

Drugs and Alcohol Support Programme (DASP)



GUIDANCE DOCUMENT ISSUE: 001

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1. Introduction

- 1.1 This guidance document provides details of the company's Drugs and Alcohol Support Programme (DASP) and should be read in conjunction with the Company's Drugs and Alcohol Standard (NR/L2/OHS/00120).
- 1.2 DASP aims to provide support to employees who have disclosed a misuse concern with drugs (, whether illegal or legal,) and/or alcohol, alongside maintaining legal obligations of safety within the remits of the Transport and Works Act 1992 and Health and Safety at Work Act 1974.
- 1.3 This guidance has been developed to ensure that Network Rail employees who have disclosed a drugs and/or alcohol misuse concern are supported to attend work safely and not under the influence of drugs and/or alcohol as defined with the Drugs and Alcohol Standard (NR/L2/OHS/00120).
- 1.4 Employees who disclose a drugs and/or alcohol misuse concern must still comply with the Drugs and Alcohol Standard (NR/L2/OHS/00120) and must not attend the workplace under the influence of drugs or alcohol, or with drugs and alcohol in their system. Employees should report as sickness absence to prevent risk to self and others, where there is a risk they will attend the workplace with drugs or alcohol in their system. Failure to adhere to the Drug and Alcohol standard will result in disciplinary action. Where an employee appears under the influence at work, for-cause testing will apply.

2. Scope

- 2.1 This guidance document only applies to Network Rail employees. Contractors, agency staff and other third parties who work with Network Rail should seek support via their own occupational health provision.
- 2.2 DASP has not been developed to dictate what Network Rail employees do within their time away from work, unless the consequences of actions away from work causes them to be a safety risk when in the workplace, such as having drugs or alcohol in their system whilst at work.

3. Eligibility

- 3.1 This DASP applies to employees who have voluntarily disclosed to their manager that they have a drugs and/or alcohol misuse concern, and where this disclosure has not been made in consequence or anticipation of for-cause, random, post-incident, or any other agreed testing procedures for drugs and/or alcohol outlined within Network Rails Drugs and Alcohol Standard (NR/L2/OHS/00120).
- 3.2 Where an employee contacts the Employee Assistance Programme (EAP) and a drugs or alcohol misuse concern is discussed, should the employee provide consent for their manager to be informed of this disclosure, this will be treated as voluntary disclosure

and DASP will be offered.

- 3.3 The company's DASP will not be provided where a concern about an employee is raised by someone other than the employee or EAP, for example through 'Speak Out'.

NOTE: In such circumstances that a manager becomes aware of an employee's drugs and/or alcohol misuse concern via a third party, outside of that defined within clause 3.2, for example a concerned colleague or 'speak out' the employee may be for-cause tested in line with the Drugs and Alcohol Standard (NR/L2/OHS/00120).

- 3.4 Following disclosure of a drugs and/or alcohol concern, an employee will be required to sign a 'Declaration of commitment' document- Appendix C, to access support of the programme.
- 3.5 Network Rails DASP has been developed to offer support for employees who disclose drugs and/or alcohol misuse concerns. It does not provide rehabilitation services to employees who should discuss, where appropriate, such services with their GP.
- 3.6 Where occupational health reviews an employee and conclude that the employee does **not** have drugs or alcohol misuse, the employee will fall out of the scope of DASP and DASP will not apply. In such circumstances, support can be sought by the employee within the standard EAP offerings.

4 Informing the company of a drugs and/or alcohol misuse concern

- 4.0.1 Where an employee wants to disclose a drugs and/or alcohol misuse concern or feels that they may have drugs or alcohol in their system, they should speak to their line manager when they are not at a workplace, and whilst they are not working or in the duty of the company. For example, by calling their line manager from home or a site that is not their workplace, or, by contacting the company's EAP and requesting their help in disclosing they have a problem. The EAP is a confidential service and therefore employees will need to provide the EAP with consent to contact the company.
- 4.0.2 Where an employee believes that they are not under the influence of drugs or alcohol and that they do not have drugs or alcohol in their system, a declaration may be made whilst at work. However, the manager should initiate a for-cause test to review the risk of the individual working, as per clause 4.0.3.
- 4.0.3 Where an employee discloses a drugs and/or alcohol misuse concern after commencing work, or during working hours, the responsible manager should initiate a for-cause test to assess risk and determine a fitness to work decision. The for-cause test will be completed on the grounds of there being a reasonable possibility that the employee may be under the influence of drugs and/or alcohol whilst at work, due to the disclosure.

- 4.0.4 Any refusals, or positive for-cause tests will be managed as per the Drug and Alcohol Standard (NR/L2/OHS/00120), will be investigated, and may result in disciplinary action and a sentinel suspension.

4.1 Not Reporting to Work when under the influence

4.1.1 Employees must not report to work or attend a Network Rail site/ location if there is a chance that they have any drugs and/or alcohol within them, even where a drugs and/or alcohol misuse concern has been declared. Where this may be the case, employees should go on sickness leave and report their absence to their line manager in line with the normal absence reporting process. Where an employee is suspected of being under the influence of drugs and/or alcohol, or suspected to be unfit in any way, a for-cause drugs and alcohol test may be undertaken. Employees are advised to note that some drugs can take several days to come out of an individual's system, and therefore drugs tests may show positive results for several days after the last drugs usage. See Appendix B- The half-life of drugs currently listed in the Network rail testing panel.

NOTE: Sickness absence processes have been deemed as providing individuals with the most structured support whilst absent from work. It is strongly advised that employees should call in on sickness leave if there is any chance that they may have drugs or alcohol in their system, before any disclosure of drugs or alcohol misuse is made, to avoid being for-cause tested for attending a Network Rail site or location with the risk of having drugs or alcohol in their system.

4.2 Return to Work and 'Voluntary Active Monitoring'

- 4.2.1 Voluntary active monitoring tests can be used as a supportive tool to test an employee that is absent from work for drugs and alcohol. Employees are only eligible for a voluntary active monitoring test when absent from work.
- 4.2.2 Where an employee is absent from work due to a drugs and/or alcohol misuse concern, the manager should offer a voluntary active monitoring drugs and/or alcohol test to the employee prior to any return to work, to assess and manage the risk of the employee returning to work safely.
- 4.2.3 Employees can be asked to attend their nearest Network Rail site to complete a voluntary active monitoring test. The responsible manager should arrange the test at the employee's closest Network Rail site to the employee's home address.
- 4.2.4 Transport arrangements may need to be made for the employee to ensure that they can attend the site safely. In such circumstances, employees will be required to confirm the address they are to be collected from and cooperate with all reasonable logistical arrangements, including any third-party transport provider.
- 4.2.5 Voluntary active monitoring drugs and alcohol tests are voluntary, and employees may decline to be tested. Should an employee decline a voluntary active monitoring test, but express a wish to return to work, they are advised to remain on sickness leave until they are reviewed by occupational health

professional and a fitness for work opinion has been provided to the business. Employees may receive headline pay, where it is Network Rail insisting on an occupational health report.

- 4.2.6 Employees will not be subject to any disciplinary action where they decline to undergo a voluntary active monitoring drugs and alcohol test. However, for-cause testing may be used if the employee attends any workplace and commences work.
- 4.2.7 Where a voluntary active monitoring drugs and alcohol test results in a positive test result, no disciplinary action will be taken against the employee, subject to the employee meeting all the following criteria:
- The employee is absent from work at the time of the test.
 - The employee voluntarily disclosed that they have a drugs and/or alcohol misuse concern, and the disclosure was not made in consequence or anticipation of for-cause, random, post-incident, or any other agreed testing procedures for drugs and/or alcohol outlined within Network Rails Drug and Alcohol Standard (NR/L2/OHS/00120).
 - The employee has been asked to undergo a drugs and/or alcohol test to assist the manager in making a fitness for work decision.
 - Where applicable, the employee's attendance at a Network Rail site/ location was only for the purpose of undergoing a voluntary active monitoring drugs and/or alcohol test, requested by a manager or occupational health.
 - The employee did not attend a Network Rail site/location and commence work.
- 4.2.8 When an employee attends a site to have a voluntary active monitoring drugs and alcohol test, including a Network Rail site, they will be required to sign in as visitors, must be supervised throughout their visit and may not engage in any activities other than taking the test. Where the test is being carried out at a Network Rail site, in the interests of safety- meetings, briefings, consultations or other work and social activities should be conducted at an alternative time.
- 4.2.9 Voluntary active monitoring test results will be uploaded onto the employee's sentinel profile by occupational health, for both safety critical, and non-safety critical staff.
- 4.2.10 Where occupational health or a clinical professional has deemed an employee unfit for work, managers are advised not to allow an employee to work, without first seeking advice from HR. The employee will be required to stay on sickness absence and a medical fit note will be required from day 8 of absence.

4.3 Return to work and other required monitoring tests

4.3.1 Mandatory drugs and alcohol testing, is compulsory testing employees are required to take whilst at work, following a drugs or alcohol misuse disclosure. On commencement of work, employees will be actively monitored, for a period of up to 12 months.

4.3.2 Managers should initiate mandatory active monitoring tests on employees who return to work after disclosing a drugs and/or alcohol misuse concern, unless advised in

writing by occupational health, that the employee does **not** have drugs or alcohol misuse.

- 4.3.3 Wherever possible, the manager will seek guidance from occupational health and/or the employees treating clinician to define the frequency of the mandatory active monitoring process.
- 4.3.4 Where Occupational Health are unable to advise on frequency of testing, it is recommended that mandatory active monitoring tests follow the frequency of twice weekly for 8 weeks, weekly for 8 weeks, fortnightly for 8 weeks and monthly thereafter.
- 4.3.5 Any refusals, or positive mandatory active monitoring tests will be investigated and may result in disciplinary action and a sentinel suspension.
- 4.3.6 If an employee is working from home the responsible manager shall arrange mandatory active monitoring tests at the employee's closest Network Rail site to the employee's home address. The responsible manager shall arrange safe transport, independent of Network Rail, for the employee to and from the location for the test. In such circumstances, employees will be required to confirm the address they are to be collected from and cooperate with all reasonable logistical arrangements, including any third-party transport provider.
- 4.3.7 Employees may still be tested under other applicable testing types of the Drugs and Alcohol Standard (NR/L2/OHS/00120) whilst undergoing mandatory active monitoring.
- 4.3.8 Mandatory active monitoring test results will be uploaded onto the employee's sentinel profile by occupational health, for both safety critical, and non-safety critical staff.

4.4 Restricting or changing employees' duties

- 4.4.1 The manager will risk assess the employee's contracted role alongside the disclosed drugs and/or alcohol misuse concern to determine whether temporary restricted duties, temporary local redeployment or any other workplace adjustments are required on the grounds of risk, or health. Where possible, occupational health advice should always be obtained to support any decisions made. Where an employee refuses occupational health support, a case should be opened with HR.
- 4.4.2 When indicated and when operationally feasible, the manager shall temporarily restrict the employees' duties, temporarily locally redeploy employees working in safety critical roles to a non-safety critical role and provide the employee with workplace adjustments as recommended by occupational health, to ensure support and structure for the employee, whilst maintaining abidance to Network Rails Life Saving Rules. Where the manager requires guidance to do this, or where the manager feels that required/recommended adjustments, redeployment or restrictions are not operationally feasible, a case can be opened with HR.

- 4.4.3 Where it is not possible or operationally feasible to provide workplace adjustments, temporarily locally redeploy an employee, or adequately restrict their duties to abide by Network Rails Life Saving Rules and enable them to continue working, a case should be opened with HR and employees may be managed via the appropriate sickness absence procedures.

4.5 Restricting an employee from driving

- 4.5.1 Employees should not be allowed to drive Company owned or leased vehicles or drive on behalf of the company following a drugs or alcohol misuse disclosure, until written confirmation on fitness to drive is provided by either occupational health, the DVLA, the employees GP/Treating clinician (External) and/or other relevant licencing authority.

5 Drugs and Alcohol Support Process

5.1 Discussing an Employee's concern following a disclosure

- 5.1.1 After an employee has disclosed that they may have a drugs and alcohol misuse problem, the manager should invite the employee to a face-to-face meeting to discuss the disclosure and the support the company can provide to the employee. The manager should ensure that the employee can safely travel to and attend the meeting. Where it is not safe for the employee to attend a face-to-face meeting, a telephone meeting can be conducted.
- 5.1.2 For support purposes, the manager shall allow the employee the option to be accompanied to the meeting, by a work colleague or trade union representative.
- 5.1.3 The manager should conduct the meeting, covering the below criteria:
- Discuss the disclosure made by the employee
 - Identify and discuss what support is available to the employee
 - Where applicable, assess any risks to safety and possible implications on the employee's performance at work
 - Identify whether any further actions are required
 - Discuss with the employee whether they feel that there is a risk they may come to work with drugs and/or alcohol in their system due to their current usage, and support them in a decision on whether sickness absence is required
 - Discuss and sign the 'Declaration of Commitment' with the employee
 - Provide the employee with Appendix D- 'Colleague information sheet; what to expect after disclosure'.
 - Get consent to refer the employee for an occupational health assessment
 - If the employee would like counselling support, get consent to refer the employee to EAP+ for counselling once they have signed the declaration of

commitment.

5.1.4 Employees will not be eligible for support under DASP until the declaration of commitment is signed. Where an employee requests time to consider whether they would like to sign the declaration of commitment, the manager should allow them time to do so. If the employee believes there is a chance, they may attend the workplace under the influence of drugs or alcohol, or with drugs or alcohol in their system, they may choose to go on sickness absence. The employee will not be eligible for voluntary active monitoring or EAP+ counselling unless the declaration of commitment is signed. Managers should follow Section 4.3- Return to work and other required monitoring tests, on the employee commencing work. If a manager suspects an employee is under the influence, for-cause testing should be carried out.

5.2 Obtaining Occupation Advice and Support

5.2.1 The manager will need to gain informed consent from the employee to refer them to Network Rail's occupational health provision, for an assessment with an occupational health physician (OHP). An OH referral for drugs and or alcohol support will need to be completed via a specialist referral. Within the occupational health referral, the line manager is required to:

- Clearly identify the referral is for substance misuse following the employee's declaration
- Request guidance on the employees' fitness for role
- Outline the duties and responsibilities undertaken by the employee and seek guidance on whether alternative duties are advised
- Reference whether alternative duties are operationally feasible/ reasonably practicable
- Request guidance on the likely prognosis of the misuse
- Request guidance on whether the employee will require a 'weaning off period' from the substance used
- Request guidance from the OHP on the required time needed for the employee to show a negative drugs and/or alcohol test based on the severity of the employee's drugs and/or alcohol misuse, rehabilitation requirements if required and likely timeframes.
- Management should also outline any further questions they wish for clinical input on to assist with supporting and managing the employee

5.2.2 Where an employee refuses or does not provide informed consent to be referred to occupational health, reviewed by occupational health, or a report to be issued to the manager, guidance should be sought from HR and support under DASP withdrawn.

5.3 Occupational health advice and reports under DASP

5.3.1 The employee will be required to attend an initial occupational health appointment with an OHP and where relevant, follow up assessments with a clinical professional to assess fitness for work. Consideration should be made for the safe transport of the employee to all occupational health appointments, where a face-to-face appointment is required.

5.3.2 In general, occupational health:

- Will offer the employee a clinical assessment to determine the circumstance, background, recommendations for treatment and prognosis of the alcohol and/or drugs concerns. The assessment will also identify local NHS and/or other treatment options available to the employee where clinically indicated.
- Will complete a holistic assessment on the employee and may use medical assessment questionnaires recommended by The National Institute for Health and Care Excellence (NICE) to assist in assessing the severity of the drugs and/or alcohol misuse concerns disclosed.
- Will consider the combined findings of the medical assessment questionnaires and general medical assessments to determine fitness for work and signpost to relevant support services.
- May, with employee consent, request further medical evidence (FME) from external professionals to support their assessments.
- May, with employee consent and where clinically indicated, request the employee provides baseline blood tests for assessment and monitoring of alcoholism.
- Will provide reports to Network Rail, detailing an unbiased and independent clinical opinion on the employees' misuse concern/s being assessed.

5.3.3 Occupational health reports, with the employees informed consent, will in general be provided to Network Rail following each clinical assessment. The content of these reports may include:

- An opinion on fitness for work
- Whether substance misuse has been identified during assessment
- Workplace adjustments or restrictions for the manager to consider
- Details on the most appropriate clinical support for the employee
- Employee progression and compliance with external treatment and rehabilitation, where applicable.
- Likely prognosis of the misuse concern
- Whether the employee will be required to 'wean' off a substance or go abstinent.
- Whether further occupational health reviews are required.
- A time for the employee to show a negative drugs and/or alcohol test based on the severity of the employee's drugs and/or alcohol misuse, rehabilitation requirements if required and likely timeframes.

- 5.3.4 Reports may include information outside of that defined within Clause 5.3.3, though employee consent will **always** be obtained by occupational health, to release clinical information to Network Rail.
- 5.3.5 In exceptional circumstances, when advised by occupational health and the expenditure has been pre- approved by the region/functional budget holder, rehabilitation and/or treatment services may be offered to an employee through occupational health. This would fall out of the scope of DASP and would be a local agreement.

5.4 Employee Assistance Programme (EAP) support under DASP

- 5.4.1 Once the employee has signed the 'declaration of commitment' - Appendix C. the manager should refer the employee for support via Network Rail's 'EAP+' provision for specialist drugs and/or alcohol misuse counselling. Managers request the EAP+ service for drugs and/or alcohol support within the referral form. The referral to EAP+ will require authorisation from the manager, in the form of a purchase order (PO).
- 5.4.2 In general, EAP+ support will:
- Provide an initial, in-depth clinical assessment of the employee's misuse support needs, including any relevant presenting issues, indications of risk to self and others, psychosocial stressors experienced, treatment history, coping strategies, social support, work issues, relevant current life situations and family history of misuse.
 - Use medical assessment questionnaires recommended by The National Institute for Health and Care Excellence (NICE) to assist in assessing the severity of the drugs and/or alcohol misuse concerns disclosed.
 - Explore in depth, the employee's dependency issues, looking at history, changes in use and triggers
 - If deemed clinically appropriate, will offer the employee up to 12 sessions of counselling support, delivered virtually on a weekly basis to support abstinence or reduction of a substance, teaching the employee coping techniques for long-term behavioural change. Only one course of counselling will be offered via EAP+, per employee, in any rolling 12-month period, unless otherwise agreed by Network Rail whereby sessions may be extended.
- 5.4.3 With employees' consent, EAP+ will provide reports to the manager following the initial assessment and after the 6th and 12th counselling session, outlining:
- The most appropriate support recommended for the employee
 - The employee's progression and compliance with counselling sessions.
- 5.4.4 If drugs and/or alcohol misuse is not identified during EAP+'s initial assessment, the case will be closed with EAP, and a management report shall be issued.

5.4.5 Where an employee refuses support via EAP, the case will be closed with EAP.

5.4.6 On closing the case or discharging the employee after completion of counselling, with employee consent, EAP+ will cross-refer to Network Rails occupational health provision for a fitness for work assessment. Where consent is given by the employee, EAP+ will provide occupational health with a discharge summary.

5.5 Employee Self-Referral to EAP for Support

5.5.1 Employees cannot access specialist counselling for drugs or alcohol misuse via self-referral to EAP.

5.5.2 Employees can access short term, interim support via EAP in line with Network Rails standard EAP offerings to all employees, outside of the offerings of DASP.

5.5.3 Where an employee informs EAP of a drugs and/or alcohol misuse concern:

- where the employee does not provide consent for disclosure to the manager
and
- where clinical assessments shows risk to the safety of the employee, colleagues, or passengers whilst at work EAP may whistle blow to 'Speak Out'.

5.5.4 When clinically indicated and with employee informed consent, EAP may cross-refer an employee to Network Rails occupational health provision for further clinical assessment and support. The manager will have to provide consent for the cross-referral.

5.6 Interim Support for Employees

5.6.1 Employees must not attend the workplace under the influence of drugs or alcohol, or with drugs or alcohol in their system, where an employee appears under the influence at work, for-cause testing will apply.

5.6.2 The manager should have regular wellbeing meetings with the employee to review ongoing risk and provide support. The frequency of these meetings will be determined by the manager, and where applicable HR, supported by the content of occupational health reports. As a minimum, the manager will initiate wellbeing meetings after receiving each occupational health report, for both the initial occupational health assessment and any follow up assessments completed.

6 Management support during DASP

6.1 The manager may open a case or raise a query with HR for further support in managing an employee.

- 6.2 A HR Direct case should be created for any ongoing sickness absence issues and for any drugs or alcohol test failures, other than failed tests for voluntary active monitoring, as detailed within Section 4.2- Return to Work and 'Voluntary Active Monitoring'.
- 6.3 If an employee is found to have a drugs and/or alcohol misuse issue during an occupational health or EAP assessment, case conferences can be requested by the employee's manager with occupational health and/or EAP to discuss the employee's fitness for work and support. Members of the HR team may attend Case Conferences as optional attendees where necessary.
- 6.4 When appropriate and where the employee is seeking external support such as those provided by charities or primary care services, consent can be requested from the employee by occupational health, EAP or Network Rail, to liaise with external services, to facilitate and support the employee through the agreed external rehabilitation programme, as far as operationally feasible.
- 6.5 Network Rail reserve the right to seek advice from occupational health at any point should further clinical guidance be needed to support the appropriate managing of an employee's misuse in the workplace.
- 6.6 Further support documents and information can be found on MyConnect: [Drugs and Alcohol \(sharepoint.com\)](#)

7 Case closure, withdrawal of DASP and employee reinstatement into safety critical roles

- 7.1 The DASP will primarily be managed by the line manager, with support from occupational health and process flows outlined within the Drugs and Alcohol Standard (NR/L2/OHS/00120) and DASP document.
- 7.2 Occupational health and EAP will normally close a case when:
- A drugs and/or alcohol misuse is not identified during an initial assessment.
 - support is declined by the employee.
 - A support pathway has been completed and the employee has returned to work
- 7.3 HR Direct cases will close following an employee returning to work on full duties, or on conclusion of investigations for failed test results. HR Direct cases will not stay open for the duration of the DASP, unless there is a business need.
- 7.4 An employee may be reinstated into a safety critical role following a drugs and/or alcohol disclosure only when **all** the below have been satisfied:

- Written confirmation of fitness for the substantive role has been provided by occupational health, or, a treating clinician, or a GP aware of the individuals raised substance misuse.

and

- The mandatory active monitoring process has been initiated as per Section 4.3- Return to work and other required monitoring tests

and

- The employee has received a negative drugs and/or alcohol test reflective of the substance disclosure made.

and

- Where the role requires the employee to drive a vehicle on behalf of the company, written confirmation on fitness to drive has been provided by either occupational health, the DVLA, GP/Treating clinician (External) or other relevant licencing authority

7.5 Mandatory active monitoring may continue to be implemented after an employee has been reinstated into their substantive role and after cases have been closed with occupational health, EAP or HR.

7.6 In circumstances where an employee has declared a drugs and/or alcohol misuse concern and has refused clinical professional involvement, reinstatement into a role will be at the discretion of the employee's line manager and HR, without the benefit of clinical advice.

7.7 The manager may withdraw support under DASP:

- If Network Rail are not satisfied that an employee is making every effort to overcome their drug and/or alcohol misuse.
- On completion of a support pathway, unless explicitly pre-agreed by Network Rail that further support sessions will be offered.
- Should an employee fail to attend two or more occupational health appointments or management support meetings without reasonable cause.
- Should the employee withdraw from an agreed support pathway at any point once initiated.

8. Confidentiality and Records

8.1 Results of active monitoring drugs and alcohol testing shall only be reported to those that have a lawful and legitimate reason to be provided with such information. For example:

- a) the person that was tested;
- b) responsible managers/supervisors;
- c) those leading investigations and disciplinary proceedings;
- d) members of Human Resources, and the Network Rail Health and Wellbeing teams;
- e) Network Rail Shared Services;

f) Sentinel Scheme managers

NOTE: The results of active monitoring drugs and alcohol tests are provided to those leading investigations, for consideration of any influence on the possible causes of the event.

8.2 The results of active monitoring may be shared, where advice and guidance are sought in supporting the employee or investigating the case, and this could include external occupational health providers, legal advisers, HR services or other employment relations advisers.

8.3 The employee's consent shall be obtained prior to other confidential medical details being shared.

8.4 A breach of confidentiality shall be reported to the Network Rail Data Protection Officer and be regarded as a disciplinary offence; and investigated accordingly.

8.5 Immediately following a non-negative drugs result or a positive alcohol breath test from a mandatory active monitoring drugs and alcohol test, the responsible point of contact on-site can be informed to safeguard the employee and make sure their line manager/a responsible manager is contacted by the collection officer.

8.6 The medical provider shall record all drugs and alcohol test results, including refusals, on the Sentinel database which is accessible to the Managers of the Sentinel Scheme.

8.7 The medical provider shall maintain all health records, reports and clinical notes confidentiality, and consent will always need to be given by the employee to share information to Network Rail. Health information will be kept by the medical provider for duration of employment and a minimum 6 years from the date of testing.

8.8 The employer and medical provider shall maintain all drugs and alcohol certificates and test results for duration of employment and a minimum 6 years from the date of testing.

8.9 Network Rail shall maintain all signed 'declaration of commitment' documents for the duration of employment and a minimum 6 years from the date of signing.

8.10 These records shall be stored securely and shall only be accessed by authorised personnel when making decisions about employment, the occupational health and wellbeing of employees, disciplinary matters and any other matter related to safety.

NOTE: See Drugs and Alcohol Standard (NR/L2/OHS/00120) Privacy Policy

9. External support contacts

9.1 Employees can obtain public support with drugs and alcohol misuse outside of DASP, by:

- Contacting their GP

- Visiting their local NHS drugs and alcohol service
- Contacting a specialist drugs and alcohol organisation

9.2 The availability of drugs and alcohol support services may differ significantly depending on the area of the country an individual lives in, though both the NHS and the independent drugs charity FRANK, have web pages that enables the public to check for local support available:

Search local support for alcohol misuse	Find alcohol addiction support services - NHS (www.nhs.uk)
Search local support for drugs misuse	Find support near you FRANK (talktofrank.com)

9.3 Support for drugs and alcohol misuse is also available via self-help groups, such as Alcoholics Anonymous (AA), or Narcotics Anonymous:

Search for local AA support groups	Alcoholics Anonymous Great Britain (alcoholics-anonymous.org.uk)
Search for local Narcotics Anonymous groups:	Welcome UKNA Meetings Narcotics Anonymous Meetings in the United Kingdom

9.4. Adfam provide links for useful organisations that support drugs and alcohol misuse, providing useful links for specialist substance misuse areas. They also offer support to families of those suffering from substance misuse.

Useful organisations and family support	Useful organisations Adfam
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APPENDIX A- Definitions

Term	Definition
Drugs	A substance that, when taken into the body, is capable of affecting mental or physical performance. This can include prescribed, non-prescribed and illicit substances.
Employee Assistance Programme (EAP)	A confidential service for information, advice and counselling, available to employees free of charge.
Further medical evidence	Further information in the form of a medical report, which may be requested from an employee's GP, specialist or treating clinician, with their 'informed consent'.
Informed consent	Consent to a procedure, freely given following a full explanation and granted in full knowledge of the possible risks and benefits.
Misuse	The use of alcohol and/or drugs taken against the law, against government health guidelines, or against medical recommendations for dosage, intervals, or amounts. This encompasses taking prescription medications not prescribed for you.
Occupational Health Physician (OHP)	A registered doctor with qualifications in occupational health
Occupational Health Provider (OH)	An approved occupational health service supplier, qualified through Rail Industry Supplier Qualification Scheme (RISQS), which carries out medical assessments and/or drugs and alcohol testing.
At work	Any time when a person is being paid and is 'on duty', regardless of location, including periods of paid 'on call' duties. Attendance at evening functions, periods of free time at the end of a training day within residential courses, etc., are not generally considered to be time at work for these purposes
Workplace	A workplace is any place where an employee, contractor or any other worker may be expected to work which could include depots, signal boxes or centres and training centres and events.
Rehabilitation service	Active treatment for addiction or misuse, for example, medications
Mandatory active monitoring	A mandatory drugs and alcohol testing regime, completed after a drugs and/or alcohol misuse disclosure whilst at employee is at work.
Voluntary active monitoring	A voluntary drugs and alcohol test taken whilst an employee is absent from work.

APPENDIX B-

The half-life of drugs currently listed in the Network rail testing panel.

The table below provides an approximate estimate of the speed of metabolism of those drugs listed on the Network Rail testing panel. It should be noted that the metabolism of drugs will vary significantly between individuals and the time at which the drug was administered.

Height, weight, metabolism, amount of drug taken, and frequency of drug taken will all impact the timescales that drugs may show up on a drug test. The timescales below indicate how long it may take for the drugs to reduce its levels in the body by half. It is not possible to determine when a drug has been first taken, or when the drug will not show up on a drugs test, as the time and concentration of the initial dose will be unknown. Metabolic rate also varies significantly between individuals.

Table 2. The half-life of drugs currently listed in the Network rail testing panel.

Drug/Metabolite	Drug half-life
Amphetamines	Ten hours ¹
Methamphetamines	11.1 hours ¹
MDMA (Ecstasy)	Eight hours ²
Benzodiazepines	Short-acting 1 to 11 hours Medium acting 12-40 hours Long-acting 40 to 250 hours ³
Cannabis	1.3 to 1.4 days ⁴
Cocaine	4.1 hours ⁵
Ketamine	2 to 3 hours ⁶
Methadone	15 to 55 hours ⁷
Opiates	2 to 4 hours ⁸
Tramadol	6.3 to 7.4 hours ⁹

** Superscript numbers refer to references.

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APPENDIX C- Declaration of Commitment

Recipient
 Address 1
 Address 2
 City
 Post Code

Network Rail
 Address 1
 Address 2
 City
 Post Code
 T (Your telephone number)

Date:

Reference: *(insert HR Direct case number if applicable)*

Employee name:	Employee number:	Sentinel number (if applicable):	Work location:
Job role:	Date:	Name of manager completing:	
Date of declaration:			

Employee to review and complete the below:

I confirm that:

- I have disclosed a drug/s *and/or* alcohol (delete as appropriate) misuse concern to my manager
- I have read and understand the requirements set out in the DASP Guidance Document and have had an opportunity to discuss this with my manager
- I have been provided with, and read, the colleague information sheet; what to expect after disclosure (Appendix D)
- I have read and understood Network Rail’s Drugs and Alcohol Standard. (NR/L2/OHS/00120)
- I understand that I must conduct myself in accordance with the Drugs and Alcohol Standard (NR/L2/OHS/00120), and must never work, report to work or drive whilst under the influence of drugs or alcohol, or with drugs or alcohol in my system.
- I understand that the company takes a zero-tolerance approach to drugs and low-tolerance approach too alcohol, and therefore any employee who breaches the company’s Drugs and Alcohol Standard (NR/L2/OHS/00120) may be liable to disciplinary action up to and including dismissal.
- As specified in the DASP guidance document, I agree to comply with mandatory active monitoring tests for drug/s *and/or* alcohol (delete as appropriate). I understand that this may be for a period of up to 12 months once initiated.

- I understand that failure to adhere to mandatory active monitoring tests may result in disciplinary action.
- I understand that I must attend Occupational Health appointments
- I consent to my manager referring me for occupational health support.
- I understand that where I consent to occupational health assessments and appointments occupational health will provide my manager with a report after each assessment.
- I agree to comply with the agreed support pathway with occupational health and EAP
- I am aware that I can voluntarily withdraw from the company’s DASP at any time and this decision would close the programme of support. I understand that mandatory active monitoring tests would continue, as well as, where relevant, all other testing types outlined within Network Rails Drug and Alcohol Standard (NR/L2/OHS/00120) and reasonably required.
- I agree to not drive a motorised vehicle, operate equipment, or undertake any safety-critical work for or on behalf of Network Rail until formally approved to do so by a healthcare professional and/or the DVLA together with the Network Rail’s Occupational Health team and evidence of this must be provided to my manager.
- I understand my legal obligations are to not drive a vehicle under the influence of drugs and/or alcohol and am aware that I must inform the DVLA of substance misuse concerns.
- I understand that personal sensitive data will be created, stored, and processed to enable Network Rail to support and manage my misuse of drugs and alcohol, and agree for my data can be stored, accessed and processed in compliance with GDPR.

Signed by:

Employee Signature:.....
 Date:.....

Manager Signature:.....
 Date:.....

Please confirm a copy of this has been sent to the below: (Please tick)

- Copy to employee []
 Date:
- Copy to line manager []
 Date:
- Copy to Employee Records (Team EmployeeRecords@networkrail.co.uk) []
 Date:

APPENDIX D - Colleague information sheet: what to expect after disclosure

So, you have told your manager or contacted our Employee Assistance Programme (EAP) to let them know that you have an issue with drugs and/or alcohol. It's a big step. And of course, you want to know what happens now you've done this.

Thank you for disclosing your misuse concerns- looking after yourself, your colleagues, our passengers and helping to keep everyone safer.

In this document, we will cover the following (and a lot more):

- Our approach to support
- Support available
- Drug and Alcohol testing
- Commencing work after a disclosure
- When support may be withdrawn
- External support services

We're not going to apologise for it being a long document – we want to make sure you have as much information as possible. So read the sections that apply to you, and please do contact your manager or EAP if you have any questions.

Our approach

Network Rail will provide access to support as outlined in this document and other supporting materials.

As we want to help get personalised support for you and your supporting manager, we will refer you to our Occupational Health provider who can support you through your journey.

Safety is key throughout

Please remember that you are still bound by the same rules of conduct which apply to all Network Rail colleagues, including that of the Drugs and Alcohol Standard (NR/L2OHS00120), and must not be under the influence of drugs and/or alcohol whilst at work, or have drugs or alcohol in your system, under any circumstances.

Call in sick if you need to

To allow us to continue supporting you, if you have any concerns that you may be under the influence of drugs and/or alcohol in the workplace or believe that you may have drugs or alcohol in your system whilst at work (, drugs may stay in your system for several days after taking them), you should not attend the workplace and should call in sick- your absence will then be treated as a medical absence.

GPs can be a source of support too

We would advise, if you have not already done so, that you arrange an appointment with your own GP to inform them of your alcohol and/or drug concerns and to undergo a review for any medical support that can be offered to you. Network Rail will give you time off to attend this appointment, where confirmation of the appointment is provided and when pre-agreed.

In addition, if you seek treatment from external agencies which requires absence from work, where pre-agreed by Network Rail and confirmation of appointments are provided, you will be entitled to paid leave to attend such appointments.

Support available

Our Drug and Alcohol Support Programme (DASP) has been developed to offer support if you have a mild to moderate drug and alcohol misuse issue. This will be assessed by Occupational Health or EAP, who will ask you lots of questions to determine the most appropriate support for your needs.

DASP is not a rehabilitation programme and does not offer medical treatment for drugs or alcohol addiction, such as detox, medications, or inpatient hospital stays which may be required for severe misuse or addiction.

Once you have declared and signed the 'declaration of commitment' document, you will be able to access:

1. voluntary active monitoring tests
2. occupational health support with a physician
3. a course of specialist counselling, with a counsellor experienced in drug and alcohol misuse.

1. Voluntary active monitoring

What is this?

Voluntary active monitoring is a voluntary drugs and alcohol test. It is carried out whilst you are absent from work (sickness, holiday leave etc). It is voluntary because even if you are asked to take the test, it is up to you whether you would like to do one or not.

When can I take a voluntary active monitoring test?

Managers can only initiate this test whilst you are absent from work, to check for drugs or alcohol in your system before you return to work. It cannot be offered whilst you are at work – because if you even suspect you could have drugs or alcohol in your system, and may test positive, you should not attend work.

How does this support me?

Voluntary active monitoring has been set up to support you, your manager and occupational health in enabling you to return to work safely and in adherence to the D&A standard. This test means you will know if you have any residue substances in your system, that could be picked up on a test whilst at work. (Remember some substances can stay in your system for days.)

What are the consequences of not completing a voluntary test?

Refusal to complete a voluntary test will not result in disciplinary. Any positive drug and/or alcohol tests completed under voluntary active monitoring will not result in disciplinary. Please do use this support if you suspect you still have a drug or alcohol substance in your system, before returning to work.

How can I arrange the test?

It is for your manager to arrange any drugs or alcohol testing, so please contact your manager if you feel you need a voluntary test. Remember, you must be absent from work due to drug or alcohol concerns, to be eligible for a voluntary test.

How is the test conducted?

To conduct the test, as you will be absent from work, you will be required to sign in as a visitor to the agreed network rail site/ clinic and will be supervised throughout your visit. You must not engage in any activities other than taking the test. In the interests of safety- meetings, briefings, consultations or other work and social activities should be conducted at an alternative time.

Your manager can support you with advice regarding a return to work after a voluntary active monitoring test, following Network Rails DASP document.

2. Occupational health support with a physician

What is occupational health?

Occupational health is a confidential service that complete unbiased and independent clinical assessments on our colleagues.

After each occupational health assessment, the clinical professional who you discussed your drug and alcohol misuse with, will provide your manager with a report outlining a clinical opinion on your fitness for work and may suggest supportive adjustments/ restrictions required to keep you healthy and safe in the workplace.

Is the service confidential?

Yes. Consent will be required from you before any clinical opinion or report is sent to your manager.

What if consent is refused?

If you refuse to allow occupational health to give a report to your manager, your manager may inform HR about it, this is as it may be difficult for your manager to support you at work without the benefit of a clinical professionals' opinion.

What do I need to do?

We ask that you attend occupational health for at least one initial assessment, though several may be required.

What will the assessment include?

This process will, in general, include an assessment with an occupational health physician (OHP), the OHP will determine your current fitness for work and provide guidance to you and your manager on any required adjustments or restrictions to your role. Examples may be allowing you time to attend support meetings, or, temporarily removing you from safety critical work etc

Who will see information about me?

Data and information sharing will only be done with your consent and discussed with you in advance. At intervals through the support programme, with your consent, occupational health may request report/s from your GP or any supporting third parties to see how you are progressing through external treatment or rehabilitation pathways.

These reports may include information on fitness for work, alongside information on support or care provisions that are considered desirable for your recovery. Any information requested will only relate to the disclosed drug and/or alcohol misuse concern. It will be processed and maintained confidentially within the remits of the General Data Protection Regulations 2018. Any request for information will be discussed with you first.

3. A course of specialist counselling, with a counsellor experienced in drug and alcohol misuse- delivered by EAP+

What happens after the assessment?

With your consent, your manager will refer you to Network Rails EAP+ service for confidential counselling, EAP+ will assess the severity of your drugs and/or alcohol misuse to review whether you would benefit from the counselling. If they think you would, you will receive up to twelve, one hour counselling sessions with a registered and trained drugs and alcohol misuse professional. (These sessions may be extended on pre-approval and authorisation of Network Rail, should occupational health deem this to be required.)

What if counselling is not considered to be enough for my needs?

If EAP+ counsellors deem that your misuse is too severe for counselling to be effective, they may advise that alternative treatment is required. They may refer you to, or advise you to contact, external rehabilitation and treatment services such as:

- Primary care services within the NHS, including your GP
- Private care services such as Bupa
- Drug and alcohol support charities

In exceptional circumstances and when pre-approved and authorised by Network Rail, rehabilitation and/or treatment services may be offered by Network Rail if advised by occupational health and financially agreed with the region.

What will happen at counselling sessions?

The counselling professional will ask you about yourself which will allow them to provide an initial, in-depth clinical assessment of your needs and current mental state. This will determine your suitability for the programme. Areas reviewed with you will include:

- any relevant wider presenting issues
- any indications of risk to self and others
- psychosocial stressors experienced
- treatment history
- coping strategies and social support
- work issues
- current life situation
- relevant family history.

The assessment will also explore in more depth your dependency issues; looking at history, changes in use, triggers and what has worked and not worked for you previously if you have tried to reduce or stop using alcohol and/or drugs before. This

personalised approach will be the foundation for the subsequent counselling.

What will happen next?

With consent, a report will be provided to the manager, giving a brief outline of the proposed support plan and any interventions your manager can conduct to support you. The counsellor will send reports, as a minimum, after your first EAP+ session, 6th session and 12th session.

How many sessions will I get?

Up to 12 sessions of support will be delivered virtually on a weekly basis.

How will these sessions help me?

The goal of the counselling is to guide and support you into learning skills that will help to maintain a change in your behaviour with alcohol and/or drug misuse. The approach for alcohol misuse will be either a reductionist or abstinence approach depending upon your individual usage. For drug misuse, a total abstinence approach will be used.

What happens after the counselling finishes?

The counsellor may at any time advise your manager that an occupational health review is required, but in general, you will be required to have a further occupational health assessment at the end of the 12-week support programme. With your consent, EAP will cross-refer you to occupational health for a review on discharging you from counselling.

Drug and Alcohol testing on a return to work

We want you to come back to work once it is safe for you and your colleagues.

To support you in complying with Network Rail's lifesaving rules and to make sure you are working safely whilst managing your drug and/or alcohol concern, you will be required to undergo drug and alcohol testing on your return to work.

Evidence shows that mandatory drug and alcohol testing on a return to work can support recovery. We call this 'mandatory active monitoring' and these tests are compulsory.

You will be tested for up to 12 months on your return to work, and your manager will wherever possible, seek the guidance of occupational health or your treating clinician on how frequently your mandatory active monitoring tests should be completed, to ensure that this is done fairly and tailored to your individual needs.

What are the consequences of refusing a test?

If you refuse a mandatory active monitoring test, or test positive, an investigation will be completed, and you may face disciplinary action and a sentinel ban.

Remember Voluntary active monitoring?

Where you feel that you may have drugs or alcohol in your system, you should not attend work. Remember, drugs can stay in your system for several days after taking a substance, if you believe you are at risk of attending the workplace with drugs and/or alcohol in your system, you should call in sick. Voluntary active monitoring has been

developed to support you returning to work safely.

Commencing work following a disclosure

Your manager will reinstate you into a safety critical role solely when **all** the below have been satisfied:

- Written confirmation of fitness for your full role has been provided by occupational health, a treating clinician, or, a GP aware of your substance misuse.
- and**
- When your manager has started the mandatory active monitoring process
- and**
- Where you have received a negative drug and/or alcohol test reflective of the substance disclosure you have made.
- and**
- Where your role requires you to drive a vehicle on behalf of work, written confirmation on fitness to drive has been provided by either occupational health, the DVLA, GP/Treating clinician (External) or other relevant licencing authority

When support may be withdrawn

Network Rail are committed to supporting you to overcome your drug and/or alcohol misuse. For everyone's safety including yours- there are some conditions in which support will be withdrawn:

- If Network Rail are not satisfied that you are making every effort to overcome your drug and/or alcohol misuse
- On completion of a support pathway, unless explicitly pre-agreed by Network Rail that further support sessions will be offered.
- Should you fail to attend two or more occupational health appointments or management support meetings without reasonable cause.
- Should you withdraw from an agreed support pathway at any point once initiated.

Will mandatory active monitoring continue, if support is withdrawn?

A regime of mandatory active monitoring tests will continue to be given, even where support has been withdrawn, to ensure the safety of you and your colleagues.

What if there is a wait to see an occupational health physician after I have disclosed my concern?

You should see an occupational health professional within 10 days of being referred; it is recommended that you remain absent from work until seen by occupational health, if you feel that you will attend work under the influence of drugs and/or alcohol or may have drugs or alcohol in your system.

In the interim between disclosing your drug and/or alcohol misuse concern to your manager and waiting to see occupational health, you can be referred by your manager to Network Rails EAP provision- this is a service providing confidential support and

advice to colleagues and managers, covering a large remit, including that of drugs and alcohol.

You can also contact Network Rails EAP provision privately, for confidential advice and support if needed.

What if I want to return to work before being seen by occupational health or a counsellor?

If you wish to return to work prior to being assessed by occupational health or a counsellor, you can undertake a voluntary active monitoring test whilst absent from work, to ensure that you are safe to return. It will be at your managers discretion and HR what duties you can complete, to ensure you and your colleagues are safe.

On returning to work, you will be commenced on mandatory active monitoring tests.

External support services

You can obtain public support with drugs and alcohol misuse outside of DASP, by:

- Contacting your GP
- Visiting your local NHS drugs and alcohol service
- Contacting a specialist drugs and alcohol organisation

The availability of drugs and alcohol support services may differ significantly depending on the area of the country you live in, though both the NHS and the independent drugs charity FRANK, have web pages that allows you to check for local support in your area:

Search local support for alcohol misuse	Find alcohol addiction support services - NHS (www.nhs.uk)
Search local support for drugs misuse	Find support near you FRANK (talktofrank.com)

Support for drugs and alcohol misuse is also available via self-help groups, such as Alcoholics Anonymous (AA), or Narcotics Anonymous:

Search for local AA support groups	Alcoholics Anonymous Great Britain (alcoholics-anonymous.org.uk)
Search for local Narcotics Anonymous groups:	Welcome UKNA Meetings Narcotics Anonymous Meetings in the United Kingdom

Adfam provide links for useful organisations that support drugs and alcohol misuse, providing useful links for specialist substance misuse areas. They also offer support to families of those suffering from substance misuse.

Useful organisations and family support	Useful organisations Adfam
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Further supporting information to DASP can be found on MyConnect.