When documenting evidence of reasonable suspicion of substance abuse, what should I be cautious about not omitting so my documentation is useful and effective?

**Common omissions** when creating documentation to support reasonable suspicion of substance abuse include failure to contrast behaviors witnessed with those normally observed. These other non-problematic behaviors show that what you have observed is not easily explained away by another cause. For example, if you witness an employee’s uncontrollable and inappropriate laughter—a possible indication of illicit drug use—be sure to describe how the employee’s mood and demeanor normally appear. Likewise, if an employee is behaving in a belligerent or aggressive manner, be sure to state that no provocation existed prior to the disturbing behavior, if indeed none was witnessed. These contrasts help make your documentation credible. In the latter example, the behavior documented is far less likely to be challenged and dismissed as a happy-go-lucky personality style.

When an employee is referred to the EAP by a supervisor, if the employee truly believes they have no personal problem whatsoever, isn’t this the same as forcing the employee to participate? Isn’t this a problem for the EAP as a matter of ethics?

**As a matter of** policy, EAPs are voluntary and established to help employees address personal problems that may affect job performance, and they serve as helpful and appropriate mechanisms to assist supervisors in managing troubled employees. Within this framework, a supervisor referral based on job performance, even if an employee says they have no personal problems, does not conflict with ethics or the EAP’s core technology (fundamental principles of operation). The classic example is the alcoholic in denial who attends the EAP after referral for performance problems, but later is motivated to enter treatment based upon an assessment, motivational counseling, and evidence of the disease. Some employers may modify their policies to make participation in EAPs mandatory for certain infractions. However, even in such cases, referral is more akin to an accommodation with a disciplinary action held in abeyance, pending cooperation and follow-through with EAP recommendations.

What is a common mistake supervisors make after informally referring an employee to the EAP for performance issues and urging them to attend?

**The most common** mistake is not formalizing the referral later if lasting changes in performance are not forthcoming. Some supervisors prefer to be less formal about urging troubled employees to participate in the EAP. This approach can be effective, and it is less confrontational, but it typically will not generate the same degree of urgency and cooperation as a formal referral process does. This can be a problem if a health condition exists that requires a strong commitment from the employee to treat it. For example, an employee
If performance problems return after an employee is referred to the EAP, should I assume the employee is still participating in the program if no phone call from the EA professional informs me otherwise?

My main problem as a supervisor is lack of assertiveness. I imagine conflict and hesitate to ask employees to do certain things, or I avoid raising issues I perceive will create conflict. I am very frustrated with myself and want to overcome this problem. What do you suggest?

The battle is half won with your desire to change. It appears that you are linking assertiveness with aggression. Doing so inhibits your ability to become assertive. Assertiveness is not aggression, which takes rights from others. Shift your focus to your right and responsibility to supervise, direct, and lead others because it is your job to do so. The EAP can work with you to master this supervisory skill. Every day is an opportunity to practice assertiveness, so give the following a shot: When you experience an opportunity to be assertive, mentally identify the justification. For example, tell yourself, “My job requires asking Jim to have all the statistics to me by Friday.” Later, make a note of how well you performed at being assertive, and how you’ll improve at the next opportunity. These steps of thinking, writing, reading, practicing, and evaluating will lead you to your goal.

Communication is key to successfully using the EAP and helping troubled workers. So make the call to find out whether your employee’s participation is still ongoing (assuming a consent form is still active), and discuss the performance issues. A number of possibilities exist: 1) Your employee could be fully participating, but still be having performance issues; 2) the employee may represent to the EAP that they are participating in its recommendations, but are not really doing so; 3) the employee may have withdrawn the release and abandoned EAP participation; and/or 4) the employee may be participating fully in recommendations, but withdrawn his or her contact with the EAP. Other possibilities also exist. The bottom line is that you get to decide how to respond to the performance issues because EAPs and EAP participation do not establish a roadblock that prevents supervisors from doing their jobs.

with an attendance problem due to an undiagnosed gambling addiction may be less motivated to participate in every EAP recommendation to treat this difficult condition. Motivation and urgency, which are more likely with a formal supervisor referral, would be lacking. Loss of a valuable worker is a risk if the supervisor does not go the next step to formalize the EAP referral with continuing performance problems.