# Table of Contents

1. Table of Contents

2. Executive Summary

3. Methodology
   3.1 Background and Objectives
   3.2 Timeline
   3.3 Questionnaire Development
   3.4 Survey Administration
   3.5 Sample

4. Respondent Profile

5. Results
   5.1 Defining Impairment
   5.2 Employer Impairment Concerns
      5.2.1 Substances and Conditions
      5.2.2 Organizational Impact of Employee Impairment
   5.3 Employer Impairment Policies, Procedures and Communication Strategies
      5.3.1 General Beliefs about Impairment Policies and Procedures
      5.3.2 Written Policies
      5.3.3 Communication Strategies
   5.4 Employer Impairment Training
      5.4.1 Current Impairment Training
      5.4.2 Organizational Need
      5.4.3 Training Barriers and Benefits
   5.5 Employer Impairment Detection Technology
      5.5.1 Current Use and Interest
      5.5.2 Implementation Considerations
2 EXECUTIVE SUMMARY

Multiple recent reports indicate spikes in opioid overdoses and ongoing concerns about mental distress and substance use disorders related to COVID-19. As a result, employers are finding themselves with an expanding list of issues that are threatening the safety and wellbeing of their employees.

In response to these issues, the National Safety Council, the nation’s leading nonprofit safety advocate, is calling on employers to take a broader approach to addressing workplace impairment. Specifically, NSC urges that employer policies and procedures outline workplace impairment as anything that could impede one’s ability to function normally or safely as a result of a number of factors – from chemical substances, such as alcohol, opioids or cannabis, to physical factors like fatigue, as well as experiencing mental distress and social factors like stress.

In May and June 2020, NSC conducted a national employer survey targeting decision makers (HR Decision Makers, Safety Professionals and Managers) for organizations with at least 50 or more employees across several different U.S.-based industries. NSC aimed to investigate the awareness and impact of impairment in the workplace, understand current impairment policies and practices, and gather insights about the use of and desire for supervisor impairment training and impairment detection technology. The following report includes findings from the survey.

Results

The survey results are based on 350 online surveys, which found:

- 93% of the employers surveyed agreed with the NSC description of impairment
- Nearly all (90%) said they were concerned about alcohol, illicit opioids, mental health disorders, chronic stress and illicit prescription opioids in their workplaces
- More than half of respondents (52%) said impairment was decreasing the safety of their workforce
- A majority of respondents (77%) viewed impairment as an important consideration when determining an employee's fitness for duty
- Two-thirds (68%) viewed impairment as a justifiable reason to fire an employee
- Less than half (46%) believed employees would feel comfortable to tell their supervisors or co-workers if they were too impaired to perform their job
- In written policies, employee assistance programs (EAPs) and drug testing had the highest levels of coverage (61% each), whereas accommodation protocols for employees taking prescribed cannabis (32%) and fatigue management (30%) had the lowest levels of coverage
- 87% of employers indicated a need for a supervisor impairment training
- Only 16% of respondents reported currently using impairment detection technology but many employers expressed interest in learning about and implementing these technologies
3  METHODOLOGY

3.1  BACKGROUND AND OBJECTIVES

The National Safety Council (NSC) partnered with a sample provider to conduct a survey with employers about their awareness of impairment; beliefs about the impact of impairment in the workplace; how current policies, practices, and trainings cover impairment; and where the greatest potential lies for NSC to influence and support employers regarding worker impairment.

3.2  TIMELINE

| Methodology Development       | March 2020 – April 2020 |
| Survey Development and Review | April 2020 – May 2020    |
| Survey Administration         | May 18, 2020 – June 2, 2020 |

3.3  QUESTIONNAIRE DEVELOPMENT

The content of the Employer Impairment Survey originated from a compilation of the findings from an NSC literature review and expert advisory panel focus groups. The questionnaire development team included NSC impairment subject matter experts and NSC survey/market researchers. The purpose of the questionnaire was to elicit opinions from employers – specifically HR, Management and Safety Professionals with decision making authority – about key impairment elements such as describing impairment, concerns and impact, policies, procedures, and to gauge interest in NSC content and resources. The final questionnaire consisted of 45 questions, including several matrix style questions eliciting level of agreement with multiple statements.

3.4  SURVEY ADMINISTRATION

The questionnaire was administered in an online, incentivized format. NSC survey researchers programmed, hosted, collected and analyzed all survey data. NSC partnered with a third-party provider to access the sample. Participants were sent an email from the third-party sample provider with a link to complete the survey. The third-party sample provider managed all the incentives for survey completion.

3.5  SAMPLE

This report builds on 350 online surveys with three types of employer decision makers representing U.S. employers with 50 or more employees:

HR Decision Makers: Professionals who are involved in formulating employee/human resources policies affecting the recruitment, retention and wellbeing of the workforce.
Safety Professionals: Mid/senior management level safety professionals, involved in workplace policies and initiatives surrounding risk management and safety protocols, inspection, training and/or monitoring.

Managers: Mid/senior management level decision makers who may not be directly involved in HR or safety policy, but oversee, approve or sign-off initiatives, investments, training and workplace priorities.
**4 Respondent Profile**

350 Respondents

- HR, Management, Safety Professionals, across the U.S., with organizational decision making authority
- Across Industrial, Professional Services, Public & Social Services, and Retail Industries
- Employers with at least 50 employees

**Respondents by Industry**

<table>
<thead>
<tr>
<th>Industry Group</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Industrial</td>
<td>31%</td>
</tr>
<tr>
<td>Public &amp; Social Services</td>
<td>26%</td>
</tr>
<tr>
<td>Professional Services</td>
<td>23%</td>
</tr>
<tr>
<td>Other</td>
<td>11%</td>
</tr>
<tr>
<td>Retail &amp; Wholesale</td>
<td>8%</td>
</tr>
</tbody>
</table>
5  RESULTS

5.1  DEFINING IMPAIRMENT

Participants were provided the NSC definition of impairment:

Impairment: The inability to function normally or safely from a change in behavior resulting from chemical substances (e.g., alcohol, opioids, cannabis), physical factors (e.g., fatigue), social factors (e.g., professional and other stressors), or mental health wellbeing (e.g., illness and other factors).

Overall, there were very positive reactions to the NSC Impairment definition indicating a strong level of agreement. When prompted to provide a reasoning for their level of agreement, many responded it was good, accurate, comprehensive, and covered multiple factors.

This indicated that the NSC holistic definition of impairment was an accepted concept with employers.

93% Agreement with NSC Impairment Definition

Level of Agreement to Impairment Definition  349 Responses

- 54% Strongly Agree
- 29% Somewhat Agree
- 4% Neither Agree nor Disagree
- 4% Somewhat Disagree
- 4% Strongly Disagree
5.2 **EMPLOYER IMPAIRMENT CONCERNS**

5.2.1 **Substances and Conditions**

Next, participants were asked to categorize substances and conditions from a ‘major concern’ to ‘not a concern at all’ regarding substances and conditions related to impairment.

Alcohol, opioids, mental health disorders and chronic stress all had over 90% of respondents indicate that these substances or conditions were a concern within their workplace.

Illicit opioids, alcohol, illegal stimulants, and mental health disorders each were identified as major concerns for at least 60% of respondents. When looking at these four substances and conditions by industry, unsurprisingly, a larger percentage of decision makers in Industrial (67%) indicated that alcohol was a major concern, while less than half of Industrial (46%) indicated mental health disorders were a major concern, which was significantly lower than the other industry groups. In regards to illegal stimulants, this was widely seen as a major concern for Retail and Wholesale Trade (75%).

Tobacco was widely viewed as the least concerning substance as a whole, though it was still viewed as a concern for 74% of the respondents.

<table>
<thead>
<tr>
<th>Substance/Medication</th>
<th>Major Concern</th>
<th>Minor Concern</th>
<th>Not a Concern</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>63%</td>
<td>31%</td>
<td>6%</td>
</tr>
<tr>
<td>Chronic medical cond. (e.g., diabetes, heart disease)</td>
<td>48%</td>
<td>42%</td>
<td>10%</td>
</tr>
<tr>
<td>Chronic stress</td>
<td>54%</td>
<td>38%</td>
<td>8%</td>
</tr>
<tr>
<td>Fatigue</td>
<td>49%</td>
<td>41%</td>
<td>11%</td>
</tr>
<tr>
<td>Illegal marijuana/cannabis</td>
<td>52%</td>
<td>39%</td>
<td>10%</td>
</tr>
<tr>
<td>Illegal stimulants</td>
<td>61%</td>
<td>28%</td>
<td>11%</td>
</tr>
<tr>
<td>Illicit opioids</td>
<td>65%</td>
<td>26%</td>
<td>9%</td>
</tr>
<tr>
<td>Illicit prescription anti-anxiety (e.g., Xanax, Ativan, Valium, Klonopin)</td>
<td>50%</td>
<td>39%</td>
<td>12%</td>
</tr>
<tr>
<td>Illicit prescription pain relievers (e.g., Vicodin, Percocet, Oxycodone)</td>
<td>58%</td>
<td>33%</td>
<td>9%</td>
</tr>
<tr>
<td>Illicit prescription stimulants (e.g., Adderall, Ritalin)</td>
<td>55%</td>
<td>35%</td>
<td>10%</td>
</tr>
<tr>
<td>Legal or prescription/medical marijuana/cannabis</td>
<td>42%</td>
<td>39%</td>
<td>19%</td>
</tr>
<tr>
<td>Mental health disorders</td>
<td>60%</td>
<td>31%</td>
<td>8%</td>
</tr>
<tr>
<td>Other illicit drugs</td>
<td>58%</td>
<td>29%</td>
<td>13%</td>
</tr>
<tr>
<td>Prescription anti-anxiety (e.g., Xanax, Ativan, Valium, Klonopin)</td>
<td>39%</td>
<td>47%</td>
<td>14%</td>
</tr>
<tr>
<td>Prescription opioid pain relievers (e.g., Vicodin, Percocet, Oxycodone)</td>
<td>51%</td>
<td>39%</td>
<td>10%</td>
</tr>
<tr>
<td>Prescription stimulants (e.g., Adderall, Ritalin)</td>
<td>42%</td>
<td>44%</td>
<td>15%</td>
</tr>
<tr>
<td>Tobacco (e.g., vaping, cigarettes, snuff)</td>
<td>33%</td>
<td>41%</td>
<td>26%</td>
</tr>
</tbody>
</table>

**Major Concerns by Industry**

<table>
<thead>
<tr>
<th>Industry</th>
<th>Alcohol (Major Concern)</th>
<th>Illicit Stimulants (Major Concern)</th>
<th>Illicit Opioids (Major Concern)</th>
<th>Mental Health Disorders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Industrial</td>
<td>57.27%</td>
<td>62.73%</td>
<td>65.45%</td>
<td>46.35%</td>
</tr>
<tr>
<td>Public &amp; Social Services</td>
<td>52.17%</td>
<td>55.43%</td>
<td>58.70%</td>
<td>60.87%</td>
</tr>
<tr>
<td>Professional Services</td>
<td>55.00%</td>
<td>52.50%</td>
<td>57.50%</td>
<td>65.00%</td>
</tr>
<tr>
<td>Retail &amp; Wholesale</td>
<td>57.14%</td>
<td>75.00%</td>
<td>67.86%</td>
<td>67.86%</td>
</tr>
<tr>
<td>Other</td>
<td>52.50%</td>
<td>55.00%</td>
<td>62.50%</td>
<td>60.00%</td>
</tr>
</tbody>
</table>
Impairment Environmental Scan Employer Survey Results

**Major Concern**

- Opioids (e.g., heroin, fentanyl)
- Illegal stimulants (e.g., cocaine, methamphetamine)
- Alcohol
- Mental health disorders
- Elicit prescription opioid pain relievers (e.g., Vicodin, Percocet, ...) (209)
- Other illicit drugs (190)
- Illicit prescription stimulants (e.g., Adderall, Ritalin) (175)
- Chronic stress (161)
- Legal marijuana/cannabis (157)
- Prescription opioid pain relievers (e.g., Vicodin, Percocet, DayCare) (154)
- Illicit prescription anti-anxiety medications (e.g., Xanax, Alprazolam, ...) (153)
- Chronic medical conditions (e.g., diabetes, heart disease) (140)
- Fatigue (139)
- Prescription stimulants (e.g., Adderall, Ritalin) (133)
- Legal or prescription medical marijuana/cannabis (130)
- Prescription anti-anxiety medications (e.g., Xanax, Alprazolam, Valium, ...) (112)
- Tobacco (e.g., vaping, cigarettes, snuff) (99)

**Minor Concern**

- Prescription anti-anxiety medications (e.g., Xanax, Alprazolam, ...) (159)
- Prescription stimulants (e.g., Adderall, Ritalin) (146)
- Chronic medical conditions (e.g., diabetes, heart disease) (142)
- Tobacco (e.g., vaping, cigarettes, snuff) (138)
- Fatigue (134)
- Illicit prescription anti-anxiety medications (e.g., Xanax, Alprazolam, ...) (132)
- Legal or prescription medical marijuana/cannabis (131)
- Prescription opioid pain relievers (e.g., Vicodin, Percocet, ...) (129)
- Legal marijuana/cannabis (129)
- Chronic stress (125)
- Illicit prescription stimulants (e.g., Adderall, Ritalin) (117)
- Illicit prescription opioid pain relievers (e.g., Vicodin, Percocet, ...) (110)
- Mental health disorders (109)
- Alcohol (100)
- Other illicit drugs (99)
- Illegal stimulants (e.g., cocaine, methamphetamine) (92)
- Illicit opioids (e.g., heroin, fentanyl) (88)

**Not a Concern**

- Tobacco (e.g., vaping, cigarettes, snuff) (89)
- Legal or prescription medical marijuana/cannabis (82)
- Prescription stimulants (e.g., Adderall, Ritalin) (62)
- Prescription anti-anxiety medications (e.g., Xanax, Alprazolam, ...) (49)
- Other illicit drugs (42)
- Illicit prescription anti-anxiety medications (e.g., Xanax, Alprazolam, ...) (42)
- Illegal stimulants (e.g., cocaine, methamphetamine) (39)
- Fatigue (37)
- Prescription opioid pain relievers (e.g., Vicodin, Percocet, ...) (35)
- Illicit prescription stimulants (e.g., Adderall, Ritalin) (34)
- Chronic medical conditions (e.g., diabetes, heart disease) (33)
- Legal marijuana/cannabis (32)
- Illicit prescription opioid pain relievers (e.g., Vicodin, Percocet, ...) (30)
- Illicit opioids (e.g., heroin, fentanyl) (30)
- Mental health disorders (28)
- Chronic stress (26)
- Alcohol (24)
5.2.2 Organizational Impact of Employee Impairment

To better understand the organizational impact of impairment, survey participants were asked to rate their level of agreement from ‘strongly agree’ to ‘strongly disagree’ for a variety of statements regarding impact, such as ‘impairment is a problem in my workforce’, ‘impairment is decreasing safety’, ‘impairment is making it difficult to keep qualified employees’, etc. Overall, the results showed that at least one-third of employers recognized that impairment was impacting their organization across different areas including safety, retention, productivity, finances and reputation. There were no significant differences across the board by industry. Of note, 68% viewed impairment as a justifiable reason to fire an employee and half (51%) viewed impairment as a threat to their company’s reputation. While the majority of respondents (77%) viewed impairment as an important consideration when determining an employee’s fitness for duty, an alarming one-in-ten or 13% claimed that it was not an important consideration when determining fitness for duty.

- 52% of respondents stated that impairment was decreasing the safety of their workforce
- 43% of respondents claimed that impairment had increased workers’ compensation costs
- 45% said impairment was causing more near misses
- 39% said impairment was causing more injuries
- 36% of respondents indicated that impairment was a problem in their workforce
5.3 EMPLOYER IMPAIRMENT POLICIES, PROCEDURES AND COMMUNICATION STRATEGIES

5.3.1 General Beliefs about Impairment Policies and Procedures
Respondents were then asked a series of questions to learn more about the impairment policies, procedures and communications strategies in place at their organization. Overall, the results showed the majority of organizations have these policies, procedures and communication strategies in place. It appears that substance use is more emphasized than other areas of impairment; however, 72% indicated that their leadership would be open to adopting new solutions to reduce impairment.

80% indicated that HR had appropriate policies, procedures, and responses to deal with substance-related impairment in the workplace.

78% signaled that there were procedures in place for supervisors or managers to follow once a worker impairment was suspected.

More than 60% believed workers and supervisors/managers were able to identify impaired employees.

Less than half (46%) believed employees would feel comfortable to tell their co-workers if they were too impaired to perform their job.

Less than half (46%) believed employees would feel comfortable to tell their supervisors if they were too impaired to perform their job.
5.3.2 Written Policies

To better understand the topics generally covered in written policies, participants were asked to rate the extent to which each topic was covered in their written policies, with options including ‘covered’, ‘somewhat covered’, ‘not covered’, or ‘I don’t know’. Overall, more than half of the respondents indicated all 18 topics as at least somewhat covered. Employee assistance programs (EAPs) and drug testing were identified as having the most coverage in organizational written policy with three-in-five (61%) respondents indicating that these elements were covered in their written policies, while only 10% did not see them covered in their written policies.

Conversely, accommodation protocols for employees taking prescribed cannabis, fatigue management and employee use of legal cannabis products saw the lowest levels of coverage in written policies, with 31%, 29% and 24% indicating no coverage in written policies, respectively. Furthermore, responses of ‘I Don’t Know’ were all less than 10%, with six of the 18 topics generating more than 5% of respondents indicating ‘I Don’t Know’. These included fit for duty clause, employee use of legal cannabis products, employee use of prescription opioids at work, performance plan for impaired workers, accommodation protocols for employees taking prescribed opioids and accommodation protocols for employees taking prescribed cannabis.
5.3.3 Communication Strategies

Respondents were presented with communication approaches, such as ‘employee on-boarding’, ‘safety talks/toolbox talks’, ‘informal discussions’, or ‘no strategy in place’. Not surprisingly, the results showed that substance impairment generally received more communication coverage than other forms of impairment.

The most common communication strategy was employee on-boarding, with 70% indicating that substance impairment was addressed during employee on-boarding, compared to only 47% indicating other forms of impairment were addressed in employee on-boarding. Furthermore, more than 10% of respondents indicated there was no communication strategy in place at their organization.
5.4 EMPLOYER IMPAIRMENT TRAINING

5.4.1 Current Impairment Training
Impairment training is a promising safety intervention to address impairment. In order to gauge the employer need for impairment training, respondents were asked if they currently implement impairment training along with the type: employee, supervisor, leadership, HR or other.

77% of respondents reported their organization had some form of impairment training

Taking a closer look at the type of training, impairment training for supervisors was the most reported type of training, but with no clear majority over 50%.

5.4.2 Organizational Need

Only 13% of employers indicated they did NOT need a supervisor training

Only 3% of respondents indicated they did not see a need for a new supervisor training, while 10% reported they were satisfied with their current supervisor training. This indicated a need for a training solution to address impairment that is more comprehensive than current options available.
5.4.3 Training Barriers and Benefits

The cost of training (56%) and the amount of time required for training (42%) were identified as the two largest barriers to implementing the supervisor impairment training. Interestingly, 18% felt that impairment as a topic was not a concern to their workplace and 11% reported lacking an impairment policy. Only 4% did not anticipate any barriers.

Increased confidence in supervisors to address impairment (49%) and increased health and wellness of the workplace (41%) were viewed as the largest benefits to implementing supervisor impairment training. Additionally, roughly one-third of respondents anticipated increased engagement with supervisors and their staff (35%), reduction in injuries and fatalities (34%), deterrent to impairment in the workplace (33%), and reduced workers’ compensation costs (33%). Only 1% of respondents did not anticipate any benefits.
5.5 **EMPLOYER IMPAIRMENT DETECTION TECHNOLOGY**

5.5.1 **Current Use and Interest**

Impairment detection technology (IDT) is another promising safety intervention to address impairment. Thus, participants were asked to provide feedback on their current position regarding technology used to detect multiple causes of worker impairment such as substance use, fatigue, stress, mental health conditions or other chronic medical conditions. Almost one-third of respondents indicated little or no knowledge of this technology.

**Only 16% of respondents reported that they were currently using impairment detection technology**

In general, the majority of respondents indicated that they would have interest in all of these technologies, and likewise would have general interest in implementing the technology. Opioid
Impairment Environmental Scan Employer Survey Results

Impairment (70%) received the greatest interest in implementing the technology, while mental health (79%) received the greatest interest in learning more about technologies in that field.

5.5.2 Implementation Considerations

Further, respondents were asked to answer questions surrounding impairment detection technology implementation and associated barriers.

Usage of technology pre-shift (34%) and during shift (34%) were regarded as most beneficial, followed closely by quarterly (32%). Continuous testing (8%) was seen as the least beneficial, relative to the remaining options.
When asked about the maximum amount of time the impairment detection technology should take to assess an employee, almost half (49%) of the respondents indicated that the technology should take no longer than 3 minutes to test for impairment.

Lastly, when reporting the main barriers their organizations might experience in implementing these technologies, purchase cost, employee distrust and fear of the technology and employee compliance were reported to be the top barriers.