

DEPARTMENT OF THE ARMY
U. S. Army Corps of Engineers
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CEHR-D

Regulation
No. 690-1-710

31 January 2006

Civilian Personnel
EMPLOYEE ASSISTANCE PROGRAM

1. Purpose. The purpose of this regulation is to provide guidance for assisting employees whose work-related and non-work related personal problems may have an adverse impact on 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 Commands.
3. References.
 - a. Federal Employees Health Services Programs, PL 79-658 and 5 CFR 7901.
 - b. Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment, and Rehabilitation Act of 1970, PL 91-616.
 - c. Drug Abuse Office and Treatment Act of 1972, PL 92-255.
 - d. Privacy Act of 1974, 5 USC Section 552a.
 - e. Federal Employees Substance Abuse Education and Treatment Act of 1986, PL 99-570.
 - f. Executive Order 12564, Drug-Free Federal Workplace.
 - g. Federal Employees Health and Counseling Programs, 5 CFR 792.
 - h. Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR, Part 2, and Confidentiality of Records, 42 USC 290dd-2.
 - i. DoD Directive 1010.9, DoD Civilian Employee Drug Abuse Testing Program.
 - j. Army Regulation (AR) 600-85, Army Substance Abuse Program.

ER 690-1-710
31 Jan 06

k. Department of the Army Pamphlet 600-85, Army Substance Abuse Program Civilian Services.

l. OPM Worklife Programs www.opm.gov/workfam

m. Engineer Pamphlet 600-1-3, USACE Drug Testing Procedures for the Army's Drug-Free Federal Workplace (DFW) Civilian Drug Testing Program.

n. DoD Health Information Privacy Regulation DoD 6025.18-R.

o. Health Insurance Portability and Accountability Act (HIPAA), PL 104-191, Aug 21, 1996

4. Objective. The purpose of the EAP is to give 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 to identify employee problems and, when appropriate, makes a referral to an outside organization, facility, or program that can assist employees in resolving their problems. 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.

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 and health. The Corps also recognizes that most personal problems can be dealt with successfully when identified early and referred to appropriate care. 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 and elder care problems, family illness, and financial and legal difficulties. EAP is a 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 an employee's job security and/or opportunities for promotion.

d. All records and discussions of personal problems will be handled in a confidential manner. These records will be kept by the designated counseling professional and will not become part of the employee's official personnel folder.

e. Employees who suspect or recognize that they have a personal problem are encouraged to seek counseling and information on a confidential basis by contacting the individual or organization designated to provide such services before the problem interferes with job performance and/or conduct.

f. When performance or conduct problems are not corrected with normal supervisory attention, employees will be encouraged to contact their EAP provider to determine if personal problems are the cause.

g. There will be no charge for initial diagnostic services, which are typically provided by a contractor. Initial diagnostic services may be provided to immediate family members of employees covered by the EAP. 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 grant sick leave for treatment or rehabilitation on the same basis as it is granted for other health problems. Annual leave or leave without pay also may be granted if sick leave is not available.

6. Responsibilities.

a. Commanders and Senior Leadership. District and Division Commanders and USACE Senior Leaders will support the EAP. They are specifically charged to understand the program and encourage its use when applicable.

b. Supervisors. Supervisors should seek guidance from their local Civilian Personnel Advisory Center 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. Supervisors 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.** Employees must recognize the adverse effect personal problems may have on job performance and conduct, seek appropriate assistance to resolve problems, and bring job performance and/or conduct to a successful level by resolving the problem.

d. **Directorate of Human Resources.** 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 assistance in the application of the policies, procedures and guidelines of the EAP.

e. **Civilian Personnel Advisory Center (CPAC).** In accordance with the Civilian Human Resources Integrated Definition (IDEF) Model/Task Listing, CPAC staff members provide information on and/or coordinate for 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 co-workers) by using human resources policies and programs relating to discipline, grievances, labor relations, position classification, placement, etc.

f. **EAP Coordinator.** Each local command will designate an coordinator to administer the local EAP.

g. **EAP Counselors.** EAP Counselors, typically contractors, will:

(1) Interview the employee and, with the employee's knowledge and written consent, obtain the appropriate information, including medical history, if necessary, to determine 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 coordinator 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 coordinator:

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.

8. Types of Programs. There are essentially three feasible approaches to an effective EAP - 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. In-House: 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 3o. 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 contracts with an outside organization for the 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: Lacking in-house capability and/or the feasibility of a consortium, 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.

(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 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 ineffectual, or if the employee refuses to cooperate, documentation will be made of that fact and appropriate corrective action will be initiated promptly by the supervisor.

b. Employee initiated referrals (self-referrals).

(1) Employees who decide to seek assistance on their own may contact the EAP Counselor directly or ask the supervisor or the CPAC 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 3j., 3k. and 3m. above describe the critical role of EAP in dealing with alcoholism and drug abuse. The local EAP Coordinator 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.

ER 690-1-710
31 Jan 06

- 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 throughout the local command.
- f. Maintaining an updated list of available community counseling and treatment resources.
- g. Developing prevention campaigns and presenting prevention education and training to supervisors and employees at all levels on alcohol and other drugs and on how to use EAP services properly.
- h. Collecting information required for reports.

Supervisors should consult with their CPAC representative to ensure that appropriate referrals are made to EAP when dealing with substance abuse problems.

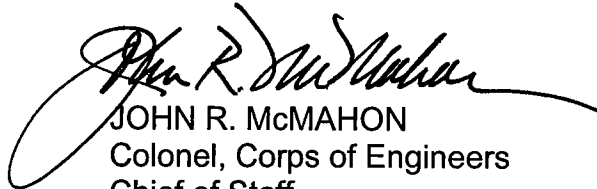
11. Relationship to Disciplinary Actions. The EAP provides means by which an employee with a personal problem affecting job performance or conduct is offered assistance that could lead to correction of that problem. Although an employee's participation in EAP will not necessarily postpone or obviate 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.

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

13. Publicity. 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, and how to obtain the services. It also provides reminders to supervisors regarding their responsibility to use EAP as a tool to correct performance and conduct deficiencies.

14. Confidentiality of Employee Records. Information about EAP participants, including their attendance or absence, physical whereabouts or status as EAP participants, whether or not they are recorded, is confidential and is protected by Reference 3c. above as well as regulation (42 CFR Part 2). The regulations also prohibit implicit and negative disclosures. Local commands must adhere to the confidentiality requirements cited above in dealing with information about all program participants, so as to prevent implicit or negative disclosures about participants with alcohol or drug problems.

FOR THE COMMANDER:



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