

**GOVERNMENT OF INDIA  
MINISTRY OF RAILWAYS  
(RAILWAY BOARD)**

**No.2001/Safety-I/23/4**

**New Delhi-110001  
27<sup>th</sup> November, 2001.**

The General Manager(Safety)  
All Indian Railways.

Sub: Revised Policy on '**Drunkness on duty**'.

Board has approved the revised policy on drunkenness in order to make it more effective for controlling drunkenness amongst staff, particularly safety categories. Revised Policy is sent herewith as annexure. Railways are directed to get these policy booklets printed and implement the revised policy on their system.

Necessary changes in concerned manuals shall be made by Ministry of Railways and will be advised in due course.

Please acknowledge the receipt.

Sd/-  
**(Indra Ghosh)**  
**Executive Director(safety)**  
**Railway Board.**

CC to all Federations

Safety(A&R) Branch for processing the modification in the concerned G.R.  
DG/RDSO for early standardization of State- of-Art Breathalyzers.  
DG/Health for processing necessary changes in Medical manual.  
AM Commercial for making necessary amendments in Railway  
AM Staff

# **DRUNKENNESS ON DUTY – A SAFETY HAZARD**

*(Revised Alcohol Policy for Indian Railways)*

## **1. Aim of the Revised Policy:**

- (i) Ensuring that staffs who are having a drinking problem are identified.
- (ii) Protect the health and welfare of staff by offering counselling and rehabilitation to those with alcohol related problems.
- (iii) Prevent risks to staff, passengers and the general public from abuses of alcohol by staff in Safety critical posts.
- (iv) Prevent the damaging effects of alcohol on optimum operational efficiency.
- (v) Take up with staff who are incorrigible and are a danger both to themselves as also to the system.

## **2. General Aspects of Revised Alcohol Policy:**

- (i) A booklet should be got printed by all Zonal Railways briefly explaining the revised alcohol policy of Indian Railways, its aims and objectives, along with its benefits both for the staff as also for the organisation as a whole.
- (ii) It should be made applicable to all categories of Staff. However, for the present, for overcoming logistic problems, it is proposed to introduce it only for those categories of staff connected with train running.
- (iii) The train running staff who would be covered under the Revised Alcohol Policy in Phase-I are as follows:
  - (a) Drivers/Motormen/Asst. Driver/Guards.
  - (b) ASMs/SMs.
  - (c) Pointsmen / Leverman/ Cabinmen/ Switchmen.
- (iv) However in first phase it is to be introduced for the running staff as they are directly involved in train running and their mistake may cause a serious accident which is detrimental to safe running of passengers.
- (v) The running staff viz driver, Asstt Driver shall undergo breathalyser test both at the time of signing-on and Signing off as per Railway Board instructions.
- (vi) The Station /yard staff and other categories of staff will be subjected to Sample test / Surprise test by supervisors and officers carrying portable breathalysers.
- (vii) Officers should keep a list of all Senior Supervisors working under them who are habitual of drinking.
- (viii) Similarly, Senior Supervisors should keep a list of all staff working under them that is habitual of drinking.
- (ix) All such staff who is short-listed would now form the target population. They must be divided into two categories as Chronic or Habitual depending on the severity of their drinking habits.
- (x) The idea is that each level 'N' must keep a watch on level 'N-1' immediately below. For example, LI should keep a watch on all short listed drivers attached with him; Crew Controller should keep a watch on all such Asstt. Drivers, and similarly Station Master should keep a watch on the staff posted at his station.

- (xi) For Indian conditions, the following Safety limits are laid down for the presence of alcohol in blood and urine:
  - (a) Between 01- 20 mg/100 ml, the person concerned will not be allowed to perform duty.
  - (b) Between 21 - 40 mg/100 ml of blood is dangerous.
  - (c) Between 41 - 70 mg/100 ml of blood is very dangerous.
  - (d) Beyond 70 mg/100 ml of blood requires immediate action.

### **3. Reformative Aspects of Revised Alcohol Policy:**

- (i) The following reformative action is to be taken for the staff short-listed as either chronic or habitual.
- (ii) Counselling of staff during initial/promotional training courses and periodical medical examination. Employees should be told about hazards of drinking as also about the short and long-term effects of drinking.
- (iii) They should be counselled for:
  - (a) Not drinking alcohol eight hours before going on duty.
  - (b) Should not have smell of alcohol on their breath while on duty.
  - (c) Should not drink alcohol while on duty.
- (iv) The railways may either decide to organise de-addiction camps within their own resources on the same pattern as Southern Railway.
- (v) Alternatively, NGOs should be identified at Zonal Head quarters and preferably at each divisional Head quarters also for organising rehabilitation programmes for de-addiction.
- (vi) Organising of these camps at regular intervals must be a continuous process and should not be given up after a one-time exercise. The modalities for organising such de-addiction camps may be worked out with each NGO on a long-term basis.
- (vii) It can be decided as a policy that in case some expenditure is incurred by the railway by way of payment to NGOs, then 50% of the same may borne by the railway and 50% by the staff concerned.
- (viii) The staff that has been categorised as habitual should be sent first, on priority, for undergoing rehabilitation programme for de-addiction at the nominated centre in preference to staff who have been categorised as cronic.
- (ix) Staff who go for the de-addiction camp and successfully complete it will be kept under watch for a further period of 6 months and thereafter taken off the list.
- (x) Staff who undergo the rehabilitation programme but are unsuccessful in their first attempt will be given a second chance for undergoing the de-addiction camp.
- (xi) Staff who is unsuccessful a second time will be medically decategorised and taken off Safety critical posts.
- (xii) Staff who refuse to go will be dealt with as follows:
  - (a) No further promotion.
  - (b) Special check to be kept on their working with particular reference to frequent and surprise breathalyser tests and blood/urine samples.
  - (c) Any lapses on their part will be dealt with as laid down under item no. 5.

#### **4. Preventive Aspects of Revised Alcohol Policy:**

- (i) While recruiting staff for safety critical posts of Asstt. Driver or Lever man or ASM, each candidate must be screened for alcohol content in their blood. Alcohol level of any amount will render the candidate unsuitable for recruitment.
- (ii) Each staff should be held responsible for ensuring that they do not hand over/take charge from another staff who is under the influence of Alcohol. Failure to do so will make them liable for disciplinary action.
- (iii) Each staff should be held responsible for ensuring that they report all cases of any of their co-workers who is under the influence of Alcohol on duty. Failure to do so will make them liable for disciplinary action.
- (iv) All Driver's and Guard's Lobbies must be provided with heavy-duty breathalysers, which are capable of indicating the blood alcohol level from breathalyser test alone. A stand by breathalyser may also be made available.
- (v) All Running/Operating Officers/Inspectors must be provided with portable breathalysers for conducting surprise checks especially with regard to those staff who have been categorised as either chronic or habitual.
- (vi) No Running staff will be allowed to sign on for duty without undergoing the breathalyser test. The readings of the breathalyser test must be entered in the signing on register.
- (vii) In case the result of the breathalyser test is positive then a printout of the readings must be obtained for further action.
- (viii) In case the staff concerned refuses to co-operate in undergoing the breathalyser test, he should be taken up under D&AR.

#### **5. Deterrent Aspects of Revised Alcohol Policy:**

- (i) Immediate supervisors of staff should be used as auditing agency for purposes of conducting surprise checks etc.
- (ii) Post Accident medical examination of all the involved staff should invariably be resorted to immediately. This should be irrespective of whether the staff concerned is prima facie responsible for the accident or not.
- (iii) Post Accident medical examination will give employees involved the opportunity of proving that alcohol played no part in causing the accident.
- (iv) The employee should be removed from safety critical post while waiting for the results of the Post Accident medical examination.
- (v) In case results of the alcohol test are positive then the staff concerned should be taken up under D&AR.
- (vi) Random surprise checks should be carried out on the staff. If they refuse for test the following action must be taken:
  - (a) Will not be considered for promotion.
  - (b) To be taken up under D&AR proceedings.
- (vii) If a Supervisor/Officer has a reasonable cause to suspect the fitness on duty.
  - (a) Relieve from duty, until tested.
  - (b) Remove from safety critical duties while waiting for results.
- (viii) If the result of the random medical check turns out to be positive, then the staff concerned should be taken up under D&AR.

## **6. Punishment Norms:**

- (i) Staff who is found with alcohol level of between 01 – 20 mg/100 ml of blood will not be permitted to perform duty.
- (ii) Staff who is found with alcohol level of between 21 – 40 mg/100 ml of blood will be issued a minor penalty in each case.
- (iii) Staff who is found with alcohol level of between 41 – 70 mg/100 ml of blood will be issued a major penalty in each case.
- (iv) Staff who is found with alcohol level of beyond 70-mg/100 ml of blood will be placed under suspension and disciplinary proceedings initiated against him for reversion from the safety critical post.
- (v) For repeated detection of 3 times, irrespective of the level of alcohol detected, disciplinary proceedings will be initiated against the staff concerned for reversion from the safety critical post.

*State of Art Breathalyser equipment capable of giving exact level of Alcohol content in the blood including print outs need to be introduced. These breathalysers should necessarily have the memory function so as in case of suspect a print out can be taken at a convenient location. Traffic Directorate of RDSO will standardise specifications of Fuel cell sensor based breathalysers.*

## **7. Changes required in Manuals and Rule Books:**

The revised alcohol policy for the Indian Railway will necessitate the following:

- (i) Amendment in the Indian Railway Act.
- (ii) Amendment in the Medical Manual.
- (iii) Inclusion of a Chapter in the General and Subsidiary Rules.
- (iv) The above amendments can only be carried out after holding discussions with organised labour unions.

**The Directorate concerned of Railway Board will amend the rules as per the above policy.**

## Existing provisions in various Manuals and Rule Books

### 1.1 Provision in Indian Railway Act 1989

**Article 172: Penalty for Intoxication:** *If any Railway servant is in a state of intoxication while on duty, he shall be punishable with fine which may extend to five hundred rupees and when the performance of duty in such state is likely to endanger the safety of any person travelling on or being upon a railway, such railway servant shall be punishable with imprisonment for a term which may be extended to one year, or with fine or with both.*

### 1.2 Provision in General and Subsidiary Rules:

**GR 2.09 Taking Alcoholic drink, sedative, narcotic, stimulant drug or preparation.**

- (i) *While on duty no railway servant shall, whether he is directly connected with the working of trains or not, be in a state of intoxication or in a state in which by reason of his having taken or used alcoholic drink, sedative, narcotic or stimulant drug or preparation his capacity to perform his duties is impaired.*
- (ii) *No railway servant directly connected with the working of trains, shall take or use any alcoholic drink, sedative, narcotic or stimulant drug or preparation within eight hours before the commencement of his duty or take or use any such drink, drug or preparation when on duty.*

**SR 2.09/1 Railway servant found intoxicated**

- (i) *Railway servant found in a state of intoxication on Railway premises whether on or off duty, will be liable to summary dismissal.*
- (ii) *When any railway servant is found intoxicated on the railway premises or suspected to be in a state of intoxication, the evidence of two independent witnesses and if possible, a medical report regarding his condition should be obtained. Arrangements for his relief should be immediately made and matter reported to the proper authority.*

### 2.0 Indian Railway Medical Manual:

- (i) *As per Indian Railway Medical Manual (Article 564), a person is drunk when he is so much under the influence of an intoxicating drink or drug as to lose control of his faculties to such an extent as to render him unable to execute safely the occupation at which he is engaged at the material time (Ministry of Railways letter No.69/H/3/26, dated 03-01-70).*
- (ii) *Article 565 describes the mode of checking drunkenness – Annexure 'A'. Para 5 describes that a Railway doctor when certifying case of drunkenness, should base his opinion on following consideration*
  - (a)** *Whether the person concerned has recently consumed alcohol.*
  - (b)** *Whether the person concerned is so much under the influence of alcohol as to have lost control of his faculties to such an extent*

*as to render him unable to execute safely the occupation on which he was engaged at the material time.*

- (c)** *Whether his state is due, wholly or partially, to a pathological condition which causes symptoms similar to those of an alcoholic intoxication, irrespective of the amount of alcohol consumed.*
- (iii) *He should not certify the case as drunk just because patient smells of alcohol. The quantity taken also is no guide, but the fact of impairment of his capacity to perform his duties has to be taken into account.*
- (iv) *The program for recording particulars of suspected cases of drunkenness is annexed herewith.*

**564. All drunkenness cases be examined carefully:-**

- (1) Every case of drunkenness is a potential medico-legal case and the Railway doctor called upon to certify such a case should make a careful examination and should note down every important particular.
- (2) Railway doctors may also have to issue drunkenness certificates to persons produced by police at places where there are no civil hospitals or dispensaries and only a Railway hospital or health unit exists.
- (3) In places where prohibition is in force, it is an offence even if one has imbibed alcohol, let alone getting drunk. When a case is brought, the Railway doctor should carefully examine the case and certify as to whether:
  - (a) The person has imbibed alcohol but not drunk or that
  - (b) The person is actually drunk i.e. under the influence of alcohol.
- (1) The Performa for recording particulars of a suspected case of drunkenness is given in Annexure-XIX to this chapter. This form should always be kept handy as the Railway doctor may be called upon to certify drunkenness at any moment and sometimes away from his headquarters.
- (2) It is desirable that a Railway doctor, when certifying cases of drunkenness, should base his opinion on the following consideration: -
  - (i) Whether the person concerned has recently consumed alcohol.
  - (ii) Whether the person concerned is so much under the influence of alcohol as to have lost control of his faculties to such an extent as to render him unable to execute safely the occupation on which he was engaged at the material time.
  - (iii) Whether his state is due, wholly or partially, to a pathological condition, which causes symptoms similar to those of alcoholic intoxication, irrespective of the amount of alcohol consumed.
- (1) He should not certify the case a drunk just because the patient smells of alcohol. The quantity taken is also no guide, but the fact of impairment of his capacity to perform his duties has to be taken into account.

**565. Instructions regarding issue of certificates for drunkenness**

- (1) When a Railway doctor is called upon to certify a case of drunkenness in a Railway employee, he should after careful examination immediately report by a telegram or urgent letter his opinion to the immediate superior or Divisional Officer of the employee concerned intimating whether the employees should be put off duty or not.
- (2) When a Railway doctor is asked to certify the crew of a running locomotive and if on examination he finds a member of the same under the influence of alcohol, he should immediately issue a memo to the authority concerned, putting the person off duty.
- (3) As far as possible, the Senior Assistant Divisional Medical Officer themselves should



undertake to examine such cases of drunkenness rather than depot their juniors, and in case of doubt, should refer the case to the Divisional Medical Officer or Assistant Divisional Medical Officer in charge of his section.