

## AMIEU ALCOHOL AND OTHER DRUGS POLICY

**Whilst alcohol and illicit drug use is a broad social problem, it impacts on the workplace in many ways.**

Most people who suffer are employed; More than 5% of the workforce is thought to be affected by chronic alcohol use<sup>1</sup>.

25% of industrial accidents<sup>2</sup> and up to 30% of industrial deaths<sup>3</sup> are estimated to be alcohol or drug related. The financial cost to industry in Victoria of lost productivity, legal and compensation costs etc, deriving from alcohol use alone was estimated to be \$1.4 Billion in 1990<sup>4</sup>

Many in the workforce are not aware of basic information about alcohol and other drugs, and unknowingly place themselves and others at risk. Cultural and industrial factors like peer group pressure, a stressful working environment and long hours can also influence patterns of use<sup>5</sup>

It is not only the habitual heavy user: the “alcoholic” or “drug addict”, who may compromise safety in the workplace. Many alcohol and/or drug related industrial accidents involve younger, inexperienced and/or light to moderate drinkers, <sup>6</sup>for instance people who arrive at work “hungover” or with high blood alcohol content after a “hard night out” or people who drink at lunch-time. Many people underestimate the effect on work performance of one “joint” or the danger of mixing alcohol with other drugs, including prescription medications.

Drinking levels are known to be very high among building workers: the most recent and authoritative findings are that almost 25% of men employed in the industry drink at levels considered to be hazardous or harmful to health<sup>7</sup>. This is significantly higher than in most industries.

Building industry research<sup>8</sup> suggests that “binge drinking” patterns are prevalent in that industry, particularly amongst younger workers, including some of those who fall into “low risk” categories in terms of overall weekly consumption. As the red meat processing sector of our industry is also relatively youthful, the health and safety of a significant number of people may be “at risk”.

There is no reason to believe that the use of illicit drugs in the industry does not at least mirror use in the wider community, and therefore is also of concern.

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<sup>1</sup> Richmond R. Heather, N., Holt P., and Hu W. Workplace Policies and Programs for Tobacco, Alcohol and other Drugs in Australia N.C.A.D.A. Monograph Series No.24. AGPS Canberra 1992

<sup>2</sup> Australian Bureau of Statistics 1989-90 National Health Survey: Accidents Australia Cat No. 4384.0 AGPS Canberra, 1992

<sup>3</sup> International Labour Organisation/World Health Organisation Responses to Drug and Alcohol Problems in the Workplace ILO/WHO Geneva 1987

<sup>4</sup> Health Department Victoria Framework for the Victorian Drug Strategy 1993-98 HDV Melbourne, June 1992

<sup>5</sup> Hagen, R., Egan, D., & Eltringham, A., Work, Drugs and Alcohol: Research Report Occupational Health and Safety Commission, Melbourne, June 1992

<sup>6</sup> Crosbie, D., Alcohol and the Worksetting: Statistics of Alcohol-Related Problems in the Worksetting Australian Drug Foundation, Melbourne, undated

<sup>7</sup> Australian Bureau of Statistics, National Health Survey: 1989-90 Data re the consumption of alcohol and other drugs by industry and occupation prepared for the Victorian Occupational Health and Safety Commission (Hagen et al. 1992)

<sup>8</sup> Victorian Building Industry Alcohol and Other Drugs Project Stage 2 Report Drug Rehabilitation and Research Fund, Melbourne 1993

Many in the meat industry recognise the impact that heavy drinking in particular has on the health and safety of workers, and have made a number of assumptions about the effects of cannabis use.

Occupational Health and Safety Legislation, reinforced by morbidity data and cost estimates of the kind cited above, have in recent years provided an impetus to action. Some companies have formulated policies which restrict or ban the consumption of alcohol and specific drugs in the workplace.

Some company policies provide for pre-employment or random drug testing- about as effective a strategy for dealing with drug and alcohol related safety issues as hearing tests are for dealing with noise-induced deafness. This blanket approach of assuming that all use is bad use, combined with scatter gun disciplinary action against those who get “caught”, deals with alcohol and drug use in the workplace as a moral issue rather than, as it should be, a safety issue.

By adopting a policy grounded in the context of a preventative approach to a safety issue, we are better equipped to argue against the morality based responses of some employers. Some of these policies contain rehabilitation protocols for drug affected workers. Few enable workforce education, a component of prevention and harm minimisation strategies.

The policy is designed to compliment and extend most workplace alcohol and drug policies. It derives from experience in the building industry and is administered through a program of “peer” intervention, education and the provision of assistance, where appropriate, to people with alcohol, drug and/or related problems. It enables on-site alcohol and other drug related problems to be dealt with systematically, according to an agreed upon and “caring” process, whilst enabling broader educational and preventative goals to be pursued.

The policy would be implemented in a workplace only after it has been endorsed by employees. This is done to ensure support, co-operation and “ownership” of the program. It is also an important first step in the educative process.

# **Australasian Meat Industry Employees Union Alcohol and other Drugs Program**

## **Policy**

### **Preamble**

The AMIEU is committed to working for the provision of safe and healthy workplaces.

The attainment of this objective can be undermined by the hazardous use of alcohol and other drugs by some individuals on occasions.

There are many factors which determine alcohol and other drug usage patterns.

Some relate to personal and social matters.  
Others may relate to work culture and conditions.

High levels of alcohol use may affect occupational health and safety in meat industry workplaces.

This policy aims to facilitate the implementation of practical ways in which meat workers themselves can address the alcohol and other drugs issues which affect them, their families or co-workers.

It provides guidelines which may be adapted to meet the specific conditions of different work places.

### **Principles**

- Safety is paramount in the meat industry workplaces
- Prevention of safety and health problems is the primary goal of alcohol and other drug policy formulation
- Policy implementation and program management is best founded on consultation and collaboration between employees and management
- Employees with alcohol and/or other drug problems will be provided with the appropriate assistance, support and access to intervention programs without jeopardising their employment

## **Objectives**

- To establish a program run by and for meat workers, which enables alcohol and other drug issues to be addressed in meat industry workplaces
- To expand awareness of alcohol and other drug use as an occupational health and safety issue
- To enable industrial factors likely to influence alcohol and other drug use (eg extended working hours, peer group pressure) to be recognised and addressed
- To provide a basis for health promotion in the meat industry
- To enable a consistent approach to alcohol and other drug issues across the meat industry
- To set out collaborative procedures for dealing with alcohol and drug issues in meat industry workplaces
- To provide a structure on-site to assist workers to get any help they need for alcohol and/or other drug problems, confidentially and without jeopardising their employment
- To enable the development of a network of people, resources and programs managed by and sensitive to the needs of meat workers with alcohol and drug problems

## **Goals**

- To have this alcohol and other drug policy adopted for implementation in specific meat industry workplaces by meetings of workers employed on those sites
- To increase knowledge amongst workers about health and safety risks associated with alcohol and other drug use
- To maintain optimum safety on site and to reduce the harmful impact of alcohol and other drug use
- To provide education about the safe use of alcohol and other drugs
- To train and resource Union delegates, Health and Safety Representatives and other relevant on-site personnel (where appropriate) to assist co-workers who are affected by alcohol and/or other drugs.

## **Implementation and Management**

To assist with adoption and implementation of this policy, each branch will:

- Identify community/government services and resources that may be utilised to support the program, particularly the educational resources to support its introduction;
- Designate an official responsible for delivering or facilitating the delivery of training, the development of information materials and establishing referral systems to external drug and alcohol support and rehabilitation services;

- Modify the attached guidelines for implementation of the policy to reflect effective local representative structures and agreed disciplinary procedures.

Where the policy is to be implemented, the branch will seek the company's procedures to:

- Clearly state its endorsement of the AMIEU Drug and Alcohol Program and comply with it;
- Provide access at an agreed time and venue for a representative of the AMIEU Drug and Alcohol Program to address meetings of employees to discuss and endorse the program;
- Authorise the attendance of appropriate company personnel e.g. safety delegate(s), officer(s), safety committee member(s), union delegates, at the an agreed course on alcohol and drug safety in the workplace;
- Ensure the policy is applied to everyone on site without distinction.

## **B. Guidelines for Implementation of the Policy on Alcohol and other Drugs**

### **Introducing the policy on site**

Following an expression of interest by an employer, employee or committee member, the OH&S Committee\* seeks a full briefing on the program

\*The OH&S Committee, which includes employer representatives, should then determine whether to proceed with the adoption and implementation of the policy. It is important to stress that the program cannot succeed without the unqualified support of the site OH&S Committee.

The policy, however is not practically adopted until a meeting of the workers on the site endorses the OH&S Committee's proposal and agrees to participate in, and co-operate with the policy.

Adoption of the policy by a meeting of workers is the first and most important step in conveying the strong message that the consequences of alcohol or other drug induced behavior will no longer be tolerated on site.

Awareness of the policy is reinforced by the action of the site OH&S Committee in circulating printed material on the policy. This information enables persons with dependency problems to seek expert assistance apart from, and without reference to, the AMIEU Alcohol and Drug Program.

Agreed training to accompany the implementation of the policy will be sourced from existing community/government services in the first instance.

### **Persons Affected by Alcohol and/or other Drugs**

An OH&S Committee member should be informed by workers or management of any likely immediate safety problem arising out of a person being incapable of working safely.

Such information should be treated as confidential and acted upon by the site OH&S Committee in the same manner as any other safety inspection.

If the person in question is considered to be incapable of safe work practices, he/she should be approached by an appropriate "peer" representative\* of the OH&S Committee and advised of the safety problem.

\*A “peer” representative is a worker representative if the person is a worker or a management representative if the person in question is a member of management.

The person in question is then interviewed by the peer members of the committee.

Should the peer members of the OH&S Committee conducting the interview conclude that the person is incapable of safe work practices, the person will be advised that he/she is not permitted to resume work until he/she is capable of working safely as outlined by the OH&S Committee.

The employer and industrial representatives of the person in question is informed of these developments and reminded of the terms of the policy. They will treat such information as confidential.

The person is removed to an appropriate area by the OH&S Committee.

After the incident the person in question is not permitted to resume work until the OH&S Committee consider that he/she is capable of performing safe work practices.

If necessary, arrangements are made to ensure that the person in question gets home safely.

## **Rehabilitation / Counselling**

When the person resumes work, he/she is reminded by a delegated member of the site OH&S committee of the policy, which provides:

- encouragement to recognise any alcohol or other drug problem and to decide a course of action;
- that the employer has agreed not to disadvantage any worker undertaking rehabilitation or counselling;
- that a person undertaking rehabilitation/counselling is entitled to sick leave, negotiated by leave without pay, and other benefits provided for by the appropriate award/agreement.

When appropriate, a peer member of the OH&S committee should provide information about treatment or counselling if necessary. This may include:

- assistance of the designated AMEIU Official;
- alerting the person to Alcohol and Other Drugs Services available.

The OH&S Committee and management will support the recovering worker and ensure that he/she is not disadvantaged upon return, to work, and that

appropriate assistance and support is made available to him/her during and on completion of rehabilitation.

Confidentiality is to be maintained in all matters relating to the rehabilitation and counselling, employment arrangement, etc. of individuals.

### **Disciplinary Action**

Disciplinary action may be taken by management following consultation with the OH&S Committee and the person's representative.

If disciplinary action is to be taken the agreed warning system shall apply.

### **Employees at Risk Through Medication Use.**

Employees who are taking medication which might affect their ability to undertake any kind of work safely, should advise an OH&S representative or the First Aid Officer, who will act immediately to eliminate the risk.

No Employee will be disadvantaged by his/her actions in the matter.

### **Education and Prevention**

The policy will be discussed and put forward for adoption on site at a meeting of all workers.

It is the ongoing responsibility of the Union and the Employer to ensure that all employees continue to be aware of the policy and program. The OH&S Committee will assist in the process.

All relevant information shall be available on site and displayed as appropriate.

From time to time the OH&S Committee in consultation with Management may initiate relevant health and safety promotional activities in relation to alcohol and other drug use issues.

### **Provision of Alcohol at Social Events**

Where social functions are held they will be located in a hazard-free area where responsible serving of alcohol beverages will apply. This includes provision of non-alcohol and low-alcohol beverages.

### **Role of Occupational Health and Safety Committees on Site**

- To encourage knowledge of policy and program by all workers on site.
- To ensure information about the policy and program is displayed.

- To ensure information relevant to alcohol and other drugs is circulation amongst workers.
- To initiate and co-ordinate relevant health promotional activities in relation to alcohol and other drug, in consultation with management.
- To provide information and referral options to workers as requested.
- To be available for informal discussion with and follow-up of affected employees when appropriate.
- To follow up persons undertaking rehabilitation to ensure that appropriate resources and supports are made available when requested.
- To encourage a peer support network on site.