The Case for Saliva Drug Testing

Screening for drugs in the workplace is becoming more widespread, but how do you determine which of the two available types of testing to use – saliva or urine? It is important to understand the key differences, as the results from each type of testing offer completely different insights.

To determine an employee’s fitness for work, saliva screening delivers significant benefit over urine testing, as it detects relatively recent drug use that could render an individual unfit to operate machinery, drive a vehicle or handle dangerous goods. Saliva testing is less intrusive than urine sampling, lessens the need for handling bodily fluids and delivers accurate, reliable results quickly.

An increasing number of Australian businesses are seeking to implement workplace drug testing programs in an effort to meet with work health and safety (WHS) obligations that demand provision of a safe work environment for all employees and contractors.

When considering such an undertaking, one of the decisions that employers must make is which of the two available types of drug screening to conduct; urine or saliva testing. It is important to understand the key differences, as the results from each type of testing offer completely different insights.

Where method meets intent

Urine testing is commonly used when employers want to assess the specific lifestyle of an individual, including establishment of an ongoing pattern of drug use.

Urine testing is appropriate in this case as it offers relatively long detection times between the use of a drug and a positive result. For example, cannabis testing can yield a result up to ten days post-use, in the case of an infrequent user, or 30 days for those with a more frequently indulged habit. This provides a longer-term picture for employers, meaning that pre-employment urine testing is often implemented as part of the recruitment process, or where the company has a defined zero tolerance policy in place.

Saliva testing is a better option in the more common requirement to determine an individual’s immediate condition with respect to being fit for work at a given time. This is because saliva testing detects only recent drug use which can render an employee unfit for work, not drug use overall.

An employee under the influence can endanger themselves and their co-workers while undertaking a host of activities including; driving, operating machinery, using tools and handling liquids or chemicals, to name only a few.

This type of testing will become more widespread, not only as businesses seek to ensure that they meet their duty of care to provide a safe working environment, but also due to external forces including changes to legislation.
Proposed amendments to the *Building Code 2013* defined under the Building Code (Fitness for Work/Alcohol and Other Drugs in the Workplace) Amendment Instrument 2015 are currently being debated, although they are subject to enactment of the Building and Construction (Fair and Lawful Building Sites) Code 2014.

The amendments call for all contractors on Commonwealth funded construction projects to have a system for management of drugs and alcohol in the workplace (a fitness for work policy), as part of a broader WHS management system. The amendments aim to ensure that no person attending a site and performing building work does so under the influence.

According to the Fair Work Building & Construction (FWBC) website, the fitness for work policy must:

- address how those on site will be required to comply with the relevant fitness for work policy (i.e. through contract or some other enforceable means);
- require the use of an objective medical testing method to detect the presence of drugs or alcohol in a worker’s system and outline which detection method is to be used on the project (i.e. saliva or urine testing);
- outline the procedures in place for the selection of personnel to be tested, including staged selection across a worksite or random selection for testing if the entire workforce is not to be tested in a testing round;
- outline how a person who returns a positive result will be prevented from performing work until they can prove they are fit to return to work, and other processes that will apply in the event of a positive result or deemed positive result (i.e. a failure to submit to a test);
- outline how workers who attend for work affected by drugs or alcohol will be counselled and assisted, apart from any disciplinary process that might apply.

If the changes pass, the Building Code will specify the substances to be tested for and that, subject to testing detectable levels, there is a zero level of tolerance for all substances.

It will additionally require that random testing for those nominated substances occur at least monthly and that the FWBC will be responsible for auditing contractors to ensure those subject to the code have a compliant fitness for work policy in place.

These new measures will only be applicable on Commonwealth funded projects that fall within defined financial thresholds and not applicable at all on privately financed developments, but change to legislation such as this often has a subsequent flow-on effect, as companies seek to streamline their administrative burden and incorporate requirements in to broader general policies.

**Selecting saliva**

In instances where companies are permitted to determine the preferred collection method, as is the proposed Building Code changes, or in any situation where the objective is to determine fitness for work, saliva sampling offers many benefits over urine testing:

1. It better aligns with the intent. Determining an individual’s fitness for work is specific – i.e. *is this* individual able to carry out *this* specific task at *this* moment in time or are they *currently* impaired? The detection of drugs in saliva indicates recent use, whereas urine testing potentially provides information unnecessary to determining fitness for work, such as lifestyle choices of individuals that do not necessarily present a workplace risk to themselves or to others.

2. It is a less intrusive collection method and requires less handling of fluids. The sample collection method is via a tongue swipe, which is far less contentious than urine sample collecting. The sample can be surrendered without any privacy requirement (the provision of which also potentially puts the sample veracity into question, in the case of urine) and delivers a result with a minimum of tester contact and fluid handling.

3. Accurate results are delivered quickly. Saliva sampling takes between three and eight minutes to process, at a level of greater than 95% accuracy. Fast processing means that workers are not kept from their primary tasks for any longer than necessary and disruption to the working day is kept to a minimum, which is a chief concern of any business.
Full range results

In the early days of development, saliva testing only covered limited substances, but is now able to detect a full range of drug groups including: amphetamines (speed, ice), methamphetamines (MDMA, Ecstasy), cocaine (and crack), opiates (heroin, morphine) and cannabis, as well as benzodiazepines, the group that includes prescription medications such as those used to treat anxiety and sleeplessness.

As with urine testing, saliva-based screenings that indicate a positive for drug use must be followed by a confirmatory test to validate these results. Drug and alcohol testing must be carried out only by accredited organisations or individuals, using methods in accordance with Australian Standards.

Given the escalating prevalence for workplace drug testing programs and procedures, and the importance of the drivers that underlie that requirement, a fast and reliable alternative to urine testing that delivers accurate results is vital.

Saliva testing more than meets the needs of most workplace testing policies and regimes, with the added benefit of delivering specific and objective results that align directly with determining an individual’s fitness for work.