

# **DRUG & ALCOHOL POLICY & TESTING PROCEDURES**

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## **1 SECTION**

The Drug & Alcohol Testing Procedures apply to all persons and all departments.

## **2 RELEVANT LEGISLATION**

*Work Health & Safety Act 2020*

*Work Health & Safety Regulation 2011*

*Transport Operations (Road Use Management) Act 1995*

*Local Government Act 1995*

Workplace Relations Act (Federal and State)

AS/NZS4760-2019 Procedures for specimen collection and the detection and quantitation of drugs in oral fluid.

## **3 PURPOSE**

To ensure that the health and safety of no person is at risk or is adversely affected by any worker being at the workplace during a working day whilst affected by alcohol or a drug.

## **4 SCOPE**

This Drug & Alcohol Policy & Testing Procedure applies to all employees of the Shire of Quairading, including contractors, volunteers, work experience students and visitors as well as Elected Members and is in addition to any legal requirement each has under Western Australia and Federal law regarding the consumption of alcohol and drugs.

## **5 PREAMBLE**

Workers affected by alcohol or a drug at work may endanger themselves, other workers and the public. Risks associated with driving of vehicles and plant, construction and supervision of hazardous work areas increases as a result of alcohol or drug misuse. Ordinary workers, supervisors, managers and the Council may suffer legal consequences if a worker causes or contributes to injury to any person or damage to property while affected by alcohol or a drug at work. Also, there is a risk that casual use of alcohol or drugs may result in mistakes, productivity losses and offend internal and external customers.

Whilst the first priority is health and safety, it is important to properly manage both suspected and apparent cases of employees being affected by alcohol and/or drugs at work. Certain medical conditions and prescription drugs can produce behavioural changes similar to the effects of consuming alcohol or illegal drugs. Also, the underlying reasons for consuming alcohol or any drug may include anxiety, depression and stress, marital, family and other relationship problems, financial and legal difficulties, compulsive gambling, bereavement and other life difficulties.

## 6 DEFINITIONS

**Alcoholism** - Alcoholism is dependence upon alcohol to the extent of noticeable mental disturbance, interference with bodily or mental health, and effects on interpersonal relations and work performance. Workers who show the early signs of such developments may require treatment.

**Chain-of-custody form** – A form to be used from time of collection of the specimen to its receipt by the laboratory, as well as dispatch between laboratories.

**Collector** – A person who has successfully completed instruction in compliance with the Standard for specimen collection, storage, handling and dispatch of testing samples.

**Confirmatory test** – An analytical procedure that uses mass spectrometry to identify and quantify unequivocally a specific drug or metabolite.

**Donor** – A person who provides a specimen to be assessed.

**Drug** – Shall include any illegal substance or a medically prescribed substance that may affect an employee's work performance.

**Drug Dependence** - Drug dependence is a state, psychic and sometimes also physical, resulting from the reaction between a living organism and a drug, characterized by behavioural and other responses that always include a compulsion to take the drug either constantly or repeatedly in order to experience psycho-trophic effects and sometimes to avoid the discomfort of its absence.

**Gross Misconduct** - The conditions for gross misconduct are fulfilled if:

- a) While at work, a worker consumes or supplies an illegal drug or abuses a legal drug; or
- b) A worker consumes alcohol during working hours without authorisation; or
- c) A worker reports to work or is at work while affected by alcohol or any drug such that the worker is knowingly and intentionally unfit for normal duties (which includes exceeding the permitted blood alcohol level in respect of the vehicle or plant the worker would normally be expected to drive or operate).

**Note: Gross misconduct could justify instant dismissal**

**Oral fluid specimen** – Secretions in the oral cavity emanating predominantly from the major and accessory salivary glands.

**Working Day** - Means the period of paid work between an employee's starting time and finishing time. The term includes any time worked on overtime or any periods of call out duty.

**Workplace** - shall include any place within the Shire of Quairading at which work is performed for or on behalf of the Shire of Quairading, but shall exclude any area at which the Chief Executive Officer may approve the consumption of alcohol for social functions and employees social activities.

**Employee** – shall include any person who at the time of testing is (a) receiving payment for services rendered from the Shire of Quairading (whether that be on a permanent, casual or contract basis), (b) a visitor (as defined below), (c) a contractor (as defined below), (d) an elected member of the Shire of Quairading (for the purposes of this policy only) (e) volunteer (f) work experience student.

**Work Experience Student** – shall include any person who attends a workplace under the control of the Shire of Quairading who is not a Council staff member or a contractor, or visitor and is performing work for Council for which they will not be remunerated.

**Volunteer** – shall include any person who attends a workplace under the control of the Shire of Quairading who is not a Council staff member or a contractor (as defined in this policy).

**Visitor** – shall include any person who attends a workplace under the control of the Shire of Quairading who is not a Council staff member or a contractor (as defined in this policy).

**Contractor** – shall include any person who attends a workplace or work site under the control of the Shire of Quairading who is not a Council staff member or a visitor and is performing work for Council for which they will be remunerated.

**Confirmed Negative** – A result at or below the target concentration (see Section 11.2) following confirmatory testing.

**Confirmed Positive** – A result above the target concentration (see Section 11.2) or concentration in relation to the dosage recommended by the pharmacist or doctor in the case of over the counter or prescribed medication, following confirmatory testing i.e. if the confirmatory testing shows that an over the counter or prescription medication has been taken at dosage rates above what has been recommended then this **could** result in a Confirmed Positive (regardless of what information was stated on the testing record form).

**Non-negative** – A positive result obtained by use of the Drager 5000 Drug Detection System.

## 7 INTRODUCTION

The sole purpose for conducting Alcohol and Drug Testing is for Workplace Health and Safety reasons. The aim is to deter employees from entering into the workplace and carrying out their duties whilst affected by alcohol and/or a drug, thus placing themselves and others at risk of injury. This procedure has been widely adopted in many industries and has become the standard practice in responsible organisations.

Drugs are generally administered via injection, ingestion, inhalation or smoking. Upon entering the blood stream they are rapidly metabolised and are distributed by metabolic processes. Many drugs and drug metabolites are excreted in oral fluids and urine, making them easily detectable by drug screening procedures.

Modern Breathalyser testing is highly accurate and simple to carry out for detecting alcohol presence.

Oral fluid sampling is a simple, non-intrusive and accurate way to test for recent / current drug use for the purpose of determining fitness for work.

The process of detecting the presence of a drug in oral fluid is a two-step process:

- The initial test (sometimes known as the Screening Test) is designed to tentatively identify the presence of drugs and eliminates negative samples quickly.
- The Confirmatory Test is designed to confirm the identity and quantitate individual drugs.

## 8 TESTING

The components of the testing regime are explained as follows:

### 8.1 Random Testing

It is Council's intention that all Council employees be tested a minimum of two (2) times in any twelve (12) month period. The selection process of staff to be tested will be determined by the Chief Executive Officer and at their discretion any of the qualified collectors or Workplace Health & Safety Officers. For the purposes of confidentiality, the Chief Executive Officer, Workplace Health & Safety Officers and qualified collectors (or delegated persons by the Chief Executive Officer) will be the only employees with knowledge of the employees selected for testing (donors). The Workplace Health & Safety Officers or qualified collector will then arrange with the nominated donors, suitable times and locations to perform the tests.

Random testing of workplaces may be carried out at any working time/s and on any working day/s. Random testing will not occur during authorised functions, where the consumption of alcohol has been approved by Council or its delegate, and where other documented risk management strategies have been implemented prior to the function to ensure the health and safety of Council's employees, visitors and public.

### 8.2 Challenge Testing or Test for concern

Testing may be required if a Workplace Health & Safety Officer, Supervisor, Foreman, Engineer, Executive Manager or Chief Executive Officer, based on evidence received, has any grounds for concern that an employee may not be fit for work due to drugs and/or alcohol.

An employee has the right to submit a case for testing, if they have any grounds whatsoever that another employee may not be fit for work due to being affected by drugs or alcohol during work hours. This is the employee's right to attempt to protect their own safety and the safety of others in their team.

A test for concern can only be approved by a Workplace Health & Safety Officer, Executive Manager or Chief Executive Officer.

While there will be no penalty for those who submit a claim, which is later proved to be unfounded, any employee involved in a history of claims where the validity is questionable, will be investigated further and dealt with according to Council's disciplinary process.

Any qualified collector may carry out a test for concern.

If an employee tests negative for Drugs and Alcohol under a test for concern and continues to exhibit "Reasonable Grounds" that they may not be fit for work and will be dealt with under the fitness for work policy.

### **8.3 Incident testing**

If any employee is involved in an incident or accident which:

- a) resulted in a serious or dangerous event; or
- b) involves high risk construction activities e.g. traffic control
- c) operation of earthmoving equipment
- d) in the opinion of the Supervisor / Workplace Health & Safety Officer, had the potential to result in a serious / dangerous event the employee will be subject to testing and the resulting procedures.

Where the Police attend as a result of an accident/incident, if applicable, their testing procedures will have precedence over Council's testing procedures. However, where only limited testing is conducted, Council procedures may supplement the police testing procedure.

## **9 PROCEDURE – ALCOHOL**

### **9.1**

All employees as selected per the procedure outlined in Section 8.1 will be required to give a breath test sample.

### **9.2**

Any employee suspected of being under the effect of alcohol by the workers supervisor or the workers co-workers in accordance with 8.2 of this policy will be subject to alcohol testing.

### **9.3**

Any employee involved in a plant-related accident will be tested for the presence of alcohol.

### **9.4**

Any employee who does not agree with the findings/reading of their test will be offered a second test immediately. An employee may seek independent testing (at their own expense) to dispute or confirm the result from a work-based test – where the results of this independent test conflict with the results of Council's test the employee may return to work any deducted sick leave shall be returned.



## 9.5

Self-testing will be made available for personnel through the use of a hand held alcoholiser and a prescribed flow chart made available in the area of testing. Self-testing should be conducted in accordance with the Voluntary Self Testing Alcohol Policy.

## 9.6

It is a requirement that persons operating trucks, machinery, undertaking traffic controller duties and high work risk licences activities should submit a .00g/100ml breath test at all times. All other persons should also submit less than 0.00g/100ml at all times.

## 10 PROCEDURE – DRUGS

### 10.1

All employees as selected per the procedure outlined in Section 8.1 will be required to provide a saliva specimen for drug testing.

### 10.2

Preliminary analytical testing for drugs of addiction and misuse will be conducted using the Drager 5000 Drug Detection System using the 5 panel test kit.

### 10.3

System testing and Quality Control testing of the Drager 5000 Drug Detection System until will occur prior to testing sessions. The systems test verifies that the electronics are functioning correctly, while the Quality control test confirms that the instrument is reading results correctly.

### 10.4

Any employee suspected of being affected by drugs either by their supervisor or co-workers in accordance with clause 8.2 will be subjected to drug testing.

### 10.5

Any employee involved in a plant-related accident will be tested for the presence of drugs.

### 10.6

Employees taking medication will be required to disclose to the nominated collector any prescription or over the counter medication that could positively influence a drug test. All information disclosed will be kept confidential and will not be recorded on the employee's personnel file.

## **10.7**

The collection procedure shall be as follows: -

- 10.7.1 The collector shall obtain the consent of the donor to collect a specimen for the purposes of drug testing and obtain the signature of the donor to that effect on the consent form.
- 10.7.2 Prior to the commencement of specimen collection, the collector shall request identification, unless otherwise determined by legislation.
- 10.7.3 The collector shall ensure that the oral cavity is free from foreign substances, e.g. food, gum and that the donor's oral cavity has been free from food and drink for a period of 10 minutes and that the donor has not smoked a cigarette for a period of 10 minutes prior to the test.
- 10.7.4 The test shall be conducted in an area that provides privacy for the donor.
- 10.7.5 The donor shall provide the specimen via the use of sterile equipment provided by the collector at the collection site. In the case of failure to obtain a result (i.e. dry mouth, faulty equipment) a maximum of 3 test no less than 10 minutes apart shall be provided.
- 10.7.6 Non-negative screening tests will trigger the provision of a second specimen by the donor which will be sent for confirmatory testing by a NATA accredited laboratory.
- 10.7.7 The collector shall request that the donor observe the transfer of the second specimen and the placement of the tamper proof seals, or equivalent devices, over both bottle caps and down the sides of the bottles. The donor shall initial the tamper proof seals.
- 10.7.8 The donor shall be required to sign a completed Chain of Custody form and acknowledging that the specimen is their own and is labelled such that it can identify the donor correctly and has been sealed in the donor's presence.
- 10.7.9 Preparation for dispatch and transportation of specimens to the testing laboratory will be performed as indicated in AS/NZS4760-2019.

## **11 ACCEPTABLE LEVELS**

### **11.1 Alcohol**

- 11.1.1 All employees should submit a level less than 0.00g/100ml (0.00%) to be permitted to the workplace. –
- 11.1.2 All employees involved in child care should submit a 0.00g/100ml (0%) level at all times.
- 11.1.3 All employees operating machinery, trucks and passenger carrying vehicles (e.g. Mini Bus) should submit a 0.00g/100ml (0%) level at all times.

11.1.4 All employees involved in other high-risk activities should submit a 0.00g/100ml (0%) level at all times. High Risk Activities include:

- 11.1.4.1 High risk construction activities as defined in the Work Health and Safety Regulation 2011, Section 291
- 11.1.4.2 Confined space work
- 11.1.4.3 Traffic control
- 11.1.4.4 Explosive power tools
- 11.1.4.5 Firearms
- 11.1.4.6 Operation of a chainsaw
- 11.1.4.7 Operation of a demolition or concrete saw
- 11.1.4.8 Working with electricity or electrical components (240V or higher)
- 11.1.4.9 Operation of RPA (Remotely Piloting Aircraft)

**11.2 Drugs**

11.2.1 All employees tested using the Drager 5000 Drug Detection System are to produce a result of “Negative” using the oral fluid testing panel.

11.2.2 Australian Standard 4760 – 2019 Table 4.1 lists the target concentration of drugs in oral fluid testing as:

Opiates (Morphine)	25ng/ml
Cannabinoid’s (THC)	15ng/ml
Amphetamine type stimulants	25 ng/ml
Cocaine & metabolites	25ng/ml

11.2.3 All employees who test non-negative and have a subsequent specimen tested by a NATA accredited laboratory should produce a reading less than the above levels. Any confirmed positive result reading above the concentrations listed above shall constitute a breach of this policy.

11.2.4 Confirmation testing shall only be conducted for the substances identified in the initial screening test.

11.2.5 The table below indicates some of the common names for the above drug classes.

DRUG CLASS	COMMON NAME
Cannabinoid’s	Marijuana, weed, pot, hash, dope and mull
Amphetamines and Methamphetamines	MDMA, speed, ecstasy, uppers, biphphetamine, Dexedrine
Opiates (Very strong pain killers)	Heroin, Morphine, Pethidine, Codeine, Methadone
Cocaine (Metabolites)	C, Coke, Nose Candy, Snow, White Lady, Toot, Charlie, Blow Whitedest and Stardust

For more information refer to Appendix 7 – Drug classes and detection times

### 11.3 Medication – Prescribed and Over the Counter Medication

#### 11.3.1 Prescribed Medication

Any employee who has been prescribed medication by a medical practitioner will not be in contravention of this policy as a result of being in possession of or taking that medication in accordance with the prescription, provided that:

- 11.3.1.1 The employee has disclosed to the medical practitioner concerned the position that they occupy, the tasks they are required to perform, and the medical practitioner does not believe the prescribed medication will in any way affect that person’s ability to work safely.
- 11.3.1.2 The consumed level of the prescribed medication does not exceed the level that the employee has been prescribed to take; and
- 11.3.1.3 The employee has disclosed to the nominated collector any prescription or over the counter medication. If a non-negative result is recorded for Opiates, then a medical declaration form is to be completed if the donor has taken medication that contains codeine.

#### 11.3.2 Over the Counter Medication

Employees will not be in contravention of this policy if they take over the counter medication in accordance with the manufacturer’s recommended dose, directions and warnings. Employees must seek advice from their pharmacist with respect to the impact any over the counter medication may have on the safe performance of their work. If advice from the pharmacist suggests the medication may impact upon their ability to perform the work safely or where there is any doubt, then the employee must advise their nominated employer in writing.

Everybody does react individually to over the counter medication and each result will be treated on its merits.

The following is a list of prescribed and non-prescribed (over the counter) medications that *may* produce a positive (presumptive or confirmed) result when screening for employees who may not be fit for work due to drugs.

DRUG CLASS	COMMON MEDICATIONS (trade names)
Opiates	Nurofen Plus, some Cold & Flu preparations, Panadeine, Panadeine Forte, Actuss, Codalgin, Codox, Durotuss, Mersyndol, Panacodin, Proladone, Actacode, Dymadon Co, Panalgesic, Phenergan, Aspalgin, Disprin Forte, Codis, Oridine, Fiorinal, Kapanol
Amphetamines	Actifed, Logicin, Robitussin, Dimetapp, Orthoxicol, Benadryl, Sinutab, Tylenol cold / flu, Panadol cold / flu, Codral, Demazin, Lemsip Flu, Day / Night.

## 12 RECOMMENDED PROCEDURE – POSITIVE ALCOHOL ANALYSIS

### 12.1

Should any employee (including contractors, volunteers, work experience and visitors) register greater than or equal to 0.00g/ml, or if the employee (excluding contractors, volunteers, work experience and visitors) as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, then that employee (including contractors, volunteers, work experience and visitors) is unfit for work and the following actions will be taken: -

12.1.1 They will be returned to their place of residence; and

12.1.2 Placed on sick leave for that day; and

12.1.3 A first letter of action will be placed on their personnel file, with a copy to their Supervisor and Workplace Health and Safety Officer; and

12.1.4 They will be offered alcohol counselling; and

12.1.5 They will be offered a course in alcohol education; and

12.1.6 A return to work test is to be carried out and produce a negative test result before returning to work.

### 12.2

Should any employee (including contractors, volunteers, work experience and visitors) register a second offence within a 2 year period greater than or equal to 0.00g/ml, or if the employee (including contractors, volunteers, work experience and visitors) as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, then the employee (excluding contractors, volunteers, work experience and visitors) is unfit for work and will be:

-

12.2.1 They will be returned to their place of residence; and

12.2.2 Placed on sick leave for that day; and

12.2.3 Ordered to undertake alcohol counselling; and

12.2.4 Ordered to undertake a course in alcohol education; and

12.2.5 If the employee for any reason refuses to agree to undertake both the counselling and the course in alcohol education, then they will be dismissed immediately; and

12.2.6 A second letter, or final letter (depending upon the agreement of the employee in undertaking counselling and the education course) of action will be placed on their personnel file, with a copy to their Supervisor and Workplace Health and Safety Officer; and

12.2.7 In the event that the employee agrees to undertake alcohol counselling and the course in alcohol education then they will be advised of the consequences should there be any further positive test recorded; and

12.2.8 A return to work test is to be carried out and produce a negative test result before **returning to work.**

### 12.3

Should any employee (excluding contractors, volunteers, work experience and visitors) register a third offence within a 2 year period greater than or equal to 0.00g/ml, or if the employee (including contractors, volunteers, work experience and visitors) as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, that employee (excluding contractors, volunteers, work experience and visitors) is unfit for work and will be:

-

12.3.1 Dismissed, and

12.3.2 A final letter placed on their personnel file, with a copy to their Supervisor and Workplace Health and Safety Officer; and

12.3.3 They will not be permitted to work for council for a period of 2 years.

### 12.4

Should any contractor, volunteer, work experience or visitor register greater than or equal to 0.00g/ml, or if the contractor as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, then that contractor is unfit for work on a Council work site/controlled site or location and the following actions will be taken: -

12.4.1 They will be ordered to leave the Council work site/controlled site or location immediately and will be returned to their place of residence; and

12.4.2 They will not be permitted to return to the Council work site/controlled site or location until such time as a negative alcohol reading has been obtained. A negative alcohol reading shall be taken to mean it conforms to the requirements of the policy for no action to be taken against an employee.

12.4.3 If applicable the employer of the contractor, work experience or visitor shall be notified immediately of the circumstances involving their worker and a follow up letter of action shall be forwarded to the employer of the contractor, work experience or visitor that the worker be offered alcohol counselling and a course in alcohol education.

### 12.5

Should any contractor, volunteer, work experience or visitor register a second offence within a 2-year period greater than or equal to 0.00g/ml, or if the contractor, volunteer, work experience or visitor as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, then that contractor is unfit for work on a Council controlled site and the following actions will be taken: -

12.5.1 They will be ordered to leave the Council work site/controlled site or location immediately and will be returned to their place of residence; and

12.5.2 They will not be permitted to return to the Council work site/controlled site or location until such time as a negative alcohol reading has been obtained. A negative alcohol reading shall be taken to mean it conforms to the requirements of the policy for no action to be taken against an employee; and

12.5.3 If applicable the employer of the contractor, work experience or visitor shall be notified immediately of the circumstances involving their worker and a follow up letter of action shall be forwarded to the employer of the contractor that the worker shall undertake an alcohol counselling course and a course in alcohol education course. If They refuse to undertake counselling and education, they will not be allowed back on council site; and

12.5.4 Both the employer and the contractor will be advised of the consequences should there be a further positive test recorded.

## 12.6

Should any contractor, volunteer, work experience or visitor register a third offence within a 2 year period greater than or equal to 0.00g/ml, or if the contractor, volunteer, work experience or visitor as outlined in Section 11.1.2, 11.1.3, and 11.1.4 and registers greater than 0.00g/ml, then that contractor, volunteer, work experience or visitor is unfit for work on a Council controlled site and the following actions will be taken: -

12.6.1 They will be ordered to leave the Council work site/controlled site or location immediately and will be returned to their place of residence; and

12.6.2 They will not be permitted to ever again work as a contractor, volunteer, work experience for council any council offices; and

12.6.3 If applicable the employer of the contractor, volunteer, work experience or visitor shall be notified immediately of the circumstances involving their worker and a follow up letter of action shall be forwarded to the employer of the contractor, volunteer, work experience or visitor noting that they will not be permitted to perform work as a contractor, volunteer, work experience for council in the future or visit any council offices.

## 13 RECOMMENDED PROCEDURE – POSITIVE DRUG ANALYSIS

### 13.1

Any employee (including contractors, volunteer, work experience or visitor) registering a **“Non-negative”** result will be: -

13.1.1 Returned to their place of residence pending laboratory results. If a Medication Declaration Form is provided the employee will be allowed to return to work immediately in the case of codeine being taken for a non-negative result for Opiates.

13.1.2 Placed on sick leave pending laboratory results (in the situation where the employee does not provide the Medication Declaration Form and is sent home); and

13.1.3 A letter of presumption will be issued on the day of the non-negative test and placed on their personnel file with a copy to their Supervisor and Workplace Health and Safety Officer.

13.1.4 If a person has any concerns regarding the initial result, a second test will be undertaken on the Drager 5000 Drug Detection System. If this results in a negative result, no further action will be taken.

13.1.5 An employee may seek independent testing (at their own expense) within a 12 hour period from the initial testing to dispute or confirm the results from a work based test. Where the results of this independent test conflict with the results of Council's test the employee may return to work and any deducted sick leave shall be returned.

13.1.6 The NATA laboratory tested sample which was taken at the time of the initial non negative result will override any independent testing carried out by the employee.

### **13.2**

If the returned laboratory result provides a **Confirmed Negative** test, the employee (including contractors, volunteers, work experience and visitors) will be: -

13.2.1 Returned to work immediately (in the case where the employee was sent home);

13.2.2 Leave for period of time stood down (if applicable) will be reimbursed without bias. In the situation where the employee is a casual, reimbursement will be made for time when the employee was rostered to work or would reasonably have been expected to work in their normal capacity.

### **13.3**

If the returned laboratory result provides a **Positive (Confirmed Positive)** test, the employee (including contractors, volunteers, work experience or visitors) will be: -

13.3.1 Ordered to undertake drug counselling

13.3.2 Ordered to undertake a course in drug education; and

13.3.3 A letter of action will be placed on their personal file, with a copy to their Supervisor and Workplace Health and Safety Officer.; and

13.3.4 A return to work test to be undertaken with a confirmed negative before returning to work.

13.3.5 Regular testing will be carried out on the employee to ensure that they are drug free for a period of 12 months.

### **13.4**

If the employee (including contractors, volunteers, work experience or visitors) returns a second laboratory result within a 2-year period that provides a **Positive (Confirmed Positive)** test, the employee (excluding contractors) will be: -

13.4.1 Ordered to undertake counselling.

13.4.2 Ordered to undertake a course in drug education.

13.4.3 If the employee for any reason refuses to agree to undertake both the counselling and the course in drug education, then they will be dismissed immediately.

13.4.4 A second letter, or final letter (depending upon the agreement of the employee in undertaking counselling and the education course) of action will be placed on their personal file, with a copy to their Supervisor and Workplace Health and Safety Officer;



13.4.5 In the event that the employee agrees to undertake counselling and the course in drug education then they will be advised of the consequences should there be any further positive test recorded.

13.4.6 A return to work test to be undertaken with a confirmed negative before returning to work.

13.4.7 Regular testing will be carried out on the employee to ensure that they are drug free for a period of 12 months.

### 13.5

If the employee (including contractors, volunteers, work experience or visitors) returns a third laboratory result within a 2-year period that provides a **Positive (Confirmed Positive)** test, the employee (excluding contractors) will be:

13.5.1 Dismissed, and

13.5.2 A final letter placed on their personnel file, with a copy to their Supervisor and Workplace Health and Safety Officer

13.5.3 They will not be permitted to work for council for a period of 2 years

### 13.6

Any contractor, volunteer, work experience or visitor registering a **“Non-negative”** result/s will be: -

13.6.1 Ordered to leave the Council work site/controlled site or location immediately and returned to their place of residence pending laboratory results. If a Medication Declaration Form is provided the employee will be allowed to return to work immediately in the case of codeine being taken for a non-negative result for Opiates; and

13.6.2 A letter of presumption will be issued on the day of the non-negative test

13.6.3 If applicable the employer of the contractor, volunteer, work experience or visitor will be contacted and informed of the circumstances involving their worker and this will be followed by a letter.

### 13.7

If the returned laboratory result provides a **Negative (Confirmed Negative)** test, the contractor, volunteer, work experience or visitor will be: -

13.7.1 Notified (verbally in the first instance and then via letter to their employer) of the result; and

13.7.2 Council will look at reimbursement for down time of machinery.

### 13.8

If the returned laboratory result provides a **Positive (Confirmed Positive)** test, the contractor, volunteer, work experience or visitor will be:-

13.8.1 Notified of the result;

13.8.2 A letter will be forwarded to the employer of the contractor, volunteer, work experience or visitor notifying them of the result and reminding them of the Drug & Alcohol Policy that Council has in place for contractors, volunteers, work experience or visitors and that their employee is to undergo a drug education/counselling course; and

13.8.3 If the contractor, volunteer, work experience or visitor for any reason refuses to agree to undertake both the counselling and the course in drug education, then they will not be allowed to return to any council sites.

13.8.4 A return to work test to be undertaken with a confirmed negative before returning to work.

13.8.5 Regular testing will be carried out on the contractor, volunteer, work experience or visitor when they are on council work sites to ensure that they are drug free for a period of 12 months.

### 13.9

If the contractor, volunteer, work experience or visitor returns a second laboratory result within a 2 year period that provides a **Positive (Confirmed Positive)** test, the contractor will be:-

13.9.1 Notified of the result;

13.9.2 A letter will be forwarded to the employer of the contractor, volunteer, work experience or visitor notifying them of the result and reminding them of the Drug & Alcohol Policy that Council has in place for contractors, volunteers, work experience or visitors and that their employee is to undergo a drug education/counselling course; and

13.9.3 If the contractor, volunteer, work experience or visitor for any reason refuses to agree to undertake both the counselling and the course in drug education, then they will not be allowed to return to any council sites.

13.9.4 Both the employer and the contractor will be advised of the consequences should there be a further positive test recorded.

13.9.5 A return to work test to be undertaken with a confirmed negative before returning to work.

13.9.6 Regular testing will be carried out on the contractor, volunteer, work experience or visitor when they are on council work sites to ensure that they are drug free for a period of 12 months.

### 13.10

If the contractor, volunteer, work experience or visitor returns a third laboratory result within a 2 year period that provides a **Positive (Confirmed Positive)** test, the contractor will be:

13.10.1 Never again allowed to work for Council;

13.10.2 If applicable the employer of the contractor, volunteer, work experience or visitor shall be notified immediately of the circumstances involving their worker and a follow up letter shall be forwarded to the employer of the contractor, volunteer, work experience or visitor noting that their employee will not be permitted to perform work as a contractor, volunteer, work experience for council or visit any council offices in the future.

## **14 PROCEDURES FOR SUPERVISORS WHEN FACED WITH A DRUG/ALCOHOL RELATED INCIDENT**

Council has a primary responsibility to ensure the health and safety of its employees and members of the public. Responsibility for the implementation of this procedure lies with each employee who has a supervisory or staff administrative duty within Council.

For the purpose of this Policy a Supervisor may include: -

- Chief Executive Officer
- Executive Manager
- Workplace Health & Safety Officer
- Forepersons
- Leading Hands
- Or any other person delegated the authority of 'Supervisor Status', from time to time by the Chief Executive Officer.

This procedure is to be used by a supervisor who becomes aware of an employee exhibiting behaviour (\*actions or signs) at work or prior to commencing work which includes being called back to work, which the supervisor believes may be attributed to the use of a drug or alcohol.

This behaviour may include:

- The employee's speech is slurred or impaired
- The employee's breath smells of alcohol
- The employee staggered, their movements were jerky and uncertain
- The employee admitted to consuming a certain quantity of alcohol
- The employee's eyes were bleary and heavy
- The employee exhibited a dulled tired appearance
- The employee was aggressive in their speech or manner
- The employee's face was flushed
- The employee's pupils were large with a sluggish reaction to light
- The employee's sense of time was defective, being unable to repeat times of incidents

If an employee demonstrates behaviour of this nature, which the supervisor suspects as being caused by a drug or alcohol, the supervisor shall not allow the employee to commence work or, if the employee has started work, shall immediately relieve the employee from his or her designated duties. The supervisor should direct the employee to a quiet location, where the supervisor will inquire if there is any reason for the employee's present condition and from the answers given decide what further action is required.

If the supervisor feels that a drug or alcohol is responsible for the employee's condition, then the first option is to report to the Chief Executive Officer immediately and request that an Alcohol and Drug Test be undertaken. Under no circumstances shall the supervisor take the matter into their own hands and attempt to resolve the situation or send the employee home. It will be the responsibility of the Chief Executive Officer to organise the alcohol and drug test.

The Chief Executive Officer may instruct the supervisor to accompany the employee back to the Council Administration Building for discussion with the Chief Executive Officer.

## **15 REFUSAL AVOIDANCE OR FALSIFICATION OF TESTS**

If a person has presented for work and intentionally avoids a test or refuses to produce a sample for testing, then they will be treated as a confirmed positive result.

A person failing to participate in testing will:

- a) be returned to their place of residence
- b) be placed on sick leave
- c) be not able to return to work until a presumptive negative test result is achieved
- d) A council employee will be requested to show cause as to why their employment should not be terminated. Termination may result in the employee being unable to work on any future council projects for a period of 2 years.

Any attempt to tamper with any in-house or external samples, alter the concentration of drugs or alcohol in their own or another person's sample before or after providing a test sample will constitute official / serious misconduct and will be dealt with in accordance with Council's disciplinary procedures.

## **16 RETURN TO WORK (CALL OUT)**

Any employee called upon to work after having consumed alcohol so recently or in such quantity, that it may affect their work performance shall immediately notify their supervisor that they are unable to work. The supervisor must make other arrangements regarding the call out if the employee indicates that he or she has consumed alcohol to the extent that it may affect their work performance.

All actions taken by a supervisor regarding this procedure must be documented by diary notation.

## **17 EVALUATION OF WORK PERFORMANCE**

The only criterion used initially to introduce an employee suspected of having a drug or alcohol dependency to a rehabilitation program must be based upon evidence of impaired work performance. Factors that shall be considered include: -

- a) Work performance – the output and quality of work;
- b) Safety of the individual and/or co-workers – of particular relevance where work involves exposure to machinery in operation, construction sites, etc. Also relevant is the risk posed by a supervisor, manager or executive who, while in an impaired state is determining how work should be done;
- c) Attendance – changes in attendance patterns.

An employee's work performance may deteriorate but remain within acceptable limits. It should be treated sensitively, and no employee should be forced into accessing assistances unless it is as a result of self-declaration of use, or as a result of testing.

## 18 SELF REFERRAL

At any stage employees who have a problem and wish to obtain assistance, should be encouraged to refer themselves for assistance to a professional drug and alcohol rehabilitation service provider without any loss of pay and entitlements.

The extent to which such referral is successful is directly proportional to the extent and quality of the program and the publicity it is given amongst the workforce. Self-referral is the preferable path to drug and alcohol rehabilitation and therefore requires maximum effort.

## 19 CONSULTATION

There will be situations where self-referral does not occur, and a consultation process may be necessary. Depending on the individual circumstances, a series of interviews may be helpful. It is proposed that interviews should be along the following lines: -

### 19.1 First Interview

Where for any of the above reasons an employee is suspected of having an alcohol or drug problem, the employee should be advised of the perceived change in work performance and the employee's own view of any underlying reasons should be sought. In the event that the employee associates it with a drug or alcohol problem, they should then be referred to a rehabilitation service provider for assessment and treatment.

**Interviews will be undertaken by the Workplace Health & Safety Officer with the Supervisor in attendance.**

### 19.2 Second Interview

In the event that work performance continues to deteriorate, a second interview will occur. If the employee again fails to recognise a drug or alcohol problem, it will be suggested that they seek professional assistance.

**Interviews will be undertaken by the Chief Executive Officer and Workplace Health & Safety Officer with the Supervisor in attendance.**

Following the interview, the employee will be provided with a written communication summarising the deterioration in work performance and accompanying the communication will be a list of approved drug and alcohol rehabilitation providers.

If they do not wish to participate in drug and alcohol rehabilitation, a further period of work performance monitoring will be observed.

### **19.3 Third Interview**

Following a continued deterioration in work performance, a third interview session will result in advising the employee to seek a qualified drug or alcohol counselling/rehabilitation service.

**Third interviews will be undertaken by the Chief Executive Officer and the Workplace Health & Safety Officer with the Supervisor in attendance.**

Should the employee still refuse to participate in rehabilitation, then the standard procedure for dealing with unsatisfactory work performance will be implemented from the third stage of the disciplinary procedure.

***The Employee must have the right to have a union representative, or another person of their choosing, present at all times during any of the interview stages.***

***All Interviews must be recorded in approved format (attached) and copies given to the Employee for their own records.***

## **20 REHABILITATION**

### **20.1 General**

It is necessary that all employees know the existence of a program and the details are well understood.

It is essential that all information concerning individuals is restricted and made available only to supervisors who have a critical role to play in the processing of the individual case and then only to the extent of necessary information.

Management needs to be aware and acknowledge that treatment of persons dependent on alcohol and drugs takes time and that there may be relapses.

A critical factor is for affected employees to continue to receive treatment as long as necessary. For as long as this is so, the matter should be left in the hands of the professional health care provider.

### **20.2 Key Elements**

Important elements of the rehabilitation process are:

20.2.1 A comprehensive list of rehabilitation service providers is made available;

20.2.2 The selection of provider to be the choice of the individual concerned;

20.2.3 All time away from work to undergo rehabilitation treatment be paid time; and

#### 20.2.4 Job security be guaranteed during rehabilitation.

Following successful completion of rehabilitation treatment, the employee should return to their original position unless otherwise recommended by the rehabilitation provider.

There may be some situations where it is recommended by the provider, for the purpose of avoiding relapse, that the person be placed elsewhere or retrained in another position. In such circumstances:

20.2.5 The service provider will notify the concerned parties upon completion or discontinuation of the treatment program;

20.2.6 The employee shall have the right to have a person of their choice; (e.g. union representative) attend all, or any, rehabilitation sessions.

## 21 ROLE OF CO-WORKERS

### 21.1

In most cases, co-workers will be the first to become aware of a drug or alcohol affected worker in the workplace. The problem might present itself in a number of ways. The following is offered by way of example:

21.1.1 By affecting personal relationships

21.1.2 Observed downturn in work performance

21.1.3 Knowledge of individual's habits

### 21.2

Co-workers are in the best situation to detect a potential problem at the earliest possible stage as well as providing feedback on whether:

21.2.1 The attitude of the employer is correctly based;

21.2.2 The rehabilitation scheme is appropriate to the particular workplace;

21.2.3 There is widespread understanding and acceptance of the program in the workforce;

21.2.4 These conditions can only be achieved provided the employee themselves are involved in the development of the program and its implementation into the workplace.

### 21.3

Co-workers need to be supportive of employees undertaking rehabilitation or suitable duties.

## 22 ROLE OF THE EMPLOYER

The attitude of management is critical to the success or otherwise of a drug and alcohol recovery program. One of the major difficulties is overcoming the problem of the individual resenting the involvement of management and others in what may be considered to be a personal matter. In addition, the traditional distrust of management by employees can be an impediment to workers agreeing to participate.

The Shire of Quairading is committed to the development of a drug and alcohol recovery program in order to contribute towards a safer workplace. Council will work with employees to establish the program, provide initial and ongoing education on the requirements and processes, and will seek input and feedback from all sources to maintain a high quality and effective program.

### 23 RIGHT OF APPEAL

If at any time an Employee disputes the results of testing the Employee has the right to a second opinion. This may mean a second alcoholiser test or transportation to a medical facility for more extensive testing. Should this occur the Employee should be stood aside on sick leave for the remainder of the day. When confidential results are returned to the Workplace Health & Safety Officer, results may indicate instigation of disciplinary action. This may take 24 – 72 hours.

If test reports indicate **Negative** results, these will be recorded, and any leave taken or lost time incurred by the employee will be reimbursed immediately without bias.

### 24 EMPLOYEES TO BE INFORMED

Employees who face charges of gross misconduct must be informed of;

- a) The possible consequences of their alleged misconduct;
- b) The full details of their alleged misconduct;
- c) That they have the opportunity to ask questions and seek explanations from those who allege misconduct; and
- d) Documentation of interview and process of documentation (i.e. copies, access, storage).

### 25 REVIEW OF CASES

The Chief Executive Officer will review individual cases not later than seven working days after an employee has been tested and interviewed and as necessary thereafter.

### 26 DISSEMINATION OF POLICY AND PROCEDURES

The availability of counselling and rehabilitation services, and other general information, is to be widely distributed via notice boards and staff newsletters as necessary.



## **27 DOCUMENTATION, CONFIDENTIALITY AND DISCLOSURE OF INFORMATION**

### **27.1 Documentation**

All test records will be filed securely in one location and will remain confidential. An employee may request and obtain a copy of their own test records if they wish to do so. Documentation relating to test results will be held indefinitely.

### **27.2 Confidentiality and Disclosure of Information**

The testing procedure for drugs and alcohol will be conducted so as to respect the privacy of the donor, but also to maintain standards required. Personal information relevant to this procedure will be safeguarded to protect the privacy of all donors, and only information required to be recorded shall be kept on file, with access limited to those required to have access to such information. Results of post incident tests will only be made available to third parties including Local Government Workcare (LGW), insurance and notification to authorities that are legally required to be informed as necessary, and the employee in question will be notified of this disclosure.

## **28 POSSESSION OF DRUGS**

The carrying, storing or use of illicit drugs on Shire of Quairading workplaces shall result in disciplinary action, which may include dismissal and/or referral to the Police.

Sale, transfer or manufacture of illicit substances in the workplace will result in dismissal. This includes the distribution of prescription drugs except where a licence is held.

## **29 PROCEDURE/POLICY REVIEW**

This procedure should be reviewed annually, or otherwise as directed by the Chief Executive Officer.

## **30 APPENDICES**

Appendix 1 - Employee Declaration for Opiates Form

Appendix 2 - Request for Drug and Alcohol Testing


Appendix 3 - Facsimile for additional requested medical testing

Appendix 4 - Interview Checklist

Appendix 5 - Interview Record Form

Appendix 6 - Rehabilitation providers

Appendix 7 - Drug Classes and Detection times

Record of Policy Review						
Version	Author	Council Adoption	Resolution	Reason for Review	Review Date	CEO Signature
01	Nicole Gibbs	27/10/2022	99-22/23	New Policy	October 2024	

**Appendix 1 – Employee Declaration for Opiates**

**EMPLOYEE DECLARATION FOR OPIATES**

NAME:.....

DATE:.....

EMPLOYER:.....

I acknowledge that I have been tested today by Integrity Sampling for drugs and alcohol.

I also acknowledge that I have been educated in the effects of, and the misuse of Alcohol and Other Drugs (AOD)

Prior to providing a sample of oral fluid for analysis today, I acknowledge that I have ingested a prescribed / pharmaceutical medication containing codeine.

I wish to confirm that I have only taken the medication that I have disclosed to the Integrity Sampling Technician. This medication was either prescribed to me or purchased over the counter. I have taken this medication in accordance with the recommended dosage.

I believe I can continue to undertake my required duties and not be stood down pending the laboratory confirmation results.

I do not believe I will in anyway compromise my safety or the safety of any other persons in the workplace.

Name:.....

Date:.....

Signature:.....

Witness

Name:.....

Date:.....

Signature:.....

**Appendix 2 – Request for Drug and Alcohol Testing**

**REQUEST FOR DRUG AND ALCOHOL TESTING  
(DUE TO CONCERN OR FOLLOWING AN INCIDENT)**

**Reason for Test:**     Concern Testing                       Following an Incident

**Please use the checklist attached in conjunction with the notes below to identify the need for testing. If more than one person has observed the signs / symptoms, additional checklists should be completed by all relevant personnel.**

**PERSON TO UNDERTAKE TEST:**

Worker Name:	
Position:	

**PERSON REQUESTING THE TEST:**

Name:	
Position:	

**DELEGATED OFFICER:**

Worker Name:		Date:	
Position:		Signature:	

**REASONS FOR REQUESTING THE TEST:**

**This form MUST be forwarded to the Delegated Officer as soon as possible.**

**NOTE: THIS FORM ALONG WITH ALL OTHER ASSOCIATED DOCUMENTATION WILL REMAIN STRICTLY CONFIDENTIAL.**

### CAUSE FOR CONCERN CHECKLIST

This form is used to record signs and symptoms when a Cause for Concern test may be required. Where two or more characteristic categories are observed, questions about the workers suitability for duty should be referred to the Delegated Officer for consideration.

Name of person completing the form:			
Based on the observations noted below, it is my opinion that <a href="#">Click or tap here to enter text.</a> is <input type="checkbox"/> Unfit to Work <input type="checkbox"/> Fit to Work			
<b>Record of Observed Characteristics (please tick appropriate boxes)</b>			
Breath (smell of liquor)	<input type="checkbox"/> Slight <input type="checkbox"/> Moderate	<input type="checkbox"/> Strong <input type="checkbox"/> Other -	
Face and skin colour (before working in the sun/heat)	<input type="checkbox"/> Pale <input type="checkbox"/> Sweaty	<input type="checkbox"/> Flushed <input type="checkbox"/> Puffy Face	<input type="checkbox"/> Other -
Attitude	<input type="checkbox"/> Sedated <input type="checkbox"/> Aggressive <input type="checkbox"/> Paranoia	<input type="checkbox"/> Anxious <input type="checkbox"/> Irritability <input type="checkbox"/> Obvious Depression	<input type="checkbox"/> Hostile <input type="checkbox"/> Dreamy <input type="checkbox"/> Other -
Actions	<input type="checkbox"/> Belching <input type="checkbox"/> Vomiting	<input type="checkbox"/> Fighting/Abusive <input type="checkbox"/> Drooling	<input type="checkbox"/> Hiccoughing <input type="checkbox"/> Other -
Eyes	<input type="checkbox"/> Bloodshot <input type="checkbox"/> Watery	<input type="checkbox"/> Glazed <input type="checkbox"/> Eyelids Drooping	<input type="checkbox"/> Pupils Pinpointed <input type="checkbox"/> Other -
Breathing	<input type="checkbox"/> Short <input type="checkbox"/> Shallow	<input type="checkbox"/> Jerky <input type="checkbox"/> Excessively Quick	<input type="checkbox"/> Excessively slow <input type="checkbox"/> Other -
Speech	<input type="checkbox"/> Incoherent <input type="checkbox"/> Slurred	<input type="checkbox"/> Confused <input type="checkbox"/> Unusually Slow	<input type="checkbox"/> Unusually Fast <input type="checkbox"/> Other -
Balance	<input type="checkbox"/> Swaying <input type="checkbox"/> Unsteady	<input type="checkbox"/> Staggering <input type="checkbox"/> Falling	<input type="checkbox"/> Other -
Movements	<input type="checkbox"/> Clumsy <input type="checkbox"/> Jerky	<input type="checkbox"/> Sluggish <input type="checkbox"/> Trembling	<input type="checkbox"/> Other -

Opinion of level of 'Intoxication'	<input type="checkbox"/> Slightly Affected	<input type="checkbox"/> Moderately Affected	<input type="checkbox"/> Highly Affected
Opinion of cause of 'Intoxication'	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Other Drugs	<input type="checkbox"/> Both <input type="checkbox"/> Unknown / Other
Other comments (including others that observed these characteristics):			

**Appendix 3 – Facsimile for Additional Requested Medical Testing**

**FACSIMILIE**

<b>DATE:</b>	<b>FROM:</b>
<b>TO</b>	<b>DEPARTMENT:</b>
<b>COMPANY:</b>	<b>PHONE NO:</b>
<b>FAX NO:</b>	<b>FAX NO:</b>

**NUMBER OF PAGES** (including this cover sheet): 1

Employee Name \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_

The above-mentioned worker appears to display immediate signs of being under the influence of alcohol or a drug.

Workplace health and safety obligations require the Council to ensure, before allowing him/her to work that they do not present a risk to any persons as a result of consuming alcohol or a drug.

Please conduct appropriate tests, including blood and urine sampling if permitted by the worker or urine sampling only if the worker objects to blood being taken. Also, please ensure that you ascertain that the tested person is the same person that is named above.

The Council will pay for the above-mentioned tests. Results, when available should be sent by the quickest safe means to the address shown below, for urgent attention to the WORKPLACE HEALTH & SAFETY OFFICER.

If tests reveal any health problems in addition to matters being tested for, please advise these results to the worker, but do not include this information in your report to the council.

## Appendix 4 – Interview Checklist

Questions on this form are a guide only; you may include other questions or omit any question that has no relevance to the interview.

1. Do you understand why you have been requested to attend this interview?
2. Have you been informed of your right to have someone else present at the interview (e.g. Union, friend)?
3. Do you wish to have any one else present?
4. Have the consequences of your actions been fully explained to you?
5. Do you agree that this is your alcohol/Drug test results form?
6. Did you request further testing?
7. Please explain the circumstances behind your actions today, if any.
8. Is there any reason behind your actions today?
9. Would you like to be referred to counselling or a suitable program for drugs/alcohol?
10. You are aware that this interview will become part of your personnel record, is there anything you would like to add?

Remember, this is only a guide. Record the interview accurately as shown below.

*Time:*

*Interviewers: (name of person/s conducting the interview)*

*Any other persons present during interview: (Union Rep, Supervisor)*

*Employee Name:*

*Alleged Misconduct: (e.g. over the legal alcohol limit at work)*

*Time of Alleged misconduct:*

*Location:*

*Details: (include any signs noted that identified the employee as being under the influence of drugs/alcohol)*

*Witnesses: (name of any witnesses to alleged misconduct) - attach statements if possible*

List the questions asked and the responses. All of the responses need to be in the words of the employee. Answers should start with “Joe Bloggs stated”.



**Appendix 5 – Record of Interview**

<b>Date:</b>		<b>Time:</b>	
<b>Interviewers:</b> (name of person/s conducting the interview)			
<b>Employee Name:</b>			
<b>Employee Position:</b>			
<b>Any other persons present during the interview:</b> (union rep, supervisor)			
Name.....		Position.....	
Name.....		Position.....	
<b>Alleged Misconduct:</b>			
<b>Time &amp; Location of alleged misconduct:</b>			
<b>Details:</b> Include any signs noted that identified the employee as being under the influence of drugs/alcohol)			
<b>Witnesses:</b> (name of any witnesses to alleged misconduct – attach statements is possible)			

List any other questions asked and the responses. All responses need to be in the words of the person answering the question.


I hereby verify that this is a true and correct account of the interview held:

\_\_\_\_\_

Employee

\_\_\_\_\_

Date

\_\_\_\_\_

Interviewers

\_\_\_\_\_

Date

\_\_\_\_\_

Witness

\_\_\_\_\_

Date

**Copy of the signed document must be given to the employee along with a copy of the results analysis form. Remaining copies to be filed in personnel file once action has been completed.**

## Appendix 6 – Rehabilitation Providers

### QUICK REFERENCE ON HOW TO STOP DRUG ABUSE

- Admit that you have a serious problem with alcohol and drugs.
- Throw out all the alcohol and drugs that you have. Then, get help. Talk to DRUG-ARM Information Line Tel: 1300 656 800 or one of the agencies listed in the document.
- Face up to and try and do something about the problem that may have caused you to turn to drugs.
- Don't be discouraged, you can beat alcohol and drugs.
- Talk to a good friend who you can trust and ask them to help you stay drug free.

### ALCOHOL & DRUG SERVICES

#### 24/7 Alcohol and Drug Support Line

Free Call 1800 198 024

#### Here For You

'Here For You' is a statewide confidential, non-judgemental, telephone service for anyone concerned about their own or another person's alcohol and other drug use and/or mental health issues.

Call Here For You on 1800 here4u (**1800 437 348**) from 7am to 10pm every day.

#### Wheatbelt Alcohol and Drug Services

Northam Phone – Free Call **1800 447 172**

#### Lifeline

131 114

#### Quairading Health Service

08 9645 2222

#### York Hospital

08 9641 0200

## Appendix 7 – Drug Classes & Detection Times

The reason for Drug & Alcohol Testing at the Shire of Quairading is SAFETY.

Please remember that the Shire of Quairading does not wish to interfere with what employees do in their own time, but is concerned about an employee's state when they present themselves to work and the impacts of any drug or alcohol use on the employee's safety and that of others in the workplace.

A positive test result will not apply to those whose confirmatory test results are below (or zero) against the Australian Standard cut off levels for drugs in oral fluid (saliva) as provided in the table below. An employee will only receive a positive result if they test on or above these cut off levels.

DRUG CLASS	EFFECTS	COMMON NAMES	DETECTION TIMES USING DRAGER 5000 DDS	AS 4760 CUT OFF LEVELS FOR CONFIRMATORY TESTING IN ORAL SAMPLES
Cannaboid's	Depressant	Marijuana	12 hours to 2 days	15ng/ml
Amphetamines and Methamphetamines	Stimulant	Speed, Ecstasy	12 hours to 2 days	25ng/ml
Opiates (very strong pain killers)	Narcotic analgesic	Heroin, Methadone, Morphine, Pethidine, Codeine	12 hours to 2 days	25ng/ml
Cocaine	Stimulant	Crack	12 hours to 3 days	25ng/ml