



## **Alcohol and Substance Testing Procedure**

This document is part of North Yorkshire Police policy to which all Chief Constable personnel and the functions provided by the Deputy Mayor for Policing as part of the York & North Yorkshire Combined Authority are required to adhere.

### **Procedure Statement**

This procedure applies to all Police Officers including Special Constables, all Police Staff and volunteers working for North Yorkshire Police (NYP).

Notwithstanding this, the selection of officers and staff for testing will be risk based. "Risk" encompasses the risk inherent in the consequences of impairment of judgment or performance, and the risk of incidence of misuse.

A list of posts for inclusion in the routine testing regime is given in [Appendix A](#)

Testing may be carried out in the following circumstances:

- testing with-cause (that is, where there is a reasonable suspicion of substance misuse)
- pre-employment screening and testing during the probationary period.
- as part of a routine random testing regime (all officers, Police Staff, Volunteers and Special Constables)

### **Overarching Policies:**

[Alcohol and Substance Misuse Policy](#)

### **Procedures:**

[Additional Leave of Absence Procedure](#)

### **Other Documents:**

[Home Office Circular 11/2012](#)

[ACPO Substance Misuse and Testing Guidance](#)

[Code of Conduct for Police Staff](#)

[Code of Ethics](#)

[Psychoactive Substances Act 2016](#)

## **Process**

The intention of this testing regime is preventive and is designed to:

- minimise the chances of substance mis-users entering the police service in the first instance
- deter officers and staff from substance misuse through the application of a policy and procedure which makes detection a real possibility
- encourage those with a substance misuse problem to identify themselves, so they may be supported in seeking treatment
- screen officers and staff so as to minimise any risk of operations being prejudiced by impaired judgment
- protect officers, police staff, special constables and volunteers in posts in which they may be vulnerable to malicious allegations of substance misuse. By the very nature of their duties, many police officers, and particularly those working under cover, will have close associations with criminals. Those whose duties bring them into contact with drugs dealers are particularly vulnerable to malicious allegations that they are themselves drug users. A liability for such officers and staff to be tested enables it to be demonstrated that they remain “clean”.

NYP will have due regard to protect privacy during the testing procedures and ensure that testing is conducted in a sensitive manner. They will also ensure that test results are handled in a secure and confidential manner. Records of test results will be retained in accordance with data protection principles.

## **Substances**

Testing covers the illicit use of the following substances:

- Amphetamines (including ecstasy)
- Cannabis
- Cocaine
- Opiates (e.g. morphine and heroin)
- Benzodiazepine
- Cannabis
- One additional drug or drug group (for “with cause” testing only, where the reason for the test is based on intelligence and the individual has been informed of the drug(s) or drug group(s) for which he or she is being tested)
- Alcohol (See part 2)

There may be legitimate reasons for a drug being present in a specimen. For example, the presence of morphine may indicate heroin abuse, or the use of a legitimate medicine (e.g. a painkiller or an anti-diarrhoea preparation). Officers and staff required to take a test should declare all medications they are taking. The content of such declarations is confidential to the Health and Wellbeing Unit of the force, and to the medical officer reviewing the result of a test. Information about medication may, with the consent of the donor, be given to the external collecting officer who will treat the information in strict confidence. The donor may choose to withhold this information altogether or may choose to place a record of the medication in a sealed envelope which is only to be opened by Health and Wellbeing Unit staff in the event of a medical review.

### **Androgenic-Anabolic Steroids (AAS)/ Prohormones**

- It has been determined that the possession or consumption of Androgenic-Anabolic Steroids (AAS) and Prohormones, is not conducive with being employed by NYP and is considered a breach of the:
  - Standards of Professional Behaviour; and
  - Code of Conduct for Police Staff, if proven will result in disciplinary proceedings.
- It is the responsibility of all NYP officers and staff to check that any supplements they are taking are free of agents which will lead to a positive drugs test.
- The drug testing procedure will return the precise identity of the steroid, if it is required that testing is appropriate

### **Psychoactive Substances**

- The [Psychoactive Substances Act 2016](#), introduced on 26 May 2016, makes drugs formerly known as "legal highs" illegal.
- Those selling psychoactive substances through the internet or commercially will often brand them as 'legal' or 'herbal highs' or attempt to conceal their true purpose by mis-describing them. However, analysis of test purchases demonstrates that they often contain a wide range of controlled drugs.
- Possession or consumption of a psychoactive substance is not conducive with being employed by NYP and is considered a breach of the:
  - Standards of Professional Behaviour; and
  - Code of Conduct for Police Staff

### **Use of Cannabidiol (CBD) products**

It is not illegal to buy or possess any CBD oil products.

However, a report recently shared with the Home Office has identified a concern that the use of cannabidiol (CBD) products could cause individuals to fail a drug test. The study identified that although CBD products may not list the psychoactive tetrahydrocannabinol (THC) as an ingredient, that a number of products still contained it nonetheless. As such the use of CBD products could result in the return of a positive test, and since results would be indistinguishable from the illicit use of Cannabis, this would result in a failed drugs test and potential disciplinary action.

**The recommendation made to forces was that staff and officers who are subject to a workplace drugs test procedures should be advised to avoid the use of CBD products.**

NYP have considered this recommendation and support it, however we acknowledge that circumstances may exist whereby the use of CBD products can still be considered, including where qualified medical advice has been sought and followed, and all other avenues of pain relief have been exhausted.

Anyone continuing or considering using CBD products is urged to refresh themselves on the guidance below:

### **Guidance for use of CBD products**

CBD products if used are highly unlikely to produce a positive test if the cannabis metabolites of THC have been removed and is either completely free from that product, or no more than 0.2% THC

content. It is the THC that gives the “High” and that is what is tested for on drug testing. You need to ensure that you purchase the oil from a reputable source and checked the bottle contents to ensure no, or no more than 0.2% THC (Tetrahydrocannabinol) is in it.

If you use CBD with no THC in there would be nothing picked up to cause a positive test on any random test you may be asked to attend. Consider discussing with your doctor that you are considering it, because they may consider prescribing it for a medical reason. If you were, then you would be able to declare it on any medication questions at the time of the test, and if it showed up the Medical Review Officer would have that information.

We would encourage anyone considering using CBD products to:

1. Advise their line manager, and/or the Force Substance Misuse Liaison Officer, who should make a confidential record of it.
2. Advise if the product has been prescribed by a doctor. If not, how is it being sourced to ensure it is not in breach of a declarable association. I.e to only use products which can be traced to source, such as from reputable UK based retailers.
3. To consider advising the North Yorkshire Police Health and Wellbeing Unit to ensure the product prescribed does not breach the 0.2% guidance and would not impair the function of the member of staff.
4. Photograph and maintain a record of the ingredients, supplement facts or nutritional information of the product in case this is required for subsequent scrutiny.

Any declarations made before any Substance Testing takes place will be considered should the member of staff be selected for such testing.

**Please note, the onus is on the staff member to ensure any products ingested do not contain hidden elements that will fail a test.**

### **With-cause testing**

The Force is authorised to test officers and staff where there is cause to suspect an individual is misusing controlled substances or alcohol. The requirement to take a test should be imposed by an officer of an appropriate senior rank, or equivalent police staff senior manager. For “cause” to be established, the test of “reasonable suspicion” must be satisfied. It should be made clear to the individual that testing “with cause” may either prove or disprove information or allegations made. A single and unsubstantiated allegation, particularly if made by a member of the public who may have malicious intent, would not normally amount to reasonable suspicion. The reasons for suspecting an individual has misused controlled drugs or alcohol will be recorded.

### **Pre-employment testing**

Pre-employment testing is by way of a hair sample. In the event of the applicant suffering with a medically proven condition preventing a hair sample being given then a urine sample may be substituted. In such cases, owing to the very short detection period available with urine samples, the applicant may then be subjected to additional testing during the first six months after their appointment to the Force. These will be collected by a member of NYP Health and Wellbeing Unit staff as part of the pre-employment medical procedure.

Samples will be taken in accordance with the external service provider's requirements and sent for laboratory analysis.

There are some differences which apply to the procedures used for testing potential recruits and serving officers and staff. If a potential recruit does not wish to submit to a test, he or she may withdraw from the recruitment process. In the case of transferees, the facts will be shared with the force from which the individual is intending to leave.

If at any time of attending the pre-employment testing the applicant discloses the use of any illegal substances, then this should be recorded, and the applicant advised that this is not an automatic fail but will be considered on a case by case basis. At this point the applicant should be asked if they wish to continue with a sample or withdraw their application. If there is a case where a disclosure has been made and the individual then tests negative the decision as to whether the individual is appointed as a police officer will be made by a chief officer in consultation with the Head of People Services and PSD/Vetting with a full rationale for the decision documented.

They should also be advised this information will be shared with other Forces.

All aspects of the collection and on-site screening of samples from potential recruits, including the taking of information about medications, may be undertaken as a part of the People Services function.

### **Routine random testing**

Since July 2007 the NYP has undertaken a programme of routinely testing police officers in specific roles.

This programme now extends to all police officers regardless of role including Special Constables and all Police Staff and volunteers.

A serving officer or member of staff may not be recalled to duty for the purposes of testing.

Random Testing, 'With Cause' testing and testing during probationary period will be administered by the Force Substance Misuse Liaison Officer (SMLO) in conjunction with an external contracted UKAS and ISO accredited organisation.

### **Undercover Unit Officers**

Undercover officers are subject to random and with-cause testing in line with this general procedure. In addition, they will be subject to additional voluntary urine or oral fluid tests in line with the Yorkshire and Humber Special Operations Unit SOP.

[See Appendix B](#)

### **Material to be tested**

In the case of serving police officers and staff urine will be tested.

In the case of new recruits and transferees from another force a hair sample will be tested.

## **Procedure**

Testing will take place in a private room with access to secure toilet facilities. In the case of urine samples the collector must be able to keep the donor in sight at all times during the collection process except when s/he is voiding the sample. The collector will accompany the donor to the toilet cubicle and will remain outside until the sample has been collected.

There must be a secure chain of custody through collection, analysis and medical review.

All samples taken will have a unique barcode identification and will be packaged using tamper evident seals. Two samples will be taken – one will be used for testing and the other will be retained for 12 months if the sample is positive (this period may be extended at the request of NYP). Samples providing negative results will be destroyed. (Normally within fourteen days of analysis) etc.

Any officer or member of staff is obliged to submit to a random or with-cause test if so required, and may, as a consequence, have to declare information about medications that he or she is taking.

Where completion of the paperwork by an individual involves disclosure of medication being taken, that paperwork should be seen only by Health and Wellbeing Unit staff. It follows that where the paperwork is not completed by the officer or member of staff personally (i.e. it is completed in response to questions put to the officer or staff member, and then signed by the officer), that task should be undertaken by Health and Wellbeing Unit staff only.

These declarations may have the effect of disclosing personal information that the officer is entitled to expect will be treated in confidence by the Health and Wellbeing Unit. In the case of random testing the information will be recorded and retained on behalf of the Health and Wellbeing Unit by the external service provider (ESP). It will only be disclosed to a member of the Health and Wellbeing Unit where there is concern about the ability of the individual to safely and effectively carry out their role whilst continuing to use any medication.

It is important that information about medications taken prior to the test is recorded at the time of specimen collection, and not at any later stage.

It is anticipated that there will be infrequent occasions where an individual is unable to attend testing due to the operational requirements of the role. This will be recorded and individuals who are repeatedly unavailable for testing will be subject to investigation and may be dealt with under the disciplinary procedures.

Where a serving officer or member of the Special Constabulary refuses or fails to provide a sample as required this will be regarded as failing to comply with a lawful order. In the case of a member of Police Staff or Volunteer such refusal will be regarded as failing to follow a reasonable instruction. In the case of a refusal this is likely to result in the commencement of an investigation of an allegation of gross misconduct.

## **Laboratory testing**

All drug tests will be conducted through laboratory analysis, not on-site screening.

When any sample of breath, blood, urine or hair is taken for testing under this procedure the donor's DNA profile will not be extracted from that test sample under any circumstances and no DNA will be kept.

### **Split samples**

Provision should always be made to allow the donor of a urine sample an opportunity to have an independent analysis of the specimen to challenge the outcome of a laboratory analysis.

A split sample (at the time of collection) provides an effective means of providing this opportunity. The cost of an independent analysis will be met by the individual and may be reimbursed by the Force in the event that the first analysis is found to be inaccurate. This opportunity will not be afforded in the case of pre-employment testing and the Chief Constable's /PCC's [or their delegate's] right to reject a candidate is absolute.

### **Testing procedures**

#### **Self declaration**

Officers and staff with substance misuse problems should be encouraged to identify themselves, and should be assisted in seeking treatment. However, self-declaration cannot be used to avoid the consequences of a positive test. Any such declaration must be made before an officer is notified of any requirement to take a test. A self-declaration made after an officer is notified of the requirement to take a test cannot be used to frustrate the disciplinary proceedings that might result from a positive test result.

#### **Random Routine Testing Regime**

The scale of testing will be risk based. Any sample of officers or staff selected for testing in an individual area or department within the force will be chosen on a random basis. The routine testing regime may involve selecting a higher proportion of officers and staff for testing in an area or department where the risk is assessed as high.

Scale of testing is determined at force level, having regard to perceived risk and cost. "Scale" encompasses size of sample and frequency of testing. "Risk" encompasses the risk inherent in the consequences of impairment of judgment or performance, and the risk of incidence of misuse.

#### **"With cause" – extended sampling**

An officer of at least the rank of Assistant Chief Constable for the Chief Constable's employment or Chief Executive Officer for the PCC's employment may authorise a maximum of three samples of urine to be required from a police officer or staff member (or on secondment to or from NYP) where there is corroborative intelligence which gives reasonable cause to suspect that the individual has used a controlled drug over an extended period (i.e. on more than one occasion).

The three samples can be required over a maximum period of 90 days, with day one being the day on which the first sample is required and the period finishing at midnight on day 90. When calculating the 90-day period, no account should be taken of any periods of sick leave.

The individual will not be given any advance notice of the requirement to provide each sample and will be informed at the time when the first sample is required that two further samples may be required within the designated time period. On each occasion a sample is taken the individual will be informed of the drug(s) or drug group(s) against which his or her samples will be tested.

The officer will be entitled to have a "police friend" as defined in The Police (Conduct) Regulations 2012 present when the samples are being taken. Police staff will also have an entitlement to have someone attend with them including a trade union representative or work colleague who is not acting as a legal professional. A delay in a police friend or representative attending will not delay the testing procedure provided that the subject has been able to consult a friend or representative.

### **Consultation and monitoring**

The scale of testing adopted has been the subject of consultation with NYP staff associations. All random samples are monitored by ethnicity, faith, gender, disability and sexual orientation to ensure that no unintended bias arises from the sampling technique.

### **Handling confirmed positive results**

A positive laboratory analysis will be subject to medical review. Medical review involves a medical practitioner reviewing the test result and the medical history of the individual to determine if there is a legitimate explanation for the presence of a drug in the sample.

Test results following laboratory analysis and medical review will be returned to the SMLO. Where the result is negative the individual and his or her manager will be informed without delay.

A positive result from a test administered as a part of the pre-employment process should be notified to People Services so that the candidate may be rejected.

A positive result from a person who had self-declared a substance misuse problem prior to being tested should be reviewed by the Health and Wellbeing Unit to assess whether the result was consistent with rehabilitation treatment being undertaken. If the result suggested that an agreed programme of rehabilitation was not being followed, then reference to Professional Standards Department (PSD) should be considered.

All other positive results will be referred to the PSD who are responsible for notifying both the individual and the line manager of the result, and of any immediate action, including suspension from duty where appropriate.

Any claim by the individual concerned that there was a reason (other than a medical reason) for the positive result should be referred to PSD and disciplinary action may follow.

### **Liability**

An individual who has misused controlled drugs suffers a double jeopardy. He or she is at risk of disciplinary proceedings that might lead to dismissal, and may also be at risk of criminal prosecution. Because of this double jeopardy, and whether or not criminal proceedings are contemplated, cautioning and interviewing should be to the standards required under the Police and Criminal Evidence Act (PACE).



The penalty for refusal to take a test is no less than the penalty for failing a test. The liability to take a test for Police Officers is established in Police Regulations, and for Police Staff members under the Police Staff Council agreement, thus a failure to take a test when required to do so is a failure to obey a lawful order for officers or failure or refusal by a police staff member will equate to a breach of the Standards of Professional Behaviour. In the case of a refusal this is likely to result in the commencement of an investigation of an allegation of gross misconduct.

There is no substantive criminal offence of having an unlawful substance in the body, only a presumption that the offence of “possession” must have been committed beforehand. Such a presumption may be rebuttable by medical evidence that the positive test resulted from use of a lawful medication. The presumption of possession that would arise from a positive, medically confirmed test result should be treated as discreditable conduct. The sanction for both failure to obey a lawful order and discreditable conduct is the same. The potential sanction for ‘failure to comply with orders or instructions’ and ‘discreditable conduct’ is the same.

## **Part 2: Alcohol**

Police Officers and Police Staff, Volunteers and Special Constables have a general responsibility to present themselves fit for duty. If their judgment is impaired by the consumption of alcohol, they are unlikely to be fit for duty. It is for a senior officer or police staff manager to determine whether an individual is unfit for general duties, due to consumption of alcohol. However, reporting for duty whilst having previously consumed alcohol (e.g. on the previous evening) does not equate with the criminal offence of using drugs. Managerial action needs to reflect this and each case will be decided upon its own merits.

As with drugs, self-declaration of a drink problem is a matter that should be managed through the Health and Wellbeing Unit, rather than being regarded as a disciplinary matter.

There is a power to conduct tests with cause, if it appears that an officer or staff member is under the influence of alcohol. Officers and staff will also be liable to random testing.

Individuals selected for routine random drug testing will also be subjected to breath testing for alcohol, at the same time.

In line with Home Office Guidelines there is a presumption that a person is unfit to work if they have more than 13 micrograms% in breath this compares with a limit of 35 mg% in breath for driving. Where a person exceeds the limit they should be removed from their safety critical or public facing role for the remainder of that tour of duty.

Where testing is carried out, it should be conducted using breath testing equipment capable of making measurements at the 13 micrograms% level. Tests will be conducted using only Home Office Approved devices and care will be taken to afford the person subject of the test reasonable privacy when providing the specimen.

Police Officers and Police Staff, Volunteers and Special Constables should never be tested on apparatus held in a custody suite, unless the suite is cleared of all other users.

Each “breath test” should consist of two consecutive breath specimen tests from the officer, with the final result being declared as the lower of the two results. (Where the result of the first specimen test is zero there will be no requirement for a second specimen to be tested.)

If a supervising officer or line manager smells alcohol on the breath of an individual liable to alcohol testing a breath alcohol test can be administered by a suitably trained person after a wait of 15 minutes. \*\* (This is to deal with the eventuality that at the time the suspicion of excess drinking is aroused, a proportion of the alcohol consumed may still be in the individual's stomach. Alcohol must be absorbed into the body to register in a breath alcohol test.)

\*\* Initial consideration should always be given to exercising powers under The Road Traffic Act where an individual has been driving or is in charge of a motor vehicle.

It is always open to an officer or police staff, Volunteer or Special Constable to declare that they suspect they might have inadvertently exceeded the limit. Any such declaration should be made before the officer or police staff member is notified of any requirement to take a test. Such declarations should not result in the officer or police staff member being penalised, provided there is no pattern of continuing excess. A declaration may be particularly appropriate in circumstances of an unexpected change of duty, e.g. being allocated to driving duties involving possible use of the police exemptions under the Road Traffic Regulation Act, or requirement to work in an alternative location for due to a staff shortage.

## **Responsibilities and Expectations**

### **Individual**

Police officers and police staff, volunteers and special constable with a substance/alcohol misuse problem have a clear personal responsibility to acknowledge their condition and seek assistance. Any self declaration must be made before an Officer or police staff member is required to take a test. A self declaration made after an officer or police staff member is notified of the requirement to take a test cannot be used to frustrate disciplinary or criminal proceedings that may result from a positive test result.

Where an officer or police staff member is not on a call out rota but is subject to an unexpected call out during a rest period, they must disclose to their line manager if they feel their performance may be impaired by substance(s)/alcohol, in which case the person will not be requested to attend work.

### **Colleagues**

Police officers and staff have a duty under this procedure to report and challenge behaviour by colleagues which in the context of the procedure would include reporting their suspicions to a supervisor that a colleagues performance is impaired by alcohol.

If an employee has a reason to suspect an individual may be suffering from a substance/alcohol misuse problem they should try to persuade that person to voluntarily seek specialist advice and the assistance of the Health and Wellbeing Unit. The colleague must also refer the matter to their Line Manager or People Services.

It is inappropriate and could have serious consequences for the individual and their colleague, should they fail to act when a fellow worker's work performance or behaviour may be suffering as a result of substance misuse. Where possible prevention is preferred however any failure to comply

with the guidelines may render the colleague liable to disciplinary proceedings. A range of penalties according to circumstances, up to and including dismissal, may be appropriate.

### **Supervisors and Managers**

If an individual's work performance and/or conduct at work gives cause for concern and this is believed to be related to possible substance/alcohol misuse, the manager should arrange a private and confidential meeting with the person concerned. The manager should explain the purpose of the meeting. The person will be offered the option to be accompanied by a UNISON / Federation representative, or a NYP work colleague who is not acting as a legal professional at the meeting should they wish. The manager must contact the Health and Wellbeing Unit and their People Services Manager for advice in this situation.

The meeting must be objective and factual and take cognisance of the follow factors:

- the discussion should be confined to work or behavioural issues unless there is clear evidence of a substance/alcohol misuse problem or if the individual raises the matter him/herself
- examples of poor work performance or conduct problems should be specified and where appropriate, evidenced
- a definite indication of improvements required and the timescale allowed should be given. This should be confirmed in writing after the meeting, using the supportive action plan format and advise the individual that this will be the case.
- advise the individual of the potential consequences should the work performance/ behaviour not improve
- if the individual admits to having a substance/alcohol misuse problem they will be informed of the self-referral process and advised to contact the Health and Wellbeing Unit.

If substance/alcohol misuse is suspected and the individual refuses to self-refer then a 'with cause' test may be initiated.

A written record will be made of this meeting.

In all cases of self-referral, positive test result or targeted 'with cause' testing a case conference between People Services Representative, PSD and a line manager will be convened to discuss appropriate action.

Any failures by Supervisors or Managers to comply with these guidelines may render that person liable to disciplinary proceedings.

### **Health and Wellbeing Unit Support**

Where the officer or staff member has self-referred to the Health and Wellbeing Unit they will be required to sign up to a treatment contract which lays out clearly the responsibilities of NYP and the individual. A treatment contract will not be considered as valid until it is signed off by all relevant

parties. Only at this point will a treatment programme be deemed to have commenced and the individual afforded the protection from a substance misuse test.

The Health and Wellbeing Unit will keep People Services informed of any fitness to work issues and adjustments required to restrict duties on health and safety grounds.

Officers and staff taking part in a treatment programme must expect to provide samples for testing during the process. Any failure to comply with the treatment programme will be referred by the Health and Wellbeing Unit to PSD. This will be considered for action under disciplinary proceedings in the same way as a refusal to provide an initial specimen.

Officers and staff will only be eligible for one course of treatment, either alcohol or substance misuse. If they have a dual substance and alcohol issue they will declare this in one go.

Should any individual require time away from work to undertake a treatment programme then guidance can be found under the 'Time Away from Work' section of the People Services People Portal and specifically the Additional Leave of Absence Procedure.

### **Confidentiality**

The principles of confidentiality will be maintained within the spirit of the aims of the procedure. However, there is an expectation that the process will be open, honest and fair on all sides.

Details of medical conditions and specialist/ medical treatments will remain confidential but the need to conduct risk assessments and monitor treatment mean that the case conference panel will need to exchange managerial information to ensure consistency. The authority for this will be gained by way of the Treatment Contract signed by the individual at the start of any referral. Management information in relation to the testing procedure will be stored with restricted access within the Health and Wellbeing Unit.

There are some circumstances in which the interests of the proper administration of justice may over-ride an absolute confidentiality. In particular, the manual of guidance, including the Joint Operating Instructions (JOPI) agreed between ACPO and the Crown Prosecution Service (CPS), place on the individual officer a personal responsibility to declare any matter that may affect their credibility as a witness in a court case.

In some circumstances substance misuse on the part of an officer or police staff member acting as a witness may have to be revealed to the CPS, as the damage to the credibility of the individual as a witness may be a factor to be considered in a decision whether to proceed with a prosecution.

The personal responsibility under JOPI will be drawn to the individual's attention as part of the Treatment Contract at the time of self-declaration. The need to make a declaration to CPS will not arise in every case, each should be considered on its own facts and merits. Any declaration to CPS should be properly managed, with the appropriate support to the Officer.

Other than in exceptional circumstances there is no requirement to seek CPS advice for constructive possession offences when an individual has provided a positive test. These offences will not be proceeded with criminally.

## **Responsibilities**

All testing will be conducted by arrangement with the Force Substance Misuse Liaison Officer (SMLO). The SMLO will provide a single point of contact with the current external testing agency. Records of all tests will be maintained by the SMLO in line with current force policy.

## **Definition of Special Terms**

**North Yorkshire Police** – collectively the Police and Crime Commissioner and the Chief Constable in their respective corporate capacities as the employer of staff (or, in the case of the Chief Constable in so far as Police Officers are concerned, deemed or de jure employer).

**North Yorkshire Police Personnel** – Collectively, Police Service Personnel and Commissioner Staff as defined below.

**Police Service Personnel** – Police Officers under the direction and control of the Chief Constable and Police Staff in the employment of the Chief Constable.

**Chief Constable's Staff** – All staff in the employment of the Chief Constable of North Yorkshire Police

**Mayoral Staff** – All staff in the employment of the Office of Fire Police and Crime Commissioner (Mayor's OFFICE)

**Police Staff** – collectively, Commissioner and Chief Constable staff

**Work colleague (in the capacity of the right to be accompanied)** – any member of North Yorkshire Police Personnel