

Title:	Alcohol, Drug and Substance Misuse and Smokefree Policy
Reference No:	001HR V2
Owner:	Deputy Chief Officer
Author	Head of Human Resources
First Issued On:	
Latest Issue Date:	April 2018
Operational Date:	April 2018
Review Date:	April 2021
Consultation Process	
Ratified and approved by:	AQuA 3 May 2018 Governing Body 6 June 2018
Distribution:	All staff and GP members of the CCG.
Compliance:	Mandatory for all permanent and temporary employees of Rotherham CCG.
Equality & Diversity Statement:	In applying this policy, the Organisation will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

POLICY AUDIT TOOL

Please give status of Policy: Revised

1. Details of Policy		
1.1	Policy Number	
1.2	Title of Policy:	Alcohol, Drug and Substance Misuse and Smoke Free Policy
1.3	Sponsor	Assistant Chief Officer
1.4	Author:	Head of HR
1.5	Lead Committee	AQUA
1.5	Reason for policy:	Legislative and best employment practice
1.6	Who does the policy affect?	All employees
1.7	Are the National Guidelines/Codes of Practices etc issued?	Misuse of Drugs Act 1971, Health and Safety at Work Act 1974, Data Protection Act 1998, Management of Health and Safety at Work Regulations 1999, Corporate Manslaughter and Corporate Homicide Act 2007, Employment Rights Act 1996, Equality Act 2010, Road Traffic Act 1988, Transport and Work Act 1992, Human Rights Act 1998
1.8	Has an Equality Impact Assessment been carried out?	Yes
2. Information Collation		
2.1	Where was Policy information obtained from?	See 1.6
3. Policy Management		
3.1	Is there a requirement for a new or revised management structure for the implementation of the Policy?	No
3.2	If YES attach a copy to this form.	n/a
3.3	If NO explain why.	Current management structure satisfactory
4. Consultation Process		
4.1	Was there external/internal consultation?	Yes
4.2	List groups/persons involved	Staff side lead, Counter Fraud Specialist, Operational Executive, Staff
4.3	Have external/internal comments been included?	Yes
4.4	If external/internal comments have not been included, state why.	n/a
5. Implementation		
5.1	How and to whom will the policy be distributed?	All employees via the intranet
5.2	If there are implementation requirements such as training please detail.	Ongoing via mandatory training
5.3	What is the cost of implementation and how will this be funded	No funding required
6. Monitoring		
6.2	How will this be monitored	Workforce Reports
6.3	Frequency of Monitoring	Quarterly

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DEFINITIONS

Term	Definition
Intoxicating Substance	A substance that changes the way the user feels mentally or physically. It includes alcohol, illegal drugs, legal drugs, prescription medicines, solvents, glue and lighter fuel but is not limited to
Controlled Drugs	These are drugs covered by the Misuse of Drugs Act 1971. They include both drugs with no current medical uses as well as medicinal drugs that are prone to misuse. All are considered likely to result in substantial harm to individuals and society.
Harmful/ problematic use or misuse	Use of an intoxicating substance or substances that harms health, physical, psychological, social or work performance but without dependency being present.
Dependency	A compulsion to keep taking an intoxicating substance either to avoid the effects of withdrawal (physical dependence) or to meet a need for stimulation or tranquilising effects or pleasure (psychological dependence)
Addiction	A state of periodic or chronic intoxication produced by the repeated intake of an intoxicating substance. This creates a dependency which can have serious detrimental effects on the individual who will have great difficulty discontinuing their use
'For Cause' Testing	Testing for alcohol or substance misuse where an employee is suspected of being unfit because of possible intoxication or following return to work after detoxification treatment or as part of an agreed abstinence programme.
Misuse in the workplace is either	Continually or repeatedly interferes with an employees work performance, conduct and/or attendance. Or Consumption or overindulgence of a substance resulting in unacceptable conduct or dangerous and unreasonable behaviour. This could be classed as gross misconduct and treated as a disciplinary matter.
Chain of Custody	The stringent process for collecting, handling, transporting, storing and testing biological samples for alcohol or drug misuse to prevent any possible contamination or interference. The purpose is to ensure that the results of any biological testing can indisputably be connected with the individual who produced the test sample.

SECTION A – POLICY

1. Policy Statement, Aims and Objectives

1.1 NHS Rotherham Clinical Commissioning Group is committed to supporting and protecting the health, safety and welfare of its employees. It is recognised that alcohol, drug/substance misuse and smoking are health issues and, as such, the organisation will aim to provide the help and support that may be necessary for an employee to overcome problems with any of these issues.

1.2 This policy aims to reinforce an empathic, confidential and consistent management approach, promoting support and rehabilitation for employees dealing with alcohol, drug/substance misuse and also support for smoking cessation.

1.3 The development of this policy:

- Promotes a healthy and safe working environment and maintains a healthy workforce
- Provides a procedure for managers to deal effectively with issues related to alcohol, drug/substance misuse and smoking in order to maintain acceptable standards of work and performance
- Ensures the organisation complies with its legal duty to ensure the workplace is smokefree
- Protects the reputation of the organisation
- Encourages employees with problems related to alcohol, drug/substance or smoking to seek help and accept treatment at the earliest opportunity
- Ensures that employee's use of alcohol, drug/substance misuse or smoking does not impair the safe and efficient running of the organisation, or result in health and safety risks to themselves or others.

1.4 This policy covers the misuse of alcohol, illegal drugs, prescription drugs, substances and smoking including e-cigarettes/smokeless cigarettes.

2. Legislation and Guidance

2.1 The following legislation and guidance has been taken into consideration in the development of this procedural document.

- Misuse of Drugs Act 1971
- Health and Safety at Work Act 1974
- Data Protection Act 1998
- Management of Health and Safety at Work Regulations 1992
- Corporate Manslaughter and Corporate Homicide Act 2007
- Employment Rights Act 1996
- Equality Act 2010
- Road Traffic Act 1988

- Transport and Work Act 1992
- Human Rights Act 1998

3. Scope

3.1 This policy applies to those members of staff that are directly employed by NHS Rotherham Clinical Commissioning Group and for whom NHS Rotherham Clinical Commissioning Group has legal responsibility. Seconded staff are covered by the policy of their employing organisation. For those staff covered by a letter of authority / honorary contract or work experience, this policy is also applicable whilst undertaking duties on behalf of NHS Rotherham Clinical Commissioning Group or working on NHS Rotherham Clinical Commissioning Group premises and forms part of their arrangements with NHS Rotherham Clinical Commissioning Group. As part of good employment practice, agency workers are also required to abide by NHS Rotherham Clinical Commissioning Group policies and procedures, as appropriate, to ensure their health, safety and welfare whilst undertaking work for NHS Rotherham Clinical Commissioning Group.

4. Accountabilities and Responsibilities

4.1 Overall accountability for ensuring that there are systems and processes to effectively ensure compliance with this Policy lies with the Accountable Officer. Responsibility is delegated to the following:

<p><i>Assistant Chief Officer</i></p>	<ul style="list-style-type: none"> • Maintaining an overview of the corporate ratification and governance process associated with the policy. • Ensuring that the policy is applied fairly, consistently and in a non-discriminatory manner.
<p><i>Human Resources</i></p>	<ul style="list-style-type: none"> • Leading the development, implementation and review of the policy. • Providing advice and guidance to managers and employees in relation to this policy. • Assisting in the monitoring of effectiveness of measures to address alcohol or drug/substance misuse through the analysis of reasons for sickness absence. • Encouraging referral to the Occupational Health Service and/or Staff Counselling Service where appropriate. • Advising managers when it is more appropriate to deal with an issue via the Disciplinary Policy

***Appointing
Officers/ Line
Managers***

- Ensuring they understand and adhere to their obligations in relation to this policy.
- Ensuring the policy is applied fairly and consistently to all employees.
- Creating an open and honest environment to support employees who may come forward with concerns for themselves or others.
- Ensuring the policy is communicated to employees and to encourage employees who believe they may have issues to see support.
- Identifying and responding effectively to employees with problems.
- Recognising and acting appropriately where an employee has symptoms which may indicate there is a problem.
- With the agreement of Human Resources, requesting alcohol or drug/substance testing where this course of action is justified.
- Making appropriate referrals to Occupational Health.
- Respecting the right of employees regarding confidentiality as they would if they had any other medical or psychological problem (except where there is a duty to inform a professional body, eg. NMC/GMC or where there is an issue of health and safety/ safeguarding).
- Arranging suitable transport and/or alternative duties if an employee is unfit to drive/carry out usual duties due to prescribed medication.
- Ensure employees are aware of this policy including referring new employees to the policy as part of their induction process.

<p>All Employees</p>	<ul style="list-style-type: none"> • Ensuring they understand their responsibilities in relation to this policy. • Taking personal responsibility for their own health, safety, well-being and performance at work. • Seeking help should they have problems relating to alcohol, drug/ substance misuse or smoking. • Seeking advice if they have concerns about a colleague in relation to alcohol, drug/substance misuse. • Complying with their professional codes of conduct. • Informing their line manager if they have been prescribed medication that may significantly affect their behaviour or performance.
<p>Staff Side</p>	<ul style="list-style-type: none"> • Ensure they are familiar with the policy and procedure. • Advise and represent employees who are members of a recognised Trade Union. • Providing support for employees who are experiencing problems with alcohol, drug/ substance misuse or smoking cessation. • Liaising with the employee, the line manager and Human Resources regarding the best way forward for an employee.
<p>Occupational Health</p>	<ul style="list-style-type: none"> • Provision of clinical advice and support for managers and employees who identify potential problems in themselves or colleagues. • Provision of the appropriate level of confidential support to employees who self-refer or who are referred by their manager because of concerns about their well-being. • Promoting awareness of alcohol or substance misuse problems and encouraging early identification of individuals in need of help. • Advocating the use of abstinence programmes, where appropriate.

Staff Counselling Service	<ul style="list-style-type: none"> • Providing a confidential counselling service for employees experiencing concerns with alcohol, drug/substance misuse or smoking cessation. • Referral and/ or signposting to specialist agencies, as required.
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5. Dissemination, Training and Review

5.1 Dissemination

The effective implementation of this procedural document will support openness and transparency. NHS Rotherham Clinical Commissioning Group will:

- Ensure all employees and stakeholders have access to a copy of this procedural document via the organisation's website.
- Ensure employees are notified by email of new or updated procedural documents.
- Ensure that relevant training programmes raise and sustain awareness of health and wellbeing.

5.2 Training

All employees will be offered relevant training commensurate with their duties and responsibilities. Employees requiring support should speak to their line manager in the first instance. Support may also be obtained through Human Resources. The Policy should be read in conjunction with:

- Disciplinary Policy
- Managing Stress Policy
- Health and Safety Policy
- Managing Performance Policy
- Workplace Wellbeing Policy
- Sickness Absence Management Policy
- Dignity at Work Policy
- Grievance Policy

5.3 Review

5.3.1 As part of its development, this procedural document and its impact on staff, patients and the public has been reviewed in line with NHS Rotherham Clinical Commissioning Group's Equality Duties. The purpose of the assessment is to identify and if possible remove any disproportionate adverse impact on employees, patients and the public on the grounds of the protected characteristics under the Equality Act.

5.3.2 The procedural document will be reviewed every three years, and in accordance

with the following on an as and when required basis:

- Legislatives changes
- Good practice guidelines
- Case Law
- Significant incidents reported
- New vulnerabilities identified
- Changes to organisational infrastructure
- Changes in practice

5.3.3 Procedural document management will be performance monitored to ensure that procedural documents are in-date and relevant to the core business of the organisation. The results will be published in the regular Governance Sub Committee Reports.

SECTION B – PROCEDURE

1. Principles

- 1.1** Where an employee accepts responsibility for their behaviour and agrees to seek help, the matter will be dealt with using this procedure. In other cases and where other breaches of conduct have occurred such as a serious breach of health and safety standards, where the employee has behaved in a violent or threatening manner or placed an individual at risk of harm, then the matter may be dealt with in accordance with the Disciplinary Policy.
- 1.2** Employees who attempt to 'cover up' in a work situation for a colleague who puts themselves, others or the reputation of the CCG at significant risk may be subject to disciplinary proceedings.
- 1.3** Employees must not use any performance altering substance or consume alcohol at any time whilst on duty, during breaks (including lunch breaks), or any period of time before commencing work which may affect their performance. The exception to this would be where an employee is receiving treatment for a health condition and has informed their line manager accordingly and it is taken account of in their duties.
- 1.4** It is unacceptable for employees to drive whilst under the influence of any intoxicating substance. This includes driving to/from work and during work time. It should be noted that some prescribed medication will also affect an individual's ability to drive safely.
- 1.5** Employees must not consume alcohol, illegal drugs, substances or smoke (including electronic cigarettes) at any time on CCG premises.
- 1.6** Employees must not bring illegal drugs or substances onto the premises.
- 1.7** Employees must inform their line manager if they are unable to carry out any work related task safely due to alcohol, drug/ substance misuse or prescribed medication use.
- 1.8** It is unacceptable for employees to attend for work smelling of alcohol or if they have recently consumed alcohol including during unpaid breaks in the working day as this can seriously undermine their capability and/or credibility. Should an employee present for work smelling of alcohol they will be considered unfit for work and will be sent home. This will be paid leave. Standards of safety, conduct and performance will be taken into account when making this decision.

2. Employees Requesting Assistance

- 2.1** When an employee believes they have an alcohol, substance or drug problem, or feels they may be developing one, they should seek specialist advice as soon as possible by speaking to their GP, Line Manager, Human Resources or Occupational Health Services.

- 2.2** If a Line Manager is approached by a member of staff they should seek advice from Human Resources and ensure they have taken a file note of the discussion with the employee.
- 2.3** Misuse is not a disciplinary offence and will be dealt with as a health issue. The aim is to rehabilitate and support an individual whilst at work or back to work if they are absent due to alcohol or drug/ substance misuse.
- 2.4** Contact will be made with Occupational Health to agree the best course of action. Where it is confirmed that the employee has an alcohol or drug/ substance misuse problem, they will be referred to an appropriate agency, for example GP, Drugs and Alcohol Team, Staff Counsellor, Residential or in-patient programme. A recovery programme will then be devised in partnership with the appropriate agency.
- 2.5** Once a course of action has been determined, it is important to come to a decision about reasonable timescales for supportive treatment/counselling. This will be based on the advice from Occupational Health and following discussion with Human Resources, the individual and the Line Manager. If appropriate, members of the employee's family will be involved in this discussion as well as their representative.
- 2.6** The outcome of the discussion could be to ask the employee to agree to sign an abstinence agreement which could include agreeing to be subject to testing if required.
- 2.7** Following recovery, the situation should be monitored for an agreed period. If after returning to employment, during or following the rehabilitation programme, there is a recurrence of the drug or alcohol problem, then the situation will be assessed on a case by case basis. A further opportunity may be given to commence an additional rehabilitation programme if appropriate.
- 2.8** Employees who decline a referral for diagnosis and/or specialist help, or discontinue an agreed course of action before its satisfactory completion and continue to produce an unsatisfactory level of work performance or conduct, could be subject to action under the Disciplinary Policy.

3. Dealing with Suspected Alcohol/ Drug Intoxication

- 3.1** Where a line manager suspects, or is advised that, an employee is under the influence of alcohol or other substances whilst in the workplace and considers the employee's condition likely to affect their performance, or to be a health and safety risk then the Manager should take Human Resources advice and agree a plan of action. Refer to Appendix 1.
- 3.2** In some circumstances it may be useful to obtain the opinion of another person who is aware of the 'normal' behaviours of the individual concerned, taking into account the sensitive nature of the problem and the individual's right to confidentiality.

- 3.3** Where it is agreed that there is an issue, the Line Manager should arrange to speak to the individual, accompanied by Human Resources, in a private area and if practicable with the employee's Trade Union/ professional organisation representative.
- 3.4** The Line Manager should explain their concerns to the employee. If the employee admits they have taken alcohol/drugs/substances and/or are under the influence and the manager has concerns regarding the effect on performance/health and safety, the individual should be excluded from work on medical grounds on full pay and escorted off the premises.
- 3.5** If the Line Manager believes that the employee is unfit to drive then arrangements should be made to convey the individual home safely.
- 3.6** A date should be given to review the exclusion and it may be that the employee is only excluded for a 24 hour period in order to obtain further advice.
- 3.7** If the employee denies being under the influence of alcohol/drugs/substances and the Line Manager is not satisfied with their explanation as it is evident from the employee's actions and/or appearance, they should be asked again if they are under the influence and advised that if this is denied for a second time they will be asked to take a test.
- 3.8** The Line Manager should explain to the employee the nature of the test and the possible consequences for the employee's employment if the test is positive i.e. positive disciplinary action. The employee will be asked to sign a consent form for testing. The testing procedure is outlined in Appendix 2.
- 3.9** If the employee refuses to take a test then they should be advised that a decision will have to be based on the evidence available. The employee will be excluded on full pay and escorted off the premises and an investigation should be undertaken.
- 3.10** Subsequent action will depend on the result of the test and whether this is the first instance or a repeated occurrence and will need to take into account the seriousness of the behaviour and whether or not alcohol or drugs have been consumed. Particular attention should be paid as to whether alcohol or drugs have been consumed whilst at work and/ or in the workplace. If necessary the Disciplinary Policy will be invoked in consultation with Human Resources.
- 3.11** If the test is positive, the employee should be sent home, excluded on full pay and asked to report to work on their next working day. If necessary, arrangements will be made to take the employee home. A disciplinary investigation will commence and a referral to Occupational Health will be made.
- 3.12** If the safety or security of any individual or property is at risk at any time, the police may be informed. For example, if an individual is, or is thought to be, under the influence of alcohol or another substance and subsequently takes control of a vehicle. If an individual appears or becomes unwell, they will be

supported in obtaining medical assistance.

4. Concerns Regarding Work Performance

- 4.1 Where a Line Manager suspects that an employee has an alcohol, drug or substance problem which is affecting their work performance, the Line Manager should contact Human Resources in the first instance.
- 4.2 Normally an informal discussion will then take place between the line manager and the member of staff, with Human Resources present if appropriate. The employee should be offered the opportunity to be accompanied by a work colleague or Trade Union representative. The meeting should focus on the behavioural or work performance issues. It is important that the approach taken at this initial meeting is supportive and not confrontational, to give the employee the opportunity to request assistance. The performance issue(s) that have been occurring should be defined and possible reasons or causes discussed, not assumed.
- 4.3 If the employee admits to an alcohol/ drugs/ substance problem, a decision should be made as to whether or not to invoke the Managing Performance policy.
- 4.4 If the employee states that the performance issues are due to causes other than alcohol/ drugs/ substances then the Line Manager will need to refer to the Managing Performance Policy and all meetings should be documented.

5. Managing Alcohol/ Prescribed Drug /Drug/ Substance Misuse as a Health Related Matter

- 5.1 Alcohol/ prescribed drug/ drug/ substance misuse can lead to a number of health problems including addiction and/or health/behavioural disorders which may be amenable to treatment. Employees must notify their Line Manager if they have been prescribed drugs which may significantly affect their behaviour/ performance and this will be dealt with as a health matter in accordance with Section 2. If an employee is sick whilst on annual leave, provided they adhere to the Sickness Absence Policy with regard to notification and certification requirements, the period of absence will be treated as sick leave and the annual leave will be reimbursed to be taken at another time.

6. Support for Employees who smoke

- 6.1 Employees who smoke will be encouraged to seek support to stop smoking. Local arrangements for accessing smoking cessation support will be publicised on the website and highlighted through the staff newsletter periodically.
- 6.2 Employees who do smoke during normal work hours must not smoke on organisational premises.
- 6.3 Any smoking breaks must be kept to a minimum, be recorded and will be unpaid.

- 6.4** Where smoking breaks have a detrimental impact on the employee's ability to undertake their duties effectively, the Managing Performance Policy may be invoked and advice on smoking cessation will be provided.

SIGNS OF ALCOHOL/DRUGS/SUBSTANCE MISUSE

Signs of alcohol/drug/substance misuse are not always obvious and may be confused with other conditions or problems. It is sensible to bear in mind the possibility of alcohol/ drug/ substance misuse when any of the following behaviours are observed. Please note that not all people with alcohol/ drug/ substance misuse problems display all these behaviours. Some of these behaviours may also indicate other problems which are not associated with alcohol/ drug/ substance misuse. Where there is any doubt, advice should be sought from Occupational Health and/ or Human Resources.

- Abnormal fluctuations in mood and energy, irritability, impaired concentration, lethargy.
- Tendency to become confused.
- Poor timekeeping.
- Repeated Absences for trivial or inadequate reasons.
- Increase in short term sickness absence.
- Impairment of job performance.
- Accident proneness, increased incidence of mistakes or errors of judgement.
- Deterioration of relationships with other people.
- Hand tremors, slurred speech, facial flushing, bleary eyes, poor personal care and hygiene.
- Smelling of alcohol or other substances.
- Related driving offences or convictions

TESTING FOR ALCOHOL AND DRUG/SUBSTANCE MISUSE

1. 'For Cause' Testing

- 1.1 If a Line Manager has concerns regarding an employee, as described within this policy, they can arrange for testing for either drugs or alcohol. This should only be done where absolutely necessary and after consultation with Human Resources.
- 1.2 Alcohol and drug testing will only be undertaken at a manager's request if an employee is suspected to being unfit because of possible intoxication, following return to work after detoxification treatment, or as part of an agreed abstinence programme.

2. Testing for Alcohol

- 2.1 Where an employee is to undergo testing for alcohol they will be instructed to wait in a private area. The manager will explain to the employee the nature of the test for alcohol and the possible consequences for the employee's employment if the test is positive
- 2.2 The employee will be asked to sign a consent form for testing. If the employee refuses to sign the consent form then the manager should make a note of this fact on the consent form and advise the employee that a view will have to be taken on the visual and sensory evidence available.
- 2.3 The Line Manager will arrange a request for a breathalyser test, and the consent form will be sent to Occupational Health. A member of the Occupational Health department will carry out the test as soon as is practicable, usually within two hours.
- 2.4 If the test is positive (a breath alcohol concentration of over 35mcg/ 100ml is the driving threshold and this will be considered a positive result), the test will be repeated. If the second test is also positive, the employee will be suspended (with pay) pending disciplinary proceedings which could lead to dismissal.
- 2.5 If the test result shows a breath alcohol content below 35 mcg/100ml but above zero, the employee will not be permitted to resume any work that is deemed to be safety critical or otherwise likely to be affected by their consumption of alcohol, but will either be deployed back to work or sent home. The employee will be paid their normal basic rate for that day, excluding any enhancements. Depending on the circumstances, action may be instigated under the Disciplinary Policy.

3. Testing for Drugs

- 3.1 Where an employee is to undergo testing for drugs, they will be required to wait in a private area. The Line Manager will explain to the employee the nature of

the drugs test and possible consequences for the employee's employment if the test is positive.

- 3.2** The employee will be asked to sign a consent form and a member of the Occupational Health department will carry out the test as soon as is practicable. The employee will be required to provide a sample of urine or blood for the test. The chain of custody process will be adhered to at all times.
- 3.3** While the test results are awaited, the employee will be excluded from work on full pay. If the test is positive for any illegal drug, the test will be repeated. If the second test is also positive, further investigations and consultation could lead to disciplinary proceedings against the employee and possible dismissal.

4. Limitations of Drug Testing

- 4.1** A positive test does not in itself imply impairment, but it is a marker for behaviour involving misuse of drugs that may affect safety at work. In general, the tests cannot determine when the drugs were taken as many drugs may be detected a considerable time after use. The tests may also not be able to indicate whether the user is a habitual user.

5. Refusal to Undergo Testing

- 5.1** If an employee refuses to sign the consent form or fails to supply a sample for alcohol or drugs testing, the Line Manager should remind the employee of the possible sanctions and give them a further chance to comply. If the employee still refuses the Line Manager should undertake a thorough investigation into the reason why. If no good reason is provided, the Line Manager should seek advice from Human Resources and disciplinary proceedings may apply.

NHS Rotherham CCG Equality Impact Assessment 2014

Title of policy or service	Alcohol, Drug and Substance Misuse and Smokefree Policy	
Name and role of officers completing the assessment	Head of HR	
Date assessment started/completed	March 2018	

1. Outline	
<p>Give a brief summary of your policy or service</p> <ul style="list-style-type: none"> • Aims • Objectives • Links to other policies, including partners, national or regional 	<p>This policy aims to reinforce an empathic, confidential and consistent management approach, promoting support and rehabilitation for employees dealing with alcohol, drug/substance misuse and also support for smoking cessation.</p>

2. Gathering of Information

This is the core of the analysis; what information do you have that indicates the policy or service might *impact on protected groups*, with consideration of the *General Equality Duty*.

	What key impact have you identified?			What action do you need to take to address these issues?	What difference will this make?
	Positive Impact	Neutral impact	Negative impact		
Human rights		✓			
Age		✓			
Carers		✓			
Disability		✓			
Sex		✓			
Race		✓			
Religion or belief		✓			
Sexual orientation		✓			
Gender reassignment		✓			
Pregnancy and maternity		✓			
Marriage and civil partnership (only eliminating discrimination)		✓			
Other relevant group					

Please provide details on the actions you need to take below.

3. Action plan				
Issues identified	Actions required	How will you measure impact/progress	Timescale	Officer responsible
None				

4. Monitoring, Review and Publication			
When will the proposal be reviewed and by whom?	Annually		
Lead Officer	Head of HR / E&D Officer	Review date:	April 2021