



ADDICTION NI
ALCOHOL & DRUG TREATMENT CHARITY
ESTABLISHED AS A CHARITY IN 1978
LEADING EXPERT IN ALCOHOL & DRUG
TREATMENT ADVICE & SUPPORT



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Addiction NI - Older Focus





ALCOHOL & DRUGS IN THE WORKPLACE

WHAT IS THE PROBLEM?

WHAT CAN BE DONE TO
ADDRESS IT?



ALCOHOL & DRUGS IN THE WORKPLACE

IMPACT ON HEALTH & SAFETY

IMPACT ON PRODUCTIVITY

IMPACT ON TEAM WORK



ADDICTION AS PART OF A CONTINUUM

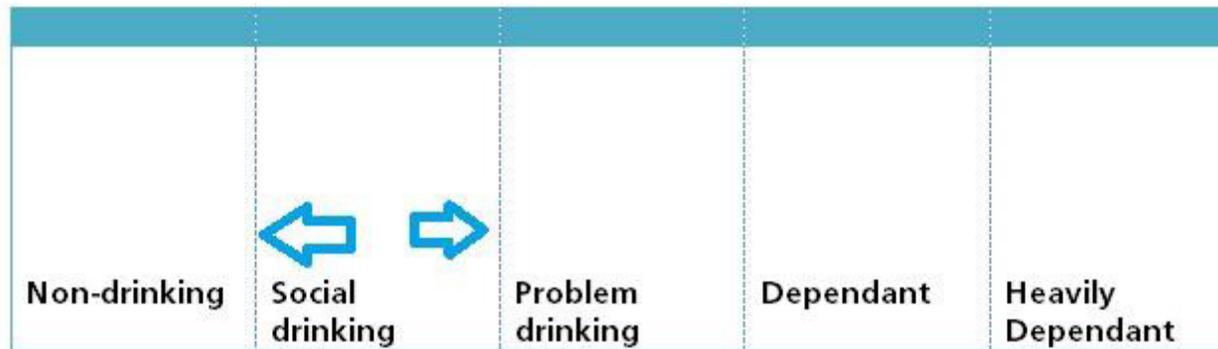


Figure: 1 Addiction Continuum



SUBSTANCE MISUSE: WHAT IS THE PROBLEM?

ALCOHOL

ILLEGAL DRUGS

OVER THE COUNTER DRUGS

PRESCRIBED DRUGS

SOLVENTS

LEGAL HIGHS



MAIN DRUG GROUPS:

DEPRESSANTS

STIMULANTS

OPIATES

HALLUCINOGENS

INHALANTS

ANABOLIC STEROIDS



DEPRESSANTS:

ALCOHOL

BENZODIAZPINES

BARBITUATES

STIMULANTS:

COCAINE

CRACK COCAINE

AMPETAMINES/METHAMPHETAMINES

MDMA (ECSTACY)

OPIATES:

HEROINE

MORPHINE

PETHADINE



HALLUCINOGENS:

LSD

MESCALINE

MAGIC MUSHROOMS

CANNABIS

INHALANTS:

GLUE

PETROL

AEROSOLS

PAINT THINNER

BUTANE GAS



DRUGS & THE LAW

CLASS A DRUGS

HEROIN

ECSTACY

COCAINE

MAGIC MUSHROOMS

PENALTIES FOR POSSESSION:

UP TO SEVEN YEARS IN PRISON OR AN UNLIMITED FINE OR BOTH

PENALTIES FOR DEALING:

UP TO LIFE IN PRISON OR AN UNLIMITED FINE OR BOTH



DRUGS & THE LAW

CLASS B DRUGS

CANNABIS

AMPHETAMINES

PENALTIES FOR POSSESSION:

UP TO FIVE YEARS IN PRISON OR A FINE OR BOTH

PENALTIES FOR DEALING:

UP TO FOURTEEN YEARS IN PRISON OR A FINE OR BOTH



DRUGS & THE LAW

CLASS C DRUGS

TRANQUILISERS (INCLUDING BENZODIAZEPINES)

SOME PAINKILLERS

PENALTIES FOR POSSESSION:

UP TO TWO YEARS IN PRISON OR AN UNLIMITED FINE. OR BOTH

PENALTIES FOR DEALING:

UP TO 5 YEARS IN PRISON OR AN UNLIMITED FINE OR BOTH



**ALCOHOL IS THE NO 1 RISK FACTOR IN THE WORLD FOR
ILL HEALTH & PREMATURE DEATH IN 25-59 YEAR
OLDS**

**(SEPT. 2011- SCIENCE GROUP OF THE EUROPEAN ALCOHOL & HEALTH
FORUM)**



ALCOHOL IN NORTHERN IRELAND

ALCOHOL 62% CHEAPER THAN IT WAS 30 YEARS AGO

**ALCOHOL RELATED DEATHS DOUBLED IN THE LAST 15
YEARS**

**DEATHS FROM LIVER DISEASE DOUBLED IN THE LAST 10
YEARS**



COST OF ALCOHOL MISUSE IN NORTHERN IRELAND

HEALTHCARE- £130 MILLION

SOCIAL CARE- £54 MILLION

FIRE & POLICE- £230 MILLION

COURTS & PRISONS- £85 MILLION

TOTAL: APPROX £700 MILLION A YEAR



**ANNUAL COST FOR ALCOHOL RELATED ABSENTEEISM:
£33 MILLION**

**ANNUAL COST FOR ALCOHOL RELATED PRESENTEEISM:
£77.5 MILLION**

(DHSSPS 2009)



WHICH WORKERS ARE AT MOST RISK FROM ALCOHOL RELATED HARM?

THE FIRST ASSESMENT WAS IN 1895 AND CONCLUDED THAT PUBLICANS WERE 6 TIMES MORE LIKELY TO DIE FROM AN ALCOHOL RELATED CAUSE



2007- MEN AGED 20-64

- 1.PUBLICANS & BAR STAFF IN LICENSED PREMISES**
- 2.SEA FARERS, SAILORS & BOAT OPERATIVES**
- 3.BUTCHERS**
- 4.LABOURERS IN BUILDING & WOODWORK**



2007-WOMEN AGED 20-64

1.PUBLICANS & BAR STAFF

2.HAIRDRESSERS

3.CLERICAL OFFICERS

4.WAITRESSES



WHY HAVE AN ALCOHOL & DRUG WORKPLACE POLICY?

Health and Safety at Work Act 1974, section 2

Management of Health and Safety at Work Regulations 1999

It is an offence under the Misuse of Drugs Act 1971 for any person knowingly to permit the production, supply or use of controlled substances on their premises except in specified circumstances (e.g. when they have been prescribed by a doctor).

You should also be aware of duties under the Road Traffic Act 1988 and the Transport and Works Act 1992. Drivers of road vehicles must not be under the influence of drugs while driving, attempting to drive or when they are in charge of a vehicle. Certain rail, tram and other guided transport system workers must not be unfit through drugs while working on the system. The operator of such a system must exercise all due diligence to avoid those workers being unfit.

(Health and Safety Executive 1998)



AN EFFECTIVE WORKPLACE POLICY:

Drug and other substance (e.g. solvent) misuse is everyone's concern. In the context of work, not only does it damage the misuser's health, but it can cost employers through absenteeism and reduced productivity. It may also increase the risk of accidents. Employers should adopt a substance misuse policy, in consultation with their staff.

This policy should aim to support affected employees rather than punish them. If an employee admits to being a drug user your policy should seek to help them rather than lead simply to dismissing them.

(Health and Safety Executive 1998)



A MODEL ALCOHOL/DRUG POLICY:

A model workplace alcohol policy would cover the following areas:

AIMS:

Why have a policy?

Who does the policy apply to?

(Note: best practice would be for the policy to apply equally to all grades of staff and types of work.)

RESPONSIBILITY:

Who is responsible for implementing the policy?

(Note: all managers and supervisors will be responsible in some way but it will be more effective if a senior employee is named as having overall responsibility.)



THE RULES:

How does the company expect employees to behave to ensure that their alcohol consumption or drug use does not have a detrimental effect on their work?

SPECIAL CIRCUMSTANCES:

Do the rules apply in all situations or are there exceptions?

CONFIDENTIALITY:

A statement assuring employees that any alcohol problem will be treated in strict confidence.

DEFINITION

A definition of drug/substance* misuse.



HELP:

A description of the support available to employees who have problems because of their drinking.

INFORMATION:

A commitment to providing employees with general information about the effects of alcohol/drugs on health and safety.

DISCIPLINARY ACTION:

The circumstances in which disciplinary action will be taken.

(Health and Safety Executive 1996)



ADDICTION NI WORKPLACE SERVICE
COUNSELLING AND SUPPORT FOR EMPLOYEES
ADVICE AND ASSISTANCE WITH DRAFTING POLICIES
TRAINING OF STAFF ON ALCOHOL AND DRUG AWARENESS

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USEFUL WEBSITES:

www.freeemployer-advice.co.uk

www.hse.gov.uk/alcohol/drugs



THANK YOU