



## NATIONAL SAFETY COUNCIL

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### Position/Policy Statement

#### Cannabis Impairment in Safety Sensitive Positions

##### **NSC Policy/Position**

The National Safety Council (NSC) supports policies to mitigate and eliminate the risks of cannabis (marijuana) and other products containing delta-9-tetrahydrocannabinol (THC), the impairing component in cannabis. Safety concerns are paramount as legalization and decriminalization continues.

NSC believes it is unsafe to be under the influence of cannabis while working in a safety sensitive position<sup>1</sup> due to the increased risk of injury or death to the operator and others. Research is clear that cannabis impacts psychomotor skills and cognitive ability. However, the amount of THC detectable in the body does not directly correlate to a degree of impairment. At this time, NSC believes there is no level of cannabis use that is safe or acceptable for employees who work in safety sensitive positions.

##### **Need for Policy Position**

By adopting this position, NSC will be able to increase involvement in the policy discussion about cannabis impairment, and provide guidance for employers as they navigate changing cannabis laws.

Cannabis is the most widely consumed illicit substance worldwide.<sup>2</sup> In 2015, the World Drug Report estimated over 200 million people between the ages of 15-64 have ingested cannabis. According to a study reported by the National Institute on Drug Abuse, employees who tested positive for cannabis had:

- 55% more industrial incidents
- 85% more injuries
- 75% greater absenteeism compared to those who tested negative.<sup>3</sup>

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<sup>1</sup> "Safety Sensitive" refers to jobs that impact safety of the employee and the safety of others as a result of performing that job. For example, 49 CFR §382.107 defines safety sensitive for commercial motor vehicle operators.

<sup>2</sup> [https://www.who.int/substance\\_abuse/facts/cannabis/en/](https://www.who.int/substance_abuse/facts/cannabis/en/)

<sup>3</sup> NIDA. "Marijuana." *National Institute on Drug Abuse*, 25 Jun. 2018, <https://www.drugabuse.gov/publications/research-reports/marijuana>. Accessed 30 Apr. 2019.

Cannabis affects the body in a number of ways. Experimental studies of subjects dosed with cannabis found, psychological effects include relaxation, sedation, disorientation, impaired judgment, and lack of concentration. The physiological effects include slowed fine motor skills, reddening of eyes, increased appetite, dry mouth, and increased heart rate. These effects contribute to impaired learning, short-term memory and attention deficits, and delayed decision-making.<sup>4</sup>

As a leader in impairment (opioids, fatigue, etc.) workplace policies and consistent with advocacy in these other areas, NSC supports moving people to non-safety sensitive operational positions when using cannabis for medical purposes.

## **Federal Law**

Despite medical cannabis laws in 46 states, cannabis remains federally illegal. The federal government regulates drugs through the *Controlled Substances Act (CSA)* (21 U.S.C. § 811), which does not recognize the difference between medical and recreational use of cannabis.<sup>5</sup> Under the CSA cannabis is classified as a Schedule 1 drug, meaning that the federal government views cannabis as having no medical value and high abuse potential.

There are no federally approved prescriptions for cannabis use. Doctors may not “prescribe” cannabis for medical use under federal law, however they can “recommend” its use under the First Amendment.

## **State Laws**

Cannabis laws vary from state to state. At the time of writing this document, 3 states, the District of Columbia, Guam, Puerto Rico and US Virgin Islands have approved comprehensive, publicly available medical marijuana/cannabis programs. Twenty-three states and the District of Columbia have decriminalized marijuana, and ten states and the District of Columbia now have legalized small amounts of marijuana for adult recreational use. States that have approved the medical use of cannabis have allowed certain classes of medical professionals to grant a person residing in the state to purchase and use cannabis in certain controlled forms. Those states that have decriminalized or legalized recreational use of cannabis permit a person to purchase and use cannabis if:

- They are in that specific state
- The cannabis is in a legal form with regulated strengths
- It is under the maximum amount allowance, if the law stipulates an amount

## **Research**

More comprehensive data and research is needed to better understand the effects cannabis has on the human mind and body. There are many anecdotal studies on a variety of cannabis-related subjects, including but not limited to assessing and defining the THC relationship to impairment, examining other safety implications, driving, vehicle crash rates, potential medical uses and benefits, impacts on opioid misuse and opioid overdoses, and more. However, there is not enough research to reach consensus on any of these cannabis-related subjects at this time.

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<sup>4</sup> NIDA. "Marijuana." *National Institute on Drug Abuse*, 22 Jun. 2018, <https://www.drugabuse.gov/publications/drugfacts/marijuana>.

<sup>5</sup> <https://www.law.cornell.edu/cfr/text/21/1308.11>

There is evidence that legalization or decriminalization of cannabis may increase vehicle crash rates, hospitalizations,<sup>6</sup> and other public health indicators. The Rocky Mountain High Intensity Drug Trafficking Area completed a study that found the yearly rate of emergency department visits related to marijuana<sup>7</sup> increased 52 percent after the legalization of recreational marijuana.<sup>8</sup> A study done by the Insurance Institute for Highway Safety (IIHS) examined 2012-2016 police-reported crashes before and after the retail sales of cannabis began in Colorado, Oregon, and Washington. IIHS estimates that these three states combined saw a 5.2% increase in the rate of crashes per million vehicle registrations, compared with neighboring states that did not decriminalize or legalize marijuana sales.<sup>9</sup> In 2017, the NSC Alcohol, Drug and Impairment Division issued "[Position on Cannabis \(Marijuana\) and Driving](#)," which clearly evaluates leading research concluding that cannabis degrades driving performance.<sup>10</sup>

NSC expects support from the American Industrial Hygienists Association, which has a similar position. Companies supporting cannabis decriminalization will oppose the position.

*This position statement reflects the opinions of the National Safety Council but not necessarily those of each member organization.*

Adopted by the National Safety Council, 2019

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<sup>6</sup> <https://rmhidta.org/files/D2DF/FINAL-%20Volume%205%20UPDATE%202018.pdf>

<sup>7</sup> In this instance, "marijuana" is used as the term for cannabis from the underlying research document.

<sup>8</sup> Ibid.

<sup>9</sup> <https://www.iihs.org/iihs/news/desktopnews/crashes-rise-in-first-states-to-begin-legalized-retail-sales-of-recreational-marijuana>

<sup>10</sup> [https://www.nsc.org/Portals/0/Documents/NSCDocuments\\_Advocacy/Divisions/ADID/Position-on-Cannabis-and-Driving.pdf](https://www.nsc.org/Portals/0/Documents/NSCDocuments_Advocacy/Divisions/ADID/Position-on-Cannabis-and-Driving.pdf)