Drugs and alcohol policy

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This applies to every worker HIRINGUK LTD places, on every assignment, and to us. It is published rather than handed over on a first day, because the things in it that will catch somebody out are the things they need to know before they take the shift, not after.

The one that catches good people, first. It is almost never the drink on the night. It is the morning after, and it is medicine from a pharmacy. Neither feels like wrongdoing and both can end a licence. Sections 3 and 4 are the ones to read if you read nothing else.

1. The rule, in one line

Nobody starts a shift, or continues one, while unfit through drink or drugs. That is not a house rule we invented. For anybody who drives it is a criminal offence, and for everybody else it is a duty under health and safety law that falls on the worker personally as well as on us.

2. The law behind it

- Road Traffic Act 1988 section 4: driving, attempting to drive, or being in charge of a vehicle while unfit through drink or drugs. Note "in charge": sitting in the cab with the keys counts, and people are convicted on it.
- Section 5: driving or being in charge over the prescribed alcohol limit. In England, Wales and Northern Ireland that is 35 micrograms per 100 millilitres of breath. In Scotland it is 22, and a great many drivers do not know that the limit changes when they cross the border on the same trip.
- Section 5A: driving with a specified controlled drug above a specified limit. For eight illegal drugs the limits are set so low that they are effectively zero tolerance. It is a separate offence from being unfit, so it does not matter whether your driving was affected.
- Health and Safety at Work etc. Act 1974 section 2 puts a duty on an employer, and section 7 puts a duty on the worker to take reasonable care of themselves and of anybody affected by what they do.
- Misuse of Drugs Act 1971 section 8: an occupier who knowingly permits the production or supply of controlled drugs on premises commits an offence. That is why a client site takes this as seriously as we do.
- For anybody in a safety critical role, being unfit is also a breach of the duty of care that sits behind every assignment, whether or not a vehicle is involved. A reach truck at height is not a car, and it is not less dangerous.

3. The morning after, which is the one that actually happens

Alcohol leaves the body at roughly one unit an hour, and there is nothing that speeds it up. Not coffee, not a shower, not a fry up, not sleep. Sleep passes the time and does nothing else.

So the arithmetic is unforgiving. Finish drinking at one in the morning after eight or nine units, and you are not clear until nine or ten. A six o'clock start is a drink drive offence before the shift begins, and you will feel completely normal, because feeling normal and being under the limit are different things.

Work it out backwards from the start time, not forwards from the last drink. If the number is tight, it is not tight, it is a no. Ring us and we will move the shift. We would rather lose a shift than a licence, and a client who would rather have the shift is a client we will argue with.

4. Prescribed and over the counter medicines

This section exists because it is the one nobody writes down, and it ends careers.

Section 5A covers prescription medicines too, at specified limits, including amphetamines, clonazepam, diazepam, flunitrazepam, lorazepam, methadone, morphine, oxazepam and temazepam. Codeine metabolises to morphine. A pharmacy painkiller taken for a bad back can put somebody over a statutory limit without a single illegal act

anywhere in the story.

There is a statutory medical defence, and it is worth knowing exactly what it requires: the drug was prescribed or supplied for a medical or dental problem, it was taken in accordance with the advice given, and your driving was not actually impaired. Take more than prescribed, or take somebody else's, and the defence is gone.

- Ask the pharmacist the direct question: "Can I drive an HGV on this?" Not "is it strong". They answer this several times a day.
- Keep the prescription or the packet with you. If it is ever asked about at the roadside, the label is the evidence, and a label in the cab is worth more than an explanation.
- Tell us, and you will not lose work for telling us. We do not need to know your diagnosis and we will not ask. We need to know whether you can do this task safely this week. Very often the answer is yes with a different task, and that conversation only happens if you start it.
- Watch the ordinary ones. Older antihistamines for hay fever, some cough medicines and some sleeping tablets cause drowsiness that lasts into the next day.

5. Testing, and why it is not only drivers

A lot of people assume this is a lorry thing. It is not. Large warehouse and distribution sites test too, and so do manufacturers, because a reach truck at height and a press line are no kinder than a road. If you are going on a site you have not worked before, assume testing is possible and ask before the day rather than at the gate.

We do not test at random and we do not test for the sake of it. Where testing happens it is because a client's site requires it as a condition of entry, or because there is a reasonable and specific concern, or after an accident.

Saliva, not urine, and the difference matters to you

Most sites have moved from urine to an oral fluid swab, and that change is in the worker's favour rather than against.

What it finds	How far back
Saliva swab	The drug itself, so roughly what is in somebody now	Hours, and for most substances about a day
Urine	What the body made while breaking the drug down, which lingers long after any effect has gone	Days, and for regular cannabis use it can be weeks

Read that second row again, because it is the one that ends careers unfairly. Under a urine test somebody who smoked cannabis on a Friday two or three weeks ago, and who is completely unimpaired today, can still fail. Under a swab, in most cases, they will not. The swab is asking a question much closer to the only one that matters on a shift: are you fit right now?

None of which makes cannabis a free pass, and it would be dishonest to imply otherwise. It is a controlled drug, it is one of the eight on the road traffic list with a limit close to zero, and a site that finds it will act on it whatever we think. What we will not do is pretend that a positive result from three weeks ago proves anything about today. If a test result is stale and a site treats it as current, we will say so on your behalf.

- It needs your agreement, every time. A test is a medical procedure and consent is not something we take once at registration and keep for ever.
- A result is health data. It is special category data under Article 9 of the UK GDPR. We record the outcome and the date, never the detail, and it is held under the conditions set out in our appropriate policy document.
- Refusing is not the same as failing, and we will not pretend it is. But a site that requires a test as a condition of entry can refuse entry, and if that happens the assignment cannot go ahead that day. We will tell you that plainly rather than letting you find out at a gate.
- The client is told whether you are available. Nothing else. Not the reason, not the result, not the fact that a test happened.

6. What happens if somebody is not fit

- The shift stops. Immediately, and before any conversation about why. Nobody drives home. We arrange transport or a taxi, and we will argue about the cost afterwards rather than in the moment.
- We talk to you, not about you, and on another day if that day is not the day for it.
- We look for the reason before we look for a penalty. A missed medicine, a night shift rota that nobody can sleep on, a bereavement and a dependency are four different things with four different answers, and only one of them ends in the disciplinary procedure.
- If it is dependency, we will help rather than only dismiss. We will point you at your GP, at Drinkline on 0300 123 1110 and at Frank on 0300 123 6600, and we will hold a conversation about coming back. We are a small business and we cannot fund a treatment programme, and we will not pretend otherwise. What we can do is not make it worse.
- Where an assignment has to end, it ends. Safety critical work and impairment do not sit together, and we will not place somebody where the consequence of being wrong is somebody else's life.

7. Dependency and the Equality Act, because this is widely misunderstood

Addiction to alcohol or to a drug is expressly excluded from being a disability by the Equality Act 2010 (Disability) Regulations 2010, unless the addiction was originally the result of a medically prescribed drug or other medical treatment.

But that is not the end of it, and this is the part people miss. A condition caused by an addiction can itself be a disability: depression, liver disease, an anxiety disorder. And any unrelated condition somebody happens to have is protected in the ordinary way. So "it is an addiction, therefore the Equality Act does not apply" is wrong often enough that we say so here rather than working it out under pressure later.

8. Driving licences and the duty to tell DVLA

Drug or alcohol dependency, and in some cases persistent misuse, are notifiable to DVLA, and the standards are stricter for a Group 2 licence, which is what a lorry or bus licence is. The duty to notify is yours and nobody else can do it for you. Failing to notify a notifiable condition is an offence.

We will not report you to DVLA in your place and we will not threaten to. We will tell you the duty exists, because a driver who finds out about it from a court has been failed by everybody around him.

9. What we will not do

- We will not put somebody on a shift we have been told they are not fit for, whatever a client says about needing the vehicle moved.
- We will not pass a test result to a client, or to another agency, or to anybody who rings up and asks.
- We will not treat asking for help as an admission of guilt. Somebody who tells us before a shift has done the right thing, and it will be recorded as the right thing.
- We will not search anybody or their vehicle. We have no power to and we will not pretend we have.

10. Smoking, vaping and the site rules

Smoking is prohibited in enclosed workplaces and in work vehicles used by more than one person, under the Health Act 2006 and the smoke free regulations made under it. Vaping is not covered by that law, but almost every warehouse and every cab treats it the same way, and a client's site rule is a term of your assignment. If you are not sure on a new site, ask before you light anything, including outdoors, because a fuel forecourt and a food site have reasons that are not about tidiness.

11. Where to get help that is not us

- Drinkline, free and confidential, 0300 123 1110, weekdays 9am to 8pm, weekends 11am to 4pm.
- Frank, for drugs, free and confidential, 24 hours, 0300 123 6600.
- Your GP. A conversation with a GP is confidential and does not reach an employer.

- Samaritans, free, 24 hours, 116 123, if what is underneath it is not really the drinking.

None of these report to us and none of them need our permission. That is the point of listing them.

12. If it is about us

If anybody working for HIRINGUK LTD pressures a worker to take a shift they have said they are not fit for, that is a matter for the speaking up policy, and it is more serious than the original problem, not less. A shift is worth a few pounds of margin. Nothing on this page is about margin.