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A Best Practice Guide

for Managing Drink and Drug Misuse in the Workplace and when Driving for Work

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The Impact of **alcohol and drug misuse** in UK workplaces

The misuse of alcohol, illegal drugs, or the impact of certain prescription medications represents a serious and growing challenge for UK workplaces.

Alarmingly, it has been suggested that up to three million workers (3% of the total workforce) go to work under the influence of drugs or alcohol[1]. This has a significant impact on the workplace, with the loss of billions of pounds in lost workdays and productivity.

However, when it comes to the human cost, impairment caused by drugs and alcohol, has a higher cost, introducing significant risk to workplace safety.

Drugs and alcohol are well-proven to impair judgement, slow reaction times, and reduce hazard perception. Furthermore, the 'morning after' effect, social drinking around work-related travel, and the increasing prevalence of drug-driving deaths all show that this is a live safety concern, not a hypothetical one.[2]

Misuse directly affects safety, performance and can also risk affecting the duty of care that employers have for both staff and the wider public.

Alongside alcohol and illegal drugs, employers and employees also need to be aware of the potential side effects of some, often commonly prescribed, medications. For example, the reported rise in mental health conditions in recent years has led to greater prescribing of antidepressants and other medications, which, while often necessary and beneficial, may, cause blurred vision, dizziness, and reduced concentration. These potential side effects risk compromising safety, particularly in roles such as those which involve driving, operating machinery, handling chemicals or hazardous substances, and other tasks requiring sustained attention.

Drug and alcohol use is also more widespread in the general workforce than many realise. Around one in ten adults report using controlled drugs in the past year. In relation to alcohol, the picture is equally concerning: 15 per cent of UK adults drink at levels considered high risk, and about two per cent show signs of dependency. This means that in any organisation, across any sector, it is highly likely that some employees will be affected, even if the issue remains hidden.[3]

The business costs are substantial. Substance misuse is strongly linked with absence, reduced productivity, and workplace incidents. In Scotland alone, the financial impact of illicit drug use on employers is estimated at more than £800 million. More widely, throughout the UK, alcohol-related productivity losses are thought to exceed £7 billion each year. These figures highlight the hidden but very real financial burden on organisations, costs that escalate further when combined with reputational damage, legal risks, and the devastating human toll of serious workplace safety or road incidents[3].

Drink and drug driving incidents illustrate the dangers in the starkest possible terms. The scale of drug driving in the UK is growing at an alarming rate. In 2019, more than 12,000 people were convicted of drug driving offences, and government figures suggest drugs may be a factor in around 200 deaths every year. Reoffending is rife too; almost half (44 per cent) of offences are committed by repeat drug drivers[4].

Cannabis is the most commonly detected in drug-driving prosecutions, but cocaine and mixed substance use are also widespread, often intensifying impairment. Since the introduction of roadside drug testing in 2015, prosecutions have risen steadily, reflecting both improved enforcement and the scale of the challenge[5]. For organisations which have employees driving as part of their job – whether heavy goods vehicles, commercial vehicles, or simply to meetings with or without colleagues – the stakes are clear: a single lapse can lead to catastrophic harm, criminal liability, reputational damage, not to mention long-lasting consequences for victims and families. Internal controls are vital - enforcement alone cannot be relied on.

For employers, a proactive approach is now essential when it comes to drugs, prescription medications and alcohol affecting safety at work and when driving for work. Such measures are not only a duty of care but also good risk management.

Drug & Alcohol Testing:
Keeping everyone safe



The problem:

34%
of employees have used drugs or alcohol, or witnessed substance use or addictive behaviours during working hours

15%
of adults drink at levels considered high risk, and 2% show signs of dependency

It's not just drugs and alcohol –
Some prescription drugs (such as those used to treat conditions including anxiety or chronic pain) can impair decision-making or cause delayed reactions, particularly when driving or using safety critical equipment or hazardous substances.

It's always worth checking any side effects with your doctor and carefully reading the leaflet which comes with the medication.

Being under the influence of drugs, alcohol, and some prescription medications can lead to

- Slower reactions
- Poor co-ordination
- Distorted perception
- Blurred vision
- Dizziness
- Fatigue



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How impairment affects UK workplaces

£1.2bn - £1.4bn
per year - cost of workplace hangovers to the UK economy

£7.3bn
Lost productivity in the UK per year



36% of managerial and professional occupations reported heavy drinking

40% of industrial accidents at work are linked to substance abuse

22% of employees who have had a hangover at work admit to having made mistakes at work because of the hangover

60% of adults know someone who has gone to work under the influence

Driving under the influence – cost to life

National Police Chiefs' Council figures (England, Wales and N Ireland) and Government sources for 2023 show that:



20% of road deaths in 2023 were caused by drink or drugs

Drink and drug driving is suggested to be a factor in nearly 400 deaths each year and many more non-fatal accidents

42.2%
of tests for drugs were positive

14.5%
of drivers tested for alcohol were positive

4.7%
tested positive for both

44%
Almost half of offences are committed by **drug drivers**

One in six drink driving offences is committed by a reoffender

Modern Testing

Testing programmes are about keeping everyone safe

83% of workers would comply with a corporate testing policy, believing it is in everyone's interest to be safe at work

Types of testing have moved on considerably in recent years and can be as simple as a saliva swab or breath test



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Key risks caused by drugs and alcohol in the workplace



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Key risks caused by drugs and alcohol in the workplace

Workplace risks associated with drug and alcohol use stem from the effect these substances have on the body and the resultant behaviour of workers, presenting a risk to their work, their workplace, and the people around them.

The characteristics of a person's response to drug or alcohol use may be familiar to them or not and will be different for every individual.

Both physical and psychological impairments can negatively affect a worker's judgement and their capacity to safely complete the task at hand:

Physical characteristics associated with drug and alcohol use

- Slower reactions
- Poor co-ordination
- Distorted perception
- Blurred vision
- Tremors
- Dizziness
- Cramps
- Fatigue

Psychological characteristics associated with drug and alcohol use

- Poor concentration and confused thinking
- Over confidence and taking unnecessary risks
- Erratic behaviour
- Aggression
- Panic attacks or paranoia
- Risk taking behaviours may also reduce compliance with engineering, administrative or PPE safety controls



Key risks caused by drugs and alcohol in the workplace

Safety-critical roles

Impairment caused by drug and alcohol use can introduce significant risk to workplace safety, and this is true for any role, but is especially true for workers in safety-critical roles. The Health and Safety Executive defines such roles as those operating machinery, including heavy lifting equipment, or who use electrical equipment, hazardous substances or ladders[6].

Studies[7] [8] have shown that drug and alcohol can impair judgment, coordination and reaction times, and that this impairment continues long after consumption. This is clearly particularly dangerous in a safety-critical role, where a moment of lost concentration can have serious outcomes, resulting in accidents and even fatalities. It is therefore not surprising that reports suggest that 40 per cent of industrial accidents have been linked to substance misuse and half of all workplace fatalities[9].

Furthermore, those who use drugs and alcohol and who cause a workplace accident not only put themselves in harm's way, but also risk the safety of their colleagues.

Driving

Drugs and alcohol significantly increase the risks for anyone behind the wheel, and when driving is part of someone's job, the dangers are magnified: Long hours, early starts, shift work, and overnight stays all increase the likelihood of someone driving while still impaired from the night before. Even relatively small amounts of alcohol or drugs can impair reaction times, reduce hazard perception, and slow decision-making, leading to – for example – increased stopping distances, making collisions far more likely. Fatigue and irregular schedules can amplify these effects, meaning a driver may be impaired even below the legal limit.

The consequences are not limited to the driver. Impaired drivers put passengers, other road users, and particularly vulnerable people, pedestrians, cyclists, and children, at serious risk. Collisions in these circumstances often have severe or fatal outcomes.

Organisations therefore have a duty of care to minimise risks through clear policies, education, and a safety-focused culture that prevents substance misuse from interfering with saftey cricital roles and work-related driving.

Managing and preventing drug and alcohol misuse at work



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Where to start: A step-by-step guide

1. Policy Development

- **Consultation:** involve staff and safety representatives in policy creation/review.
- **Scope:** include named substances as far as possible - alcohol, illegal drugs, prescription and over-the-counter medicines.
- **Clarity:** clearly state that working while impaired is unacceptable and will lead to disciplinary action in absence of mitigating factors.
- **Communication:** clearly communicate the introduction of the policy to staff; and the consequences.
- **Amnesties:** this allows colleagues to seek help if needed before the policy is introduced, a helpful way of encouraging openness and collaboration.

2. Education and Awareness

- **Training:** provide information on the effects of alcohol and drugs in workplace settings, including safety-critical tasks like driving and operating heavy machinery.
- **Awareness:** many people do not know the full range of potential adverse effects of prescription drugs, or what an alcoholic unit is, for example, and it is important to raise awareness of such issues to help staff avoid falling foul of drug and alcohol policies, particularly as they are newly introduced.
- **Resources:** communicate legal limits, conservative approaches to risk, and the expectations of openness and disclosure around drug and alcohol use.

3. Screening and Testing

- **Consent-based:** include screening in employment contracts with staff consent.
- **Purpose:** use testing to identify problems and offer support not just to penalise.
- **Random vs Targeted:** conduct tests during recruitment, randomly, or when impairment is suspected as per organisation policy.

4. Support and Rehabilitation

- **Confidential help:** treat substance issues like any other medical condition.
- **Access to services:** signpost professional support for drug and alcohol misuse.
- **Non-punitive reporting:** allow staff to report impairment without fear of punishment (unless persistent).

5. Disciplinary Procedures

- **Consequences:** working while impaired should trigger serious consequences.
- **Consistency:** apply consequences fairly across all levels of the organisation.
- **Documentation:** record and investigate all incidents to determine root causes and prevent recurrence.

6. Monitoring and Review

- **Driver assessment:** regularly assess driving competence and attitudes.
- **Licence checks:** conduct annual checks, more frequently for high-risk drivers.
- **Incident reporting:** require reporting of all crashes, near misses, and offences.
- **Policy Updates:** review policies based on incident data and consultation.

7. Leadership and Culture

- **Lead by example:** executives and managers should adhere to the policy and model safe behaviour.
- **Just culture:** encourage open communication about drug and alcohol use, including prescription medications, without fear of undue repercussions.
- **Alternatives:** provide non-alcoholic options at events and discourage pressure on anyone to consume alcohol.

See the Drug & Alcohol Policy Quick-Reference Checklist on page 26 ›

Introducing policy and worker attitudes

A well-thought-out drug and alcohol policy is essential for any organisation, especially where driving or other HSE safety critical tasks are part of work. The policy should clearly explain the risks and outline the strategy and controls adopted by the organisation to manage these risks. A strong policy can support employee health and wellbeing, and promote a culture of responsibility, as well as reduce the chance of litigation, adverse publicity, business interruptions, and financial losses.

To comply with UK workplace drug and alcohol obligations, organisations should:

- ☑ Create and communicate a clear policy
- ☑ Conduct risk assessments to identify safety critical roles
- ☑ Implement fair testing procedures, complete with employee consent and confidentiality
- ☑ Provide support and resources for employees with substance issues
- ☑ Train managers to address misuse effectively

This comprehensive approach helps ensure a safe working environment by managing risks and compliance with health and safety, data protection, and anti-discrimination legislation.

Worker attitudes and the importance of training

Overall, and despite some mixed views in relation to the nuances of testing policies and approaches to testing, workers are overwhelmingly (and perhaps surprisingly) compliant when it comes to the idea of being tested by their employers for drugs or alcohol. The Drager Safety at Work Report 2022 found that 83 per cent of workers would comply with a corporate testing policy as they believe it is in everyone's interest to be safe at work[11].

This is set in the context that 78 per cent of managers surveyed said that their organisation had concerns about workplace impairment (and resulting injuries/accidents) due to alcohol, drugs and prescribed medications such as antidepressants.

These findings are reinforced by similar research undertaken in 2023 which showed that almost three-quarters (71 per cent) are in support of all employees in their organisation being tested for drugs and alcohol at work as part of a wider safety at work initiative. This figure increases yet further in what many might consider higher-risk workplaces, such as the oil and gas and renewables industries, where over 80 per cent of workers were in favour[12].

There is a slightly more mixed picture when it comes to who should be tested. While there is widespread acknowledgement of the fact that employers have responsibility beyond the workplace setting, with 70 per cent of employees working from home saying that they would agree to testing when working remotely from their own home, whilst 53 per cent of respondents believe that dangerous machinery operators should be tested, but not office workers.

These findings highlight the importance of informing and educating employees, through safety briefings or workplace posters and leaflets, when it comes to drug and alcohol testing policies in workplaces to explain why testing may be important for all employees, or for groups who may not initially appear to be in higher-risk roles.

Consider Legal Obligations

Employers who knowingly allow employees to work under the influence of drugs or alcohol, and so place co-workers or the public at risk of harm, could be found liable.

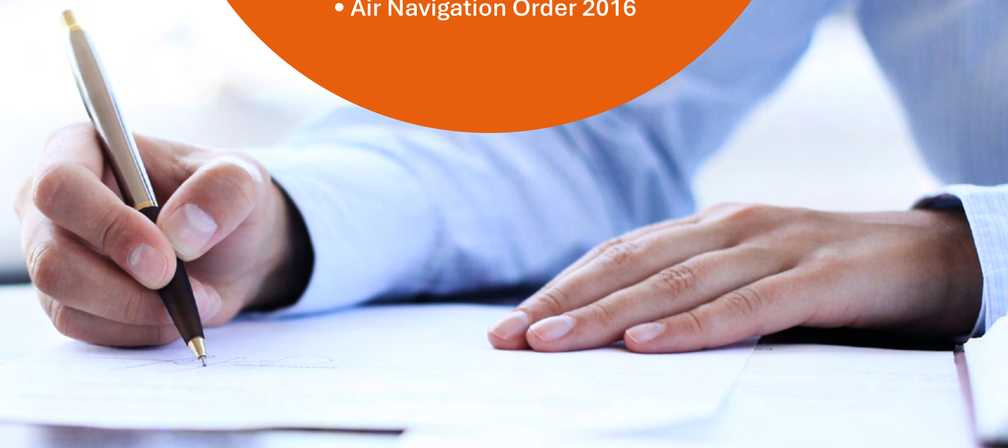
Consider legal obligations

When developing workplace drug and alcohol policies, UK employers must comply with several legal and regulatory requirements.

1. **The Health and Safety at Work Act 1974** compels organisations to manage the risk of drug and alcohol use in their operations. Employees must also take reasonable care of themselves and anyone who could be affected by their work.
2. **The Equality Act 2010**, which prohibits discrimination: compliance with equality legislation means ensuring that no group is unfairly targeted or disadvantaged. This includes avoiding bias in selecting individuals for testing or unfairly treating employees who are on prescription medication.
3. Data protection laws such as the **Data Protection Act 2018** and the **UK General Data Protection Regulation**, which classify drug and alcohol test results as sensitive data. Employers are legally required to obtain informed, written consent for testing and must handle data securely and restrict access.
4. **The Misuse of Drugs Act 1971** - makes it an offence for any person to permit the production, supply or use of controlled drugs or substances on their premises, unless prescribed by a doctor.

Further legal considerations may include:

- The Human Rights Act 1998
- The Employment Rights Act 1996
- The Anti-social Behaviour Act 2003
- The Psychoactive Substances Act 2016
- Road Traffic Act 1988
- Transport and Works Act 1992
- Railways and Transport Safety Act 2003
- Air Navigation Order 2016



Determine the circumstances for testing

Effective management of drugs and alcohol in the workplace can include screening and testing, particularly for employees in driving for work or safety-critical roles. Where appropriate, organisations can adopt a range of approaches depending on their risk profile, legal obligations, and workforce size.

Pre-Employment Screening

Screening before employment helps establish baseline fitness for work, particularly in safety-critical roles. Tests can include checks for alcohol, drugs, or both, and ensure prospective and new staff understand and meet organisational standards from day one.

Random Testing

Random testing acts as a deterrent and encourages a culture of responsibility and safety. Employees are selected for testing at random and without prior notice, reinforcing the expectation of sobriety when performing work duties. Random testing is particularly effective in high-risk roles, such as drivers, machinery operators, or the handling of hazardous substances.

Post-Incident Testing

Post-incident testing helps determine whether drugs or alcohol contributed to the incident, whether an accident or error. This approach supports root-cause analysis, helps prevent repeat events, and demonstrates due diligence in meeting health and safety obligations.

For-Cause Testing

For-cause (or suspicion-based) testing occurs when there is a reasonable belief that an employee may be under the influence of drugs or alcohol. This approach requires careful documentation, clear policies, and training for managers to identify signs of impairment fairly and consistently. All testing should be part of a broader safety and wellbeing strategy, integrating education and support alongside enforcement measures.

Ongoing Monitoring and Review

Screening and testing programmes should be accompanied by clear and transparent policies, employee communication, and procedures for handling positive results.



Support and enforcement: getting the balance right

Workplace drug and alcohol policies require a balanced, strategic approach that combines appropriate supportive interventions with enforcement measures. Employers must navigate this delicate balance to ensure both the safety of the workplace and the well-being of their employees.

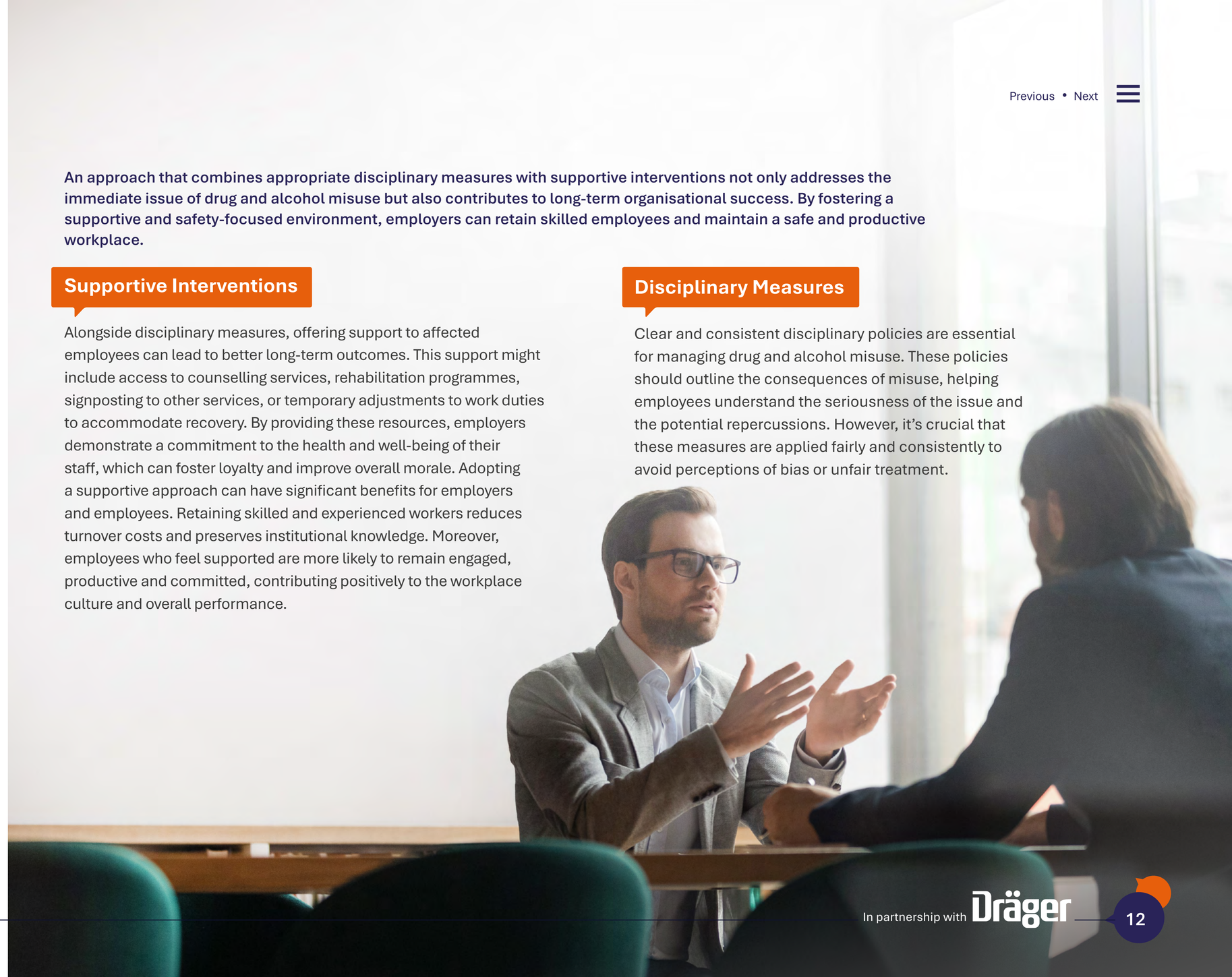
An approach that combines appropriate disciplinary measures with supportive interventions not only addresses the immediate issue of drug and alcohol misuse but also contributes to long-term organisational success. By fostering a supportive and safety-focused environment, employers can retain skilled employees and maintain a safe and productive workplace.

Supportive Interventions

Alongside disciplinary measures, offering support to affected employees can lead to better long-term outcomes. This support might include access to counselling services, rehabilitation programmes, signposting to other services, or temporary adjustments to work duties to accommodate recovery. By providing these resources, employers demonstrate a commitment to the health and well-being of their staff, which can foster loyalty and improve overall morale. Adopting a supportive approach can have significant benefits for employers and employees. Retaining skilled and experienced workers reduces turnover costs and preserves institutional knowledge. Moreover, employees who feel supported are more likely to remain engaged, productive and committed, contributing positively to the workplace culture and overall performance.

Disciplinary Measures

Clear and consistent disciplinary policies are essential for managing drug and alcohol misuse. These policies should outline the consequences of misuse, helping employees understand the seriousness of the issue and the potential repercussions. However, it’s crucial that these measures are applied fairly and consistently to avoid perceptions of bias or unfair treatment.



Select appropriate screening and test methods

The requirements and policy of an organisation will affect which type of testing is most suitable. These could include the number and costs of tests conducted, the speed at which results are required and legal defensibility (i.e. avoiding disproportionate or overly intrusive sampling).

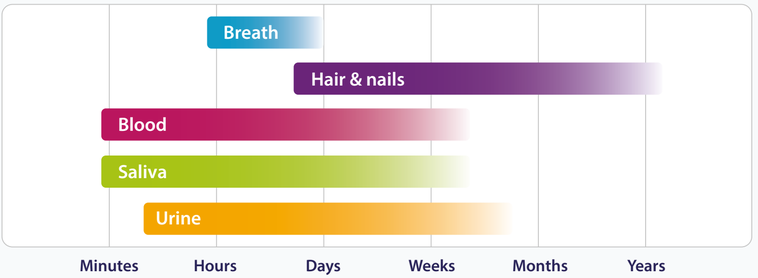
Different types of testing methodologies suit different situations, and therefore, it is helpful to understand the different testing types that are available to choose the one that is most suitable.

Breath, oral fluid (saliva), blood, urine, hair and nail are the most commonly used tests. All are trusted methods, with some being more suitable than others for specific situations. It is useful to examine each and look at their advantages and disadvantages to determine the relevance to any given situation.

Considerations before selecting testing types include:

- **Scope:** What do we need the results to show? What is being tested? How accurate, reliable and acceptable are the results likely to be?
- **Window of detection:** When drugs or alcohol are consumed or 'ingested', the absorption stage starts immediately in the mouth, with the remainder passing through to the stomach and small intestine, and some entering the bloodstream. The distribution stage sees the substance circulated to the organs in the body. If drugs are injected or inhaled, they bypass the absorption stage and are distributed directly to organs via the bloodstream. Many substances will then be metabolised by the liver before the elimination stage, where they are excreted (for example, in urine). Because of this, there are different windows of detection for different tests, and they are also different for alcohol and the various types of drugs. Breath, saliva and blood tests can show the presence of alcohol or a certain drug very quickly, while urine tests have a longer window of detection, often days and weeks. As it takes longer for a substance to be present in hair and nails, these will have long windows of detection – generally weeks to months.
- **Sample collection and analysis:** How invasive is the sample collection? Can it be done on-site? Can it be done by a trained manager or supervisor, or is a professional practitioner required? Are the results to be used to show the presence or absence of a substance? Is a measurement required, or does a specific substance need to be identified?
- **Time required for testing:** When are the results of the test needed: immediately, in hours, days or weeks?
- **Uses:** What are the results to be used for? Consider whether they are needed for pre-employment screening, random testing, post-incident testing, for cause testing or ongoing monitoring and review.

Analytical detection windows for various sample



Manage Confidentiality and Data Protection

Any results or information collected as part of an alcohol and drug testing programme should be managed confidentially and in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulation (UK GDPR). These regulations provide rules on how information or data relating to a person is collected, handled, processed and stored.

The Information Commissioner's Office (ICO) provides useful advice specific to testing for drug and alcohol use. It provides guidance on collecting information, what is allowed to be collected and how it can be collected, and how that data can be managed, handled and stored.

Justifying the collection of information from testing.

The ICO advises that information can be collected relating to health and safety, policy enforcement and during the recruitment process if you are satisfied that it is a necessary and justified measure to prevent risk to a worker's or other's health, determine a worker's fitness for carrying out their job, for them to return to work or in relation to their health related benefits. Information may also be collected to prevent discrimination on the grounds of disability or to make reasonable adjustments for a worker.

Recording the purpose and scope of testing

The purpose of testing must be recorded along with information on who will be tested, what they are being tested for, how often the testing will take place and the consequences of a positive or negative test.

Limiting the purpose of testing

Test methods should be selected that will only reveal relevant information for the purpose for testing, and the results of a test should not be used for collecting information for other purposes.

Communicating with workers about testing

Workers must be told why testing is being undertaken, which substances are being tested for or the alcohol levels for which they may be disciplined. In addition, a worker should be aware of the consequences of breaching a policy. An organisation's policy must be clearly communicated to workers and detail the circumstances of the testing, the type of testing and how the information obtained will be used.

Collecting personal information from testing

The amount of personal information collected must be minimised, and only the substances that are relevant to the purpose of the testing should be tested for.

Retaining information from testing

Information obtained from testing that is not relevant to the purpose of collection must be permanently deleted.

Selecting workers for testing

The criteria for selecting workers must be justified, documented and clearly communicated to workers.

Obtaining permission for testing

A worker's consent must be obtained before a test.



Screening and Testing



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Types of testing:

This section explores the different types of screening and testing options available. Here is an at a glance table of the characteristics of each type of testing and a more detailed section on each follows.

Types of test	What is Tested	Window of Detection	Uses	Advantages	Disadvantages
Breath	**Alcohol**	Up to 24 hours	Site entry, reasonable suspicion, post-incident, and random testing	• Non-invasive/discreet • Easy to conduct • Measures recent consumption • Requires minimal training • Accepted results	• Short window of detection
Oral Fuild (Saliva)	**Alcohol** **Drugs**	Approximately two hours to four weeks Approximately one hour to 48 hours after use	Pre-employment, reasonable suspicion, post-incident, random testing, and ongoing monitoring	• Non-invasive/discreet • Time-efficient • Easy to collect sample • Minimal training required • Difficult to adulterate sample • Easy observation of sample collection • Indicative of very recent consumption • Hygienic • No requirement for special facilities	
Blood	**Alcohol** **Drugs**	10-12 hours Varies by drug type from 12 hours for Cocaine to three to four days for Heroin	Pre-employment, reasonable suspicion, post-incident, random testing, and ongoing monitoring	• Additional and more precise information • Recent use can be detected • Is accepted results as methodology • Samples difficult to tamper with	• Invasive collection of samples • Requires skilled practitioners • Can be expensive • Short window of detection
Urine	**Alcohol** **Drugs**	12-24 hours Days to up to four weeks	Pre-employment, reasonable suspicion, post-incident, random testing	• Detects recent drug use • Reliable, established technology • Well-regulated • Accepted technology	• Lifestyle over workplace testing • Compromised liability • Testing is more challenging • Time and costs of collection
Hair	**Alcohol & Drugs**	From over one to two weeks to up to three months, possibly longer depending on the length of the hair shaft	In the workplace, hair testing may be used as part of pre-employment screening or to monitor ongoing substance misuse or abstinence	• Shows a longer-term view of consumption • Illustrates patterns of consumption • Non-Invasive • Easy to conduct • Reliable results are accurate • Can be used as evidence • Difficult to tamper	• Cannot be used to detect recent use • Can be costly and time-consuming • Hair treatments can impact results

Types of testing:

Breath

Screening devices, such as breathalysers, are commonly used to test for the presence of alcohol, both in the workplace and at the roadside by the police.

When a person drinks alcohol, they are ingesting ethanol, which is absorbed through the stomach and small intestine and before entering the bloodstream, where it is distributed to the organs, including the lungs. In the lungs, the ethanol molecules are metabolised into a gas which is then exhaled in the breath.

Breath testing for alcohol uses a person's exhaled breath to measure their breath alcohol content (BrAC). There is a direct correlation between breath alcohol content and the concentration of alcohol in the blood, and therefore an accurate blood alcohol content (BAC) measurement can be obtained from a breath sample.

It is important to remember that the way alcohol affects you depends on:

- your weight, age, sex and metabolism (the rate your body uses energy)
- the type and amount of alcohol you are drinking
- what you have eaten recently
- your stress levels at the time

Window of detection

Alcohol: Up to 24 hours.

Sample collection and analysis

An individual blows into a disposable mouthpiece on a breathalyser. The device will give a reading instantly on the display screen. Results and relevant data can be printed or uploaded into a relevant data management system.

Uses

Site entry, reasonable suspicion, post-incident, and random testing.

Advantages

- Non-invasive/discreet
- Easy to conduct
- Measures recent consumption
- Requires minimal training
- Accepted results: well established method

Disadvantages

- Short window of detection

Types of testing:

Oral Fluid (Saliva)

Oral Fluid testing is more commonly used to test for the presence of drugs than for alcohol. Testing can be performed on site to confirm or dispel suspicions of active impairment. The acceptance of oral fluid as a non-invasive, simple method of drug detection has led to its widespread use in a variety of settings.

Used to detect recent drug usage, saliva from the mouth cavity will contain metabolites – substances or biomarkers produced by the body because of processing from drugs and drug groups soon after administration and absorption.

Oral fluid testing results are indicative of very recent consumption of psychoactive drug substances and therefore provide qualitative information on recent drug consumption. There is an established matrix for drug screening in the workplace that detects parent drugs, and an oral fluid test can be used to test simultaneously for substances from a range of different drug categories, such as cocaine, opiates, amphetamines, methamphetamines, benzodiazepines (commonly used in anti-anxiety and insomnia medications) as well as cannabis (and its principle constituent Tetrahydrocannabinol or THC, which can be used medicinally), methadone, ketamine and oxycodone.

Window of detection

Alcohol: Approximately two hours to four weeks.

Drugs: Approximately one hour to 48 hours after use.

Sample collection and analysis

An absorbent pad is used to swab the mouth to collect a saliva sample. Generally, nothing should be eaten or drunk ten minutes before the test and a visual inspection of the mouth should be undertaken to ensure that there is nothing in the mouth. Once collected, the sample is then placed into a collection container. If a kit is being used in situ, the analysis is undertaken immediately; alternatively, the swab can be sent to a laboratory for later analysis.

Uses

Pre-employment, reasonable suspicion, post-incident, random testing, and ongoing monitoring.

Advantages

- Non-invasive/discreet
- Time-efficient – tests can be undertaken quickly
- Easy to collect sample
- Minimal training required
- Difficult to adulterate sample
- Easy observation of sample collection makes it less susceptible to tampering
- Indicative of very recent consumption, therefore, provides qualitative information on recent drug consumption
- Hygienic
- No requirement for special facilities or equipment

Disadvantages

- Requires a period of 10 minutes before a sample is taken to ensure nothing is passes through the mouth or nose

Types of testing:

Blood

Blood tests for alcohol and drugs are commonly used, and whilst sample collection is invasive and testing can take more time and be costly, this type of testing offers precise, accurate results that can be used to inform more significant decision-making or used as evidence in legal contexts.

Blood testing for drugs can be used to identify specific drugs, and it can detect a range of drugs, including opioids, cocaine, and amphetamines.

Blood alcohol tests look for biomarkers of alcohol in the blood sample, and depending on the type of test, can give an overview of a person's alcohol consumption over a period of hours to weeks. As the biomarkers are detectable in blood after one to two hours, blood tests can be used to show recent consumption. They can also be used to show where there have been high levels of consumption over a month.

Window of detection

Alcohol: 10-12 hours

Drugs: varies by drug type from 12 hours for cocaine to three to four days for heroin

Sample collection and analysis

A blood sample is taken by trained professionals, most commonly using a needle to extract the sample from a vein inside the arm or using a finger stick, which will take a sample from a small finger prick. The samples are sent to laboratories for analysis, where they will be tested for alcohol metabolites or for drugs.

Uses

Pre-employment, reasonable suspicion, post-incident, random testing, and ongoing monitoring.

Advantages

- Can provide additional and more precise information relating to quantities of substance present and timing of use
- Recent use can be detected
- Accepted results as methodology is established
- Difficult to tamper with samples as they are taken by a professional practitioner

Disadvantages

- Invasive collection of samples
- Requires skilled practitioners to collect sample
- Can be expensive – due to method of sample collection and requirement for laboratory testing
- Short window of detection

Types of testing:

Urine

Urine testing is commonly used to detect substances, including alcohol and/or drugs. When used for testing drugs, a wide range of substances can be detected, and urine drug testing can be used to show whether a person has been using illegal drugs or misusing prescription drugs, i.e. in a way other than as prescribed by a doctor.

Window of detection

Alcohol Testing : 12-24 hours

Different types of urine tests are used to test for different alcohol metabolites. One of the most common analyses a sample for ethanol which can be detected in urine up to 12 hours after alcohol has been drunk and is therefore useful to detect recent use. Other tests include analysis for Ethyl Sulfate (EtS) which will detect usage in the previous 24 hours and tests including Ethyl Glucuronide (EtG) will have a longer detection window.

Drug Testing : days to up to four weeks

The window of detection for different drugs varies and can depend on factors relating to the individual such as their metabolism and frequency of consumption or to the drug, with the specific drug, and its purity having different effects. In general, the window of detection is several days, but drugs such as cannabis, dependent on the frequency of use, can range from days to up to four weeks.

Sample collection and analysis

A sample of urine is usually taken on site in a controlled environment to avoid tampering. Tampering is more of an issue for urine collection because collection cannot be directly observed. The sample is then either tested on site using a kit or sent to a lab for analysis. Results will only indicate whether alcohol is present or not, confirming whether a person has consumed alcohol recently; they will not give a measurement of the level of alcohol present. Similarly, most initial screening tests will only indicate whether a type of drug is present above a specified level; subsequent confirmatory testing results from a laboratory will indicate concentrations.

Uses

Pre-employment, reasonable suspicion, post-incident, random testing

Advantages

- Detects recent drug use over the previous few days, and for several days afterwards depending on the drug
- Reliable, established technology
- Well-regulated
- Accepted technology for most metabolites due to its extensive scientific knowledge base

Disadvantages

- Lifestyle over workplace testing (indicating drug use over the detection window of two or three days for most drugs can also be seen as irrelevant or intrusive if outside of working hours)
- Compromised liability over longer detection windows as the presence of the metabolite in urine may not imply presence of the parent drug in the blood
- Tampering or substitution of sample is possible due to the inability to observe sample collection
- Testing is more challenging and perceived as invasive as requires use of special rooms, toilets, and same sex observations required
- Time and costs of collection, loss of work hours mean operational costs can be high for employers

Types of testing:

Hair

Hair analysis is a non-invasive method of assessing an individual's alcohol or drug consumption over a period of time.

As it will take at least a week, sometimes several weeks after consumption, for hair to grow and the substance to be incorporated into the hair shaft, hair analysis is not used to screen for recent consumption over days or weeks, but is usually used to analyse longer periods, generally around 90 days. As the analysis can illustrate usage over several months, hair testing is used to provide both evidence of consumption and to illustrate behaviours, showing trends and patterns of substance use or periods of abstinence.

Window of detection

From over one to two weeks to up to three months, possibly longer depending on the length of the hair shaft.

Sample collection and analysis

Hair analysis involves a small strand of hair being taken, usually from the head. A shaft of hair is taken from close to the scalp as this will show the most recent usage. Where it is not possible to use head hair, body hair may be used. The sample is sent to a laboratory for analysis and is tested for biomarkers i.e. the metabolites of ethanol and/or drugs that are embedded in the hair shaft.

Uses

In the workplace, hair testing may be used as part of pre-employment screening or to monitor ongoing substance misuse or abstinence.

Advantages

- Shows a longer-term view of consumption, dependent on the length of the hair strand, several months to a year can be analysed
- Illustrates patterns of consumption over time, particularly for drugs
- Non-invasive – only a small sample of head hair is required
- Easy to conduct - sample collection is simple and quick plus storage and transport is easy
- Reliable - results are accurate
- Can be used as evidence in legal contexts
- Difficult to tamper, as sample collection is observed

Disadvantages

- Cannot be used to detect recent use – i.e. in the previous week
- Can be costly and time-consuming, as laboratory testing is required
- Cosmetic hair treatments can affect results as dyes, bleach, perming lotions and alcohol-based perfumes can remove biomarkers from hair

The use of vehicle interlock systems

The use of alcohol Interlock devices has become increasingly prevalent over recent years, with such devices being used in some countries for school vehicles or for alcohol reoffender programmes where drivers have been convicted of drink driving. Since the introduction of the Regulation (EU) 2019/2144 in July 2022, which focuses on the general safety and the protection of vehicle occupants and vulnerable road users, motor vehicles of categories M and N (commercial and passenger vehicles, respectively) have been required to be equipped with certain advanced vehicle systems, including alcohol interlock installation ports, making installation into newer vehicles much easier.

Before being able to start an engine, a driver must undertake an alcohol breath test using the interlock device, which detects an alcohol value above the pre-set limit, preventing them from starting the engine if the test fails.

In the UK, companies are now beginning to investigate and adopt this technology, recognising the benefits that it offers. Alcohol interlock devices have been shown to reduce the risk of alcohol-related incidents on roads[10] and in workplaces, increasing safety for employees, passengers, colleagues, other road users and the public. Furthermore, as well as preventing an impaired driver from entering public or private roads, their use in vehicles such as forklifts, cranes, and other special-purpose vehicles or machinery can also prevent workplace incidents.

Further information



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Further information

Sources for information contained within this guide:

1. UKAT, The hidden cost of substance abuse in the UK
2. ScORSA, Work-Related Driving and Alcohol: A Risk Employers Can't Ignore
3. CPID, Managing drug and alcohol misuse at work
4. PACTS, Drug driving: the tip of an iceberg?
5. PACTS, Drugs policy and road safety
6. HSE, Managing drug and alcohol misuse at work
7. Institute for Alcohol Studies, Alcohol in the Workplace
8. CIPD, Managing drug and alcohol misuse at work
9. UKAT, The hidden cost of substance abuse in the UK
10. PACTS, Locking out the drink driver
11. Draeger Safety UK, The Drager UK Safety at Work Report 2022
12. Draeger Safety UK, The Drager UK Safety at Work Report 2023
13. Bupa, 1 in 3 workers admit to on-the-job substance use or addictive behaviour
14. Gov.uk, Adult substance misuse treatment statistics 2023 to 2024: report

For employers:

- **HSE – Supporting Employees with Drug and Alcohol Misuse**
  Practical advice on creating policies, consulting employees, and supporting those affected.
- **Rehab Recovery – Addiction Help for Employees**
  Advice for employers on handling addiction in the workplace, including policy guidance, screening, and next steps.
- **CIPD – Line Manager Guide on Drug and Alcohol Misuse**
  Guidance for line managers on supporting employees, dealing with disclosures, and implementing appropriate measures.
- **ICO – What if we use medical examinations and drugs and alcohol testing?**
  A detailed framework for handling workers' health data under UK GDPR.
- **ScORSA (Scottish Occupational Road Safety Alliance)**
  Guidance on managing road safety risks, including those related to substance misuse.

For employees:

- **FRANK**
  Honest information about drug, support services and help pathways for specific demographics.
- **Alcohol Change UK**
  Resources and guidance on alcohol-related issues and support services.
- **We Are With You**
  Free, confidential support for people in England and Scotland facing challenges with drugs, alcohol, and mental health.
- **Rehabs UK – Should I Tell My Employer I Am an Addict?**
  Practical advice on how to disclose and manage an existing addiction in the workplace.
- **Mind – Drug and Alcohol Addiction: Useful Contacts**
  Lists various support organisations, including Alcoholics Anonymous, Alcohol Change UK, and FRANK.

Appendix

Example policy

Policies should be written in clear, plain language to help employees comply.

Consider including the following elements:

Objective	The need for and purpose of the policy, for example the safety, health and productivity of workers, workplace and those affected by the work.
Scope	Who is covered by the policy, where and when it applies and any permitted exceptions to its application.
Expectation	Specific rules on drug and alcohol use to include the duration of impairment caused by use, for example ‘the morning after’.
Management	Processes in place to ensure expectations are met. Section can signpost line manager/HR support and external support services where employees feel they are unable to meet expectations, either one-off or longer-term basis. If testing/screening is to be used, more details should be given here on how it will be used fairly and impartially to ensure expectations are met and description of associated procedures.
Support	Support and signposting available to employees
Consequences	Disciplinary actions used if expectations are not met and permitted disclosure to authorities in the case of illegal activity.

Appendix

Drug & Alcohol Policy

Quick-Reference Checklist:

- [ ] Staff and safety representatives consulted during policy development
- [ ] Policy clearly defines scope (alcohol, drugs, prescription and OTC medicines)
- [ ] Working while impaired identified as a disciplinary issue
- [ ] Policy communicated clearly to all staff, with amnesty opportunities offered
- [ ] Training provided on effects and risks of substance use in the workplace
- [ ] Awareness raised on prescription drugs and alcohol units
- [ ] Staff informed of legal limits and disclosure expectations
- [ ] Consent-based screening and testing procedures in place
- [ ] Testing focused on support as well as compliance
- [ ] Confidential support and access to rehabilitation services available
- [ ] Non-punitive reporting encouraged
- [ ] Clear, consistent disciplinary process for impairment at work
- [ ] Incidents recorded and investigated for root causes
- [ ] Regular driver checks and policy reviews completed
- [ ] Leadership models compliance and promotes a just, open culture
- [ ] Non-alcoholic options provided at work events

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