

Drug-Free Workplace

By Gretchen Palmer

Safety Pages for Owners / Supervisors

While an anti-drug and alcohol policy is not a requirement for employers, some statistics may give employers reason to establish, in writing, a policy prohibiting the use of alcohol and illegal drugs during or before work time.

- Nationally, 10 to 23 percent of the workforce is estimated to abuse drugs. In Oregon, drug abuse rates are 20 to 30 percent.
- Seventy-five percent of substance abusers are employed, and 75 percent of those use drugs on the job.
- Abusers work at only 67 percent of their potential, and use 3 times more sick leave than nonusers.
- Abusers are 4 times more likely to be involved in an accident, and are 5 times more likely to file workers' compensation claims.

ELEMENTS OF A DRUG-FREE WORKPLACE POLICY

1. Establish in writing a policy that prohibits employees from using, selling, possessing or being under the influence of alcohol or illegal drugs on work premises or during work time.
2. Any violation will result in immediate disciplinary action, which may include termination.
3. Require applicants for employment to take and successfully pass a pre-employment screening test for illegal drugs and alcohol as a condition of employment. (Remember that the job offer must be made first.)
4. The policy should include screening tests for alcohol and illegal drugs upon reasonable suspicion or immediately after an accident has occurred. Periodic random testing may also be beneficial in many workplaces.
5. Employers may provide the opportunity for assistance for drug or alcohol abuse through employee assistance programs.

FOR MORE INFORMATION, CALL YOUR WORKERS' COMPENSATION CARRIER OR:

National Clearinghouse for Alcohol & Drug Information (877) 726-4727
www.samhsa.gov

Oregon Business Council (Portland) (503) 595-7616
<http://www.orbusinesscouncil.org/>

By Doug Plemons, LCC BW Insurance:

OREGON Workers' Compensation State law **denies workers' compensation benefits** when an employer shows... "the major contributing cause of which is demonstrated...the injured worker's consumption of alcoholic beverages or the unlawful consumption of any controlled substance, unless the employer permitted, encouraged or had actual knowledge of such consumption." ORS § 656.005(7)(b)(C)

OREGON Unemployment Compensation State law **denies unemployment compensation benefits if the employee is discharged for failing to comply with a reasonable drug-free workplace policy which may include drug testing.** ORS §657.176(2)(g) (Supp. 1998) and OAR 471-030-0036, 471-030-0130, 471-030-0135, 471-030-0140, 471-030-0145 (1999). Ref: <http://www.leg.state.or.us/ors/>

OREGON Drug Testing The state's drug testing law permits all types of drug testing, but does require that all tests be analyzed at state-approved laboratories and in accordance with specific provisions. ...**Requires private employers with public improvement contracts to "demonstrate that an employee drug testing program is in place."** ORS §279C.505 (2007). Ref: <http://www.leg.state.or.us/ors/279c.html>



regulations or standards. The Members remain responsible for their own operations, safety practices and procedures and should consult with legal counsel as they deem appropriate.

The information we provide is not intended to include all possible safety measures and controls. In addition, the safety information we provide does not relieve the Members of its own duties and obligations with regard to safety concerns, nor does Oregon Home Builders Association guarantee to the Members or others that the Member's property, job sites and/or operations are safe, healthful, or in compliance with applicable laws,

Project Name: _____ Location: _____

Employer: _____ Supervisor: _____

Date: _____ Time: _____ Shift: _____

Number in crew: _____ Number attending: _____

Safety or Health issues discussed. Include recent accident investigations and hazards involving tools, equipment, the work environment, work practices and any Safety or Health recommendations:

Follow up on recommendations from last safety meeting:

Record of those attending:

Name: (please print)	Signature:	Company:
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

Supervisor's remarks: _____

 Supervisor: _____
 (Signature)