



Public – To be published on the Trust external website

Staff Alcohol, Substance and Other Drugs Use Procedure

Ref: HR-0061-v1

Status: Approved

Document type: Procedure

Overarching Policy Document: [Staff Health, Wellbeing and Attendance Procedure](#)

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1 Introduction

Tees, Esk & Wear Valleys NHS Foundation Trust is committed to promoting and maintaining the health, wellbeing, safety and welfare of all staff. The Trust wishes to offer an environment in which staff feel confident and safe in seeking help for alcohol, substance, or other drug related problems. Maintaining staff physical and mental health results not only in more effective delivery of services but also assists in the trust being an employer of choice.

The Staff Alcohol, Substance & Other Dugs Use Procedure is in place to ensure there is clarity for all staff relating to use of alcohol, substances and other drugs in their personal lives and potential consequences of such use whilst in the workplace.

The Trust recognises the need for an understanding, supportive and non-judgemental approach and is committed to helping those staff who are themselves committed to overcoming their difficulties. It recognises that excessive use of and/or dependence on alcohol, substances or other drugs by any of its staff members may affect their own health and can also affect their attendance, performance, working relationships, relations with patients and the public.

The procedure sets out the Trust's commitment to raising awareness of the risks to a person's health and wellbeing associated with consuming alcohol, substances and other drugs.

It also sets out the Trust's aim to support and guide staff who acknowledge they are using alcohol, substances and other drugs to such an extent that their health and wellbeing is adversely affected, with the overarching focus being one of a sustained recovery for the affected staff member.

The Trust appreciates the value of work and identifies that work can be a stabilising factor for employees dealing with dependency. To that end, and wherever possible, the Trust will seek to support employees to engage in work, with access to treatment and ongoing support, if possible whilst acknowledging patient and colleague safety is paramount.

This procedure is critical to the delivery of the Trust's ambition for people to lead their best possible lives and to help deliver the key strategic goal of co-creating a great experience for our colleagues. Specifically, it helps us deliver this goal by ensuring our organisation and staff are supported and helped towards a sustained recovery when a concern is identified, either by themselves or the Trust about their use of alcohol, substance and other drugs, contributing to a well led and managed organisation.

2 Purpose

The purpose of this procedure is to ensure that staff members with alcohol, substance or other drug use related problems are dealt with sensitively and in a way that is intended to help and support them to overcome these problems whilst also balancing our responsibility to the vulnerable people who use our services.

This procedure also provides guidance on situations where staff members are not fit for duty but who do not necessarily have an alcohol, substance or other related problem. For example, consuming alcohol or drugs at times when this may influence their performance at work. In such circumstances, it may be appropriate to deal with the matter in accordance with the Trust's [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff](#).

3 Who this procedure applies to

Tees, Esk & Wear Valleys NHS Foundation Trust is committed to providing equal opportunities in employment practice. The implementation of this procedure will not discriminate directly or indirectly on the grounds of gender, sexual orientation, marital status, caring responsibility, ethnic or national origin, religion, culture, disability, age or trade union membership.

This procedure applies to all staff employed or work / volunteer in our services and should be followed in a supportive manner which upholds the Trust values of Compassion, Respect and Responsibility.

3.1 Roles and Responsibilities

This procedure provides clear guidelines to staff and managers to enable an appropriate balance to be achieved between the needs of the service and the needs of individuals who may require additional support as a result of alcohol or drug use. The procedure identifies the following roles and responsibilities of all staff in helping to achieve this and seeks to ensure that issues of alcohol, substance and other drugs related are dealt with fairly and consistently throughout the organisation.

Role	Responsibilities
Chief Executive	Overall responsibility for the implementation of this procedure
Executive Director of People & Culture	Has corporate responsibility for this procedure.
Senior Operational Managers and Clinical Directors	To ensure managers implement the procedure and promote awareness of it amongst employees.
People & Culture Directorate	The People & Culture directorate is available to advise and support both employees and line managers in the application of this procedure and to monitor its effectiveness. The People & Culture directorate will also support managers in conducting any required investigations.

<p>Line Managers</p>	<p>Managers are responsible for ensuring implementation of the procedure and to promote awareness of it amongst their staff through a understanding, supportive and non-judgemental approach</p> <p>If a manager suspects that work problems have occurred because of alcohol, substance or other drug use, help to identify these are in Appendix 3 which is a list of signs and symptoms common to alcohol, substance or other drug use.</p> <p>Managers have a responsibility to monitor their staff's job performance. If problems relating to this procedure are suspected or identified, steps must be taken immediately in accordance with this procedure and their senior management team advised.</p> <p>If there is a suspicion of a staff member attending work under the influence of alcohol, substance or other drugs a discussion between the staff's Line Manager (or another Manager if they are not available) with the individual must take place in a sensitive non-judgemental manner to raise the concerns in such a way to promote help seeking. The discussion should be contemporaneously documented and signed by all parties present.</p>
<p>All Staff employed by the Trust (inclusive of Apprentices and learners)</p>	<p>Staff members are responsible for complying with this procedure. Staff members who are concerned about their health, or who know they have an alcohol, substance and/or other drug use problem, should seek advice and help as soon as possible, initially from their line manager or Occupational Health. The help offered will be, non-judgemental and confidential.</p> <p>See Alcohol & substance misuse agreement in Appendices.</p> <p>Staff members who are aware or suspect that a colleague may have an alcohol, substance and/or other drug use problem should not hide the issue; to do so may put the staff member, colleagues and patients at risk. Staff members should encourage their colleague to seek help and advice whilst observing the need for confidentiality.</p>

	<p>If the colleague will not accept help, then an approach should be made in confidence to the line manager, People & Culture directorate, or alternatively, employees should consider using the Trust's Freedom to Speak Up (Whistleblowing) Policy to bring this to the attention of management.</p> <p>All staff members have a duty of care to ensure that the confidence of patients and colleagues is not affected by the consumption of alcohol, substances or other drugs and the Trust advises that alcohol should not be consumed eight hours or less before starting a shift including on-call and/or stand-by duty. The quantity of alcohol consumed could mean this timescale needs to be increased.</p>
Occupational Health Service	<p>The Occupational Health Service will support the trust in the promotion and awareness of alcohol and other substance use problems and encourages early identification.</p> <p>They will provide advice and guidance to individual staff members and managers.</p>
Trade Unions	<p>Trade union representatives have a responsibility to encourage staff members to seek advice and assistance through this procedure and will also be available to support the staff member and their colleagues.</p> <p>Where staff members are required to attend formal meetings with their managers and representatives from the People & Culture directorate in respect of alcohol, substance or other drug use, employees can request to be accompanied by a trade union representative or a work colleague.</p>

4 Related documents

This procedure should be read, where appropriate, in conjunction with the Staff Health, Wellbeing and Attendance procedure and the Trust Code of Conduct and the [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff](#).

5 Procedure – General Principles

Alcohol, drugs and other substances have adverse effects at work. For example, hangovers can lead to absenteeism and/or impair performance and the smell of alcohol on an employee undermines confidence with the person's colleagues, service users and carers and ultimately in the Trust.

Evidence shows that employees who drink excessively, or inappropriately, or misuse other substances are more likely to have an accident, be absent from work and be less efficient. This procedure recognises how, unless proper arrangements are in place, drug and alcohol related issues in the workplace can impact adversely on the individual's colleagues, Teams, the delivery of the trust's strategic objectives, service user's care and the individual's objectives and performance.

5.1 Potential Hazards

Potential hazards arising from employees undertaking activities under the influence of alcohol, drugs or other substances are a risk to the confidence of the person's colleagues, service users and carers and the Trust.

5.2 Support and Assistance

It is recognised that employees with an alcohol, drug or substance misuse problem will require support and assistance. Whilst appropriate support and assistance will be made available, action may still be taken under the Trust's [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff](#), if staff report for work under the influence of illegal drugs/substances or alcohol.

5.3 Proactively seeking help

It is best to deal with any alcohol, drug or substance misuse problems by proactively seeking help before issues at work arise. All staff can be referred to Occupational Health or can ask for help via their own GP/Practice Nurse. If an employee requires support from their manager this will be dealt with sensitively and in confidence, for example they may need some time to attend appointments for support you or they may wish to exclude themselves from some work-related social events.

5.4 Risk assessment

A risk assessment of the risks arising from potential alcohol, drug or other substance abuse is a legal requirement under the Management of Health & Safety at Work Regulations 1999. Knowingly allowing an employee to continue working if affected by alcohol, drugs or other substances could render the Trust liable to prosecution.

5.5 No consumption during work shift

Alcohol, drugs and other substances must not be consumed during a work shift: including any rest breaks (paid or unpaid), for instance, lunch breaks. For clarity this does not include prescribed medication taken appropriately, it is fully recognised that some staff with long term health and neurodivergent conditions will need to take medication whilst at work.

Employees must not work, including when on-call and/or stand-by, whilst under the influence of alcohol, drugs or any other substances. Again, this does not include staff taking prescribed medication appropriately.

5.6 Being unfit, conduct and capability

Being unfit for duty through the consumption of alcohol, drugs or other substances is treated very seriously by the Trust. Being unfit for duty through the consumption of alcohol, drugs or other substances may constitute gross misconduct under the Trust's [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#).

As part of any formal conduct or capability action staff should be aware that consideration will be given to whether it is appropriate to notify an individual's professional and/or registration body.

5.7 Adverse effects on a staff member's working practice

It is important to recognise that the issue of consumption of alcohol and substances/drugs and being potentially 'under the influence' is not solely about being at work in these situations. An important factor is that alcohol and substances/drugs have different factors associated with them. Consuming alcohol is not in itself illegal, however the taking of most drugs is illegal, however taking drugs, whether it is in work or affects a staff member's working practice are very important considerations also for registered practitioners/clinicians. For Senior Trust staff this also matters in relation to their [Fit & Proper Person Test \(FPPT\)](#) declarations when working.

5.8 Employees abusing/misusing alcohol and/or other substances

Employees found consuming alcohol, illegal drugs and/or other substances whilst at work will be subject to [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#) action. Employees abusing/misusing, whether deliberately or unintentionally, legally prescribed drugs or legal substances whilst at work, such as, tranquillisers, solvents etc may also be subject to [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#) action. Evidence in relation to this situation may be retained by the Trust for any potential future action taken under such policies.

5.9 Near miss and substance consumption

When an incident/accident or 'near miss' occurs at work, the Trust reserves the right, in its absolute discretion, to ascertain if alcohol, drugs or substance abuse was a contributory factor and is a relevant consideration.

5.10 Criminal offence linked to substance consumption

Employees who commit a criminal offence due to alcohol, drugs or other substances consumption/abuse outside of work, will be dealt with in accordance with the Trust's [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#), after or alongside any criminal investigation, depending on the nature of the offence.

5.11 Employees supplying, consuming or in possession

Employees found supplying, consuming or in possession of illegal drugs or other illegal substances or found illegally supplying such items in the workplace will be subject to [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#) action.

5.12 Secure environments

Employees based in secure environments may be subject to planned and ad-hoc person and vehicle drug dog searches as part of localised security procedures. If HMPPS security staff suspect an employee is intoxicated whilst at work the regional security team will be contacted to conduct a drug/breathalyser test on site (with the consent of the member of staff). The results, if positive will be dealt with in accordance with the Trust's [Managing Concerns of Potential Conduct \(Disciplinary\) Procedure](#) or [Dealing with concerns affecting Medical Staff Policy](#) and the employee sent home with safeguarding measures in place.

5.13 Accidental intoxication

For instances of accidental intoxication (i.e. SPICE) in HMPPS establishments, staff should follow the Health & Justice incident support flow chart and escalation process. It is recognised that this situation could also occur in other Services within the Trust and advice should be taken from Service/Line Managers in those situations on what process should be followed.

5.14 Driving

Where the person drives a Trust vehicle, then we shall follow the advice of the DVLA which states:

Alcohol misuse normally requires a revocation of a Group 1 license for 6 months after controlled drinking or abstinence has been achieved, whereas Group 2 drivers require 12 months to elapse. Alcohol dependence requires a year's abstinence for Group 1 and 3 years for Group 3 drivers.

<https://www.gov.uk/guidance/drug-or-alcohol-misuse-or-dependence-assessing-fitness-to-drive>

6 Procedure – Additional Support For Staff: Declaring a problem with Alcohol, Substances & Other Drugs Use

The Trust will endeavour to raise issues in a sensitive and non-judgemental manner to promote help-seeking. Support for those colleagues who are found to have a problem with alcohol, substances and/or other drugs that could affect them personally and their performance at work. Every effort will be made to provide advice, guidance and information regarding the relevant internal and external support networks that are available to them.

For those staff who either declare a problem with alcohol, drugs or other substances or it is suspected that they are under the influence of such a substance, the procedural arrangements are as follows:

6.1 Staff member / employee seeking help and advice

- Individuals are encouraged to declare any problem with regards to the alcohol or substance abuse voluntarily to their line manager or a trusted colleague.
- The Trust will provide reasonable support to individuals who voluntarily express concern that their use of drugs or alcohol may cause them to be unable to comply with this procedure. The type of support will vary to suit individual circumstances, the role they are employed in and considering advice from Occupational Health following confidential assessment. The support may include:
 - The offer to enter into an Alcohol / Substance Misuse Agreement
 - Consideration of temporary redeployment
 - Signposting to agencies for support and treatment.
 - Occupational health advice, including management advice on the proposed support for the employee and a view on their fitness for work.
 - Acknowledgement that periods of sickness absence may be necessary to aid with rehabilitation.
 - Reasonable / agreed time to attend meetings relating to treatment.
 - Consideration of working flexibly, reducing hours or reasonable adjustments to duties / tasks.

6.2 Manager concerned about staff member problems with regards to the alcohol or substance abuse

6.2.1 Identifying concerns and arranging discussion

If the manager is concerned - normally because of deteriorating work performance, or attendance, or other signs (see Appendix 3); or if a colleague or the employee draws the attention of the manager to problems, then they should discuss these with the employee from a welfare driven perspective. Before any discussion takes place, the manager should seek further advice from the People & Culture Directorate. It may be appropriate to offer the employee to attend any discussion accompanied by a union representative or work colleague.

6.2.2 Further employee welfare discussion

There may be a need for more than one discussion, but it is important that the discussion is conducted in a strictly confidential manner, is driven from an employee welfare perspective and is confined to the aspects of work performance and behaviour and possible underlying causes only. The opportunity should be given for the employee to seek more skilled help and advice.

6.2.3 Employee acceptance of help

If the employee accepts that further skilled help and advice is needed, the manager should refer them to Occupational Health and may complete alcohol and substance misuse agreement with the individual.

6.2.4 Employee does not consider they need help

If the employee does not consider they need help, the manager should offer the opportunity to seek further advice and strongly advise referral to the Occupational Health Department. Whatever the outcome of the discussion the manager must continue to monitor the situation and be prepared to take further action if necessary.

If an employee rejects the opportunity to seek advice/help and there is an issue with work performance/behaviour the Manager should seek advice from the relevant People Partner / Officer. Employees should be made aware that concerns relating to their work performance or conduct may be dealt with formally depending on the seriousness of the situation and the nature of their role.

6.2.5 Treating as a health issue where possible

Alcohol and substance misuse will, in the first instance or wherever possible, be treated as a health issue, unless there are any behavioural or performance issues that are deemed to be capability or conduct concerns. In this event, advice should be sought from operational HR.

6.3 Use of Alcohol, Substance & Other Drugs Use Agreements

This agreement is optional and between the individual employee and the Trust. It is designed to both encourage the employee who is misusing alcohol, drugs or other substances to voluntarily seek

help and to explore and document the support that the Trust can offer. It may include timescales/review period.

6.3.1 Aims and conditions of the Agreement

- To encourage and assist employees, who know or suspect their alcohol consumption or substance misuse is affecting their behaviour and or work performance, to seek help at an early stage.
- To document an agreed support plan for the individual, ensuring a caring and consistent approach is offered by managers to assist their staff who have recurring alcohol related or substance misuse problems. Support options that may be considered (but are not exhaustive) are detailed in Appendix 4 (below).
- Staff can opt and out of the agreement at any time.

6.4 Recovery Focus & Support

As detailed throughout this procedure the approach to implementation by managers and colleagues is expected to be a supportive one with an emphasis on a person's sustained recovery. Support will be offered from Trust health and wellbeing services; and external specialist alcohol and substance use services.

It is important to acknowledge that if staff enter into an Alcohol/Substance Misuse agreement and/or acknowledge they have a current or developing significant alcohol/substance use issue this should be positively acknowledged within their workplace and by Managers and the future focus should be, where possible, on sustained recovery and a full return/continuation of meaningful work.

7 Definitions

Term	Definition
Drug	<p>A controlled drug (defined under the Misuse of Drugs Act 1971 and subsequent orders) or any substance capable of altering an individual's thinking or behaviour, including items prescribed or purchased over the counter.</p> <p>Drug and other substances misuse and/or abuse refers to the use of illegal/legal drugs and the misuse, whether deliberate or unintentional, of legal prescription drugs, such as tranquillisers and solvents.</p>

Drug Misuse	To misuse a drug is to use a drug for purposes it is not intended for.
Drug Abuse	People who abuse drugs typically do not have a prescription for what they are taking. Not only do they use it in a way other than it is prescribed, but they also use it to experience the feelings associated with the drug.
Alcohol and Substance Misuse	Alcohol and substance misuse is defined as the abuse of alcohol or other drugs where it has a detrimental effect on the physical and mental wellbeing, family life or work performance. Alcohol and substance misuse affects concentration, co-ordination and work performance which may be detrimental to patients, colleagues and the quality of service provided to the public.
Incident	Unplanned or uncontrolled event which has or could have resulted in injury to persons or damage to Tees, Esk & Wear Valleys NHS Foundation Trust property.

8 How this procedure will be implemented

The procedure will be published on the staff intranet (with specific links to the procedure from the existing [Health and Wellbeing Alcohol and Substance Use intranet page](#)) and external Trust website.

Staff Health & Wellbeing Champions will also be asked to promote the procedure with colleagues in their own Teams and Services.

Line managers will disseminate knowledge of this procedure to all Trust staff members through local line management briefings.

8.1 Implementation action plan

Activity	Expected outcome	Timescale	Responsibility	Means of verification/ measurement
All staff email sent to inform full Trust staff group of the procedure	To make as many staff as possible aware of the procedure	Within one week of final publication	Communications Team in conjunction with Staff Health & Wellbeing Lead	Email evidence

Links to procedure embedded into existing Alcohol, Substance & Other Drugs Use Intranet page (within Health & Wellbeing intranet pages)	To ensure any staff member looking for support and guidance on this issue will encounter the information	Within one week of final publication	Staff Health & Wellbeing Lead in conjunction with the Comms Team	Links contained within the Intranet pages
Monthly posts for 3 months to all Staff Health & Wellbeing Champions about the procedure	To make as many staff as possible aware of the procedure	First post within first week of final publication, thereafter at least one post during the following two months	Staff Health & Wellbeing Lead	Evidence of Champions posts sent
Hold Alcohol, Substance & Other Drugs Use awareness roadshows at main Trust bases throughout each year	To make as many staff as possible aware of the procedure and have support/signposting discussions where needed	At least two roadshows to be held across the Trust during each calendar year	Staff Health & Wellbeing Lead in conjunction with Health & Wellbeing Coordinator and Communications Team	Evidence of Roadshows taking place
Hold Alcohol, Substance & Other Drugs Use awareness Lunch & Learn sessions via MS Teams	To make as many staff as possible aware of the procedure and have support/signposting discussions where needed	At least twice each calendar year	Staff Health & Wellbeing Lead in conjunction with Health & Wellbeing Coordinator and Communications Team	Evidence of Lunch & Learn sessions taking place

8.2 Training needs analysis

The Trust's Health & Wellbeing Team will raise awareness of the procedure's existence at every opportunity. As this is a potentially sensitive issue the Trust will review the procedure six months after introduction to ensure that the procedure is known, is being implemented fairly and consistently and to add any important omissions and learning from its initial use across the Trust by discussing with the Trust's People Partners, Operational Managers and Staff-Side Unions. The Trust will also continue to review feedback from the Quarterly NHS Pulse Survey data, annual NHS Staff Survey data and Health Needs Assessments undertaken about Alcohol, Substance and Other Drugs Use.

Regular awareness raising roadshows at main Hospital sites and large community base sites will take place, with at least 2 roadshows across the Trust's geographical patch each year. At least two online MS Teams Lunch & Learn session will also take place each year to raise awareness of use.

The latest and up-to-date Alcohol, Substance & Other Drugs awareness and support information will be included on the Alcohol, Substance and Other Drugs Use page within the Staff Intranet Health & Wellbeing pages to ensure alcohol units awareness and significant health conditions affected by excessive alcohol and/or substance use are brought to the attention of staff.

This procedure and awareness of Alcohol, Substance & Other Drugs Use will be conveyed to new employees as part of the in-person induction process (which happens twice each month) and through Trust events such as Annual General Meetings and other Trust Conferences and large-scale events where staff health and wellbeing is promoted and discussed. The issue will also be discussed as part of healthy lifestyles discussions during health and wellbeing input into Team development sessions.

Scenario-based learning will also be included in Health & Wellbeing Bite-Sized Manager Training sessions to raise their awareness of possible alcohol and substance misuse support need of staff. The Trust's Health & Wellbeing Conversation Staff Training Programme will also include an element of scenario-based learning on this subject.

Staff/Professional Group	Type of Training	Duration	Frequency of Training
All staff	Health & Wellbeing Conversations Training		As advertised
All staff	Management & Leadership Bite size training		As advertised
New staff	Featured within Health & Wellbeing Service awareness at the Trust's in-person Welcome events	30 minutes	Twice Monthly (1 st & 3 rd Mondays of each month)

9 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group).
1	Survey to all staff within first year following final publication	Frequency = Once Method = MS Forms survey via email Responsible = Staff Health & Wellbeing Lead	People & Culture Committee; Strategic Health & Wellbeing Group
2	Qualitative feedback from staff who have used the procedure	Frequency = Ongoing Method = Email/In-person	People & Culture Committee; Strategic Health & Wellbeing Group

		Responsible = Staff Health & Wellbeing Lead	
3	Number of cases within People & Culture Directorate that have involved issues relating to Alcohol, Substance & Other Drugs use	Frequency = Ongoing Method = Report by Operational People & Culture People Partners Responsible = Staff Health & Wellbeing Lead	People & Culture Committee; Strategic Health & Wellbeing Group

10 References

- NHS website www.nhs.uk
- Management of Health & Safety at Work Regulations 1999
- <https://www.gov.uk/guidance/drug-or-alcohol-misuse-or-dependence-assessing-fitness-to-drive> (DVLA)

11 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	15 July 2025
Next review date	15 July 2028
This document replaces	Not applicable as new procedure
This document was approved by	People & Culture Policy Working Group and Staff-side
This document was approved	27 June 2025
This document was ratified by	JCC
This document was ratified	15 July 2025
An equality analysis was completed on this procedure on	03 December 2024
Document type	Public

FOI Clause (Private documents only)	n/a
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Change record

Version	Date	Amendment details	Status
1	15 July 2025	New document	Approved

Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	People & Culture
Title	Alcohol, Substance & Other Drug Use Procedure
Type	Procedure
Geographical area covered	All areas of Trust
Aims and objectives	To clearly set out the expectations for staff within the workplace in relation to the use of alcohol, substances and other drugs
Start date of Equality Analysis Screening	03 December 2024
End date of Equality Analysis Screening	03 December 2024

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All Trust staff Service users & carers indirectly
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	<ul style="list-style-type: none"> • Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO • Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	
Describe any positive impacts / Human Rights Implications	<p>The aim of the procedure is to set out clearly the expectations of the Trust for staff when they attend the workplace, potential implications for their professional registrations if applicable and a reminder of the Government's official guidance in relation to the maximum numbers of alcohol units a person should consume in a week.</p> <p>The procedure is designed to help and maintain staff health and wellbeing in and outside of work.</p>

Section 3	Research and involvement
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What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	Government Guidelines on maximum number of alcohol units to be consumed and fitness to practice guidelines. The procedure is based on an existing and internally approved Alcohol and Substance Use policy that is in place in South Tees Hospitals NHS Foundation Trust
Have you engaged or consulted with service users, carers, staff and other stakeholders including people from the protected groups?	The Draft Alcohol, Substance & Other Drug Use Procedure was reviewed and discussed during 2024 via a Task & Finish Group made of interested staff, staff Health & Wellbeing Champions and including staff-side union representation. Specific meetings with People & Culture Directorate People Partners
If you answered Yes above, describe the engagement and involvement that has taken place	Various Task & Finish Group meetings via MS Teams + six week all sta
If you answered No above, describe future plans that you may have to engage and involve people from different groups	Broad launch of procedure when approved across all Trust media

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	

Appendix 2 – Approval checklist

To be completed by lead and attached to any document which guides practice when submitted to the appropriate committee/group for consideration and approval.

Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title		
Is the title clear and unambiguous?	Y	
Is it clear whether the document is a guideline, procedure, protocol or standard?	Y	
2. Rationale		
Are reasons for development of the document stated?	Y	
3. Development Process		
Are people involved in the development identified?	Y	
Has relevant expertise has been sought/used?	Y	
Is there evidence of consultation with stakeholders and users?	Y	
Have any related documents or documents that are impacted by this change been identified and updated?	Y	
4. Content		
Is the objective of the document clear?	Y	
Is the target population clear and unambiguous?	Y	
Are the intended outcomes described?	Y	
Are the statements clear and unambiguous?	Y	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Y	
Are key references cited?	Y	
Are supporting documents referenced?	Y	

6. Training		
Have training needs been considered?	Y	
Are training needs included in the document?	Y	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Y	
8. Equality analysis		
Has an equality analysis been completed for the document?	Y	
Have Equality and Diversity reviewed and approved the equality analysis?	Y	Approved LC – 03 Dec 2024
9. Approval		
Does the document identify which committee/group will approve it?	Y	PWG and JCC
10. Publication		
Has the procedure been reviewed for harm?	Y	No harm
Does the document identify whether it is private or public?	Y	Public
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	n/a	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Y	
Do all pictures and tables have meaningful alternative text?	n/a	
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Y	

Appendix 3 – Guidance on the signs of alcohol, substance or other drugs use

Alcohol or drug abuse is not necessarily concerned with isolated instances of absenteeism or poor work performance, but often with a pattern of deteriorating work performance over a period of time.

Evidence of inadequate or deteriorating work performance

- Frequent lateness, repeated brief periods of absence
- Impaired concentration and memory.
- Absenteeism, particularly related to weekends, and high absenteeism rates for colds, 'flu', gastro-enteritis, depression etc.
- Accident proneness, minor accidents at work and accidents off duty.
- Mistakes, errors of judgment.
- Improbable excuses for poor job performance.
- Increasing general unreliability and unpredictability.

Observation of behaviour and appearance

- Smelling of alcohol.
- Under the influence of alcohol, drugs or other substances during working hours
- Mood changes, irritability, lethargy
- Deterioration in working relationships
- Borrowing money
- A combination of hand tremor, slurred speech, facial flushing, bleary eyes, poor personal hygiene, unkempt appearance

Relationships with colleagues

- Over-reaction to real or imagined criticism
- Unreasonable resentment
- Uncharacteristic irritability
- Complaints from colleagues
- Avoidance of manager or other senior employees
- Borrowing money from colleagues

It should be emphasised that some of the above features may have other causes, such as employees who have health conditions that may give the appearance and/or impression of an alcohol, drug or other substance misuse problem but is, in fact, only symptomatic of their health condition.

Appendix 4 – Alcohol, Substance & Other Drugs Use Agreement

CONFIDENTIAL

ALCOHOL & SUBSTANCE & OTHER DRUGS USE AGREEMENT

Part 1:

You are now being offered assistance in confidence under the terms of the Alcohol and Substance/Other Drugs Safe Use Procedure.

You may accept or reject this offer, but you are strongly urged to accept. Please complete the section below.

The only copy of this agreement will remain with the individual staff member

I have read and have had the opportunity to discuss the main points of the agreement

ACCEPT ☐☐

REJECT ☐☐

Manager Referral ☐☐

Name Of Employee:

Date of Birth:

Signature:

Date:

Appendix 5 - Removal from the Alcohol, Substance & Other Drugs Use Agreement

REMOVAL FROM THE ALCOHOL, SUBSTANCE & OTHER DRUGS USE AGREEMENT

a) I understand that I am being removed from the agreement under the terms outlined at the outset.

b) I am no longer under the provision of the agreement from the date stated below.

C) The only copy of this agreement will remain with the individual staff member

Name Of Employee:

Date of Birth:

Signature:

Date:

Appendix 6 - Self-Removal from the Alcohol, Substance & Other Drugs Use Agreement

SELF REMOVAL FROM THE AGREEMENT

I have made an informed choice to remove myself from the Alcohol, Substance & Other Drugs Use agreement with effect from and the terms outlined at the outset no longer apply.

Name Of Employee:

Date of Birth:

Signature:

Date:

Appendix 7 - Main Terms of the Agreement

To be given to all employees entering into the agreement:

MAIN TERMS OF THE AGREEMENT

The agreement is between the employee and the trust.

Employees with a confirmed alcohol or substance use problem are entitled to:

1. Support or signposting from the Occupational Health Service.
2. Authorised absences where necessary for the purpose of treatment.
3. Security of employment – following authorised absences for treatment.
4. Alternative employment or temporary adjustment of the job tasks during the period of treatment. Alternative employment will be made where it is mutually agreed by the employee, Occupational Health and the Manager/People & Culture Directorate with the support of union representation if required.
5. Alcohol and Drug use will be treated as a health issue unless there are any conduct or performance issues that affect patient care and safety.
6. The agreement may be terminated when the employee:
 - Without due cause refuses to acknowledge the existence of a substance misuse problem.
 - Refuses or fails to comply with advice suggested by the Occupational Health Department.
 - Fails to attend appointments.
 - Fails to respond to or benefit from the agreement.
 - Fails to inform the Trust of any alcohol / substance use incidents with police involvement that are later brought to the Trust attention.
 - If the agreement is no longer required for an agreed reason
 - The employee has successfully completed the agreed review period.
7. In the event of a conduct issue, alcohol or substance use may be considered as mitigation if the employee has already sought help either through Occupational Health or via an external agency. Confirmation would be required that assistance has been sought from an external agency.
8. Relevant information will be exchanged for review purposes with the employee's manager with the employee's consent.

Appendix 8 - Alcohol units

For the latest Government guidance on the number of alcohol units a person should not exceed on a weekly/daily basis please visit:

[Alcohol units - NHS](#)

Appendix 9 - Trust support



11.1 Introduction

We are committed to ensuring all colleagues thrive and have a great experience of working for TEWV. Our people play a vital role in ensuring we provide high quality, safe, kind, effective and personalised clinical care to the people we support.

Our journey to change sets out why we do what we do and the kind of organisation we want to be. Ultimately, we want people to lead their best possible lives so supporting your health and wellbeing couldn't be more important to us.

We have produced this leaflet as a summary of some ways in which we offer support to our staff to help their health and wellbeing.

More information is available on our Health and Wellbeing pages, or you can contact the Health and Wellbeing team if you have any queries on tewv.healthandwellbeing@nhs.net

11.2 Employee Support Service (ESS)

This service provides a safe and confidential support for staff with a range of health and wellbeing needs, offering impartial advice and signposting. It can also make referrals into the Employee Psychology Service, see below.

Some examples of the type of support provided:

- Work related stress
- Long term health conditions
- Personal issues impacting on work
- Support through sickness absence and return to work and planning
- Listening, advice and support
- If appropriate, access to the Employee Psychology Service (EPS) for work related issues

- Signposting to other services and teams

How to access the Employee Support Service:

Email: TEWV.employeesupportservice@nhs.net or call us on 07827 987 383.

You can reach us between 8am – 6pm Monday to Thursday and between 9am – 5pm on Fridays.

11.3 Employee Psychology Service (EPS)

The Employee Psychology Service (EPS) provides a range of psychological interventions for TEWV employees who are experiencing work-related stress.

The aim of the service is to help you recover from, and develop resilience to, work-related stress, anxiety and depression. We do not regard you as a patient, client or service user, but rather a colleague in need of some support. Therefore, although we do keep brief notes, there is no mental health record such as on CITO.

The support can be on a 1:1 basis or via groups.

There are some situations where staff are not eligible to access the EPS, such as if you are receiving therapy or are on the waiting list, you are under a disciplinary, grievance or capability process at work or if you are already under the care of mental health services.

If you are struggling with stress, anxiety, low mood or the impact of traumatic experiences due to work you can contact the Employee Support Service to discuss a referral to the EPS via email at:

TEWV.employeesupportservice@nhs.net .

If you would like to discuss what the service can offer, you can contact the Employee Psychology Service directly on 01642 374965 or email TEWV.epsservice@nhs.net

The service operates 9.00am to 5.00pm, Monday to Friday.

11.4 Counselling Services via VIVUP



Confidential support where you can speak to fully qualified counsellors and support specialists 24/7, 365 days a year to discuss any emotional, personal or work-related issues.

You can use this service as many or few times as you like, there is no limit on the support you can receive. Their support is available via virtual clinics or face to face counselling appointments.

When you call, you will be asked a few questions so they can provide you with the right support. You can also register via their website, all you need is your assignment / employee number or alternatively copy the link below into your web browser:

<https://vivup.tercltd.co.uk/?CODE=103801>

Contact details: 0330 380 0658

Website: www.vivup.co.uk

VIVUP also offer access to a range of self-help guides, podcasts and many more resources on a range of topics via their website.

11.5 Staff Mindfulness Service

Mindfulness is a particular kind of awareness. We all have the capacity for mindfulness, and it can be strengthened and developed by relatively simple meditation practices. These practices help us to pay attention to our moment-to-moment experience. As mindfulness develops, the mind becomes more focussed and steadier; we become more aware of our thoughts and feelings - but less often swept away by them; we are more 'present' and tuned in to those around us; we respond more wisely to difficulties and stress.

Our staff mindfulness service

Mindfulness is available in the Trust for all staff (clinical and non-clinical). Most courses and one-off sessions are being delivered online through Microsoft Teams. Sessions are now open to all staff including those without previous experience of mindfulness.

For further information on our staff mindfulness service please email

tewv.mindfulness@nhs.net

Please also see our staff webpage for details of our current offerings, here is the link:

[Mindfulness for health and social care staff - Tees Esk and Wear Valley NHS Foundation Trust \(tewv.nhs.uk\)](https://www.tewv.nhs.uk/about-your-care/treatments-therapies/mindfulness-for-health-and-social-care-staff/#what-is-mindfulness) / <https://www.tewv.nhs.uk/about-your-care/treatments-therapies/mindfulness-for-health-and-social-care-staff/#what-is-mindfulness>

11.6 Occupational Health Services

The Trust's occupational health service provides key functions to help support staff such as:

- pre-employment checks such as immunisations and vaccinations
- management advice for long- and short-term sickness absence
- advice relating to long term health conditions, reasonable adjustments, redeployment, ill health retirement
- needlestick support
- potential Physiotherapy support

All referrals to these services are management led and staff can request a referral via their manager.

Your manager will receive a copy of the report after you have had an appointment, and they will forward this to you.

11.7 Chaplaincy

Chaplains are employed by the trust to give spiritual and religious care. They are there for people of all faiths and none.

Anybody can see a chaplain. Chaplains are available to talk to anybody about anything. You can trust a chaplain to listen to you and not judge you.

Members of staff can contact a chaplain for you and if you need to talk to somebody urgently, there is a chaplain on call from 8am to 8pm every day of the year. The on-call chaplain can be contacted on 01642 368809.

We provide a Trust-wide chaplaincy service and can be contacted on the following telephone numbers where you can leave a non-urgent message:

West Park Hospital, Darlington - 01325 552045
 Lanchester Road Hospital, Durham - 0191 4415805
 Roseberry Park Hospital, Middlesbrough - 01642 837396
 North Yorkshire, York and Selby - 07768 506512

You can also send an email to the chaplains at tevv.chaplaincy@nhs.net.

11.8 Financial Support

The cost-of-living crisis has seen the price of energy, council tax, fuel, food, broadband and other necessities rise at rates not seen since the 1970s.

One in three households are worried about their current financial situation, according to the Money and Pensions Service, and nearly half don't feel confident managing their money day-to-day.

It is vital, therefore, to remember you are not alone – the Trust is able to signpost you to a range of financial support in your local area.

VIVUP also offer debt management and financial support via their online self-help guides.

See the website below for a range of NHS discounts:

[Health Service Discounts: NHS Discounts, Offers & Codes](https://healthservicediscounts.com/) / <https://healthservicediscounts.com/>

We also work with two financial services partner organisations, Darlington Credit Union and Serve and Protect, to offer financial wellbeing support such a savings schemes, loans and advice.

To join or find out more information about the credit unions:

You can join via the [Darlington Credit Union website](https://darlingtoncreditunion.co.uk) , email info@darlingtoncreditunion.co.uk or call into the branch at Tubwell Row, Darlington.

[Serve and Protect Credit Union: Improving Financial Resilience](https://serveandprotectcu.co.uk) (serveandprotectcu.co.uk)

11.9 Professional Nurse Advocates (PNA)

Professional nurse advocates (PNA) were launched when frontline healthcare workers experienced stress, mental health problems and burnout from the Covid-19 pandemic. There became a need for more support to help people's restoration and recovery.

We know that if our colleagues are protected from chronic stress and poor mental health, they will have a better capacity to fulfil their roles.

Our PNAs can support your wellbeing.

Professional Nurse Advocacy – is a model of clinical supervision based on the A-Equip model.

The A-EQUIP model works for nurses in four ways:

- advocating for the patient, the nurse and healthcare staff
- providing clinical supervision using a restorative approach
- enabling nurses to undertake personal action for quality improvement.
- promoting the education and development of nurses

If you would like to speak to a professional nurse advocate, please email:

TEWV.pna@nhs.net .

Please also see the Trust intranets PNA page :
<https://intranet.tewv.nhs.uk/professional-nurse-advocates> or [Professional nurse advocates \(PNA\) | TEWV Intranet](#)

11.10 Domestic Abuse

Domestic abuse has the potential to affect every member of staff and, on this basis, the Trust have devised a toolkit as a resource for staff with lived experience, affected by domestic abuse or those who are concerned it may be affecting their colleagues. It is designed to be fully inclusive and used by all employees as and when needed.

Home and work issues cannot always be neatly separated. Abusive and violent behaviour does not only take place in the home. It can frequently cross over into the workplace, where victims experience stalking, threats, harassment and worse. Equally, work can be a lifeline to independence and survival for victims of domestic abuse as safe time to be able to leave their home to go elsewhere, whilst also maintaining a level of income independent from the perpetrator.

Domestic abuse happens in all communities, regardless of gender, age, disability, gender reassignment, race, religion or belief, sexual orientation, marriage or civil partnership and pregnancy, and there is a need to address domestic abuse consistently, regardless of who may be making the allegations.

We want to ensure that victims and survivors of domestic abuse are aware of the support available to them within our Trust, as well as signposting to external agencies when needed.

Please see [Domestic abuse toolkit | TEWV Intranet](#) / <https://intranet.tewv.nhs.uk/domestic-abuse> or email tewv.healthandwellbeing@nhs.net if you would like more information.

11.11 Sexual Safety in the Workplace

Everyone who works, trains, and learns within our organisation has the right to be safe and feel supported at work.

That's why we've come together with other NHS organisations to sign up to the [NHS sexual safety charter](#). It marks our commitment to keep you safe at work and stop sexual harassment.

Sexual safety covers a range of inappropriate sexual behaviour with different legal and operational definitions and processes. It includes language of a sexualised nature, sexual harassment, sexual assault, and rape. Some behaviour will be unlawful, some will not.

From July 2024, we will be taking a zero-tolerance approach to inappropriate sexual behaviour. This means that while we can't promise it won't happen again, we can promise we will be there for you if you report it.

We'll take action to educate all colleagues about what's okay and what's not.
We will provide training about sexual safety.

We will share clear messaging across our trust that tells people we will not tolerate inappropriate sexual behaviours.

We've compiled a [sexual safety toolkit](#) to provide guidance and resources for staff and managers.

Email tewv.healthandwellbeing@nhs.net if you are affected by this issue and would like more information or support.

11.12 Staff Networks

Did you know that we have staff networks that allow you to have your say and help drive forward important issues across the Trust?

Your views and support can help make a considerable difference regarding staff equality across the Trust and we encourage and welcome new members to join us.

The networks meet regularly and are open to staff who identify as being part of any of the community groups listed below:

- Black, Asian, Minority, Ethnic (BAME) Network
- Rainbow Lesbian, Gay, Bisexual, Trans Queer and Questioning + (LGBTQ+) Network
- Armed Forces Network
- Neurodivergent Network
- Long Term Health Conditions (LTHC) Network
- Staff lived experience Network

If you are interested in more information about the networks above, please contact: tewv.eandd@nhs.net

We also have the

- Working Carers Network Group
(email: tewv.workingcarers@nhs.net for more information)
- Menopause Matters Café

Most of the networks meet monthly; currently this is via Microsoft Teams.

11.13 NHS Talking Therapies Services

**Feeling down or anxious? We're here to help...
...and the way we do it is pretty low key.**

This service provides National Institute for Health and Care Excellence (NICE) recommended evidence-based therapies for staff with a range of common mental health needs. Staff can self-refer, or be referred by their manager, when feeling stressed, anxious, low or upset. Our trained therapists specialise in screening and treatment appointments and are available to discuss our therapies and whether they would be helpful at this time.

Examples of the type of therapy offered:

- Psycho-educational courses on how to manage how you feel with practical ways to help.
- Online computerised Cognitive Behavioural Therapy (Silvercloud) with therapist support.
- One to one therapy including Cognitive Behavioural Therapy (CBT), Interpersonal Therapy for Depression (IPT), Eye Movement Desensitization and Reprocessing (EMDR) for Post Traumatic Stress Disorder (PTSD) and Couples Therapy for Depression.
- Employment support offers practical support with find, remain, return or leave advice, which can be offered alongside therapy.
- Counselling for depression via Durham & Darlington and York & Selby Services.

We offer a range of remote and face to face appointments at a range of times. We understand that confidentiality can be a concern when accessing internal services - we work on a separate record system (IAPTus) and we closely monitor staff's access to all records.

Further information and how to access the NHS Talking Therapies Service across the trust:



NHS North Yorkshire
northyorkshiretalkingtherapies.co.uk
01609 768890



NHS York & Selby
yorkandselbytalkingtherapies.co.uk
01904 556840

NHS Durham & Darlington
durhamanddarlingtontalkingtherapies.org.uk
0191 3333300

All Services operate office hours Monday-Friday 9-5pm, however, we can offer some appointments outside of these hours. This is not an urgent response or crisis service. All urgent enquiries call 111 mental health helpline or see your GP.

There are many more support services available to you
For further information visit:

<https://intranet.tewv.nhs.uk/health-and-wellbeing>
[or email: tewv.healthandwellbeing@nhs.net](mailto:tewv.healthandwellbeing@nhs.net)