

Making Your Workplace Drug-Free: A Kit for Employers



Division of Workplace Programs Center for Substance Abuse Prevention Substance Abuse and Mental Health Services Administration







No.



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Drug-Free Workplace Kit

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SAMHSA Workplace Resource Center : http://workplace.samhsa.gov

Workplace Resource Helpline: 1.800.workplace, 1.800.967.5752

Drug-Free Workplace Kit: http://workplace.samhsa.gov

GetFit: http://GetFit.SAMHSA.Gov



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LS. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samilisa.gov The purpose of this Drug-Free Workplace Kit is to provide public and private workplaces, from small to large and from local to global, with credible, authoritative, evidence-based information, resources, and tools for producing and maintaining drug-free workplace policies and programs.

The Kit was developed by the Division of Workplace Programs (DWP), in the Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services.

DWP has unique and nationally important regulatory, knowledge development, and technical assistance roles and responsibilities for Federal and non-Federal workplaces, with respect to their drug-free workplace policies and programs.

For example:

Preface

- ✓ DWP is responsible for two principal activities mandated by Executive order and public law: 1) oversight of the Federal Drug-Free Workplace Program, which aims to eliminate illicit drug use in the Federal workforce, and 2) oversight of the National Laboratory Certification Program, which certifies laboratories to conduct forensic drug testing for Federal agencies and federally regulated industries.
- ✓ To meet these two responsibilities, DWP has developed a variety of resources and techniques for addressing substance abuse in workplaces, in part through the provision of primary substance abuse prevention, early identification, and intervention services for adult and youthful employees, as well as for their families and communities.

DWP has developed this Kit from the most promising methods, techniques, and approaches that are available from practitioners, researchers, and evaluators in the field, including those approaches that are included in SAMHSA's National Registry of Evidence-based Programs and Practices. Throughout the Kit there are many citations that have been included for further reading.

This Kit is an abbreviated version of the online, interactive Drug-Free Workplace Kit, which can be found at SAMHSA's Workplace Resource Center: http://workplace.samhsa.gov/.





Materials Checklist 🗸



How to Use This Workplace Kit

Components of a Drug-Free Workplace

- Brochure: Components of a Drug-Free Workplace - Fact Sheet: Hallmarks of Successful Drug-Free Workplace Programs - Fact Sheet: Why Should You Care About Having a Drug-Free Workplace?



Needs Assessment

Brochure: Conducting a Needs Assessment

Policy Development



- Brochure: Developing a Drug-Free Workplace Policy



Employee Education

- Brochure: Informing and Educating Your Employees
- Fact Sheet: Effects of Alcohol and Other Drugs on Job Performance and Family
- Fact Sheet: Health Effects of Alcohol and Other Drugs on Your Body
- Fact Sheet: Workplace Substance Abuse Statistics

Supervisory Training

-Brochure: Training Your Supervisors

Employee Assistance Program

- Brochure: Using Your Employee Assistance Program

Drug Testing

- Brochure: Drug Testing in the Workplace - Fact Sheet: Drug Testing Facts and Statistics

Workplace Substance Abuse Prevention Resources

- Fact Sheet: Workplace Substance Abuse Prevention Resources Reference List
- Fact Sheet: GetFit.SAMHSA.Gov: Online Workplace for Health, Wellness, and Safety
- Brochure: SAMHSA's NREPP Model Programs for the Workplace
- Fact Sheet: National Clearinghouse for Alcohol and Drug Information

Marketing Tools and Implementation Guide

- Implementation Guide: How to Build, Implement, and Sustain a Drug-Free Workplace - Fact Sheet: How to Build Awareness of Your Drug-Free Workplace Program - Fact Sheet: How to Inform Employees about Your Drug-Free Workplace Policy - Fact Sheet: www.myworkplace.atgetfit.net: How to Build Your Own GetFit.SAMHSA.Gov Web Site - Poster



- Sticker: Welcome to a Drug-Free Workplace

- Rolodex Card: SAMHSA Workplace Resource Center contact information







How to Use This Workplace Kit

This Workplace Kit can help workplaces throughout the United States become drug-free, as well as safe, healthy, and productive.¹

The Kit was developed by the Substance Abuse and Mental Health Services Administration (SAMHSA), in the U.S. Department of Health and Human Services (DHHS). SAMHSA and DHHS developed the Kit so that it would be evidence based, state of the art, flexible, and practical. The Kit, therefore, relies on the most reputable and current studies, and on the knowledge and experience of experts. It includes a range of options from which small, medium, and large businesses in many different fields and industries can choose. And it provides guidance and materials that are practical.

Every workplace is different. But the fact sheets, brochures, and other materials in the Kit have been designed so that they can be used in different ways to meet the varying needs of different workplaces.

Most of these materials are self-explanatory. It should be fairly easy for employers and others in workplaces to decide how they can best use the materials to assist in developing and implementing drug-free workplace policies and programs. The following general suggestions are also offered, so that users may get the most out of the Kit.

✓ Take Time

Take the time to understand the issues and apply your program appropriately. The issues are complex, the problems are challenging, and the behaviors may be difficult to change. Thus it is worth taking the time to figure out what the needs of a workplace are and how they can best be addressed.

✓ Involve the Right People

Enlist the understanding and support of key people in the workplace. These include human resources supervisors, key managers, and line employees. If there is a union, work with it. Even if there is no union, talk with the workers. If there already is an employee assistance program (EAP), but it needs to be strengthened, talk with EAP specialists about how to strengthen it. If there already is drug testing in place, but it can be improved, talk with a drug testing contractor. If your organization has a health clinic or a health promotion and wellness program, involve the specialists in charge of these services. It is essential to have legal counsel to help develop and finalize your drug-free workplace policy and program. Finally, sharing the approach with similar organizations can be a useful way of learning from others' experiences and expertise, of pooling resources, and of building partnerships focused on drug-free workplaces within an industry.

✓ Address Drug Abuse in the Context of Health, Safety, and Productivity

Consider addressing drug use and abuse in the broader context of health, safety, and productivity. Almost everyone wants to feel healthy, safe, and productive. Viewing the issue of alcohol and other drug use as part of the bigger picture of overall health and safety can be an effective way of meaningfully reaching nearly all employees. After all, drug use may affect what happens in the workplace, whether it takes place right there or outside of work.² In addition, drug use often goes hand-in-hand with other health and mental health issues. People who are depressed may turn to stimulants. People who are anxious may turn to depressants. People under tremendous stress may misuse tranquillizers or alcohol. Addressing drug use in the broader context of other health and mental health issues may increase the likelihood that employees will become committed to a drug-free workplace as a component of a broader approach to improving their own health and well-being.



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✓ Understand How a Drug-Free Workplace Can Help Everyone

A drug-free workplace can reduce drug abuse and other problems as well. And it can help all employees, from top to bottom. A drug-free workplace would be a workplace that is free of the use of illicit drugs. But a drug-free workplace policy and program can also increase morale, boost productivity, and reduce workplace stress, creating a positive, dynamic community that is safer, happier, and healthier for everyone.

Solution Ensure That Workplaces Meet Legal Requirements

A workplace must comply with the Drug-Free Workplace Act³ or other laws, if those laws apply to the workplace. But an employer may choose to go beyond the basic legal requirements and have more than a minimal drug-free policy, awareness program, or drug testing program. Such an employer may wish to put into place a more comprehensive drug-free workplace policy and program that addresses drug use in the context of promoting overall health and improving safety and productivity.

✓ Ensure That Workplaces Are Safe, Healthy, and Drug-Free, Even if There Are No Legal Requirements

If the drug-free workplace laws and regulations do not apply to your workplace, a drugfree workplace policy and program may still be helpful. Drug abuse is unhealthy. It can diminish workers' ability to cooperate and work well. It can reduce long-term productivity and profits. It can reduce quality of life, both in the workplace and elsewhere, for those who are using illicit drugs or using alcohol in an unhealthy manner. So, whether the laws and regulations apply to your workplace or not, a drug-free workplace policy and program may be a way to make your organization drug-free, and also safe, healthy, and productive.

References

¹ Throughout the Kit we refer to a *drug-free workplace*, which was originally created in the Federal Drug-Free Workplace Program (see U.S. DHHS, SAMHSA, Division of Workplace Programs; n.d.; "Federal Agency Drug-Free Workplace Programs"; Rockville, Maryland; available at http://www. workplace.samhsa.gov/FedPgms/Pages/Fed_Agency_Programs.aspx). Many workplaces that have drug-free workplace policies have also addressed within their policies the use and misuse of alcohol, including prevention, early identification, early intervention, treatment, and relapse prevention.

² Often when people refer to a drug-free workplace they consider only the use of drugs and alcohol at the job site or when workers are officially on the job. But in prevention programs the intent is to prevent the inappropriate use of alcohol, the illegal use of drugs, and the misuse of prescription drugs in all phases of employee and family lives. Prevention also aims to change the attitudes of individuals and their families and the culture of communities and workplaces—creating healthier, safer, more dynamic communities for everyone.

³ U.S. House of Representatives. 1988. *Drug-Free Workplace Act of 1988* U.S.C. 701–707. *and* U.S. House of Representatives. 1998. *Drug-Free Workplace Act of 1998* U.S.C. 105–584.

All URLs (Web site addresses) in this Kit were accessed June 29, 2007.





Drug-free workplace programs can help employers create cost-effective, safe, and healthy workplaces. Early studies have indicated that successful drug-free workplace programs generally have at least five key components:¹

- 1. A written policy
- 2. Employee education
- 3. Supervisor training
- 4. An employee assistance program (EAP)
- 5. Drug testing

The demonstration program offered by the Small Business Administration under the Drug-Free Workplace Act of 1998 specified the following six components:

- 1. A clear written policy
- A minimum of 2 hours of training for all employees
- 3. Additional training for working parents
- 4. Drug testing by a certified institution
- 5. Access to an EAP
- A continuing drug and alcohol abuse prevention program

Notable are the minimum of 2 hours of training for all employees (with additional training for working parents) and the need for prevention programs.

There are other types of drug-free workplace programs that include these components along with others in their design. Variations consist of using health and wellness programs (including



alcohol and prescription drugs as a major prevention and early intervention component) and providing ongoing interactive Web sites (e.g., GetFit in the online Drug-Free Workplace Kit) for employee, supervisor, and provider education and training.

Another way employees can enhance these general components is to adapt to changes in the modern workplace. Such changes can include more employees telecommuting, the increasingly multigenerational nature of the workforce, and a culturally and linguistically diverse workforce.

Successful drug-free workplace programs, in addition to having the five key components listed above, often provide access to diversified EAPs. SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP) identifies many well-researched drug-free workplace programs.



NREPP programs and all components should be assessed when initiating or enhancing a drug-free workplace program. Drug-free workplace programs range from basic to

comprehensive. The size of the organization, the nature of the workforce, and the resources available all contribute to how the program is tailored. Conducting a needs assessment first will help employers determine which components are the most feasible and beneficial.

Needs Assessment

Before considering the five components, employers should examine the needs of their organizations and take steps to ensure that the programs they design will work well in their workplaces. There are numerous reasons why



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov employers and unions establish drug-free workplace programs. Among the leading reasons are

- To comply with laws or regulations
- To qualify for insurance discounts, rebates, and other incentives
- To prevent associated problems (e.g., absenteeism, accidents, injuries, productivity loss)
- To respond to an incident or pattern of substance abuse
- To express support for the majority of employees who do not abuse alcohol or other drugs
- To invest in worker health, safety, and productivity
- To market drug-free workers and services

A needs assessment can determine whether alcohol or other drugs are affecting the workplace, can identify resources and strengths, can examine appropriate policy and program options, and can help illuminate cost-effective strategies for achieving organizational goals.

When beginning to assess the needs of the workplace, some key things to consider are

- Does the workplace fall under specific legislation?
- Are employees in safety-sensitive roles?
 For example, do they drive vehicles, operate machinery, handle chemicals, or work with the public—particularly with children?
- Are employees in jobs that are security sensitive? For example, are they responsible for confidential ideas, products, plans, or documents? Are they responsible for accounting, cash, inventory, or stock? Do employees work

offsite, such as traveling salespersons, home workers, or home health care workers?

- Do certain employees perform key functions of the organization (such as accountants who handle large sums of money; salespersons who represent the company; employees who monitor computers, nuclear power dials, etc.; or supervisors who manage many employees)?
- What kinds of drug-free workplace resources are available within and outside the organization, and at what cost? That is, what are the costs and benefits of implementing different types of drug-free workplace programs?

Written Policy

A written policy is the cornerstone of a drug-free workplace program. This Kit will assist you in designing a policy specific to your workplace. At the minimum, the policy should include the following:

- Rationale (e.g., laws, regulations, organizational goals)
- Expectations for compliance (e.g., who, what, when, where)
- Options offered for assistance (e.g., an EAP, community resources)
- Consequences for violating the policy (e.g., discipline, referral for assistance, termination)

Employee Education

The entire organization should know about the benefits of the drug-free workplace policy and program. Owners, top management, supervisors, and nonsupervisory employees at all levels should be prepared for the implementation of the policy and program. Everyone in the workplace needs information about the problems associated with the use and misuse of substances. They all can benefit from education and training that reinforces and deepens that awareness. And they can benefit from activities that motivate them to adopt safer and healthier attitudes and behaviors. It is especially important that the entire workforce be familiar with the benefits of the drug-free workplace policy and program, particularly when they are supported by other health and wellness programs and activities.²

For the policy and program to effect positive change, everyone must be on board. Research shows that the best way to encourage positive change is to involve everyone in understanding and actively supporting the process.³

Supervisor Training

Customized supervisor training that takes into account the particular characteristics of your workplace is strongly suggested to maximize the effectiveness of your drug-free workplace policy and program.

Seven General Guidelines Found to be Useful for Many Employers, Supervisors, and Human Resources Staff

- 1. Know the policy and program.
- 2. Be aware of legally sensitive areas.
- 3. Recognize potential problems.
- 4. Document in a systematic and fair manner.
- 5. Act in a confidential way.
- 6. Refer to appropriate services.
- 7. Reintegrate into the workplace.

Employee Assistance Programs

Employee assistance programs are programs, sponsored by the organization or a union, that help employees by identifying and addressing a broad spectrum of health, economic, and social issues, including substance abuse and mental health. An EAP can enhance the work climate of an organization and promote the health and wellbeing of everyone involved.

EAPs usually are multifaceted programs that are designed to help employees with personal problems that affect their job performance.

Though some EAPs concentrate primarily on alcohol and other drug problems, most EAPs address a wide range of employee problems: stress, marital difficulties, financial trouble, and legal problems. Most EAPs offer a range of services: employee education (onsite or offsite), individual and organizational assessment, counseling, referrals to treatment. EAPs can also train supervisors for your program. Contracting with an EAP has been found to be a cost-effective approach to providing assistance to employees. There are also free and low-cost ways to provide assistance. To cut costs, some employers use SAMHSA's helpline (1.800.WORKPLACE), partner with other organizations, or rely on communitybased, drug-free coalitions. For help with finding local initiatives and coalitions:

- Look in the phonebook, under your city's name, for entries like "Drug-Free Business Initiative" or "Coalition for Drug-Free Workplaces."
- Call or write your State or county office for alcohol and drug abuse services, and ask the office if it has a list of groups near your workplace.
- Call or write your local mayor's office, the police department's community relations office, or the office of economic development, and ask if the office has a list of coalitions.
- Call or write your chamber of commerce or business or trade association, and ask if it has services to help employers start a drug-free workplace program.

Call SAMHSA's Workplace Helpline at 1.800.
 WORKPLACE (1.800.967.5752).

Different Types of EAPs	
 Internal/in house Fixed-fee contract Fee-for-service contracts Consortia Management-sponsored programs Peer-based programs Member assistance programs 	

How Can You Find a Qualified EAP Provider?

The first step in implementing an EAP is to find a qualified service provider. EAPs can either be separate from or combined with insurance/health care plans.

Currently there are no national licensure programs for EAP providers. However, several States are considering such programs. Two professional associations-the Employee Assistance Professionals Association (EAPA) and the Employee Assistance Society of North America (EASNA)have developed certification procedures for EAP providers. The Certified Employee Assistance Professional credential indicates satisfactory knowledge about addictions, intervention, and related skills. For a fee, EAPA or EASNA can also provide directories of EAP providers by area or region. Call EASNA at 763.765.2385 between 8:30 a.m. and 5 p.m., Monday through Friday, Central Standard or Daylight Time. Call EAPA at 703.387.1000 between 8:30 a.m. and 5:30 p.m., Monday through Friday, Eastern Standard or Daylight Time.

Drug Testing

An increasing number of businesses across the country are instituting drug-free workplace policies that include workplace drug testing programs, for a host of reasons. Some do it to comply with Federal regulations, customer or contract requirements, or insurance carrier requirements. Others wish to improve safety, minimize the chance of hiring employees who may be users or abusers, deter "recreational" drug use that could lead to addiction, identify current users and abusers and refer them for assistance, or reduce the costs of alcohol and other drug abuse in the



workplace. Drug testing is one way to protect your workplace from the negative effects of alcohol and other drug abuse. A drug testing program can deter

employees from coming to work unfit for duty. It can also discourage alcohol and other drug abusers from joining your organization in the first place.

References

- ¹ Donna M. Bush and J.H. Autry III. 2002. "Substance Abuse in the Workplace: Epidemiology, Effects, and Industry." *Occupational Medicine: State of the Art Reviews* 17:13–25.
- ² Royer F. Cook and William E. Schlenger. 2002.
 "Prevention of Substance Abuse in the Workplace: Review of Research on the Delivery of Services." *Journal of Primary Prevention* 23:115–42.
- ³ Laura Ferrer–Wreder, Hakan Stattin, Carolyn Cass Lorente, Jonathan G. Tubman, and Lena Adamson. 2003. *Prevention and Youth Development Programs: Across Borders*. New York, New York: Kluwer/Plenum Academic Publishers.



Hallmarks of Successful Drug-Free Workplace Programs FACT SHIEFT

Characteristics of an Effective, Comprehensive Drug-Free Workplace Program

Employers who have successfully implemented drug-free workplace programs offered these suggestions to employers beginning to address possible alcohol and other drug abuse in their own organizations:

Think Things Through

Starting a drug-free workplace program is not difficult, but to be successful it helps to plan carefully. It is important to think ahead, define clear goals for the program, and seek advice from other employers with experience. Learn as much as you can about existing programs and policies before you begin.

Involve Employees

Work with your most valuable resource: your employees. They can help get the message out, clarify goals, and make sure the program fits into the daily reality of your workplace. Showing employees that you value their input vests them in the program and helps make it work. Most of your employees are not abusing alcohol or other drugs—they are already part of the solution.¹

Have Clear, Written Drug-Free Workplace Policies and Procedures That Are Applied Uniformly

Drug-free workplace programs are serious business. Protect your organization with procedural rules that are clear, fair, and consistently applied. The policy should also include provisions for appeal. With these steps in place, employees are more likely to support the program and trust that the employer will carry it out fairly.

Consider the Collective Bargaining Process

Where drug testing is a mandatory subject of collective bargaining, the rules for involvement of employee representatives are clear. Even when drug testing is not subject to collective bargaining, or when it is mandated by law, discussing the drug-free workplace policy with union representatives can be quite useful.² They may have model programs or other ideas to offer, and they can be helpful in communicating program purpose, procedures, and policies to the employees they represent.³

Protect Confidentiality

Employees will support and have faith in your drug-free workplace program when their confidentiality is protected. If employees choose to tell coworkers about their private concerns (such as the results of a drug test), that is their decision. However, when an employee tells you something in confidence, you are obligated to keep it between the two of you. To ensure employee support of the program and avoid legal problems, make confidentiality a priority and spell out the penalties for anyone who violates it.

Ensure Accurate Testing and Objective Review

If your program includes drug testing, ensure that a) samples are correctly collected, b) the chain of custody is flawless, c) the tests are conducted by properly trained and supervised lab technicians using equipment that is appropriately maintained, d) laboratory performance and accuracy are independently reviewed, and e) results are communicated through a Medical Review Officer trained to render judgments.

Ask for Legal Review

Whether you write the first draft of your policy yourself or tailor an existing policy to your needs, having your program, policy, and procedures reviewed by an attorney experienced in labor and employment matters in your State is extremely important. An attorney can advise you on any relevant State laws governing drug-free workplace programs or employer testing and on how the Americans with Disabilities Act may affect your program implementation. An attorney can also alert you as laws and regulations change over time.

Eliminate Stigma: Address Workplace Drug Abuse in the Context of Health, Safety, and Productivity

Policies and programs that foster workplace substance abuse prevention and intervention are part of a larger national movement to promote the health, safety, and well-being of individuals, families, and communities and to improve health, safety, and productivity in workplaces. A drug-free workplace program that communicates care and concern for employees is more likely to succeed than one that intimidates employees.



Ensure Good Communication and Ongoing Review

Successful programs ensure that managers, supervisors, union representatives, and employees are knowledgeable about their roles, rights, and responsibilities under the drug-free workplace policy. Explain your drug-free workplace program by using a variety of communication strategies. The message should be clear from the start. Effective ways to communicate include written materials, charts, meetings, question-and-answer sessions, and a suggestion box. Employers who are successful at this know it is important to repeat the message periodically, watch how the program works on a day-to-day basis, invite feedback, and revise the program as needed to meet the specific needs of the workplace.

Common Concerns Faced by Employers Considering Implementing a Program

Is My Organization Too Small?

No organization is too small to be concerned about creating a workplace free of the effects of alcohol and other drug abuse. Problems related to alcohol and other drug abuse can arise in a workplace of any size, and a workplace without a policy or program is exactly where problems are likely to occur.

Will a Drug-Free Workplace Program Cost Too Much Money?

You can be part of the solution without spending a lot of money. Although smaller organizations usually have fewer resources for hiring outside trainers or for paying for treatment, they can do something. Free or low-cost assistance is often available. Implementing a drug-free workplace program in stages is another option; for example, you could begin by establishing a clear policy that defines the organization's expectations. That way, everyone knows what to do if an alcohol or other drug problem arises. The materials in this Kit offer suggestions to help you minimize the cost of a program. Finally, remember: the new drug-free program may look like a costly investment; however, in the long run, it saves many dollars for each dollar spent. For example, a large transportation company found a 27-to-1 return on investment for its program.⁴

Will I Be Sued?

Drug-free workplace policies, drug testing, and personnel actions that are tied to violating a drugfree workplace policy are widely accepted employment practices. As long as confidentiality is protected and the employer implements the policy fairly and consistently, the chances of being sued are minimal. Again, have your policy and procedures reviewed by an attorney who is experienced in labor and employment matters in your State—before you put the policy and program in place.

Do I Need to Bother? Wouldn't I Know if Employees

Were Abusing Alcohol or Other Drugs?

Abuse and addiction are serious and complex, and they can be progressive illnesses.⁵ You may not realize that an employee is having a problem until the later stages of the disease, since the health indicators of abuse or addiction are more apparent in the later stages. Many of those who abuse alcohol and other drugs are in denial of their problem or don't recognize it in themselves. Others are concerned about being found out and losing their jobs and their homes.

Having a program in place now can reduce costly problems in the future. In addition to all of the other health, safety, and security risks that can arise, no employer wants to be the employer of choice for people who abuse alcohol or other drugs.

Will Having a Program Create Negative Attitudes Among Employees?

Employees may be concerned and have questions about any new policy or program that their workplace introduces. Because of the sensitive nature of a drug-free workplace program, it is important to involve employees, listen to their questions and concerns, and explain why the decision has been made to implement a drug-free workplace program in the organization. Frequently, sharing how these programs increase the health of both employees and their families and possible health cost savings can be a reassuring discussion.

References: 1. U.S. Department of Health and Human Services (DHHS), SAMHSA, Office of Applied Studies. 2007. *Results From the 2006 National Survey on Drug Use and Health: National Findings.* Rockville, Maryland, 27. **2.** Ted R. Miller, Valerie S. Nelkin, Les R. Becker, J. Crivelli, Bryon Sogie-Thomas, and Rebecca S. Spicer. 2002. "The PeerCare Program: Process Evaluation." Calverton, Maryland: Pacific Institute for Research and Evaluation. Prepared under Cooperative Agreement 1–U1K–SP08096 for the Center for Substance Abuse Prevention, SAMHSA, U.S. DHHS. **3.** Robert R. Bonds and Effie Bastes. 1999. "A Peer-Professional Team Intervention Approach in the Treatment of Drug and Alcohol Problems in the Workplace." Paper presented at the International Union of Railways World Conference on Occupational Health and Safety (September 23). **4.** Ted R. Miller, Eduard Zaloshnja, and Rebecca S. Spicer. 2007. "Effectiveness and Benefit-Cost of Peer-Based Workplace Substance Abuse Prevention Coupled With Random Testing." *Accident Analysis & Prevention* 39(3):565–73. **5.** Tian Dayton. 2000. *The Origins of Trauma: Trauma and Addiction: Ending the Cycle of Pain Through Emotional Literacy*. Deerfield Beach, Florida: Health Communications Inc.



Why You Should Care About Having A Drug-Free Workplace FACT SHEET

Because Substance Abuse in the Workplace Is a Widespread Problem

Alcohol and other drug abuse is widespread in our society. It affects us all in many ways. Although national, State, and local efforts have begun to show encouraging results, the problem of alcohol and other drug abuse remains a serious problem. No workplace is immune. According to the 2006 *National Survey on Drug Use and Health*, 74.9 percent of all adult illicit drug users are employed full or part time.¹ Most binge and heavy alcohol users are also employed full or part time.²

Because Substance Abuse in the Workplace Can Have Serious Consequences

Substance abusing employees often do not make good employees. Studies show that, compared with non–substance abusers, they are more likely^{3, 4, 5, 6, 7, 8}

- ✓ To change jobs frequently
- ${ \ensuremath{ \$
- ✓ To be less productive employees
- ✓ To be involved in a workplace accident
- ✓ To file a workers' compensation claim

Substance abusing employees often do not make good employees.

Workplace substance abuse can also have a serious effect on people other than the abuser. For example, some studies suggest that working alongside a substance abuser can reduce nonabusers' morale and productivity.⁹ It also is quite common for substance abusing workers who are involved in workplace accidents to injure other people (rather than themselves), especially if they work in safety-sensitive industries, such as the transportation or construction industry.¹⁰

Because, in Some Cases, It's the Law

In 1986 the President signed an Executive order mandating that all Federal agencies be drug-free. In 1988, Congress passed the Drug-Free Workplace Act,¹¹ which requires Federal grantees and recipients of Federal contracts of \$100,000 or more to comply with the following:

- ✓ The employer must have a written policy that explains what is prohibited and the consequences of violating the policy.
- Employees must read and consent to the policy as a condition of employment on the project.
- ✓ The employer must have an awareness program to educate employees about alcohol and other drugs of abuse and addiction, the employer's policy, and available help, including counseling and other assistance.
- Employees must disclose any conviction for a drug-related offense in the workplace to the employer within 5 days after such conviction.
- Employers must disclose any conviction for a drug-related offense in the workplace to the Federal agency with which the employer has a grant or contract, within 10 days after receiving notice from the employee or others.



 $rac{2}{3}$ Employers must make an ongoing effort to maintain a workplace free of drugs.

If you, as a Federal contractor, are found not to have a drug-free workplace, each contract awarded to you by any Federal agency may be suspended, terminated, or both. You may find yourself ineligible for award of any contract by any Federal agency, and for participation in any future procurement by any Federal agency, for up to 5 years.

Some employers are also subject to the provisions of the 1991 Omnibus Transportation Employee Testing Act. This Act requires that employees in certain safety-sensitive positions (such as in the aviation, trucking, railroad, mass transit, and pipeline industries) be tested for alcohol and drug use. The transportation industry has established additional policies on drug and alcohol testing, to ensure that workers operate aircraft, trains, trucks, and buses in a safe and responsible manner.

If you have questions about whether you are required to have a program in your workplace, call SAMHSA's free and confidential Workplace Helpline at 1.800.WORKPLACE for assistance.

And Because Good Programs Can Help

Employers who have implemented drug-free workplace programs have important experiences¹² to share:

- Employers with successful drug-free workplace programs report improvements in morale and productivity and decreases in absenteeism, accidents, downtime, turnover, and theft.
- Employers with longstanding programs report better health status among, and decreased use of medical benefits by, many employees and family members.
- Some organizations with drug-free workplace programs qualify for incentives, such as decreased costs for workers' compensation and other kinds of insurance.¹³
- Employers find that employees, employee representatives, and unions often welcome drug-free workplace programs.¹⁴ If you do not have a program, your employees may be wondering why.

References: 1. U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies. 2007. Results From the 2006 National Survey on Drug Use and Health: National Findings. Rockville, Maryland, 27. 2. Ibid, 37. 3. Michael T. French, Gary A. Zarkin, and Laura J. Dunlap. 1998. "Illicit Drug Use, Absenteeism, and Earnings at Six U.S. Worksites." Contemporary Economic Policy 16(3): 334–46. 4. Terry C. Blum, Paul M. Roman, and Jack K. Martin. 1993. "Alcohol Consumption and Work Performance." Journal of Studies on Alcohol 54:61-70. 5. Harold D. Holder and J. Blose. 1991. "A Comparison of Occupational and Nonoccupational Disability Payments and Work Absences for Alcoholics and Nonalcoholics." Journal of Occupational Medicine 33(4):453–57. 6. Donna M. Bush and J.H. Autry III. 2002. "Substance Abuse in the Workplace: Epidemiology, Effects, and Industry." Occupational Medicine 17:13–25. 7. J. Normand, S.D. Salyards, and J.J. Mahoney. 1990. "An Evaluation of Preemployment Drug Testing." Journal of Applied Psychology 75(6):629–39. 8. Earl S. Pollack, Gary M. Franklin, Deborah Fulton-Kehoe, and Risana Chowdhury. 1998. "Risk of Job-Related Injury Among Construction Laborers With a Diagnosis of Substance Abuse." Journal of Occupational and Environmental Medicine 40(6):573-77. 9. Hazelden. 2005. "Employees Report Coworkers Are Less Productive Due to Substance Abuse or Addiction Within Family." Found at http://www.hazelden.org/web/public/mrab_2005 survey.page/. 10. Ibid. 11. U.S. House of Representatives. 1988. Drug-Free Workplace Act of 1988 U.S.C. 701–707. and U.S. House of Representatives. 1998. Drug-Free Workplace Act of 1998 U.S.C. 105–584. 12. Joel Bennett and Wayne E. K. Lehman. 2003. Preventing Workplace Substance Abuse: Beyond Drug Testing to Wellness. Washington, D.C.: American Psychological Association. 13. U.S. Department of Labor. "Florida State Law: Drug Free Workplace Act." Found at http://www.dol.gov/asp/programs/drugs/said/ StateLaw.asp?id=694/. 14. Robert R. Bonds and Effie Bastes. 1999. "A Peer-Professional Team Intervention Approach in the Treatment of Drug and Alcohol Problems in the Workplace." Paper presented at the International Union of Railways World Conference on Occupational Health and Safety, September 23.



🖌 Conducting a Needs Assessment

Many people who use or abuse alcohol or other drugs also hold jobs. According to the 2006 *National Survey on Drug Use and Health*, about 75 percent of the estimated 17.9 million illicit-drug users ages 18 and older were holding full- or parttime jobs.¹ The same survey found that most binge drinkers and heavy drinkers were employed.²

From multiple studies, we also know that substance use and abuse lead to high costs to the economy, society, and the health of the Nation. For example, the Office of National Drug Control Policy estimates that, in 2002, drug abuse cost the United States \$180.9 billion³ (see chart). These costs reflect lost productivity, increased injuries, accidents, health care costs, bullying, harassment, theft, white-collar crime, and disease (including tuberculosis and HIV/AIDS and other sexually transmitted diseases).⁴

To prevent or reduce alcohol- and other drugrelated problems in workplaces, many employers have instituted drug-free workplace programs or components. Others have employed health and wellness programs with overlapping drug-free workplace program components, and with drug screening as a commonly implemented component. The American Management Association conducted a survey in 2004 that found that about 62 percent of employers conducted



tests for illegal or controlled substances.⁵ The employers surveyed by the association conducted workplace drug testing to screen applicants for jobs and to test

employees for fitness for duty and for reassignment. Meanwhile, other employers have

begun to emphasize prevention efforts, such as workplace health and wellness programs, including health and risk assessments.^{6, 7, 8, 9}

But how can a workplace determine what it specifically needs? A needs assessment for a drugfree workplace program can systematically analyze "how things are" and how the program can improve the organization and help meet employees' needs. Much information is now available to help employers select programs and program components that can be the most useful for their workplaces. However, because these programs and components can be costly, it makes sense to complete a needs assessment first.

Distribution of Cost of Drug Abuse, 2002 By Major Cost Components



What Does a Needs Assessment Do and How Can Workplaces Go About Doing One?

In brief, a needs assessment can gauge the extent of costs related to substance abuse. These costs may arise from accidents, injuries, and high turnover rates. A needs assessment can also address workplace legal mandates, executive mandates, mission, goals, culture, internal and external constraints, facilities, resources, and the knowledge base. And it can use a variety of techniques to measure the extent of the needs and to identify program components that are likely



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to be the most useful in addressing those needs. Components might include focus group meetings, consultations with key personnel, examination of work products, analysis of

workplace administrative data, and employee, management, and union surveys.

Needs Assessment Map

Decide Who Conducts the Needs Assessment Some employers hire consultants to conduct needs assessments and evaluations.¹⁰ However, hiring outside help may not be an option for organizations with limited resources. Just as a policy and program doesn't have to be complex and costly to be effective, a needs assessment doesn't have to be complicated. Anyone—from a business owner or organization head to an HR representative to an outside consultant—can conduct a basic needs assessment within an organization, appropriate to the organization size. The needs assessment can be tailored to the amount of resources a company has to address this issue.

Involve Others

One key to the success of any drug-free workplace policy and program is to involve employees and union officials from the very beginning of the needs assessment process. Employers whose



workplaces are unionized may need to bargain with the unions about the drugfree policy and program. They certainly will want to enlist their cooperation and support in the early stages

of assessing needs. Employers will probably also want to include both supervisory and nonsupervisory employees in this process.

Articulate the Mission and Goals

Success can mean different things to different

people. Some employers, for example, may want primarily to meet the legislative requirements. Other employers may want to improve productivity and the return on their investment. Still others may want to change the lives of their workers and their workers' families.

When starting to assess workplace needs, it is helpful to ask some key questions. For example:

- What legislative or regulatory requirements must the organization meet with respect to substance use and abuse?
- Are there employees in safety-sensitive roles? For example, are there employees who administer health advice, medicine, or services, or employees who drive vehicles, operate machinery, handle chemicals, or work with the public—particularly with children?
- Are there employees in jobs that are security sensitive? For example, are there employees who are responsible for confidential ideas, products, plans, or documents; employees who are responsible for accounting, cash, inventory, or stock; or employees who work offsite, such as traveling salespersons, home workers, or home health care workers?
- Do certain employees perform functions that are of extreme importance to the organization? For example, are there accountants who handle large sums of money, sales persons who represent the company to key buyers, employees who monitor nuclear power dials, or supervisors who manage many employees?

Link Each Goal to Something Measurable

If one of the goals is to "have an employee who is drug-free," determine exactly what this means and how this will be measured. Such broad goals are often measured by defining more concrete, strategic objectives, such as "increased volunteer use of the EAP."

Get a Baseline

Document what the workplace is like before the drug-free workplace policy and program are implemented. This pretest, or baseline, information gives something to compare with after the policy and program have been developed and implemented. To develop a useful baseline for a drug-free workplace policy and program, a workplace can do the following:

1. Collect and Analyze Data on the Current Situation

Qualitative Data. For example, what do supervisory and nonsupervisory employees say about the safety, health, and productivity of the workplace before the program is implemented? What is the morale of the company before the program? What are other organizations in the industry and in the area doing to promote health, safety, and productivity? What are the characteristics of the organization (e.g., small business; employees who are home workers)? How does management work with unions? What is the corporate culture toward alcohol and other drugs? Is alcohol served at company functions? What is the corporate perspective on health and wellness of employees? How supportive are supervisors and managers toward employees' work-life family needs? Are employees fearful of colleagues who are abusing drugs?

Quantitative Data. For example, what are the numbers on turnover, absenteeism, tardiness, use of health care benefits, and workers' compensation claims? What is the percentage of loss, including theft, accidents, and poor-quality goods?

2. Understand Legal and Other Requirements Review national, State, and local industry requirements for safety. Determine whether there are any statutes offering financial benefits for

having a drug-free workplace policy and program. Some of these benefits include garnering preference in contract bids and getting workers' compensation premium discounts or other reductions.

3. Identify Future Needs and Goals

What is the business development plan? How will the policy and program affect this?

4. Identify Resources

Look at internal and external resources for implementing a policy and program.

Estimate the Costs and Benefits

Rising health care costs have increased pressure on employers to monitor costs, cost effectiveness, and cost-benefit ratios for all health care services, including substance abuse–related services.¹¹ Even though the exact economic costs and



benefits of a drug-free workplace policy and program can be difficult to measure, reasonable estimates can be calculated. Returns on investment (ROIs) have varied across industries

and geographical locations, but some have been dramatic. One study, for example, found a \$27 to \$1 ROI in a major transportation company, and this was considered a conservative estimate.¹² The costs that programs have addressed include injury, lost productivity, employee turnover, health care, workers' compensation, job dissatisfaction, litigation, and crime.

A drug-free workplace policy and program can help achieve multiple goals and outcomes, some of which are easier to measure than others. The main goal and outcome, which is most obvious, is to reduce or eliminate workplace drug use. Another may be to increase the safety of one's employees and the public. Others may be less obvious, but also important, such as promoting healthy behaviors at work, encouraging workers to develop a team focus, and creating a supportive work environment. Try to measure progress in many, if not all, of these goal and outcome areas when evaluating the program's success.

Most of all, remember this: although it may take a while before some cost savings become visible, improvements in employee morale may be evident right away.

Describe the Process

Document the steps taken to develop and implement the policy and program. Recording this information can help an employer improve the process later on. Some steps that might be taken and that should be documented include developing consensus by building a team, revising the policy to incorporate feedback from others, addressing legal requirements, and assessing employees' strengths and their areas in need of improvement.

Find a Way to Compare

It can be helpful to compare what the workplace looked like both before and after implementing the policy and program, as a way to show savings and costs.

Another powerful way to show change is to compare the organization's efforts with the efforts of another organization. Some professional groups encourage this kind of comparison. Another way is to compare one of the organization's worksites (for example, one that has an extensive drug-free workplace program) with another of the worksites (for example, one that has only very basic drugfree workplace training).

Evaluation should be ongoing. Don't be discouraged if results aren't apparent right away. The cycle of evaluation encourages ongoing reassessment of the goals, objectives, means for achieving those objectives, and ways of measuring processes and outcomes. The evaluation results will contribute to informed decisions about whether, and in what ways, the policy and program can be improved.

Some States offer financial incentives to encourage businesses to adopt drug-free workplace programs, including

1. A reduction in workers' compensation premiums

2. A reduction in unemployment insurance premiums

3. Tax deductions in an amount equal to the amount of expenditures for employee assistance programs, treatment, or testing for illegal drugs

References

- ¹ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies. 2007. *Results From the 2006 National Survey on Drug Use and Health:* National Findings. Rockville, Maryland, 27.
- ² Ibid, 37.
- ³ Executive Office of the President of the United States, Office of National Drug Control Policy (ONDCP). 2006. *The Economic Costs of Drug Abuse in the United States* 1992–2002. Available at http://www.whitehousedrugpolicy.gov/publications/economic_costs/
 e_summary.pdf/.
- ⁴ It should be noted that these estimates are an update of the detailed cost study for 1992 (H.J. Harwood, D. Fountain, G. Livermore, and others; 1998; "The Economic Costs of Alcohol and Drug Abuse in the United States"; Rockville, Maryland: National Institute on Drug Abuse and National Institute on Alcohol Abuse and Alcoholism). They
- have been updated with the most current data available (ONDCP, 2006).
 American Management Association. 2004. "Workplace Testing Survey: Medical Testing." Available at http://www.amanet.org/research/pdfs/
 Medical_testing_04.pdf/.
- ⁶ Royer F. Cook and William E. Schlenger. 2002. "Prevention of Substance Abuse in the Workplace: Review of Research on the Delivery of Services." *Journal of Primary Prevention* 23(1):115–42.
- Max Heirich. 2001. "Worksite Health Promotion: What Works?"
 Presentation at Workplace Substance Abuse Prevention:
 Visualizing the Future-Research, Practice, and Policy. Sponsored
- by the Center for Substance Abuse Prevention, Washington, D.C.
 Max Heirich. 2000. "Findings From a Study on the Effectiveness of a Proactive Outreach Program in the Worksite." Available at http://www.workplace.samhsa.gov/Prevention/Pages/Synopsis_
 Overview/EBriefings_Max_Heirich.aspx/.
- Max Heirich and Cynthia J. Sieck. 2003. "Helping At-Risk Drinkers Reduce Their Drinking: Cardiovascular Wellness Outreach at Work." In Joel B. Bennett and Wayne E.K. Lehman (eds.). Preventing Workplace Substance Abuse: Beyond Drug Testing to Wellness.
- Washington, D.C.: American Psychological Association, 135-64.
 Paul Connolly and Kathleen Groll Connolly. 2006. *Employee Surveys:* Practical and Proven Methods, Samples, Examples, Second
 Edition. Old Saybrook, Connecticut: Performance Programs, Inc.
- ¹¹ Jeremy Bray and Gary A. Zarkin. N.d. *Economic Evaluation of Alcoholism Treatment*. National Institute on Alcohol Abuse and Alcoholism.
- Available at http://pubs.niaaa.nih.gov/publications/arh291/27-33.htm/. Ted R. Miller, Eduard Zaloshnja, and Rebecca S. Spicer. 2006. "Effectiveness and Benefit-Cost of Peer-Based Workplace Substance Abuse Prevention Coupled With Random Testing." Accident Analysis and Prevention 39(3):565–73.



Developing a Drug-Free Workplace Policy

Deciding What to Put Into a Policy

This section of the Kit describes the key elements of an effective drug-free workplace policy. When developing a policy, organizations need to take into account factors such as drug-free workplace laws and regulations that may apply to them, characteristics of their workplace and employees, and the organization leaders' values and priorities. When it comes to drug-free workplace policies and programs, one size does not fit all-different organizations in the same industries and in different industries may address workplace drug use and abuse in a variety of ways. There are many options. It is vital that organizations go through the steps needed to ensure that the drugfree workplace policy is right for their workplace and their workers. Every business owner and every department director will want to talk with their employees and with colleagues in other organizations and gather accurate information about the challenges, problems, and strengths unique to their workplaces.

When Drug-Free Workplace Laws and Regulations Apply

Businesses and other organizations covered by drug-free workplace laws and regulations must ensure that their drug-free workplace policies and programs fully comply with those laws and regulations. This compliance will help reduce drugrelated problems in the workplace.

In addition, organizations may want to go beyond meeting the minimum requirements.

For example, they may want their policies and programs to address legal substances (such as alcohol and tobacco) as well as illegal substances (such as marijuana and cocaine) and workplace behaviors and outcomes that can be related to drug use (such as repeated sickness and absenteeism directly before or after holidays or weekends).

When Drug-Free Workplace Laws and Regulations Do Not Apply

Organizations may want to establish drug-free policies and programs even if there are no drugfree workplace laws or regulations that apply to them. Such policies can be relatively narrow (with a concentration on illegal drugs) or broader (with attention paid to legal substances, prescription drugs, and behaviors that can be drug related).

Whether or Not Drug-Free Workplace Laws Apply, a Lawyer or Other Legal Expert Must Review the Policy

Every organization should ask a lawyer or other legal expert—with specific knowledge about drugfree workplace policies, programs, and case law to review the draft policy, whether or not the businesses are covered by drug-free workplace laws or regulations. (Some organizations may ask a lawyer to do more than review the draft policy; they may want a lawyer to help them put it together from the beginning.)

The steps taken to prevent or reduce drug abuse can affect the employment, and future



employability, of the workers. As a result, there are legal, health, safety, and productivity issues that can lead to legal appeals and lawsuits. Every organization needs to

ensure that all legal obligations are fully met and that both the employer's and the employees' legal rights are properly protected.



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A Written Policy Helps Each Organization

There are many reasons to put the drug-free workplace policy in writing:

- A written policy may be required by a law or by the organization's insurance carriers.
- It makes legal review possible.
- It provides a record of the organization's efforts and a reference if the policy is challenged. It may protect the employer from certain kinds of claims by employees.
- A written policy is easier to explain to employees, supervisors, and others.
- Putting the policy in writing also helps employers and employees concentrate on important policy information.

Basic Elements of an Effective Policy

An effective drug-free workplace policy covers the following elements:

Statement of Purpose Background

 How was the policy developed? (For example, was it developed in meetings with union representatives or employees representing different segments of the workforce, after consultation with other businesses in the same industry, in collaboration with the organization's legal counsel?)

Goals

- What are the drug-free workplace laws and regulations (Federal, State, or local) with which the organization must comply (if applicable)?
- What other goals does the organization expect to achieve? (For example, does it hope to reduce or eliminate drug-related workplace accidents, illnesses, and absenteeism?)

issue of preventing and treating workplace drug use in the context of accomplishing a broader goal of promoting worker health, safety, and productivity? Many successful policies have taken this approach.

Definitions, Expectations, and Prohibitions

- How does the organization define substance abuse?
- What employee behaviors are expected?
- Exactly what substances and behaviors are prohibited?
- Who is covered by the policy?
- When will the policy apply? (For example, will it apply during work hours only, or also during organization-sponsored events after hours?)
- Where will the policy apply? (For example, will it apply in the workplace, outside the workplace while workers are on duty, in organization-owned vehicles while workers are off duty?)
- Who is responsible for carrying out and enforcing the policy?
- Will the policy include any form of testing for alcohol or other drugs?
- Are any employees covered by the terms of a collective bargaining agreement, and, if so, how do the terms affect the way the policy will be carried out and enforced for those employees?

Implementation Approaches Benefits and Assurances

- How will the organization help employees comply with the policy?
- How will the organization protect employees' confidentiality?
- Does the organization want to address the

- How will the organization help employees who seek help for drug or related problems?
- How will the organization help employees who are in treatment or recovery?
- How will the organization ensure that all aspects of the policy are implemented fairly and consistently for all employees?

Consequences and Appeals

- What are the consequences of violating the policy?
- What are the procedures for determining whether an employee has violated the policy?
- What are the procedures for appealing a determination that an employee may have violated the policy?

Dissemination Strategies

How will the organization educate employees about the policy? (For example, the organization



can train supervisors, discuss the policy during orientation sessions for new employees, and inform all employees about the policy using a variety

of formats—such as a section in the employee handbook, posters in gathering places at work sites, information on the organization intranet.)

Resources for Developing a Written Policy

The most important task for every organization is to ensure that the policy meets the needs of its employees and workplace. Whether or not laws and regulations apply, the policy should address the key topics outlined above. Organizations can write (or adapt) and organize content on the key topics using whatever language and structure will best communicate the information to their workers. Organizations do not need to start from scratch. They can borrow and adapt information from drug-free workplace policies put together by other organizations in their industry. Since the Drug-Free Workplace Act was passed, many national, regional, and local programs have been set up to help employers create effective policies. The programs provide free or low-cost information, technical assistance, or model policies that organizations can customize to meet their particular needs. To learn more about these and other resources, organizations can call SAMHSA's Workplace Helpline at 1.800.Workplace.

Following are general guidelines for developing or adapting a written drug-free workplace policy.

Statement of Purpose

The statement of purpose should contain the organization's goals for the workplace policy, the organization's definition of *substance abuse*, other information outlined under "Definitions, Expectations, and Prohibitions," and a description of how the policy was developed. Some organizations may want the policy to have a very narrow goal, such as meeting the minimum requirements of a law. Other organizations may prefer broader goals that go beyond minimum requirements.

If Laws and Regulations Apply

Organizations covered by drug-free workplace laws and regulations may choose to use or adapt one of the following sample statements of purpose:

1. Meeting the Legal Requirements

The purpose of this policy is to meet the requirements of applicable laws and regulations to ensure that the workplace is free of illegal drugs.

2. Addressing Other Substances as Well

The purpose of this policy is twofold: a) to meet the requirements of applicable laws and regulations to ensure that the workplace is free of illegal drugs and b) to establish restrictions on the workplace-related use of legal substances, such as alcohol, cigarettes, and prescription drugs.

3. Addressing Other Problems, Which Can Be Related to Drug Use

The purpose of this policy is fourfold: a) to meet the requirements of applicable laws and regulations to ensure that the workplace is free of illegal drugs; b) to establish restrictions on the workplace-related use of legal substances, such as alcohol, cigarettes, and prescription drugs; c) to address other behaviors (such as repeatedly calling in sick or being absent directly before and after holidays and weekends, repeatedly damaging inventory or failing to meet reasonable production



schedules, being involved in frequent accidents, and the like) that can be related to the abuse of alcohol and other drugs; and d) to explain the steps that will be

taken to prepare employees, identify problems, and provide assistance.

If No Laws or Regulations Apply

Even if drug-free workplace laws and regulations do not apply, organizations may want to develop a drug-free workplace policy and program. If so, they still can adapt one of the sample statements of purpose above, simply omitting the words "to meet the requirements of applicable laws and regulations."

Policy Options

Option 1. Meeting the Requirements of The Law

When laws or regulations apply, organizations must ensure that they know exactly what the laws or regulations require. For this reason, it is essential to seek the advice of an experienced lawyer or other appropriate legal expert.

In addition, it is good practice for organization executives to be familiar with three types of Federal laws and regulations that cover many businesses. Summarized below are requirements, including rules and regulations, for 1) Federal grantees and contractors, 2) safety-sensitive industries, and 3) Department of Defense (DOD) contractors. Organizations not covered by these requirements still may want to adopt some of the same language for use in their drug-free workplace policy.

Requirements of Federal Contractors and Grantees in General

The most important piece of legislation regulating Federal contractors/grantees is the Drug-Free Workplace Act of 1988.¹ This Act requires any organization that receives a Federal contract worth at least \$100,000 to establish a drug-free workplace policy. It also requires that all organizations receiving Federal grants of any size establish and maintain such a policy.

At a minimum, the organization must

1. Prepare and distribute a formal drug-free workplace policy statement. This statement should clearly prohibit the manufacture, use, and distribution of controlled substances in the workplace and spell out the specific consequences of violating this policy.

2. *Establish a drug-free awareness program.* The program should inform employees of the dangers of workplace substance abuse; review the requirements of the organization's drug-free workplace policy; and offer information about any counseling, rehabilitation, or employee assistance programs that may be available.

3. Ensure that all employees working on the Federal contract understand their personal reporting obligations. Under the terms of the Act, an employee must notify the employer within 5 calendar days if he or she is convicted of a criminal drug violation in the workplace.

4. Notify the Federal contracting agency of any covered violation. Under the terms of the Act, the employer has 10 days to report that a covered employee has been convicted of a criminal drug violation in the workplace.

5. *Take direct action against an employee convicted of workplace drug violation.* This action may involve imposing a penalty of some kind or requiring that the employee participate in an appropriate rehabilitation or counseling program.

6. Maintain an ongoing good faith effort to meet all the requirements of the Act throughout the life of the contract.

Covered organizations that fail to comply with terms of the Drug-Free Workplace Act may be subject to a variety of penalties, including suspension or termination of their Federal grants/contracts and prohibition from applying for Federal Government funds in the future.

Requirements for Safety-Sensitive Industries Department of Transportation (DOT) rules

and regulations. Employers and employees in fields that affect public safety and national security are, understandably, subject to additional drug testing requirements. The most important piece of Federal legislation affecting safetysensitive industries is the Omnibus Transportation Employee Testing Act of 1991.² This Act requires drug and alcohol testing of all safety-sensitive transportation employees in aviation, trucking, railroads, mass transit, pipelines, and other transportation industries.

Any employer whose business is regulated by one of the following Federal agencies is covered under the Act:

- Federal Aviation Administration
- United States Coast Guard
- Federal Motor Carrier Safety Administration
- Federal Transit Administration
- Federal Railway Administration
- Research and Innovative Technology
 Administration
- Pipeline and Hazardous Materials Safety Administration

While each of these agencies has developed its own specific set of guidelines and procedures for complying with the Omnibus Transportation Employee Testing Act, the following core requirements apply to all employers and employees within the transportation industry:

1. All employers in the transportation industry are required to test safety-sensitive employees at certain key points in their professional careers. These key points include preemployment (before the employee is hired), whenever there is reasonable suspicion that the employee has been involved in drug use, immediately after the employee is involved in an accident, and before allowing the employee to return to duty following suspension for drug abuse.

2. All employers in the transportation industry are also required to have a program of random drug testing in place.

 All drug testing conducted under the Act must be carried out by a laboratory certified by the U.S. Department of Health and Human Services.

4. All drug testing conducted under the Act must test for five different classes of drugs (and only those five classes): marijuana, cocaine, amphetamines, opiates, and phencyclidine (PCP).

5. All alcohol testing of employees must strictly adhere to the DOT's policies and procedures for alcohol testing, and the testing must be conducted using devices and equipment approved by DOT.

6. All positive tests must be reviewed by a trained Medical Review Officer, and employees must be allowed to consult with this officer before the test result is reported to the employer.

7. All employees, whether in safety-sensitive positions or not, must receive drug and alcohol awareness training and education.

8. All supervisors must receive at least 2 hours of training in substance abuse detection,

documentation, and intervention. Half this training time should be devoted to drug abuse, the other half to alcohol abuse.

9. Any employee who is determined to have a substance abuse problem must be referred by the employer to a trained Substance Abuse Professional. This person will be responsible for evaluating the employee's treatment needs and assessing the employee's ability to return to work.

Employers who are subject to the requirements of the Omnibus Transportation Employee Testing Act must ensure that their policies and procedures strictly adhere to DOT's requirements. Otherwise, employers run the risk of failing to comply with the Act or violating their employees' civil liberties, either of which can have serious consequences.

Organizations can obtain more detailed information on how to meet the requirements of the Act from DOT's Office of Drug and Alcohol Policy and Compliance, which publishes helpful guidelines and manuals for employers and employees. These materials are available online at http://www.dot.gov/ost/dapc/NEW_DOCS/part40.h tml?proc/.

Requirements for Security-Sensitive Industries

DOD rules and regulations. Transportation workers are not the only types of employees whose work affects public safety or security. The Department of Defense has developed its own set of regulations for contractors working in the national security arena (Section 48 CFR 252.223-7004³). Under these regulations, all DOD contractors with access to sensitive, classified information must maintain a drug-free workforce policy that includes the following:

1. A comprehensive employee assistance program, including coordination with local community service providers and resources.

2. Provision for self-referrals and supervisory referrals for drug treatment.

3. Supervisory training on detecting and responding to illegal drug use.

4. A carefully controlled and monitored employee drug testing policy. This testing policy should include provisions for testing a) when there is reasonable suspicion that an employee has been involved in illegal drug use, b) when an employee has been involved in an accident or unsafe practice, c) as part of a program of counseling or rehabilitation, and d) as part of a voluntary employee drug testing program.

The DOD regulations also require covered contractors to ensure that their drug testing policies are consistent with applicable State laws and that they are agreed to by any relevant labor unions. For more information on the Department of Defense's requirements, organizations can consult the Code of Federal Regulation (48 CFR 252.223-7004) and DOD's procurement center Web site at http://www.acq.osd.mil/dpap/.

Option 2. Addressing Other Substances

Organizations may want their drug-free workplace policies to cover one or more types of legally obtainable substances as well as illegal drugs. Under certain circumstances, substances such as alcohol, tobacco, and prescription drugs can adversely affect workplace health, safety, and productivity. Issues and options include the following:

Alcohol

The presence and use of alcohol in the workplace. Alcohol in the workplace can compromise safety and productivity. Thus, organizations may want their policy to prohibit the presence and consumption of alcohol in the workplace.

Working under the influence of alcohol.

Organizations also may want to prohibit working under the influence of alcohol, especially in safetysensitive positions, where operating heavy machinery while under the influence of alcohol could result in serious accidents. Alcoholic and nonalcoholic beverages at work-related parties. Organizations also may consider restricting the use of alcohol at workrelated parties and other events. Or they may require that nonalcoholic beverages be available for those who choose not to drink alcoholic beverages.

Tobacco

Organizations may choose to specify in their policy that they maintain a smoke-free workplace. Or they may prohibit the sale of tobacco products through vending machines located in the workplace and designate certain areas of the workplace as smoke free.

Prescription Drugs

Organizations may decide to set limits regarding allowing employees who are taking certain prescription medications to perform certain safetysensitive jobs, especially if the medications could affect concentration and motor skills. Or they may choose to require that workers who perform certain safety-sensitive jobs inform their supervisors if they are using such medications.

Option 3. Addressing Behaviors That Can Be Related to Drug Use

In their drug-free workplace policy, organizations may want to mention behaviors that can be related to drug use-such as repeatedly calling in sick or being absent before and after holidays and weekends, damaging inventory, and repeatedly missing reasonable production schedules. (However, businesses will want to avoid jumping to the conclusion that drug use is the culprit, because many other factors can cause or contribute to such problems.) Organizations may consider framing the issue of drug-related workplace behaviors in the larger context of worker health, safety, and productivity. For example, they may want the policy to make two general points. First, the policy's immediate objectives are to a) comply with drug-free workplace laws and regulations (if applicable) and b) prevent drug-related workplace accidents,
illnesses, absenteeism, and performance
problems, which can occur in any workplace.
Second, the policy's broader goals are to help
increase and protect worker health, safety, and
productivity. Workplace alcohol and other drug use
and abuse are the most widely occurring threats
to worker well-being in many different kinds of
businesses and industries.

Implementation Approaches

The policy's implementation section should cover the elements listed under "Consequences and Appeals," "Benefits and Assurances," and "Dissemination Strategies." Businesses may also want to address the following broad categories: "Prepare the Workplace," "Identify Issues," and "Provide Assistance."

Prepare the Workplace

The policy could state that all workers are responsible for being ready to work when they arrive at the workplace and for avoiding behaviors that could threaten their own safety and health or that of their coworkers. The policy could make clear that all employees will be educated about the policy, will be expected to understand it, and will know what they can do-given their particular work roles—to help make the policy succeed. The policy could clarify options for addressing coworkers' problem behaviors as well as the meaning of a) taking responsibility for one's own behavior, b) showing compassion by helping others, c) and being honest about problems that threaten health and safety in the workplace. The policy should state that the organization will train supervisors to ensure that they a) understand all applicable laws and regulations, b) know how to communicate effectively with their subordinates, and c) are consistent and fair when carrying out and enforcing the policy.

Identify Issues

The policy could indicate that supervisors will continually be on the lookout for major health and

safety issues including, but not limited to, workplace alcohol and other drug abuse. (Examples of other common health and safety concerns are exposure to toxic chemicals and excessively long work shifts.) If applicable, the policy could state that random testing for alcohol and other drugs will be part of this process. The policy must clearly explain how the organization will protect workers' privacy and confidentiality rights. The policy also could indicate that there will be regular reviews of aggregated organization data on absenteeism, damaged or stolen inventory, production problems, and the like. The point could be made that a drug-free, safe, healthy, and productive workplace is not one that is paralyzed by overly intrusive watchfulness. Rather, it is one in which employees willingly pursue the organization's goals by performing their jobs to the best of their ability under work conditions that are safe and healthy.

Provide Assistance

The policy should name the kinds of formal and informal assistance that the organization will provide to address and prevent workplace substance abuse. The policy could indicate that such assistance also will be available for mental health concerns such as depression and anxiety. Examples of formal assistance include access to an internal or external employee assistance program, a peer-to-peer assistance program based on Amtrak's highly successful Operation RedBlock, health care insurance that covers substance abuse and mental health treatment, and an organizationwide health promotion program that includes education about alcohol and other drug abuse. Examples of informal assistance include making available information on Alcoholics Anonymous, Narcotics Anonymous, and related 12-Step programs, and providing time out or walking breaks.

The policy should name the major consequences of violating the drug-free workplace policy and of failing to obtain and benefit from organizationprovided assistance. Possible consequences could range from a note in the record to suspension from work during treatment, transfer to a less safety-sensitive or security-sensitive position, demotion, or firing. The policy could state that the organization prefers to avoid severe penalties—by preventing workplace drug and alcohol abuse in the first place and by responding comprehensively as soon as a problem is identified—and will apply those penalties only when other actions have failed.

References

- ¹ U.S. House of Representatives. 1988. Drug-Free Workplace Act of 1988 U.S.C. 701–707. and U.S. House of Representatives. 1998. Drug-Free Workplace Act of 1998 U.S.C. 105–584.
- ² U.S. Department of Transportation, Office of Drug and Alcohol Policy and Compliance. *Procedures for Transportation Workplace Drug and Alcohol Testing Programs*. Available at http://www.dot.gov/ost/dapc/.
- ³ U.S. Department of Defense, Office of the Under Secretary, Defense Procurement and Acquisition Policy. 2005. *Defense Federal Acquisition Regulation Supplement*, Subpart 223.5-Drug-Free Workplace. Available at http://www.acq.osd.mil/dpap/dars/dfars/html/ r20070212/223_5.htm/.





Informing and Educating Your Employees

Employee education is a critical component of a drug-free workplace program. Frequently a cornerstone of prevention, employee education can help employees in a variety of ways. It can help them learn more about the hazards of



substance abuse and improve their own resilience to prevent substance abuse. It can help them understand the policies and rules of their workplaces and become

familiar with the steps they can take to get help for themselves and their families.

Employee education efforts can include information on the rights of employees and employers; the balance between the right of privacy and the need to know; the workplace's views about when treatment and recovery, or detection and disciplinary action, are appropriate; the implications of substance abuse for injury, accidents, and safety.

Many multimedia educational tools are available to help workplaces inform their employees about

effective programs and steps they can take to improve their health in general. These include SAMHSA's National Registry of Evidencebased Programs and Practices¹ and SAMHSA's GetFit site.²



As you plan your employee education effort, make sure it is aimed at all employees and all levels of the organization. Consider taking the following steps:

- Discuss the workplace's policy, program, and rules. Organizations have found it useful to hand out two copies of the policy—one to be signed and handed back, the other to be kept as a reference. As new people enter, make it part of the orientation package.
- Discuss how employees and their families can get help—for example, through an employee assistance program, a health/wellness program, health care coverage within the workplace, union resources, community outreach services, State and local treatment, and the like.
- Discuss how employee performance issues are to be evaluated.
- Discuss how management referrals and selfreferrals are handled.
- Provide details about the circumstances, procedures, and other elements of drug testing (if testing is included in the policy).
- Explain the confidentiality and other employee protections that are included in the policy.
- Provide information about substance abuse, including the types and effects of drugs, the symptoms of drug use and abuse, and their effects on performance.
- Explain the relationship of the employee assistance program to any drug testing, treatment, rehabilitation, and aftercare.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov Discuss prevention resources such as health/wellness programs, helplines and other resources available in the community, and online national resources such as http://getfit.samhsa.gov/. Likewise, explain what resources are available for employees' families.

Implementing Employee Education

Employee education components can use a variety of multimedia approaches, singly and in combinations. Orientation programs for new hires, for example, frequently include video presentations that provide general information about substance abuse and more specific information about the organization. More traditional methods have included the use of posters, print materials, payroll stuffers, newsletter articles, booths at health/wellness programs, and brownbag lunch presentations. Inhouse employee assistance practitioners often get to know employees by eating lunch with them, having drop-in discussions at meetings, and meeting with them individually to discuss employee relations issues, family problems, and

the like. Other in-house methods have included online information resources, seminars, and in-person and online trainings. External



programs often offer prevention meetings or seminars, online resources, and a 1–800 number to call.

Programs found in SAMHSA's National Registry of Evidence-based Programs and Practices add other components to their employee education programs, such as Team Awareness³ efforts, or health and wellness efforts that can concentrate on various topics such as cardiac health, menopause, osteoporosis, and how to talk to your children about drugs. Frequently, these programs have evaluation components, so that they can measure the economic costs, economic benefits, and other outcomes of the programs. More and more organizations understand that substance abuse education and prevention must be ongoing processes that evolve beyond an emphasis on



substance abuse policies, information, assistance, and discipline. In many cases, alcohol and other drug problems will have adverse impacts on employers, employees, and their families, even when the problems never come to the attention of management, the union, the employee assistance program, a health and wellness program, or a substance abuse treatment program. Many employees do not seek help for their alcohol or drug problems because the problems and the assistance are often stigmatized. However, when alcohol and drug interventions are linked to health and wellness promotion efforts-as is done in some of the newer approaches-the stigma is reduced and employees are more willing to seek the help they need.

Workplaces, when they are designing their prevention education efforts for employees, should consider addressing the special needs and interests of

- Employees interested in a range of health promotion and wellness issues—such as stress management, weight management, nutrition, activity/exercise—as well as disease prevention
- Employees who as parents, grandparents, or concerned family members want to learn to communicate effectively with the children in their lives about substance abuse, life skills, and decision-making
- Younger workers concerned about substance abuse among their peers

- Employees who are interested in being part of community-based prevention efforts and activities
- Employees who are interested in confidential, individual education (including Web-based education) on substance abuse and related issues

Some employers and unions survey their employee members and families to determine their needs for and interests in substance abuse programs, as well as in general wellness and health promotion education and services. Many employee assistance programs also offer or arrange for general and specialized employee education activities such as those outlined above.

Integrating Prevention Education Into Health Promotion Offerings. Research indicates that the impacts are greater when substance abuse prevention and early intervention activities are carried out in the broader context of wellness,



health promotion, and disease prevention efforts.^{4,} ^{5, 6} The popular topics of stress management, nutrition and weight management, and physical activity and exercise present

significant opportunities for providing educational materials and other elements on substance abuse prevention. The health topics discussed can be tailored to address specific workplace populations. For example, in workplaces with middle-aged women, embedding substance abuse prevention

messages in a discussion of osteoporosis may be useful. For workplaces with younger employees, a discussion of HIV/AIDS may be of interest. These and many other health issues



have ties to alcohol and substance abuse.

Methods for adding substance abuse prevention education into health promotion and wellness topics include the following:

Stress Management. Relying on alcohol or drugs to deal with problems and emotions can often create more problems and can lead to substance



dependence. Identification of the social and emotional rewards people seek from drugs, including alcohol, can easily be linked to the identification of healthy alternative ways to relieve

stress and to meet other social and emotional needs. Testimonials and stories from those who have been able to manage stress in healthy ways, including from those who have embraced healthier alternatives and are reaping the rewards, can motivate participants toward behavior change. Modeling opportunities (e.g., video vignettes) that promote the use of healthy alternatives and the avoidance of substance abuse can build selfefficacy and teach skills.

Nutrition and Weight Management; Active Lifestyle and Exercise. These health promotion topics can be used to raise awareness of the tendency of certain drugs (including alcohol) to lower inhibitions and cause dietary and exercise plans to run amok. Testimonials or stories of individuals who have changed their behaviors (e.g., by cutting down on alcohol consumption or by quitting the use of drugs to unwind) within the context of their weight management, nutrition, or exercise plans can help motivate change. A stepwise process for setting moderate drinking

goals for drinkers who can safely drink can easily be covered. These narratives provide an opportunity for discussing substance dependence and the risks of



prescription drugs such as diet drugs. Lessons on refusing extra food in social situations can be taught in tandem with the same skills in refusing alcohol or drugs. Nutrition offerings also provide an excellent context for factual information about the potential health benefits of moderate drinking for drinkers who can safely drink (defined as no more than two drinks a day for men and no more than one drink a day for women), as well as the risks of heavy alcohol consumption.

Instructions for Trainers

This section answers basic questions about how to effectively introduce a drug-free workplace policy and program to all your employees. Additional resources on this topic can be found in the SAMHSA descriptions of model programs in the National Registry of Evidence-based Programs and Practices (http://nrepp.samhsa.gov).

WHO?

All Your Employees Need to Know About the Benefits of the Drug-Free Workplace Policy and Program, and the Dangers of Work-Related Alcohol and Other Drug Use. Owners, top management, supervisors, and nonsupervisory employees at all levels should be prepared for the implementation of the policy and program. Everyone in the workplace needs information about the problems associated with the use and misuse of substances. They all can benefit from

education and training that reinforce and deepen that awareness. And they can benefit from activities that motivate



The Basics–The 3 Rs • Rationale • Requirements • Resources

them to adopt safer and healthier attitudes and behaviors. It is especially important that all your employees become familiar with the benefits of the drug-free workplace policy and program, especially when they are supported by other health and wellness programs and activities.⁷

For the policy and program to effect positive change, everyone must be on board. Research shows that the best way to encourage positive change is to involve everyone in understanding and actively supporting the process.⁸

WHAT?

The Basics. Developing a drug-free workplace policy does not require a lot of resources—using the Kit, a policy and program can be developed and implemented even if time and money are limited. When time and other resources are at a premium, workers can be informed about the organization's drug-free workplace policy and program in a short meeting.

At a minimum, your employees should be provided with the following information:

Rationale for the Policy

Present information on what the law requires (if the law applies to your workplace), why the program is important to the organization (whether or not the law applies), and how alcohol and other drug problems affect the workplace.

Provide various kinds of prevention information as part of the process of communicating the intention to create a healthy, safe, and productive drug-free workplace. Supplying basic information on alcohol, illicit drugs, and the nonmedicinal use of other drugs—as well as general health promotion information—will help reinforce the drug-free policy and program.

Requirements of the Policy

Information should be given on what situations the policy is attempting to prevent, and how the policy is likely to improve health, safety, and productivity in the workplace. The consequences of violating the policy should also be outlined.

Resources for Getting Help

Explain how to get help. Include information on the employee assistance program (if the organization has one). Describe the benefits offered by the health insurance plan. And identify local resources that may be available.

WHEN AND WHERE?

There Is No One Right Way to Inform, Educate, and Train Employees About the Drug-Free Workplace Policy and Program.

The characteristics of the workplace, the nature of the policy, and the elements of the specific program will determine when and where to provide information, education, and training.

Information That Is Presented in Smaller Amounts, Over Longer Periods, and Frequently Reinforced Is Often Better Understood and More Motivating Than One-Time-Only Handouts, Trainings, or Meetings. In addition, information that is conveyed through interactive formats has been found to be more effective in promoting desired changes in attitudes

and behaviors than information that is transmitted through oneway communications.⁹ And information, education, and training that are



provided and reinforced in the workplace itself rather than in an offsite classroom may make a deeper impact on workplace attitudes and behaviors.¹⁰

Examples of approaches used by workplaces include the following:

- A meeting with staff members or department heads to explain the organization's drug-free workplace policy and program
- Informational materials about the organization's program and about alcohol and other drug abuse provided in the form of pamphlets, paycheck stuffers, mailings, and flyers posted in lunchrooms
- Posters and signs reminding employees they are in a drug-free workplace and that the worksite promotes healthy activities such as regular exercise, good eating habits, and smoking cessation

- Access to interactive Web sites that are tailored to your own workplace and that promote health and safety, such as GetFit
- Weekly 10-minute booster sessions that give your employees important information about alcohol and other drug abuse prevention and health promotion
- Action tips for employers

As the program is implemented, it is important to remember that the employer's actions also educate and inform employees.

The following action tips can help employers communicate more clearly to employees about the importance of a drug-free workplace program to their personal health and the health of their families and communities:

- Announce (for example, by means of a letter to all employees from the CEO or other top management) that having a drug-free workplace program and preventing drug and alcohol problems in the workplace and in families is a major organizational emphasis.
- Fully explain the benefits and procedures of the drug-free workplace policy and program to all employees. (See training instructions at the end of this brochure).
- Communicate to your employees that drug and alcohol abuse pose significant problems for businesses and other organizations, including increased absenteeism, tardiness, and use of sick leave and health services; higher insurance and workers' compensation costs; more injuries, fatalities, and thefts; lower productivity and product quality; reduced employee morale; and higher turnover.
- Communicate to your employees the connection between the abuse of alcohol and

other drugs and the presence of health problems, including sexually transmitted diseases such as HIV/AIDS. Include guidelines for moderate alcohol consumption, for men and women who can safely drink alcohol.

- Host alcohol-free events, emphasizing the organization's commitment to preventing injury or death associated with drinking and driving, especially around the holidays.
- Provide food and beverages in business settings that encourage a healthy lifestyle.
- Be a positive role model, consistent with the messages conveyed to the employees. Do not engage in any illegal, unhealthy, or dangerous alcohol or other drug use.
- Sponsor or help with prevention services in the community that would benefit your employees and their families.
- Include prevention and healthy lifestyle articles in your organizational materials.
- Consider formulating a corporate performance standard that encourages community involvement to prevent alcohol and other drug problems as part of an ongoing commitment to making the community a better place in which to live and do business.
- Appoint a corporate representative to serve on and support any prevention-oriented programs or community partnerships in your area that focus on alcohol and other drugs.
- Take a comprehensive approach to prevention efforts. Serve as a leader, supporter, or active participant in other community-based efforts to prevent the use of alcohol, tobacco, and other drugs by youth.
- Support employees and their family members and encourage them to ask for assistance in

dealing with alcohol or other drug problems. Treatment is more cost effective than incurring potential safety problems and lost productivity attributable to drug-related problems.

Specific Training Instructions

The following employee education training has been used by many organizations as a first step in informing and educating employees about their workplace policies and programs. It is designed to inform individuals about the formal procedures that administrators will follow in dealing with



substance abuse. Many successful drug-free workplace programs see this as only a first step and have used it as a springboard for more personalized trainings that concentrate on health and wellness in a team-oriented fashion.

TRAINING



 Distribute the policy and be prepared to discuss the following questions:

What are the purposes of the policy and the program? Who is covered by the policy? When will the policy apply? What behaviors are prohibited? Are employees required to notify supervisors of drug-related convictions? Does the policy include searches? Does the program include drug testing?

lf so:

Who gets tested? When are drug tests given? Who does the drug testing? Who pays for drug testing? What steps are taken to ensure the accuracy of the drug tests?

What are the legal rights of employees who test positive?

What are the consequences for violating the policy?

Are there return-to-work agreements? What type of assistance is available to employees needing help?

How is employee confidentiality protected? Who is responsible for enforcing the policy? Who is responsible for answering any questions?

- Discuss the impact of substance abuse on workplaces.
 Fact sheet: Workplace Substance Abuse Statistics
- Discuss the effects of alcohol and other drugs on job performance and family.
 Fact sheet: The Effects of Alcohol and Other Drugs on Job Performance and Family
- Discuss the effects of alcohol and other drugs on your body
 Fact Sheet: Effects of Alcohol and Other Drugs on Your Body
- Let employees know that help is available
 Fact Sheet: Workplace Substance Abuse
 Prevention Resources
 Fact Sheet: GetFit.SAMHSA.Gov
 Other available assistance brochures (for example, from your Employee Assistance Program)

PREPARATION

Know each component of the policy and program. Pay particular attention about how employees can be

- Encouraged to get help.
- Given confidential and unrestricted access to an employee assistance program or counseling professional.
- Provided access to alcohol or drug treatment as part of a health benefits plan.

Schedule a meeting. All employees should be aware of the policy 30-60 days before it begins. Make sure to schedule during a slower time in the workday and week. Consider multiple meetings to ensure that all employees are able to attend.

Send a reminder the day before, specifying time and location of training.

Arrive early in order to set up, try out the equipment, and organize the materials.

Make sure all attendees sign-in.

EQUIPMENT

A. Handouts

- 1. The organization's drug-free workplace policy
- 2. Fact sheets
 - a. Workplace Substance Abuse Statistics
 - b. The Effects of Alcohol and Other Drugs on Job Performance and Family
 - c. Effects of Alcohol and Other Drugs on Your Body
 - d. Workplace Substance Abuse Resources
 - e. GetFit.SAMHSA.Gov
- 3. Other materials that explain wellness programs, health benefits, and how to get help for substance abuse.
- B. Computer for PowerPoint presentation (or handouts downloaded from Web site)
- C. Easel pad and markers
- D. Other technologies (e.g., projectors, podcasts, videos)

References

- ¹ http://nrepp.samhsa.gov/.
- ² http://getfit.samhsa.gov/.
- ³ http://modelprograms.samhsa.gov/pdfs/model/ TeamAwareness.pdf/.
- ⁴ Joel B. Bennett and Wayne E.K. Lehman. 2003.
 Preventing Workplace Substance Abuse: Beyond
 Drug Testing to Wellness. Washington, D.C.:
 American Psychological Association.
- ⁵ Royer F. Cook and William E. Schlenger. 2002. "Prevention of Substance Abuse in the Workplace: Review of Research on the Delivery of Services." *Journal of Primary Prevention* 23(1):115–42.
- ⁶ Cynthia J. Sieck, Max Heirich, and Christine Major. 2004. "Alcohol Counseling as Part of General Wellness Counseling." *Public Health Nursing* 21(2):137–43.
- ⁷ Royer F. Cook and William E. Schlenger. 2002.
 "Prevention of Substance Abuse in the Workplace: Review of Research on the Delivery of Services." *Journal of Primary Prevention* 23(1):115–42.
- ⁸ Laura Ferrer–Wreder, Stattin Hakan, Carolyn Cass Lorente, Jonathan G. Tubman, and Lena Adamson. 2004. Prevention and Youth Development Programs: *Across Borders*. New York, New York: Kluwer/Plenum Academic Publishers.

⁹ Ibid.

¹⁰Joel B. Bennett and Wayne E.K. Lehman. 2003. *Preventing Workplace Substance Abuse*: Beyond Drug Testing to Wellness. Washington, D.C.: American Psychological Association.


Effects of Alcohol and Other Drugs on Job Performance and Family

Some people think about their use of alcohol or other drugs, but they are not convinced they have a problem. Other people are secretly concerned, but they minimize the extent of the problem by blaming other people or circumstances. Still others realize they have a problem—perhaps family members or employers have told them that they "need some help"—but they aren't sure how serious it is or what help is available.

This fact sheet presents some of the possible effects of alcohol and other drug use. It presents them by phases of use—early, middle, late middle, and late phases¹—and it emphasizes the visible signs in general behavior and job performance for each phase. The fact sheet does not, however, provide a way for you to diagnose whether you have an alcohol or drug problem, or the seriousness of a problem. You should not assume a diagnosis of alcoholism or other addiction, even if you are experiencing some of the visible signs and symptoms² listed below.

The struggle for answers about alcohol and drug problems can be difficult. Without expert assessment and diagnosis, it can entail an exhausting search without easy resolution. But confidential diagnosis and assistance can be helpful at any point along the continuum, and it is better to seek and get such help sooner rather than later.

Early Phase	Middle Phase	Late Middle Phase	Late Phase
 -Use to relieve tension -Tolerance increases -Don't feel like yourself -Have memory blackouts -Lie about use Visible signs General behavior: -Overreact to real or imagined criticism -Complain of not feeling well -Lie about use -Family and coworkers complain about you Job performance: -Miss deadlines -Arrive late -Leave job early -Often absent from work -Make mistakes because of inattention or poor judgment -Experience decreased efficiency 	 -Sneak drinks or drugs -Feel guilty about using the substance -Experience tremors when not using -Experience general loss of interest Visible signs General behavior: -Family, coworkers, supervisors, friends not able to depend on your word -Begin to avoid associates -Borrow money from coworkers -Exaggerate work accomplishments -Need to go to hospital more than average -Have repeated minor injuries on and off the job -Feel unreasonable resentment Job performance: -Take frequent days off for vague ailments 	 -Avoid discussion of problems -Fail in efforts at control -Experience a lack of appetite -Prefer to use alone Visible signs <i>General behavior</i>: -With some substances, such as alcohol, can become grandiose, aggressive, or belligerent -Relationship issues interfere with work -Have an apparent loss of ethical values -Experience loss of money -Hospitalization increases -Have trouble with the law <i>Job performance</i>: -Perform below expected level -Take frequent time off, sometimes for several days -Fail to return from lunch 	 Believe that other activities interfere with drinking or other substance use Visible signs General behavior: Use on the job Become totally undependable. Have repeated hospitalizations. Show visible physical deterioration Financial problems worsen Have serious family problems or divorce Job performance: Have prolonged and unpredictable absences Work is very uneven Become generally incompetent

-Experience irregular work pace -Find it difficult to concentrate



FACT SHEET

If you recognize yourself in any of these indicators, perhaps it is time to get help.

There are confidential ways to determine if you need help and, if so, where to get it. See the fact sheet Workplace Substance Abuse Prevention Resources Reference List and the brochure Using Your Employee Assistance Program (both in this book).

References

¹ The following effects on job and family were adapted from the U.S. Department of Labor. See http://www.dol.gov/asp/programs/drugs/workingpartners/materials/symptoms.asp/.

² In general, the mood effects of many drugs fall into two categories. Some drugs are downers; they make people feel tired, listless, dull, uninterested in things, or quite depressed. Many others are stimulants; they make people anxious, jittery, unable to sleep, panicky, or fearful. This fact sheet is intended as an overview.



Health Effects of Alcohol and Other Drugs on Your Body FACT SHEET

Use of illegal substances, misuse of prescription drugs, and heavy use of alcohol pose risks to wellbeing, as they affect various aspects of one's life—family, work, personal goals, legal issues, personal safety, self-esteem, energy, outlook. Illicit drug use can undermine efforts to adopt and maintain salutary behaviors such as smoking cessation, regular exercise, weight management, and healthy eating.¹ And it can adversely affect work performance, by contributing to an inability to follow through on tasks and by increasing illnesses, absences, accidents, and injuries.

There are risks associated with the chronic use of all psychoactive drugs, including alcohol. Adverse health effects can range from nausea and anxiety to coma and death. A pregnant woman who uses alcohol, cigarettes, or other drugs exposes her fetus to serious risks, including low birth weight, brain damage—even miscarriage.

Substance abuse may involve not only controlled substances and illegal drugs but also alcohol and other substances that pose health risks. Described below are some of the health effects of alcohol and other drugs. Please note that when drugs are used in combination their negative effects on the mind and body are often multiplied beyond the effects of the same drugs taken singly.

Alcohol

Alcohol is the drug most frequently abused on college campuses and in the rest of our society.² Risks to both health and well-being attend heavy alcohol use over time.

Nearly 17 million Americans meet the diagnostic criteria for alcoholism.³ Individuals suffering from the disease of alcoholism, or alcohol dependence syndrome, cannot safely drink alcohol.⁴ Health problems associated with long-term heavy drinking include

- ✓ Alcohol-related liver disease (alcoholic hepatitis; alcoholic cirrhosis). More than 2 million Americans suffer from it.⁵
- \checkmark Heart disease. Heavy drinking increases the risk for high blood pressure, heart disease, and stroke.⁶
- Cancer. Heavy drinking increases the risk for cancer of the esophagus, mouth, throat, and voice box.⁷
- \checkmark Pancreatitis. Long-term heavy drinking can lead to inflammation of the pancreas. This condition can be fatal.⁸
- Sirth defects. Alcohol consumption is the leading cause of preventable retardation. Pregnant women cannot safely drink any amount of alcohol owing to the threat of injuring the development of the unborn child and causing fetal alcohol syndrome.⁹

Cannabis

Cannabis, the most widely used illicit drug,¹⁰ produces the psychoactive tetrahydrocannabinol, or THC. The most commonly used form of cannabis is the leaves and flowering tops (buds), which may be either smoked or eaten. It also comes in a more concentrated resinous form called hashish and as a sticky black liquid called hash oil. Common names include marijuana, pot, weed, grass, mary jane, dope, doobie, bud, ganja, hashish, hash, reefer, sinsemilla, herb, Aunt Mary, skunk, boom, kif, gangster, chronic, 420. Health problems, exacerbated over duration and frequency of use, can include the following:

- ✓ Chronic sore throat
- Emphysema-like symptoms¹¹
- Accelerated heart rate, increased blood pressure, and reduced oxygen-carrying capacity of blood leading to increased risk of heart failure¹²
- ✓ Lowered immune system response¹³
- ✓ Depression¹⁴
- ✓ Anxiety¹⁵
- ✓ Personality disturbances¹⁶

For more information, go to http://www.nida.nih.gov/Infofacts/marijuana.html/.



www.samhsa.gov

Club Drugs

The term *club drugs* is used to describe psychoactive drugs that became linked with dance clubs and raves. The class of drugs includes MDMA/ecstasy (methylenedioxymethamphetamine), Rohypnol (flunitrazepam), GHB (gamma hydroxybutyrate), and ketamine (ketamine hydrochloride). Owing to variations in purity, potency, and concentration, no club drug is safe. Research indicates that these drugs can cause serious health problems. They can have even more serious consequences when mixed with alcohol. Club drugs are also occasionally used or administered in connection with sexual assault.¹⁷

For more information, go to http://www.whitehousedrugpolicy.gov/drugfact/club/index.html/.

Stimulants

Cocaine, amphetamines, and other stimulants can cause agitation, loss of appetite, irregular heartbeat, chronic sleeplessness, and hallucinations. Cocaine and crack cocaine are extremely dangerous and psychologically and physically addictive. An overdose can result in seizures and death.¹⁸

Depressants

Barbiturates, benzodiazepines (such as Valium), Quaaludes, and other depressants cause disorientation, slurred speech, and other behaviors associated with drunkenness. The effects of an overdose of depressants range from shallow breathing, clammy skin, dilated pupils, and weak and rapid pulse to coma and death.

Hallucinogens

Hallucinogens such as LSD, MDA, PCP (angel dust), mescaline, salvia, and peyote can cause powerful distortions in perception and thinking. Intense and often unpredictable emotional reactions can trigger panic attacks or psychotic reaction. An overdose of hallucinogens can cause heart failure, lung failure, coma, and death.¹⁹

Narcotics

Heroin, codeine, morphine, methadone, and opium are narcotics. A high likelihood exists of developing a physical and psychological dependence on these drugs. Health effects include anxiety, mood swings, nausea, confusion, constipation, and respiratory depression.²⁰ Overdose may lead to convulsions, coma, and death. The risk of being infected with HIV, the virus that causes AIDS, or other diseases increases significantly if one injects drugs and shares needles.²¹

References: 1. Royer F. Cook. 2006. Prevention Connection. Available at http://www.prevconn.com/. 2. U.S. Department of Health and Human Services (DHHS), SAMHSA, Office of Applied Studies (OAS). 2007. Results From the 2006 National Survey on Drug Use and Health: National Findings. Rockville, Maryland, 36. 3. National Institute on Alcohol Abuse and Alcoholism. 2002. Alcohol: What You Don't Know Can Harm You. NIH Publication No. 99-4323. Available at http://www.niaaa.nih.gov/NR/rdonlyres/117174C3-7821-4C09-90DB-BEE634DA686C/0/HarmAl.pdf/. 4. Ibid 5. Ibid. 6. Ibid. 7. Ibid. 8. Ibid. 9. U.S. DHHS. 2001. Healthy People 2010: Understanding and Improving Health. Available at http://www.healthypeople.gov/document/pdf/uih/ 2010uih.pdf/. 10. U.S. DHHS, SAMHSA, OAS. 2007. Results From the 2006 National Survey on Drug Use and Health: National Findings. Rockville, Maryland, 16. 11. Donald P. Tashkin. 1990. "Pulmonary Complications of Smoked Substance Abuse". Western Journal of Medicine 152(5):525–30. 12. Murray A. Mittleman, Rebecca A. Lewis, Malcolm Maclure, and others. 2001. "Triggering Myocardial Infarction by Marijuana." Circulation 103(23):2805–09. 13. Irma B. Adams and Billy R. Martin. 1996. "Cannabis: Pharmacology and Toxicology in Animals and Humans." Addiction 91(11):1585–1614. 14. Judith S. Brook, Zohn Rosen, and David W. Brook. 2001. "The Effect of Early Marijuana Use on Later Anxiety and Depressive Symptoms." New York State Psychologist January: 35–39. 15. Judith S. Brook, Zohn Rosen, and David W. Brook. 2001. "The Effect of Early Marijuana Use on Later Anxiety and Depressive Symptoms." New York State Psychologist January: 35–39. 16. Judith S. Brook, Patricia Cohen, and David W. Brook. 1998. "Longitudinal Study of Co-Occurring Psychiatric Disorders and Substance Use." Journal of the American Academy of Child & Adolescent Psychiatry 37(3): 322-30. 17. http://www.whitehousedrugpolicy.gov/drugfact/club/index.html/. 18. lbid. 19. lbid. 20. Ibid. 21. Ibid.



Use of illicit drugs, alcohol abuse, and misuse of prescription drugs can have negative effects on our daily lives. And people with drug and alcohol problems are not likely to leave those problems behind when they come to work.

- \mathscr{O} About three fourths of those 18 and older who use illegal drugs also work.¹
- Nonmedical use of prescription drugs is national problem. According to the 2006 National Survey on Drug Use and Health, 7 million Americans were current users of psychotherapeutic drugs taken nonmedically.² SAMHSA's Drug Abuse Warning Network reported that of the nearly 2 million drug-related emergency department visits in 2004, over 25 percent were related to nonmedical use of prescription and over-the-counter pharmaceuticals.³
- ✓ In a large study of illicit drug use in a highly educated workforce, 42 percent of respondents reported using mood-altering prescription drugs.⁴
- ✓ Most binge drinkers and heavy alcohol users are employed. Of adult binge drinkers, 79.4 percent are employed either full or part time. Of adult heavy drinkers, 79.2 percent are employed.⁵
- ✓ Over 7 percent of American workers drink during the workday, mostly at lunch. Even more—9 percent—have nursed a hangover in the workplace.⁶
- \checkmark In a 2002 survey of health-related behaviors among military personnel, over 17 percent reported loss of productivity attributable to alcohol.⁷
- ✓ Drinking does not have to occur on the job to affect the job. Hangovers account for many workplace productivity losses.⁸
- Workers in construction and mining, wholesale, and retail industries are 25 percent to 45 percent more likely to have a serious alcohol problem than the average U.S. worker.⁹
- ✓ Workplace alcohol use and impairment affect an estimated 15 percent of U.S. workers, or 19.2 million Americans.¹⁰
- ✓ On-the-job drug use can lead to an increased risk of accidents and injuries.^{11, 12} It can also lead to lower levels of productivity and employee morale, not only among those with substance abuse problems but also among those working alongside them.¹³
- ✓ The addictions of coworkers' family members may also affect the workplace. In a national survey of employees, more than one third said that at least one of their coworkers had been distracted, less productive, or absent from work because of alcohol or other drug addiction in their family.¹⁴



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov

References

¹ U.S. Department of Health and Human Services (DHHS), SAMHSA, Office of Applied Studies (OAS). 2007. *Results From the 2006 National Survey on Drug Use and Health: National Findings.* Rockville, Maryland, 27.

² Ibid, 17.

- ³ U.S. DHHS, SAMHSA, OAS. 2006. *Drug Abuse Warning Network, 2004: National Estimates of Drug-Related Emergency Department Visits.* DAWN Series D-28, DHHS Publication No. 06-4143. Rockville, Maryland.
- ⁴ Robert A. Matano, Stanley F. Wanat, Darrah Westrup, Cheryl Koopman, Shelly D. Whitsell. 2002. "Prevalence of Alcohol and Drug Use in a Highly Educated Workforce." *Journal of Behavioral Health Services Research* 29(1):30– 44.
- ⁵ U.S. DHHS, SAMHSA, OAS. 2007. *Results From the 2006 National Survey on Drug Use and Health: National Findings.* Rockville, Maryland, 37.
- ⁶ Michael R. Frone. 2006. "Prevalence and Distribution of Alcohol Use and Impairment in the Workplace: A U.S. National Survey." *Journal of Studies of Alcohol* 76:147–56.
- ⁷ Robert M. Bray, Laurel L. Hourani, Kristine L. Rae, Jill A. Dever, Janice M. Brown, Amy A. Vincus, Michael R. Pemberton, Mary Ellen Marsden, Dorothy L. Faulkner, and Russ Vandermaas-Peeler. 2002. *Highlights: Department of Defense Survey of Health Related Behaviors Among Military Personnel.* Available at http://www.tricare.osd.mil/main/news/DoDSurvey.htm#pna/.
- ⁸ Roland S. Moore. 1998. "The Hangover: An Ambiguous Concept in Workplace Alcohol Policy." *Contemporary Drug Problems* 25(1):49–63.
- ⁹ Jeremy Giller. 2005. *Construction and Mining, Wholesale, Retail Top List of Industries. Ensuring Solutions to Alcohol Problems*. Washington, D.C.: The George Washington University Medical Center.
- ¹⁰ Michael R. Frone. 2006. "Prevalence and Distribution of Alcohol Use and Impairment in the Workplace: A U.S. National Survey." *Journal of Studies of Alcohol* 76:147–56.
- ¹¹ M. Bernstein and J.J. Mahoney. 1989. "Management Perspectives on Alcoholism: The Employer's Stake in Alcoholism Treatment." *Occupational Medicine* 4(2):223–32.
- ¹² Michael R. Frone. 1998. "Predictors of Work Injuries Among Employed Adolescents." *Journal of Applied Psychology* 83:565–79.
- ¹³ Michael R. Frone. 1999. "Work Stress and Alcohol Use." *Alcohol Research and Health* 23(4):285–91.
- ¹⁴ Hazelden. 2005. "Employees Report Coworkers Are Less Productive Due to Substance." Available at http://www.hazelden.org/web/public/mrab_2005survey.page/.



Training Your Supervisors

What Supervisors Can Do: Carry Out the Policy Fairly and Firmly in Routine and Crisis Situations

The success of the drug-free workplace policy and program depends to a great extent on supervisors. Supervisors are responsible for implementing many of the drug-free workplace policy and program elements. They must set and maintain the right tone—achieving a delicate balance between being supportive and firm. They must always be fair and consistent. They often are the first to notice or be informed of a possible problem.

What Is the Supervisor's Role in Maintaining a Drug-Free Workplace?

Each organization defines the role of a supervisor differently, based on factors such as the nature of



the work, how the work is organized, and where the work occurs. Some supervisors (for example, a foreman of a construction team) work near their employees every day.

Others (such as a supervisor of a traveling sales team) may see their employees less frequently.

The levels of risk associated with the work environment and the workers are likely to differ in each industry—perhaps even in each workplace. Accordingly, the supervisor's role in maintaining a healthy, safe, drug-free workplace must be tailored to suit each specific organization. All supervisors are key players in promoting a safe and healthy drug-free workplace. A drug-free workplace program's effectiveness may even hinge on the supervisors. Through routine interactions with employees, supervisors carry out many of the policy and program elements developed by the employer's drug-free workplace team. Supervisors follow the tone set by the employer for the policy and program.

Supervisors play a vital part in creating an environment that not only complies with minimum health and safety requirements but also actively supports the creation of a healthy, safe, productive drug-free workplace. Armed with the right attitudes, behaviors, and knowledge, supervisors can serve as powerful motivators and agents of positive change who inspire all employees to stand behind the drug-free workplace policy and program.

In general, supervisory attitudes or styles for handling substance abuse problems fall into one of two categories: passive or active.

Passive Attitude

Once again, Harry did not show up for work at the coffee shop. And once again, Joe Kelly, owner and



supervisor of Joe's Joe, did nothing. Everyone, including Joe, was aware that Harry was an alcoholic. Joe was used to Harry going a few weeks without reporting for work. Joe

simply let Harry show up when he was ready to and never confronted the problem of his absences.

Passive-attitude supervisors deal with problems only when they become obviously disruptive. This head-in-the-sand approach may appear to work in the short run because it keeps marginally effective employees on the job. However, in the long run it



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov does not maximize health, safety, or productivity. A problem left alone rarely improves.

Active Attitude

"I know all my staff. When one of them is having a problem—at home, or with the job—I'm the first to know. And I'm the first to do something about it."

This is one example of an active attitude, which is essential to the creation of a safe, healthy, and productive workplace. Active-attitude supervisors



assertively support a healthy and safe environment, know the signs and symptoms of substance abuse, and immediately and appropriately confront issues in accordance

with the drug-free workplace policy.

What Are the Supervisor's Responsibilities in Maintaining a Drug-Free Workplace?

Supervisors have numerous responsibilities that are critical to the success of a drug-free workplace policy and program.

Maintain a Safe, Healthy, and Productive

Environment for All. Supervisors are responsible for evaluating and discussing performance with employees, treating all employees fairly, and acting in a manner that does not judge or humiliate anyone.

Have a Clear and Complete Understanding of the Drug-Free Policy and Program. To implement the drug-free policy fairly and firmly, supervisors must know both the policy and the

program thoroughly.

Give Positive Feedback. Most supervisors have the ability to set the day-to-day tone for the workplace. Highlighting positive behaviors that are healthy, safe, and productive—rather than managing through harsh criticism and intimidation—is a better motivator in making positive changes.² Recognizing behaviors that are unhealthy, unsafe, or unproductive and addressing them skillfully and compassionately also are important ways of supporting the drug-free program and promoting a healthy, safe, productive workplace.

Giving positive feedback is one of the most potent drivers for productivity.³ It is one of the few things managers can do that has no monetary costs and inevitably enhances productivity. Constructive, informal feedback helps clarify expectations, corrects misperceptions, and communicates standards. It also increases employee commitment.

Understand and Talk About the Ways a Workplace Supports the Policy. Both formally and informally, supervisors can play a central role in promoting a drug-free workplace. Knowing and sharing support mechanisms offered by the employer and the community can help encourage employees to self-refer for treatment (see "Advocate for Employees," next page). Active supervisors encourage employees to have the courage and wisdom to get help before anyone else has to know about their problem.⁴

Supports that the employer may have in place can be internal or external. Internal support



mechanisms include workplace or organizational systems such as human resources (HR) departments, unions, security, management, in-house employee

assistance programs (EAPs), and internal health/wellness programs. External support mechanisms include relationships with outside providers of health promotion or substance abuse prevention interventions such as EAPs, health care providers, and health wellness programs. Informal support mechanisms within the community are also useful for employees who may not be ready to acknowledge that they need help but who are beginning to think that there may be a problem. These include for-profit and nonprofit support groups (e.g., Alcoholics Anonymous, http://www.aa.org).

Keep Open the Lines of Communication in a Manner Appropriate to the Workplace. A

supervisor who is accessible is key to creating a safe, healthy, and drug-free workplace. Effective supervisors seek feedback by encouraging their work teams to express ideas and opinions. Further, they promptly handle conflict constructively and fairly.⁵

That said, supervisors are not expected to provide substance abuse counseling. Neither should they try to diagnose alcohol or other drug problems. If



a supervisor suspects a problem, particularly one associated with poor job performance or conduct, the employee should be referred to the appropriate resources

for professional evaluation and assistance.

Advocate for Employees. One of a supervisor's most important responsibilities is to observe and evaluate employee job performance. Supervisors can encourage employees to deal with workrelated problems that may or may not be connected with alcohol or other drug use. They can suggest sources of help and support, such as an EAP or a local treatment program, when an employee has problems.

Being an advocate for employees also means supporting treatment and recovery. There is a general stigma associated with addiction and a mistaken belief that substance abuse is a personal or moral failing. Viewing the employee as a person struggling with a chronic, treatable disease rather than as an offender is another way to be supportive of recovery. This does not mean *enabling*; it means *supporting*. If an employee has been given a chance to improve job performance but has not changed his or her behavior, the supervisor may need to take a more forceful approach. Still, the emphasis should be on improving the employee's job performance, not on judging the employee.

To Carry Out the Policy, What Guidelines Should a Supervisor Follow?

To maximize the effectiveness of a drug-free workplace policy and program, customized supervisor training should take into account the particular characteristics of the workplace.

Seven general guidelines have been found to be useful for many employers, supervisors, and HR staff:

- Know the organization's policy and program.
- 2. Be aware of legally sensitive areas.
- 3. Recognize potential problems.
- 4. Document.
- 5. Act.
- 6. Refer.
- 7. Reintegrate.

1. Know the Organization's Policy and Program

Be familiar with the policy and the program along with the rationale for implementing them. Ensure that these are clearly communicated to all staff members. In some organizations this may require bilingual, or trilingual, replication.

2. Be Aware of Legally Sensitive Areas

- Where applicable, follow union contracts.
- Maintain confidentiality of all employees.
- Follow the procedures and policy the same way for all.

- Provide due process and opportunity for response to allegations.
- If testing is a part of the policy, ensure quality control and confirmation of positive tests.

3. Recognize Potential Problems

Drug use can be classified as experimental or circumstantial, and as progressing toward casual, intensive, compulsive, and addictive.⁶ There are no general rules that explain the misuse of alcohol and other drugs for every individual.^{7, 8}

Many studies have documented how one's personal background and work environment can



help in predicting the likelihood of substance use in the workplace.⁹ Issues related to misuse can include an individual's biology and external issues such as stressful working

conditions.¹⁰ Many issues can be attributed to a combination of internal and external factors. In the workplace, however, a safe, healthy, productive employee is the expectation.

Do not wait for a crisis. Being aware of potential issues before they become problems goes a long way toward creating a safe, healthy, and productive workplace.

There are at least six signs of possible substance use problems in the workplace. These signs alone do not indicate substance use. They do, however, indicate that perhaps the employee is experiencing personal issues that may affect job performance.

- A. A change in work attendance or performance
- B. An alteration of personal appearance
- C. Mood swings or attitude changes
- D. Withdrawal from responsibility or associate contacts

- E. Unusual behavior patterns
- F. A defensive attitude concerning any problems

4. Document

It is important to have a systematic, legally defensible appraisal system and documentation system in place.

The first line of defense should be a well-defined job description along with appropriate job training. In this way, supervisors can be explicit about the behaviors they expect.

Along with this, if a supervisor suspects an employee is under the influence, careful documentation should occur. The U.S. Drug Enforcement Administration provides a supervisor's checklist for determining reasonable cause (see http://www.dea.gov/demand/df manual/01adf_01.htm).

5. Act

Constructive confrontation is a proven effective strategy for dealing with employees who have a performance problem that may be associated with



^{12, 13} substance abuse. ^{12, 13} Constructive confrontation works particularly well for employees who are heavily invested in their jobs. ¹⁴ And it stands to reason that it works

well for supervisors and employers who are heavily invested in their employees.

Constructive confrontation involves

- Organizing a confidential meeting
- Including a union representative if applicable
- Presenting the employee with documented evidence of performance deficits

 Ensuring the employer's willingness to support help-seeking and to suspend disciplinary steps if the employee follows through on dealing with the problem

Constructive confrontation does not involve

- Letting everyone know the situation
- Approaching the employee with hostility
- Firing the employee without due process

6. Refer (to Appropriate Programs)

May Goya, an employee relations manager for the Waipi'o, Hawaii-based food service business FCH Enterprises, Inc., said of her company's drug policy: "From the start, we've made it clear that we're not going to catch somebody and kick them out. They don't get fired. We get them an



assessment of where they are with their drug usage and allow them to get treatment. When I approached one employee who tested positive, she was 'real relieved'—

that's how she put it. It had gotten to the point where her family was asking her to look at what she was doing and to stop doing it... but when it



came from the workplace, she couldn't deny that it was a problem any more. She's still working with us."¹⁶ A referral is not an adverse action. This

may be the first step toward helping the employee get back on track.¹⁷

Referrals should be consistent with—and supervisors should be trained on the specifics of your drug-free workplace policy.

When Investigating a Potential Crisis Involving Possible Drug or Alcohol Use, There Are a Few Important Questions to Ask

- Does there appear to be unusual behavior taking place (e.g., illegal activity, policy violations)?
- 2 What specific behavior is visible?
- Oces the situation involve an individual employee or a group?
- 4 Are reliable witnesses available?
- What are the physical dangers of taking or not taking action?
- 6 Is the situation serious enough to call security or law enforcement?
- Is there a specific policy that applies to the situation?
- (3) Is it necessary to call in expert consultation with HR, the EAP, a health specialist, or security?
- Oces the situation call for reasonable-suspicion testing?
- Is this an opportunity to prevent a problem from escalating?

Documenting observations and responses is important. It can help to have another supervisor there as well.

Guidelines for making a referral, depending on the size and professional skills of your organization, include the following:

- Assistance should be selected based on established effectiveness.
- The referral should consider the particular employee's health insurance coverage.
- The referral should be consistent with the employee's job demands and career goals.
- Someone in management (e.g., an HR professional) should be directly involved in the process, monitoring compliance.
- This same person should participate in easing the employee back into the workplace, involving the supervisor as appropriate.

 The employer should continue to be supportive of employees who have been referred for assistance because of problems related to alcohol or other drugs.

7. Reintegrate

Recovery from alcohol or other drug problems can be a gradual, complex process.¹⁸ To prevent relapse and to promote sustained recovery, followup and supportive reentry are key. An ideal situation would be one in which a specialist is assigned to deliver supportive follow-up to the employee at the workplace for 36 months or longer.¹⁹

How Should a Supervisor Handle a Crisis in the Workplace?

All supervisors should be prepared to deal with a crisis. These situations are not common, but it is important to know what to do in case of emergency. Such highly charged situations might involve alcohol and drugs, so it is important to remember that an impaired person is not a rational one. Some crisis situations that organizations have had to face include

- Violent, unpredictable behavior
- Threatening words and actions
- Illegal activity
- Possession of alcohol or other drugs

How to Approach an Employee in a Possible Drug or Alcohol Crisis Situation

- Ask the employee to come to a private area with another supervisor, an HR representative, or security—or some combination of these.
- Inquire, in a nonjudgmental tone, about the behavior, rumor, or report. Stick to the facts and do not involve the names of other employees.

- Express concern. Keep in mind that this is about a specific employee and his or her behaviors related to the workplace.
- Actively listen to the explanation, and repeat the employee's explanation to ensure that nothing is misunderstood.
- If there is reason to believe that there may have been a violation, notify a department head or labor relations representative as appropriate.
- If there is evidence or suspicion of recent use, follow the guidelines of the drug-free workplace policy, which will detail how to handle the event.

Some approaches include

- A. Referring the employee to the EAP
- Placing the employee on suspension pending an investigation
- C. Providing for the employee to be escorted home
- D. Escorting the employee to a laboratory for analysis
- E. Calling local law enforcement if the situation is dangerous or illegal activity (such as distribution, possession, sale, or transportation of illegal substances) has been witnessed

References

- ¹ Joel B. Bennett and Wayne E.K. Lehman. 2003. *Preventing Workplace Substance Abuse: Beyond Drug Testing to Wellness.* Washington, D.C.: American Psychological Association.
- ² U.S. Office of Personnel Management. 1995. *Performance Management.* Found at http://www.opm.gov/perform/articles/026.asp/.
- ³ B.F. Skinner. 1974. *About Behaviorism.* New York, New York: Random House.
- ⁴ Joel B. Bennett, N.G. Bartholomew, S. Reynolds, and Wayne E.K. Lehman. 2002. *Team Awareness: Training for Workplace Substance Abuse Prevention.* Fort Worth, Texas: Texas Christian University, Institute of Behavioral Research.
- ⁵ Joel B. Bennett and Wayne E.K. Lehman. 2003. *Preventing Workplace Substance Abuse: Beyond Drug Testing to Wellness.* Washington, D.C.: American Psychological Association.
- Michael A. Bozarth. 1990. "Drug Addiction as a Psychobiological Process." In David M. Warburton (ed.). Addiction Controversies. London, England: Harwood Academic Publishers. Available at http://wings.buffalo.edu/aru/ARUreport04.html/.
- ['] Office of Policy and Evaluation, U.S. Merit Systems Protection Board. 2001. *Issues of Merit.*
- ⁸ Dante Cicchetti and Fred A. Rogosch. 1996. "Equifinality and Multifinality in Developmental Psychopathology." *Development & Psychopathology* 8:597–600.
- ⁹ Wayne E.K. Lehman, David J. Farabee, M.L. Holcom, and D. Dwayne Simpson. 1995.
 "Prediction of Substance Use in the Workplace: Unique Contributions of Personal Background and Work Environment Variables." *Journal of Drug Issues* 25(2):253–74.
- ¹⁰ Kathy R. Batts, Todd C. Grabill, Deborah M. Galvin, and William E. Schlenger. 2005. *Contextual and Other Factors Related to Workplace-Based Substance Abuse Prevention and Early Intervention for Adolescents and Young Adults*. Available at http://dwp.samhsa.gov/YIW/YIW_Files/ Background.htm/.
- ¹¹ Jeffrey S. Hornsby and Donald F. Kuratko. 2005. Frontline HR: A Handbook for the Emerging Manager. Crawfordsville, Indiana: R.R. Donnelley.
- ¹²John Hoover and Roger Di Silvestro. 2005. *The Art of Constructive Confrontation: How to Achieve More With Less Conflict.* New Jersey: Wiley and Sons.
- ¹³ Paul M. Roman and Suzanne C. Baker. 2002.
 "Alcohol and Drug Problem Management in the Workplace." In Jay C. Thomas and Michel Hersen (eds.). *Handbook of Mental Health in the*

Workplace. Thousand Oaks, California: Sage, 371–80.

- ¹⁴ Harrison M. Trice and Janice M. Beyer. 1984. "Employee Assistance Programs: Blending Performance-Oriented and Humanitarian Ideologies to Assist Emotionally Disturbed Employees." In James R. Greenley (ed.). *Research in Community and Mental Health.* Greenwich, Connecticut: JAI Press, 4:245–97.
- ¹⁵ Paul M. Roman and Suzanne C. Baker. 2002. "Alcohol and Drug Problem Management in the Workplace." In Jay C. Thomas and Michel Hersen (eds.). *Handbook of Mental Health in the Workplace.* Thousand Oaks, California: Sage, 371–80.
- ¹⁶Dan Nakaso. 2005. "Zippy's New Drug Policy Identifies 'Problem' Workers." *The Honolulu Advertiser*, June 26.
- ¹⁷ Paul M. Roman and Suzanne C. Baker. 2002. "Alcohol and Drug Problem Management in the Workplace." In Jay C. Thomas and Michel Hersen (eds.). *Handbook of Mental Health in the Workplace*. Thousand Oaks, California: Sage, 371–80.
- ¹⁸ Marilyn J. Strada and Brad C. Donohue. 2004. "Substance Abuse." In Jay C. Thomas and Michel Hersen (eds.). *Handbook of Mental Health in the Workplace.* Thousand Oaks, California: Sage, 75–91.
- ¹⁹ Paul M. Roman and Suzanne C. Baker. 2002. "Alcohol and Drug Problem Management in the Workplace." In Jay C. Thomas and Michel Hersen (eds.). *Handbook of Mental Health in the Workplace.* Thousand Oaks, California: Sage, 371–80.



Using Your Employee Assistance Program

What Are Employee Assistance Programs?

Employee assistance programs (often simply called EAPs) are employer- or union-sponsored programs that serve the needs of employees by identifying and addressing a broad spectrum of health, economic, and social issues, including substance abuse and mental health. They can enhance the work climate of an organization and promote the well-being of everyone involved.^{1, 2, 3}

EAPs usually are multifaceted programs designed to help employees with personal problems that affect their job performance. Although some EAPs



concentrate primarily on substance abuse issues, most address a wide range of employee concerns: stress, marital difficulties, financial trouble, legal problems. Usually they

offer a range of services: employee education (onsite or offsite), individual and organizational assessment, counseling, referrals to treatment.

EAP providers typically offer a host of counseling services. These can include counseling for substance abuse, grief, sexual harassment, family violence, long-term illness, child care. Some EAPs offer services for wellness or retirement assistance. Some provide advice for dealing with difficult supervisors or coworkers. Not all EAPs provide all of these, and some provide more.

What Are the Major Types of EAPs?

When considering which kind of EAP might be most appropriate for an organization's needs, the following list⁴ should be helpful.

• Internal/In-House Programs. These are most often found in large companies with substantial resources. The EAP staff is employed by the organization and works onsite with employees.

- Fixed-Fee Contracts. Employers contract directly with an EAP provider for a variety of services, such as counseling, employee assessment, and educational programs. Fees are usually based on the number of employees and remain the same regardless of how many use the EAP.
- Fee-for-Service Contracts. Employers

 contract directly with an EAP provider but pay
 only when employees use the services.
 Because this system requires employers to
 make individual referrals (rather than
 employees self-referring), care must be taken
 to protect employee confidentiality.
- Consortia. An EAP consortium generally consists of smaller employers who join together to contract with an EAP service provider. This approach helps lower the cost per employee.
- Management-Sponsored Programs. These programs are sponsored exclusively by management, as opposed to programs sponsored by a union or a unionmanagement collaboration. Managementsponsored programs vary considerably in design and scope. Some deal only with substance abuse. Others treat a range of employee and family problems. Some include proactive prevention and health and wellness activities, as well as problem identification and referral, and some are actively linked to the employee health benefit structure.



- Peer-Based Programs. Less common than conventional EAPs, peer- or coworker-based EAPs offer education and training, assistance to troubled employees, and referrals—all through peers and coworkers. This type of program requires considerable education and training for employees.
- *Member Assistance Programs.* Member assistance programs (or MAPs) are provided by unions. Like EAPs, these vary considerably in design and scope. Unions have a long history of addressing member, family, health, welfare, and working condition concerns. MAPs undertake a range of prevention, problem identification, referral, and counseling activities for workers and their dependents.

How to Find a Qualified EAP Provider

Currently there are no national licensure programs for EAP providers, although several States are considering such programs. Two professional associations—the Employee Assistance



Professionals Association (EAPA) and the Employee Assistance Society of North America (EASNA)—have developed certification procedures for EAP

providers. The Certified Employee Assistance Professional (CEAP) credential indicates satisfactory knowledge about addictions, intervention, and related skills. For a fee, EAPA or EASNA will also provide directories of EAP providers by area or region.

- You may call EASNA at 763.765.2385 between 8:30 a.m. and 5 p.m., Monday through Friday, Central Standard or Daylight Time. EASNA's Web site is http://www.easna.org/.
- You may call EAPA at 703.387.1000 between 8:30 a.m. and 5:30 p.m., Monday through Friday, Eastern Standard or Daylight Time. EAPA's Web site is http://www.eapassn.org/.

A variety of options are available for identifying EAP services. These include contacting organizations that describe themselves as EAPs and contacting other sources of health care. Consider the following possibilities:

Join with other employers and contract with an EAP provider. Consult the Yellow Pages (look under "employee assistance



programs" or "drug abuse information and treatment centers"), call the local chamber of commerce or trade association, or call SAMHSA's Workplace Helpline at 1.800.WORKPLACE.

- Call local hospitals and ask about available EAP services.
- Contact a health maintenance organization that provides alcohol and other drug abuse treatment services, and ask about EAP possibilities.
- Contact a local mental health or substance abuse professional in private practice, and negotiate a contract for EAP services.
- Inquire whether health insurance carriers cover EAP services or can help identify local or regional EAP providers.
- Talk with other employers who have successful EAPs.

Prepare Information

When seeking to purchase EAP services, it is important to prepare certain information that providers can analyze and respond to. Information they generally seek includes the following:

 Your drug-free workplace or equivalent policy statement

- Information about your health benefits
 structure
- General information about the workplace numbers of employees and supervisors, work sites, job categories, available demographics on employees, covered family members
- Services to be included
- Budget range or considerations for these services
- Reports that will be needed

Questions to Ask

Not every EAP will be right for every organization. To determine whether a particular EAP will be able to meet your specific needs, ask the EAP provider the following questions:

- Do members of your staff belong to a professional EAP association?
- Do the staff who will be assigned to my organization hold the CEAP credential?
- What is the education level of each member of your staff?
- Do you have references whom we can contact?
- Do you provide onsite employee education and supervisor training services?
- What cost/fee programs do you offer?
- Will you do onsite visits? Are you able to conduct a needs assessment of your organization?
- What types of counseling services are available to employees? How many sessions?
- How easy will it be for employees to use the EAP? Where and how often is the EAP available to employees?

- To which programs and services do you make referrals—and why?
- Does the EAP have a system for evaluating the effectiveness of the program?

For help with finding local initiatives and coalitions:

Look in the phone book, under your city's name, for entries like "Drug-Free Business Initiative" or "Coalition for Drug-Free Workplaces."

Call or write your State or county office for alcohol and drug abuse services, and ask if it has a list of groups near your workplace.

Call or write your local mayor's office, police department's community relations office, or office of economic development, and ask if the office has a list of coalitions.

Call or write your chamber of commerce or business or trade association and ask if it has services to help employers starts a drug-free workplace program.

Call SAMHSA's Workplace Helpline at 1.800.WORKPLACE (800.967.5752).

Free and Low-Cost Services

SAMHSA's Workplace Helpline: 1.800.WORKPLACE

The Helpline provides telephone consultation to assist employers and union representatives with policy development, drug testing, employee assistance, employee education, supervisor training, and program implementation. It offers resource referrals and free publications. Helpline information specialists are trained to provide information tailored to each organization's unique characteristics. Lists of drug testing labs certified by the U.S. Department of Health and Human Services (DHHS) are available free of charge, and networking help is available for finding a Medical Review Officer (MRO).

Local Drug-Free Business Initiatives and Workplace Coalitions

Local initiatives and coalitions link employers who are interested in drug-free workplace programs. The coalitions may provide sample policies, technical assistance, low-cost drug testing services, and ongoing training sessions for supervisors. Some have developed special lowcost employee assistance programs designed for smaller employers. They may also have information about, and experience with, the services and costs of laboratories and MROs in your area.

Other EAP Information Sources

Drug-Free Workplace Consultants

Some employee assistance and management consulting firms specialize in helping employers and employees develop drug-free workplace policies and programs. Call the State alcohol or drug abuse agency for a list of EAPs and treatment programs available locally. That agency can also provide information about drug testing laws.

Attorneys, Arbitrators, and Mediators

Some law, arbitration, and mediation professionals specialize in helping organizations develop drugfree workplace policies. They also can assist in preventing or resolving policy disputes.

Drug Testing Labs

Many drug testing laboratories provide assistance with writing a policy and creating education programs, while charging only for their drug testing services. Contact SAMHSA's Workplace Helpline (1.800.WORKPLACE) for a list of DHHScertified laboratories.

Health Insurance Carriers

Review your health insurance policy, and consult with your carrier or agent. Alcohol and other drug abuse coverage varies depending on the services you wish to provide for your employees. Some carriers offer "preferred provider programs," which cover all or part of the costs of substance abuse treatment for employees who receive treatment at a preferred provider facility. Contact your carrier to inquire about options for treatment coverage.

Implementation Examples

A model is provided by the Federal Office of



Management's Model Employee Assistance Program for all Federal agencies. It describes the necessary functions and relationships of the employee assistance

program. Information about the Federal Government's policy and programs is provided in *Your Federal Employee Assistance Program: A Question and Answer Guide for Federal Employees*.⁵ Another example is provided by the DHHS's employee assistance program offered to its employees and family members.

References

- ¹ Michael T. French, Gary A. Zarkin, and Jeremy W. Bray. 1995. "A Methodology for Evaluating the Costs and Benefits of Employee Assistance Programs." *The Journal of Drug Issues* 25(2):451–70.
- ² Jeremy W. Bray, Michael T. French, Brad J. Bowland, and Laura J. Dunlap. 1996. "The Cost of Employee Assistance Programs (EAPs): Findings From Seven Case Studies." *Employee Assistance Quarterly* 11(4):1–19.
- ³ Rick Selvik, Diane Stephenson, Chris Plaza, and Brian Sugden. 2004. "EAP Impact on Work, Relationship, and Health Outcomes." *The Journal of Employee Assistance* April:18–22.
- ⁴ Adapted from Thomas E. Backer. 1994. *Strategic Planning for Workplace Drug Abuse Programs, Second Edition.* Bethesda, Maryland: National Institute on Drug Abuse.
- ⁵ U.S. Office of Personnel Management. N.d. *Your Federal Employee Assistance Program: A Question and Answer Guide for Federal Employees.* Available at https://www.opm.gov/Employment_and_ Benefits/WorkLife/OfficialDocuments/ handbooksguides/EAP_QandA/index.asp/.



Drug Testing in the Workplace

This section of the Kit will concentrate on how an employer can analyze, design, and implement a drug testing program. One of the first steps may be to consult with a certified laboratory in the Federal workplace program. In addition, the following information provides an in-depth view of some of the information known about drug testing in the workplace.

1. Why Do Some Workplaces Test Employees for Drug Use?

The Substance Abuse and Mental Health Services Administration (SAMHSA) reported that, in 2006, 74.9 percent of all illicit drug users over 18 were employed.¹ Drug testing is a prevention and deterrent method that is often a component of a comprehensive drug-free workplace program. Frequently, workplaces that do not have a drugfree workplace program produce higher health care costs, injury rates, and other negative outcomes related to employee substance abuse.

Drug-free workplace programs and policies are adopted by workplaces for a variety of reasons.² Prevention of substance abuse is first and foremost. Others do it to comply with Federal regulations, with requirements from customers or



contracts, or with insurance carrier requirements. All intrastate truckers, commercial driver's license holders, and other transportation workers are required to

undergo drug testing. Further, as required by joint government agreements, the United States, Canada, and Mexico monitor truckers crossing international borders. A drug testing program can lead to employees seeking early intervention and treatment, deter them from using alcohol and other drugs (and from coming to work unfit for duty), and create a safer and more positive environment in the workplace with less turnover, increased loyalty, and higher standards of quality.

2. Do Drug Testing Programs Work?

Certified laboratories are enhancing their procedures, based on research and technologies, to better determine those specimens that will be reported either negative or positive on a drug



test.³ Using a Medical Review Officer (MRO) to review the test results reported by certified laboratories will ensure that employees are not falsely accused of drug

abuse. According to SAMHSA: "[A]n MRO is defined as a licensed physician who receives laboratory results, has knowledge of substance abuse disorders, and has appropriate medical training to interpret and evaluate an employee's positive test result together with his or her medical history and any other relevant biomedical information. Only individuals holding either a Doctor of Medicine or Doctor of Osteopathy degree may serve as MROs for federally regulated programs."⁴

3. When Did Workplace Drug Testing Begin, and How Has It Evolved?

A Federal program was established in 1988, with enactment of the Drug-Free Workplace Act.



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov



The Act requires some Federal contractors and all Federal grantees to agree that they will provide drug-free workplaces as a condition of receiving a contract or grant from

a Federal agency. Although all covered contractors and grantees must maintain a drug-free workplace, the specific components necessary to meet the requirements of the law vary. The requirements for organizations are more extensive than those for an individual, because organizations must take comprehensive, programmatic steps to achieve a workplace free of drugs.⁵

Organizations with contracts from any U.S. Federal agency must comply with the provisions of the Act if the contract is a) for \$100,000 or more, b) for services rather than goods, and c) performed in the United States. The Act covers all contracts and grants awarded to individuals.



Since the Drug-Free Workplace Act became law, workplace drug testing has evolved. In 1991, Congress passed and the president signed into law the Omnibus Transportation Employee Testing Act.

It requires that the transportation industries (aviation, trucking, railroad, mass transit, and pipeline) regulated by the Department of Transportation (DOT) test employees working in certain safety-sensitive positions for drugs and alcohol. The transportation industry has established additional policies on drug and alcohol testing, to ensure that workers operate aircraft, trains, trucks, and buses safely and responsibly.

4. What You, as a Federal Contractor or Grantee, Must Do

If your organization is covered by the Drug-Free Workplace Act, you must

- Publish a statement notifying employees that the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance is prohibited in the workplace. The statement should also clarify any punitive actions that will be taken.
- Establish a drug-free awareness program.
- Make sure each employee receives a copy of the workplace substance abuse policy.

If you, as a Federal contractor, are found not to have a drug-free workplace, each contract



awarded to you by any Federal agency may be suspended, terminated, or both.⁶ You may find yourself ineligible for award of any contract by any Federal agency, and for participation in

any future procurement by any Federal agency, for up to 5 years.

5. What Should a Drug Testing Policy Include?

A comprehensive workplace drug testing program maintains a clear policy of no use. It educates employees about the program, about why substance abuse is harmful not only to the abuser but also to those in his or her presence, how substance abuse costs the organization, and the consequences to the abuser for getting caught. A comprehensive program provides supervisor training, drug testing, and an employee assistance program. Having a written policy helps you and your employees concentrate on important details. And it makes legal review possible.⁷

6. Motivating Your Employees and Providing Assistance

It makes little sense to have either a drug-free workplace policy or a workplace drug testing program without, at the same time, having a drug-abuse education program. You should have a health care professional speak to your staff about the dangers of alcohol and drug abuse—and make attendance mandatory. (Schedule the speaker on multiple dates, as full attendance on a given day is unlikely.) Make brief literature about drug abuse accessible to your employees, with handouts, bulletin board flyers, and email.

7. What Are the Major Kinds of Drug Tests, and What Do They Test?



The specimens collected and tested typically are either urine, hair, saliva, or sweat. However, the only specimen collected and tested in federally regulated programs is

urine. The testing of hair specimens is becoming more common in some unregulated, privatesector programs. But urine drug testing is used most often because of its proven accuracy, reliability, and fairness.

What drug tests look for varies greatly based on the testing company, the expense, the client's expectations, and so forth. Here is what you can expect from the standard tests.

The SAMHSA 5

The "Mandatory Guidelines for Federal Workplace Drug Testing Programs" require Executive Branch Federal agencies to have a drug testing program. The "Mandatory Guidelines" permit testing for drugs in five specific categories of drugs, sometimes referred to as the "SAMHSA 5":

- Marijuana
- Cocaine
- Opiates
- Phencyclidine (PCP)
- Amphetamines⁸

Expanded Tests

Most drug testing companies offer an expanded test that includes a few additional drugs in the testing process. Typically the tests will look for a few of the following: ethanol (alcohol), hydrocodone (Lortab, Vicodin), barbiturates, methaqualone (Quaaludes), methadone, Benzodiazepines (e.g., Valium), MDMA (ecstasy), propoxyphene (Darvon).⁹

8. A Drug Testing Checklist



9. What NOT to Do

Should you choose to go forward with a drug-free workplace policy or a drug testing program, there are a handful of things you should make sure *not* to do:

- Do not enforce a workplace policy inconsistently. Not only is an inconsistent policy unfair, but it also makes an employer an easy target for litigation.
- Do not publicize drug test results.
 Disseminate employee or job applicant test results only to those who "need to know."
- Do not take action when only an initial positive drug test result is available. A confirmatory test must always be conducted on specimens

that had an initial "positive" drug test results.

- Do not use laboratories that do not participate in an accreditation program.
- Do not address drug abuse without also addressing alcohol abuse. Alcohol is the most commonly abused drug in the United States,¹⁰ the world over,¹¹ and in American workplaces.¹² Make the dangers of abusing alcohol part of the drug-abuse education program you offer your employees.
- Do not confront a suspected drug user alone.
 Confronting a person "under the influence" or engaged in illegal behavior could be physically dangerous. Further, in the event of a legal challenge, it helps to have a witness on your behalf.
- Do not allow impaired employees to drive home. The reason is self-evident, but then how do you get the person off your site? Have a supervisor drive him or her home.

10. Who Gets Drug Tested, and Who Does the Testing?

Because drug testing costs money (although frequently the benefits far outweigh the costs),



some employers choose to test only those employees in safetysensitive positions. You may choose to test only your professional-level staff, or you may test all your employees.

Testing everyone can send a message that all employees (despite a range of salaries and responsibilities) are held to a certain code of conduct.

As an employer, you may choose to use a DHHScertified drug testing laboratory that is certified under the National Laboratory Certification Program. After that decision is made, you may decide to have a trained collector come to your office to collect specimens, or you may choose to send employees to the certified laboratory (assuming the laboratory is located within a reasonable distance to the workplace) to have their specimens collected. In either case, you may direct the certified laboratory to test the



specimens collected from your employees using the same procedures the certified laboratory would use if the specimens were being tested as regulated specimens

(that is, from a Federal employee or an employee from a DOT-regulated industry).

Though not required, it is recommended that you use a Medical Review Officer to review results reported by a laboratory before the result is reported to the employer to ensure that an employee is not falsely accused of drug abuse. An MRO is a licensed physician who has a thorough knowledge of substance abuse disorders. This person knows the Federal regulations regarding drug testing. An MRO is trained to interpret and evaluate test results together with the employee's medical history and other relevant biomedical information. The MRO makes a determination and reports the result of the test to the employer.

11. When Are Drug Tests Given? *Random Tests*

The most effective drug tests, for deterring any illicit drug use, are those given randomly. Simply put, if an employee is tempted to use drugs but knows he or she may be tested at any time, the temptation is reduced. Random testing—or testing a selected group of employees at random and unpredictable times—is most commonly used in



safety- and securitysensitive positions, where a mistake can cost a fortune or be catastrophic (at a nuclear power plant, for example). A random test is when an employer selects, using a truly random selection process, one or more individuals from all the



employees included in the employer's workplace drug testing program. A random selection process precludes an employer from attempting to preselect a particular

employee for a drug test.13

But there are other logical times to conduct drug tests, including before employment, because of reasonable suspicion or cause, following an accident, when an employee returns to duty, and as a follow-up to a previous test.

Preemployment Tests

If you institutionalize drug testing at your workplace, you can then move to test all job candidates.



That is, you can make passing a drug test a condition of being hired. If you choose to have a policy of zero tolerance for substance abuse at your workplace, you will

find it much easier to dismiss a candidate for employment whom you have yet to hire than an employee who has been on your payroll for any period of time.

A negative drug test does not indicate that a person has never used illicit drugs in the past, nor that he or she will never use them again.¹⁴ But offering employment only after a negative drug test result does decrease the chance that you will hire someone who is currently using or abusing drugs illegally.

Prepromotion Tests

Some employers will test an employee prior to promotion within the organization. The investment

in more highly paid staff is greater. Further testing an employee as a condition of promotion reinforces the message that the employee must now take on greater responsibility.

Annual Physical Tests

You may test your employees for alcohol and other drug use as part of an annual physical. A word of caution: If you conduct drug tests in tandem with physical examinations, make certain your employees know they are being tested for drugs as part of the exam. As with all drug testing, to test a patient for drugs as part of his or her annual physical without notifying the person beforehand that this will occur is a violation of the person's constitutional rights.

Reasonable-Suspicion and For-Cause Tests

You may test employees who show obvious signs of being unfit for duty (this is called for-cause testing) or who have documented patterns of unsafe work behavior (this is reasonable-suspicion testing). This helps protect the safety and wellbeing of the employee and other coworkers and provides the opportunity for rehabilitation if the employee tests positive.

Post-Accident Tests

To protect the safety of employees, and to identify and refer to treatment those persons whose



alcohol or other drug use threatens the safety of the workplace, some employers will test staff members who are involved in an accident or unsafe practice incident—to help

determine whether alcohol or other drug use was a factor.¹⁵

Treatment Follow-Up Tests

Many employers choose to periodically test employees who return to work after participating in a rehabilitation program.¹⁶ This can encourage employees to remain drug-free after they have completed the first stages of treatment.

12. Who Pays for Drug Tests?

Usually, the employer pays for a drug test. Occasionally, an employer requires the employee to pay for the test, and if the results are negative the employer reimburses the cost. If employees are expected to pay, this should be stated in the written policy.

13. What Are the Consequences for Employees of a Positive Drug Test?

Depending on the specific policy, an employee who tests positive on a drug test may be referred for assistance, for disciplinary action (such as suspension or dismissal from work), or for both assistance and disciplinary action. Expulsion—and



even suspension—from work is considered an extreme consequence. Discussing the positive test result with the employee and possibly referring him or her for treatment are

considered more common first steps. Of course, if the employee is in a safety-secure position, probation may be appropriate.

14. What Are the Legal Rights of Employees Who Test Positive?

A Federal employee or an employee working for a DOT-regulated industry who tests positive on a drug test has the right to have his or her specimen tested by a second DHHS-certified laboratory to verify the positive result reported by the first DHHS-certified laboratory. Although it is not required, it is recommended that all employers include this right in their workplace drug testing programs. All employees who test positive have equal rights—do not offer rehabilitation selectively. And if your employees are represented by a union, you may not implement a policy and program unilaterally. The National Labor Relations Act requires that terms and conditions regarding any workplace drug testing program you institute be included in your collective bargaining agreement.

Drug-free workplace policies can always be



challenged in the justice system. Many people use SAMHSA-approved labs to reduce the possibility of being challenged. There are Federal laws regarding drug testing. But there

may also be laws unique to your State or locality. Consult with an attorney—one experienced with labor and employment matters in your State before you institute a drug-free workplace program.

15. What Steps Are Taken to Ensure the Accuracy of the Drug Tests?

A drug testing program must be scientifically accurate, precise, and forensically supportable. To that end:

- Every urine specimen collected for a drug test must be analyzed using both an initial test and a confirmatory test.
- The amount of the specimen taken must be sufficient for multiple testing.
- Trained personnel must carry out laboratory testing in a secure facility.
- The chain of custody of the specimen, from receipt until disposal, must be continuous.

When a urine specimen is collected by a trained collector who follows the required collection procedure, is tested in accordance with the "Mandatory Guidelines," and is reviewed by an MRO before the result is reported to an employer, the result for that specimen will be forensically and scientifically supportable.

U.S. Department of Health and Human Services Drug Cutoff Concentrations^a

Initial Test Cutoff Concentration (nanograms/milliliter)			
Marijuana metabolites	50		
Cocaine metabolites	300		
Opiate metabolites	2,000		
Phencyclidine	25		
Amphetamines	1,000		
Confirmatory Test Cutoff Concentration (nanograms/milliliter)			
Marijuana metabolite ^b	15		
Cocaine metabolite ^c	150		
Opiates:			
Morphine	2,000		
Codeine	2,000		
6-Acetylmorphine ^d	10		
Phencyclidine	25		
Amphetamines:			
Amphetamine	500		
Methamphetamine ^e	500		

Notes:

^a From "Mandatory Guidelines for Federal Workplace Drug Programs," Federal Register notice published April 13, 2004 (69 FR 19644), effective Nov. 1, 2004.

^b Delta-9-tetrahydrocannabinol-9-carboxylic acid.

^c Benzoylecognine.

^d Specimen must also contain amphetamine at a concentration greater than or equal to 200 nanograms/milliliter.

 Test for 6-AM when morphine concentration exceeds 2,000 nanograms/milliliter.

Initial Test

The initial test is used to eliminate negative urine specimens from further consideration and to identify the apparent positive specimens that require confirmation or further testing. A negative



specimen is any specimen that contains no drug or whose apparent concentration of the drug or drug metabolite in question is less than the cutoff concentration for that

drug or drug class. If the lab uses a second test to further identify a specimen as positive before the confirmation procedure, the second test is subject to the same requirements for accuracy as the first test.¹⁷

Validity Test

The laboratory next conducts a validity test to identify whether anyone has tried to tamper with

the specimen. Tampering attempts would be either by substitution (swapping the specimen with drugfree urine or diluting it with a liquid to effectively decrease the concentration of a drug below the cutoff concentration) or adulteration (for example, putting a substance into a specimen that is designed to mask or destroy the drug or drug metabolite it may contain).¹⁸

Confirmatory Test

All urine specimens identified as "presumptive" positive on the initial test must be confirmed positive using gas chromatography/mass spectrometry (GC/MS) before the laboratory can report the positive result to an MRO. Gas chromatography physically separates the various



substances that have been extracted from a specimen (such as urine). Mass spectrometry is the technique used to provide positive identification of

substances that were separated by the gas chromatograph. In general, GC/MS analysis involves using a solid phase or solvent/solventextraction procedure to extract a drug from most other components of a urine specimen. Following the extraction procedure, the extract is injected into the GC/MS to perform the final separation, identification, and quantification of the specific drug or drug metabolite present in the urine specimen.¹⁹

References

- ¹ U.S. Department of Health and Human Services (DHHS), SAMHSA, Office of Applied Studies.
 2007. Results From the 2006 National Survey on Drug Use and Health: National Findings.
 Rockville, Maryland, 27.
- ² Michael T. French, Mark Christopher Roebuck, and Pierre Kebreau Alexandre. 2004. "To Test or Not To Test: Do Workplace Drug Testing Programs Discourage Employee Drug Use?" *Social Science Research* 33(1):45–63.
- ³ http://www.workplace.samhsa.gov/DrugTesting/ comments/Public%20Comment%208400097 .pdf/.
- ⁴ U.S. DHHS, SAMHSA, Center for Substance Abuse Prevention (CSAP), Division of Workplace Programs (DWP). 2004. *Medical Review Officer Manual for Federal Agency Workplace Drug Testing Programs.* Rockville, Maryland.
- ⁵ Walter F. Vogl. 1999. "Workplace Drug Testing." PowerPoint slide presentation. U.S. DHHS, SAMHSA, CSAP, DWP.
- ⁶ U.S. DHHS, SAMHSA, CSAP. 1992. "Guide for Drug-Free Workplace Policy Makers: Issues, Options, and Models." Rockville, Maryland.
- 7 Ibid.
- ⁸ http://dwp.samhsa.gov/DrugTesting/Files_Drug_ Testing/Labs/Drug%20Cutoff%20Concentrations %20-%20February%202005.pdf/.
- ⁹ http://www.questdiagnostics.com/employer solutions/standard_urine_testing_es.html/.
- ¹⁰U.S. DHHS, SAMHSA, Office of Applied Studies. 2007. Results From the 2006 National Survey on Drug Use and Health: National Findings. Rockville, Maryland, 3.
- ¹¹ Boyd Gibbons. "Alcohol, the Legal Drug." *National Geographic* 181(2):2–35.
- ¹² Paul M. Roman and Terry C. Blum. 2002. "The Workplace and Alcohol Problem Prevention." *Alcohol Research & Health* 26.
- ¹³ Jacques Normand, Richard O. Lempert, and Charles P. O'Brien (eds.). 1994. Under the Influence? Drugs and the American Workforce. Washington, D.C.: National Academy Press.

¹⁴ Ibid.

¹⁵ Ibid.

¹⁶ Ibid.

¹⁷ U.S. DHHS, SAMHSA, CSAP, DWP. N.d. "Drug Testing: Analytical Testing Methods." Available at http://www.workplace.samhsa.gov/DrugTesting/ AnalyticalTesting/index.html/.

¹⁸ Ibid.

¹⁹ Ibid.



Use of illicit drugs, alcohol abuse, and misuse of prescription drugs can have negative effects on our daily lives. And people with drug and alcohol problems are not likely to leave those problems behind when they come to work.

- \mathscr{O} About three fourths of those 18 and older who use illegal drugs also work.¹
- Nonmedical use of prescription drugs is national problem. According to the 2006 National Survey on Drug Use and Health, 7 million Americans were current users of psychotherapeutic drugs taken nonmedically.² SAMHSA's Drug Abuse Warning Network reported that of the nearly 2 million drug-related emergency department visits in 2004, over 25 percent were related to nonmedical use of prescription and over-the-counter pharmaceuticals.³
- ✓ In a large study of illicit drug use in a highly educated workforce, 42 percent of respondents reported using mood-altering prescription drugs.⁴
- ✓ Most binge drinkers and heavy alcohol users are employed. Of adult binge drinkers, 79.4 percent are employed either full or part time. Of adult heavy drinkers, 79.2 percent are employed.⁵
- ✓ Over 7 percent of American workers drink during the workday, mostly at lunch. Even more—9 percent—have nursed a hangover in the workplace.⁶
- \checkmark In a 2002 survey of health-related behaviors among military personnel, over 17 percent reported loss of productivity attributable to alcohol.⁷
- ✓ Drinking does not have to occur on the job to affect the job. Hangovers account for many workplace productivity losses.⁸
- Workers in construction and mining, wholesale, and retail industries are 25 percent to 45 percent more likely to have a serious alcohol problem than the average U.S. worker.⁹
- ✓ Workplace alcohol use and impairment affect an estimated 15 percent of U.S. workers, or 19.2 million Americans.¹⁰
- ✓ On-the-job drug use can lead to an increased risk of accidents and injuries.^{11, 12} It can also lead to lower levels of productivity and employee morale, not only among those with substance abuse problems but also among those working alongside them.¹³
- ✓ The addictions of coworkers' family members may also affect the workplace. In a national survey of employees, more than one third said that at least one of their coworkers had been distracted, less productive, or absent from work because of alcohol or other drug addiction in their family.¹⁴



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov

References

¹ U.S. Department of Health and Human Services (DHHS), SAMHSA, Office of Applied Studies (OAS). 2007. *Results From the 2006 National Survey on Drug Use and Health: National Findings.* Rockville, Maryland, 27.

² Ibid, 17.

- ³ U.S. DHHS, SAMHSA, OAS. 2006. *Drug Abuse Warning Network, 2004: National Estimates of Drug-Related Emergency Department Visits.* DAWN Series D-28, DHHS Publication No. 06-4143. Rockville, Maryland.
- ⁴ Robert A. Matano, Stanley F. Wanat, Darrah Westrup, Cheryl Koopman, Shelly D. Whitsell. 2002. "Prevalence of Alcohol and Drug Use in a Highly Educated Workforce." *Journal of Behavioral Health Services Research* 29(1):30– 44.
- ⁵ U.S. DHHS, SAMHSA, OAS. 2007. *Results From the 2006 National Survey on Drug Use and Health: National Findings.* Rockville, Maryland, 37.
- ⁶ Michael R. Frone. 2006. "Prevalence and Distribution of Alcohol Use and Impairment in the Workplace: A U.S. National Survey." *Journal of Studies of Alcohol* 76:147–56.
- ⁷ Robert M. Bray, Laurel L. Hourani, Kristine L. Rae, Jill A. Dever, Janice M. Brown, Amy A. Vincus, Michael R. Pemberton, Mary Ellen Marsden, Dorothy L. Faulkner, and Russ Vandermaas-Peeler. 2002. *Highlights: Department of Defense Survey of Health Related Behaviors Among Military Personnel.* Available at http://www.tricare.osd.mil/main/news/DoDSurvey.htm#pna/.
- ⁸ Roland S. Moore. 1998. "The Hangover: An Ambiguous Concept in Workplace Alcohol Policy." *Contemporary Drug Problems* 25(1):49–63.
- ⁹ Jeremy Giller. 2005. *Construction and Mining, Wholesale, Retail Top List of Industries. Ensuring Solutions to Alcohol Problems*. Washington, D.C.: The George Washington University Medical Center.
- ¹⁰ Michael R. Frone. 2006. "Prevalence and Distribution of Alcohol Use and Impairment in the Workplace: A U.S. National Survey." *Journal of Studies of Alcohol* 76:147–56.
- ¹¹ M. Bernstein and J.J. Mahoney. 1989. "Management Perspectives on Alcoholism: The Employer's Stake in Alcoholism Treatment." *Occupational Medicine* 4(2):223–32.
- ¹² Michael R. Frone. 1998. "Predictors of Work Injuries Among Employed Adolescents." *Journal of Applied Psychology* 83:565–79.
- ¹³ Michael R. Frone. 1999. "Work Stress and Alcohol Use." *Alcohol Research and Health* 23(4):285–91.
- ¹⁴ Hazelden. 2005. "Employees Report Coworkers Are Less Productive Due to Substance." Available at http://www.hazelden.org/web/public/mrab_2005survey.page/.



Workplace Substance Abuse Prevention Resources Reference List

Where to Find Help

If you or someone you know has a problem with alcohol or other drugs, contact these resources for free, confidential help.

Substance Abuse Treatment Locator http://www.findtreatment.samhsa.gov Phone: 1.800.662.HELP (1.800.662.4357)

Al-Anon/Alateen

http://www.al-anon.alateen.org Phone: 1.888.4AL.ANON (1.888.425.2666)

Alcoholics Anonymous (AA) http://www.aa.org

American Council on Alcoholism

http://www.aca-usa.org Phone: 1.800.527.5344

Cocaine Anonymous

http://www.ca.org Phone: 1.800.347.8998

Nar-Anon

http://nar-anon.org Phone: 1.800.477.6291

National Council on Alcoholism and Drug Dependence Hopeline

http://www.ncadd.org Phone: 1.800.NCA.CALL (1.800.622.2255)

Health Department Locator http://www.cdc.gov/mmwr/international/relres.html

Mental Health Services Locator http://www.mentalhealth.samhsa.gov/databases

GetFit http://www.getfit.samhsa.gov

National Institute on Alcohol Abuse and Alcoholism http://www.niaaa.nih.gov

Workplace Helpline http://workplace.samhsa.gov Phone: 1.800.WORKPLACE (1.800.967.5752)





GetFit.SAMHSA.Gov: Online Workplace for Health, Wellness, and Safety

GetFit.SAMHSA.gov is a Web site that promotes health. Employers and workplaces can use it to improve the health of their employees, members, clients, and families. And they can adapt the site to meet their own needs in their own ways.

GetFit is based on Robert Matano's 3-year study at Stanford University. The study found that an interactive health-promotion Web site with substance abuse information and screeners can significantly reduce the stigma of substance abuse and improve outcomes for those who receive early intervention.¹ GetFit became an advanced version of Matano's Web site, *The Employee Stress and Alcohol Project*.

What Is the Purpose of GetFit?

The GetFit Web site aims to reduce the stigma of substance abuse and make it easier to identify a substance abuse problem early and thereby increase the use of employee assistance programs and treatment alternatives. To reduce stigma, GetFit embeds substance abuse materials within health GetFit provides credible information and recommendations that people can trust.

and wellness information for employees and their families. Further, GetFit provides employees and their families with authoritative information about substance abuse, mental health, and physical health issues. It also offers useful information about resources in their workplaces and local communities for successfully addressing those problems.

What Is the General Approach of GetFit?

GetFit takes information about substance abuse prevention, intervention, and treatment and incorporates it into an overall strategy for improving workplace health, wellness, and safety. It offers information, screening tests, and local referral resources on important health-related issues that can affect healthy living and self-sufficiency. Such issues include stress, trauma, nutrition, depression, family matters, physical fitness, illness and disease, and substance abuse.

What Are the Major Features of GetFit?

- ✓ GetFit provides credible information and recommendations that people can trust from reliable and well-documented Federal Government sources.
- ✓ It offers self-screening tools that help employees identify, understand, and get help dealing with problems with drugs and alcohol, concerns about physical health, and issues about mental health and illness.
- ${\mathscr O}$ It provides information about and access to public treatment centers, nationwide.
- \oslash It provides information about and access to Alcoholics Anonymous and other substance abuse self-help groups, nationwide.
- $rac{arphi}{arphi}$ It provides articles about healthy living for children, teens, and adults.
- ✓ It provides a comprehensive glossary, Post-it note updates, email and postcard capabilities, and up-to-date materials on emerging health issues.



How Can Workplaces Make Use of GetFit?

GetFit offers a quick way for workplaces to provide credible and useful health information to their employees. It can be tailored by each workplace to provide information about its own drug-free workplace program, human resource materials, and other resources of the workplace and the local community. It can save workplaces thousands of dollars in Web site design, maintenance, and the cost of purchasing health information that is current and authoritative. And it can be a valuable enhancement that employers and employees alike often use.

What Are Some of the Benefits of GetFit?

Employees who use GetFit will find that it can help them improve their health, improve their families' health, improve their mental health, reduce absenteeism and accidents, lower health care costs, and improve performance. For example:

- Employees receive reliable information about current research, prevention, and intervention for workplace health and safety through numerous links to Federal resources and professional associations.
- Employees can use GetFit self-tests as a stigma-free way to gather information confidentially and anonymously. They can then develop strategies tailored to their own needs and the resources in their workplaces and communities.
- Employees can get information in just a few clicks, through a no-cost referral system for local, State, and national treatment and support services. The GetFit Web site offers user-friendly options to search, print, and email information. Any page from the site can be saved.

Who Sponsors GetFit?

GetFit is sponsored by the Division of Workplace Programs in the Center for Substance Abuse Prevention, which is in the Substance Abuse and Mental Health Services Administration. GetFit reflects the work of SAMHSA's three centers—the Center for Mental Health Services, the Center for Substance Abuse Prevention, and the Center for Substance Abuse Treatment.

For more information about GetFit, check the GetFit Web site at http://getfit.samhsa.gov/.

References

¹ Robert Matano, Kristine T. Futa, Stanley F. Wanat, Lisa M. Mussman, Cynthia W. Leung. 2000. "The Employee Stress and Alcohol Project: The Development of a Computer-Based Alcohol Abuse Prevention Program for Employees." *The Journal of Behavioral Health Services and Research* 27 (2):152–65.



SAMHSA NREPP Model Programs for the Workplace

Workplaces seeking to broaden their substance abuse prevention efforts can consider implementing one of the many evidence-based programs that SAMHSA has recognized as effective. These programs have been carefully implemented and rigorously evaluated, and have shown consistently positive outcomes for preventing substance abuse. They have met stringent standards set by the National Registry of Evidence-based Programs and Practices (NREPP). Technical assistance can be obtained from the program developers. Examples of NREPP model workplace programs are described below.

Coping With Work and Family Stress: A Workplace Preventive Intervention

This program is a 16-session weekly group intervention¹ that teaches employees to develop effective coping strategies for dealing with stressors at work and at home. Companies provide release time so that employees can participate in the program consistently. The first component presents methods to help eliminate or modify sources of stress. The second component gives techniques to modify cognitive processes that lead to or exacerbate stress. The third component emphasizes stress management and reducing the use of avoidance coping and other negative tension-reducing behaviors (e.g., use of alcohol and other drugs). In the final session, participants create personalized stress management plans to maintain the program's beneficial effects.

Intended Population

The program was tested in a wide range of work settings including manufacturing, water authority, telecommunications, and utility companies. The target population included both men and women working in various occupational groups and of diverse ages and ethnic, racial, and socioeconomic backgrounds. The participants also varied in education, religious affiliation, marital status, and number of children.

How It Works

Specific techniques include didactic presentations, group discussion and problem solving, and looking at personal experiences. The strategies provide opportunities to learn a wide range of active coping skills, to consider ways to make better use of social networks, and to practice specific stress management approaches. Though the program is conducted in a group setting, it promotes behavior change in relation to employees' unique work and family situations. This intervention is adaptable to any work setting.

Implementation Essentials

The program uses a "train the trainer" model involving personnel in the workplace or other professionals in the community to implement the



program. Training takes 3 full days with two trainers, with up to 20 participants in each training series. Onsite or telephone follow-up is essential to guarantee program

fidelity and to troubleshoot issues that might arise once implementation in the work setting begins. It is vital to have strong management support for the program, with a commitment to provide release time for employee participation.

Individuals training to implement the program receive intervention materials (at cost), including a curriculum, a supply of handouts for each



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov session, and a CD–ROM—the last of which demonstrates stress management techniques. When the program is implemented, these materials are provided to the employees so they can practice using new coping strategies and stress management techniques at home between sessions and after completing the program.

Sixteen 1½-hour sessions are conducted by a trainer with a group of 15 to 20 employees. The



trainer needs 4 to 6 hours a week to prepare and deliver the course. The need for administrative support is minimal. Space for conducting the sessions is provided by the business or

organization. Equipment and materials include a flip chart, the optional use of an overhead projector or PowerPoint for presentations, and, for each participant, handouts, a CD–ROM, and a three-ring binder.

According to the evaluation studies of the program's effectiveness across a wide variety of companies and employees, the program resulted in

- Significant reduction in work and family stressors
- Significant increase in problem-solving and cognitive coping strategies
- Significant reduction in the use of avoidance coping strategies
- Significant increase in social support from supervisors and coworkers
- Significant reduction in use of alcohol and other drugs

 Significant reduction in depression, anxiety, and complaints about physical ills

To learn more about the program and obtain information on contacts and training, visit http://www.theconsultationcenter.org/WFS%20SA MHSA.pdf/.

Proven Results for Coping With Work and Family Stress			
	A 16 percent increase in the use of active behavioral coping skills		
	A 15 percent increase in the use of social support coping		
•	A 33 percent reduction in avoidance coping (e.g., "I avoided doing anything about the situation")		
•	A 17 percent reduction in social withdrawal coping (e.g., "I avoided being with people")		

Team Awareness

*Team Awareness*² is a workplace training program that addresses behavioral risks associated with substance abuse by employees and, indirectly, employees' families. This program has been shown to increase employee help-seeking for, and supervisor responsiveness to, troubled workers; to enhance the work climate; and to reduce problem drinking. The program is appropriate for businesses or organizations of any size.

Intended Population

Team Awareness is designed for use in any type of organizational setting or occupational group where employees interact with or depend on one another to get work done. The training may be particularly effective for employees in safety-sensitive occupations (e.g., construction workers, emergency response and law enforcement personnel, machinery or equipment operators, transportation workers) or workplaces where tradition supports coworkers' use of alcohol to handle stress or to socialize. The program has been tested on a wide variety of white- and bluecollar occupations with same- or mixed-gender compositions within two municipal workforces. *Team Awareness* has also been adapted for use by small businesses and community-based alcohol and other drug awareness centers.

The training consists of six modules delivered in two 4-hour sessions. (Larger companies generally require multiple training sessions.) *Team Awareness* is highly interactive and uses group discussion, communication exercises, a board game, role playing, and self-assessments. Modules cover policy ownership, enabling, stress management, listening skills, and peer referral.

Team Awareness Benefits

- Reduces alcohol and drug use risk factors in the work setting
- Improves work group climate that supports employee health and wellness
- Increases supervisor willingness to use the employee assistance program
- Decreases employee tendency to ignore or stigmatize coworkers with problems
- Improves confidentiality (respect for privacy) within the work group
- Reduces social norms that support drinking with coworkers

How It Works

Team Awareness can serve three different functions, depending on the needs of a business, and can be positioned as

- An enhanced drug-free workplace program
- A team communication workshop
- A work culture intervention

The original design of *Team Awareness* includes three core components:

- Preparatory focus groups and meetings to collect policy information, establish rapport, and facilitate employee involvement
- Supervisor training (two 4-hour sessions)
- Employee training (two 4-hour sessions)

The training consists of six modules:

• **Relevance** (2 hours), which increases employee ownership of the importance of their roles in substance abuse prevention at their worksites.

- Team Ownership of Policy (1½ hours). The Risks and Strengths Game creates positive attitudes toward organization substance abuse prevention policies as tools for risk prevention (1½ hours).
- Reducing Stigma and Tolerance and Increasing Responsiveness (1 hour), which reduces risky levels of supervisor and coworker tolerance of substance use (i.e., enabling and codependence).
- Work Stress, Problem Solving, and Substance Use (1 hour) identifies signs of poor coping and the role of substance use; the module promotes healthy alternatives for dealing with stress.
- Workplace Communication Skills (1 hour) reviews listening skills and identifies workplace communication norms.
- Encouragement (1 hour). The NUDGE Model develops peer referral skills and employee alliance with employee assistance programs (EAPs).

Implementation Essentials

Successful implementation of *Team Awareness* requires a facilitator who understands the overview manual and each of the manuals for the



six *Team Awareness* modules. Manuals and materials are available for free downloading from Organizational Wellness & Learning Systems (at http://www.organizational wellness.com) or from the

Institute of Behavioral Research at Texas Christian University (at http://www.ibr.tcu.edu).

The facilitator must also be familiar with the organization's work climate, current substance use policies and related documents, and employee

assistance resources such as the organization's medical office and the EAP. Some modules require the facilitator to incorporate information on particular policies and resources. Sessions should be delivered to groups of 10 to 25 employees in a training room equipped with an overhead projector, a screen, and flip charts. Participants can be drawn from the same or different work groups or settings.

Training

Facilitator certification takes 3½ days and can be done onsite or offsite. It proceeds as follows:

- Day 1. Orientation, training, and practice sessions for modules 1 and 2; review of theory and background research
- **Day 2.** Orientation, training, and practice sessions for modules 3 through 5
- Day 3. Orientation, training, and practice sessions for module 6; review adaptations for supervisors, focus groups, customizations, and fidelity issues
- Day 4 (½ day). Receipt and review of evaluation protocols; and review of transfer management (strategies for applying what has been learned)

Proven Results for Team Awareness		
When compared with a control group, participants achieved		
 A 47 percent reduction in the number of drinks consumed in the past 30 days 		
 A 67 percent reduction in the number of days of heavy drinking in the past 30 days 		
 Improved motivation to reduce drinking 		
 Reduced use of alcohol or illegal drugs to relieve stress 		
 Increased perception of the risks of alcohol and illegal drug use 		
 Improved health practices and beliefs (e.g., confidence in ability to improve health) 		

Technical Assistance

The developer will conduct focus groups, help customize aspects of the program to fit particular policies and resources, and assist with before and after evaluation and fidelity assessments.

To learn more about the program and obtain information on contacts and training, visit http://www.modelprograms.samhsa.gov/pdfs/mod el/TeamAwareness.pdf/.

The Healthy Workplace

The Healthy Workplace³ program is a set of workplace substance abuse prevention interventions designed to reduce unsafe drinking, illegal drug use, and prescription drug abuse while improving the health practices of adult workers. Cast in a health promotion framework and rooted in social-cognitive principles of behavior change, the program integrates substance abuse prevention material with popular health promotion strategies, thereby defusing the stigma that often accompanies substance abuse and removing barriers to help-seeking behavior.

The Healthy Workplace achieves positive results because it

- Reaches the mainstream of workers through the vehicle of health promotion
- Raises awareness of the benefits of healthy practices and the hazards of using alcohol, tobacco, and illegal drugs and of misusing legal drugs
- Teaches employees specific techniques for improving health and reducing use of alcohol, tobacco, and illegal drugs
- Incorporates carefully constructed videos to increase self-efficacy and provide models for embracing healthy practices and reducing substance abuse
Intended Population

The Healthy Workplace has been tested in medium-sized and large companies, including manufacturing and printing facilities, an insurance company, and within groups of construction workers. It has been implemented in a wide variety of industries (e.g., insurance, printing, telecommunications, pharmaceutical manufacturing), occupational groups (clerical, technical/professional, construction, managerial),



and ethnically diverse workforces, including African American, Asian American, Hispanic/ Latino, and white workers. The program has been implemented in all regions of the

country on male, female, young, and middle-aged workers.

How It Works

The program consists of five interventions that are delivered in small group sessions using videos and print materials. The interventions can be used in any order and are selected based on the organization's goals and employee composition. Three of the interventions are relatively brief, typically requiring three to four sessions lasting 1 hour or less each.

- The Say Yes! Healthy Choices for Feeling Good intervention is a general health promotion program with substantial segments on alcohol and drug abuse.
- The Working People: Decisions about Drinking intervention concentrates on alcohol abuse prevention and is especially appropriate for a young (18 to 35 years old) blue-collar workforce.
- Make the Connection is a three-part series of video and print materials designed for insertion into workplace health promotion programs on stress management, weight management/nutrition, and fitness.

- The Power Tools intervention is an eightsession program for young, male, blue-collar workers that combines instruction on general health issues with special sessions devoted to alcohol and drug abuse.
- Prime Life 2000 is a multitiered intervention consisting of a series of small group sessions on stress management, healthy eating, and fitness. Videos and print materials are mailed to all employees, and supervisors receive training in EAP utilization. All components include information on preventing alcohol abuse, illegal drug use, and prescription drug abuse.

Implementation Essentials

Small group sessions of 10 to 20 employees are held typically in an organization's training or conference room. A trainer who is familiar with the training guide and has the supporting videotapes and print materials can implement any of the interventions. If the worksite already has an active health promotion program, modifications of *Make the Connection* or *Prime Life 2000* may be used since these interventions are designed to add alcohol- and other drug-use information to existing programs.

Training and Materials

Each intervention has a training guide and supporting materials that can be ordered at http://www.centerforworkforcehealth.com/.

A special Web-based program, The Prevention Connection, has been created to train health promotion specialists to implement these interventions. This training program can be accessed at http://www.PrevConn.com/.

To learn more about the program and to obtain information on contacts and training, visit http://www.modelprograms.samhsa.gov/pdfs/mod el/Healthy.pdf/.



Wellness Outreach at Work

*Wellness Outreach at Work*⁴ (or *WOW*) provides comprehensive health risk–reduction services health screening, intensive follow-up, and worksite health promotion—to all employees at a workplace. Alcohol education is integrated into the context of health-risk counseling. *WOW* is based on five principles:

- 1. Reach out to all employees.
- Deliver comprehensive care that includes cardiovascular and cancer risk screening, and personalized follow-up health coaching that includes alcohol education.
- Conduct waves of follow-up through mailings, telephone calls, and personal contacts.
- 4. Make participation voluntary and friendly.
- Provide long-term, direct employee support and long-term support within the workplace (e.g., lowfat cafeteria food options, peer-led health promotion).

Intended Population

The program originally was tested in manufacturing plants and in university and

hospital settings. The model also has been tested in churches, school systems, gas stations, and an airplane servicing facility. *WOW* participants have included African American, Hispanic/Latino, white, blue-collar, white-collar, management, and professional employees. The program targets working adults ages 25 and older, and retirees.

How It Works

WOW begins with free, worksitewide, health-risk screening, including biometric measures of health status. Health screenings are followed by 15- to 20-minute personalized coaching sessions that



direct employees' attention to health matters in general, and to their individual health risks. Some employees receive follow-up outreach, based on the number and severity of their discovered health

risks. Employees are seen one to four times a year thereafter, based on risk factors, in sessions that take about 20 minutes each. WOW program interventions also provide baseline information about health risks for the total workforce, so at the same time, a worksite Wellness Committee looks at organizational policies and practices that could improve employee health, and creates activities and peer support for health improvement. The committee typically meets once a month to assess how well WOW is working, to sponsor health improvement activities, to give generalized feedback to the health coaches, and to discuss health-relevant policies with organization management. As employees lower their health risks, health counselors see them less frequently and a supportive social environment at work helps them maintain their health gains. Periodic reports to management and the wellness committee track measurable changes in health risks for the employee population and gains in the work environment.

Used in more than 100 worksites, the program has reached more than 75,000 employees in organizations ranging in size from 5 to 6,000 employees, including blue- and white-collar workforces. Significant results for participating employees include

- Improved nutrition
- Reduction in alcohol consumption
- Maintained weight loss (for obese participants)
- Improvement in blood pressure control
- Decreases in other cardiovascular disease risks
- Increased personal exercise
- Successful stress management
- Improved relations with coworkers
- Heightened sense of well-being

Companies using the program have reported decreased absenteeism, improved employee morale, heightened productivity, and decreased use of disease care services.

Implementation Essentials

A comprehensive implementation guide provides step-by-step instructions for implementing Wellness Outreach at Work and is available through the developer's Web site at http://www.ilir.umich.edu/.

Critical elements for successful program outcomes include

- Management support
- Union involvement (where applicable)
- Guaranteed confidentiality of employee records
- Space at the worksite where employees can receive confidential counseling
- Computerized data management

Successful program outcomes also require

• A wellness committee.

- An ample staff of trained wellness professionals with appropriate supervisory oversight and support (ratio of counselors to employees is 1 full-time or equivalent counselor to 500 employees).
- Use of program interaction protocol guidelines with clients, adapted to their personal lifestyles and preferences.
- Program resources and materials concerning each cardiovascular disease (CVD) risk factor, including alcohol consumption guidelines. It is necessary to use CVD Health Risk Screening procedures that meet current National Institutes of Health guidelines for health-risk profiles and appropriate interventions.
- Necessary equipment includes blood pressure measuring equipment, immediate blood analyzers using finger-stick blood draws, weight scales, and body-fat measuring instruments.



To learn more about the program and obtain information on contacts and training, visit http://www.modelprograms.samhsa.gov/pdfs/mod el/Wellness.pdf/.

References

- ¹ U.S. Department of Health and Human Services (DHHS), SAMHSA, Center for Substance Abuse Prevention (CSAP). N.d. "Coping With Work and Family Stress." Rockville, Maryland. Available at http://www.theconsultationcenter.org/WFS% 20SAMHSA.pdf/.
- ² U.S. DHHS, SAMHSA, CSAP. N.d. "Team Awareness." Rockville, Maryland. Available at http://www.modelprograms.samhsa.gov/ pdfs/model/TeamAwareness.pdf/.
- ³ U.S. DHHS, SAMHSA, CSAP. N.d. "The Healthy Workplace." Rockville, Maryland. Available at http://www.modelprograms.samhsa.gov/ pdfs/model/Healthy.pdf/.
- ⁴ U.S. DHHS, SAMHSA, CSAP. N.d. "Wellness Outreach at Work." Rockville, Maryland. Available at http://www.modelprograms. samhsa.gov/ pdfs/model/Wellness.pdf/.





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National Clearinghouse for Alcohol and Drug Information National Mental Health Information Center

The National Clearinghouse on Alcohol and Drug Information, a component of SAMHSA's Health Information Network, is the Nation's one-stop resource for the most current and comprehensive information on substance abuse prevention and treatment. The Information Network offers more than 1,000 items on substance abuse prevention and treatment to the public, most of which are provided at no charge. Through the Information Network, SAMHSA distributes the latest studies, surveys, resource guides, DVDs, videocassettes, and other materials on substance abuse.

SAMHSA's Health Information Network Is a Repository of Current Print, Audiovisual, and Electronic Resources Dedicated to Substance Abuse Prevention and Treatment *SAMHSA's Health Information Network Offers*

- A broad range of substance abuse prevention materials such as fact sheets, brochures, pamphlets, monographs, posters, and videotapes.
- Tailored, culturally diverse prevention, intervention, and treatment resources for many different audiences, including the general public, workplaces, parents, teachers, youth, prevention and treatment professionals, community centers, hospitals and clinics, boys' and girls' clubs.
- A comprehensive, easy-to-navigate Web site that allows requesters to conduct their own searches for information and materials by selecting from 31 different drugs or drug types, 35 drug issues or topics, and 30 audiences. The Web site also features
 - An extensive section on resources, including the Substance Abuse Treatment Facility Locator, self-help resources, and links to many research resources such as the Substance Abuse and Mental Health Data Archive and SAMHSA's National Mental Health Information Center
 - Technical assistance and training resources
 - O Materials including Web casts and PowerPoint presentations
- Access to the Substance Abuse Treatment Facility Locator, which lists private and public facilities that are licensed, certified, or otherwise approved for inclusion by their State substance abuse agency as well as treatment facilities administered by the Department of Veterans Affairs, the Indian Health Service, and the Department of Defense.

Many Information Services Are Available *Requesters Can*

- Place Publication Orders. Through its Information Network, SAMHSA distributes a wide range of materials, including fact sheets, brochures, pamphlets, monographs, posters, and videotapes. Information specialists knowledgeable about the resources available can suggest the most appropriate publications to meet particular needs.
- Speak to an Information Specialist. These specialists are trained to answer many different types of questions about substance abuse prevention, intervention, and treatment.
- ✓ Obtain Referrals. As needed, information specialists can refer inquirers to other organizations or centers in substance abuse prevention and treatment.
- ✓ Join SAMHSA's eNetwork. The eNetwork is your personal link to SAMHSA for the latest news about grants, publications, campaigns, programs, and statistics and data reports (http://www.samhsa.gov/enetwork).



Information Specialists Are Available to Help

Information requests are handled by English- and Spanish-speaking information specialists. These specialists are skilled at recommending appropriate publications, posters, and videos; conducting customized searches; providing grant and funding information; and making referrals to other organizations. For treatment and other referrals, call 1.800.662.HELP (4357). For general SAMHSA information and publications, call 1.800.SAMHSA.7 (1.800.726.4727). For TDD, call 1.800.487.4889.

Services Are Easy to Access

Requestors Can Obtain Assistance...

✓ By Telephone or Fax

- Call toll-free at 1.800.662.HELP (4357) for treatment referral.
- Call toll-free at 1.800.SAMHSA.7 (1.800.726.4727).
- O Hablamos espanol: 1.877.767.8432.
- O Local calls: 240.221.4017.
- O TDD: 1.800.487.4889.
- Fax: 240.221.4292.

Ø By Email Through the SAMHSA Web Site at

O http://ncadi.samhsa.gov

Solution By Postal Mail

Write to SAMHSA's Health Information Network, P.O. Box 2345, Rockville, MD 20847–2345.





Implementation Guide: How to Build, Implement, and Sustain A Drug-Free Workplace Program

Your drug-free workplace initiative can be an invaluable tool in your efforts to strengthen and protect your business and your employees from the hazards of alcohol and other drug abuse. At the same time, it can lessen organizational, social, and psychological risk factors that erode the bottom line. Employers who have implemented drug-free workplace programs report some of the benefits they have noted:

- Decreases in absenteeism, accidents, downtime, turnover, and theft; increases in productivity; overall improved morale.
- Better health status among many employees and family members and decreased use of medical benefits.
- Decreased premium costs for certain kinds of insurance, such as workers' compensation.
- Employees, employee representatives, and unions often welcome drug-free workplace programs.
- Current users of illegal drugs prefer organizations that do not have such programs.

This brochure gives an overview of the process of



building, implementing, and sustaining a drug-free workplace program for your employees. It will help you create a program that is appropriate for your

organization's needs and resources.

Since organizations differ greatly in size, in type, and in available resources, drug-free workplace

programs are not one-size-fits-all.

programs are not 'one size fits all.' They range Drug-free workplace from the basics to very comprehensive efforts. There are three general types of programs:

Type 1. Small Organizations With Low Safety/Security Risks and Employees With Few Risk Factors for Substance Abuse: A basic drug-free workplace program would include a policy and an employee assistance program (EAP) but probably would not include drug testing.

Type 2. Small or Medium-Sized Organizations With Moderate to High Safety/Security Risks or Numerous Workplace Substance Abuse *Risk Factors:* A drug-free workplace program might include some form of drug testing and perhaps the services of an external EAP in addition to the policy and awareness components.

Type 3. Medium to Large Organizations With Moderate to High Safety/Security Risks and Moderate to High Employee Risk Factors: A drug-free workplace program would likely include some form of drug testing, an EAP, and a fairly comprehensive health promotion/wellness program, as well as the basic awareness and policy elements.

There can be many variations on these three types of programs, as organizations tailor them to their particular needs and characteristics. Following is a stepwise approach that many different kinds of employers can use to build,



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov

implement, and sustain drug-free workplace policies and programs that meet their specific requirements.

Building a Program

The following six steps will help you build a customized program:

- 1. Assess your needs.
- 2. Identify available resources.
- 3. Develop a written policy.
- 4. Determine whether to have an EAP.
- 5. Determine whether to do drug testing.
- **6.** Plan to educate your employees and train supervisors.

Step 1. Assess Your Needs

Questions to answer as you assess your needs include

- Is yours a large organization employing individuals in safety-sensitive positions?
- Does it conduct federally funded projects?
- Is the organization in the transportation sector, with mandated drug testing requirements?
- Does the organization have a high prevalence of substance abuse problems?
- Does it employ a population of workers for whom prevention education is critical?
- Drug-free workplace policies and programs are required for organizations with federally funded projects. At minimum, a written policy, supervisor training, and employee education must be in place. Does your organization have these?
- If your organization is in a sector with mandated drug testing requirements, your policy and program must follow the requirements for testing. Does it?

Step 2. Identify Available Resources

Here are the types of resources you might inventory as part of your planning process:

- A drug-free workplace policy already in place
- A drug testing program in place
- Human resources staff in place
- A health promotion program in place
- An EAP in place



If yours is a small to medium-sized organization, you may consider a type-1 program to begin with. If you are a larger

resources to support a more comprehensive

program for your employees (type 2 or 3).

Step 3. Develop a Drug-Free Workplace Policy

A written drug-free workplace policy is the cornerstone of an effective program. It should include

Rationale for the Policy

- The reason for the policy
- What it is designed to do
- How it was developed
- Expectations and Prohibitions
 - Employee behaviors that are expected
 - What substances and behaviors are prohibited
- Consequences and Appeals
 - Consequences if an employee violates the policy
 - Procedures for determining whether an employee has violated the policy
 - How appeals will be handled

Benefits and Assurances

- Efforts to help employees comply with the policy

- How requests for help will be handled
- How employee confidentiality will be protected
- How fairness and consistency will be maintained

For more help and materials on developing a drugfree workplace policy, call SAMHSA's Workplace Helpline at 1.800.WORKPLACE.

Step 4. Determine Whether or Not to Have an EAP

EAPs are programs sponsored by your business or



organization—or by a union—that serve employees and their families. Their services vary across programs from those addressing only problems related to alcohol and other

drug use to those covering a broad range of issues. Some programs include health and wellness activities.

All organizations should seriously consider adding the services of either an external or internal EAP. Small organizations can obtain EAP services through their health care provider by joining a consortium of small businesses to get costeffective rates. The need for an EAP is even greater if a high proportion of your employees are at risk for a variety of social and emotional problems—not just substance abuse.

EAP services may include assessment, referral, aftercare/follow-up, management consultation, supervisory training, employee education, individual or motivational counseling, and drugfree workplace policy development and implementation.

Employee assistance programs encourage employees and family members to seek help before a problem becomes a crisis. EAP services are designed to be confidential, with confidentiality of records guaranteed.

Step 5. Determine Whether to Include Drug Testing

Drug testing is an organizational protective factor



that can deter employees from coming to work unfit for duty and that can discourage alcohol and other drug abusers from joining your organization.

The first consideration regarding drug testing is to determine whether it is required for some or all of your employees. Below are some of the reasons employers give for having a drug testing program:

- To comply with Federal regulations
- To comply with customer or contract requirements
- To comply with insurance carrier requirements
- To minimize the chance of hiring employees who may be users or abusers
- To reinforce the organization's "no drug use" position
- To identify current users and abusers and refer them for assistance
- To establish grounds for discipline or firing
- To improve safety and reduce addiction
- To reduce unhealthy consequences from use of alcohol, illegal drugs, or prescription drugs
- To reduce the costs of alcohol and other drug abuse in the workplace

Employers who are required to test for drugs by one or more Federal agencies should refer to the specific regulations to determine the types of testing that are necessary. Unless drug testing is required by law/regulation, it will likely be a mandatory subject of collective bargaining if employees are part of a union.

Step 6. Plan to Educate Employees and Train Supervisors

The employee education program component is the keystone to implementing a successful drugfree workplace program. Having a plan for introducing and explaining the drug-free workplace program to employees and for informing them about substance abuse–related issues will be important to your program's overall success.

As you plan your employee education component, make sure it is aimed at all employees and all levels of the organization. It should accomplish the following:

- Set forth the drug-free workplace policy, the program, and the rules
- Explain how to access assistance (e.g., self-refer to the EAP before problems appear on the job)
- Explain how employee performance problems will be evaluated and how referrals for assistance will be handled
- Provide details regarding circumstances, procedures, and other elements of drug testing (if the policy includes testing)
- Explain confidentiality and other employee protections in the policy
- Provide information about substance abuse such as types and effects of drugs, symptoms of use, and effects on performance
- Explain the relationship of the employee assistance program to any drug testing and to prevention, treatment, rehabilitation, and aftercare

Be sure to include an employee awareness program that communicates the hazards of substance abuse and the benefits of avoiding substance abuse. At minimum, the employee education component should also

- Provide print materials on the hazards of alcohol and drugs and misuse of prescription drugs
- Inform employees how to avoid substance
 abuse problems
- Provide general health promotion material on stress management, a healthy diet, and fitness as well as on alcohol and other drugs

It is highly recommended that organizations select, as resources permit, one of several



evidence-based substance abuse prevention programs that present materials in the context of broader health and safety issues. The evidence-based programs are described in the

"SAMHSA's NREPP Model Programs for the Workplace" section of this book.

Supervisor Training

It is recommended that companies with several or more supervisors provide them with special training to ensure that they understand the drugfree workplace policy and their particular roles in preventing and addressing workplace substance use. The depth and scope of supervisor training will grow as a function of

- Implementation of drug testing
- Substantial prevalence of substance use
- Organizational resources to support
 the training

Implementing a Program

This section summarizes key implementation considerations for each program component.

Employee Assistance Programs

EAPs may be internal, external, internal/external,



or consortiums (among various companies). They may be management sponsored, member assistance programs provided by unions, or peer assistance programs

sponsored by employers or unions. The following describes a range of implementation options:

Referral Only

These programs provide supervisors and managers with a telephone number to give to troubled employees for accessing referrals to community resources, self-help options, and substance abuse treatment providers.

In House

These types of programs have employees who specialize in crisis intervention, assessment, and referral to outside sources for assistance. They also may provide assistance to supervisors and managers in handling employee performance reviews and identifying problems.

Contract

Outside programs offer crisis intervention, shortterm counseling, assessment, and referral to specialized sources of assistance with the use of a consultant or firm providing these services. This is a common model that uses highly specialized staff and services removed from the workplace.

Consortium

These programs combine employers, unions, and worksites within a defined area or specific industry to offer services—often on a more comprehensive and less expensive basis.

Mixed Model

These programs are for employers and unions with multiple worksites with different needs and resources. costs, and contract options depending on your interests and needs. Information that a potential provider will need to make an offer of services generally includes

- Your drug-free workplace policy statement
- Your health benefits structure
- Information about the organization and employees (demographics, job categories, worksites, etc.)
- Services you wish to include
- A budget range for services
- Reports required

Drug Testing

An effective drug testing program needs a drug testing policy. This may be part of the organization's drug-free workplace policy, or it may be a separate document. It should be distributed to all employees. The best protection against future legal challenges is to write a policy that is as detailed and specific as possible.

The actions that will be taken in response to a positive drug test should be clearly described in the written policy. Although there are many options, common responses include referring the employee for treatment, disciplinary measures, or discharge.

Employee Education

Clearly communicating, from the beginning, the drug-free workplace program's content and importance to employees is critical to the program's success. Make sure to communicate the value the organization places on the personal health of employees, their families, and their communities. Announce (e.g., in a letter to all employees from the CEO) that having a drug-free workplace and preventing drug and alcohol problems among your employees and their families are major corporate emphases.

EAP providers can suggest a package of services,

- Fully explain the benefits and procedures of your drug-free workplace program or policy to all employees.
- Communicate to your employees the potential risks that drug (including alcohol) abuse poses for businesses or organizations—and for yours in particular.
- Communicate to your employees the connection between substance abuse and health problems. Include moderate alcohol consumption guidelines for men and women. (Moderation is defined as the consumption of up to one drink per day for women and up to two drinks per day for men. Twelve fluid ounces of regular beer, 5.0 fluid ounces of wine, and 1.5 fluid ounces of 80-proof distilled spirits count as one drink each. This definition of moderation is not intended as an average over several days but rather as the amount consumed on any single day.¹)

Some of the mechanisms used by companies to provide information to employees about the drugfree workplace program, as well as about alcohol and other drugs, include the following:

- Print materials, payroll stuffers, and presentations such as brownbag luncheon presentations
- Special events such as substance abuse awareness campaigns, involving posters, and employee newsletter articles
- Health Fairs that include advertising the services of the employee assistance program to the mainstream
- Organization intranet or special Web sites (e.g., GetFit) that feature educational materials ranging from basic information to sophisticated multimedia programs

• Orientation programs for new hires

Current research indicates that integrating substance abuse prevention education, organization policy, and access to help within a broader health framework leads to greater employee interest and impact. The health context



of topics such as stress management, nutrition/weight management, and active lifestyle enables the organization to go a long way toward diminishing the stigma associated with seeking early assistance for a potential problem with alcohol or substance abuse.

Using Evidence-Based Prevention Interventions

Substance abuse prevention programs and strategies that have been deemed effective by SAMHSA can serve as a central part of your drug-



free workplace effort. Such programs have been carefully implemented and rigorously evaluated with consistently positive outcomes. Several workplace programs have met SAMHSA's stringent criteria and are listed below. These programs can be used to further enhance your drug-free workplace and your substance abuse prevention effort, to create a health-promoting workplace environment, and to support employee health and well-being. For more information and technical assistance, visit http://www.modelprograms.samhsa.gov/.

Coping With Work and Family Stress: A Workplace Preventive Intervention^{2, 3} is a 16-session weekly group intervention designed to teach employees how to develop effective coping strategies for dealing with stressors at work and at home.

*Team Awareness*⁴ is a six-module workplacetraining program that addresses behavioral risks associated with substance abuse among employees, their coworkers, and, indirectly, their families.

The Healthy Workplace Program⁵ is a set of



workplace substance abuse prevention interventions that reduce unsafe drinking, illegal drug use, and prescription drug abuse while

improving the health practices of adult workers.

*The Wellness Outreach at Work*⁶ program provides comprehensive health risk-reduction services to all employees at a workplace, using health screening, follow-up, and worksite health promotion programs. Alcohol education is integrated into the context of health risk counseling.

Supervisor Training

All supervisors should be provided with basic information about the drug-free workplace program and their roles in carrying it out. This includes

 The rationale and specific details of program start-up and implementation

- The supervisor's specific responsibilities for initiating and carrying out the drug-free workplace policy and program
- How to recognize and deal with employees who have job performance problems that may or may not be related to alcohol or other drugs, including personal and family problems

Supervisor training can be provided in a variety of ways, depending on available time and resources. Organization staff can conduct the training, for example, or a consultant from a local community agency or EAP can conduct training sessions.

Sustaining the Program

The successful drug-free workplace program is an ongoing and evolving one. Sustaining the program means integrating it well into the workplace culture and environment. Keeping the program alive and responsive to changing conditions involves several steps:

1. Ensure Good Communication. Effective ways to communicate include written materials, charts, meetings, question-and-answer sessions, and a suggestion box. Employers who are successful at this know it is important to repeat the message periodically.

2. Conduct Ongoing Review and Evaluation of Program Results. Note how the program works on a day-to-day basis, invite feedback, and revise as necessary to meet the specific needs of the workplace. Evaluate specific results. If, for example, a program goal is to lower employee absenteeism, use employee absenteeism records to establish a baseline against which you can measure the results of your program (e.g., after the program has been in place for a year). Other types of data you might want to use include tardiness, health care benefit utilization, workers' compensation claims, theft, accidents, and turnover. *3. Stay Current.* Drug-free workplace programs are being studied and improved all the time. Keep current by joining local drug-free advocacy groups



or coalitions. Some trade and professional associations also provide up-to-date information about drugfree workplace issues. Some employers ask an

employee group to periodically review the program and suggest appropriate changes.

4. Involve the Mainstream. Some employers and unions survey their employees/members and families regarding their interest in and need for substance abuse programs as well as general wellness and health promotion education and services. Many EAPs also offer or arrange for both general and specialized employee education activities.

Other actions that employers can take to help sustain the drug-free workplace effort include the following:

- Host alcohol-free events, emphasizing the organization's commitment to preventing injuries and deaths associated with drinking and driving, especially around the holidays.
- Be a positive role model consistent with your messages to your employees.
- Sponsor or help with prevention services in your community that would benefit your employees and their families.
- Include prevention/healthy lifestyle articles in your organization newsletter.
- Appoint a corporate representative to serve on and support any local substance abuse prevention-oriented programs or community partnerships in your area.

 Encourage and support employees and their family members to ask for help.
 Early identification and treatment is more cost effective than unsafe working conditions and lost productivity caused by alcohol- or other drug-related problems.

References

- ¹ U.S. Department of Health and Human Services and U.S. Department of Agriculture. 2005. *Dietary Guidelines for Americans, 2005.* Washington, D.C.: U.S. Government Printing Office, 44.
- ² David L. Snow, Suzanne C. Swan, and Leo Wilton. 2003. "A Workplace Coping-Skills Intervention to Prevent Alcohol Abuse." In Joel B. Bennett and Wayne E.K. Lehman (eds.). *Preventing Workplace Substance Abuse: Beyond Drug Testing to Wellness*. Washington, D.C.: American Psychological Association, 57–96.
- ³ U.S. Department of Health and Human Services (DHHS), SAMHSA, Center for Substance Abuse Prevention (CSAP). N.d. "Coping With Work and Family Stress." Rockville, Maryland. Available at http://www.theconsultationcenter.org/ WFS%20SAMHSA.pdf/.
- ⁴ U.S. DHHS, SAMHSA, CSAP. N.d. "Team Awareness." Rockville, Maryland. Available at http://www.modelprograms.samhsa.gov/pdfs/ model/TeamAwareness.pdf/.
- ⁵ U.S. DHHS, SAMHSA, CSAP. N.d. "The Healthy Workplace." Rockville, Maryland. Available at http://www.modelprograms.samhsa.gov/pdfs/ model/Healthy.pdf/.
- ⁶ U.S. DHHS, SAMHSA, CSAP. N.d. "Wellness Outreach at Work." Rockville, Maryland. Available at http://www.modelprograms. samhsa.gov/pdfs/model/Wellness.pdf/.



How to Build Awareness of Your Drug-Free Workplace Program

Techniques in Social Marketing Can Be Used to Build Awareness of Your Drug-Free Workplace Program

Such techniques can take advantage of a workplace's current resources and processes, can adopt or adapt approaches from other successful programs, and can develop new multimedia methods of social marketing for the program.¹ They can increase corporate and union buy-in and thereby increase the chances that a program will be well advertised and well attended. Building awareness about a program in ways that make it a part of the workplace culture can be a major undertaking, but this can lead to better outcomes and returns on investment.

Various Vehicles and Resources, Many of Which Will Already Be Available in Your Organization, Can Help Implement the Social Marketing of Your Program

These include the following: employee handbooks, organization intranets, employee assistance program Internet sites, employee newsletters, health insurer newsletters, internal meetings (on safety, security, planning, and the like), new-hire orientations, union communication channels and representatives, employee health promotion and wellness programs, health fairs, electronic and paper bulletin boards, and special health and safety campaigns.

Before Choosing an Approach, It Can Be Helpful to Collect Information on the Habits, Activities, Likes, and Dislikes of Your Employees and Their Families, as Well as Their Experiences and Satisfaction or Dissatisfaction With Other Approaches to Building Awareness

This will allow you to pinpoint the best ways to promote the program. For example, if most employees do not read the organization's newsletter, it might not be the best place to announce a new program. And if people rarely visit the substance abuse booth at the health fair, it may be better to include drug-free workplace information in a health-and-wellness booth or have giveaways at a table.

Some of the best ways to spark and sustain interest in a drug-free workplace program are good public relations, contests with prizes, other entertainment formats, integrated multimedia approaches, and informal conversations with employees, managers, and union representatives.

In addition, consider doing the following:

- ✓ Decide which messages and other resources are most appropriate for the age, gender, first language, and culture of specific employees. Decide which messages and resources are appropriate for your industry, for the time of the year you introduce your program, and for the geographic location of the workplace. One wrong message can negate most, or even all, of the positive measures your program has taken or is intending to take. Test the messages ahead of time in small groups of employees who are representative of your organization. The Workplace Kit contains many messages that can be rewritten or adjusted for specific populations and needs. Who sends the message, or how the message is sent, can also be important. Depending on the workplace culture and environment, some messengers will be listened to more than others. For example, in a management/union shop, if the union has had difficulties with management, union members may want to hear the message from a fellow union member or a union official.
- ✓ Decide what awareness-promoting actions you will plan. For example, you might want to send a letter from the CEO detailing your policy. Place two articles about aspects of the drug-free workplace program (DFWP) on the intranet or in the newsletter. Arrange for DFWP materials to be distributed at the safety meeting. Integrate pertinent elements of the DFWP and substance abuse prevention content into stress classes.
- \oslash Devise a schedule for implementing each element of your plan.
- Remember to keep the focus of the program clear and consistent. Keep the tone of your communications positive. The drug-free workplace program is designed to promote the safety, health, and well-being of employees, their families, and the organization. To attract employees, the stigma of substance abuse must be reduced. Employees must understand that they will receive the help and attention they require, with their privacy and confidentiality protected.



FACT SHEET

- Set priorities for the actions in your social marketing effort, and follow each session or function with an evaluation that will allow you to keep track of costs, benefits, and outcomes. In a program or program component being introduced for the first time, for example, you may want to begin with a letter or email to all employees from the CEO introducing the program and policy.
- Keep awareness alive throughout the year by continuing to plan and implement the program through a variety of vehicles.

A few examples:

- Continue to make the connection between the drug-free workplace program and other health-related topics such as nutrition, parenting, weight management, stress management, and active lifestyle. Have your health promotion, wellness, and fitness director trained to integrate the content of the substance abuse prevention program with related health areas.
- Send a letter or email from the CEO to all employees addressing the rationale, goals, and elements of the DFWP. A similar letter can be directed to new hires.
- Hold a meeting with staff members or department heads to explain the organization's policy and the DFWP.
- Distribute information about the organization's program and about alcohol and other drug abuse in pamphlets, flyers, home mailings, paycheck stuffers, free videos, and the like.
- Hang posters and signs reminding employees that "yours is a drug-free workplace" and that your worksite promotes a healthy lifestyle through regular exercise, good nutrition, smoking cessation, and stress management.
- Distribute DFWP materials at events such as health fairs, further linking with the drug free/healthy workplace idea.
- Use safety meetings and other related events to build awareness of the DFWP and components such as an employee assistance program.
- Arrange for union representatives to help communicate the program's purpose, procedures, and policies to the employees they represent.
- Actions speak louder than words. The organization and its leaders must be sure they "walk the talk" concerning the drug-free workplace program.

A few tips:

- Be a positive role model, consistent with your messages to your employees. Do not engage in illegal, unhealthy, or dangerous alcohol or other drug use. Host alcohol-free events, emphasizing the organization's commitment to preventing injury or death associated with drinking and driving, especially around the holidays.
- Provide food and beverages in organization settings that encourage a healthy lifestyle.
- Sponsor or help with prevention services in your community that would benefit your employees and their families.
- Concourage employees and their family members to seek help for an alcohol or other drug problem. Continue to support them as they use this help. Treatment is more cost effective than incurring potential safety hazards and lost productivity caused by drugrelated problems.
- ✓ Finally, it can be helpful to keep a running journal of all your efforts, in order to help identify and analyze what worked and what did not. You can often learn much from a failure and then go on to turn it into a success. You can also learn a great deal from surveys and short evaluation forms filled out by participants after events and activities. These will help you plan future activities in ways that may increase your benefits while decreasing your costs.

Reference

Nedra Kline Weinreich. 1999. *Hands-On Social Marketing: A Step-by-Step Guide*. Thousand Oaks, California: Sage Publications.



How to Inform Employees About Your
Drug-Free Workplace Policy
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The method you choose to use to inform employees about a new drug-free workplace policy can show that the organization places a high priority on the policy and its goals. A written communication from the chief executive officer (CEO) or other top management, for example, is one good way of doing it. Such a communication—whether sent in printed form or through the organization intranet—can speak in a strong, positive manner about the importance of a drug–free workplace to the organization and to employee safety, health, and well–being. It can speak clearly about the rationale behind the program. And it can share information about the organization's history, mandates, and goals (for example, the highest standards of safety) that have informed the policy development process.

What to Address in a CEO Communication

- Since and workers' compensation costs; more injuries, fatalities, and thefts; lower productivity and product quality; and reduced employee morale and higher turnover.
- Emphasize the importance that the organization places on educating and helping employees avoid the problems associated with substance abuse.
- ✓ Note the connections between drugs and alcohol and health problems, and emphasize the organization's desire to help employees and their families avoid ill health and injury.
- Speak to the ways in which the program can benefit employees and their families. Examples of benefits include the employee assistance program (EAP) and other health promotion/wellness programs related to substance abuse. Note any services, such as the EAP, that have been instituted.
- $rac{1}{2}$ Briefly outline the rationale for the policy and what it is designed to accomplish.
- $rac{1}{2}$ Summarize the major benefits and procedures of the drug–free workplace policy.
- $rak{O}$ Note any services, such as an employee assistance program, that have been instituted.
- Announce upcoming policy-related articles, informational resources, meetings, trainings, and the like.
- Tell employees that the company is going to continue informing them about the drug–free workplace policy through upcoming articles on the company Web site, brochures in strategic locations, supervisor briefings, and question–and–answer vehicles.
- Indicate how employees can access the written policy document and any accompanying materials.

Ways to Reinforce the Message

- Make sure that all managers and supervisors are informed of the policy and its implications. This may be accomplished through specially tailored communications that address their particular roles along with staff meetings designed to provide a consistent understanding of the policy.
- Consider convening a meeting with union representatives, if applicable, to go over the final policy and its implications for union members.
- Consider convening meetings with representatives of special employee groups (such as health promotion advisory committees or safety teams). Involving employees can help inform employees about the policy and program.



FACT SHEET

- Make sure all employees get a copy of the written policy (downloadable, if appropriate, and as a hard copy).
- Consider creating a policy fact sheet that clearly conveys the major points and implications of the organization's drug-free workplace policy. You can use the following headings and speak to each one in straightforward terms that all employees can understand. If some of your employees are not fluent in English, also have a translation of the policy and its major points available (e.g., in Spanish):

Rationale for the Policy

The reason for the policy What it is designed to do How it was developed

The Policy, the Program, and the Rules The employee behaviors that are expected Exactly which substances and behaviors are prohibited

• Consequences and Appeals

Precisely what will happen if an employee violates the policy Procedures for determining whether an employee has violated the policy How appeals will be handled

• Benefits and Assurances to Employees

Efforts to help employees comply with the policy How requests for help will be handled How employee confidentiality will be protected How fairness and consistency will be maintained

- ✓ If your organization has an intranet, consider creating a site devoted to the drug-free workplace policy and program. The site can continue to inform employees of policy and related issues and can include a question-and-answer function (e.g., employees can submit queries, a frequently asked question section can be featured). Many workplaces have customized GetFit and linked it to their intranet. See the fact sheet "Build Your Own GetFit Web Site"¹ at http://www.buildasite.atgetfit.net/.
- If there is no intranet in place, consider devising other means whereby employee questions can be answered (e.g., a box in which employees can anonymously submit questions that will be answered in an employee newsletter).
- Inform job applicants and new hires of the drug-free workplace policy. Include the policy in new employee application materials and in employee handbooks, if applicable.
- ${\mathscr O}$ Continue to inform employees of the policy through such vehicles as
 - Safety meetings
 - Staff meetings
 - Supervisors trained to communicate about the policy
 - Communication from the EAP (in-house or other) describing how the EAP interacts with the drug-free workplace program
 - Orientation of new hires
- If there are new developments in the policy, be sure to inform your employees of their precise nature and content.

Reference

U.S. Department of Health and Human Services, SAMHSA, Center for Substance Abuse Prevention, Division of Workplace Programs. N.d. *GetFit: Online Workplace Health Promotion, Intervention and Prevention*. http://www.buildasite.atgetfit.net/.





GetFit.SAMHSA.Gov¹ is a health promotion Web site that can be adapted by workplaces to help improve the health of their employees, members, clients, and families.

What Is the Purpose of GetFit?

The GetFit Web site aims to make it easier for employees and their families, in workplaces throughout the Nation, to find authoritative information about substance abuse, mental health, and physical health issues. GetFit offers practical and useful information about resources in the workplace and the local community for successfully addressing those problems.

What Is the General Approach of GetFit?

GetFit takes information about substance abuse prevention, intervention, and treatment and incorporates it into an overall strategy for improving workplace health, wellness, and safety. It offers information, screening tests, and local referral resources on important health-related issues that can affect healthy living and self-sufficiency, such as stress,

GetFit provides credible information and recommendations that people can trust.

depression, family issues, illness and disease, nutrition, substance abuse, physical fitness, and trauma.

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What Are the Major Features of GetFit?

GetFit provides credible information and recommendations people can trust from reliable sources within the U.S. Department of Health and Human Services—specifically, the Substance Abuse and Mental Health Services Administration (SAMHSA), the National Institutes of Health (NIH), the Centers for Disease Control and Prevention (CDC), and other organizations serving the public interest.

The site offers self-screening tools that help employees identify, understand, and get help for problems with drugs and alcohol, their concerns about physical health, and mental health issues or illness.

And GetFit offers articles about healthy living for children, teens, and adults. This information is featured in a comprehensive glossary, Post-it note updates, and answers to questions about various health topics.

How Can Workplaces Make Use of GetFit?

GetFit offers a quick way for workplaces to provide credible and useful health information in general. It also can be tailored to provide information about the policies, programs, and other resources of specific workplaces and their communities. Especially for workplaces that do not have a Web site or intranet, GetFit can save workplaces thousands of dollars in Web site design, Web site maintenance, and the purchasing of health care and health promotion information that is current and authoritative. And for workplaces that already have a Web site or intranet, GetFit can be a valuable enhancement that employers and employees alike will use often.



GetFit Offers Options for Workplaces to Link to, or to Customize Their Own Versions of, GetFit

For example:

- Workplaces can simply link to GetFit. In this way, workplaces gain access to reliable health-related information from credible sources within the U.S. Department of Health and Human Services (including SAMHSA, the CDC, and NIH), other Federal departments, and other organizations that serve the public interest.
- ✓ Workplaces can also customize GetFit, through a step-by-step online process. First, an organization must decide whether it wants to customize the "At Work" section of GetFit or the "In Our Community" section. Then it can enter information that is specific to its workplace, including customized banners and pictures; information about workplace

substance abuse and health and wellness policies, programs, and benefits; and information about community organizations that offer a wide range of services. A workplace can have its own customized Web site in as little as an hour.

A workplace can have its own customized Web site in as little as an hour.

What Are Some of the Benefits of GetFit?

Employers, unions, and other organizations that choose to customize their own versions of GetFit, or simply link to GetFit, will find that GetFit is a resource that can help them reduce absenteeism and accidents, lower health care costs, and improve performance. For example:

- Employees receive reliable information about current research, prevention, and intervention for workplace health and safety through numerous links to Federal resources and professional associations.
- Employees can use GetFit self-tests as a stigma-free way to gather information in a confidential and anonymous manner, and to develop strategies that are tailored to their own needs and the resources in their workplaces and communities.
- Employees can get information in just a few clicks, through a no-cost referral system for local, State, and national treatment and support services; user-friendly options to search, print, and email information; and the capability of saving any page from the GetFit Web site.

Who Sponsors GetFit?

The Division of Workplace Programs within the SAMHSA's Center for Substance Abuse Prevention sponsors the GetFit Web site. The GetFit site represents the work of SAMHSA's centers—the Center for Mental Health Services, the Center for Substance Abuse Prevention, and the Center for Substance Abuse Treatment—in mental health and substance abuse prevention, early intervention, and treatment.

For information about how to link to or customize GetFit, contact Webmaster@atgetfit.net/.

Reference

U.S. Department of Health and Human Services, SAMHSA, Center for Substance Abuse Prevention, Division of Workplace Programs. *GetFit: Online Workplace Health Promotion, Intervention, and Prevention.* Available at http://www.getfit.samhsa.gov/.



Call the Workplace Helpline: 1.800.WORKPLACE Call local help: Enclosed are two drug-free workplace posters and a bumper sticker.

You may choose to display the posters in your workplace. If you do, write your local contact information at the bottom of each poster. This may include any of the following: a person's name, a phone number, a Web site, or an email address.

"SAY YES!"

Say yes to

Health

Clarity



Trust in your colleagues

A drug-free workplace

To learn more about our employee assistance opportunities, contact:



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov





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U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov







DHHS Publication No. SMA07-4230