


Alcohol and Drug Education

Supervisory Training


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Training Highlights

- Employer & management responsibilities
- Costs of drug/alcohol abuse in the workplace
- Commonly abused drugs
- Observable effects
- Signs of substance abuse
- Manager's role

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Employer Responsibility

In the workplace employers have:

- A duty to provide a safe work environment
- A right to expect employees to perform tasks in a safe efficient manner
- To comply to the DOT regulations

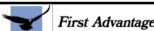
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Management's General Responsibilities

- Ensure that Company procedures and policy are followed completely and consistently.
- Take a firm position against substance abuse and effectively communicate support of a drug-free workplace.
- Be prepared to take action where there is reasonable suspicion that an employee is in violation of the Company's substance abuse policy

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The Cost of Drugs In the Workplace

Substance abuse costs close to \$102 billion annually

▪ Lost productivity	▪ High medical costs
▪ Increased absenteeism	▪ Stealing
▪ Accidents, injuries	▪ Undermined employee morale
▪ Mistakes	

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Hidden Losses

- Ineffective decisions
- Diverted supervisory time
- Friction among workers
- Damage to equipment
- High personnel turnover
- Damage to public image

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The Cost Of Alcohol Abuse First Advantage®

- DHHS Estimates Exceed \$90 Billion/Year
- Productivity Costs – Over \$27 Billion
- Accidents & Medical Costs
- Family Costs
- Other Costs

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Effects in the Workplace First Advantage®

- Workplace signs of alcoholism or alcohol abuse include:
 - *Chronic lateness*
 - *Excessive absences*
 - *Decreased productivity*
 - *Poor performance*
 - *Problem interactions with others*
- Time and attendance problems and changes in performance and productivity levels cannot trigger a reasonable suspicion test

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Alcohol And Accidents First Advantage®

- 50% of all serious accidents involve alcohol
- Over 16,000 highway deaths and 500,000 injuries annually
- Drunk driving is the nation's most frequently committed violent crime

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Commonly Abused Drugs First Advantage®

- Amphetamines (amphetamine & methamphetamine)
- Cocaine
- Marijuana
- Phencyclidine (PCP)
- Opiates (morphine, codeine, and heroin)

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Amphetamines First Advantage®

- Amphetamine (speed, uppers) or methamphetamine (ice, crystal meth)
- Used for weight loss, increased energy and wakefulness
- Vicks inhaler can cause positive lab test, but additional analysis can rule out Vicks as cause
- Prescription amphetamines used for treatment of:
 - *Narcolepsy*
 - *ADD*
 - *Parkinson's*
 - *Depression*
- Detected in urine 1-3 days after use

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Observable Effects First Advantage®

AMPHETAMINES — Possible signs of use include:

- *Hyperalertness*
- *Hyperactivity*
- *Talkativeness*
- *Mood elevation*
- *Exhaustion*
- *Loss of appetite*

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Cocaine



- Benzoyllecgonine is metabolite tested
- Used as local anesthetic (e.g. TAC) and in some dental and facial surgeries
- Detected in urine 1-3 days after use

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Observable Effects

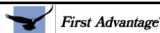


COCAINE — Possible signs of use include:

- *Dilated pupils*
- *Dry mouth or nose*
- *Excessive restless activity*
- *Lack of interest in food or sleep*
- *Euphoria*
- *Irritability, argumentativeness, nervousness*
- *Runny nose, cold or chronic sinus/nasal problems, nosebleeds*
- *Talkative – but conversation often lacks continuity, subject change very rapidly*

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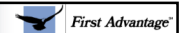
Marijuana



- Delta-9-THC is metabolite of marijuana and cannabis
- Pharmaceutical THC (Marinol) is prescribed for cancer and AIDs patients
- Passive inhalation cannot cause a positive test
- DOT does not accept “medical marijuana use” as a legitimate medical explanation for a THC positive test
- Urine detection period – no more than 30 days; usually 3-5

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Observable Effects

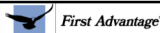


MARIJUANA — Possible signs of use include:

- *Rapid, loud, talking and bursts of laughter in early stages of intoxication*
- *Sleepy or stuporous behavior in later stages*
- *Forgetfulness in conversation*
- *Reduced concentration and coordination*
- *Inflammation (redness) in whites of eyes*
- *Distorted sense of time*
- *Hunger (“munchies”)*
- *Distinctive odor on clothes, hair, etc.*

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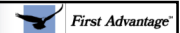
PCP



- Powerful hallucinogen
- No legitimate medical explanation
- Detected in urine up to 1 week after use

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Observable Effects



PHENCYCLIDINE (PCP) — Possible signs of use include:

- *Unpredictable behavior, with mood swings from passiveness to violence for no apparent reason*
- *Disorientation with agitation and violence if exposed to excessive sensory stimulation*
- *Severe confusion*
- *Fear or terror*
- *Distorted perceptions of sights and sounds*
- *Hallucinations*

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Opiates



- Codeine/Morphine/Heroin (6AM) detected
- Narcotic class drugs
- Used medically for pain; codeine used in cough syrups
- Foods containing poppy seeds may produce morphine in urine specimen, but rarely above 2000 ng/mL cut-off level
- Codeine metabolizes to morphine
- Heroin has no approved medical use
- Detected in urine 1-3 days

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Observable Effects



OPIATES — Possible signs of use include:

- *Impaired coordination*
- *Physical fatigue*
- *Going back and forth from alert to drowsy*
- *Scratches frequently*
- *Constricted pupils that fail to respond to light*
- *Vomiting, nausea*
- *Cold, moist sweat or "gooseflesh"*

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Effect of Alcohol



- Alcohol is a drug
- Alcohol acts as a stimulant
- Alcohol's overall effect is a sedative or depressant
- Alcohol's effects vary from individual to individual
- Alcohol's effects on an individual vary from occasion to occasion
- One drink metabolizes in approximately 1 1/2 hours for a 160 lb person
- The higher the BAC, the more pronounced the effects of alcohol

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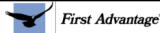
Alcohol Facts



- BAC is based on individual's body weight, amount of alcohol consumed, and the time period over which it was consumed
 - *A 160-lb. person metabolizes approximately 1½ drinks per hour, or BAC decreases at a rate of 0.015 per hour*
- One Drink-alcohol content equivalents
 - *12 ounces of beer*
 - *4½ ounces of wine*
 - *1 to 1½ ounces of 80-86° liquor*
- Alcohol concentration is measurable during absorption, peak, and elimination phases

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Alcohol Concentration



Factors That Determine Alcohol Concentration in Blood/Breath-Summary:

- Size/weight of the drinker
- Amount and speed of drinking (drinks consumed per hour)
- Absorption rate (e.g. gender differences, food intake, carbonation, etc.)
- Rate of metabolism & elimination (gender differences, liver function, smoking, etc.)

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Discussion:

- Part of brain with different responses to alcohol
- General slowing of various functions, some earlier than others



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Mental Functions



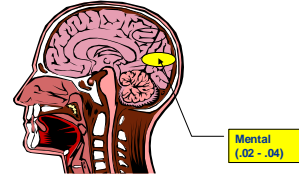
- Mental capacities affected by alcohol use include:
 - *Judgment*
 - *Decision making skills*
 - *Memory*
 - *Computation*

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Mental Functions

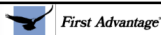


- Cognitive functions are first effected
- Individual is unaware of impact at low levels (.02-.04)
- Judgement, computation, short term memory retrieval



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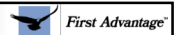
Sensory Functions



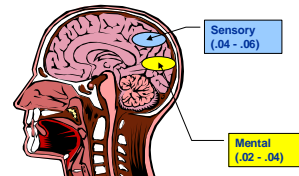
- Alcohol affects sensory perception:
 - *Vision - decreased object tracking, night an peripheral vision background*
 - *Hearing - diminished acuity, ability to sort background noise*
 - *Smell - decreased sensitivity and selectivity*
 - *Taste - decreased sensitivity and selectivity*

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Sensory Functions

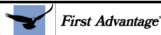


- Sensory functions effected as low as .04 BAC
- Auditory and acuity decreased
- Peripheral vision field decreased
- Taste and smell less discriminatory



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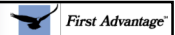
Psychomotor Functions



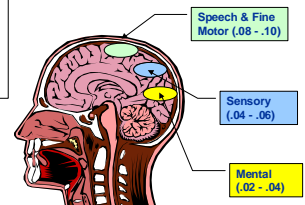
- Speech is one of the earliest motor skills to be affected
- Speech changes may include over-enunciation, slurring, or exaggerated speech patterns
- Coordination, reflexes and fine motor dexterity are diminished
- Reaction times are slower, movements appear delayed or retarded

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Psychomotor Functions



- Speech is the first of the motor skills to be effected
- Fine motor skill impairment
- Eye hand coordination
- Field Sobriety Test - designed to test cognitive and motor function

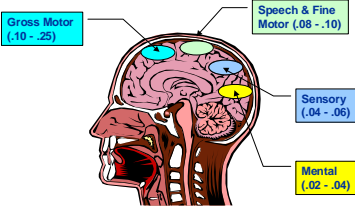


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Psychomotor Functions

First Advantage

- Gross motor skills are one of the last categories of functioning to be effected
- Most noticeable area is gait
- Head movements, spatial relationships and torso movements are effected

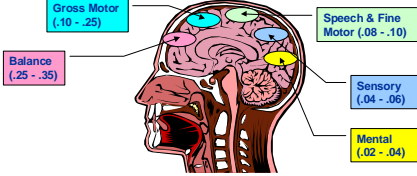


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Psychomotor Functions

First Advantage

- Balance is controlled by the inner ear
- Alcohol intoxication vertigo (room spin)
- Nausea and vomiting

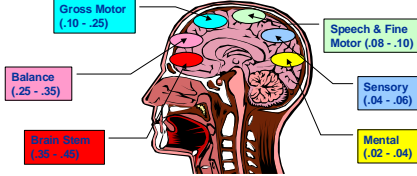


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Psychomotor Functions

First Advantage

- Brain stem involvement
- Slowing of autonomic nervous system functions
- Coma (respiratory and cardiovascular function depressed)
- Death (respiratory and cardiovascular systems failure)



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Alcohol Odor

First Advantage

- Alcohol beverages have a characteristic, distinct odor
- Odor of alcohol persists on the breath following alcohol use
- Individuals often try to mask the odor by using breath fresheners

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Signs and Symptoms

First Advantage

- Many signs and symptoms of alcohol misuse can be due to other causes
- A good "rule of thumb" is to document two symptoms
- Odor of alcohol on breath is the most definitive sign of recent alcohol use


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Observable Effects

First Advantage

Alcohol Summary:

- Odor of alcohol on breath
- Impaired balance; poor coordination
- Confusion or inability to concentrate
- Sleepy behavior
- Slurred speech
- Red eyes, difficulty focusing



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Signs of Substance Abuse



CATEGORIES:

- Conduct/performance
- Appearance
- Behavior



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Signs:



Conduct/Performance

- Inability to complete tasks
- Inconsistent work quality
- Poor quality work; frequent errors or sloppy work
- Difficulty following instructions or procedures
- Inability to focus



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Signs:



Attendance

- Tardiness
- Extended lunch time
- Abuse of leave / Unscheduled leave
- "On the job" absenteeism
- Patterns of absenteeism
 - *i.e. Mondays, Fridays, etc.*
- Extended weekends



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Physical Signs:

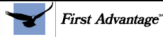


Appearance

- Tiredness, exhaustion; or restlessness, hyperactivity
- Slurred speech or pressured, rapid speech
- Drowsiness, agitation, hyper-alertness
- Unsteady gait, pacing, poor coordination
- Disheveled or messy appearance
- Odor of alcohol/marijuana on breath/body

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Physical Signs:



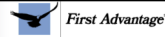
Eyes/Facial

- Bloodshot or red eyes; tearing
- Difficulty focusing
- Dilated (open, large) pupils or constricted (closed, small) pupils
- Hyper-sensitivity to light
- Blank stare
- Droopy eyelids
- Involuntary eye movement (flutter, tics)



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Physical Signs:



Speech

- Uncontrolled volume
- Uncontrolled talkativeness
- Incomplete verbal responses (does not finish thoughts or sentences)
- Slurred speech
- Rapid, pressured speech
- Silence, failure to respond to others



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Physical Signs:



Movement/Coordination

- Poor coordination
- Muscle twitches
- Staggeres or sways
- Insensitivity to pain or injury
- Exaggerated or depressed reflexes
- Appears unusually “slowed-down” or “speeded-up”



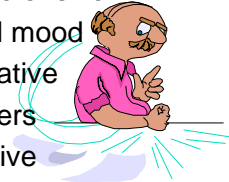
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Signs:



Behavioral

- Uncooperative, rude or insubordinate
- Physical/verbal threats or assault
- Overly sensitive or defensive
- Euphoria or elevated mood
- Irritable or argumentative
- Disruptive to coworkers
- Restless or hyperactive



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Signs:



Cognitive

- Short attention span
- Confusion
- Disorientation to time and place
- Memory loss



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Drug Paraphernalia

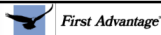


- Roach Clips, Rolling Papers
- Glass Vials, Pipes, Razor Blades, Syringes, Spoons
- Unlabeled Substances or Substances Not in Their Original Containers
- Ordinary Objects Made Into Drug Paraphernalia
 - (Example: Ball Point Pens Made Into Pipes)

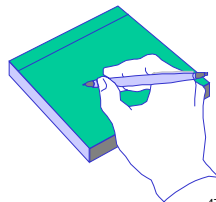


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Manager's Role

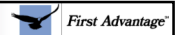


- Step 1: OBSERVE
- Step 2: DOCUMENT
- Step 3: REPORT CONCERNS



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Guidelines for Documentation



DO

- Be specific. Write down the exact:
 - Circumstances
 - Location of incident
 - Phrases/words used
- Include examples of employee's behavior, conduct & appearance that are not available on the checklist.

DON'T

- Diagnose or accuse.
- Write about “hunches.”
- Include “hear-say” information.

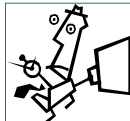
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Observed Behavior Documentation



Example for observed walking:

“Joe Smith could not walk in a straight line. He weaved from side to side, bumping into the aisles and knocking over products. He also stumbled several times for no apparent reason.”



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Sample of Poor Documentation

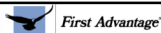


“Some man in a blue truck dropped Gail off this morning. He wasn't her husband. Gail was inappropriately dressed for work. She had whiskey on her breath.”



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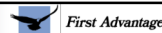
If You Have Concerns About an Employee



Contact Your Human Resources Department

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Checking Yourself:



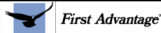
Did You Remember to.....?



- Focus on observable facts not hunches?
- Document all necessary information?
- Avoid diagnosing, labeling, or accusing?
- Respect the employee's privacy?

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Management Pitfall #1:



Not Knowing the Policy

DO

- Read the company drug policy
- Refer to it before taking action
- Treat ALL your employees fairly and consistently

DON'T

- Let your own biases dictate your actions
- Make exceptions to the policy
- Guess at what to do
- Follow the procedures inconsistently

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Management Pitfall #2:



Violating the Right to Privacy

DO

- Tell ONLY those people directly involved (manager, supervisor, or HR)
- Be discreet about the situation & refer only to work performance

DON'T

- Tell co-workers of R/S testing situation
- Say, “Bob has some problems & had to be tested.”
- Access personal prescription or medical records

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Co-worker Liability

DO

- Protect Your Other Employees
- Encourage Employees to Talk to Their Supervisor

DON'T

- Ignore the problem or think you are not responsible:
- You WILL be held accountable for the safety of your other employees.



- Confidential
- No cost to employees
- Professional

Available 24-hours a day,
7 days a week

* * *

Call First Advantage
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