

# MY supervisor newsletter

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**The EAP gave a presentation on stress, and a few employees who attended the presentation openly stated that they planned to go visit the EAP. It was a great presentation, but I was surprised at the number of stressed workers. Should I be concerned? Should I ask the EAP how I can help?**

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**If a tragedy occurs in the workplace and employees are emotionally affected, what signs and symptoms should I look for later (following any counseling and “psychological first-aid” employees receive) so I can be supportive and encourage self-referral to the EAP?**

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**Can I phone the EAP to find out if an employee I suggested attend the program showed? More specifically, if the employee was in fact never seen, can the EAP say so?**

**Interest in participating** in the EAP following a stress management presentation is not necessarily because of work strain as it is typically viewed. A multitude of other personal problems that your employees may initially only label as stress in public with their peers who also attended the presentation could be the reason. Saying that one is getting help for stress is less stigmatizing than admitting one is suffering with depression, couples problems, addiction, a teenager with an eating disorder, etc. Stress management training, while helpful to employees in offering insight and techniques in managing stress, has a tremendous benefit in also helping promote the EAP. It demystifies the program and encourages employees to take the next step and feel safe in using the program to resolve personal problems. There are many ways supervisors can help alleviate stress, of course. The EAP can consult with you and offer tips on what might be helpful based on the nature and circumstances of your workgroup.

**An acute stress response** is normal during and immediately following a tragic and frightening event at work. The best intervention after any initial support given to employees is education about the signs and symptoms that could later constitute post-traumatic stress disorder (PTSD). Signs and symptoms of PTSD may not be easily noticed by you. They may include disturbing thoughts, feelings, or dreams related to the event; mental or physical distress in response to trauma-related cues; efforts to avoid trauma-related situations; and an increased fight-or-flight response, especially to events that are similar to or trigger memories of the tragic event. These symptoms could produce secondary effects that you might observe, including job performance issues, attendance problems, or behavioral struggles on the job. If you observe such effects, you can then discuss your observations (not your diagnostic impressions) and suggest the EAP.

**Most EAPs will state** that they can neither confirm nor deny participation in the program, and this answer is the best one to help protect employee clients and the program’s perception of confidentiality among the workforce. Whether or not the employee is an EAP attendee does not interfere with, prevent, or amend any administrative actions you need to take or consider in response to the worker’s performance, because the EAP is not a “safe harbor.” This is consistent with EAP policies. Conceivably, employees could tell you they are participating in the EAP when they are not, but you should still make decisions based on what is observable, measurable, and consistent with employees’ performance.

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**People criticize my messy desk. It's quite a joke with the office. I don't feel that I am bullied, and I haven't been lectured by management or experienced any adverse actions, but am I a bad manager because my desk is messy and looks completely disorganized?**

**The effects of a disheveled** desk on productivity and the work climate are what would concern your management. Either these issues aren't a problem or your manager has not been willing to confront you about them yet. Being disorganized is a trait commonly observed in ineffectual managers. At the very least, it does not demonstrate good role modeling. Do you forget details, lose things, show up to meeting with missing documents, or miss meetings altogether? If so, a messy desk may be a symptom of a larger problem. Meet with the EAP to discuss the disorganization, which may lead to insights as to causes and what you can do about it. The teasing and reactions you receive from others may bother you more than you are willing to admit. If so, you may find motivation at the EAP to make changes so you can benefit from a more organized workspace.

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**I have known my employee for many years and am quite familiar with her personal problems. Does this create an exception in terms of not being given more specific information about the nature of her issues discussed at the EAP?**

**Typically, EAPs share** very little information with a signed consent to release confidential information. This protects employees from the possibility of improper and reckless disclosures of confidential information, and in turn helps underscore and ensure the confidential nature of the EAP. Information that the EAP can share with managers, with an employee's signed release, includes acknowledgment of participation, cooperation with EAP recommendations, and accommodations for a manager to consider in supporting the employee's functional capacity and limitations. Historically, managers don't need any additional information to successfully manage their employees' performance. Your employee is free to share information with you directly about treatment or medical recommendations, but it would be improper for the EAP to communicate with you about these things because there is no clinical or performance-management justification. This may be difficult to accept after having played a significant role in supporting your employee up to this point, but you can still do that by being a manager who stays focused on performance.

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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 EAP service with MYgroup.

MYgroup 704-529-1428 or 800-633-3353