

AP 420 - Impairing Substances in the Workplace

Background

The Abbotsford School District is committed to providing a safe environment for its employees, students, and parents. This duty includes addressing any issue that may impair an employee's ability to perform their work responsibly. This administrative procedure establishes expectations for behaviour in relation to the use of impairing substances that could impact an employee's ability to perform their work duties safely, competently, and efficiently, consistent with their position of trust. This includes the School District's requirements regarding employee:

- Fitness for duty
- Use of impairing substance(s), and
- Disclosure of impairing substance(s) use.

Procedure

1. All employees and individuals working in Abbotsford School District (including volunteers and contractors) are expected to perform their duties safely and efficiently, without limitations related to the use of or after-effects of impairing substances.
2. An impairing substance is any substance that is ingested, consumed, or otherwise taken, that changes or negatively affects the way a person thinks, feels, or acts and includes but is not limited to alcohol, cannabis, illicit drugs, non-prescription drugs and prescribed medications.
3. The presence of illicit drugs, recreational drugs and alcohol is not permitted on any district worksite.
4. Any individual failing to adhere to the policy will be subject to discipline up to and including dismissal.
5. Managers and supervisors are required to identify and address all situations promptly where there are concerns about an individual's ability to perform his or her job safely.
6. Employees who are assessed and suspected of being impaired while at work will be sent home immediately. Transportation will be arranged.
7. The manager or supervisor is responsible for documenting incidents of suspected impairment and must report such incidents to the Human Resources Department.
8. Employees are to consult with their physician and/or pharmacist to determine if their use of any impairing substance may affect their fitness for duty or the safety of any person in the workplace.
9. Employees are required to advise their manager or supervisor about any situation that may impair their performance, compromise their safety or the safety of others.
10. Employees are required to advise their manager or supervisor in a confidential manner if they have any concerns about a colleagues' fitness for work.

11. Abbotsford School District will provide assistance to employees with issues related to substance use. Employees and family members who have substance dependence are strongly encouraged to seek assistance through the Employee Family Assistance Program (EFAP). All voluntary referrals to the Employee Family Assistance Program are kept confidential.
12. The Abbotsford School District will provide support for employees by assisting with access to confidential assessment, counseling, treatment, and after-care services.

Appendix [AP 420-1 Guidelines for Principals and Managers: Impairing Substances](#)

Reference [AP 331 – Drugs and Controlled Substance Abuse](#)

[WorkSafeBC Workplace Impairment A primer on preparing for cannabis legalization](#)

[Canadian Centre for Occupational Health and Safety, Workplace Strategies: Risk of Impairment from Cannabis](#)

[BCPSEA: Impairing Substances in the Workplace Toolkit](#)

AP 420-1 Guidelines for Principals & Managers: Impairing Substances

Incident Report			
Employee Name:			
Date of Incident:			
Description of Incident:			
Behaviour	<input type="checkbox"/> Nervous?	<input type="checkbox"/> Insulting?	<input type="checkbox"/> Sleepy?
	<input type="checkbox"/> Exaggerated politeness?	<input type="checkbox"/> Confused?	<input type="checkbox"/> Combative?
	<input type="checkbox"/> Excited?	<input type="checkbox"/> Quarrelsome?	<input type="checkbox"/> Fatigued?
	<input type="checkbox"/> Uncooperative?	<input type="checkbox"/> Poor memory?	<input type="checkbox"/> Overly talkative?
	<input type="checkbox"/> Other (please describe)		
Unusual Actions	<input type="checkbox"/> Sweating?	<input type="checkbox"/> Slow reactions?	<input type="checkbox"/> Crying?
	<input type="checkbox"/> Quick moving?	<input type="checkbox"/> Tremors?	<input type="checkbox"/> Fighting?
	<input type="checkbox"/> Other (please describe)		
Speech	<input type="checkbox"/> Slurred?	<input type="checkbox"/> Slow?	<input type="checkbox"/> Confused?
	<input type="checkbox"/> Thick?	<input type="checkbox"/> Rambling?	<input type="checkbox"/> Pressured?
	<input type="checkbox"/> Other (please describe)		
Balance	<input type="checkbox"/> Staggering or unsteady gait?	<input type="checkbox"/> Falling?	<input type="checkbox"/> Unsure?
	<input type="checkbox"/> Needs support?	<input type="checkbox"/> Stumbling?	<input type="checkbox"/> Normal?
	Other (please describe)		
Witnesses/Other Employees Involved:			
Supervisor Actions:			
Consequence:			
Planned Follow-up:			
Signature:			
Date:			