

Modifying Drug-Free Workplace Programs to Address Nonmedical Use of Prescription Drugs



Human resource (HR) managers know the importance of a healthy workforce that is free from drugs and alcohol. Recent studies have shown dramatic increases in nonmedical use of prescription drugs that can compromise workforce health.



This fact-sheet describes how to modify drug-free workplace programs (DFWPs) and policies to ensure they adequately address HR issues related to prescription drugs.

■ **Why should DFWPs address prescription drugs?**

Workers may use prescription drugs to get high or to self-treat a medical condition with medication prescribed for someone else or prescribed to them for an earlier problem. Especially with painkillers, they also may take a larger dose than prescribed in the hopes of increasing the therapeutic effect. Collectively, these drug-taking behaviors are referred to as nonmedical prescription drug use. These behaviors put workers at risk for potentially fatal adverse drug reactions. They also can create workplace safety hazards.

An employer may think it has no nonmedical prescription drug use problems; however, these problems often are referred to as a “hidden epidemic.” The sheer numbers of prescription users in all classes of U.S. society pose substantial risks. Prescription

drugs are the fastest-growing substance use problem in the United States. Of the U.S. workforce, 24% have used psychotherapeutic prescription drugs at least once to get high or to self-treat a medication condition without guidance from a physician or medical professional (based on online analysis of the 2013 National Survey on Drug Use and Health). Prescription pain relievers are the leading medications that are used nonmedically, but medicines used to treat anxiety, sleep, depression, and ADHD also are commonly misused.

Without medical supervision, these drugs can be deadly, especially when mixed with alcohol or other drugs. They can be equally dangerous when taken alone if the user has a preexisting medical condition that causes problems with a specific type of medication. Even taken as prescribed, some of them limit safe usage of machinery or motor vehicles.

Nonmedical prescription drug use affects business health. Evidence is mounting that it increases absenteeism, presenteeism (attending work in an unproductive haze), accidents, injuries, and addiction to illicit drugs. Nonmedical use of prescription opioids alone cost an estimated \$103 billion in 2010, including \$72 billion in medical costs, \$26 billion in work losses, and \$5 billion in criminal justice costs. Thus, it is important that employers identify and address this growing problem.

■ **Employee behaviors that may indicate a problem with prescription drugs**

Common on-the-job behaviors that may indicate a problem include the following:

- Lack of attention or focus
- Poor decision-making
- Decreasing work quality



- Poor judgment
- Unusual carelessness
- Unsteady gait
- Excessive mood swings
- Drowsiness
- Appearance of being high, unusually energetic or revved up, or sedated

Many of these signs and symptoms may come on gradually and can be difficult to spot. None of them is a definitive indicator that the person has a prescription drug problem. They do suggest, however, the potential need for HR involvement.

Employees misusing prescription drugs also might do the following:

- Continually “lose” prescriptions, requiring writing of replacement prescriptions
- Seek prescriptions from more than one doctor
- Steal, forge, or sell prescriptions
- Take higher or more frequent doses than prescribed

■ *Employer responsibilities*

Employers are responsible for protecting the safety of their employees. This responsibility includes developing and enforcing a DFWP. Contractors or grantees who must comply with the Drug-Free Workplace Act of 1988 should pay special attention to elements required by the Act. Requirements vary, based on whether the contractor or grantee files as an individual or an organization. In the future, employer drug-testing requirements may be extended to detect certain prescription drug use that could impair employees from safely performing their job duties.

■ *Steps needed to update a DFWP to address the role of prescription drugs*

Step 1: Define the employee’s role in making the workplace safe. Sometimes employees in the transportation, nuclear, construction, moving, mining, and other high-risk industries are prescribed pain relievers and other medications carrying warning labels. If the warning label states, “Avoid driving or operating heavy machinery,” the medication may make a person drowsy, dizzy, and/or lightheaded and may slow motor skills and reaction time. A DFWP should state what employees must do if they are prescribed medications that carry this warning label. Employees in safety-sensitive positions should be responsible for discussing their job duties and requirements with their medical care providers to avoid impairment.

Such discussions, documented in the medical record, are important to lessen safety risks. The DFWP also should spell out what steps will be taken if the employee is suspected of using any of these medications without a prescription, in larger doses than prescribed, or more frequently than prescribed. Those in designated drug-tested positions should have updated information regarding appropriate use of prescription drugs and consequences for nonmedical use.

Step 2: Decide if the company should add prescription drug testing to traditional illicit drug testing.

Step 3: Incorporate language that spells out new provisions of the DFWP that deal with nonmedical prescription drug use. Make sure the policy details the complete course of action the employer will follow regarding prescription drug misuse. Each employer must develop its own policies regarding how suspected nonmedical prescription drug use will be identified, evaluated, and treated; the conditions for continued employment; work and leave options; and what medical certifications are required. They must ensure the prescription drug use policy is clear, concise, yet thorough. **List procedures or corrective actions the employer will follow:**

- for an employee suspected of nonmedical prescription drug use;
- for an employee with confirmed nonmedical use; and
- if applicable, the conditions that need to be met before the employee can return to work. (See the *Return to Work* fact sheet for details about this issue.)



Step 4: Obtain legal advice. It is advisable for an attorney experienced in DFWP issues to review the revised DFWP before it is finalized.

Step 5: Train supervisory staff and educate employees. Conduct formal training to educate supervisory staff about the signs of nonmedical prescription drug use and the procedures to follow to help an employee that a supervisor suspects has a prescription drug misuse problem.

Step 6: Review service coverage for behavioral health and/or Employee Assistance Program (EAP) needs. The behavioral health portions of health insurance and EAP contracts should be evaluated to ensure that employees are covered for issues related to nonmedical prescription drug use. (See the *Health Plan* fact sheet for details.)

■ For Further Reading

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