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**HEALTH, SAFETY AND ENVIRONMENT SPECIFICATION**

***Smoking, Drugs and Alcohol***

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| Document Authority | Document Custodian | Document Author |
| Dr Sulaiman Rawahi  Ref. Ind: MCC  Date: 16/09/2010 | Dr Salim Sawai  Ref. Ind: MCOH  Date: 16/09/2010 | Dr Salim Sawai  Ref. Ind:MCOH  Date: 16/09/2010 |

The following is a brief summary of the most recent revisions to this document. Details of all revisions prior to these are held on file by the Document Custodian.

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| Version 4.0 | Sep 2010 | Dr Salim AlSawai | Editorial changes, addition of Alcohol and drugs testing flow chart, creation of the consent form |
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| Version 2.0 | July 2002 | Wayne Austin  CSM/3 | Minor editorial changes. |
| Version 1.0 | Jan 2002 | Wayne Austin  CSM/3 | Initial issue. Supersedes:  Code of Practice for Smoking (July-98), including Management Circular (12/98) and Implementation Plan |

**User Notes:**

The requirements of this document are mandatory. Non-compliance shall only be authorised by MCC through STEP-OUT approval.

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# 1.0 Introduction

## Purpose

This Specification describes PDO's requirements for managing smoking, consumption of alcohol and drugs in the workplace.

## Scope

This Specification applies to all PDO, Contractors and subcontractors staff.

This Specification addresses the following:

* Smoking
* Alcohol and Drugs

## Deliverables

### Records

Records shall be maintained to document the implementation of this Specification.

### Reports

*PDO staff*: Any non-compliances with this Specification shall be notified, investigated and reported per HSE Management System Manual

*Contractors*: Any non-compliances with this Specification shall be reported to the Contract Holder.

## Responsibilities

*Line Managers* are responsible for ensuring that the activities they control are managed in accordance with the requirements of this Specification.

*Corporate Functional Discipline Heads* are responsible for ensuring that the requirements of this Specification are reflected in the documents for which they are responsible.

*Contract Holders* are responsible for communicating this Specification to Contractors, and for ensuring that the requirements of this Specification are adhered to within the scope of their contracts.

*Contractors* are responsible for ensuring that activities undertaken within the scope of their contracts are managed in accordance with the requirements of this Specification.

In the event that circumstances prevent compliance with this Specification, Asset Managers, Contract Holders and Contractors shall seek step-out approval (refer to CP 122 HSE Management System Manual – Part 2, Chapter 3).

## Performance Monitoring

Performance Indicators shall be developed and maintained to demonstrate compliance with this Specification.

## Review and Improvement

Any user of this document who encounters a mistake or confusing entry is requested to notify the Document Custodian using the form provided in CP 122 HSE Management System Manual – Part 2, Chapter 3.

This document shall be reviewed as necessary by the Document Custodian, but no less frequently than every four years. Triggers for full or partial review of this Specification are listed in CP 122 HSE Management System Manual – Part 2, Chapter 8.

## Reporting Format

*PDO Staff*:

*Number of newly discovered cases of alcohol and drugs abuse to be reported to the Chief Medical officer and the Occupational Health adviser, who should submit monthly report and update and inform line management of any non compliance with the policy or with the rehabilitation program*

*Contractors*: To report newly discovered cases as above.

# 2.0 Smoking

Cigarette smoking is the single most important cause of preventable death worldwide.

When smokers and non-smokers share the same room, non-smokers cannot avoid inhaling some of the tobacco smoke. This is "passive smoking". The smoke contains small droplets of tar together with nicotine and a wide range of vapours and gases such as carbon monoxide, ammonia, hydrogen cyanide and acrolein.

Independent scientific bodies throughout the world have concluded that passive smoking can cause lung cancer in non-smokers. Passive smoking can also result in acute irritant effects on the eyes, throat and respiratory tract and can aggravate asthma.

In recent years people have become more aware of the serious health risks faced by smokers themselves, and are increasingly concerned about the health effects and discomfort of breathing other people's tobacco smoke.

## 2.1 Requirements

A working environment shall be created whereby non-smokers are able to work in a smoke-free environment.

Smoking shall not be allowed in:

* Any indoor working environment (e.g. offices - including single-occupancy offices, meeting rooms, warehouse buildings and workshops), including toilets and washrooms
* PDO camp accommodations
* Any outdoor work-site where a potential flammability hazard exists
* Indoor seating areas of PDO restaurants and bars, whether on the Coast or in the Interior
* PDO vehicles, or aircraft and buses hired by PDO
* Airports and waiting areas

Failure to comply with the above mentioned shall be regarded as a misconduct, and shall give rise to disciplinary action ranging from warning letters to summary dismissal.

“No smoking” signs shall be displayed in all workplace buildings and at all work-sites where smoking is not permitted.

Assistance shall be provided at PDO clinics to any member of staff who requests help to give up smoking. The offered help will be in term of counseling and medications e.g Nicotine patches or chewable tablets.

# Alcohol and Drugs

* 1. **Introduction**

The abuse of alcohol, use of illegal drugs or misuse of legal drugs can impair performance at work and can be a serious threat to safety, health and environment. Excessive consumption of alcohol or drinking alcohol can be harmful. Drinking even small amounts of alcohol before, or while carrying out hazardous work tasks can impair work performance and thereby increase the risk of a workplace accident.

Alcohol is absorbed into the bloodstream within a few minutes of being consumed, and is carried to all parts of the body including the brain. It takes a person with a healthy liver about 1 hour to break down and remove 1 unit of alcohol (a unit is equivalent to 10 ml of pure alcohol and equates to approximately one half pint of beer, one measure of spirits, or one small glass of wine). Therefore if someone drinks heavily in the evening, they may still have alcohol in their bloodstream the following morning. Black coffee, cold showers and fresh air will not speed up the breakdown of alcohol - only time can remove alcohol from the bloodstream.

#### **3.2 Health Effects of Alcohol**

Alcohol reduces physical co-ordination and reaction speeds. It also affects thinking, judgment and mood, and can make a person become more aggressive. Large amounts of alcohol in one session can put a strain not just on the liver but other parts of the body as well, including muscle function and stamina. Drinking alcohol raises a person's blood pressure. This can increase the risk of coronary heart disease and some kinds of stroke. Regular, excessive drinking also increases the risk of liver damage, cirrhosis of the liver, and cancers of the mouth and throat. People who drink very heavily may develop psychological and emotional problems, including depression.

#### **3.3** **Health Effects of Drugs**

Drug "misuse" refers to the use of illegal drugs and the misuse, whether deliberate or unintentional, of prescribed drugs and substances. Drug misuse can harm the misuser both physically and mentally and, through the misuser's actions, other people. Simultaneous use of alcohol and drugs is particularly dangerous.

Drugs can affect the brain and body in a number of ways. They can alter the way a person thinks, perceives and feels, and this can lead to either impaired judgment or concentration. Neglect of general health and well-being is common among drug misusers. This may adversely influence their performance at work, even when the misuse occurs outside the workplace.

#### **3.4 Alcohol and Drugs in the Workplace**

Alcohol consumption and drug misuse can be a major problem for employers, resulting in:

* Loss of productivity and poor performance
* Absenteeism and turning to work late.
* Increased potential for workplace accidents
* Effect on team morale and employee relations
* Bad behavior or poor discipline
* Adverse affects on company image and customer relations

PDO’s approach to dealing with alcohol and drug abuse is described within this policy.

Further information for Managers and Supervisors regarding identifying symptoms of alcohol abuse or drug misuse by employees, and how to deal with these instances, is provided in the PDO booklet “Dealing with Alcohol Abuse in the Workplace.

**3.5 PDO Alcohol and Drugs policy**

* The company conducts its business against high standards of health, safety and concern for the environment. A working environment shall be created whereby alcohol or drugs usage does not threaten the safety of PDO's business, the environment and the safety or health of employees.
* Possession, distribution, sale or use of alcohol and illegal drugs, or misuse of legal drugs, on PDO's business premises shall be regarded as serious misconduct. The normal disciplinary measure for serious misconduct shall be summary dismissal. In the event that any illegal drugs are found, or illegal activity is suspected on PDO business premises the Royal Oman Police shall be contacted.
* In situations where an employee is taking prescribed drugs or medication as treatment for a health condition, the employee shall be responsible for informing the company medical adviser or direct Supervisor of any potentially impairing side effects. Failure on purpose to do so is regarded as a breach of Life saving Rules and could lead to disciplinary action.
* Employees discovered to have an alcohol/drugs dependency by means other than self-disclosure shall, depending on the circumstances, be offered assistance in accordance with the rehabilitation policy.
* Employees who drink alcohol while off-duty shall be responsible for ensuring that they allow adequate time to not be impaired by the effects of alcohol by the time they commence work.
* Inability of an employee to perform their duties through impairment by alcohol, use of illegal drugs or misuse of legal drugs shall be regarded as serious misconduct.
* If alcohol/drugs dependency is discovered as a result of a disciplinary situation, the person shall be subject to the normal disciplinary procedure. Dependency shall not be considered as mitigating circumstances in a disciplinary procedure.
* In situations where there are "reasonable grounds" for suspecting that alcohol or drugs may have been brought onto PDO's business premises, searches for alcohol and drugs shall be conducted. Failure to co-operate shall be regarded as serious misconduct.
* Alcohol and drug testing will be conducted when circumstances suggest the possibility of impairment by alcohol or drugs. Breathalyser test is the initial screening test for alcohol and confirmatory biological Alcohol/drugs tests shall be conducted by a third party according to procedures agreed to by Corporate Medical, HR and ROP and require the employees’ written consent. A positive test will be regarded as serious misconduct. Failure to cooperate or refusal to give consent to the test shall be regarded as a serious misconduct which could result in summary dismissal.
* Following all road traffic accidents, and all incidents resulting in damage to public property or personal injury, the Royal Oman Police shall be responsible for alcohol/drugs testing i.e with cause testing. There is Zero tolerance on both drugs and alcohol for any incident related test.
* The company may conduct pre-employment and random drugs and alcohol testing on selected individuals and employees must cooperate fully with this.
* Employees should give their consent on an informed basis. It is advisable to provide clear information and explanation in respect of:
  + the rationale and purpose of testing
  + the substances for which they will be tested
  + the procedure followed (chain of custody)
  + the consequence of positive test results or refusal of submission
  + their rights of access to results and to require part of the test sample to be kept to verify the results.
* In situations where the employee refuses to give consent for Alcohol or/and drugs testing, this is regarded as non compliance with the policy, and any disciplinary case arising from the incident will proceed on its merits and could result in summary dismissal.
* As part of the Alcohol and drugs testing procedure staff will be given a questionnaire to establish whether any medication that might affect the test is being taken.
* The Medical review officer is obliged to treat all medical information received in the execution of his function as medical confidential. However this confidentiality excludes the results of alcohol and drug tests in terms of positive and negative and the substance used.

**3.6 The company alcohol and drugs Rehabilitation policy:**

* The company recognizes Alcohol and drugs dependency as a treatable condition. Employees who believe they have a dependency on alcohol or drugs are encouraged to come forward in confidence to their Supervisor, or a Medical Practitioner, to seek help and support. Supervisors and line managers are encouraged to refer and report to PDO doctors for counseling and medical assistance any suspected case of alcohol/drugs abuse. Such employees will be assisted in accordance with this rehabilitation policy. Being on a rehabilitation programme does not provide an excuse for further misconduct and abuse of alcohol or drugs, which will be regarded as a disciplinary matter.
* Employees will receive advice and help from the company Medical Officer
* Assistance shall be provided by the medical department in arranging appropriate rehabilitation treatment (i.e. an individually tailored treatment plan developed by a Medical Practitioner).

* Rehabilitation options shall include:
  + Medical counseling by PDO Occupational Health adviser or Medical Officer
  + Education programmes on alcohol/ drugs abuse. Information about the adverse effects which drugs and alcohol may have on health and job performance, and the related risks to safety and the environment.
  + Professional treatment at a specialised health institution in Oman.
* Periods of absence during rehabilitation will be registered in the medical database as normal sick leave and will be treated according to prolonged Medical absenteeism policy(PMAP)
* Compliance with the rehabilitation programme shall be monitored by the Medical department.
* Employees will be given only one chance for rehabilitation and should follow the rehabilitation programme strictly and thoroughly till full recovery, during which periods of absence will be treated as sick leave. The company will not give a second chance for rehabilitation and will not support any time off for rehabilitation for the second time.

All Contractors and PDO visitors are required to comply with the smoking, alcohol and drugs policy.

**(Consequence of non compliance by contractors is the same as PDO employees but consequence of non compliance by day visitors is to be decided by HRR.**

**3.7 Dismissal will normally occur in the following circumstances:**

* Failure to cooperate with the implementation of this policy.
* Failure to comply with the appropriate recommended rehabilitation programme.s
* The use, possession, distribution or sale of alcohol by un-authorised person and illegal drugs on company business or locations.

# 3.8 Alcohol and drugs testing procedure flow chart

Direct supervisor initiate the test

(Due to abnormal behavior at work and suspicion of Alcohol and drugs abuse or with cause and in this case Policemen may also initiate the test

policemen )

PDO or contractor employee brought to the clinic, where he has to sign the consent and fill the Alcohol and drugs testing questionnaire form

PDO or contractor employee to undertake Breathalyzer test

Negative Positive

Negative

Involvement of ROP and confirmatory blood or urine test

No further action

Negative Positive

Inform the concerned employee and direct supervisor who initiated the test about the result

No further action

HR involvement to determine the appropriate disciplinary action.

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| **3.9 PDO Alcohol and drugs testing consent and questionnaire form** |
| This section to be completed by the nurse/lab staff collecting the sample  Donor’s Name:  Donor’s Company or ID number:  Date of Birth:  Gender:  Reason for collecting the sample: |
| This section to be completed by the subject donating specimens for Alcohol or/and drugs testing  This test will examine your body fluids or hair for the presence of Alcohol or and drugs. Please give details of current or recent medications:   1. Are you taking any medications at the moment including cough/flu medicines, sleeping pills, hay fever, travel sickness pills etc? If yes please give details 2. Have you taken any prescribed or un-prescribed medicines in the past 2 weeks? If yes please give details 3. Have you had any injections recently or in the past week? If yes please give details 4. Please give details of medications which you take on regular basis if any?   Name of the medicine Dosage and frequency since when(Date)  …………………………… ………………………………. …………………………….. |
| Consent to test to be filled and signed by the subject donating samples for Alcohol or and drugs testing:  I understand and fully aware that the specimen I provide will be tested for alcohol or and drugs abuse and I am fully aware of the consequences following a positive test. I hereby give my informed consent for this to be done.  Donor’s Name ……………………………………..................................... Donor’s signature…………………………….    Date and time………………………………………………………. |
| This section to be completed and signed by the nurse/lab staff collecting the specimen.  I confirm that this specimen was collected and provided by the person named above in my presence and the collected sample will be sent to the ROP lab for substance abuse testing.  Name of the Nurse/lab staff…………………………………………………………….. Signature……………………………..  Date and time………………………………………………………………………………………………. |