



Sentinel Group Security

Alcohol and Drugs Policy

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1 Purpose

This Policy details the procedures adopted by Sentinel Group Security Ltd (SGS) to ensure compliance with employment legislation relating to alcohol and drugs in the workplace. By complying with this standard SGS ensures full legal compliance, as well as protecting the health and safety of all employees, customers, contractors and the public by providing information, guidance and support to our employees.

2 Scope

This standard applies to all employees of SGS, as defined below.

3 Contents

This standard is divided into four sections:

- A The Chief Executive Officers Policy Statement
- B The detailed Alcohol and Drugs Policy
- C The procedure for “For Cause” alcohol and drugs screening
- D The procedure for medication enquiries.

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4 Definitions

Accident / Incident	Unplanned, uncontrolled event giving rise to, or having the potential to give rise to, death, ill health, injury, damage to equipment or property or other loss. This includes events reported as “Near Miss”.
Collecting Officer	Person qualified to administer breathalyser and collect samples for drugs and alcohol testing.
Drugs	For the purpose of this Policy, a drug means an illegal drug such as heroin, cannabis/marijuana, cocaine/crack, ecstasy, amphetamines, or any other illegal or controlled drug that is defined in the Misuse of Drugs Act 1971 (as amended). This also includes prescribed medication or medication that can be purchased over the counter such as tranquillisers, antidepressants, sleeping pills, some antihistamines, medicines for coughs, colds, flu, pain killers and indigestion etc.
Employee	A person whose work is under the control of SGS, or a contractor to SGS: <ul style="list-style-type: none"> • under a SGS contract of employment, • under a contract with another organisation (such as an employment agency) for the supply of labour, • as a self employed person.
For Cause Screening	Screening to identify or eliminate either: <ul style="list-style-type: none"> • whether alcohol and/or drugs have been a contributory factor to an accident or incident, or • because of suspect behaviour or appearance which may be likely to compromise the safety of the employee or others, or • because of suspect behaviour or appearance and there are reasonable grounds to suspect the fitness of the employee.
Legal Substances	Substances that could affect a person’s ability to carry out their duties safely such as glue and solvents.
Line Manager/Supervisor	The manager/supervisor with direct responsibility for an employee.
OHA	The currently contracted Occupational Health Advisor to SGS: or their appointed sub-contractor, such as, a sample collecting agency, or an alcohol and drugs screening agency. The Health Care Contractor must either have a laboratory accredited to ISO17025 by UKAS or use a sub contractor for the work with

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	that accreditation.
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Positive Screening Result	<p>For the purpose of this document, this means that testing for drugs or alcohol shows:</p> <ul style="list-style-type: none"> a) the presence of drugs for which there is no legitimate medical need for either their use or the quantity of their use and/or b) More than 29 milligrams of alcohol in 100 millilitres of blood (the Blood Alcohol Concentration Level) and/or c) More than 13 micrograms of alcohol in 100 millilitres of breath and/or d) More than 39 milligrams of alcohol in 100 millilitres of urine <p>The Blood Alcohol Concentration Level is equivalent to the quoted measurements of the breath sample and urine sample results.</p>
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Safety Critical Post	<p>Any post that carries out Safety Critical Tasks, and other posts that:</p> <ul style="list-style-type: none"> • set or monitor standards of persons undertaking Safety Critical Work • provide information / advice essential to the safe operation or maintenance of any given site • set or monitor training standards for persons who undertake Safety Critical Work • take into service or give final approval for new technology, or systems design • sign-on safety critical workers for duty • drive any motor vehicles upon their place of work • operate / maintain passenger lift / escalators • directly supervise person(s) undertaking safety critical work • undertake specific safety related statutory duties on behalf of SGS
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<p>Safety Critical Task</p>	<ul style="list-style-type: none"> • Any work affecting or controlling the movement of any vehicle on site (such as: personal vehicles, company vehicles, construction / contractors vehicles or conducting another driver, whilst parking or manoeuvring) • Maintenance, repair, modification or alteration to any part of the physical or perimeter security that is not subject to a final check or third party testing by a technically competent person • Blocking access / egress points, ensuring competent operation and serviceability of all barriers, gates and bollards, isolating power supplies • in relation to training, any practical training or the supervision of any such training in any of the tasks set out above which could significantly affect the health or safety of those involved
<p>Safety Critical Work</p>	<p>means any safety critical task carried out by any person in the course of their work or voluntary work on or in relation to a transport system</p>

5 References

- The Misuse of Drugs Act 1971
- SGS Disciplinary Procedures
- SGS Employee or Self Employed Staff Handbook
- SGS Business Compliance Manual

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Section A

SGS

Drugs and Alcohol Policy Statement

Sentinel Group Security Ltd (SGS) has a zero tolerance to any use of alcohol or drugs in the workplace, which imports unacceptable risks to the safety of employees, customers, other colleagues and the public.

SGS shall take appropriate measures to ensure that no employee, or contractor reports for duty or tries to report for duty while unfit because of alcohol, drugs or substances of abuse or consumes or uses them while on duty.

The Company is resolute to complying with all relevant and current legislation in relation to alcohol and drugs. The Policy applies to all SGS employees and a breach of the Policy will almost always result in disciplinary proceedings and may result in a criminal prosecution. A screening programme is in place to ensure compliance with this Policy.

The Company recognises that there is a growing trend in society for the misuse of alcohol and the use of drugs. We have a rehabilitation programme available for any employee who has or develops a problem with alcohol and or drugs. However this help is to be sought at the earliest opportunity and it is not acceptable to disclose a problem if a screening is impending or as a result of screening.

I am committed to the success of the Alcohol and Drugs Policy and require your commitment also.

Zafar Choudhry

Chief Executive Officer

11th September 2017

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- C6.8 Should the Collecting Officer be required to take samples from an individual in a hospital, or in police custody, they are to be accompanied by the person in charge, whose responsibility it is to liaise with the hospital doctor, or police personnel to gain permission to collect samples.
- C6.9 Occasionally the Collecting Officer will not be required to carry out a breath test, or collect a sample, as the police will have taken sole control of the situation. In these circumstances the person in charge is to sign a form provided by the sample collecting officer to prove their attendance only.
- C6.10 If the employee refuses to give a sample the Collecting Officer shall ask them to sign a declaration to this effect. If they refuse, the person in charge is to sign a declaration that the individual refused both to supply a sample, and to sign a declaration to this effect. This is to be counter signed whenever possible by a non-involved third party and the employee is to be advised that they will face disciplinary proceedings and all available evidence will be used to determine if the policy has been breached.
- C6.11 The Collecting Officer shall collect samples through the following process:
 - a) administer Breathalyser and obtain a urine sample
 - b) The Collecting Officer performs a calibration check on the breathalyser and then takes an initial breath sample. If the Breath Reading is positive in terms of this standard (more than 13 micrograms of alcohol in 100 millilitres of breath), the Collecting Officer is to take a second Breath Sample for confirmation. This is to be done after the Breathalyser has cleared itself and ready to accept a second breath sample
 - c) the second reading is to be taken as the definitive result, and shall be verbally advised to the person in charge. Should circumstance permit, a copy of the Breathalyser result is to be made and the copy retained by the person in charge. The Collecting Officer shall retain the original.
 - d) in the event of equipment failure, the urine will be tested for alcohol
 - e) if the Breath Reading result is not a positive screening result, a urine sample shall also be taken for analysis. If the urine sample shows a level in excess of 39 milligrams of alcohol in 100 millilitres of urine the result shall be treated as a positive test for alcohol. If drugs other than declared medication or any other substance of abuse are detected the result shall be treated as a positive test for drugs.
- C6.12 Once all necessary samples have been collected the “For Cause” forms are to be completed, ensuring that the job reference number is present.
- C6.13 The person screened is to be removed from duty pending the screening results.
- C6.14 The person in charge is to arrange for the Collecting Officer to be escorted with the samples to their transport, or a place of safety, as circumstances dictate.
- C6.15 If there is any doubt as to the tested person’s ability to return home safely, arrangements should automatically be offered to have the person accompanied to their home.
- C6.16 It is accepted that some items of information may not be readily available to the person in charge (such as the National Insurance number of the person to be tested). These missing details are to be completed by the person in charge at the earliest opportunity.

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C6.17 A copy of the “For Cause” forms are to be sent to the OHA at the earliest opportunity, to ensure the results are distributed accurately and promptly.

C7 Results of “For Cause” Screening

- C7.1 Results of the Breathalyser test are to be notified to the person in charge verbally on completion of sample collecting. All other results are to be reported to the OHA, who shall in turn pass them to the nominated person(s) on the form, and others as may be required by the service contract.
- C7.2 Negative results shall be passed to the OHA for forwarding on within 24 hours. This timescale may be extended at weekends and bank holidays.
- C7.3 Urine samples that initially test positive shall go on for further tests to confirm the original result, and to eliminate a false positive caused by medication. This additional testing may take up to a further 5 working days.
- C7.4 If any other organisation initiates a “For Cause” screening of a SGS employee; SGS shall only be informed of the results in a timely manner if details of who to inform within SGS are included in the documentation.
- C7.5 It is therefore very important for an employee who is called-out to incidents involving other organisations to liaise effectively with them, particularly where the sharing of information and services is mutually beneficial.

C8 Performance of Contract for “For Cause” Screening

- C8.1 The HR Manager is responsible for managing the contract with the OHA. The OHA is responsible for managing any contracts with sub-contractors for screening and sample collection services.
- C8.2 To assist the HR Manager, and the OHA, in the management of these contracts a questionnaire.
- C8.3 Following a “For Cause” screening, the person in charge of the screening results is to complete the questionnaire, and send it to the HR Manager.
- C8.4 Feedback on all call-outs is welcome, as this is valuable information for assessing contract performance.

Section D - Procedure for Medication Enquiries

D1 Introduction

- D1.1 All employees engaged on safety critical tasks are required to inform their Line Manager or supervisor whenever they have been prescribed medication, or a pharmacist has advised them to take a particular medication, or they are taking an “over the counter” medication regardless of whether there is reason to believe that adverse effects may arise. Any medication that has been prescribed or bought over the counter may have an adverse effect on an individual.
- D1.2 Reason to believe adverse effects may arise include:
 - when warned of adverse effects by a medical practitioner, pharmacist or nurse
 - when a warning is on the medication labelling, or is included with the medication
 - from previous experience with the product
- D1.3 Adverse effects include (not an exhaustive list):

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- drowsiness
- dizziness
- impaired concentration
- nausea
- vomiting
- impaired vision

- D1.4 Employees are required to find out about the likely adverse effects of medication, and to request medication free of adverse effects and to advise their medical practitioner or pharmacist of the nature of their duties.
- D1.5 When advised by an employee that he / she is taking prescribed or over the counter medication the Line Manager / Supervisor is to check with the OHA by completing Appendix A to ensure that the medication is compatible with the employee’s duties through the following procedure:-.

D2 Procedure

- D2.1 The manager / supervisor is to complete the form at Appendix A and contact the OHA for advice and employees are not allowed to start work until their manager / supervisor has received advice from the OHA on the nature of the medication / product. The completed form shall be signed by both the manager / supervisor and the employee and filed on the employee’s personal file. The contact telephone numbers for during, and outside, office hours are held with SGS Control Room/Help Desk and are updated whenever necessary. The details OHA require are:-
- name of medication
 - level of dosage
 - frequency of dosage
 - reason for taking the medication
- D2.2 Outside office hours it may be necessary to give the OHA telephonist the manager’s or supervisor’s contact telephone number, and details of the medication or product, and await the OHA to return the call.
- D2.3 If the OHA request the employee to be referred to them, this must be done as a matter of urgency and the employee to be removed from safety critical work (if applicable).
- D2.4 If advice is received that the medication or product may have adverse effects that lead to the employee being temporarily unfit, the following action is to be taken:
Safety Critical work - the employee shall be removed from all safety critical work with immediate effect. They may be found other work that is not safety critical, which may include working in a safety critical post providing that no safety critical work is undertaken (e.g. they may work in an advisory capacity only). The performance of the employee shall be monitored.
Non-Safety Critical Work - the performance of the employee shall be monitored.
- D2.5 If there is no work available that is not Safety Critical Work, then the Senior Manager, or Duty Manager or Human Resources Manager is to be contacted for advice.
- D2.6 If any doubt remains about the employee’s expected performance, the employee is to

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be referred to the OHA.

Appendix A - Notification by an Employee engaged on safety critical work of the Use of Medicines (Prescribed or Non Prescribed)

ADMISSION AND DECLARATION BY AN EMPLOYEE OF THE USE OF MEDICINES (Prescribed or Non-prescribed)	
Employee's name (in full):	
Job Title:	
Location:	Department / Function:
Medicine details:	

(a)	Prescribed /
Quantity / day Duration (days) Non-prescribed * Side effects:	
(b)	Prescribed /
Quantity / day Duration (days) Non-prescribed Side effects:	
(c)	Prescribed /
Quantity / day Duration (days) Non-prescribed Side effects:	
Reason for taking medicine(s):	

Declaration by Employee	
I, the undersigned, acknowledge that the information given is to the best of my knowledge, and that the information will only be used in the strictest confidence. I consider myself fit for duty.	
Signature:	Date:
Manager / Supervisor	
I have spoken to the above named and am satisfied that they are fit / not fit * to continue Safety Critical Work. This decision is made by myself / Local Manager * on advice from Human Resources / Safety and Environment / Occupational Health Advisor *	
Name of Manager / Supervisor * :	
Signature:	Date:
Declaration by Employee following Consultation	
I, the undersigned, confirm that my manager / supervisor * has spoken to me, and I agree with the decision reached.	
Signature:	Date:
* delete the non-applicable words	

Appendix B - “For Cause” Screening Questionnaire

“FOR CAUSE” SCREENING QUESTIONNAIRE
<u>CONFIDENTIAL - FOR SGS USE ONLY and to be completed by the Line Manager/Supervisor</u>
Department:
Contact address:
Telephone number:
Date of screening:
Location of screening:
1. What time was the initial call to the SGS Control Room/Help Desk made?
2. Were there any difficulties passing the message? If ‘Yes’, what were they?
3. At what time did the sample collecting officer arrive?
4. Did the sample collecting officer report any difficulties locating the site? If ‘Yes’, what were they?
5. Was the sample collecting officer adequately briefed prior to arrival? If ‘No’, what problems did this cause?
6a. How long did the sample collecting take?
6b. In your opinion, was this too long? If ‘Yes’, why?
7. Were there any problems with the employee whilst waiting to be screened? If ‘Yes’, please give details:
8. Were there any problems with the Breathalyser? If ‘Yes’, please give details:
9. Were there any problems collecting urine samples? If ‘Yes’, please give details:
10. Were there any problems in completing the paperwork? If ‘Yes’, please give details:
11. Did the sample collecting officer adequately brief the employee? If ‘Yes’, please give details:
12. What time did the sample collecting officer leave?
13. Were any other problems experienced? If ‘Yes’, please give details:

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14. Was this your first experience of the screening process?
15. What were your general impressions of the process?
16. Have you any suggestions on improving the process?
Signature: Date:
Job Title:
<p>Thank you for completing this questionnaire. Please send this in a sealed envelope marked 'Confidential' to: Human Resource, Sentinel Group Security Limited, Sentinel House, 36 Oakwood Hill, Industrial Estate, Loughton, Essex, IG10 3TZ</p>

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