse of alcohol and the use of drugs in the workplace.
- Management commitment and leadership.
- Everyone has a clear understanding of expectations and consequences of misuse of alcohol and the use of drugs.
- Early intervention and support.

- Assistance and rehabilitation.
- Education.
- Alcohol and/or drug testing in certain circumstances only (refer to Section 10).

Rehabilitation will always be the first consideration but there may be circumstances where serious misconduct applies.

It is an offence under the Misuse of Drugs Act 1975 to use, possess, cultivate, traffic (deal) or be in possession of any equipment or material that is capable of being used in relation to illegal drugs and will be considered to be serious misconduct. Serious misconduct must be discussed with a Senior Advisor, Human Resources.

## 1.4 Objectives

Implementing this policy will ensure:

- The alcohol and drug policy is part of a safety and wellbeing culture in the Department to reduce harm in the workplace.
- If the worker has an alcohol or drug use problem, they should seek help.
- The Department's preference is to support individuals to resolve the problem.
- If alcohol, drugs, or other substance use affects the work performance of an employee, but not necessarily creating risk, the manager is entitled to raise this with the worker and to take appropriate action in accordance with the Department's disciplinary procedures.
- People affected by alcohol, drugs, or other substances pose a risk to themselves and others in the workplace.:

## 1.5 Standards of integrity and conduct

As public servants, we must act lawfully, honestly and to the best of our abilities. Our obligations as public servants include:

- Refraining from conduct (such as the use of drugs (as defined) and alcohol) which might result in increased risk levels.
- Avoiding behaviour which might endanger or cause distress to colleagues, or otherwise cause disruption in the workplace.

As public servants, we must avoid any activities, work or non-work, which may harm the reputation of our organisation or of the State Services. For further information, refer to the [Standards of Integrity and Conduct](#) (docDM-459323).

## 1.6 Confidentiality

The collection, storage, use, dissemination and destruction of tests, data from tests and information relating to test results will be dealt with in accordance with the [Privacy Act 1993](#) and the [Health Information Privacy Code 1994](#).

Information relating to a worker will be disclosed on a "need to know" basis only to those who require it in the context of their job.

Disclosure of information to other parties will require the individual's written consent.

## 1.7 Terms and definitions

Term	Definition
Adulteration	Deliberate use of a substance to compromise, or attempt to compromise, the integrity of urine to attempt to "beat" the drug test: e.g. specimen dilution, using a masking agent, or providing a substitute urine specimen.
Alcohol	Includes any substance or beverage that contains ethyl alcohol including, but not limited to, beer, wine, pre-mix drinks and other spirits.
Breath Alcohol Testing Device (breathalyser)	A Breath Alcohol Testing device is a unit designed to accurately measure breath alcohol content. The unit must meet the Australian Standard: AS 3547-1997/Amendment 1-2000 (Type 2) "Breath Alcohol testing devices for Personal use".
Chain of Custody	<p><b>1. Worker to be Tested: Post Incident, Reasonable Cause, Random, Follow-up</b></p> <p>The worker will be closely supervised and accompanied by the manager (or the manager's delegate) from the time of notification of the requirement to test until s/he has been delivered to the NZQA qualified collector. For post-incident and reasonable cause, all attempts will be made to get the alcohol test conducted within 1 hour and the urine specimen collected for the drug test within 3 hours. <b>For random and follow-up testing, systems will have previously been arranged to ensure the above time constraints are able to be met.</b></p> <p><b>2. Urine Collection</b></p> <p>A series of procedures to account for the integrity of each specimen by tracking its handling and storage from the point of specimen collection to final disposal of the urine.</p> <p>Chain of Custody forms are used to document the data from the time of collection of the specimen, throughout the on-site screening process and (where required) its receipt by the laboratory as well as dispatch between laboratories. Thereafter, appropriate laboratory data systems and documentation account for the handling of the urine or aliquots within the laboratory.</p>
Collector	<p><b><u>Drugs</u></b></p> <p>A person who has successfully completed NZQA qualifications (see <a href="#">List of NZQA Qualified Collectors</a> (docDM-1446729)) demonstrating compliance with AS/NZS 4308: 2008 for:</p> <ul style="list-style-type: none"> <li>• specimen collection, handling, storage and dispatch of specimens, and</li> <li>• "on-site" screening</li> </ul> <p>and who has received a statement of attainment in accordance with NZQA.</p>

	<p>The two unit standards required are:</p> <ol style="list-style-type: none"> <li>1. US 25458 “Perform urine specimen collection in the workplace for drug testing.”</li> <li>2. US 25511 “Perform urine drug screening in the workplace.”</li> </ol> <p><b><u>Alcohol</u></b></p> <p>A person who has been trained to use a Breath Alcohol Testing device in compliance with the <a href="#">alcohol and drug testing procedures</a> (docDM-1044363). The person can be either an authorised employee or a third party.</p>
Cut-off Concentration (drugs)	<ol style="list-style-type: none"> <li>a. A urine level of a drug and/ or metabolite, dictated by Table 2 of AS/NZS 4308:2008 (refer to Section 7.3 of the <a href="#">Workplace Alcohol and Drug Testing Procedures</a> (docDM-1044363), at and above which the confirmed result will be reported by the laboratory as “positive” and below which it will be reported as “negative”</li> <li>b. A urine level of a drug and/ or metabolite, not listed in Table 2 of AS/NZS 4308:2008, at and above which the laboratory will report the result as “positive” and below which it will be reported as “negative.” The laboratory is required to determine the appropriate level.</li> </ol>
Drug(s)/Substances (includes prescription drugs)	<p>Substances which are illicit or restricted drugs, drugs covered by Psychoactive Substances Act and some currently legal drugs which have the potential to cause impairment. The term “drug” includes (but is not limited to) cannabis and hashish, opiates (such as heroin, morphine, desomorphone (krokodil)) cocaine, amphetamine type substances (speed, “P”, ecstasy and party pills containing benzylpiperazine), synthetic cannabinoids (eg Kronik, K2, spice, fake weed), synthetic cathinone (bathsalts, Flakka), Kava, LSD, NBOMe(s), fentanyl and derivatives, ketamine, other opiates, and other phenylethylamine psychedelic substances.</p> <p>The term also includes misuse of some prescription drugs (e.g. tranquillisers, sedatives, oxycodone, tramadol, zopiclone), anabolic steroids and other party pills and herbal highs (regardless of their legal status). Other “New Psychoactive Substances (NPSs)” can be added to the testing suite as they become available and are misused.</p>
Drug Testing Standards	<p><b><u>Urine</u></b></p> <p>AS/NZS 4308:2008 “Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine.”</p> <p><i>Note:</i></p> <ul style="list-style-type: none"> <li>• Any updated version will replace the 2008 version.</li> <li>• Oral Fluid Standard: AS/NZS 4760:2019 “Procedures for specimen collection and the detection and quantification of drugs in oral fluid” was published in March 2019. However as of May 2020, testing is not able to be conducted to comply with this standard due to no NZQA courses, no verified on-site screening devices or collection/ transportation devices, no IANZ accredited laboratory and no quality control systems. If this situation changes the Department will consider</li> </ul>

	<i>implementing oral fluid testing as a recognised testing option.</i>
Employee(s)	Employees (permanent, temporary or casual) while performing their duties, or outside of work hours where they are readily identifiable as an employee of the Department.
Extended Testing for Drugs	<p>Laboratory based testing, using liquid chromatography/ mass spectrometry/ mass spectrometry (LCMSMS), for the panel of drugs which will not be detected using on-site screening devices. These drugs include (but are not limited to) synthetic cannabinoids, synthetic cathinones, LSD, NBOMe(s), fentanyl and derivatives, ketamine, other synthetic opiates and phenylethylamine psychedelic substances, some prescription drugs (e.g. tranquillisers, sedatives, oxycodone, tramadol, zopiclone), most party drugs and many other “mind altering” substances.</p> <p>Extended testing will be conducted on all post accident/ incident, reasonable cause and post rehabilitation follow-up tests even if they have screened negative using an “on-site” screening device. For a percentage of random testing events, extended testing will be conducted.</p> <p>Additional extended testing can also be requested for kava and anabolic steroids if there is reason to suspect that these substances are being misused.</p>
Integrity Testing	Testing for substances that affect the detection or quantitation of drugs or metabolites in the specimen.
Laboratory	A testing facility accredited against AS/NZS 4308:2008 (or any updates) at which the analytical procedures are carried out to screen for and/or confirm the presence of a specific drug or its metabolite(s) and report positive results only if the drug/metabolite is at or above the confirmatory cut-off concentration.
Legal Drugs & Medications	Legal substances available and used by employees to assist with recognised medical conditions, including both prescription and over the counter drugs/medication. <b>Section 8.2 covers managing persons on medications where there are potential risk side effects.</b>
Metabolite	A metabolite is a breakdown product of a drug that may be less toxic and easier to excrete than the substance taken. Some drugs are not broken down, but they are converted into a form that is more water soluble. They are also metabolites.
Negative Alcohol Test	Means having no level of alcohol in the breath.
Negative Drug Test	<p>Means that as the result of a urine screening test (on-site or laboratory) and/ or a confirmed laboratory testing, either no drug(s) and/ or metabolite(s) are detected or the concentration(s) of drug(s) and/ or metabolite(s) detected are either:</p> <ul style="list-style-type: none"> <li>below the screening or confirmatory cut-off concentration(s) specified in tables 1 and 2 of AS/NZS 4308:2008, or</li> </ul>

	<ul style="list-style-type: none"> <li>below the confirmatory cut-off concentration determined by the laboratory for those substances not tabled in AS/NZS 4308: 2008.</li> </ul>
New Psychoactive Substances (NPS)	<p>Range of drugs that have been designed to mimic established illicit drugs such as cannabis, cocaine, ecstasy and LSD. Manufacturers of these drugs develop new chemicals to replace those that are banned, which means that the chemical structures are constantly changing to stay ahead of the law. These new drugs are often more potent than the traditional drug.</p>
Not Negative Drug Screening Test	<p>If the on-site screening device indicates the possible presence of a drug class (using the screening test cut off concentration(s) as defined by Table 1 of AS/NZ 4308:2008) or if the specimen integrity is in question, the result is reported as not negative. The collector shall dispatch the specimen (split into three samples) to the laboratory for confirmatory testing.</p> <p>An interim report may be issued that can only advise that the specimen requires further laboratory testing, <i>i.e. no indication of what caused the not negative.</i></p>
On-site Screening Test	<p>An Immunoassay device used to exclude the presence of drugs and/or metabolites in urine at the site of specimen collection and which has been verified in accordance with Appendix B of AS/NZS 4308:2008 (or any updates).</p> <p>This test must be carried out by a NZQA qualified collector. In the event that the specimen gives a “not negative” screen it must be sent to a laboratory for confirmatory testing.</p>
Positive Alcohol Test	<p>Means any level of alcohol in the breath. However, the limit is 100micrograms per litre of breath, to recognise that some medicines may have alcohol content.</p>
Positive Drug Test	<p>Means that as a result of laboratory confirmatory testing of the urine the concentration(s) of drug(s) and/or metabolite(s) recorded are either:</p> <ul style="list-style-type: none"> <li>at or above the confirmatory cut-off concentration(s) specified in table 2 of AS/NZS 4308:2008, or</li> <li>at or above the confirmatory cut-off concentration determined by the laboratory for those substances not tabled in AS/NZS 4308: 2008.</li> </ul>
Random Testing	<p>Random testing is where a worker, in a safety sensitive role is required to undertake a test for drugs and/or alcohol without reasonable cause and without an incident having occurred.</p>
Reasonable Cause	<p>An honest and reasonable opinion that may be based on direct or indirect evidence provided it is obtained from a credible and reliable source, including another staff member or member of the public, where such use could result in risk for themselves, other workers or other people. It can be based on, but is not limited to:</p>



	<ul style="list-style-type: none"> <li>• Any instance where it is suspected that alcohol and/or drugs/substances may be involved.</li> <li>• Observing a person using or possessing alcohol or drugs/substances in the workplace.</li> <li>• Physical signs and symptoms consistent with alcohol or drug use.</li> <li>• Fights, assaults, disregard for or violations of established safety, or other operating procedures.</li> <li>• Observable changes in mood or conduct towards self or others, which is deemed to display a change in usual behaviour or behaviour which is out of character.</li> <li>• Deterioration of the workers work performance which could result in increased risk.</li> <li>• Finding paraphernalia associated to drug or alcohol misuse at a Workplace or on a person.</li> </ul> <p><u>Rumour is not reasonable cause.</u></p> <p>The <a href="#">Reasonable Cause Assessment Form</a> (docDM-1045429) is to be completed in all cases where there is reasonable cause. Refer also to this form for more information on signs or symptoms. This form is only required to be signed by the manager.</p>
Risk	<p>For the purpose of these procedures risk is defined as a situation where alcohol or drugs/substances in a person has the potential to affect the safety of that person or any other person around them when they:</p> <ul style="list-style-type: none"> <li>• Report to a workplace with a level of alcohol in their system higher than that defined by the latest New Zealand Transport Authority limit (see Section 9).</li> <li>• Report to a workplace with levels of drugs in their system that are likely to result in increased risk to themselves or others.</li> <li>• Report to a workplace with a level of other substances or an allegation of being in the possession of, or linked to, other substances.</li> <li>• Have a level of a substance in their system that exceeds AS/NZS 4308:2008 (or any future updates) or the level as determined by the laboratory for drugs not listed in AS/NZS 4308.</li> </ul> <p>Furthermore, risk is increased because Department workers regularly work in hazardous environments, often in isolated locations and a long way from help. Workers are often working alongside the public, contractors and volunteers and a person affected by alcohol or drugs poses risk to themselves and to these other people.</p>
Safety Sensitive	<p>Safety sensitive positions are those where there is a significant and foreseeable risk of injury. The Department has defined this as:</p> <ul style="list-style-type: none"> <li>• All field tasks, excluding solely administrative positions.</li> <li>• All roles where driving is required.</li> <li>• Tasks where serious harm has occurred historically.</li> </ul>

Sample	A portion or aliquot taken from the specimen on which the test or assay is actually carried out.
Serious Misconduct/ Disciplinary Action	<p>The following circumstance are strictly prohibited and will be deemed to be <b>Serious Misconduct</b> and will result in disciplinary action:</p> <ol style="list-style-type: none"> <li>a. The use, sale, transfer or possession of drugs/substances while on Department property or a Department worksite.</li> <li>b. The use, sale, transfer or possession of alcohol while on Department property or a Department worksite unless specifically approved by the Manager.</li> <li>c. Where misuse problems come to the attention of the Department through observation of others or through inadequate or deteriorating work performance.</li> <li>d. Where consent is not given when a test, as detailed in section 9, is requested.</li> <li>e. Where a worker fails to seek assistance for any alcohol or drug/substance problem and their behaviour is improper, unsafe or negatively impacts others.</li> <li>f. Where the <a href="#">Use of Motor Vehicle Policy</a> has been breached.</li> <li>g. Having alcohol in the system.</li> <li>h. Having a urine level of drug and/ or metabolite at or above the confirmatory concentrations in Table 2 of the Australian/New Zealand Standard, AS/NZS 4308:2008: "Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine".</li> <li>i. Having an unacceptable urine level of a drug of abuse (and/or its metabolite) which is not listed in Table 2 of AS/NZS 4308: 2008.</li> <li>j. Compromising or attempting to compromise the integrity of the urine specimen or the testing process.</li> </ol>
Testing Procedures	<p><b>Drug Testing (refer to <a href="#">testing procedures</a>): AS/NZS 4308: 2008 compliant</b></p> <p>Urine specimens shall be collected by a NZQA qualified collector qualified to collect urine specimens (US 25458) and conduct "on-site" drug screens (US 25511). The screen is conducted using an AS/NZS 4308: 2008 verified "on-site" screening device or at an accredited screening laboratory. Dilution and other specimen integrity tests shall also be undertaken. Any specimen resulting in either a "not negative" screen for a drug class or an indication that the integrity is suspect will be forwarded to an accredited laboratory for confirmatory testing. Any specimen testing negative post accident/ incident, for reasonable cause or for some random events will be forward to an accredited laboratory for extended testing.</p> <p><b>Alcohol Testing (refer to <a href="#">testing procedures</a> )</b></p> <p>Breath alcohol tests will be conducted using an Approved Testing Device which meets the Australian Standard: AS3547:1997/Amendment 1-2000 (Type 2) "Breath Alcohol Testing devices for Personal use". The threshold levels are outlined in section 17.18.</p>

Worker	<p>A worker means an individual who carries out work in any capacity for a PCBU (Person Conducting a Business or Undertaking), including work as—</p> <ul style="list-style-type: none"> <li>(a) an employee; or</li> <li>(b) a contractor or subcontractor; or</li> <li>(c) an employee of a contractor or subcontractor; or</li> <li>(d) an apprentice or a trainee; or</li> <li>(e) a person gaining work experience or undertaking a work trial; or</li> <li>(f) a volunteer worker; or</li> </ul> <p>For additional definitions refer to the <a href="#">Health and Safety at Work 2015</a>.</p>
Workplaces/Sites	<p>A reference to all Departmental sites including, but not limited to:</p> <ul style="list-style-type: none"> <li>• conservation and marine areas, offices, buildings &amp; plants.</li> <li>• vehicle used while driving or being driven to/from a work site.</li> <li>• Boats.</li> <li>• accommodation (including housing) used by Departmental employees, contractors, volunteers, excluding purely private after work hours use.</li> <li>• attending training or conferences.</li> <li>• in domestic and international deployments.</li> <li>• any other site where a person may be working or representing the Department.</li> </ul>

## 2. Roles and responsibilities

### All workers

Must be familiar with the workplace alcohol and drugs principles and apply them to their day to day activities; and

- Reading, understanding and meeting the requirements of this policy and the [Standards of Integrity and Conduct](#) (docDM-459323).
- Not reporting for work after consuming alcohol or drugs and being fit for work and able to perform assigned tasks while not being affected by alcohol or drugs/substances.
- Not consuming alcohol during work time or perceived work time, including meal breaks, when carrying out duties related to their role (excluding alcohol at controlled functions with Manager's approval).
- Not taking or being in the possession of drugs (as described in the definitions) in the workplace, including when in Departmental vehicles, vessels or accommodation (including non-Departmental accommodation where there might be multiple tenants) or on Departmental land or marine areas, or any other land or marine area where work is being carried out.
- Avoid misusing alcohol and/or drugs which could affect job performance, placing them or others at risk or bringing the Department into disrepute. This includes not driving or operating Departmental vehicles or vehicles used for Department business, vessels and equipment or carrying out any task while affected by alcohol and/or drugs that risks their safety or the safety of others.
- Notifying their manager if they are taking any prescription drugs or over-the-counter drugs which are purchased online or from a pharmacist that could influence/diminish their ability to perform work, or give the impression that they are under the influence of alcohol or drugs.
- Reporting to their manager if they are concerned another worker is at work under the influence of alcohol or drugs/substances, or is in the possession of, or using alcohol or drugs while at work. Employees may wish to seek advice from their Union before making a report to their supervisor or manager.
- Seeking confidential assistance for an alcohol, drug, or other substance related problem through:
  - The [Employee Assistance Programme \(EAP\)](#).
  - Their General Practitioner (GP).
  - The [Health Promotion Agency](#).

Note:

While the Department's preference is to take a supportive approach, disciplinary action may occur:

- Where misuse problems come to the attention of the Department through the observation of others or through inadequate or deteriorating work performance.
- Where consent is not given when a test is requested following reasonable cause, an accident/incident, random selection (where relevant), as part of post rehabilitation testing (refer also to the [Standards of Integrity and Conduct](#) (docDM-459323)). See Section 10 and 11.
- Where an employee fails to seek assistance for any alcohol or drug problem and their behaviour is improper, unsafe or negatively impacts upon others.
- Where the [Use of Motor Vehicle Policy](#) has been breached.

- Where an employee takes, sells, supplies, or is in the possession of an illegal substance this will be considered serious misconduct and could result in dismissal.

### **Managers and team leaders**

In addition to their responsibilities as staff members:

1. If a worker is suspected of having an alcohol, drug, or other substance-related problem that could potentially create a safety risk for themselves and/or their fellow workers or other people, the manager will:
  - Approach the worker to discuss the issue, being mindful that stress (work or personal) may lead to alcohol, drug, or other substance abuse and a supportive approach may be the most productive method to resolve the workplace issues and assist the person.
  - If contractors and volunteers are reported to the manager as being in a Department workplace and suspected of misusing drugs or alcohol, then they are to cease work immediately. The manager should then have a conversation with the contractor or volunteer and then decide on the appropriate action.
  - Keep records of the observations, dates and times, witnesses and content of discussion(s) with the person (refer to [Potential Signs/Symptoms of Substance Misuse](#) (docDM-1044251) for potential signs). If deemed necessary, and the individual consents, refer the individual to the [Employee Assistance Programme \(EAP\)](#).
  - In the event alcohol or drug testing is considered (random or reasonable cause), discuss the matter with a Senior Advisor, Human Resources.
  - Request alcohol and/or drug testing as per Section 10, if required, including ensuring the individual signs the [Consent Form for Alcohol and Drug Testing](#) (docDM-1406764). If the employee does not sign the consent form, then the disciplinary process commences.
  - Support and evaluate the person's sustainable return to full productivity while they are undergoing rehabilitation.
  - Maintain confidentiality and personal privacy in accordance with the [Privacy Act 1993](#).
2. The manager should use the Departmental performance procedures for dealing with misconduct and/or unsatisfactory performance where:
  - There is reduced performance that may be due to use of alcohol, drugs, or other substances and there is the potential of impact on other workers or bringing the Department into disrepute, or
  - Rehabilitation attempts or other support have not been successful, or
  - Serious difficulties in the workplace have arisen that are due to the use of alcohol, drugs, or other substances.
3. The manager should point out to the employee the specific nature of their behaviour/work performance that is causing concern, the procedure for dealing with misconduct and/or unsatisfactory performance, and if appropriate, investigate the matter to determine what actions will be taken, including the possibility of disciplinary action. Managers should refer to the [Disciplinary Procedures SOP](#) and a Senior Advisor, Human Resources for further guidance.

4. Where a worker is taking a prescription drug that may have side effects that could result in increased levels of risk, they must advise their manager who will discuss with them, putting in place appropriate steps to ensure they are able to continue working safely and without compromising their or others health and wellbeing.
5. In situations, such as a function in the workplace where alcohol is available, managers must ensure that good host standards apply, such as provision of food, non-alcoholic drinks and ensuring appropriate transport arrangements are in place – either designated drivers or alternative transportation. Refer to the [Health Promotion Agency](#) website for more information.
6. Ensure that all staff are educated on the Department's Workplace Drugs and Alcohol Policy and Procedures.
7. Ensure that all contractors and volunteers receive information on the Department's Workplace Drugs and Alcohol Policy during their induction.

Note:

- If drugs/substances are found in the workplace or on Departmental property, please contact the Director or Manager and seek advice of your Senior Human Resources Advisor.
- It is mandatory for Departmental managers to inform the New Zealand Police of any incidents involving possession or use of any illegal drugs in the workplace.

#### **Deputy Director-General People and Engagement**

- Accountable for the coordination and strategy of workplace alcohol and drugs policy within the Department;
- Promotes compliance with workplace alcohol and drugs policies, SOPs and guidelines; and
- Final approval and policy signoff.

#### **Business owner – Director, Health and Safety**

- Responsible for the implementation of workplace alcohol and drugs practices including the oversight of appropriate documentation, training, testing, monitoring and reviewing of workplace alcohol and drugs policy.

### 3. Alcohol and/or drug testing

Refer to [Workplace Alcohol and Drug Testing Procedures](#) (docDM-1044363).

Alcohol and/or drug testing may be undertaken in circumstances where suspected alcohol or drug misuse is likely to compromise workplace safety to self or others, and/or compromising effective operations.

Seek advice from a Senior Advisor, Human Resources before making a decision to use reasonable cause testing. If for practical reasons this is not possible, managers should exercise discretion and document all decisions and actions taken (including the reason(s) they determined testing was necessary) and contact a Senior Human Resources Advisor at the first opportunity.

Circumstances where there is evidence to justify this testing include:

**a) Reasonable cause**

Testing can only occur where there is reasonable cause (see Terms and Definitions). Education and training must be offered to these workplaces.

**b) Post accident/incident**

Testing should occur after any significant accident or incident where there is reasonable cause to suspect that alcohol and/or drugs may be involved.

**c) Random**

Where there are alleged signs or symptoms that alcohol or drugs may be an issue in the workplace the Manager may seek approval from their Director to implement random testing in the workplace (the Union Delegate is to be advised).

**d) Comparison**

Testing will be required whilst an employee is going through a rehabilitation programme to ensure that the programme is working. The employee must provide a negative test prior to being considered fit to return to work.

**e) Post rehabilitation**

Unannounced testing will occur when an employee has successfully completed a rehabilitation programme. In the [Drug and Alcohol Rehabilitation Contract](#) the employee agrees to take six unannounced tests per year in the 24 months following the treatment period.

Refer to the [Workplace Alcohol and Drug Testing Procedures](#) (docDM-1044363) and the process flowcharts appended to that document.

- Testing will be in accordance with the following standards and the procedures outline in sections 6 and 7 of [Workplace Alcohol and Drug Testing Procedures](#) (docDM-1044363).

- a) For alcohol: using a calibrated breathalyser that complies with AS 3547:1997/ Amendment 1-2000 (Type 2).

(Note: For the breathalyser test to be positive it means any alcohol on the breath – in effect higher than 100 micrograms per litre of breath).

b) For drugs: AS/NZS 4308:2008 (or any updated version).

(See the [Urine Cut-Off Concentration Standards](#) (docDM-1044413)).

- A Qualified Collector for the local area will be engaged to collect urine specimen(s), conduct on-site drug screening tests and dispatch those specimens which screen “not negative” for a drug class, have suspicious specimen integrity or require extended testing for additional drugs to the Department’s accredited laboratory, [Canterbury Health Laboratories](#) (CHL), for confirmatory and/or extended testing. The collectors will also be able to conduct breath alcohol testing.

The list of NZQA qualified collectors can be found on the [List of NZQA Qualified Collectors](#) (docDM-1446729). If a collector cannot be found near you please contact the CHL help desk at 0800 THELAB, phone 03 3640300 extn 80484, or email [labinform@cdhb.health.nz](mailto:labinform@cdhb.health.nz)

- The Department will meet all costs for alcohol and drug testing.

### 3.1 Refusing a test

Where a worker refuses to undergo a test the refusal shall be treated as serious misconduct under the [Standards of Integrity and Conduct](#) (docDM-459323). The manager is required to undertake an investigation and if required apply appropriate disciplinary procedures. The employee shall be suspended on full pay while the investigation is carried out. Contractors and volunteers are to stop work and be stood down from the worksite.

Behaviour that constitutes a refusal to submit to a test includes, but is not limited to, the following:

- Refusal to consent to a test.
- Failing to advise, in a timely way, of an accident/incident where the nature of the accident/incident is such that it might require alcohol or drug testing.
- Inability to provide sufficient quantities of breath or urine to be tested without a valid medical explanation. A maximum of three hours is the limit for providing a urine specimen.
- Tampering with or attempting to adulterate the specimen or collection procedure.
- Not cooperating with the “Chain of Custody” procedures defined in the definitions
- Leaving the scene of an accident without a valid reason before the test has been conducted

### 3.2 Pre-employment drug testing

The Manager can choose whether to require testing for any prospective appointment to:

- a safety sensitive position (see definitions).
- any management vacancy across the Department (Deputy Director-General, Director, or Manager).

Where testing is done, appointment to these roles is conditional on the applicant returning a negative drug test. Where the test is positive then the prospective employee will not be offered employment in the Department for a further 6 months. Contact the Department’s Safety and Wellbeing Advisor, to check whether the person has had a positive test within that period. Costs are met locally.

The process is fully explained in the [Workplace Alcohol and Drug Testing Procedures](#) (docDM-1044363).



## 4. Rehabilitation and EAP

Principles:

- The Department will encourage workers to seek professional help.
- The [Employee Assistance Programme \(EAP\)](#) is available to employees through self-referral, or by the employee's manager if the employee consents.
- Where appropriate, in order to mitigate any immediate risks, the employee may be temporarily transferred into another position.
- Where an employee, suspected to be under the influence of alcohol or drugs, displays inappropriate work behaviour or performance they may be subject to disciplinary action, including dismissal.
- Where a worker is suspected to be involved in the possession, sale, transfer of illegal drugs/substances it will be considered serious misconduct and appropriate action will be undertaken.

### ***Self-referral***

Employees who proactively seek assistance will be supported.

### ***Department referred post a positive test***

1. Where alcohol and drug tests occur, and there is a positive test, the Department may provide the employee with a one-time opportunity to enter and successfully complete a rehabilitation programme that has been approved by the Department.
2. Factors influencing whether rehabilitation will be offered to an employee as an alternative to taking disciplinary action may include but are not limited to:
  - Their demonstrated performance and contribution to the Department.
  - The nature of their role.
  - Their attendance record, sickness patterns and general demonstrated work commitment.
  - How the employee's substance misuse was identified (e.g. self-declared, presenting unfit for work, testing positive in a post-accident or incident test).
  - The nature of the substance.
3. Where employees are formally referred for rehabilitation, before they begin the programme, they will be asked to sign an agreement that they will complete the rehabilitation programme (refer to the [Rehabilitation Contract](#) (docDM-1046319)). At the same time, they will be reminded of their right to consult their union representative or support person before signing up to the programme.

Employees cannot work while on rehabilitation which may last up to four weeks.
4. Employees are stood down from work for the period of rehabilitation may use sick leave, annual leave (or other leave determined by the Manager in consultation with the Senior Advisor Human Resources). Should the condition prove severe and additional treatment is recommended, the amount and nature of the time off work for this treatment will be determined by the Manager in consultation with the Senior Advisor Human Resources on a case-by-case basis.

5. Regular comparison drug or alcohol testing will be conducted whilst the employee is going through the rehabilitation counseling programme. This test and report is used to monitor the employee's pattern of use since the initial test. The urine specimens are sent to the laboratory and the request is made to conduct comparison testing. The laboratory will then compare the result with those from the initial urine tested which is referred to as the base line drug test result.

An employee must provide a negative test prior to being considered fit to return to work.

6. Employees who are offered and fail to take part in, or complete, the programme (including any testing) will face disciplinary action, which may include dismissal.

7. All communication between the rehabilitation specialist and employee will remain confidential. However, the Department will be informed of the following:

- Whether a temporary change in the employee's duties would be advisable to provide a safer working environment and the reasons for this recommendation.
- Whether the employee has not kept appointments.
- Whether a course of treatment has been recommended and any actions required to support the employee in the workplace.
- If the employee stops or does not complete the rehabilitation programme.
- Whether a return to work is appropriate and within what timeframe.
- When the employee has completed the required treatment.

8. The Department (at a local level) will fund rehabilitation as follows:

- Initial assessment.
- Up to three sessions with a qualified alcohol and drug counsellor.

9. As part of their commitment to any rehabilitation programme, the employee will be expected to fund the balance of any other sessions.

10. On completion of the rehabilitation programme, the employee will be required to undergo up to six randomly administered alcohol and/or drug tests per year over the 24 months following the treatment phase and will agree to this in writing. The drug tests will be laboratory-based testing only. The laboratory will be requested to test for both the normal and extended range of drugs and may look for the presence of any amount of a drug (i.e. not restricted to cut-off levels).

11. A second positive test outside the treatment period may result in disciplinary action up to and including dismissal.

## 5. Education and training

All workers will be advised of the Department's Workplace Alcohol and Drug Policy.

The manager can arrange suitable education and training sessions covering the following.

- Education sessions available to employees and managers in conjunction with [Employee Assistance Programme \(EAP\)](#) or equivalent specialists.
- Refresher sessions conducted as required and/or elements included in new employee induction.
- Educational material concerning alcohol and drug abuse will be available in the workplace.
- Managers will be trained in:
  - Detecting the signs and behaviour of employees who may be misusing alcohol or drugs.
  - Early intervention and support.
  - How to manage employees who may be at risk.
- Workers will be informed of:
  - The implications of this policy and procedures.
  - The health and safety risks associated with alcohol and drug use in the workplace.
  - How to access professional alcohol and drug treatment/counselling.

## 6. Related documents

Key related documents:

### Legislation and Important References

- [Health and Safety at Work Act 2015](#), and Regulations and amendments
- [AS/NZS 4308:2008](#): “Procedures for specimen collection and the detection and quantitation of drugs of abuse in urine” (or any updated versions)
- AS 3547-1997/Amendment 1-2000 (Type 2): ‘Breath alcohol testing devices for personal use’
- [Human Rights Act 1993](#)
- [New Zealand Bill of Rights Act 1990](#)
- [Privacy Act 1993](#)
- [Health Information Privacy Code \(1994\)](#)
- [Psychoactive Substances Act July 2013](#)
- Air New Zealand Judgement: AC 22/04: File No: ARC 42/03
- Toll New Zealand Judgement: AC21/07: File No. ARC34/07

### Policies

- [Standards of Integrity and Conduct](#) (docDM-459323)

### Procedures

- [Workplace Alcohol and Drug Testing Procedures](#) (docDM-1044363)

### Forms

- [Consent Form for Alcohol and Drug Testing](#) (docDM-1406764)
- [List of NZQA Qualified Collectors](#) (docDM-1446729)
- [Referral Form](#) (docdm-1462766)
- [Approval for Random Alcohol and Drug Testing](#) (docDM-1044352)
- [Reasonable Cause Assessment Form](#) (docDM-1045429)
- [Urine Confirmatory Test Cut-off Concentrations](#) (docDM-1044413)
- [Potential Signs/Symptoms of Substance Misuse](#) (docDM-1044251)
- [Health Rehabilitation Contract](#) (docDM-1406319)
- [FAQ](#) (docDM-1410579)

## 6.1 Sources of information, support and advice

- [Health Promotion Agency \(HPA\)](#) (contains links to very useful booklets and pamphlets)
- [Serving Alcohol Safely at Workplace Events](#)
- [Alcohol Drug Helpline](#) - Ph: 0800 787 797
- [New Zealand Drug Foundation](#)
- [Alcoholics Anonymous](#)
- [Narcotics Anonymous](#)

## 7. Document history

Amendment date	Amendment details	docDM version	Amended by
26 November 2014	Original Policy	Revision #2	Mike Massaar
12 June 2016	Pre-employment testing changed from compulsory to manager decision – DDG decision 16/12/2015	Revision #4	Phil Garratt
12 December 2016	Change to Random testing process – removal of need to get local partnership forum approval. Now manager decision with Director approval.	Revision #7	Phil Garratt
14 May 2020	Review of Policy – updates of wording in sections 10.2(a), 10.2(b), 17.7 Addition of new wording in section 13.10, 17.8, 17.28 New definition 17.10 - Extended testing for drugs, 17.17 – New Psychoactive Substances (NPS),	Revision #15	Phil Garratt
19 June 2020	Final version sign off	Revision #19	Denise Callaghan
30 June 2020	Changes to document history of 14 May above to now read:	Revision #20	Phil Garratt

	<p>Review of Policy – updates of wording in sections 3 Alcohol and/or drug testing, and the Definition for Drug(s)/Substances</p> <p>Addition of new wording in section 4.10, definition of Drug Testing Standard, definition for Testing Procedures</p> <p>New definitions - Extended Testing for Drugs, New Psychoactive Substances (NPS)</p> <p>Removal of “Draft” watermark from the document</p>		
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