

MY supervisor newsletter

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Our supervisors recently struggled with how to notify employees about a worker's suicide and, in one case, a murder at a remote location. This delayed managing the incidents and recognizing these employees' lives. This caused upset among coworkers. How should managers respond to such incidents?

Can I refer an employee to the EAP for acting "immature"? By immature I mean demonstrating behaviors that are more like those of a teenager, acting out of personal desires rather than putting the needs of the team first, and displaying jealousy and envy of others. This employee must change.

My employee says he is being treated for depression by a psychiatrist. He is still coming to work late, however. This is my key concern. The EAP is not involved yet, but how do I involve the EAP if my employee is already seeing a medical doctor and a therapist? Won't the employee resist?

The death of an employee, especially by accident or homicide, will thrust the manager into a crisis role that employees instantly rely upon for direction, support, and empathy. Fortunately, from the standpoint of how to manage it, death in the workplace is not new. Step-by-step protocols and checklists exist for managers to follow, although smaller employers may not keep such material on hand. Examples can be found at the American Psychological Association, the Society for Human Resources and nonprofits that focus on helping people manage grief (see below). The EAP can also assist with helping managers find such resources, while supporting employees and later offering more awareness and education about helping employees and recognizing protracted grief and its effects on productivity. Note that the two most significant mistakes managers make regarding death in the workplace is treating such incidences too lightly or turning away from them too soon in an attempt to get back to work.

Source: www.griefcounselor.org/2017/11/07/grief-in-the-workplace-an-outline-for-helping.

Since "immaturity" is difficult to measure, it becomes important to be descriptive of the objectionable behavior so it can be presented in a corrective interview. You can then ask that it stop, be clear about it, and later measure whether change happens. This is not as easy as it sounds, but it is crucial to motivate change and refer the employee to the EAP if it becomes necessary. You may need to witness again the behavior you describe, and document it contemporaneously so it is clear. You have witnessed the employee being selfish and "not putting the needs of the group first." How is this demonstrated by words or behavior, and what substantiates the attitude and misdirection you see? Rely on the EAP or your human resources advisor for help in how to construct useful documentation. You are more likely to see the changes you want, possibly without ever needing to make a referral.

You can involve the EAP by making a formal referral based upon the performance, conduct, or attendance issues demonstrated by this employee. In this case, coming repeatedly late to work is the problem. It's a good thing your employee is seeking help, and it may help resolve the depression problem, but attendance problems remain. So, the EAP is appropriate. If your employee meets with the EAP, a release will be signed, an assessment will be conducted to consider the type of treatment being received, and a decision will be made to either consult with the physician (with the employee's permission) or make additional recommendations based on the EAP's findings. Could there be a problem that the psychiatrist is not treating? Could there be a misdiagnosis? Could the EAP discover the real problem that contributes to attendance issues? The answer to these questions is yes.

We have employees returning to on-site work, and many have not been together for quite a while. Is there something I should do as a supervisor to facilitate the renewed team environment, or will this naturally take care of itself?

“Reboarding” (re-onboarding) describes the process of reuniting employees and facilitating their renewed role in the workplace. The process recognizes that previously quality teams and effective coworker relationships will not necessarily pick up where they left off. Many surveys report dramatically increased anxiety of employees returning to work. Change causes stress; this alone is enough to make the transition back to work more difficult. Managing this anxiety falls on supervisors. Along with many employees perceiving remote work as more desirable, changes in family routines add to employees’ stress. A key objective for managers is helping to prevent attrition by facilitating an equally happy on-site job experience. This requires understanding, patience, reassurance, and good communication. Being present and holding meaningful conversations with employees and allowing them to share their viewpoints and opinions about what they are experiencing being back on the job are crucial. Pay attention to signs or symptoms of troubled workers, particularly those who appear unable to reengage. Suggest the EAP, or refer employees as needed.

When an employee seeks help from the EAP, how is it different from counseling services offered in the community by a mental health clinic?

When employees seek help for personal problems in the community, they are usually at a disadvantage in two ways: (1) there is usually no input other than the employee’s view or understanding of his or her issues, and (2) there is usually little knowledge about the different types of mental health licenses and therapeutic approaches. Often, the employee would randomly pick a community clinician out of a list based on who is accepting new clients. The community clinician may complete an assessment or a psychosocial history to gain insight into the origin and to understand key aspects of the problem, but the employee’s account is the sole source of information. In contrast, when an employee contacts the EAP first, an initial assessment helps steer the employee toward appropriate resources that match the identified issues. The EAP has a network of providers who have been vetted for their experience in conducting assessments and performing resolution-focused therapy. By doing an initial assessment and giving the employee a direct connection to a specific provider (rather than simply offering a list), the EAP saves the employee time and effort, and often the result is the employee is seen more quickly by a provider well-suited to the presenting issue. The EAP can also offer the provider additional context about the nature of the problem, aided by the EAP’s expertise and proximity to the workplace. As a result, the provider is better able to establish a realistic treatment plan to help the employee.

Please call our EAP professionals for advice on confronting and referring troubled employees to the EAP. We will assist you in developing action plans and coach you toward successful confrontations. This is part of your service with MYgroup.

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