



The Frontline Supervisor

Helping You Manage Your Company's Most Valuable Resource – Employees
Solutions Employee Assistance Program 1-800-526-3485

Q - *I hired an employee, but she isn't a good "cultural fit" at our company even though her work ethic is good and she's a nice person. This can't be an EAP referral—or can it? I feel stuck with this person*

A - When a new hire doesn't mesh with the organizational culture, it's usually because the individual is used to working in a different environment with different values, people, and standards of acceptable behavior. Some employees have the ability to self-correct after an adjustment period. In your case, the EAP can work with your newcomer to compare your culture to her past workplaces. Through this process, she can identify how the behaviors that she developed in past jobs may no longer work to her advantage. For example, an employee may have been accustomed to giving her opinion and reporting observations about others' work freely, but within a new work culture, communicating this information should be done discreetly and formally. Employees are often capable of changes more readily than many supervisors think. This makes referral to the EAP a good move.

Q - *When employees enter treatment, is there a difference in outcome between those who are admitted with a sincere desire to get well versus those who are motivated to avoid a disciplinary action for problematic performance or behavior?*

A- Although both types of employees have different motivations for entering treatment, it is not possible to say who will be more successful in recovery and remain abstinent from drugs and alcohol. Supervisors and coworkers may be skeptical of the desire for admission by some employees who seem to make a sly move toward admission, but this skepticism is not well placed. Treatment is a powerful, life-changing event, and it can overtake addictive disease patients initially in strong denial upon admission, causing them to eventually desire a drug-free life. A strong association exists between workplace-related admissions and successful recovery, like those facilitated by EAPs. It has been closely observed by health professionals that when fear of job loss is present, an addictive disease patient's prognosis is good with support and follow-up after treatment. This exciting discovery has led to the proliferation of employee assistance programs and has saved untold numbers of jobs and lives.

Q - *After I referred an employee to the EAP for his anger, he refused to meet with an EA professional and said he just called the program to “chat.” So there is no release. The EAP wouldn’t fall for this, would it? Doesn’t an employee have to meet in person to become a client?*

A - What matters most is that the employee develops better strategies to manage his anger. This is more likely to occur if he remains in contact with the EAP. If he’s only willing to make phone calls to the EAP, that’s better than nothing. Meanwhile, the EA professional will try to persuade the caller to come in for a meeting. In any case, your role is to hold your employee accountable for improvement—and to take disciplinary action as needed if his anger resurfaces. Employees are under no legal obligation to agree to a supervisor referral to the EAP—and they need not sign a release form. But if they refuse to take these steps, they do not reap the full benefits of their involvement with the EAP. With this loss of communication, managers are slow to assume the best and more easily led to believe that no improvement in performance or resolution of personal problems is forthcoming. Most employees do not want such misperceptions, so they should understand the disadvantages of minimal involvement in the EAP.

Q - *One of my employees asked me the other day if the EAP could help her stop smoking. That’s not part of the EAP’s role, is it?*

A - The EAP can give referrals to smoking cessation classes and provide ongoing support to anyone who wants to stop smoking. Talking with an EA professional can serve as an effective follow-up to a class. At the EAP, your employee can discuss why she’s determined to quit and can gain strength and willpower by reaffirming her goal and sharing her experience. The EAP can also offer practical pointers on how to combat cravings. Examples include drinking water to ward off the temptation to smoke or following a daily exercise routine to lose weight while remaining smoke free. Research shows that the odds of successful smoking cessation improve when individuals gain encouragement from a supportive team of allies. This team can include family, friends, coworkers, and the EAP.

Q - *I am a new supervisor and need to refer an employee for a reasonable suspicion test for substance abuse. I am very nervous. What are the key issues in making such a referral without blowing it?*

A - Review your documentation in the employee’s personnel file. Review your organization’s unique policies and procedures for its testing program. Confirm that you have written evidence to substantiate the basis for your reasonable suspicion, such as firsthand observations including dates and times. Also document any instances where you’ve expressed your concerns to the employee—and what happened. As long as you can support your referral with a well-documented file, it will be easier to confront the employee with confidence. Expect the individual to reject the referral at first. Overcome resistance by explaining that your main concern is to provide appropriate help for the employee to treat problems relating to substance abuse if they exist. Many employees will assume they are in trouble and you’re penalizing them, so reassure them that the purpose of your referral is to address safety and ability to perform—not to punish them. If possible, rehearse with a trusted colleague and get feedback.