Alcohol and drug impairment

Alcohol and drug use may impair workers' physical and mental health and work performance. Impaired workers may have difficulty completing tasks, operating machinery safely, and/or cooperating with management, co-workers, and the public.

Impairment is commonly associated with alcohol and illicit drug use. However, alcohol and illicit drug use is just one factor which may impair workers' physical and mental health and work performance in the short- or long-term.

Impairment factors

Workers can also be negatively impacted by:

- pharmaceutical drug use, both prescribed and over-the-counter drugs
- illness (chronic or temporary), injury, and mental health conditions (e.g., diabetes, pain, fatigue, stress, post-traumatic stress, depression, anxiety)
- overwhelming and/or traumatic life events (e.g., relationship problems, loss and grief, moving house, financial stressors)
- unusual and/or dangerous, stressful working conditions and environments (e.g., exposure to chemicals, extreme temperatures, shift work, repetitive tasks).

These factors can contribute to risky alcohol and drug use, and vice versa.

Workplaces can increase alcohol and drug use and risk.

For example:

- Shift workers may use methamphetamine to help them stay awake and alert
- Injured workers may become dependent on painkillers
- Workers may harm themselves or others after a few 'knock-off bevvies'

Employers have a responsibility to address working conditions and cultures which negatively impact workers' alcohol and drug use.

See How-to-Guide: Assessing Workplace Alcohol and Drug Risk for more information.

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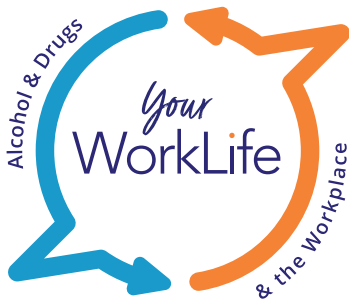
Impairment and risk

Impaired workers put themselves and others at risk and may have difficulty completing tasks, operating tools and machinery safely, making decisions, and/or cooperating with management, co-workers, and the public.

Employers and workers are jointly responsible:

1. for maintaining a safe working environment
2. identifying, reporting, and managing risk to reduce workplace harm.

Workplace alcohol and drug policies are crucial. They help employers and workers reduce alcohol- and drug-related risk by:

1. defining impairment
2. training staff to identify and respond appropriately to impaired workers
3. educating workers about low risk alcohol and drug use
4. encouraging workers to discuss alcohol and drug use with managers, supervisors, and team leaders and to access support services
5. detailing confidential reporting and return to work procedures.

How do you identify alcohol- and drug-related impairment?

Workers can be impaired by alcohol or drugs if they are:

1. under the influence/intoxicated
2. experiencing poisoning/overdose
3. experiencing long-term effects.

Different substances can lead to various forms of impairment.

Impairment can be:

- physical
- mental
- behavioural
- obvious
- subtle
- temporary
- long-term
- heightened by working environments, conditions, and activities.

Common indicators of alcohol and drug impairment are detailed below. Please note that this list is not exhaustive. There are A LOT of alcohol and drug use indicators, of which any number singly or in combination can also exacerbate a medical condition or stressful work/life circumstances.

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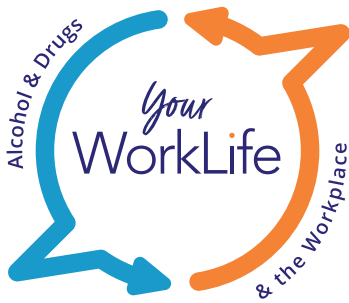
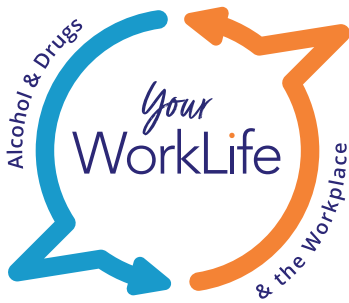# Indicators of alcohol and drug impairment

Physical indicators

- Blurred vision
- Chest pain
- Clumsiness
- Dizziness/fainting
- Excessive sweating
- Fatigue/increased tiredness
- Headaches
- High blood pressure
- Nausea
- Odour
- Poor immune system
- Rapid heart rate
- Reduced coordination
- Shaking/shivering
- Sleeplessness
- Slow reflexes
- Slurred speech
- Stumbling
- Unexplained bruises
- Teeth grinding
- Weight gain
- Weight loss

Mental/cognitive indicators

- Anxiety
- Brain damage
- Confusion
- Depression
- Distorted perceptions of speed and distance
- Lethargic/drowsy
- Loss of enjoyment/ feeling numb
- Paranoia
- Persistent sadness/ feelings of hopelessness
- Poor concentration
- Poor memory
- Psychosis
- Slowed reaction times

Behavioural/social indicators

- Avoiding work duties or usual activities
- Dependence
- Deteriorating personal hygiene or appearance
- Exaggerated verbal or emotional responses
- False sense of confidence and/or power
- Family disharmony
- Frequent absences
- Frequent lateness or leaving early
- Hyper-vigilance and need to control environment
- Increased incidents or mistakes
- Irritability/agitation
- Lying
- Mood swings
- Reduced performance
- Restlessness
- Talkativeness
- Unusual negativity and constant worrying
- Withdrawing from friends and family

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Responding to workers' alcohol and drug use

If you are concerned about a worker's alcohol and drug use, behaviour, health, and/or performance, see How-to-Guide: Having Helpful Conversations for advice on how to approach and speak with workers about sensitive matters.

Workers who are intoxicated at work and/or grossly impaired will need to be immediately removed from the work environment. See How-to-Guide: Critical Alcohol and Drug Situations for advice about how to approach and manage intoxicated and/or aggressive workers.

Follow the 10 Principles for Responding to Intoxicated Workers if a worker is agitated, pacing, and using threatening gestures or language.

Workplace adjustments

A range of workplace adjustments may be negotiated and implemented for workers who are impaired by alcohol and/or drugs, or other mental and physical health conditions.

Temporary and ongoing impairments may require different approaches.

Employers are required to make reasonable adjustments for workers using prescribed medicine and/or suffering from illnesses which impact their ability to complete their usual tasks.

Common workplace adjustments for workers include:

- Flexible working arrangements (e.g., working from home, part-time, varied start/finish times)
- Longer or more frequent breaks
- Providing extra supervision
- Dividing large projects into smaller tasks, to-do lists, checklists, task cards
- Personal digital assistants (PDAs) or smart phones to assist with memory and planning
- Progression planning

- Allowing time off for rehabilitation, assessment, or treatment
- Providing additional training, mentoring, supervision and support
- Modifying disciplinary, grievance, and reporting procedures
- Moving to different worksite either closer to home or with improved working environment
- Workplace education about stigma and inclusiveness
- Address workplace culture if there is a strong culture of alcohol and/or drug use.

The above list is not exhaustive.

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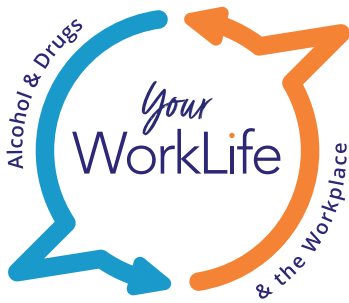
The most important thing is to collaborate with the worker and any treating professional to determine what is needed. Do not make assumptions about what the worker needs.

Most adjustments are low cost. Funding for workplace adjustments for eligible workers is available through the Employment Assistance Fund (https://www.jobaccess.gov.au/employment-assistance-fund-eaf).

Referral and return to work

Workers on return to work programs require employers, doctors, and rehabilitation specialists to work together and to communicate regularly and clearly on what work can be undertaken and what work should be avoided during the return to work process.

The return to work agreement should:

1. make clear statements about tolerance for drug use and hangovers at work

2. encourage workers to notify supervisors and/or their treatment/support team if they lapse and need to call in sick to work

3. state clearly whether:
   - the worker is to remain in treatment, and provide them with flexibility to attend appointments
   - there will be periodic drug and alcohol testing

4. consider how the work environment and culture may contribute to a worker's relapse.

See Fact Sheet: Getting Help and Return to Work for more information about referral and return to work options.

Resources and handouts are available at https://worklife.flinders.edu.au/external-site-resources.

References are available at https://worklife.flinders.edu.au/references.