



DRUG DILEMMA

All Eyes on Workplace Challenge

By Tom Schuman

Susan Murray Carlock, vice president of business development and corporate relations, is passionate about Mursix Corporation. The custom-engineered product solutions business, founded in 1945 and now located in Yorktown, has been part of her family since it was purchased by her parents in 1990.

That helps one understand her willingness to openly discuss a difficult issue – drug use in the workplace. Any employer with similar concerns, she says, should be worried about employee attendance, work quality and, first and foremost, safety.



Mursix employs approximately 300 associates over two shifts at its Yorktown facility.



Susan Murray Carlock (bottom, left) says safety and quality are too important for the company to risk having employees suffering from substance use disorder on the manufacturing floor.



“We make safety components in the automotive industry,” Carlock explains while sitting in a company conference room on a wet but mild mid-January day. “If your seat belt buckle doesn’t click correctly because there is a dimension off, someone here didn’t do their job correctly, that could cost someone their life.”

Carlock and Katy Drumm, human resources manager, are taken aback when the discussion turns to some businesses, desperate for workers, advertising the fact that they don’t drug test.

Drumm relates that such billboards “blow my mind,” while Carlock has no empathy. “Shame on them! Who would want to hire a business to produce or make anything for them with that kind of philosophy? I say they’re going to lose business and go out of business with that mentality.”

Initial signs

The Mursix effort to clean up its workplace

began about five years ago.

“We noticed behavioral changes, especially on second shift. People told us pills were being sold on the floor and there was drug paraphernalia found outside the building, so we initiated some reactive measures at the time,” Carlock recalls.

Those steps included exterior cameras (see sidebar on security strategies), training for supervisors and managers on what to look for on the shop floor and an enhanced presence in the form of off-duty police or security officers.

“To be straightforward, our strategy was

to scare the hell out of them,” contends Carlock, an emergency room nurse for 12 years before joining the family business. “We wanted a police presence walking through the building at any given time in the day or night. All that did though was take it (drug usage) down the street.”

But those initial steps did make a positive impression on other team members.

Citing the equipment in the plant and the safety considerations, Drumm says, “People are offended by that (drug use). They don’t want to sit back and say, ‘That’s just so-and-so, that’s what he does.’”

The initial zero-tolerance policy was adjusted to one that offers assistance and support.

“We realized how consuming it was. I truly feel 80% of our population was affected,” Carlock states, “whether it was (employees) or their families. We needed to become more approachable as an employer instead of being so staunch.

“It was kind of strange how fast it happened,” she goes on in describing the workplace reaction. “It was OK to talk about it. It was OK to confidentially go to HR, they’re not going to fire me, right? It took the fear away. The (gut reaction) as an employer is get it (the drugs) the heck out of here now. Then you stop and think about the people component of it. This is a community epidemic that is now inside our four walls.”

Changing course

Employees may have become more willing to speak up, but there is no easy answer or quick solution.

“It was almost the better part of a year and a half to two years (to see a difference),” Carlock estimates. “Getting the proper people in the right places, especially on second shift, was our biggest hurdle.”

The drugs that Mursix was battling against varied.

“We had always been told there were pills being sold,” Carlock says. “We did not know the extent (of the problem) until we found meth paraphernalia, until we saw meth



Indiana Workforce Recovery is the Indiana Chamber and Wellness Council of Indiana initiative to help combat the opioid epidemic in the workplace.

Learn more at www.wellnessindiana.org/recovery.

This is the second in a yearlong series on the drug and addiction issues facing Indiana, as well as efforts to combat the crisis.

Open spaces can help minimize on-site locations for drug misuse.



Investigating on the Manufacturing Floor

A police officer and detective for eight years, Mike Budenz has operated his investigative company (Michael Budenz & Associates) in Fort Wayne since 1984. Opioid and other instances of drug use have become more common in the workplace.

“The drugs and the alcohol, there’s definitely been an increase,” Budenz reports. “Generally speaking, if somebody has a really severe opioid problem, they show up on the radar screen pretty quickly. They don’t show up for work, which can be a dischargeable offense. They engage in other misbehaviors at work, fighting with co-workers, engage in theft to support their habit.”

And, due to their nature, manufacturing facilities can be a fertile ground for that drug use.

“Usually it’s spread out over a pretty wide area, sometimes even multiple buildings or facilities,” he shares. “It’s tough because supervisors can’t be everywhere and the employee might have friends who cover for them. There are places in large facilities where employees can hide among the pallets, among the shelving. We call them “nests,” where they hide from their supervisors.”

The presence of equipment and machinery poses an additional challenge. Budenz says an impacted employee can injure themselves or others, either unintentionally or in the desperate attempt to secure more painkillers.

Asked if faking injuries was part of the equation, his immediate answer was, “Yes. Yes. Yes!”

The strategies are fairly straightforward when an employer contacts Budenz with evidence or suspicions of a drug problem.

“The first part is observation, by doing physical surveillance if we suspect drug use taking place during breaks, during lunch hours, out in the parking lot or even off the facilities,” Budenz outlines. “We document it with as much video as we can get from a distance. If they remain inside the facility, finding the “nests” with hidden surveillance cameras.

“Part of it is conducting an evaluation of the employee – a background search to find out if the person has a history of drug usage, what’s the drug of choice, do they have a propensity for violence.”

Employers can help themselves by identifying potential problem areas within the facility and looking at their policies regarding employees, including being in vehicles during lunch time or breaks. Once a problem has been identified and addressed, Budenz offers additional services such as protection for individuals involved and security for the facility.

Although technology has helped him and others do their jobs at a greater level than 35 years ago when he started in this business, he reminds that “people are still people” and problems will never go away.

RESOURCE: Mike Budenz, Michael Budenz & Associates, at www.budenzinvestigations.com

being used (through security cameras) in a car by two of our associates. The pills, I think, were a constant. Pills seemed to linger.”

Drumm adds, “It’s important to separate out that these are not bad people. They just found themselves in a bad position. If we can offer time off or make referrals (for treatment), we absolutely prefer that to be the first step.”

The drug use inside the company may have been decreasing. The same can’t be said for the heartbreak.

“There have been crushing, crippling stories. Near death and death experiences,” Carlock relays. “We’ve had it all here. By family members – way too many. Mental health illnesses due to it.”

Success – but only partial

Here is perhaps the greatest testament to the cruelty of this epidemic.

BizVoice (BV): Talk about the three years since you’ve been able to see a difference.

Carlock: “I want to definitely make it clear that we feel we are a success story. We are very fortunate to have amazing people, from HR to leadership, who understand the importance of this and prioritized to keep it (drug use) out of the building and make it stay out. That in itself is a great accolade to our people.”

Drumm: “On my end, I can say we haven’t seen as many people affected by it personally. It’s more, ‘I have family members who are having difficulty.’ Now it’s focusing on the people who are dealing with it in their personal lives and how can we provide resources for them and their family members.”

Carlock describes the full fitness center, health and wellness consultant brought on board and other initiatives to drive better physical and mental health.

Carlock: “We’ve also been burned. Not so much by the drugs coming back, but by the people we give another opportunity to. I don’t want to call it second chance, because it’s not that. We want to believe. We want to trust the three months they’ve been away at rehab really stuck and unfortunately that’s not the case.”

BV: Have the greater percentage of employees returning from receiving assistance or treatment been successful?

For the only time in our 40-minute conversation, the two company leaders pause to look at each other and confirm their response.

Carlock: “There are no success stories right now. Not yet.”

Drumm: “It might have been like a short-term success. We’ve seen that.”

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BV: If that “another opportunity” fails, do you then move on from that person?

Carlock: “Absolutely. There’s a credibility as an employer with your entire village. The people down on the floor, they know what is going on. If you continue to allow things to happen. ... You can’t let your people down.”

BV: How painful is the finality of having to let a person go under these circumstances?

Drumm: “When it doesn’t work out, it’s almost like working through the five stages of grief: Angry because we really tried to help. We wonder what we could have done differently. Then you’re really sad because you think of this person’s family and if you have been with them long enough, you’ve seen what their life or potential can be like when they’re not under the influence.

“You mourn the person they could be, the opportunities they are losing. But then eventually you pull yourself up and say we’re going to help the next one. One bad experience is not going to stop us from helping anyone who comes and seeks help from us.”

Enduring challenge

Mursix willingly shares its story to try and help others. But there

lies another contrast – pride in what has taken place at the company and frustration that an ultimate solution proves so elusive.

“There’s a lot of dialogue, especially in the manufacturing community.” Carlock offers. “To be honest, we’re all talked out. What more can we say? I think everybody is feeling helpless and out of control. As a business, we don’t feel in control of this, but we know what we can control within these four walls.”

As for Mursix itself, “The attention we’ve given to our people the last five years is what has changed us as a company. The focus has been on what we can do to be the best employer we can be for our people. That means a more satisfied workforce and a more satisfied customer base.”

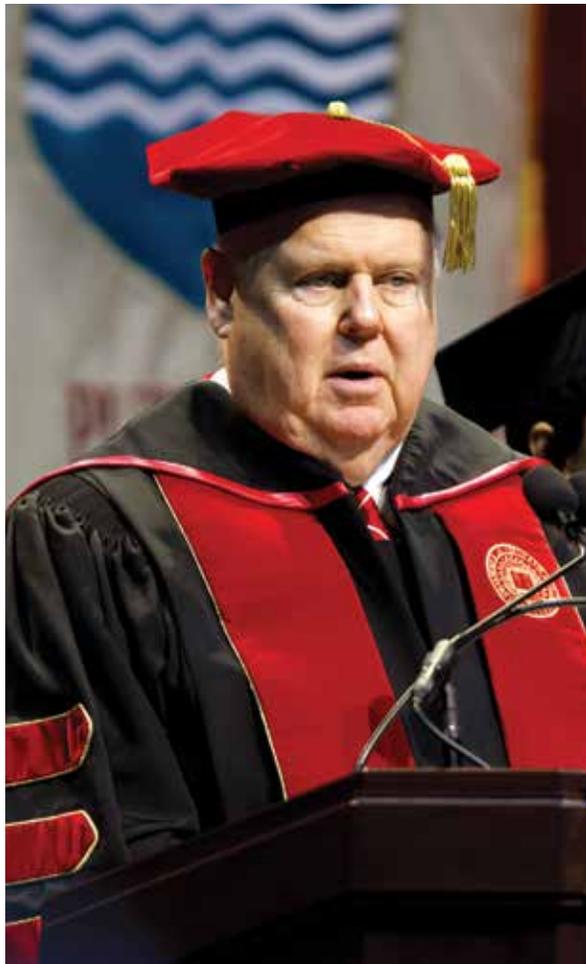
Drumm was not with the organization five years ago but says today: “I’m happy to be at a place that has standards, the attention that has been put on it, the reputation within the community. I’m happy for the impact it has had for the people on the floor. To know now that one of the stressors, whether direct or indirect, has been removed so we can all come in and focus on our business and have a good day – I’m proud of that.”

The two are asked what suggestions they have for others.

“Make it their highest priority. They have to get the right people together, get them trained, put a little money toward it and start beefing up their standards, their security, their policies,” Carlock contends.

Drumm stresses, “You’ve got to change your viewpoint on this. It needs to be: ‘How can we solve this, not how can we make this workable for us.’ There’s definitely a difference between the two.”

RESOURCES: Susan Carlock and Katy Drumm, Mursix Corporation, at www.mursix.com



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