

## Drug and Alcohol Misuse in the Workplace

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## Policy Statement

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### Summary

West Yorkshire Police (WYP) has established this policy to clearly state the Forces position in respect of the use or misuse of drugs or substances in the workplace. This is whether they are prescribed or illegal drugs or substances that could damage the health and safety of the individual and their colleagues.

There is no place for illegal drug use and as an organisation, we aim to minimise occurrences through raising awareness, support and drug testing in circumstances that are regarded as reasonable.

The purpose of this policy is to ensure that our workforce is free from the risk of substance abuse whether personally or through the conduct of others.

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### Scope

This policy applies to all police officers and police staff, Police Community Support Officers (PCSOs), special constables as well as temporary staff, trainees and staff seconded from other Forces or organisations.

With respect to pre-employment screening, it applies to all police officer, special constable and police staff undertaking certain operationally vulnerable roles.

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## Principles

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### General

- All WYP officers and staff have a personal responsibility to ensure they are 'fit to work'.
- All WYP officers and staff, regardless of their rank or grade, must be aware that the use of illegal substances is ethically incompatible with the public expectations of the service.
- Individuals whilst at work must be free from impairment by any substance, which may:
  - Have an adverse effect on their ability to carry out their role; and
  - Breach any statutory provision concerning drugs or alcohol that governs their role.
- The Force will:
  - Screen applicants applying for safety critical or operationally vulnerable roles to minimise the chance of a person with a substance misuse problem entering the service.
  - Protect individuals in posts which may be vulnerable to malicious allegations of substance misuse.
  - Provide support for individuals who acknowledge they have a problem.

- Provide a safe and healthy working environment for all individuals and to ensure they are free from the risk of any misuse.
  - Deter individuals from substance misuse, through highlighting that dangers and possible effects.
  - Ensure high ethical standards within the Force, in order to maintain public confidence.
  - There is no minimum or maximum time limits between tests and individuals can be tested at any time whilst on duty.
  - Individuals being rehabilitated, unless required as part of the risk assessment, will not be eligible to transfer out of force. They will also not be eligible to apply for promotion.
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**Chain of Custody  
(Random or with Cause)**

- The principles of the 'chain of custody' collection for those tests carried out as 'random' or 'with cause' are to:
    - Ensure that the donor (individual being tested) understands the procedure and any medications they take are documented;
    - Maintain the evidential integrity of the 'chain of custody';
    - Ensure there is no cheating by the donor (dilution, adulteration, substitution etc.);
    - Ensure the donor has the privacy to provide the specimen in appropriate circumstances;
    - Adopt procedures that allow the donor to have access to the specimen for independent analysis (e.g. splitting the specimen);
    - Allow the donor to observe the whole procedure, by which the specimen is prepared in tamper-evident packaging for transport to the laboratory; and
    - Ensure the specimen is untouched at any stage to avoid contamination.
  - The donor has the right to challenge the results of a drug test using the second part of the split specimen, this is the 'B' sample. The sealed 'B' sample will be sent to an independent accredited laboratory of the donor's choice. The donor is responsible for the cost but will be reimbursed if the test on the 'B' sample is negative.
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**Drink Driving Convictions**

- Due to the severity of the offence, potential consequences of driving under the influence and the reputation of WYP maintaining public confidence through high standards of conduct:
  - Any police officer would be expected to be dismissed following any drink driving conviction.
  - Any police staff member will be subjected to a disciplinary investigation which could also result in dismissal following any drink driving conviction.
- Only in exceptional circumstances would a different sanction be imposed on the individual, but this would be determined on a case by case basis, e.g. mitigating circumstances.
- The Force being aware of an alcohol or drug problem in no way mitigates the individual from being sanctioned.

## Powers and Legislation

### Principles (Pre-employment)

- Pre-employment screening for police officers is outlined within the Police (Amendment) Regulations 2005, Statutory Instrument 680 of 2012 - Police (Amendment No. 2) Regulations 2012 & Home Office Circular 11/2012 and in particular, Annex 'B' which provides 'Protocols for Testing Procedures'.
- Police Staff Council (PSC) Joint Circular No: 51 was endorsed by the PSC members (includes representatives from the Association of Police Authorities, ACPO, Home Office, UNISON, GMB and T&GWU). In addition, all employers have a responsibility under the Health and Safety at Work Act 1974 to protect its employees.
- All new applicants subject to screening tests should be aware that that refusal to participate, or the provision of a positive result for an illicit drug, will render that candidate ineligible for employment.

### (Whilst Employed)

- Regulation 19(1)(d) of the 2003 Regulations has been amended so that any serving police officer selected in accordance with a regime of routine random testing may be required to provide a sample. This replaces the existing provision for the Secretary of State to specify categories of officers who may be tested.
- In line with ICO Employment Practices Data Protection Code, Health and Safety at Work Act Human Rights legislation random drug testing for Police staff will only be undertaken on those deemed to be undertaking a safety critical or operationally vulnerable roles.
- If a request is made under this policy in regards substance testing, for an officer to provide a sample for analysis, it is a lawful order under the Police Regulations 2003, and refusal to provide a sample is breach of standards of professional behaviour. Police staff refusals would amount to a breach of this policy.
- Police staff are obliged to comply with all reasonable instructions and abide by all force policies in accordance with Police Staff code of conduct.
- This policy is secondary to the primary legislation of:
  - Road Traffic Act 1988;
  - Railway and Transport Safety Act 2003; or
  - Misuse of Drugs Act 1971.
- The legislation does not undermine the obligations on managers to investigate suspected criminal or disciplinary misconduct.
- The Human Rights Act 1998 must be considered when carrying out any processes within this policy. All actions must be appropriate, proportionate, necessary, non-discriminatory and lawful.

## Types of Testing

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### Information

- West Yorkshire Police carry out screening in five scenarios:
    - Initial recruitment for all police officers and Special Constables;
    - Initial recruitment for Police staff who have applied for a safety critical or operationally vulnerable role;
    - Random drug testing for **all** Police officers and Special Constables;
    - Random drug testing for police staff undertaking a safety critical or operationally vulnerable role; and
    - With Cause drugs tests for all Officers and Police staff in any role when intelligence has been received and corroborated.
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### Safety Critical Roles

- Safety Critical roles are defined to specify those police staff roles that will be screened as part of recruitment and who may be subject to random drug testing. The roles relate to those who operate equipment that could pose a significant risk to themselves or others (as outlined within HSAw Act).
  - The following have been classified as 'Safety Critical' for police staff:
    - Air crew, who are tested outside this policy in accordance with the Railways and Transport Safety Act 2003; and
    - Chief Pilot;
    - Senior Pilot;
    - Line Pilot (Rotary and Fixed Wing);
    - Tactical Flight Officer.
    - Aircraft engineers;
    - Vehicle technicians; and
    - Firearms training staff, who have access to firearms/authorised explosives or as part of their duties are involved in dealing with non-police firearms/explosives, or directly supervising such staff.
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### Operationally Vulnerable Roles

- Operationally Vulnerable roles are defined to specify those Police Staff roles that are subject to pre- employment screening or part of a random drug testing. The roles specified are:
    - Detention Officer;
    - PCSO; and
    - Those conducting investigative roles including ISO's and case builders.
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### Police Officer High Risk Roles

- Police Officer high risk roles are purely specified to indicate which roles should be prioritised should the force undertake a routine of drug testing.
  - At the time of the policy review the force does not have a routine regime and should it choose to do so then this should be returned to JNCC to agree those posts.
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## Substance Screening – Testing Groups

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### Principles

- Substance screening is carried out by an external substance screening provider using suitably qualified and experienced staff. It will only provide data on the concentration of a substance in a sample, not providing evidence of impairment or dependency.
  - Further information on these groups are detailed in the National Substance Misuse policy and associated Police Regulations 2003, Regulations 10 and 19A, Annex DD.
  - Regulation 10(1) does not include transfers from another force, however under the provisions of this policy, WYP may request a sample to be tested.
  - If it is not possible to screen every single individual who is employed within a particular year, dependent on the volume, then screening will be randomised so that the quantity of individuals tested in this category is proportionate to that of the Force as a whole. This will be conducted under the random screening programme.
  - The tester will randomly select from a group identified for random drug testing.
  - Regulation 19A (1b), must be referred to for student officers who are on a period of probation.
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## Responsibilities

### Individuals

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#### Responsibilities

The code of ethics states:

“If you believe you are unfit to undertake your role or you are somehow impaired for duty you **must** immediately declare this to your line manager, HR or other relevant person”.

The code of conduct for police staff supports the objectives of the code of ethics which assists the force in ensuring high standards of behaviour and conduct from all employees.

Individuals are responsible for:

- Ensuring that they take responsibility to ensure they are ‘fit to work’;
- Ensuring under Health and Safety legislation, that they take reasonable care of themselves and any other individual who may be affected by their actions. (Further responsibilities for officers are outlines within the Code of ethics) and the Code of Conduct for Police staff;
- Acknowledging a problem or suspected problem with alcohol, drug or other substance related misuse, and self-refer themselves to their line manager;

- Avoiding completely undertaking any task or duties that puts anyone at undue risk or danger. Failure to recognise and take appropriate action could result in serious consequences;
  - Notifying line management of any medication or prescribed drugs that may have adverse effects and as a result have a direct effect on their ability to perform their duties. GP's will provide sufficient information for this request for the purpose of conducting a risk assessment. Specifically, when considering the effect of prescribed drugs on driving;
  - Declining calls for assistance in roles that require clear judgement and reactions (e.g. firearms) if impaired by any alcohol or prescribed drugs or other substance. Discussions will be required with line management for suitability of these roles;
  - Contacting Occupational Health (OH), and/or outside agencies for help. OH will communicate with the District or Departmental Head through a management referral for the purpose of a risk assessment and review of current duties. All medical matters will remain confidential and be treated with dignity and respect at all times;
  - Complying with any treatment offered by the GP service;
  - Encouraging any colleague with a substance misuse problem to seek assistance. If they refuse, fail or the concern persists, then line management must be informed, and this must be in confidence;
  - Informing a manager without delay, if another individual is causing concern by undertaking duties which their suspected substance misuse will affect their ability to carry out these duties correctly; and
  - Abstaining from 'covering' for a colleague who has a problem or ignoring that a colleague is suffering with a problem. In some circumstances this may lead to the individual liable to misconduct or criminal investigation.
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## Line Managers

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### Responsibilities

Line managers are responsible for:

- Being alert to early indicators of a possible drug or alcohol misuse problem.
- Communicating in an appropriate manner to the individual concerned on becoming aware of the problem, offering advice and guidance in a confidential manner;
- Managing the individual as outlined within the attendance management policy ensuring appropriate referrals are made to OH, complete a risk assessment and put in place any reasonable adjustments; and
- Taking immediate action if there is belief that a criminal or conduct offence is being committed i.e. possession of a controlled drug, unfit to drive through drink/drugs and communicate with the appropriate people/department as stated below, so any immediate action, such as testing can be arranged:
  - During office hours: Professional Standards Directorate.

- Out of office hours: Silver Cadre must be informed along with the PSD on call.
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## District or Departmental Head

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- Responsibilities** District or Departmental Heads are responsible for:
- Providing support to individuals and managers in their duties under this policy, ensuring the individual is aware of their own responsibility to comply with any regime set by their GP;
  - Liaising with OH and overseeing the OH management referral process, to make sure the individual is fit for work, arranging for the necessary duty and deployment changes to take effect through conducting a thorough risk assessment; and
  - Directing People Directorate, Resourcing who will conduct all pre-employment testing and those who volunteer on initial recruitment.
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## Occupational Health (OH)

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- Responsibilities** Occupational Health are responsible for:
- Providing signposting and guidance on substance misuse;
  - Assisting the individual (with consent) who has asked for their help, by seeking information from their GP or medical practitioner to support the staff members fitness to work; and
  - Providing advice to line managers through the management referral process.
  - For serving officers and staff, OH will only disclose information to PSD/Line Management either with concern or when there is a lawful need to disclose due to an immediate public safety concern.
  - For new applicants who are in the process of screening whom indicate that there is no current/recent drug use but do disclose historic use may be ineligible for employment. OH will obtain additional information and make any recommendations to resourcing on suitability for role. The duty to disclose is as above.
  - This information will not be disseminated to PSD for the purpose of with cause testing .
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## Resourcing

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- Responsibilities** The Resourcing Department are responsible for:



- Decision making on the acceptance of any applicant following pre employment screening and information from OH. This may include those applicants who have either passed screening or are not subject to screening who have indicated previous drug use. These cases should be considered on a case by case basis and may be required to seek specialist ER advise.
  - All applicants who have provided a positive indication after the pre selection screening must be notified that the application will not progress and the offer of any role declined.
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## Professional Standards Directorate (PSD)

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- Responsibilities** PSD are responsible for:
- Investigating all cases of substance misuse where:
    - There is a 'positive' result from a serving employee;
    - In circumstances where a criminal or disciplinary offence may have been committed; and
    - Where an individual refuses or fails to provide a sample, which is deemed gross misconduct and will be dealt with as if it's a 'positive' result.
  - Conducting 'with cause' and random drugs tests;
  - Providing instructions of next steps to those individuals that have self-referred;
  - Liaising with the individual's line manager and District or Directorate Head during any investigation relating to drug misuse. Should it be identified that the staff/officer has referred themselves to their line manager this will be considered by the appropriate authority; and
  - Ensuring that individuals are aware that cases where self-declaration has been made for one substance, but they test 'positive' for another, the self-declaration will not be taken into account as mitigating circumstances during the investigation.
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## Voluntary Self-Referral

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- Principles**
- Any individual with a substance abuse problem must self-declare to their (or another) line manager so that a suitable risk assessment can be undertaken. All interactions will be dealt with in a considerate manner.
  - The individual must comply with the instructions from their line manager, OHU and their own GP.
  - Self-referral will not prevent PSD from conducting a 'with cause' drugs test. However, it will be considered by the appropriate authority in any misconduct investigation.

- The responsibility lies with the individual to seek medical advice from their GP and any support offered by the Force.
  - Any medical emergency in respect of substance misuse must be directed to the local hospitals Accident and Emergency (A&E) department or the individuals own doctor as appropriate.
  - Self-referral does not mitigate the commission of any criminal act.
  - **Voluntarily coming forward will not protect the individual from any potential investigation and it is not acceptable for an individual to self-declare after having given a sample that they believe will be 'positive' in order to avoid a disciplinary/criminal investigation.**
  - **At any point throughout the referral process, if line managers, District or Directorate Head believe that the individual concerned maybe consuming illegal drugs, then PSD must be informed, and they are able to use this intelligence to support any 'with cause' test.**
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## Testing

### Drugs

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#### Principles

- Anyone who has misused controlled drugs is at risk of:
    - Disciplinary proceedings, which could lead to dismissal; and
    - Criminal prosecution.

Because of this double jeopardy, and whether or not criminal proceedings are contemplated, cautioning and interviewing will be to the standards required under the Police and Criminal Evidence Act 1984 and will be conducted by PSD.
  - Drug testing outcomes are expressed as:
    - Negative: A result for a specimen indicates that no illicit drug use has been identified.
    - Positive: A result indicates that there is evidence of illicit drug use that cannot be explained by any of the legitimate medications used by the donor.
  - The identification of a drug being present in a specimen is not the complete picture, as there may be legitimate reasons for this drug being present. Further research will be conducted if this is the case.
  - On site tests may be used to screen out 'negative' results, but a 'positive' indication at this stage must be submitted for a full analysis at an accredited laboratory and medical review.
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#### Stages of Drug Testing

- There are 3 stages to drug testing, these are:

Stage	Description
Collection	<ul style="list-style-type: none"> <li>• The specimen is to be collected from donor, which the 'chain of custody' must be followed with full documentation throughout.</li> <li>• The collection agent must be properly trained, applying the appropriate standards to maintain the integrity of the exhibit.</li> </ul>
Analysis	<ul style="list-style-type: none"> <li>• If no drugs are found, then the testing procedure is completed at this stage and Force will be advised of the 'negative' outcome.</li> <li>• If through analysis, one or more drugs are identified in the sample then a medical review will take place.</li> </ul>
Medical Review	<ul style="list-style-type: none"> <li>• This stage is carried out by a Medical Review Officer (MRO).</li> <li>• Any positive results will be considered alongside any factors that may provide a legitimate explanation for the presence of the drugs, and an outcome determined thereafter.</li> <li>• Individuals will be given the opportunity to declare any medication they are taking at the time of the test, which will be retained confidentially and only referenced to in this medical review where the test is positive, otherwise the information is destroyed.</li> </ul>

#### **'With Cause' Testing**

- Where information and/or intelligence is available that indicates an individual is involved in substance misuse, then they may be subject to testing.
- All intelligence will be appropriately graded using the grading matrix and any action will be based on evaluation. Authorisation for intelligence testing of an individual will be by a member of PSD SLT on the basis of 'reasonable suspicion'.
- If the requirement to screen is urgent based on intelligence a collection agent can be called out within 2 hours. The duty on-call PSD supervisor must be contacted via the Force duty officer and they will make the necessary testing arrangements. For out of hours, this must be Silver Cadre.
- The Force is able to test for the substances listed as controlled drugs, this being one or more of these substances, or another drug group provided that there is reasonable cause to suspect the individual has used the drug(s) and that the individual is informed of the drug(s) or drug group(s) in which they are being tested prior to testing commencing.
- The drug testing procedure for extended sampling for 'with cause' testing is as follows:
  - An ACC can authorise a maximum of 3 samples of urine or oral fluid to be provided by the individual concerned where there is intelligence

which gives reasonable cause to suspect the individual has used the substance over an extended period of time.

- The 3 samples can be required over a maximum period of 90 days, with day one being when the first sample is required, and the last prior to midnight on day 90. When calculating the 90 days, any periods of sick leave must not be taken into account.
- The individual concerned must be notified at the time the first sample is required, that a further 2 samples may also be required over the course of 90 days. However, they must not be given any advance warning when these samples will be collected.
- On each occasion a sample is taken, the individual concerned must be informed of the drug or drug group in which their sample will be tested against.
- The individual concerned is entitled to have a work colleague, or a staff association or trade union representative present when the samples are being taken. However a delay in their representative attending will not delay the testing procedure provided that the individual concerned has been able to inform them.

**Medical Review  
Officer (MRO)  
Outcome**

- The MRO will review the evidence and will determine an outcome from the testing:

If...	Then...
There is no presence of drugs...	● The Force will be advised of a negative outcome.
The presence of drugs can be explained by the use of prescribed or propriety medication...	● The Force will be advised of a negative outcome.
The presence of drugs cannot be accounted for...	● The Force will be advised of a positive outcome, which will include details of the drug(s) identified.
There is any doubt...	● The overriding principle of the medical review process is to give the benefit of the doubt to the donor.

**Androgenic-  
Anabolic  
Steroids (AAS)/  
Prohormones**

- It has been determined that the possession or consumption of Androgenic-Anabolic Steroids (AAS) and Prohormones, is not conducive with being employed by WYP and is considered a breach of the:
  - Standards of Professional Behaviour; and
  - Code of Conduct for Police Staff,
 Which will result in disciplinary proceedings if proven.
- It is the responsibility of all WYP officers and staff to check that any supplements they are taking are free of agents which will lead to a positive drugs test.

- The drug testing procedure will return the precise identity of the steroid, if it is required that testing is appropriate (see Stages of Drug Testing, and 'With Cause' Testing)
- Officers and staff must not confuse AAS and Prohormones with corticosteroids which are widely prescribed to relieve inflammation for conditions such as asthma and eczema.

#### Psychoactive Substances

- The Psychoactive Substances Act 2016, introduced on 26 May 2016, makes drugs formerly known as "legal highs" illegal.
- Those selling psychoactive substances through the internet or commercially will often brand them as 'legal' or 'herbal highs' or attempt to conceal their true purpose by misdescribing them. However, analysis of test purchases demonstrates that they often contain a wide range of controlled drugs.
- Possession or consumption of a psychoactive substance is not conducive with being employed by WYP and is considered a breach of the:
  - Standards of Professional Behaviour; and
  - Code of Conduct for Police staff.

## Alcohol

#### Principles

- All officers and staff as members of WYP have a general responsibility to present themselves fit for duty.
- **It is important to remember, reporting for duty while having previously consumed alcohol (for example, the previous evening) does not equate with the criminal offence of using illegal drugs. Managerial action needs to reflect this.**
- It is for managers to determine whether an individual is unfit for general duties by their judgement being impaired due to the consumption of alcohol. The impairment guidance can assist managers to take the appropriate action.
- As with drugs, self-declaration of a drink problem must be managed in the same way by the individual discussing the problem with line managers for a management referral to OHU to be conducted.
- All officers and staff must note that the alcohol limit is 40milligrammes/100millilitres of urine, in line with Police Regulations 2003. Therefore, at this level of above, individuals will be considered unfit for duty and will be the subject of disciplinary proceedings.
- It is always open to all individuals to declare that they suspect they might have inadvertently exceeded the limit. Any declaration must be made before the individual is notified of any requirement to take a test.
- Self-declarations must not result in the individual being penalised. This is provided there is no pattern of continuing excess.

- A declaration may be appropriate in circumstances of unexpected change of duty, such as being allocated driving duties involving possible use of the police exemptions (passing through red lights due to emergency etc.) under the Road Traffic Act 1988, due to staff shortage.
  - The presumption is that all employees are deemed unfit to work in their role if they have more than 29milligrammes in their blood, 39milligrammes in their urine and 13micrograms in their breath. This compares with a limit of 80milligrammes in the blood for driving.
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#### Conducting a Breath Test

- **This does not undermine the obligations on managers to investigate and take action in respect of drink driving offences under Road Traffic legislation.**
  - If a manager can smell intoxicants on the breath of an individual who has not committed offences under Road Traffic legislation they are liable to be voluntarily tested to ensure they are “fit for work”.
  - An alcohol breath test can be administered after a wait of 15 minutes. This is to ensure the alcohol has been absorbed into the body of the individual, as it may be unclear as to when the individual consumed the alcohol.
  - The correct breath-testing equipment must be used when carrying out the test. It is capable of making measurements at the 13 micrograms level.
  - Individuals must never be tested on equipment held in a custody suite.
  - Each breath test must consist of 2 consecutive breath specimen tests from the individual, with the lower reading of the 2 specimens being declared as the final result.
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## Confirming the Outcome

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#### Principles

- A confirmed result, either positive or negative, will not be available until the completion of the laboratory analysis and medical review, which is likely to take 2 or 3 days. Any difficulties arising from this delay are outweighed by the benefit that testing enables there to be an instant confirmation of a ‘negative’ result.
- With no final result at this stage, the language used to describe the outcome of an on-site test is important. The use of ‘a test has been failed’ must not be used, as this is not the case.
- The following information must be relayed at this stage to avoid confusion and stating an incorrect result:
  - Donor: They must be advised that a positive test result provides only a provisional indication and they must provide a further specimen for analysis. This sample will be subject to further analysis and medical review which the final result could be negative.
  - Line manager: They must be informed immediately of a positive on-site result as it is their responsibility to assess the risk in relation to the individual’s duties and consider any work related restrictions.

Suspension will not be considered at this stage as the on-site test isn't the final outcome.

- A final result will only be declared positive if the substance tested exceeds a pre-determined threshold level after the on-site test, laboratory analysis and medical review by the MRO.
- The MRO, in most cases, will make contact with the donor within an agreed time to discuss the result to ensure all medical and pharmacological factors are explored. These discussions are confidential.
- If the levels fall well outside the pre-determined levels in cases such as for alcohol and prescribed drugs, the MRO may request contact with the donor as this will give cause for serious concern.
- All results will be returned by secure email to PSD, other than pre-employment where they will be returned to the Recruitment section.
- PSD are responsible for communicating negative results to the individuals concerned, and dealing with positive results according to the explanation for the positive result:

Positive result ...	Then...
For an illegal substance but has not previously self-declared...	<ul style="list-style-type: none"> <li>• The matter will be referred to PSD for investigation, which may result in dismissal.</li> <li>• The Force will offer support, but this may be limited to advice only. Any treatment regimes and costs are the responsibility of the individual.</li> </ul>
For an illegal substance but states that they have previously self-declared to their line manager, HR or PSD.	<ul style="list-style-type: none"> <li>• A self-declaration before a positive test will ensure the individual is provided with the sufficient support.</li> <li>• PSD through their enquiries or investigation will enquire with Line managers to confirm this. This information will be used as mitigation if the matter is being progressed through discipline.</li> </ul>
For a substance that is not illegal but the presence or concentration of it gives rise for concern...	<ul style="list-style-type: none"> <li>• The matter will be referred to OH for evaluation.</li> <li>• PSD will be involved and in communication to seek advice from OH and/or medical specialists in such cases.</li> </ul>
At pre-employment screening...	<ul style="list-style-type: none"> <li>• The matter will be referred to the Recruitment Section, who will keep a restricted and secure access database of test results. Only sharing information with other Forces in regards positive results in accordance with the Data Protection Act and the Bichard recommendations.</li> </ul>

	<ul style="list-style-type: none"><li>• Recruitment will communicate both positive and negative results to the applicants (donors).</li></ul>
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## Additional Information

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**Compliance**

This policy complies with the following legislation, policy and guidance:

- Health and Safety at Work Act 1974
  - Management Regulations 1999
  - Code of Conduct for Police Staff policy
  - Police and Criminal Evidence Act 1984
  - Attendance Management policy
  - Discipline – Police Staff policy
  - College of Policing – Code of Ethics
  - Police (Amendment) Regulations 2005
  - Home Office Circular 11/2012 – Testing Police Officers for Substance Misuse
  - Home Office Circular 45/2005 – Testing Police Officers and Police Recruits for Substance Misuse
  - Police Regulations 2003
  - Road Traffic Act 1988
  - Railway and Transport Safety Act 2003
  - Misuse of Drugs Act 1971
  - Human Rights Act 1998
  - Data Protection Act 2018
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**Supporting Information**

The supporting information for this policy can be accessed.

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