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A close-up photograph of a person's hands. The right hand holds a silver, rectangular flask with a cap. The left hand holds a clear, rectangular bag filled with a white, powdery substance. The background is dark.

**Curbing Workplace
Alcohol Abuse**

**Making the Case
for Drug Testing**



The Business Case for Workplace Alcohol Prevention

Workplace alcohol abuse need not be accepted as an inevitable cost of doing business.

BY BARRY KNOTT

Our workplaces and roads are safer now than they have been in two generations. Reported worker deaths in America declined 29 percent from 6,632 in 1994 to 4,690 in 2010.¹ During the same period, total traffic-related deaths fell by 20 percent, from 40,716 to 32,708.² The progress on both fronts is impressive considering the growth of the American workforce and the increase in the number of licensed drivers over the past several decades.

Less impressive is the progress made in reducing the proportion of alcohol-related workplace and traffic fatalities. Forensic evidence collected by the National Highway Traffic Safety Administration (NHTSA) shows that alcohol-related traffic fatalities as a percentage of total traffic fatalities have improved only modestly, from approximately 41 percent to 38 percent, between 1994 and 2010.² Alcohol also remains the third-leading cause of preventable deaths in the United States behind tobacco use and poor diet/lack of exercise.³

One of the few workplace studies conducted in this area, not surprisingly and not coincidentally, suggested that 40 percent of all industrial fatalities (and 47 percent of industrial injuries) are also linked to alcohol consumption.⁴

The 40 percent linkage to alcohol in both workplace and road fatalities is strong evidence that alcohol abuse is pervasive. Forty percent is also a powerful statistic to impress upon management, safety professionals, and our workforces the extent of the problem and the corresponding opportunity for improvement. Workplace alcohol abuse need not be accepted as an inevitable cost of doing business.

How Does Your Industry Fare?

"Heavy" alcohol use was defined in a SAMHSA (Substance Abuse and Mental Health Services Administration) study as drinking five or more drinks at the same time or within a couple of hours of each other on five or more days in the past 30 days.⁵

Consumption varies considerably by industry and by establishment size. The highest percentage of workers abusing alcohol was found in establishments of less than 25 employees (9.7 percent), while organizations of 500 or more employees had the lowest worker abuse (6.8 percent).⁶ Clearly, smaller organizations have the greater opportunity for improve-

ment. Small firms are perhaps less likely to have an employee alcohol policy, proactive alcohol education, and EAP programs in place. Firms without substance abuse programs tend to attract those with substance abuse problems, further driving their numbers. At the same time, the results from the large organizations also leave considerable room for improvement.

Alcohol versus Illegal Drugs

Alcohol is by far the most widely used drug in the United States. Estimates are that 11 percent of workers have a problem with alcohol.⁷ The International Labor Organization estimates that 3 to 5 percent of the average workforce globally is alcohol dependent, and up to 25 percent drink heavily enough to be at risk of dependence.⁸

According to the National Institutes of Health, in 1998, alcohol abuse alone cost American businesses roughly \$86.3 billion in lost productivity due to alcohol-related illness and death. Of the total \$185 billion economic costs of alcohol abuse cited in the study, less than 1 percent was spent on alcohol prevention programs and training.⁹

While the illegal use of drugs gets most of our collective attention, alcohol abuse is the greater driver of harm and cost in the workplace. The economic cost to society from both alcohol and drug abuse was estimated at \$246 billion in 1992. Alcohol abuse and alcoholism alone cost an estimated \$148 billion, while drug abuse and dependence cost an estimated \$98 billion.¹⁰ A similar Canadian study reported that in 2002 the estimated cost of alcohol abuse was \$14.6 billion in Canada while the cost of drug abuse was approximately \$8.2 billion.¹¹ Workers with alcohol dependence or abuse outnumber workers with substance dependence/abuse (including marijuana) by a factor of almost 3 to 1.¹²

Do You Have a Drug and Alcohol Testing Program?

Twenty-nine percent of the 1,058 HR professionals reporting in a 2011 cross-industry survey by DATIA (the Drug and Alcohol Testing Industry Association) do not have pre-employment or post-employment drug testing programs.¹³ Only 2 percent of those not currently testing plan to do so in the future. The responses reinforce the need for more compelling communications to business owners and managers on the business case for drug testing. The responses also hint at the "can't be bothered" attitude that substance abuse professionals sometimes encounter.

Alcohol Abuse and Productivity

The benefits of workplace alcohol programs are most often summarized in order of greatest benefit as increased productivity, reduced costs, greater employee retention and better morale, job satisfaction, and employee retention.

On-the-job alcohol abuse and heavy drinking outside the workplace significantly affect worker productivity as a result of absenteeism, accidents, poor job performance, disability, and premature death. While it is commonly observed that the vast majority (70 percent-plus) of problem drinkers are employed, it does not follow that most of the negative outcomes are primarily from chronic drinkers. Greater productivity losses may come from occasional alcohol abusers because their numbers are so large.

A 2006 national survey indicated that work-related impairment directly affects an estimated 15 percent of the U.S. workforce. From the survey results, it was estimated that 2.3 million workers drink before work, 8.9 million workers drink during work hours, and 11.6 million workers come to work with a hangover.¹⁴

There's no substitute for the basics in addressing alcohol abuse in any workplace:

- Have and enforce an alcohol policy. There is considerable variation in the existence and enforcement of alcohol policies in the workplace, in employees' awareness of them, and in their enforcement.

- Restrict alcohol availability. You might be surprised at how easy is it for employees to bring alcohol into the workplace, to drink at workstations, and to drink during breaks. Late shifts with minimal supervision are even more vulnerable.

- Good work practices lessen the chances of on-the-job drinking. Workplace stress, boredom, and isolation have been observed to contribute to employee alcohol abuse, as have sexual harassment, verbal abuse, and unprofessional behavior.

Medical Costs

It is well known that heavy alcohol use contributes to many medical problems and increases the chances of unintentional injury both on and off the job. Problem drinking by a family member also can contribute to negative outcomes in the workplace. American businesses absorb much of the health-related costs of heavy drinking in the form of higher health insurance premiums for

employees and their families.

In the 2011 DATIA study referenced earlier, 14 percent of organizations reported high workers' compensation incidence rates prior to implementation of drug testing programs, whereas only 6 percent of organizations reported similar rates after implementation, a decrease of better than 50 percent.¹³

- Most states offer workers' compensation discounts in the range of 5 percent to employers upon certification as a drug-free workplace.

- Progressive insurance companies may offer similar discounts.

- A majority of states allow an insurance company to deny workers' compensation benefits to employees who test positive for alcohol (and drugs) following an accident, provided the employer has a workplace substance abuse program in place allowing it to arrange for post-accident testing.

Alcohol and Drug Testing in the United States

Workplace alcohol and drug testing in the United States has more than 20 years of administrative, technical, and legal practice. Internationally, U.S. programs are widely regarded as best in class and often emulated where permitted by local laws and rights. Below are several examples of government attention given to the subject during the past 25 years.

In 1986, President Ronald Reagan issued the "Drug-Free Federal Workplace" executive order decreeing, "Drug use is having serious adverse effects upon a significant proportion of the national work force and results in billions of dollars of lost productivity each year."¹⁵ The order mandated government agencies and certain government contractors to test employees for the use of illegal drugs in safety-sensitive positions. The executive order was followed up with the Drug Free Workplace Act of 1988.

In 1991, "The Omnibus Transportation Employee Testing Act" required drug and alcohol testing of safety-sensitive transportation employees in aviation, trucking, railroads, mass transit, pipelines, and other transportation industries. These regulations cover all transportation employers, safety-sensitive transportation employees, and service agents.

OSHA, MSHA, and Working Partners

for an Alcohol-and Drug-free Workplace (Working Partners) have signed an alliance to focus on educating construction workers on the safety and productivity hazards created by the abuse of alcohol and other drugs in the workplace.

Elements of an Alcohol- and Drug-Free Workplace Program

Today a "Drug-Free Workplace" is characterized by organizations where the employer has specific policies and procedures to make sure employees are not using illegal drugs or under the effect of substances, legal or illegal, during their working hours. The five elements of an effective Drug-Free Workplace are discussed below.

Substance Abuse Policy Development

Don't assume you can adopt a generic policy. Consider your program goals, the unique nature of your work, the environment, and other relevant business conditions in your policy development. A best practice is to develop your policy in consultation with employee and/or union representatives. All employers must ensure that their policies and practices comply with local state and federal laws to avoid penalties. There is considerable state to state variation in rules and regulations.

Review your policy with a legal consultant, such as a labor attorney. Your policy should address the following:

- Who will be covered and what is the effective date of the policy?

- What are the prohibited behaviors and consequences of violation?

- How will you treat job applicants and current employees?

- Will you conduct searches and drug/alcohol testing?

- Who is authorized to enforce the policy?

- How will you ensure privacy and provide employee assistance?

- How will the policy be communicated?

Supervisor Training

"It's only when employees think their supervisor knows how to detect substance use . . . and is willing to do something about it . . . that employees' drinking and drug use on the job decreases," according to Michael Frone, Ph.D., senior RIA research scientist and research associate professor of psychol-

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ogy at the University of Buffalo.¹⁶ Supervisors can't be expected to do this without the proper training.

Supervisor training, often referred to as "Reasonable Suspicion" training, can be conducted on site, off site, or via Web-based programs that allow supervisors to progress at their own pace. DATIA (www.datia.org) and many of its members offer comprehensive training in this area.

Employee Assistance Program (EAP)

EAPs offer professional and confidential counseling to employees on a wide variety of personal concerns, including substance abuse. Costs can be less than \$50 per employee per year. Many health plans now provide employee assistance counseling. Through an EAP, businesses demonstrate a commitment to helping employees with substance abuse issues and strengthen their legal positions.

Employer savings from EAPs derive from the early contact and treatment they offer troubled employees. Later incidences of absenteeism, employee turnover, and workers' compensation costs are avoided.

The U.S. Department of Labor reports that for every dollar invested in an EAP, employers generally save anywhere from \$5 to \$16.¹⁷ Most of the published research reports similar positive ROI for EAPs.

Testing

Alcohol and drug testing is an essential element of a drug-free workplace program. DOT, in support of mandated drug and alcohol testing in the transportation industry, publishes rules on who must conduct drug and alcohol tests, how to conduct these tests, and what procedures to use when testing. Private industry has adopted many of these protocols for its own drug and alcohol testing programs because they are clearly documented, proven in practice, and supported by program administrators.

For many businesses it will be cost-effective to outsource employee testing to companies that specialize in screening and testing services, as well as program management. Considerations for your testing program are:

- What type of testing will be performed? Options include pre-employment, reasonable suspicion, post-accident, rehabilitation, and random testing. Random testing creates a strong post-hire deterrent.

- Which substances will you test for? Alcohol most certainly and illegal drugs, as well as prescription drugs, which is a rapidly growing problem.

- Who will do the testing, where, and how?

Conclusion

There is no doubt that productivity and health care costs are negatively impacted by both episodic and chronic heavy drinking. The evidence is also compelling that workplace alcohol testing and EAPs reduce the negative outcomes of problem drinking. Common sense also supports the notion

that a drug-free workplace is good for employee morale and retention. **OHS**

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Drug Testing Promotes Workplace Safety

An effective drug testing program promotes a safe, productive workplace in addition to a multitude of other benefits, according to a recent industry poll. This article explores the many advantages of employee drug testing and illustrates how a program's effectiveness is directly impacted by quickly evolving industry trends and federal testing legislation.

How Effective is Drug Testing?

Employment drug testing is a powerful risk tool that provides far-reaching organizational benefits. In addition to promoting a safer, more productive workplace, it can help to decrease employee turnover and absenteeism, reduce employer risk, and lower workers' compensation incidence rates, according to Drug Testing Efficacy 2011, a recent poll conducted by The Society for Human Resource Management (SHRM) and the Drug and Alcohol Testing Industry Association (DATIA). The poll, one of the most comprehensive and current surveys regarding drug testing available today, questioned employers ranging from 500 to 2,500 employees, most of which were publicly owned, for-profit organizations. The following key questions were answered:

■ **What percentage of organizations conducted pre-employment drug testing in 2011?** More than half of the organizations (57 percent) indicated they conduct drug testing on *all job candidates*. More than one-quarter (29 percent) of the organizations do not have a pre-employment drug testing program.

■ **Is there a connection between drug testing programs and absenteeism?** Yes. In organizations with high employee absenteeism rates (more than 15 percent), the implementation of a drug testing program appears to have an impact. Nine percent of organizations reported high absenteeism rates (more than 15 percent) prior to a drug testing program. Only 4 percent of organizations reported high absenteeism rates after the implementation of a drug testing program, a decrease of approximately 50 percent.

■ **Are workers' compensation incidence rates affected by drug testing programs?** Yes. In organizations with high workers' compensation incidence rates (more than 6 percent), the implementation of a drug testing program appears to have an impact. Fourteen percent of organizations reported high workers' compensation incidence rates prior to a drug testing program, whereas only 6 percent of organizations reported similar rates of workers' compensation after the implementation of a drug testing program, a

decrease of approximately 50 percent.

■ **Do drug testing programs improve employee productivity rates?** Nearly one-fifth (19 percent) of organizations experienced an increase in productivity after the implementation of a drug testing program.

■ **How much of an impact do drug testing programs have on employee turnover rates?** Sixteen percent of organizations saw a decrease in employee turnover rates after the implementation of drug testing programs.

■ **Do multinational organizations apply similar drug testing protocols/policies in the United States and globally?** Nearly three-quarters (72 percent) of organizations with multinational operations indicated that all, almost all, or some of the same protocols/policies are applied while conducting drug tests outside the United States.

Maintaining Program Efficacy

There are many types of drug testing programs, ranging from those regulated by the U.S. Department of Transportation (DOT) to privately developed and managed programs. However, in order to create the most appropriate and effective testing program, you must first understand what's happening in the industry.

The drug testing industry was born 30 years ago, after the launch of federal drug testing requirements in the 1980s, but a lot has changed in 30 years. The types of drugs being abused are quickly evolving, and so are the abusers.

■ While marijuana is still the number one most-abused drug globally, prescription drugs have moved into second place, overshadowing cocaine. Technology has played a big role in these changes. For example, the street distributor has morphed into the Internet distributor, making it easier than ever to access prescription medication without ever visiting a doctor.

■ The use of pill mills – clinics, doctors, or pharmacies that are prescribing large amounts of prescription medication for non-medical use – is also becoming prominent in the United States, prompting abusers to travel across state lines to access these mills.

In step with these trends, new federal legislation and program guidelines are also appearing. For example, in addition to standard illicit drugs, prescription medication and designer drugs must now be considered for testing. Just two years ago, in October 2010, DOT expanded its standard test panel to include Ecstasy as part of the amphetamines drug panel and also lowered cutoff levels of testing for amphetamines and cocaine, with programs now seeing an increase in positives for both categories.

Now, the U.S. government is enhancing its program even further. A breakthrough this year has been the approval by the U.S. Department of Health and

Human Services of the recommendations made by the Drug Test Advisory Board (DTAB), which include testing for synthetic opiates such as hydrocodone and oxycodone, also known as Vicodin or Oxycontin, by their brand names. Additionally, DTAB recommended using oral fluid testing as an alternative testing method. The process for DOT to implement these recommendations still could take years, but this is a big first step in modifying the federal drug testing program, one that provides guidance on potential drugs you can test for within your own program.

Designer drugs such as synthetic marijuana and synthetic amphetamines are also on the federal government's radar. These drugs are manufactured and marketed in such a way as to avoid legal roadblocks to distribution, which makes testing for them difficult and expensive. President Obama signed the Synthetic Drug Abuse Prevention Act of 2012 into law on July 9, 2012, as part of S. 3187, the Food and Drug Administration Safety and Innovation Act. The legislation bans synthetic compounds commonly found in synthetic marijuana ("K2" or "Spice"), synthetic stimulants ("Bath Salts"), and hallucinogens by placing them under Schedule I of the Controlled Substances Act.

This new law will make it easier for law enforcement agencies to take action against the manufacturers, importers, and sellers of these products. While this represents progress in the battle against synthetic drugs, authorities must continue to monitor and update the list of prohibited substances as manufacturers modify the composition

of the drugs to circumvent legislation. Some employers have begun testing for these types of drugs in reasonable cause situations.

While DOT and most non-regulated employers test a standard five-panel, these changes in prescription and designer drug abuse are creating a legitimate opportunity for employers to expand that panel to include additional drugs, like hydrocodone and oxycodone.

Conclusion

It is always recommended that employers retain internal or external legal counsel specializing in drug testing to review drug and alcohol testing laws in the states where their applicants and employees reside, and states where they have physical locations. An organization such as DATIA is also a great resource to help you stay updated on drug testing industry trends and legislation. Visit the website www.datia.org to learn more about DATIA and membership opportunities. **OHS**

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