

Driving for work: **Drink and Drugs**



Driving is the most dangerous work activity that most people do. Research indicates that about 20 people are killed and 220 seriously injured every week in crashes involving someone who was driving, riding or otherwise using the road for work.

HSE Guidelines, 'Driving at Work', state that "health and safety law applies to on-the-road work activities as to all work activities and the risks should be effectively managed within a health and safety system".

So, employers must conduct suitable risk assessments and put in place all 'reasonably practicable' measures to ensure that work related journeys are safe, staff are fit and are competent to drive safely and the vehicles used are fit for purpose and in a safe condition. Such measures will more than pay for themselves by reducing accident costs, many of which (e.g. lost staff time, administration costs) will be uninsured.

Drinking and Driving

Around 10 people are killed and 50 seriously injured in drink drive crashes every week. It is not just the drivers who have been drinking who suffer, but often their passengers, people in other vehicles, pedestrians, cyclists or motorcyclists, and the families of everyone involved.

The legal drink drive limit is 80mg of alcohol per 100ml of blood. Drivers with a blood alcohol concentration between 50 and 80mg per 100ml of blood are 2 to 2½ times more likely to crash and 6 times more likely to be in a fatal crash. The risk increases massively when over the limit. A driver who is double the legal limit is 50 times more likely to be in a fatal crash.

Every year, about 90,000 people are convicted of drinking and driving, and face a driving ban of at least 12 months, a large fine and possible imprisonment. It is also an offence to be unfit to drive through drink, even if below the legal limit, or drugs. The penalties are same as for the 'over the limit' drink offence.

Alcohol impairs judgement, making drivers over-confident and more likely to take risks. It slows their reactions, increases stopping distances, affects judgement of speed and distance and reduces the field of vision. Even a small amount, well below the legal limit, seriously affects the ability to drive safely.

Alcohol is absorbed into the bloodstream very quickly, but it takes about an hour for 1 unit to be removed by a healthy liver. The exact number of units of alcohol in a drink depends on its size and alcoholic strength by volume (abv). For example, a 175ml glass of wine of 12%abv would be 2.1 units, and a 250ml glass of the same wine would be 3 units.

Drinkers cannot be sure how much alcohol they are consuming because the alcoholic strength of drinks varies enormously, as does the size of measures. In pubs, bars and restaurants a glass of wine could be 175ml or 250ml, bottles and cans are different sizes and spirits could be 25ml or 35ml measures.



Drinks poured at home are usually larger than ones bought in a pub or restaurant. It is also difficult to know the alcoholic strength of a drink without seeing the bottle. The speed with which alcohol is absorbed into the bloodstream also varies depending on a person's size, age, weight and gender and whether they have eaten. The same amount of alcohol will give different blood alcohol levels in different people.

Never rely on trying to calculate accurately how much alcohol is in your body, and whether you are above or below the drink drive limit.

Morning After

Many drink drivers are caught the morning after they have been drinking. As it takes several hours for alcohol to disappear from the body, someone who was drinking late the previous evening, could easily still be over the limit on their way to work the next morning. Even if under the limit, they may still be affected by the alcohol in their body.

Medicines and Drugs

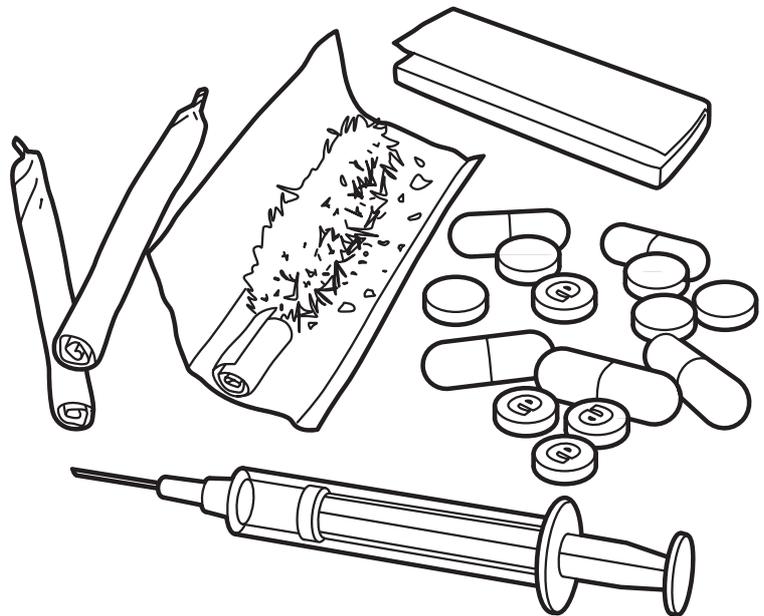
Driving while unfit through drugs, whether illegal or prescribed or over-the-counter medicines, is an offence that carries the same penalties as drink driving. The Police can, and do, conduct roadside tests to help them assess whether a driver may be impaired.

Illegal Drugs

Around 18% of people killed in road crashes have traces of illegal drugs in their blood, with cannabis being the most common. Drugs can affect a driver's behaviour and body in a variety of ways (depending on the drug). These can include:

- slower reactions
- poor concentration and confused thinking
- distorted perception
- over confidence, resulting in taking unnecessary risks
- poor co-ordination
- erratic behaviour
- aggression, panic attacks or paranoia
- blurred vision
- tremors, dizziness, cramps
- severe fatigue the following day

The effects can last for hours or even days, and vary from person to person. They can be difficult for an individual to detect.



Medicines

For many medications it is difficult to predict whether, how, when and for how long they will affect a person's ability to drive safely. A driver may not even notice that they have been impaired until it is too late. The effects depend on how much, how often and how a medicine is used, plus the psychological and physical attributes of the person taking it.

Some medicines may cause:

- drowsiness
- dizziness or feeling light-headed
- difficulty concentrating
- feeling edgy, angry or aggressive
- feeling nauseous or otherwise unwell
- reduced coordination, including shaking
- feeling unstable



A person's driving ability can also be affected by the medical condition for which they are taking the medicine.

Many over-the-counter medicines, including remedies for coughs, colds, flu and hay fever, cause unwanted drowsiness which might impair driving. Warnings about drowsiness are not always clear so, for example, if the label says "may cause drowsiness", assume that it will do so.

Alcohol and Drugs

Taking alcohol and drugs together is even worse as their effects combine and impairment can be multiplied.

What employers should do

This leaflet gives simple advice on how employers and line managers can help to ensure that their staff do not drive when affected by alcohol, drugs or medicines. It can be used to inform the organisation's risk assessment.

A sample 'Policy' is included, which can be adopted as written or adapted to suit your organisation's needs. It can be used as a stand-alone policy or incorporated into your existing drug and alcohol policies and 'Safer Driving for Work' policy.

Review your workplace drug and alcohol policy

Review your existing workplace drug and alcohol policy to see how it can encompass driving. HSE Guides 'Drug Misuse at Work' and 'Don't Mix It: A Guide for Employers on Alcohol at Work' are available free from www.hse.gov.uk

Consult Staff

Ensure that staff and/or their safety representatives are fully consulted about the organisation's policies on alcohol, drugs, and safe driving and that this is reviewed periodically in joint health and safety committee meetings.

Expect Safe Driving

Ensure all staff, including directors and managers, understand that everyone who drives for work must be fit to do so at all times. All managers should lead by personal example and follow the organisation's policy.

Set Clear Rules

In particular, ensure that all staff, including senior managers and line managers, understand that they must not drive for work if their ability to do so safely is affected by alcohol, drugs or medicines. Doing so should be a serious disciplinary matter.

Do not allow alcohol (or drugs) to be consumed by staff on duty, even, for example, if they are entertaining clients. Advise staff not to drink at lunchtime, especially if they are driving later. Remind them that it takes hours for the body to get rid of alcohol – they can still be impaired on their journey home or the following morning.

Raise Awareness

As part of recruitment, training and staff appraisal, ensure that drivers, and their line managers, are reminded about:

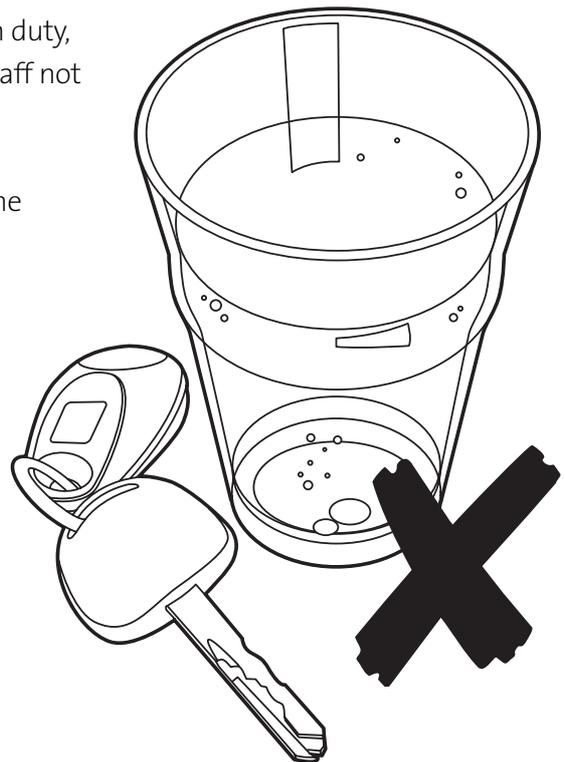
- the law about drinking and driving and drugs/medicines and driving
- the effects of alcohol on driving, including the morning after
- the effects of drugs and medicines on driving
- the organisation's policy on these issues
- what to do if they feel their driving may be affected
- the help that is available for staff with drink or drugs problems.

Advise staff on how to avoid drinking and driving:

- if intending to drink alcohol, arrange for someone else who is not drinking to drive, use public transport or stay overnight. But, if staying overnight, be aware that they may still be impaired the following morning
- if intending to drive, do not drink alcohol.

Also advise staff on how to avoid driving while under the influence of medicines:

- check if there is a warning on the packet or in the patient information leaflet (but do not rely just on this)
- ask a pharmacist or doctor if the medicine might affect their driving, and if so, whether there is a safer alternative.



Staff also need to be aware of:

- the legal, financial and bad PR consequences of crashing due to impaired driving
- the organisation's policy on work related road safety
- the need to co-operate in carrying out the policy and to report any problems.

Provide Training

Organise 'Drink and Drugs Awareness' seminars for staff. These should cover all of the issues above and there are many training organisations that can provide this service.

Train managers to recognise signs of possible alcohol or substance abuse. These include sudden mood or behaviour changes, unusual irritability or aggression, worsening relationships with colleagues and others, impaired job performance or an increase in poor timekeeping and short-term sickness absence. These signs do not necessarily mean a drink or drugs problem, but may be an indication that help is needed.

Be Constructive

Treat staff with alcohol or drug problems sympathetically and in confidence, no differently from staff with other medical problems. Offer access to medical or therapeutic help for staff who come forward with problems.

Staff who feel that they are unfit to drive because they are affected by drugs or by alcohol consumed the previous night, should be able to declare this without being punished. However, persistent instances should trigger disciplinary action.

Give staff who report that they are unfit to drive because they are affected by medicines other duties and ask them to consult their doctor or pharmacist for alternatives. If necessary, they should be signed off sick and the organisation's sickness policy followed.

Be alert to the risk of employees feeling under pressure not to take their medication (or the full dose) so they can continue to drive. The consequences could be just as serious.

Provide Alternatives

Do not provide alcohol at lunchtimes (during meetings, for example).

At office events or parties make sure non-alcoholic drinks are available, and if possible, organise transport home or overnight stops for staff who want to drink. Remind staff who are driving not to drink alcohol and if they are staying overnight, they may still be impaired the following morning.

Plan Safer Journeys

Alcohol, drugs and many medicines cause drowsiness and increase the chances of falling asleep at the wheel. Ensure that staff consider this when planning journeys. For further advice see 'Driving for Work: Safer Journey Planning', available free from www.rospa.com/roadsafety/info/worksafejourney.pdf



Record and Investigate Crashes and Incidents

Require staff who are involved in a work-related crash, including damage-only incidents, to report it to their line manager. This enables, where practicable, an investigation to be conducted to determine whether the driver's fitness was a contributory factor, and what (if any) action is necessary to prevent repeat occurrences. Keep the organisation's insurers informed.

Require Drivers to Notify Drink and Drug Related Offences

Require drivers who have been cautioned, summoned or convicted in relation to drug or alcohol offences to inform their line manager so that a discussion can take place about whether they need help to ensure that they do not drive while impaired.

Conduct Screening Tests

Some organisations conduct screening tests for alcohol or drug misuse, either on a random basis for all staff, as part of recruitment or if there is a reason to suspect a particular individual may have a problem. Screening raises many civil liberties issues and is only likely to be effective if developed in careful consultation with staff and their representatives and makes a demonstrable contribution to reducing risks. It should lead to help being provided for anyone with a problem, and be seen as a deterrent rather than a method of 'catching employees'. It is important to ensure that staff are aware that screening may take place and consent to it; therefore, this should be written into contracts of employment (again in consultation with staff and their representatives).

Monitor and Review

Managers should discuss at-work driving, including the issue of drink, drugs and medicines, with their drivers during periodic staff appraisals and team meetings.

Further Advice

www.hse.gov.uk/pubns/indg382.pdf – HSE Guide, 'Driving at Work'

www.hse.gov.uk/pubns/indg240.htm – HSE Guide, 'Don't Mix It'

www.hse.gov.uk/pubns/indg91.pdf – HSE Guide, 'Drug Misuse at Work'

www.rospa.com/roadsafety/info/worksafejourney.pdf – 'Driving for Work: Safer Journey Planner'

www.rospa.com/roadsafety/info/workspeed.pdf – 'Driving for Work: Safer Speeds Policy'

www.rospa.com/roadsafety/info/workmobiles.pdf – 'Driving for Work: Mobile Phones'

www.rospa.com/roadsafety/info/ownvehicles.pdf – 'Driving for Work: Using Own Vehicles'

www.drinkaware.co.uk

www.facocmed.ac.uk – Faculty of Occupational Medicine

www.rospa.com/drivertraining – RoSPA Guide: 'Managing Occupational Road Risk' (£25)

www.orsa.org.uk

www.dft.gov.uk (Road Safety section)

www.thinkroadsafety.gov.uk (Drinking and Driving, Drugs and Driving sections)

www.drugdrive.com

Company 'Drink and Drugs' Policy

As part of our overall health and safety policy, _____ is committed to reducing the risks which our staff face and create when on the road as part of their work. We ask all our staff to play their part.

Staff must not drive for work if their ability to do so safely is impaired by alcohol, drugs or medicines. Failure to comply with the policy will be regarded as a serious disciplinary matter.

Senior managers must:

- lead by example, by ensuring that they never drive if affected by alcohol, drugs or medicines and by following this policy.

Line managers must ensure:

- they also lead by personal example
- staff understand the dangers and consequences of driving while under the influence of alcohol, drugs or medicines
- staff receive appropriate training and education to help them avoid driving while under the influence of alcohol, drugs or medicines
- staff understand what to do if they consider their driving might be impaired by alcohol, drugs or medicines
- staff are confident that they can report and discuss any drink or drugs problems they might have with an appropriate person without fear of being treated unfairly
- work related road safety is included in team meetings and staff appraisals and periodic checks are conducted to ensure our Policy is being followed
- they follow our monitoring, reporting and investigation procedures to help learn lessons which could help improve our future road safety performance
- they challenge unsafe attitudes and behaviours, encourage staff to drive safely, and lead by personal example in the way they themselves drive.

Staff who drive for work must:

- never drive while under the influence of alcohol, drugs or medicines
- make arrangements so they do not need to drive if they know they will be drinking alcohol
- avoid drinking alcohol at lunchtime, especially if they know they will be driving later
- be aware that they may still be over the limit, or affected by alcohol the morning after they have been drinking
- be aware that prescription drugs or over-the-counter medicines can affect driving and can cause sleepiness
- report drug and alcohol problems, including cautions, summons or convictions for alcohol or drug related offences, to their line manager
- co-operate with monitoring, reporting and investigation procedures.

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The Royal Society for the Prevention of Accidents
Edgbaston Park, 353 Bristol Road, Birmingham B5 7ST
Telephone: 0870 777 2171/0121 248 2000. Fax: 0870 777 2199/0121 248 2001

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