Drug Screening in the Workplace

This statement was prepared by ACOEM’s Committee on Ethical Practice in Occupational Medicine. Committee members at the time were: Adolph Walser, chairman; Paul Andreini, Richard Cohan, Elizabeth Gresch, Theodore Hatfield, Eugene Marks, David Miller, William Richardson, Robert Swenicki, and James Spraul. The guidelines were approved by ACOEM’s Board on July 25, 1986.

There is growing concern that drug abuse constitutes a significant problem in the workplace, contributing to impaired productivity and job performance, increased accidents and injuries, violations of security, theft of property, and diminished employee morale. In response, many companies are adopting policies regarding the use of drugs, as well as instituting a variety of drug screening, control, and rehabilitation programs. If appropriate constraints are observed, it is ethically acceptable to screen employees/prospective employees for the presence in their bodies of drugs, including alcohol, that might affect ability to perform work in a safe manner. The following guidelines deal only with ethical issues involved in workplace drug screening. Other important considerations which must be addressed in the design and implementation of a drug screening program include biologic factors concerning rates of absorption and elimination of drugs, technical factors relating to specificity and accuracy of analyses, legal requirements, regulatory requirements, and employee relations concerns. ACOEM recommends strongly that employers obtain expert legal, medical, and employee relations advice before making a decision to require screening for drugs of employees or applicants. Such experts also should be involved in the actual structuring and implementation of any program of screening of employees and applicants for drugs. These guidelines are pertinent to employer-required drug testing done under the following circumstances: replacement assessment, job transfer evaluation, periodic mandatory medical surveillance, special work fitness exams, and monitoring of employees who are under treatment for drug abuse as a condition of continuing employment. Principles 1, 7, and 9 of the ACOEM Code of Ethical Conduct for Physicians Providing Occupational Medical Services (adopted July 23, 1976)* are considered directly pertinent. These principles are:

- 1. accord highest priority to the health and safety of the individual in the workplace;
- 7. treat as confidential whatever is learned about individuals served, releasing information only when required by law or by over-riding public health considerations, or to other physicians at the request of the individual according to the traditional medical ethical practice; and should recognize that employers are entitled to counsel about the medical fitness of individuals in relation to work, but are not entitled to diagnoses or details of a specific nature;
- 9. communicate understandable to those they serve any significant observations about their health, recommending further study, counsel or treatment when indicated."

The following considerations should be included in any employer-required program for the screening of employees and prospective employees for drugs:

• A written company policy and procedure should exist and should be applied impartially.

• Any requirement for screening for drugs should be based on reasonable business necessity. Such necessity might involve safety for the individual, other employees, or the public, security needs, requirements related to job performance, or requirement for a particular public image.

• Affected employees and applicants should be informed in advance about the company’s policy concerning screening. They should be made aware of their right to refuse such screening and of the consequences of such refusal to their employment.

• Where special safety or security needs justify testing for drugs on an unannounced basis, employees should be made aware in advance that this will be done from time to time. Care should be taken to assure that such tests are done in a uniform and impartial manner for all employees in the affected work group(s).

• Written consent for screening and for communication of results to the employer should be obtained from each individual prior to screening.

• Collection, transportation, and analysis of specimens and the reporting of results should meet high legal, technical, and ethical requirements. The process should be under the supervision of a qualified physician.

• A qualified physician should evaluate positive results prior to a report being made to the employer. This may require the obtaining of supplemental information from the employee or applicant.

• The affected employee or applicant should be advised of positive results by the physician and have the opportunity for explanation and discussion prior to the reporting of results to the employer, if feasible. The mechanism for accomplishing this should be clearly defined.

• The employee or applicant having indication of a drug abuse problem should be advised concerning the availability of appropriate treatment resources.

• Any report to the employer should provide only the information needed for work placement purposes or as required by regulations. Identification to the employer of the particular drug(s) found may or may not be necessary. Reports to the employer should be made by a physician sensitive to the various considerations involved.

The use of a drug screen as part of a voluntary periodic examination program can be acceptable ethically if adequate safeguards as to confidentiality can be assured. It seems probable at present that inclusion of a drug screen as part of a voluntary periodic examination program may lead to a significant reduction in participation with consequent loss to the nonparticipants of the benefits of the examination. Potential health benefits should be carefully weighed against potential losses to health before a decision is reached on this matter. If carefully designed and carried out, employer-required programs for the screening of employees and applicants for drugs, including alcohol, can serve to protect and improve employee health and safety in an ethically acceptable manner.

Reprinted from the JOM, Vol 28, No. 12, December 1986