

Impairment at Work

About 8 minutes to deliver

Not only alcohol and not only illegal drugs — the prescription that says do not operate machinery is the one people skip past.

Impairment is anything that stops somebody working safely. Most talks on this subject only cover half of it, and the half they miss is the one that turns up most.

WHAT COUNTS

- Alcohol, including from the night before. Blood alcohol falls at a fixed rate that nothing speeds up — not coffee, not a shower, not a big breakfast.
- Illegal drugs, and cannabis regardless of state law. Legal to possess is not the same as safe to operate on, and it does not change the company rule or federal testing.
- Prescription medication. This is the big one. Opioid painkillers, muscle relaxants, sleep aids, anti-anxiety medication, and a lot of ordinary antihistamines carry a warning about operating machinery. People read it, take the tablet, and drive a forklift.
- Over-the-counter. Sedating allergy tablets and night-time cold medicine impair reaction time measurably.
- Fatigue, which is its own talk and impairs about as much as alcohol does.

THE PRESCRIPTION PROBLEM

Nobody is asking anybody to stop taking medication they need. What is asked is this: if the label mentions drowsiness or operating machinery, say so before the shift, and we will find work that is not driving, not at height, and not on a machine.

That conversation costs nothing and nobody needs the diagnosis. "I'm on something that says don't operate machinery" is the whole sentence.

IF YOU ARE DOT-COVERED

Safety-sensitive functions under 49 CFR Part 382 come with pre-employment, random, post-accident, reasonable-suspicion, return-to-duty and follow-up testing. 382.201 prohibits performing a safety-sensitive function with an alcohol concentration of 0.04 or greater, and a supervisor who has reasonable suspicion must remove you from that function.

Reasonable suspicion is based on specific, observable indications — appearance, behaviour, speech, body odour — observed by a trained supervisor. It is not a hunch and it is not a rumour.

WHAT TO DO ABOUT A WORKMATE

- Do not let them drive, climb, or operate. That is the whole point, and it is more important than the conversation being comfortable.
- Tell a supervisor. Not the crew, not a group chat.
- Do not diagnose and do not accuse. Describe what you saw: unsteady, slurring, smell, pupils, behaviour that is not them.
- You are not getting them in trouble. You are keeping them out of a fatality report, and there is more help available than most people think.

AND THE HONEST PART

If you are struggling with alcohol or with painkillers you started for a work injury — which is how a very large share of this begins in construction — come and say so before it becomes a positive test. Before, there are options. After, there are fewer.

ASK THE CREW

- Is anyone on something today whose label mentions machinery?
- If you thought a workmate was impaired right now, what would you actually do?
- Does everyone know who to tell, and that it stays with that person?

29 CFR 1926.20 · 49 CFR 382.201 · OSH Act § 5(a)(1)

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ATTENDANCE RECORD

Impairment at Work

About 8 minutes to deliver · 29 CFR 1926.20 · 49 CFR 382.201 · OSH Act § 5(a)(1)

Date

Job / site

Delivered by

Company

#	Print name	Signature	Date
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I delivered this talk and determined it was suitable for this crew and this work.

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