

SEPTEMBER
2019

FrontLine Leader

Employees — Your most valuable asset

Q:

My employee has mood swings that range from pleasant to very grumpy and argumentative. Everyone complains about it, but I have not gotten to the point of taking action. After all, we all have personality quirks.

How do I decide that it's time to make a referral to the EAP?

A: Although no one's perfect, be cautious about slowly adapting to dysfunctional communication and behavior and thereby promoting a poor work climate that interferes with productivity, adversely affects morale, causes turnover, and enables this behavior to grow worse or spread.

You aren't ready for a formal referral to the EAP until you sit down with this person to give feedback, ask for changes, describe those changes clearly, and get a commitment from the employee. You can consult with a Continuum EAP professional to formulate an approach to address this issue.

Are you afraid of confronting this employee? Discuss that possibility with the employee assistance program because it could serve as a roadblock to what appears to be necessary change that would benefit everyone.



My employee has repeatedly been coming to work late. I finally sat down with him to address it. He opened up about the problems he is facing at home. He wants leave without pay (LWOP) for a week to deal with these problems. I don't mind authorizing the leave, but should I ask him to visit the EAP too?

A: The seriousness of the attendance problems makes a formal referral to the EAP appropriate. Consider this as the first step. Discuss the attendance pattern with a Continuum EAP professional or share documentation to allow a more thorough assessment. The assessment could discover that the problems he has shared with you are not primary, but symptoms of larger issues that should be resolved before attendance issues will stop. Taking time off might be a needed accommodation, but maybe not. *(Note that the EAP cannot tell you to approve or disapprove LWOP.)*

A release of information will allow the EAP to discuss performance concerns and confirm if the employee is attending meetings and following recommendations. The EAP will not share personal information or specific clinical recommendations. This allows you, the supervisor, to remain focused on the employee's productivity and attendance. On a side note, this scenario is a good example of how easy it can be to accept what you are hearing at face value from a troubled employee without knowing it will resolve the problem.

When supervisors inquire about complaints regarding harassment in a work unit, what are some of the classic mistakes they make that cause bigger problems for organizations?



A: Common mistakes supervisors investigating complaints of harassment make include not informing and working closely with their HR advisors or following instructions provided to them. Beyond these missteps, allowing one's misconceptions about harassment to interfere with or influence an investigation can contribute to larger problems.

An example includes suggesting, even slightly, that some responsibility lies with the victim of the harassment. Another is deciding or suggesting that the complaint is not that serious if a long delay exists between the date of the incident and its first report. Another is making a judgment that the incident is not serious, or making a statement about how serious it appears.

Showing a lack of empathy or not appreciating that victims of harassment may feel powerless and traumatized are common blunders. Remember that victimized employees of any trauma can benefit from a confidential and empathetic listener. Therefore, it is completely appropriate for a supervisor to remind an employee that the EAP is available to provide support.



My employee entered treatment after a positive drug test for an opioid. Things have been going well, but lately her attendance is slipping. How many chances should we give if in fact she has relapsed? Nothing is spelled out in the policy.

A: Those in recovery for addictive diseases are prone to relapse like other illnesses. Still, most people react emotionally to drug relapse including employers. It is important to not assume that the employee has relapsed or make decisions based on those assumptions. You should focus on the behaviors and performance indicators that you observe in the workplace and give direct and clear feedback to the employee about your expectations.

Many employers have follow-up testing policies in place as a condition of continued employment following a positive drug screen. Or, if signs of potential impairment are observed a reasonable suspicion drug screen may be appropriate. It is essential that all supervisors follow their companies' policies and coordinate with their HR advisors. They will be able to help determine the most appropriate next step, which could include a referral to the EAP related to work performance or a positive drug screen.