

CEHR-D

Regulation
No. 690-1-710

29 June 2012

Civilian Personnel
EMPLOYEE ASSISTANCE PROGRAM

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DEPARTMENT OF THE ARMY
U. S. Army Corps of Engineers
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Civilian Personnel
EMPLOYEE ASSISTANCE PROGRAM

1. Purpose. The purpose of this regulation is to provide guidance for assisting employees whose problems may adversely impact job performance and/or conduct. It establishes responsibilities and procedures for administering the U. S. Army Corps of Engineers (USACE) Employee Assistance Program (EAP).
2. Applicability. This regulation applies to all USACE. In the event of a conflict between a negotiated agreement and this regulation, the provision(s) of the negotiated agreement will prevail until such time as changes can be negotiated to align local bargaining unit agreement(s) with this USACE-wide policy.
3. References.
 - a. Federal Employees Health Services Programs, 5 CFR 792.
 - b. Executive Order 12564, Drug-Free Federal Workplace, 15 September 1986.
 - c. DoD Directive 6485.1, 10 August 1992.
 - d. Army Regulation (AR) 600-85, Army Substance Abuse Program, 2 December 2009.
 - e. Engineer Pamphlet 600-1-3, USACE Drug Testing Procedures for the Army's Drug-Free Federal Workplace (DFW) Civilian Drug Testing Program, 28 February 2001.
 - f. Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR, Chapter 1, Part 2.
 - g. Privacy Act of 1974 (5 USC 552a).
4. Objective. The purpose of the EAP is to provide employees the opportunity to help themselves cope with problems that may adversely affect job performance and/or conduct. The EAP provides free, confidential short-term counseling (typically three office visits) to identify employee problems. When appropriate, employees who may benefit from longer-term therapy or treatment will be aided in finding sources of assistance in the local community. It is the employee's responsibility to follow through with this referral, and it is also the employee's responsibility to make the necessary financial arrangements for this treatment beyond that provided by the Agency, as with any other medical condition. EAP does not replace the day-to-day responsibility of managers and supervisors to interact with and communicate with their employees.

This Regulation supersedes ER 690-1-710 dated 31 January 2006

5. Policy.

a. The Corps of Engineers is committed to caring for its most valuable resource - *people*. The Corps recognizes that work related and non-work related problems of a personal nature can adversely affect an employee's job performance, conduct or health. The Corps also recognizes that most personal problems can be dealt with successfully when identified early and appropriate care is received. EAP is designed to assist employees with a broad range of problems including alcohol and drug abuse, emotional and behavioral disorders, family and marital discord, child care or elder care problems, family illness, and financial or legal difficulties. EAP is a valuable resource for employees to utilize when they are faced with other difficult situations, including workplace violence issues, critical incident stress management, redeployment and workforce restructuring.

b. An employee's life outside of the workplace is not of official concern to the Corps except when it may adversely affect job performance and/or conduct, or bring discredit to the Agency.

c. Use of EAP services will not jeopardize or have a negative impact on an employee's job security and/or opportunities for promotion.

d. All records and discussions will be handled in a confidential manner. Only with the employee's written consent can any information about the case be released. However, confidentiality regulations allow for limited information to be released without written consent when there is a duty to warn or protect in the case of clients who present an imminent threat of harm to self or others. Federal laws and regulations do not protect any information about suspected child or elder abuse or neglect from being reported under state law to appropriate state or local authorities.

e. Employees who suspect or recognize that they have a personal problem are encouraged to seek information and counseling on a confidential basis by contacting their respective EAP counselor who can provide a sense of relieve and/or solution in various situations.

f. When performance or conduct problems are not resolved with normal supervisory attention, employees will be encouraged to contact their EAP provider to recognize issues and get help finding a solution.

g. There will be no charge for initial diagnostic services, which are typically provided by a EAP provider. Initial diagnostic services may be provided to immediate family members of employees covered by the EAP. 5 C.F.R. Section 792.101 defines immediate family members as a spouse, son or daughter and parent. To the extent feasible, services should also be extended to families (including domestic partners and their children) of alcohol and/or drug abusing employees and to employees who have family members (including domestic partners and their children) who have alcohol and/or drug problems. Costs incurred for rehabilitation beyond the initial diagnostic services that are not covered by insurance or other benefits will be the responsibility of the employee.

h. Supervisors may authorize leave (e.g., sick or other earned leave) for treatment or rehabilitation on the same basis as it is granted for other health problems.

6. Responsibilities.

a. District and Division Commanders and USACE Senior Leaders will support the EAP. Commanders are responsible for ensuring the contracted provider is effectively meeting the needs of the employees. To promote EAP, Commanders will appoint an EAP Administrator to coordinate the scheduling of training, publicizing services, educating and encouraging employees to use the EAP to include on-site services/briefings. Leadership is specifically charged to understand the program and encourage its use when applicable. Commanders will be responsible for publicizing the program. Effective, on-going publicity is important to convincing personnel at all levels that the Corps is serious about helping employees resolve problems that impact their ability to be fully productive. E-mails, memos, posters, newsletters, training sessions, brown bag lunches, videos, etc. may be used to spread the word. Publicity informs employees about the free, confidential, short-term counseling and referral services available through EAP to them or their family, and how to obtain the services. It also provides reminders to supervisors regarding their responsibility to use EAP as a tool to help employees solve problems that may contribute to performance or conduct deficiencies.

b. Supervisors should seek guidance from their local Civilian Personnel Advisory Center (CPAC) on EAP involvement when normal supervisory methods such as counseling sessions do not correct employee problems, as well as in situations described in 5.a. above, such as critical incident stress debriefings or workforce restructuring. Supervisors will not attempt to diagnose problems, but should ensure their employees are aware of available EAP services and how to obtain them. For each new incident that requires counseling and/or discipline, the supervisor should refer an employee to EAP no more than once verbally and an additional one time in writing. The additional referral will be in the body of a counseling/disciplinary memorandum.

c. Employees must recognize the adverse effect personal problems may have on the job and seek appropriate assistance to resolve problems, and bring job performance and/or conduct to a successful level by resolving an issue or problem.

d. The Directorate of Human Resources (CEHR) is responsible for key program development, implementation and oversight consistent with other personnel management functions. CEHR will provide advice and guidance in the application of EAP policies and procedures.

e. Civilian Personnel Advisory Center (CPAC), in accordance with the Civilian Human Resources Integrated Definition (IDEF) Model/Task Listing will provide information on and/or coordinate EAP services for employees. They also provide information on and participate in programs on violence in the workplace and other management employee relations issues. CPAC staff members assist supervisors in identifying and assisting employees with problems affecting work performance or conduct (e.g., absenteeism,

security violations and difficulties with coworkers) in accordance with personnel policies and regulations.

f. Each local command will designate an EAP administrator. The EAP administrator will:

(1) Ensure program materials from their local provider are available to all employees. This can be accomplished through internal memos, newsletters, local intranet, bulletin boards, posters, brochures etc. Information regarding EAP services should be disseminated quarterly.

(2) Encourage employees to use the EAP by assisting in making services convenient and available by coordinating at least one on-site EAP briefing per year from the provider to be made available for all district employees (i.e., stress management class, smoking cessation, alcohol/drug abuse awareness, etc).

(3) Facilitate the scheduling of EAP training at new employee and Supervisory orientation/on-boarding.

g. The contracted EAP Counselors will:

(1) Interview the employee and, with the employee's knowledge and written consent, obtain the appropriate information, including medical history, if necessary, to assist with the nature of the employee's problem.

(2) Advise the employee of treatment resources available in the community, help make arrangements for utilizing them and encourage the employee to participate in rehabilitation programs.

7. Community Resources. The EAP should be closely linked to community resources. A determination should be made by the local EAP counselor as to which agencies or individuals can offer screening and/or diagnostic services. In addition, communications and relationships with specialized resources, such as those that follow, should be established by the local EAP counselor:

- a. State alcoholism, drug abuse and mental health authorities.
- b. Councils on Alcoholism and Drug Abuse.
- c. Alcoholics Anonymous, Al-Anon and Alateen.
- d. Other self-help groups for medical/behavioral/emotional problems (e.g., Gamblers Anonymous and Narcotics Anonymous).
- e. Local mental health associations.
- f. Hospitals and other inpatient treatment facilities.
- g. Clinics and other outpatient treatment facilities.

- h. Family counseling services.
- i. Financial counseling services.
- j. State and local vocational rehabilitation officials.
- k. Legal counseling services.
- l. Veteran Counseling and Support Services.

8. Types of Programs. There are essentially three feasible approaches to an effective EAP that include using in-house resources, a consortium, or contract personnel. Each local command should decide which alternative works best according to its identified needs and available resources. Regardless of the approach selected, the EAP provider should be able to address the range of problems listed in Section 5a. above. Additionally, services furnished through any program should include assistance with developing policies and procedures, supervisory training, employee education programs, counseling for supervisors with problem employees, and screening or assessment and short-term counseling for employees.

a. The establishment of an EAP utilizing in-house resources, such as an occupational health nurse or other individual, depends on the availability of personnel qualified to conduct diagnostic interviews and to make the necessary referrals to community resources. EAP Counselors must be trusted by the employer and employees, have a high level of concern for people, relate well to people, understand the nature of chemical dependency, be versed in Critical Incident Stress Management and not be labeled as a counselor for any particular disorder or problem. Finding the right person for this position is essential to program success. Program credibility is difficult to maintain if this individual also has responsibility for, or is closely aligned with, disciplinary procedures. When Corps employees are used as in-house EAP Counselors and they maintain and send medical information electronically, they may have to comply with the reference 3.e., above.

b. Consortium: An alternative approach to the EAP is establishing or joining a consortium through which the Corps and other Federal agencies in close geographic proximity share the cost of an EAP. In some cases, one agency may share its resources with other agencies on a cost reimbursable basis, although normally a group of agencies contract with an outside organization for services. The EAP counselors should be knowledgeable of Critical Incident Stress Management and be able to assist with this Program if one exists.

c. Contract: Local commands may pursue an individual contract with an outside organization. The types of services provided and method of operation should closely parallel the concept of a consortium without the sharing of program costs.

9. Referral Procedures. The two types of referrals and their procedures are as follows:

- a. Management initiated referrals.

(1) A supervisor who observes deterioration in an employee's performance or altered behavior patterns will document the nature of work deterioration and behavioral changes.

(2) In accordance with applicable procedures, the supervisor will conduct an informal discussion with the employee about the need for improvement in job performance and/or conduct, and will offer the use of the EAP.

(3) An agreement should be reached between the supervisor and employee on the remedial action to be taken (e.g., eliminate tardiness, provide doctor's statement for absence due to illness). A time frame for resolution of the problem will be established and the discussion documented. The supervisor will continue to monitor the employee's performance and conduct.

(4) In the event the performance/conduct problem continues, the supervisor will consult with the CPAC to discuss the nature of the problem and the available courses of action, including a possible management referral to EAP. If the employee initiates contact with the EAP at this point, it would be considered a self-referral.

(5) If a management referral to EAP is made, the employee will be advised that the decision to accept assistance is voluntary. Employees who reject referral will be returned to the work-site and the refusal will be documented, unless the situation requires immediate action in disallowing the employee back to the worksite.

(6) If the employee acts on the referral, the EAP Counselor will interview the employee to determine the underlying cause of the problem, develop an action plan for resolution of the problem and determine the appropriate resource or service provider. The counselor will discuss the recommendation with the employee, explaining the service(s) to be provided and the confidential nature of the use of those services.

(7) The EAP Counselor will inform the supervisor of any absence or other special considerations necessary for the rehabilitation process. No information regarding the employee's problem will be transmitted without the written consent of the employee. The use of approved authorized absence (e.g. sick or other leave) will be allowed in accordance with appropriate regulations in order to allow treatment to be pursued.

(8) If rehabilitation or other assistance proves unsuccessful, or if the employee refuses to participate, documentation will be made of that fact and appropriate corrective action will be initiated promptly by the supervisor.

b. Employee initiated referral (self-referral).

(1) Employees who decide to seek assistance on their own may contact the EAP Counselor directly or ask the supervisor or the EAP administrator for assistance to make arrangements to see a counselor.

(2) The EAP Counselor will conduct the necessary interview, assessment and formulate an action plan for assistance, as outlined above.

(3) In self-referral situations, the employee's supervisor will not be contacted without the written consent of the employee. The employee should be encouraged to permit contact with the supervisor when necessary but cannot be forced to do so. In all other aspects, the employee's request for and participation in a treatment program will be strictly confidential.

(4) If an employee drops out of a treatment program, the EAP Counselor will document this in the case file.

10. Relationship to Army Substance Abuse Program. References 3b., 3c., and 3d., above describe the critical role of EAP in dealing with alcoholism and drug abuse. The local EAP counselor has the following responsibilities, specific to these programs:

- a. Assessing, planning and establishing local procedures for providing comprehensive EAP services for employees and family members.
- b. Providing screening, short-term counseling and referral services for treatment or rehabilitation to employees who self-refer or whom management refers.
- c. Providing follow-up services to assist employees in achieving effective readjustment to their jobs.
- d. Advising and updating supervisors concerning their employees' progress to the extent permitted by applicable law and this regulation.
- e. Consulting with the CPAC and supervisors of employees.
- f. Maintaining an updated list of available community counseling and treatment resources.
- g. Developing and presenting prevention education and training to supervisors and employees at all levels on alcohol, drug abuse, and various other personal issues, as well as, how to use EAP services properly.
- h. Supervisors should consult with both their EAP administrator and their CPAC representative to ensure that appropriate referrals are made to EAP, particularly when dealing with substance abuse problems.

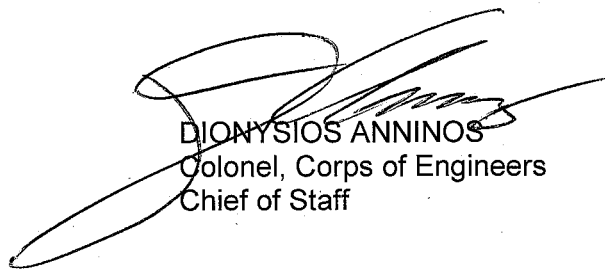
11. Relationship to Disciplinary Actions. The EAP provides means by which an employee with a personal problem affecting job performance is offered assistance that could lead to correction of that problem. Although an employee's participation in EAP will not necessarily postpone or obviate the need for corrective action (e.g. self-referral after testing positive for drug use in the Agency Drug Testing Program), it is a factor for a supervisor to consider when determining the appropriate steps to take. Hence, corrective actions may be taken while an employee is using the EAP or related services, in accordance with applicable regulations.

12. Relationship with Labor Organizations. The support and active participation of labor organizations contribute materially to the success of the EAP. Union representatives

can be influential in developing and maintaining employee confidence in the EAP program. It is important that labor organizations understand and support management efforts to assist the employee with personal problems affecting job performance. Union representatives are encouraged to inform bargaining unit employees of the utility of the EAP in resolving personal and work-related issues. Management should assure that there is compliance with collective bargaining provisions pertaining to employee assistance programs (if any), discipline, and grievance procedures.

13. Confidentiality of Employee Records. Information about EAP participants and their status, including their attendance or absence, physical whereabouts, regardless of whether or not they are recorded, is confidential and is protected by Reference 3a., above as well as regulation (42 CFR Part 2). The regulations prohibit implicit and negative disclosures. Local commands must adhere to confidentiality requirements in dealing with information about all program participants, so as to prevent implicit or negative disclosures about participants. Although confidentiality is protected, this should not deter managers from entering into last chance agreements or reasonable accommodations if the employee fails to cooperate.

FOR THE COMMANDER:



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Colonel, Corps of Engineers
Chief of Staff