Substance Misuse and Testing Policy (Including Alcohol and Drugs) (1070/2023)

Abstract

This policy details the Sussex Police approach to the management of substance and alcohol misuse by police officers, including Special Constables, police staff, agency staff and volunteers.

Policy

1. Introduction

1.1 This policy is required to ensure the Force acts in accordance with the National Police Chiefs' Council (NPCC) and Police Staff Council (PSC) substance misuse and testing guidance.

It will:

• Raise individual awareness of drug and alcohol misuse

• Promote a climate in which individuals feel able to report concerns regarding misuse amongst their colleagues

• Ensure that individuals are aware of the help that is available from the organisation

• Inform individuals of testing procedures, including how they may make a declaration that they have a misuse problem

• Advise individuals of the action that may be taken against them following a positive test for alcohol or drugs.

1.2 This policy applies to:

Targeted with Cause Testing – all police officers, including Special Constables, police staff, agency staff and volunteers.

Spontaneous / unplanned – all police officers, including Special Constables, police staff, agency staff and volunteers.

Random Testing – all police officers, including Special Constables and police staff, agency staff and volunteers.

2. Scope

2.1 This policy provides guidance on the action to be taken when substance misuse is voluntarily reported, suspected by a colleague and/or manager or reported via any other means and the processes to be adopted.

It details the screening and testing procedure and the support opportunities available from the Force.

It also covers how Random Testing, Spontaneous and Targeted with Cause Testing will be conducted.

3. Policy Statement

3.1 Sussex Police seeks to provide a safe, healthy, and productive working environment for its police officers and police staff where alcohol and substance misuse will not be tolerated, however, we will offer support to individuals who voluntarily seek help prior to undergoing any test procedure.

The misuse of alcohol and drugs can lead to reduced efficiency, increased risk of accidents, increased sick leave, potential misconduct, and criminality.

This can have serious consequences for individuals, their families, and the wider police service.

However, this must always be approached sensitively as individuals may have health conditions, or be taking prescribed / over the counter medications, which could result in them displaying signs of substance misuse.

3.2 It can be a criminal offence to put others at risk by negligent acts or omissions. Substance misuse can lead to impairment of judgement.

This is of particular concern in respect of safety critical roles, where the consequences that may arise through impaired judgement are especially serious.

Substance misuse also gives rise to wider corruption risks for police officers and staff especially in the case of illegal drugs where there is likely to be a linked notifiable association which could increase the risk to both the individual and the organisation.

All individuals are responsible for taking reasonable care of their health and safety and that of any other person who may be affected by their acts and omissions at work.

Procedure

1. Procedure

1.1 This procedure explains how Sussex Police will approach substance misuse and includes prevention and detection strategies, namely targeted, Spontaneous / unplanned, and random testing methodologies.

1.2 ‘Substance misuse’ is the use of illegal drugs and the inappropriate use of prescribed or non-prescribed drugs, alcohol and other substances such as solvents, gases and

‘legal highs’. ‘Illegal’ and ‘prescription’ drugs are as defined by the Misuse of Drugs Act 1971 (MDA) together with any legislative amendments or associated regulations. ‘Misuse’ is use in such a manner that is illegal, harmful, or problematic, either for the individual or others.

1.3 The purpose of the substance misuse procedure is to minimise the likelihood that members of Sussex Police are misusing drugs, alcohol, or other substances and to ensure that when reporting for duty or work, individuals are fit to do so. The underlying principles are to protect the public and the Force from the risks associated with substance misuse and to maintain the public’s confidence in Sussex Police.

1.4 Sussex Police aims to:

• Preserve and enhance the health, safety, and welfare of all personnel in matters relating to substance misuse.

• Provide advice, assistance and guidance to personnel seeking support for substance misuse.

• Provide advice, assistance and guidance to supervisors and managers confronted by problems associated with substance misuse.

• Apply the procedure, fairly and consistently, to individuals across Sussex Police.

• Monitor the procedure to ensure it remains fair, consistent, and proportionate.

2. Substance Testing for Controlled Drugs

2.1 A programme of substance screening tests that are primarily designed to detect illegal drugs and other substances often used outside their normal therapeutic range will support the Sussex Police anti-corruption strategy.

2.2 The controlled drugs which testing shall cover are;

Amphetamines (including ecstasy)

Cannabis - which includes over the counter products containing Tetrahydrocannabinol (THC)

Cocaine

Opiates (e.g., morphine and diamorphine (Heroin))

Benzodiazepines

Methylenedioxy - methamphetamine (MDMA)

One additional drug or drug group (for ‘with cause’ testing only)

2.3 It is recognised that some countries have a more liberal stance to drug use. For example, some drugs which are illegal in the UK by virtue of the MDA are legal in other countries.

However, individuals visiting other countries should not engage in behaviour that would be illegal in the UK.

If an individual provides a positive drug test, regardless of whether the substance was legal at the point of use, for the purpose of policy the sample will be deemed positive and subject of investigation by the Professional Standards Department (PSD).

2.4 There may be legitimate reasons for a drug to be present in a specimen e.g., legitimate painkiller or prescribed medicine.

Persons required to take a test should declare all medications they are taking. The content of the declaration is confidential to the testing company operative and the medical officer reviewing a test result.

2.5 Officers and staff will be allowed to consult with a trade union or Federation representative prior to taking part in the procedure, but this will not be allowed to unreasonably delay the process. This advice can be given in person or over the phone.

2.6 On-site testing collections will be taken by trained professionals (independent of Sussex Police) using urine collection kits. Should a person being tested be unable to provide a urine sample consideration can be given to taking a saliva sample; the decision to take such a sample will be taken by the representative of PSD in consultation with the representative from the independent testing company.

Any drug test that is relied upon in criminal or disciplinary proceedings shall be conducted through laboratory analysis.

2.7 A member of the Force subject to testing shall have the right to have one sample tested independently to challenge the result of a test on the other sample.

The cost of an independent analysis will be met by the member and maybe reimbursed by the Force in the event that the first analysis is found to be inaccurate.

2.8 There shall be a secure chain of custody through collection, analysis and medical review as set out in the protocols issued by the Secretary of State.

2.9 Laboratory analysis shall be undertaken by an independent agency.

2.10 The request to provide a testing sample and to comply with the collection procedure is a lawful order or reasonable instruction and any refusal to do so could be a disciplinary matter and referred to PSD for assessment and investigation.

Refusing to provide a sample will be treated as seriously as if the sample were found to be positive. This applies to Targeted with Cause Testing, Spontaneous / unplanned Testing and Random Testing.

Advice and guidance will be available from Staff Associations during the testing process.

2.11 Sussex Police will have due regard to protecting privacy during testing procedures and ensuring that the testing is conducted in a sensitive manner.

Testing will be conducted in a way that is considerate of an individual’s dignity.

Testing will be conducted in secure cubicles that will be used exclusively for the purpose of random testing on the day in question. There will be no access to the toilet site for any unauthorised person.

Those responsible for conducting the tests will have both male and female representatives on site therefore providing the ability for test subjects to speak in private to staff of either gender should they have any concerns of a personal nature.

Subjects who are menstruating at the time of the test requirement will still be required to provide a sample of urine however this will be requested sensitively and will be provided to female staff.

Test results will be handled in a secure and confidential manner. Records of test results will be retained in accordance with data protection principles.

2.12 The independent testing company will only analyse drug samples where written consent is given by the donor on the submission form and the donor signature is required before analysis can take place.

Any individual not giving written consent to the screening company will be in breach of this procedure and will be deemed to have refused to provide a sample.

This will be referred to PSD for assessment and investigation. Refusing to provide consent to samples being analysed will be treated as seriously as if the sample were found to be positive.

3. Cannabidiol (CBD oil)

3.1 CBD is one of the cannabinoid compounds found in cannabis plants. It does not produce psycho-active effects and alone is not a controlled substance.

THC is also a cannabinoid identified in cannabis plants. THC is a Controlled Substance under the MDA.

Over the counter CBD oil is classed as a food supplement and not considered medication.

3.2 CBD is not controlled under the MDA. The active component of cannabis, THC is scheduled and classified as a Class B drug within the MDA and is therefore illegal to possess or supply. This applies to any substance that contains any amount of THC. The possession or supply of CBD products that contain any amount of THC is therefore prohibited by the MDA.

3.3 Some manufacturers provide certification of a maximum THC concentration in their CBD products, however there is anecdotal evidence of a wide range of THC concentration in different batches of the same products. The amount of THC that an individual ingests following use of a CBD product is therefore unknown. This uncertainty is also amplified by the variation in how much of the products individuals take at any one time, and how often they ingest the product.

3.4 Many of the CBD products that are available from health food stores and on-line do contain some THC (the compound that causes a positive cannabis test). In theory therefore, it would be possible for an individual’s sample to test positive for cannabis if CBD containing THC is consumed in sufficient quantity prior to the individual’s sample being collected.

This means an individual who uses CBD products must be aware they may contain THC which may provide a positive cannabis test result. If an individual who uses CBD products provides a positive result, indicating the presence of cannabis (THC), whilst there may well be mitigation, for the purpose of investigation this would be treated gross misconduct.

4. Testing for Alcohol

4.1 Alcohol is a substance that can be misused, and which can impair judgement, it is in a different category from controlled drugs in that its use is not illegal.

4.2 Everyone has a general responsibility to present themselves fit for duty or work. If their judgement is impaired by the consumption of alcohol, they are unlikely to be fit for duty.

4.3 It is for managers or supervisors to determine whether or not a person is unfit for general duties due to the consumption of alcohol.

4.4 It is always open to the individual to declare that they suspect they might have inadvertently exceeded the alcohol limit if unexpectedly asked to perform a particular role.

Any such declaration must be made before the person is notified of any requirement to take a test. Such a declaration will not result in the person being penalised, provided there is no pattern of continuing excess, and the declaration is not after being notified of any requirement to take a test.

A declaration maybe particularly appropriate in circumstances of an unexpected recall to duty, for example being allocated to driving duties, due to a staff shortage, or a firearms operation called at short notice.

5. Pre-Employment Testing

5.1 All candidates applying for any post with Sussex Police, including transferees from other constabularies, and who are successful at the interview / final stage, may be substance tested. Refusal to participate, or the provision of a positive result for an illicit drug, will render that candidate ineligible for employment.

Candidates testing positive for other substances that are not illegal but give rise to concern (i.e., ‘legal highs’) will be evaluated by the Medical Review Officer (MRO) who will make recommendations to the People Services Department.

5.2 In the case of potential new staff and officers, a hair sample may be tested. If the technician is unable to obtain an adequate sample from the head, hair can be taken from other areas such as the arm pit. This is the decision of the technician. If a hair sample is unable to be collected for any reason, a urine test may be conducted as an alternative with approval from the Recruitment Manager.

6. Voluntary Referrals and Rehabilitees

6.1 Those seeking help and assistance with substance abuse and those undergoing an agreed course of rehabilitation maybe tested on initial referral and as determined by the treatment provider, consistent with the treatment regime being undertaken.

Where an individual comes forward voluntarily for assistance, the matter will be dealt with primarily as a welfare issue and support will be given together with signposting to suitable treatment regimes.

Any such self-declaration must be made before a notification of any requirement to take a test.

6.2 Self-declaration of a drink or drug problem is a matter that will be managed by the line manager. A referral to Occupational Health (OH) for recommendations for adjustments to the role or other adjustments can be made in the usual manner. OH, may also act following an OH referral, as a liaison between the Force and any treatment facility or specialist. This will enable individuals to share medical information in a confidential manner and for the Force to be given an opinion by OH without divulging confidential information.

An OH referral is not available to volunteers.

Self-declaration will be managed as a welfare / wellbeing matter.

However, individuals who self-declare will still be subject of investigation, criminal or conduct, if their behaviour breaches the standards expected of them, for example attending work under the influence of drink or drugs or being found in possession of illegal drugs.

7. Testing

7.1 There are three types of substance and alcohol testing:

Random – this applies to all police officers including Special Constables, police staff, agency staff and volunteers.

Spontaneous / unplanned – such as where a supervisor smells alcohol on the breath of an individual, or otherwise suspects they are under the influence of drink or drugs whilst on duty. This applies to all police officers, including Special Constables, police staff, agency staff and volunteers.

Targeted / With Cause - Where information or intelligence indicates a police officer or member of police staff is involved in substance misuse, they may be subject to testing, and the matter will be investigated by PSD. This applies to all police officers, including Special Constables, police staff, agency staff and volunteers.

8. Random Testing

8.1 Random testing will relate to individuals who are on duty at the time of the testing.

An individual will not be recalled to duty or the workplace for the purposes of random testing.

However, individuals who work away from police premises, in accordance with the Agile Working Policy (Surrey and Sussex) (1199) can be subject of such testing at whatever location has been approved for the purpose of working. Any such test must be requested and conducted whilst the individuals is at work or scheduled to be so. Entry into private premises requires the individual's consent. There is no power to require entry, however a failure to cooperate or provide a sample will be treated as section 2.10.

8.2 A random test consists of both a drug and alcohol test.

In respect of breath test, Sussex Police apply the industry established principle that a person is unfit to work if they have more than 13 micrograms % in breath (39 mg % in urine, 29 mg % blood).

8.3 The individuals to undergo testing will be randomly selected from a list of staff due to be on duty at the testing location at the relevant time. Once selected the independent testing company will then be responsible for administering the collections.

8.4 A routine testing regime may involve selecting a higher proportion of candidates for testing in a particular area or department where the risk is higher.

8.5 Representatives from the independent testing company will be accompanied by a member of PSD on all random testing occasions. The PSD representative will be responsible for contacting those selected for testing by all means available (Airwaves, telephone etc.) and directing them to the testing site as soon as possible.

Local supervision will be advised as to who of their team has been selected for testing and, where necessary, their assistance maybe required to facilitate the selected police officer's or police staff's attendance at the testing site.

8.6 The direction to attend testing at a nominated secure site constitutes a lawful order / reasonable instruction on behalf of the Head of PSD. The integrity of the process relies on individuals being released for a screening test if they have been selected to do so.

In exceptional circumstances, where the selected police officer or member of police staff cannot be released for operational reasons then the on-site member of the PSD must be informed immediately.

They may consult with PSD supervision before deciding whether the individual should still be required to attend or be replaced by another police officer or member of police staff.

8.7 The process detailed at 2.6 – 2.13 will be followed for collections.

8.8 Records of all the police officers and police staff that have not been able to attend testing for operational reasons will be retained by the PSD.

9. Spontaneous / unplanned Testing

9.1 Spontaneous / unplanned testing relates to individuals who are on duty at the time of the testing.

An individual will not be recalled to duty or the workplace for the purposes of Spontaneous / unplanned testing.

However, individuals who work away from police premises, in accordance with the Agile Working Policy (Surrey and Sussex) (1199) can be subject of such testing at whatever location has been approved for the purpose of working. Any such test must be requested and conducted whilst the individuals is at work or scheduled to be so. Entry into private premises requires the individual's consent. There is no power to require entry, however a failure to cooperate or provide a sample will be treated as section 2.10.

9.2 **Alcohol**
If a supervisor smells alcohol on the breath of an individual, or otherwise suspects impairment through intoxication, a breath alcohol test should be administered after a wait of 15 minutes. This is to deal with the eventuality that at the time of the suspicion, a proportion of the alcohol consumed may still be in the person's stomach.

Alcohol must be absorbed into the body to register in a breath alcohol test.

Two consecutive breath specimen tests should be taken on a calibrated device, the final result being declared as the lower of the two results. A person is unfit to work if they have more than 13 micrograms % in breath (39 mg % in urine, 29 mg % blood). All spontaneous requests must be reported to PSD regardless of result. In cases with a positive result will be subject to a severity assessment to determine whether the matter will be investigated as misconduct, gross misconduct or neither, or in the case of probationary officers or staff be referred to the Regulation 13 or Police Staff Probation Policy.

Individuals should never be tested on apparatus held in a custody suite unless the relevant testing room has been cleared of all other users.

9.3 It should also be borne in mind that the criminal provisions of the Road Traffic Act 1988 re drink / drug driving legislation maybe more appropriate where there is reasonable suspicion that a criminal offence may have been committed.

9.4 **Drugs**
For urgent, non-planned incidents, when intelligence is received and there is a potential need for a screening test as soon as possible, the duty on-call PSD officer (contactable via the Force Control Room) will be contacted to evaluate the information and if justified make the necessary arrangements to seek an authorisation from a duty Force Gold or in their absence an officer of at least the rank of Superintendent who is independent of PSD.

9.5 For 'cause' to be established, the test of 'reasonable suspicion' must be satisfied. It should be made clear to the person under suspicion that testing 'with cause' may either prove or disprove intelligence or allegations made.

A single and unsubstantiated allegation, particularly if made by a member of the public who may have malicious intent, would not normally amount to 'cause'.

9.6 The process detailed at 2.6 – 2.13 will be followed for collections.

In addition to the urine / saliva sample, for with cause tests, a sample of the individual's hair will be requested for analysis.

9.7 After the collection has taken place consideration will be given to activities undertaken by the subject in the short term and until the test results are received. This may include being placed on Special Leave.

10. Target 'With Cause' Testing

10.1 Targeted and 'with cause' testing will only be carried out by PSD.

10.2 An individual will not be recalled to duty for the purposes of testing.

10.3 Individuals who work away from police premises, in accordance with the Agile Working Policy (Surrey and Sussex) (1199) can be subject of such testing at whatever location has been approved for the purpose of working, including residential addresses. Any such test must be requested and conducted whilst the individuals is at work or scheduled to be so. Entry into private premises requires the individual's consent. There is no power to require entry, however a failure to cooperate or provide a sample will be treated as per section 2.10.

10.4 Where information or intelligence indicates an individual is involved in substance misuse, they may be subject to testing, and the matter will be investigated by PSD.

10.5 The requirement to take a pre-planned 'with cause' test must be authorised by Force Gold or in their absence an officer of at least the rank of Superintendent.

For 'cause' to be established, the test of 'reasonable suspicion' must be satisfied. It should be made clear to the person under suspicion that testing 'with cause' may either prove or disprove intelligence or allegations made.

A single and unsubstantiated allegation, particularly if made by a member of the public who may have malicious intent, would not normally amount to 'cause'.

10.6 The process detailed at 2.6 – 2.13 will be followed for collections.

In addition to the urine / saliva sample, for with cause tests a voluntary sample of the individual's hair will also be requested for analysis. There is no obligation for individuals to provide a hair sample.

10.7 After the collection has taken place consideration will be given to activities undertaken by the subject in the short term and until the test results are received. This may include being placed on Special Leave.

10.8 Alcohol

PSD will be responsible for overseeing a 'with cause' alcohol test.

Two consecutive breath specimen tests should be taken on a calibrated device, the final result being declared as the lower of the two results. A person is unfit to work if they have more than 13 micrograms % in breath (39 mg % in urine, 29 mg % blood).

Individuals should never be tested on apparatus held in a custody suite unless the relevant testing room has been cleared of all other users.

10.9 It should also be borne in mind that the criminal provisions of the Road Traffic Act 1988 re drink / drug driving legislation maybe more appropriate where there is reasonable suspicion that a criminal offence may have been committed.

10.10 Positive results will be subject of severity assessment by PSD to determine whether the matter will be investigated as misconduct, gross misconduct or neither, or in the case of probationary officers or staff be referred to the Regulation 13 or Police Staff Probation Policy.

11. With cause – extended sampling

11.1 A police officer of at least the rank of Assistant Chief Constable may authorise a maximum of three samples of urine or oral fluid (saliva) to be required from a police officer (includes special constables) or member of staff in their Force (or on secondment to or from their Force) where there is corroborative intelligence, which gives reasonable cause to suspect that a police officer or staff member has used a controlled drug over an extended period (i.e., on more than one occasion).

11.2 The three samples can be required over a maximum period of 90 days, with day one being the day on which the first sample is required and the period finishing at midnight on day 90. When calculating the 90 day period, no account should be taken of any periods of sick leave.

11.3 The police officer or staff member will not be given any advance notice of the requirement to provide each sample.

11.4 The police officer or staff member will be informed at the time that the first sample is required that two further samples maybe required within the designated time period. On each occasion a sample is taken the police officer or staff member will be informed of the drug(s) or drug group(s) against which their sample will be tested.

11.5 The police officer will be entitled to have a ‘police friend’ as defined under the Police (Conduct) Regulations 2020 present when the samples are being taken. Police staff will also be afforded the ability to seek advice from a trade union representative. However, a delay in a police friend or trade union representative attending will not delay the testing procedure provided that the donor has been able to consult with a police friend or trade union representative.

12. Positive Test Results

12.1 A test result will only be declared ‘positive’ by the testing provider and, after review by the testing provider’s MRO, and there is no other reasonable explanation for the result.

If necessary, the MRO may be afforded contact with the specimen provider in order to discuss the result so that all medical and pharmacological factors are explored.

12.2 In the case of legal substances such as prescribed drugs, the MRO may request contact with the specimen provider where the levels fall well outside the normal therapeutic range or give cause for serious concern.

12.3 Where, prior to testing or prior to 'being exposed' with a positive result from substance testing, the individual has sought assistance with their problem by following the guidelines and procedures laid down in this document and they have declared this fact, this will be considered by PSD in respect of whether the result amounts to gross misconduct, misconduct or neither. However, a positive result which amounts to a criminal offence will always be treated as such.

12.4 Where a police officer or member of police staff has not voluntarily come forward for assistance and a positive result from substance testing is obtained, and it relates to an illegal substance, that individual may be suspended from duty and an investigation commenced by the PSD.

In these circumstances, support will also be offered by the organisation.

12.5 Everyone subject to this procedure should be clear that in such circumstances where they have failed to voluntarily avail themselves of help offered by the organisation and illegal drug use is discovered, they will face misconduct and/or criminal investigation.

12.6 There is no substantive criminal offence of having an unlawful substance in the body, only a presumption that the offence of 'possession' may have been committed beforehand. Such a presumption maybe rebuttable through medical evidence that the positive test resulted from use of a lawful medication. The presumption of possession that would arise from a positive medically confirmed test may be treated as discreditable conduct.

12.7 Where a positive result relates to a substance that is not illegal but the presence or concentration of it gives rise to cause for concern, the manager may make a referral to OH in the usual manner and OH will make a report with recommendations. There is duty under Health and Safety legislation for everyone to look after their own health.

13. Frequency of Testing

13.1 There is no minimum or maximum time between tests. Therefore, a person randomly selected under the random testing procedure could also be tested under one of the other provisions.

14. Communication of Results

14.1 Results from the testing provider will be returned by a secure process to PSD. They will be responsible for communicating negative results to the individuals concerned via secure email. Positive results will be considered and formally assessed by PSD who will conduct any subsequent misconduct investigation. The OHU may be consulted, with the individual's consent, as to whether they had self-referred prior to the time of the screening test.

15. Support Process

15.1 Sussex Police will make information available to all individuals on the dangers and signs of substance misuse to raise awareness and encourage individuals to seek assistance in a confidential, dignified, and supportive environment. This will be supported by advice and treatment programmes signposted by the line manager, supports are available via the Wellbeing and OH Hubs and a referral to OH in the usual manner may also apply, with the objective of full rehabilitation of the individual, as far as is possible, having regard to the types of treatment currently available and their associated costs.

16. Roles and Responsibilities

16.1 **Individuals**

Individuals have responsibilities towards themselves and others under Health and Safety legislation which puts a duty on individuals to take reasonable care of the health and safety of themselves, and any other person who may be affected by their acts or omissions at work.

Police officers and police staff have additional responsibilities under the Code of Ethics and the Standards of Professional Behaviour. Everyone who works for Sussex Police should be aware that the use of illegal substances is ethically incompatible with the expectations of the public and the police service.

16.2 Whilst at work or on duty, everyone is expected to be free from illegal substances and free from impairment by any other substances such as alcohol, prescribed drugs, or other substances, to the extent that they are not in proper control of their faculties for the role they perform or are in breach of any statutory provision concerning drugs or alcohol that governs that role.

This should be considered carefully by people involved in roles that require clear judgement and reaction (e.g., firearms users / drivers of police vehicles) where the slightest degree of impairment could have serious consequences.

If an individual at work feels they are not in control of their faculties for the role they are performing, it is their responsibility to report this to a supervisor as soon as is practicable.

If police officers or police staff receive a call to duty and are concerned as to their level of impairment through alcohol or prescribed drugs, they must decline.

16.3 Anyone who has, or who suspects that they have, an alcohol, drug or substance-related problem has a clear personal responsibility to acknowledge their condition and seek assistance as soon as possible. They also have personal responsibility not to undertake any task or duty that puts either themselves or others at undue risk.

16.4 Once a problem is identified individuals have a responsibility to cooperate with a rehabilitation programme. At the very least, there is a duty on all police officers and police staff under Health and Safety legislation to take reasonable care of themselves.

16.5 Where an individual is prescribed drugs or is taking other medication which may have possible adverse side effects that have a direct bearing on the duties that they undertake, they must notify their line manager without delay so that duties of a non-hazardous nature can be arranged.

17. Colleagues

17.1 When an individual suspects that a colleague may have a substance misuse-related problem they should encourage that person to seek assistance and inform either their, or the individual's, line manager in confidence. If this is not possible concerns can be raised via the Force confidential reporting system, Break the Silence.

17.2 If the person causing concern is undertaking duties that are hazardous in nature and the suspected substance misuse increases risk associated with those duties, they must inform a supervisor without delay so that immediate steps can be taken to remove that risk.

18. Managers

18.1 Managers have a duty to be aware of this procedure and be alert to early indicators of a potential problem. On becoming aware of a problem, either directly from the person concerned or through a third party, managers should speak with them and offer advice, support, and guidance in a sympathetic and confidential manner. They should encourage them to seek assistance from their GP, Employee Assistance Programme (EAP), primary health care, Alcohol Anonymous or similar organisation.

18.2 Managers can refer the individual to OH following the usual referral process. It is the responsibility of the line manager to undertake any appropriate risk assessments.

18.3 Where a manager is informed of a situation involving a person with a problem related to suspected substance misuse, immediate steps must be taken to remove the associated risk factors to that person or any other person without delay and managers can refer the individual to OH following the usual referral process.

18.4 These provisions do not override the duties of managers to investigate allegations of criminal and misconduct matters under legislative powers, the Code of Ethics or the Standards of Professional Behaviour.

18.5 In cases where the manager has been formally notified by a third party, in their capacity as line manager of a police officer or member of police staff, of a possible substance misuse problem, the matter must be reported to the duty PSD officer so that they can consider any immediate action.

19. The Occupational Health Unit (OHU)

19.1 The involvement of OH is via a management referral with the consent of the individual. If the individual is having difficulties performing their role, or if the line management require recommendations on what adjustments can be considered to support the individual the manager should make a referral in the usual manner. The line manager will be the primary point of referral and contact in all cases so that no one is left without support and follow up.

20. People Services Department

20.1 People Services staff will support managers and the OHU and line management in their duties under this procedure. In consultation with the OHU they will provide advice on reasonable targets and timescales and, within reason, will assist in facilitating any treatment programmes agreed with the OHU.

21. Professional Standards Department

21.1 PSD are responsible for the investigation of all positive results involving illicit substances or positive results involving licit substances where a criminal or misconduct offence may have been committed. They will also investigate all refusals and failures to provide under the procedure.

22. Police Federation, Unison, NPCC, Police Superintendents Association

22.1 This procedure has been developed with a common aim to provide support from within the organisation to all police officers and police staff who find themselves in need of help with substance misuse.

It is designed to protect police officers, police staff and the public alike through prevention, treatment, and the exposure of wilfully hidden substance misuse. The underlying principle is one of rehabilitation rather than discipline, but it does require a person to exercise individual responsibility.

Therefore, representatives of the above organisations welcome contact by individuals who require their help and advice. Sussex Police, as an employer, is committed to working with such bodies to the benefit of all concerned.

22.2 Individuals who find themselves facing criminal or misconduct proceedings, or who face outcomes as a result of this procedure should consult with their representatives at an early stage to enable them to advise appropriately.

Team: Professional Standards Department