Drinking and Driving

Around 240 people are killed and over 1,100 seriously injured in drink drive crashes each year. Often it is an innocent person (a pedestrian, pedal cyclist, motorcyclist or a passenger) who suffers, not the driver who is over the drink drive limit.

Around 30 children are killed or seriously injured by drink drivers annually.

Alcohol, even a small amount well below the legal limit, seriously affects the ability to drive safely, and significantly increases the risk of crashing. It:

- impairs a driver’s judgement
- makes them over-confident and more likely to take risks
- slows their reactions, increasing stopping distances
- affects judgement of speed and distance
- reduces the driver’s field of vision.

Alcohol is absorbed into the bloodstream very quickly, but it takes about an hour for 1 unit to be removed by a healthy liver.

The exact amount of alcohol in a drink depends on its size and alcoholic strength by volume (abv). For example, a 175ml glass of wine of 12%abv would be 2.1 units of alcohol, and a 250ml glass of the same wine would be 3 units.

The alcoholic strength of drinks, and the size of measures, varies enormously. In pubs, bars and restaurants a glass of wine could be 175ml or 250ml, bottles and cans are different sizes and spirits could be 25ml or 35ml measures.

Drinks poured at home are usually larger than ones bought in a pub or restaurant, and it is difficult to know the alcoholic strength of a drink without seeing the bottle.

The speed with which alcohol is absorbed into the bloodstream varies depending on a person’s size, age, weight and gender and whether they have eaten. The same amount of alcohol creates different blood alcohol levels in different people.

Never rely on trying to calculate accurately how much alcohol is in your body, and whether you are above or below the drink drive limit.
Drink Drive Limits

The legal drink drive limit in England and Wales is 80mg of alcohol per 100ml of blood.

In Scotland, the drink drive limit is lower – 50mg of alcohol per 100ml of blood.

In Northern Ireland, the limit is the same as in England and Wales, but it is due to be lowered.

Morning After

Many drink drivers are caught the morning after they have been drinking.

As it takes several hours for alcohol to disappear from the body, someone who was drinking late the previous evening, could easily still be over the limit on their way to work the next morning.

Even if under the limit, they may still be affected by the alcohol in their body.

Consequences
The penalties for drink driving are:

- A minimum 12-month driving ban
- A criminal record
- A substantial fine or up to 6 months in prison or both

Other consequences can include losing your job, losing independence, much more expensive car insurance when you get your licence back and trouble getting into countries like the USA. Of course, the ultimate penalty could be having to live with injuring or even killing another person.

The police carry out over 600,000 roadside breath tests a year, which over 70,000 drivers or riders (about 11% of those tested) fail or refuse to take.

However, the risk of crashing increases well below the legal limit.

Drivers with a blood alcohol level between 20 mg/100 ml and 50 mg/100 ml are three times more likely to be killed in a crash than those who have no alcohol in their blood.

The risk for drivers with a blood alcohol level between 50 mg/100 ml and 80 mg/100 ml (still below the legal limit) is at least six times greater, and it rises to 11 times with an alcohol level between 80 mg/100 ml and 100 mg/100 ml. A driver who is double the legal limit is 50 times more likely to be in a fatal crash.
Drugs, including illegal drugs, prescribed medicines and over-the-counter medicines, can also reduce the ability to drive safely.

It is illegal to drive, attempt to drive, or be in charge of a motor vehicle, with certain drugs in the body above a specified limit. This applies to eight illegal drugs, such as cannabis, cocaine, ecstasy and ketamine and eight prescription drugs (cloanzepam, diazepam, flunitrazepam, lorazepam, oxazepam, temazepam, methadone and morphine).

The law sets very low limits for the eight illegal drugs, so even a very small amount would put a person over the limit. The limits for the eight prescription drugs are higher than normal prescribed doses. So someone taking a medicine under the advice of a healthcare professional or as printed in the Patient Information Leaflet, should not exceed the limit.

However, they must still be fit to drive, so anyone taking medicines should talk to their doctor, pharmacist or healthcare professional before driving.

Although this offence applies to specific drugs, there is also a wider law which makes it illegal to drive while unfit due to any drug, whether illegal or prescribed or over-the-counter medicines.

The penalties for drug driving or driving while unfit through drugs are the same as for drink driving:

- A minimum 12-month driving ban
- A criminal record
- A substantial fine or up to 6 months in prison or both

Other consequences can include job loss, higher motor insurance and trouble getting into other countries. The ultimate penalty is having to live with injuring or even killing another person.

Illegal Drugs

Around 55 people are killed each year in accidents involving drivers who were impaired by drugs (including legal ones), over 250 are seriously injured and around 750 slightly injured. However, this is likely to be an under-estimate.

Drugs can affect a driver’s behaviour and body in a variety of ways (depending on the drug). These can include:

- slower reactions
- poor concentration and confused thinking
- distorted perception
- over confidence, resulting in taking unnecessary risks
- poor co-ordination
- erratic behaviour
- aggression, panic attacks or paranoia
- blurred vision
- tremors, dizziness, cramps
- severe fatigue the following day

The effects can last for hours or even days, and vary from person to person. They can be difficult for an individual to detect.
**Medicines**
For many medications it is difficult to predict whether, how, when and for how long they will affect a person’s ability to drive safely.

A driver may not even notice that they have been impaired until it is too late. The effects depend on how much, how often and how a medicine is used, plus the psychological and physical attributes of the person taking it.

Some medicines may cause:
- drowsiness
- dizziness or feeling light-headed
- difficulty concentrating
- feeling edgy, angry or aggressive
- feeling nauseous or otherwise unwell
- reduced coordination, including shaking
- feeling unstable

A person’s driving ability can also be affected by the medical condition for which they are taking the medicine.

However, it is very important to take any medication that has been prescribed, and to follow the instructions on how to take it. Therefore, anyone who is taking medication that may affect their driving should follow the advice of their doctor or other healthcare professional.

Many over-the-counter medicines, including remedies for coughs, colds, flu and hay fever, cause unwanted drowsiness which might impair driving.

Warnings about drowsiness are not always clear so, for example, if the label says “may cause drowsiness”, assume that it will do so.

**Alcohol and Drugs**
Taking alcohol and drugs together is even worse as their effects combine and impairment can be multiplied. Even low levels of alcohol mixed with low levels of drugs can cause significant impairment.
Management

Driving is the most dangerous work activity that most people do. Over 100 people are killed and seriously injured every week in crashes involving someone who was driving, riding or otherwise using the road for work.

HSE Guidelines, ‘Driving at Work’, state that “health and safety law applies to on-the-road work activities as to all work activities and the risks should be effectively managed within a health and safety system”.

So, employers must conduct suitable risk assessments and put in place all ‘reasonably practicable’ measures to manage the risks that their staff both face and create when they drive or ride for work.

This includes ensuring that work related journeys are safe, staff are fit and competent to drive safely and the vehicles used are fit for purpose and in a safe condition.

Such measures will more than pay for themselves by reducing accident costs, many of which (e.g. lost staff time, administration costs) will be uninsured.

In particular, employers should help their drivers and managers to understand the law, dangers and consequences, of drink and drug driving.

This guide gives simple advice on how employers and line managers can help to ensure that their staff do not drive when affected by alcohol, drugs or medicines. It can be used to inform the organisation’s risk assessment.

A sample ‘Policy’ is included, which can be adapted to suit your organisation’s needs. It can be used as a stand-alone policy or incorporated into your existing drug and alcohol policies and ‘Safer Driving for Work’ policy.

Review your drug and alcohol policy
Review your existing workplace drug and alcohol policy to see how it can encompass driving. Free guides are available from the HSE: ‘Drug Misuse at Work’ (www.hse.gov.uk/pubns/indg91.pdf) and ‘Don’t Mix It: A Guide for Employers on Alcohol at Work’ (http://www.hse.gov.uk/pubns/indg240.htm).

Consult Staff
Ensure that staff and/or their safety representatives are fully consulted about the organisation’s policies on alcohol, drugs, and safe driving and that this is reviewed periodically in joint health and safety committee meetings.

Expect Safe Driving
Ensure all staff, including directors and managers, understand that everyone who drives for work must be fit to do so at all times. All managers should lead by personal example and follow the organisation’s policy.

Set Clear Rules
In particular, ensure that all staff, including senior managers and line managers, understand that they must not drive for work if their ability to do so safely is affected by alcohol, drugs or medicines.

Driving while under the influence of alcohol or drugs should be a serious disciplinary matter.

Do not allow alcohol (or drugs) to be consumed by staff on duty, even, for example, if they are entertaining clients. Advise staff not to drink at lunchtime, especially if they are driving later. Remind them that it takes hours for the body to get rid of alcohol – they can still be impaired on their journey home or the following morning.
**Management**

**Raise Awareness**
As part of recruitment, training and staff appraisal, ensure that drivers, and their line managers, are reminded about:

- the law about drinking and driving and drugs/medicines and driving
- the effects of alcohol, including the morning after, and drugs and medicines on driving
- the organisation’s policy on these issues
- the need to plan ahead and arrange for a designated driver, public transport or an overnight stay, if intending to drink
- asking their doctor or pharmacist if a medicine might affect their driving, and if so, whether there is a safer alternative
- what to do if they feel their driving may be affected by alcohol or drugs
- the help that is available for staff with drink or drugs problems.

Staff also need to be aware of:

- the legal, financial and bad PR consequences of crashing due to impaired driving
- the organisation’s policy on work related road safety
- the need to co-operate in carrying out the policy and to report any problems.

**Provide Training**
Organise ‘Drink and Drugs Awareness’ seminars for staff. There are many training organisations that can provide this service.

Train managers to recognise signs of possible alcohol or substance abuse. These include sudden mood or behaviour changes, unusual irritability or aggression, worsening relationships with colleagues and others, impaired job performance or an increase in poor timekeeping and short-term sickness absence. These signs do not necessarily mean a drink or drugs problem, but may be an indication that help is needed.

**Be Constructive**
Treat staff with alcohol or drug problems sympathetically and in confidence, the same as staff with other medical problems. Offer access to medical or therapeutic help for staff who come forward with problems.

Staff who feel that they are unfit to drive because they are affected by drugs or by alcohol consumed the previous night, should be able to declare this without being punished. However, persistent instances should trigger disciplinary action.

Give staff who report that they are unfit to drive other duties and ask them to consult their doctor or pharmacist.

If necessary, they should be signed off sick and the organisation’s sickness policy followed. Be alert to the risk of employees feeling under pressure not to take their medication (or the full dose) so they can continue to drive. The consequences could be just as serious.

**Provide Alternatives**
Do not provide alcohol at lunchtimes (during meetings, for example). At office events or parties make sure non-alcoholic drinks are available, and if possible, organise transport home or overnight stops for staff who want to drink. Remind staff who are driving not to drink alcohol and if they are staying overnight, they may still be impaired the following morning.

**Plan Safer Journeys**
Alcohol, drugs and many medicines cause drowsiness and increase the chances of falling asleep at the wheel. Ensure that staff consider this when planning journeys. For further advice see ‘Driving for Work: Safer Journey Planning’, available free from [www.rospa.com/road-safety/resources/free/employers/](http://www.rospa.com/road-safety/resources/free/employers/).
Management

Train Line Managers
Managers should be trained to manage work related road safety as part of their health and safety responsibilities. They should lead by personal example and follow the organisation’s policy. Managers should understand the need to monitor the risk of drink and drug driving.

Set Reporting Requirements
Staff involved in a work-related crash, including damage-only and significant near misses, should be required to report it to their line manager.

Drivers who receive penalty points, or have been cautioned, summoned or convicted for a driving offence (while at work or not) should be required to inform their line manager straight away. This is especially important for drink or drug driving offences as the driver will lose their driving licence on conviction. A driver who has been charged and is waiting for their court date should not be allowed to drive for work.

Conduct Screening Tests
Some organisations conduct screening tests for alcohol or drugs, on a random basis, as part of recruitment or if there is a reason to suspect a particular individual may have a problem.

Screening should be developed in consultation with staff and their representatives and be seen as a deterrent rather than a way of ‘catching employees’. It should lead to help being provided. Staff must be aware screening may take place and consent to it. This should be written into contracts of employment (again in consultation with staff and their representatives).

Record and Investigate Crashes
Work-related crashes should be investigated, even if the vehicle is privately owned. This will help to identify what action is needed to prevent repeat occurrences. Keep the organisation’s insurers informed.

Further Advice

Driving at Work: Managing Work Related Road Safety
Don’t Mix It: A Guide for Employers on Alcohol at Work
Drug Misuse at Work: A Guide for Employers
RoSPA Driving for Work Guides
Occupational Road Safety Alliance
Scottish Occupational Road Safety Alliance
Driving for Better Business
Department for Transport
Think Road Safety Drink Driving
Think Road Safety Drug Driving
Highway Code
www.drinkaware.co.uk
Faculty of Occupational Medicine
Drink and Drug Driving Policy

As part of our overall health and safety policy, we are committed to reducing the risks which our staff face and create when on the road as part of their work. We ask all our staff to play their part by always driving within road traffic laws, safely and responsibly. Failure to comply with the policy may be regarded as a disciplinary matter.

**Senior managers must:**

- lead by example, by ensuring that they follow this policy and never drive if affected by alcohol, drugs or medicines.

**Line managers must ensure:**

- they also lead by personal example
- staff understand the dangers and consequences of driving while under the influence of alcohol, drugs or medicines
- staff receive appropriate training and education to help them avoid driving while under the influence of alcohol, drugs or medicines
- staff understand what to do if they consider their driving might be impaired by alcohol, drugs or medicines
- staff are confident they can discuss any drink or drugs problem they might have with an appropriate person without fear of being treated unfairly
- work related road safety is included in team meetings and staff appraisals and periodic checks are conducted to ensure our Policy is being followed
- they follow our monitoring, reporting and investigation procedures to help learn lessons and help improve our future road safety performance
- they challenge unsafe attitudes and behaviours, encourage staff to drive safely, and lead by personal example in the way they themselves drive.

**Staff who drive for work must ensure:**

- never drive while under the influence of alcohol, drugs or medicines
- make arrangements so they do not need to drive if they know they will be drinking alcohol, and be aware that they may still be over the limit, or affected by alcohol, the morning after they have been drinking
- avoid alcohol at lunchtime, especially if they know they will be driving later
- be aware that prescription drugs or over-the-counter medicines can affect driving and can cause sleepiness
- report drug and alcohol problems, including cautions, summons or convictions for alcohol or drug related offences, to their line manager
- co-operate with monitoring, reporting and investigation procedures.