

## Substance use and workplace impairment

### What is impairment?

Workplace impairment means being unfit to safely perform work. People who are impaired on the job can injure themselves or others.

Impairment can have many causes. One of the most common causes of impairment in the workplace is the use of substances such as the following:

- Alcohol
- Recreational cannabis (legal as of October 17, 2018)
- Illegal drugs
- Prescription drugs (including medically prescribed cannabis) to treat medical conditions
- Over-the-counter medications

Impairment from substance use (being “drunk,” “stoned,” “high,” or “buzzed”) can cause changes in the body and mind. These changes can affect people’s ability to work safely, putting them or their co-workers at risk of injury, and can include the following:

- Impaired judgment, thinking, and decision making
- Decreased motor coordination, reaction time, and sensory perception
- Psychological or stress-related effects, such as mood swings or personality changes

### Responsibilities for managing impairment in the workplace

#### Workers

As a worker, you are responsible for your own safety as well as that of your co-workers. You must do the following:



- Make sure that your ability to work safely is not impaired by alcohol, drugs, or other causes.
- Do not work if your impairment may endanger you or anyone else.
- Tell your supervisor or employer if your ability to work safely is impaired for any reason.
- Tell your supervisor or employer if you see someone who appears to be impaired.

#### Employers

Employers also have responsibilities when it comes to managing impairment in the workplace. Employers must do the following:

- Prevent an impaired worker from performing activities where impairment may endanger the impaired worker or anyone else.
- Refuse to allow a worker to remain at any workplace while the worker’s ability to work safely is impaired by alcohol, drugs, or other causes.

# Record of meeting

Project			
Address		City	Province
Employer		Supervisor	
Date (yyyy-mm-dd)	Time		Shift
Number in crew		Number attending	

## Other safety issues or suggestions made by crew members


## Record of those attending

Name (please print)	Signature	Company
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		

Manager's remarks	
Manager's signature	Supervisor's signature