

**MANAGEMENT AND ADMINISTRATION PRACTICE STANDARDS IN SOUTH AFRICAN
EMPLOYEE ASSISTANCE PROGRAMMES**

By

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Declaration of own work

I Ephenia Naswanyane Monama declare that this research report titled Management and Administration Practice Standards in the South African Employee Assistance Programme is my own work, and that the report has not been previously submitted by me for a degree at any other university. I have given acknowledgement of all sources used in accordance with the University requirements.

EpheniaMonama

Date

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List of key concepts

Employee Assistance Programme
 Benchmarking
 Management
 Administration
 Standards
 Practice
 Professional
 Development
 Guidelines
 Employee
 Confidential

Abstract

An Employee Assistance Programme (EAP) is a work-based programme designed to assist employees to identify and resolve both personal and work-related problems that might have a negative impact on performance. In order for the EAP to function effectively there is an identified need for a team of qualified, experienced and dedicated professionals who are registered with the relevant statutory bodies, who abide by the codes of conduct as well as take cognisance of any issues of confidentiality and proper record maintenance for the success of the programme.

The study was conducted amongst EAPA-SA members to benchmark and explore the practice of the management and administration standard as prescribed by EAPA-SA Standards, as well as to identify any operational challenges in adhering to the above standards.

A literature review outlines the history of EAPs in South Africa, the definition of concepts, discussions on the seven categories of management and administration standard as well as the theoretical framework upon which the study was grounded namely, General Systems Theory (GST).

A quantitative, exploratory research approach was applied to identify and benchmark challenges in the field of practice, in implementing the management and administration standard of the EAPA-SA. The population included EAPA-SA members from both the public and private sectors. A structured questionnaire was administered electronically, using Qualtrics software.

The research findings indicated that EAPA-SA members are aware of the standards document of EAPA-SA and make reference to the document on a regular basis during their practice. Positive highlights include the professional development activities that were considered, proper management of confidentiality and recordkeeping as well as knowledge of and compliance with the ethical requirements as outlined by Standards Committee of the EAPA-SA. However, challenges were experienced in terms of staffing the EAP units, which were reported to be understaffed; there was insufficient consultation and supervision for support and

professional growth and it transpired that members do not have indemnity insurance for protection during litigation.

EAPA-SA should consider the initiative to introduce an undergraduate EAP degree to promote the establishment of a pool of qualified professionals at entry level, monitoring and evaluating compliance with the standards document by both the public and private sectors as well as marketing of the EAPA chapter branches to increase membership in order to create a platform for networking, learning as well as providing professional support.

CHAPTER 1

1.1 Introduction

Employee Assistance Professionals Association of South Africa (EAPA-SA), established in 1997, is a voluntary association for professionals in the field of Employee Assistance Programmes (EAPs). The vision and mission of the association are to promote professional standards and ethical practice in the EAP field, as well as supporting professionals through development and transformation with a view to excellence in the delivery of employee wellbeing in South Africa, (Standards Committee of EAPA-SA, 2011:16:iii). The standards represent the nationally agreed level of professional best practices and basic principles for EAPs. The standards were reviewed in 2005 and again in 2010. The review was brought about by the need to align the standards with international best practices and to ensure that they address the objectives of the EAP profession in South Africa. The proposed research focused on benchmarking the nature of administration and management as one of the categories of EAPs in South African practice, as applied against the EAP standards of different countries.

Furthermore, the study explored whether EA practitioners in South Africa applied this standard category in their practices in accordance with the prescribed guidelines stipulated in Standards Committee of EAPA-SA (2010:7-11). The study was conducted by a research team of four members who developed and administered a single questionnaire document covering five standards. Data was collectively gathered from the registered EAPA-SA members, analysed and individual reports with recommendations compiled. The individual reports were also combined into one group report which was presented to the EAPA-SA Board, with suggested recommendations.

Benchmarking the administration and management standards of EAPA-SA against standards of other countries contributed towards improved performance amongst EAP professionals in the process of assisting clients and organisations and enhancing productivity.

Discussions in this chapter will focus on the theoretical framework on which the study is based, the problem statement, as well as goals and objectives of the study. A summary on research methodology will also be presented.

1.2 Definition of concepts

1.2.1 Benchmarking

Benchmarking is defined by Wireman (2004:29) as an “On-going process of measuring and improving business practices against the companies that can be identified as the best worldwide.” Benchmarking enables organisations to continuously search for, evaluate and compare better practices with a view to improving processes and management.

1.2.2 Administration

According to Seel (2000:7), administration is defined as a process of guidance, leadership, and control of the efforts of groups of people towards a common goal. Administration is important to harness the activities of people and resources towards the attainment of a common purpose, with a view to achieving organizational goals. Administration is more concerned with the determination of policies, coordination of finances and human resources as well as service provision, (Weinbach&Taylor, 2015:103).

1.2.3 Management

Management is defined by Coulshed and Mullender (2001:17) as a process of organising both human and capital resources to attain organisational objectives, as well as to respond to conditions of stability and change. Peters and Pierre(2007:13) reiterates that management is a “doing function” of getting things done through people by directing their efforts towards a specific goal”. In order for management to be successful, it is required of the organisation to appoint a qualified and experienced manager to direct, control and influence the activities of people and resources towards a common goal.

The goal of administration and management is to organise resources to ensure proper management of the organisation through professional and administrative accountability. The two processes are linked, at times used interchangeably and cannot operate in isolation.

In the EAP field both management and administration are essential elements to ensure that qualified staff are appointed, trained and receive the necessary supervision to render quality services. Denhardt, Denhardt and Blanc (2009:8) maintains that management and administration also involve information management such as proper recording and storing of data for later use as well as disposal thereof as per the prescribed policies. The two processes are also important for the regulation of policies pertaining to client confidentiality, ethical consideration of the professional as well as liability insurance to protect the professional should the need arise.

1.3 Literature overview

EAP standards are guidelines designed to assist professionals in the quality implementation of EAPs in line with international best practices. The standards outline the basic principles to guide EAP professionals, as well as protect and promote the interest of the client and service providers, (Standards Committee of EAPA-SA, 2010:1). In providing services to clients, professionals have to adhere to these guidelines and procedures to protect the rights of the client, the organisation and other relevant stakeholders in the EAP field responsible for rendering services, including mental health, alcohol and drug management as well as financial wellness.

The history of EAPs dates back to the mid-1940s in the United States. Bhoddram (2010:100) indicates that the EAP was initially introduced to address substance-abuse problems. However, there have been some changes in the past 30 years where programmes were expanded to families of alcoholic workers and employees experiencing other problems. The statement is supported by Richard, Emener, and Hutchison (2009:28) who emphasised that the history of EAPs in the US is directly linked to that of Alcoholics Anonymous, a rehabilitation programme where alcoholics share

experiences and support each other. In South Africa the EAP was introduced in the early 1950s with Occupational Social Workers (OSWs) and Psychologists appointed in companies such as the Chamber of Mines, Railways and Harbours and the Defence Force. However, the first formal EAP in South Africa was introduced in 1986 following the results of a feasibility study completed in 1985 by Paul Maiden who had consultations with EAP practitioners from different companies, including Eskom, with the intention of sharing information and exchanging ideas towards developing the South African EAP. Some of the practitioners consulted by Maiden were EAPA and EASNA members who attended conferences of the Employee Assistance Professionals Association (EAPA) in the USA, and made meaningful contributions towards the formation of EAPA-SA. According to Maiden (1992:2), the EAP in South Africa developed very quickly, modelled on the US concepts and this was an advantage for the programme as the US model pertaining to alcoholism was omitted and this contributed to the early growth of the programme. However, the disadvantage of the SA EAP programme is the limitation in addressing alcohol-abuse issues as this is not a core technology as compared to other countries such as the UK and United States.

According to Bhoodram (2010:64), "Legislation has played a significant role in the development of EAPs in South Africa, despite the fact that there is no EAP-specific legislation formulated to date." EAPs rely mostly on compliance with South African Acts and legislation such as the Labour Relations Act, Occupational Health and Safety Act, Protection of Private Information Act and many others which guide EAPs in their assessment, treatment and management of confidential information, in order to assist troubled employees to resolve personal and work-related problems. A positive aspect about South African EAPs is their ability to develop an integrated approach encompassing the different EAP core technologies using an integrated team of professionals, (Maiden, 1992:2-3).

The proposed study is focused on the management and administration category of standards which is one of the eight categories of EAPA-SA standards, namely Programme Design, Implementation, Clinical Services, Non-clinical Services, Preventative Services, Networking, Monitoring and

Evaluation. The management and administration standard as prescribed by Standards Committee of EAPA-SA (2010:7-11) is divided into seven standards, namely:

- Staffing.
- EAP professional consultation or supervision.
- Professional development.
- Confidentiality.
- Recordkeeping.
- Professional indemnity.
- Ethics.

The rationale of the management and administration standard is to develop clear administrative procedures to contribute to quality and effective, consistent services, (UK EAPA, 2000:35; EAPA, 2010:13). Organisations have to adhere to the prescribed procedures in terms of the above standards to clarify their roles and responsibilities, qualifications of professional and support staff, skills and knowledge as well as information management. It is therefore essential to regularly evaluate and review procedures and to ensure that all stakeholders are updated on the necessary adjustments for compliance. When the EAPA-SA standards were reviewed in 2010, the need was identified to have another review due to on-going developments and emerging trends in the EAP professional field. Recent developments required integration of services and changes into some intervention plans to address problems, including the high rate of absenteeism, poor performance, mental health and legal matters. According to Bhoodram (2010:100), programme evaluation is important and should be conducted through the collection of information about activities, characteristics and outcomes of the programme to improve the effectiveness and decisionmaking about future programmes. The following discussions will focus on describing and understanding the implementation procedures of the administration and management standard.

1.3.1 Staffing

Standards Committee of EAPA-SA (2010:7) maintains that “An appropriate number of suitably qualified EAP professionals must be available to achieve the stated goals and objectives of the programme.”

The goal of the standard is to ensure that the number of suitably qualified EAP professionals shall be available to achieve the stated goals and objectives of the programme,(UK EAPA, 2000:40; EAPA, 2010:14; Standards Committee of EAPA-SA, 2010:7).The staff complement should be justifiable, based on the geographical location of the organisation and taking into consideration the ethnic and cultural aspects of the employees,(Bhoodram, 2010:210). The proposed EAP staff ratios should be balanced depending on the type of EAP model adopted by the organisation. This will ensure effective and efficient services to the employees. Another objective of the staffing standard is for the EAP staff to meet the professional and legal requirements, to possess the essential qualifications and to be legally competent to carry out the professional services.

The administrative personnel in the EAP unit should be sensitized about the confidential nature of the EAP services to enable them to handle those administrative issues in line with the prescribed guidelines. According to Mulvihill (2003:14), “By paying attention to staffing, employers can ensure that their employees have access to experienced, formally trained, professional counsellors and administrators who are meticulous about maintaining confidentiality.” This will result in high utilisation of EAP services, directly benefitting the employer by providing cost saving and limiting legal exposure. UK EAPA (2000:45) and Standards Committee of EAPA-SA (2010:7) are of the same view that organisations that choose to contract external EAP service providers should ensure that they appoint credible companies that fully understand and accept the policies and procedures of the organisation. The external provider should also have qualified and competent EAP professionals with the knowledge and experience to coordinate services.

Standards Committee of EAPA-SA has not made mention of affiliate management; however, EAPA (2010:16) and UK EAPA (2000:41) standards documents have clearly indicated that all affiliates should understand and accept policies and procedures within their role as EAP practitioners. It is also essential for affiliates to meet the standard requirement and be subjected to continuous evaluation by the service provider to ensure that the organisation receives value for money.

1.3.2 EAP professional consultation or supervision

According to Standards Committee of EAPA-SA (2010:8), UK EAPA (2000:48), and EAPA (2010:16), professionals who provide services to clients should be subjected to on-going consultation and supervision. These authors emphasised that consultation and supervision are essential for the protection of clients' interests as well as improvement of professional skills. Supervision is defined by Kadushin and Harkness (2002:23) as a "Process in which the supervisor coordinates, enhances and evaluates on-the-job performance of the supervisee." The goal of supervision is to ensure quality services and to support the professional development of the EAP practitioner.

It is required that supervision follows a structured approach under the guidance of an experienced professional, either internally or externally. The requirements of the supervisor are a minimum of five years' experience coupled with a recommended qualification, (Standards Committee of EAPA-SA, 2010:8). It is important for the supervisor to attend continuous training and to understand the characteristics and needs of the supervisees, given the uniqueness of each individual. This statement is supported by UK EAPA (2000:48) emphasising that the manager or supervisor should be an EAP specialist with the required experience in various fields such as mental health and substance management. However, there are identified challenges in staffing EAP sections in some organisations, especially in cases where the EAP manager is not a qualified EAP professional, yet he/she is expected to supervise the EAP practitioner and to conduct canalisation of clients' reports. According to Chabeli (2007:32), the positioning and qualifications of EAP professionals can contribute to the support, or lack thereof, of potential

consumers by the service. Another form of consultation is through attending conferences and case discussions after branch meetings and through networking with other EAP professionals and sharing best practices, (EAPA, 2010:16).

1.3.3 Professional development

It is important for employee assistance professionals to engage and participate in professional development activities which facilitate maintenance of skills and knowledge. The goal and objectives of the standard are clearly stated by Standards Committee of EAPA-SA (2010:9), as “To ensure delivery of quality service and to enhance knowledge and skills of the EAP professionals with a view to maintaining the highest level of professionalism.” The statement is supported by UK EAPA (2000:51) and EAPA (2010:17) highlighting the need to support professionals to upgrade and enhance their skills and knowledge through attendance of training programmes and conferences. Professionals are required to comply with the requirements of continuous professional development in order to keep abreast of new developments in the profession. According to Richard et al., (2003:52), EAP professionals “Need to possess comprehensive knowledge and proficiency in dealing with the diagnosis and treatment of problems such as alcohol abuse, emotional, financial as well as legal troubles.” It is therefore the responsibility of the practitioner and the organisation to ensure that personnel identify their relevant training needs based on key performance areas and by attending training to acquire more knowledge and to keep abreast with current developments in the EAP field. Staff-development plans should be an integral part of service planning timetable and structure in the organisation and should be linked to the performance management that takes into consideration the needs and interests of individuals. Coulshed et al., (2006:177), Standards Committee of EAPA-SA (2010:9), EAPA (2010:17), and UK EAPA (2000:51) share the same sentiment about the importance of EAP professionals in that they should have access to EAP journals, attend EAP conferences and local branch activities and network with other professionals with a view to share best practices and to acquire more knowledge in the EAP field.

1.3.4 Confidentiality

Confidentiality is emphasised by Standards Committee of EAPA-SA (2010:9) as a “Cornerstone of the profession, consistent with all the professional standards, ethics and legal requirements that regulate the management of information.”

Standards Committee of EAPA-SA (2010) and UK EAPA (2000) both address confidentiality under the management and administration standard, whereas EAPA (2010) covers confidentiality as a stand-alone topic which places greater emphasis on this important matter. The goal and objectives of the standard are to promote confidentiality and professionalism as well as to protect the privacy of individual employees and stakeholders with a view to preventing litigation, (Standards Committee of EAPA-SA, 2010:9; UK EAPA, 2000:64). Confidentiality is also emphasised in the Basic Conditions of Employment Act 75 of 1997, Chapter Eleven. The Act provides that the employee's right to confidentiality should be respected at all times in matters pertaining to personal information, medical records and financial status. It is therefore essential that EAP professionals respect the confidentiality of clients at all times and this should be clearly stipulated in organisational policies and operational guideline documents in order for employees and supervisors to be kept informed about that aspect.

In cases where it becomes necessary for confidentiality to be breached for specific reasons, consequences should be explained to the client as well as the importance of signing a consent form, (Couzins, 2005:25). The statement is supported by EAPA (2010:21) which emphasises the importance of disclosing conditions that limit confidentiality such as policy regulations and court orders. The limitations as contained in Standards Committee of EAPA-SA 2010 document include the client being suspected of child abuse, criminal intent and a danger to self and others. Another limitation is where the EAP manager provides a trend report to the organisation specifying any client-specific information that should be withheld, (EAPA, 2010:26). The trend report assists the organisation in identifying any challenges in order to review or

introduce new programmes and determine budget allocation to improve productivity.

Another criterion for the maintenance of confidentiality is the location of the EAP offices. Daniels & Teems (2008:38) emphasised that confidentiality is as important as the fact and the goal that is not just to maintain a safe place for employees to visit, but also ensure that employees see the EAP as a safe place to discuss personal and sensitive concerns. The EAP office should be located in a user-friendly environment, such as a one-stop health centre, be it on-site or off-site, to provide reasonable accommodation and to prevent employees feeling labelled as this might negatively impact accessibility and service utilisation. The statement is supported by Chabeli (2007:21), highlighting that most employers contract external providers because of the arms-length relationship, ensuring that employees will have confidence in them rather than the internal EAP. Handling of client records is also a critical aspect which must comply with the standards and legal requirements of information management. This will be discussed in detail in the following standard, 1.3.5.

1.3.5 Recordkeeping

The recordkeeping standard as prescribed by Standards Committee of EAPA-SA (2010:10) specifies that EAP practitioners must maintain records by ensuring the proper and accurate management thereof. UK EAPA (2000:53) states that the intention of recordkeeping is to ensure quality and continuity of care and should adhere to confidentiality and ethical guidelines of the profession. EAPA (2010:18) aligns itself with the above authors, highlighting the intention for recordkeeping as enabling for the identification of challenges, planning, continuity of care and for evaluation purposes.

When selecting an information management system, compliance must be in line with organisational policies and procedures to ensure clients' privacy (Nicholson, 2011:34). The statement is emphasised by Standards Committee of EAPA-SA (2010:9) indicating that the system should comply in order to capture and maintain clinical records, administrative matters, corporate client

information, minutes, marketing and training material as well as progress reports. EAP information should be kept secure, maintained and updated to ensure quality service provision and continuity of client care, as well as for evaluation of services, (Hoke, 2011:65). In this regard it is crucial for EAP records to have a life-cycle purpose and should therefore be maintained, archived or disposed off accordingly. Standards Committee of EAPA-SA (2010:10) maintains that confidentiality of clients' records must be a priority, even when filing hard-copy records and they should be stored in lockable filing cabinets with access to keys restricted to authorised EAP personnel only. It is also essential to ensure that electronic information is secured and that authorised people are allocated passwords to gain access. EAPA (2010:18) maintains that transfer and destruction of information should be handled properly by relevant stakeholders. Records should be maintained and archived for the minimum time required as stipulated by organisational policies (Standards Committee of EAPA-SA, 201:10). The rationale for this process is to allow for reference in case a situation arises that requires a file to be retrieved, such as, for example, the reopening of a case.

1.3.6 Professional liability insurance

According to Standards Committee of EAPA-SA (2010:10) and EAPA (2010:20), the goal of the standard is to protect the corporate client and the service providers, where applicable, as well as to limit exposure to prevent liability. The nature of EAP work is very sensitive and it is essential that professionals protect themselves against legal action by clients alleging malpractice. The objective of the standard is to take necessary precautions to address legal challenges concerning service delivery. Maiden (2003:127) maintained that EAPs utilise legal counsel to clarify matters relating to the release of confidential client information and the investigation as well as representation of clients in court proceedings. Bhoodram (2010:214) emphasised that the standard is a necessity in all organisations implementing EAPs. However, most organisations do not comply with these requirements. It is the responsibility of the employer to orientate and initiate the EAP professional upon appointment on the type of insurance coverage, as well as

provide a list of accredited companies. The professionals should ensure registration and compliance with the guidelines of the insurance company, whereas the employer's responsibility is to monitor annual renewal and to ensure that EAP personnel operate within the scope of the licence, (EAPA, 2010:20). Provision for professional liability has not been made under UK EAPA standards document.

1.3.7 Ethics

Ethical standards focus on human behaviour and motivations that aim at the highest ideals of human interaction,(Winegar, 2001:55). The goal and objectives of the standard as outlined in Standards Committee of EAPA-SA (2010:11) are to maintain professional behaviour, ensure client and customer satisfaction and to regulate the practice of professionals in accordance with their qualifications and expertise. The statement is supported by UK EAPA (2000:62), emphasising the need for EAP practitioners to understand and adhere to the requirements of the standard to ensure accountability and responsibility to clients and other relevant stakeholders in their daily operations to enhance professionalism and service utilisation.

Standards Committee of EAPA-SA (2010:11) and UK EAPA (2000:62) maintained that practitioners should operate within their scope of practice and any violations of codes of ethics should be reported to the appropriate statutory body. The role of a professional statutory body is to control the behaviour of practitioners towards their clients and to ensure that professionals maintain the highest standard acceptable to society, (SACSSP, 2011:12).

1.4 Conclusion on literature overview

Based on the discussions above, a number of common factors have been identified relating to staffing, development, consultation, and supervision of EAP professionals amongst the different authors as well as EAP associations. Expectations are outlined for professionally trained and skilled EAP professionals to render quality EAP services. However, a gap has been

identified in instances where organisations do not appoint sufficient qualified EAP professionals, especially on management levels, which creates a challenge amongst professionals when having to submit client reports for canalisation as well as for consultation and supervision. The administration and management standard clearly stipulated that consultation and supervision has to be conducted by an experienced professional with the necessary qualifications and experience, registered with the relevant professional body, possessing liability insurance and abiding by the required ethical conduct. It is therefore essential for EAP associations in different countries to monitor and evaluate the implementation of EAP standards to ensure compliance by EAP professionals. Such compliance will lead to improved client satisfaction and utilisation of EAP services.

UK EAPA (2010:35) and EAPA (2000:13) made provision for developing operating and administrative procedures, based on organisational needs and programmes. The rationale is to ensure consistency and effective service delivery in terms of accessing EAP services, problem identification, assessment and referral, communication strategies as well as management of confidentiality. Standards Committee of EAPA-SA management and administration standard is silent on the matter and given the years of experience and inconsistencies in the implementation of EAP services, it is crucial for procedures to be put in place to clearly delineate administrative and operating processes.

Another identified gap is the lack of complaint procedures for EAPA-SA and EAPA. According to UK EAPA (2000:37), complaints procedures should be put in place to enable dissatisfied clients to lodge their complaints and to receive responses and resolutions to their complaints. A contact person should be identified and a relevant manner of communicating made known as to whether it is oral or written and the turnaround time for the complaint to be specified. Complaints may either be about internal EAPs, external service providers or affiliates and constructive resolutions should be provided without protecting the offender. This will encourage the service providers to ensure quality and efficient services which will minimise complaints.

Based on the above discussions and considering the research topic, the researcher has identified a number of gaps in the management and administration standard of Standards Committee of EAPA-SA as benchmarked against other EAP standards; hence it is important to evaluate and review this standard with a view to making recommendations to the relevant stakeholders and to improve on existing shortfalls.

1.5 Theoretical framework

In order for research to be refined, a theoretical framework on which to base the study must be identified, (Terre Blanche, Durrheim & Painter, 2007:20). Theoretical frameworks challenge the researcher to demonstrate an understanding of the philosophical assumptions regarding the matter under investigation. It also helps to shape the foundation of reasoning about the study. The research study was based on the General Systems Theory.

A system is defined by Parrish (2010:51) as “An organised whole, contained within boundaries that seek to distinguish the system from the external environment, within those boundaries the system contains interacting elements that define its purpose.” Vorster (2003:180) maintained that a system is a set of two or more interrelated elements which have an influence on each other. The interaction might lead either to effective or ineffective influences, with the latter giving rise to discomforts and imbalances in the functioning of the whole system. Systems theory is more interested in the various relationships of different aspects and how they receive feedback, which allows the systems to keep moving forward towards the attainment of goals to achieve equilibrium. From the above definitions the following common factors have been identified:

- The wholeness and interrelationship of the parts.
- Strive to maintain balance or equilibrium.
- Influence on each other.

In summary, systems theory focuses on the relationship between two or more parts that have an influence on each other. An imbalance in one part of the system has a negative impact on the functioning of other parts within the

system. Systems are considered open to allow receiving and giving feedback, and this facilitates action of bargaining and compromising through different processes, including mediating (Ritzer & Goodman, 2004:183). The following paragraph will highlight how EAPs as a work-based resource to resolve personal and organisational problems strive to maintain a balance between different systems and to enhance performance.

For EAP professionals, systems theory provides a framework to explain complex factors such as relationships, gender identity and social affiliation and can be applied across different levels be it individual, family, community as well as organisations (Parrish, 2010:205). At organisational levels employees are confronted with personal and/or work-related problems which in turn affect performance, their interaction with other colleagues, organisational systems as well as some of the levels indicated above. The therapist will then act as a mediator, intervening between the different external and internal forces to bring about change and to help the different systems become less dependent on each other with a view to achieving optimal functioning.

In assisting troubled employees to address their problems, the EAP professional conducts assessments to identify and analyse the problem together with the client with a view to understanding the impact of the problem on the other systems of the client's life as well as to assess available support systems, (Standards Committee of EAPA-SA, 2010:12). The professional's observation and knowledge of different working systems facilitate the process of bringing about change in the system's interactional patterns. Observation is done on how the troubled individual's behaviour impacts and is impacted by other systems, including the therapist himself, through deliberate inputs. Attempts are made to help the person to bring about changes to achieve desired goals, thereby addressing symptomatic behaviour. In order for the problem to be solved, the client must achieve self-stabilisation and generalisation of change and it is therefore crucial for the professional to determine the steps to be implemented to ensure that changes and gains will be maintained.

According to Karson (2006:51), “an expert in systems theory, Hartman, introduced eco-maps as assessment tools that can be used by therapists to help individuals to visualise healthy relationships and identify sources of support to apply in resolving problems and achieving self-stabilisation.” Eco-maps refer to different sources which can be the church, support groups, family and friends to assist a client to deal with problems such as bereavement, alcohol abuse or divorce. The EAP professional should be able to utilise the acquired skills and knowledge gained through professional development as well as combine ethical consideration to assist the troubled employee.

1.6 Rationale and problem statement

The research project was influenced by the need to determine the practice and application of EAPA-SA standards by EAPA-SA members. The standards are a set of guidelines to assist professionals to implement EAPs effectively. The Standards were developed in 1999 and were reviewed in 2005 and 2010. The challenge is that since the last review no research was conducted to determine if these standards are applied in the field and whether they produce the desired results of enhancing the quality of EAPs. The focus of the study is based on one of eight categories, namely the management and administration standards which consist of seven categories. The research study was guided by the following research question: *What is the nature of management and administration as an EAP standard in practice, benchmarked against EAPA-SA standards?* The identified gap is that no research has been done on these standards, and this resulted in a gap regarding best practices, hence the need for research on this subject.

1.7 Goals and objectives

1.7.1 Goal

The goal of the research was to benchmark the nature of administration and management of the EAP as applied in South Africa, against EAPA-SA standards. In an attempt to improve EAP services in organisations, the study endeavoured to explore whether the management and administration

standards were applied in practice to promote efficiency in assisting clients to resolve problems in order to attain maximum performance.

1.7.2 Objectives of the study

In pursuit of the goal, the following objectives were applied:

- To conceptualise management and administration as an EAP standard.
- To explore the practice of the following categories in order to benchmark them against the EAPA-SA standards:
 - Staffing.
 - EAP professional consultation or supervision.
 - Professional development.
 - Confidentiality.
 - Recordkeeping.
 - Ethics.
 - Professional liability and insurance.
- To identify operational challenges in adhering to the management and administration standards.
- To recommend guidelines in respect of management and administration of EAPs to the EAPA-SA Board regarding the revision of the EAPA-SA standards.

1.8 Summary on research methodology

The researcher applied the quantitative research approach in this research project since the study focused on explaining the relationship between variables through enquiry and descriptions to understand a social phenomenon which is the nature of EAPA-SA administration and management standard.

A survey was conducted with a structured questionnaire as a data-collection tool. The questionnaire was divided into three sections, namely demographic data, information on the Standards document and management and administration section as presented by Standards Committee of the EAPA-SA (2010:7-11). The questionnaire comprised both closed- and open-ended questions, allowing for “other” responses as well as additional comments to

allow for elaboration on the questions asked. An introductory page was attached to the questionnaire to clarify the goal of the research, included instructions, as well as for the respondent to give consent to participate in the collection of data. EAPA-SA gave permission for the research to be conducted amongst its registered members, with the assistance of the association's administrator. The questionnaire was distributed to EAPA-SA members during August to September 2014. To ensure anonymity the responses were accessed from a central response link without identifying the email addresses of the respondents.

The sampling process was not conducted as the population of the actively registered EAPA-SA members was already limited to 217 and the entire population was included to facilitate the gathering of sufficient data. Registered members were from different government departments, wellness companies as well as private sectors in different provinces around South Africa. A challenge was experienced in that 23 emails bounced back due to incorrect or inactive email addresses. Two reminder emails were sent to encourage participation. A total of 194 emails were successfully delivered, of which only 91 members responded successfully.

Data cleaning was carried out and 27 were removed to improve the quality of data and make it fit for use. A total of 64 responses were utilised, which amounted to 33%. Qualtrics software obtained from the University of Pretoria, was utilised to analyse and cross-tabulate different variables. This was a useful tool which enabled the researcher to identify key information and differences. Data analysis was conducted and in the form of tables and graphic displays the collected data was organised into themes and sub-themes followed by discussions. Lastly key findings, conclusions and recommendations were also presented in chapter 4 of the report.

1.9 Conclusion

Discussion in this chapter focused on the background of EAP'S in South Africa, definition of concepts as well as highlighted systems theory as the theoretical framework applied in the study.

Goals and objectives were also clarified and explored with a view to identifying how EAPA-SA members implement management and administration in practice. The research followed a quantitative approach with a structured questionnaire as a method of data collection. The population for the study comprised members of EAPA-SA who are practising EAPs. Sampling was not conducted due to the limited number of EAPs. Qualtrics software was used as a data-collection and analysis tool. The research methodology will be discussed in more detail in chapter 3.

CHAPTER 2

Management and Administration Practice Standards in the South African Employee Assistance Programme

2.1 Introduction

Management and administration are two essential processes required in all organisations for proper functioning towards the attainment of goals and objectives. Management focuses on elements such as planning, organising, controlling, influencing and coordinating to achieve the mission of the organization (Peters & Pierre, 2007:13). Administration is more concerned with the determination of policies, coordination of finances, human resources, as well as service provision (Weinbach & Taylor, 2015:103). The two processes are linked and at times used interchangeably and cannot operate in isolation.

In the EAP field both management and administration are essential elements to ensure that qualified staff is appointed, trained and receives the necessary supervision to render quality services. Denhardt, Denhardt & Blanc (2009:8) maintains that management and administration also involve information management such as proper recording and storing of data for later use as well as disposal thereof as per prescribed policies. The two processes are also important for the regulation of policies pertaining to client confidentiality, ethical consideration of the professionals as well as liability insurance to protect the professional should the need arise.

The discussions in this chapter will focus on the category of management and administration standard as prescribed by Standards Committee of EAPA-SA (2010:7-11) which contains seven standards. The intention of the management and administration standard is to develop clear administrative procedures to contribute to quality, effective, and consistent services (Standards Committee of EAPA-SA, 2010:13; UK EAPA, 2000:35).

Organisations with EAP programmes have a duty to adhere to the prescribed procedures in the management and administration standard category in order

to clarify roles and responsibilities, qualifications of professional staff, skills, knowledge as well as management of information.

2.2 Staffing (Standard8)

Standards Committee of EAPA-SA (2010:13) states that “An appropriate number of suitably qualified EAP professionals must be available to achieve the stated goals and objectives of the organisation.”

2.2.1 Definition of staffing

Staffing is defined by Lussier (2013:12) as “The process of selection and training of individuals for specific job functions and charging them with associated responsibilities.” Another definition is by Bechet (2008:5) who referred to staffing as a process according to which organisations create a pool of suitable applicants who will be utilised to perform identified tasks with the aim of attaining the goals and objectives of the organisation. Both definitions maintain that staffing is a process involving the organisation selecting qualified and competent people who are delegated with certain responsibilities. Standards Committee of EAPA-SA (2010:70) supports these two definitions above by referring to staffing as the need for appropriate and qualified EAP professionals to be available to meet the goals and objectives of the EAP.

It is believed that in order for the objectives to be met, skilled and competent staff should be recruited and appointed to carry out the duties as expected. It is therefore necessary that specific guidelines be followed for proper recruitment and placement.

2.2.2 Objectives of staffing

Standards Committee of EAPA SA (2010:7), EAPA (2010:14) and UK EAPA (2000:40) identified the following objectives of staffing:

- **Employ an appropriate number of staff to achieve the goals and objectives of the EAP**

When developing EAPs, it is advisable to conduct an organisational profiling to determine the relevant structure and workforce required to perform the work. Hughes and Wearing (2013:14) maintains that both professional and administrative support staff should be sufficient to accommodate the organisational workforce and geographical location and taking into consideration the ethnic and cultural aspects of the employees. It is believed that if the staff complement is not sufficient, the EAP professional will have too much workload, unable to cope and this will result in burnout and demoralisation contributing to ineffective services.

- **Ensure that all EAP staff meet professional and legal requirements**

Professionals are characterised as employees having specialised knowledge and skills that can be applied towards understanding and responding to various situations within the organisation. Weiss (2003:67) states that EAP services require the professional to deal with employees' personal issues and human resource-related matters; it is therefore essential that the EAP professional possesses the relevant qualifications to address those issues. Standards Committee of EAPA-SA (2010:9) recommended that the qualifications for EAP professionals should be at least a 4 year junior degree in the field of Social Work, Psychology, Human Resources or religious studies. Richard et al., (2009:52) emphasised that the EAP professional should have comprehensive knowledge and proficiency to address the following areas:

- Marriage and family counselling.
- Diagnosis and treatment of alcoholism.
- Financial and legal issues.

- General emotional problems.

The appointed professional is also expected to have an understanding of and be responsible for the legal and ethical requirements. This will be required to address issues of confidentiality and informed consent.

- **Ensure that all professional staff comply with the requirements of continuous professional development**

Bhoodram (2010:207) supports the idea of Continuous Professional Development in order to be updated with the current developments in the EAP field and to add value to the organisation. Continuing Professional Development (CPD) is attainable through attendance of group activities, workshops, conferences as well as information sessions related to the profession. According to South African Council for Social Service Profession (2011:11) the CPD system helps professionals to develop themselves in order to be empowered for rendering of high-quality services. The SACSSP encourages the practitioners, particularly Social Workers, to initiate CPD group activities to discuss issues relevant to their scope of practice and inform the council regarding those initiatives. It is expected of professionals to submit a portfolio of evidence to the CPD committee for assessment in order to qualify for CPD points. Other professional bodies have their own systems of CPD and it is therefore the responsibility of the professional to participate in those activities for professional growth.

- **Assign to EAP an appropriate level of administrative support staff who are sensitive to the confidential and ethical issues of the EAP profession**

Mulvihill (2003:14) has the following viewpoint: "By paying attention to staffing, employers can ensure that their employees have access to experienced, formally trained, professional counsellors and administrators who are meticulous about maintaining confidentiality." This may result in high utilisation of EAP services, directly profiting the employer by providing cost saving and limiting legal exposure. This means that administrators who work in the EAP unit should abide by the requirements of EAP ethics, irrespective of their professional background. It is important to orientate the newly appointed staff on both the administrative and ethical requirements of recordkeeping and confidentiality as well as to offer constant supervision for support to maintain quality service. Training and supervision has to be

provided to staff members and continuous monitoring and evaluation is required to ensure compliance. Respect for clients and maintaining confidentiality may promote trust from the side of employees, which may influence service utilisation to increase.

2.2.3 Staffing guidelines

When staffing the EAP unit there are several factors that should be considered to ensure that there is compliance to the EAP standards as prescribed by different EAP associations. UK EAPA (2010:15) and Standards Committee of EAPA-SA (2010:7) suggested the following guidelines:

2.2.3.1 Geographical location, size of workforce as well as cultural and religious diversity

Organisations that have different locations should be considered to ensure that employee clients have access to all EAP services. Reasonable accommodation should be provided in terms of disability needs, culture and religion to facilitate openness and trust for clients to receive quality care. According to Daniels and Teems (2008:40), age and gender should also not be overlooked as it might affect the quality of care.

2.2.3.2 The staffing ratio

In order for clients to receive quality care EAP staffing should consider both clinical and administrative duties. EAP services require professionals who are psychologically healthy, free from stress and burnout so that they can provide efficient services. Hughes and Wearing (2013:132) believes that there should be enough counsellors as well as supervisors to provide staff care, performance monitoring as well as professional development. It is important to balance the ratio of the staff with the total population. Organisational profiling can be used as an effective tool to design an appropriate and cost-effective EAP programme. It should also be noted that the adopted EAP model will determine the appropriate staffing ratio in the organisation.

UK EAPA (2000:45) maintains that organisations that choose to contract external EAP service providers should ensure that they appoint credible

companies that fully understand and accept the policies and procedures of the organisation. The external counsellors should have a minimum of a four-year qualification as a Social Worker, Psychologist or Occupational Therapist and be registered with the relevant statutory body as well as comply with the ethical and legal requirements as required by the professional body. It is essential for affiliates to meet the standard requirement and be subjected to continuous evaluation by the internal EAP professional to ensure that the organisation receives value for money. It is believed that the EAP professional will maintain professionalism and add value to the organisation if the standard is fully implemented.

2.3 Professional consultation or supervision (Standard 9)

Standards Committee of EAPA-SA (2010:13) states that “Every EAP professional who provides services will be subjected to on-going consultation and/or supervision.”

2.3.1 Definition of supervision

Supervision is defined by Kadushin and Harkness (2002:23) as “A process in which the supervisor coordinates, enhances and evaluates on-the-job performance of the supervisee.” Robbins and Decenzo (2004:11) refer to supervision as the first level of management focusing on encouraging and supporting members to contribute positively towards attainment of the goals and objectives of the organisation. Munson (2002:10) defined supervision as an interactional process in which the supervisor assists the supervisee in directing the areas of teaching, administration and helping.

According to the definitions above, it can be concluded that supervision is a process for administrative and educational purposes, which involve working together to lead and control the efforts of an individual or group of employees to perform different tasks. The intended goal of the supervision process is to support subordinates to work towards the achievement of organisational objectives. It is therefore crucial that both the supervisor and supervisee

understand the importance of supervision and should create an enabling environment for discussion and learning.

2.3.2 Objectives of supervision

Hawkins and Shohet (2006:57); Mboniswa (2005:18) and Standards Committee of EAPA SA (2010:8) identified the following common objectives of supervision:

- To provide professional growth and development.
- To assist in clarifying members' roles and responsibilities.
- To reduce stress and burnout and offer a supportive role to professionals.
- To ensure that the objectives of the organisation are met.
- To allocate work and resources as well as guide employees to perform their functions effectively.

Based on the above facts it is evident that supervision is an essential process to ensure quality services and to support the professional development of EAP professionals. Supervision enables the supervisee to develop skills to deliver to the clients a good quality and professional service in accordance with the policies and procedures of the organisation. Munson (2002:23) emphasized the importance of supervision as being to prevent unethical conduct as well as clarifying complicated processes that might impact negatively on the professional's execution of his functions. Lack of professionalism might contribute to negative perception by EAP service recipients leading to underutilisation of the programme and therefore an increase in employees' problems affecting performance.

2.3.3 Difference between supervision and consultation

UK EAPA (2000:48) highlighted an important aspect of supervision and consultation, stating that given the complex duties of EAP, it is essential that supervisors understand the difference between the two concepts. Supervision focus more on administrative issues such as work plan and delegation,

monitoring the implementation of policies and operational procedures, providing advice on technical aspects of work as well as performance appraisal. Consultation addresses issues of client interest, quality of care, ethical issues as well as proper maintenance of client records. Case consultation can also be conducted wherein EAP professionals meet to discuss case management, explore challenges and share best practices (Standards Committee of EAPA, 2010:16). It is therefore required that supervisors possess competency in both fields in order to provide a supportive role in the EAP unit. In some organisations there is a division of roles wherein some supervisors conduct only case management and others perform supervision of administrative functions to prevent burnout and allow for efficiency. Both consultation and supervision will be addressed simultaneously in the discussions to follow.

2.3.4 Functions of supervision

Kadushin and Harkness (2002:18) and Mboniswa (2005:22-30) identified three types of supervision, namely administrative, educational, and supportive functions which will be discussed in the following paragraphs:

2.3.4.1 Educational function of supervision

Educational supervision is referred to as training which involves a process of the skilled supervisor transmitting knowledge of social work skills, practice and ethics to the unskilled supervisee, with a view to empower him/her to perform functions. The supervisor is regarded as the master teacher by the supervisee and it is essential that supervisors read enough work-related material and be prepared to guide the supervisee towards appropriate literature and to clarify any challenges based on literature facts. This simply means the supervisor has a responsibility to empower the supervisee towards the development of professional identity, self-awareness, understanding social work values and ethics as well as aspects of confidentiality and non-judgemental attitude.

2.3.4.2 Administrative function of supervision

The above authors stated that administrative supervision includes tasks such as work restructuring, policy development, salary management, staff selection and recruitment, resource allocation as well as the appointment of service providers. These tasks are essential for promotion of smooth operations in the organisation. In order for EAP units to function effectively there should be appointment of qualified and skilled staff, resources and work allocation based on competencies, policies and operational procedures in place as well as consultation with relevant stakeholders to discuss EAP services. This is the responsibility of the supervisor and hence it is important that the supervisor be skilled and competent to carry out those activities.

2.3.4.3 Supportive function of supervision

Supervision must be viewed as a safe place to share and address concerns, weaknesses and failures and therefore a trusting climate must be created to allow ventilation of thoughts and feelings. Supportive supervision involves care for the caregivers who are overwhelmed by the nature of EAP work, leading to burnout, stress and low morale which eventually leads to poor productivity, non-compliance as well as absenteeism. This type of supervision focuses on providing emotional support for the therapist, where the supervisor encourages, motivates, alleviates fears and reassures the supervisee.

Based on the facts above it is concluded that these supervision types discussed above are very crucial in an EAP component and should be structured in such a way that they add value to the supervisee as well as the organisation.

2.3.5 Qualities of a supervisor

It is required that supervision follows a structured approach under the guidance of an experienced professional either internally or externally. The requirements of the supervisor are a minimum of 5 years' experience coupled with a recommended qualification, (UK EAPA, 2000:48; Richard et al., 2009:150; Standards Committee of EAPA-SA, 2010:8). All authors further stated that the supervisor has to be a clinical specialist familiar with the EAP field and be knowledgeable on aspects of risk assessment, counselling, mental and behavioural health. This clearly indicated that since supervisors have ethical and professional responsibilities towards their supervisees, it is important to align their supervision duties within the boundaries of areas of competence. It is therefore essential that the supervisor be equipped with the necessary resources through Continuous Professional Development systems in place. Supervisors should also be provided with supervision and support to cope with the challenges faced with the supervision role, in order to prevent burnout and poor performance.

As stated above external supervision and consultation should also be explored to strengthen the existing internal support. The organisation can request the services of an external supervisor, for objectivity purposes and a contract be entered into to clarify the scope of supervision work as well as follow-up and evaluation.

Other qualities of supervisors include flexibility, openness to learn from supervisees, patience and the ability to work transculturally since organisations employ professionals from different cultural and religious groups, (Hawkins & Shohet, 2006:51). It is therefore important for the supervisor to attend to continuous training on administrative, educational and clinical issues as well as interpersonal skills to manage human relations, given the uniqueness of each individual.

2.3.6 Structure/Nature of supervision

Standards Committee of EAPA-SA (2010:7) prescribed that professional consultation and supervision should follow a structured approach. There are several aspects to consider and those will be discussed in the paragraphs to follow.

2.3.6.1 Contracting in supervision and consultation

Munson (2002:176) believes that supervision and consultation should be conducted on a regular basis and that both parties should enter into a supervision contract. The contract should reflect aspects such as the frequency and length of supervision as well as the learning structure. This will ensure that the contract is a formalised written document which will be taken seriously. A written and signed contract will enforce consistency thus ensuring that the necessary support is provided to the EAP professional and can be easily monitored. It is therefore the responsibility of both the supervisor and the supervisee to abide with the terms as agreed to in the contract. Munson (2002:13) highlighted the need to develop an evaluation form to assess the supervision process, to be completed by both the supervisor and supervisee. The evaluation forms should be analysed by a neutral person who will be objective in giving feedback, to be applied in reviewing and improving the supervision and consultation process.

2.3.6.2 Frequency and length of supervision

Standards Committee of EAPA-SA (2010:16) stated that supervision and consultation should be performed on a weekly basis whereas UK EAPA (2000:49) maintained that supervision and case consultation should be performed regularly but also in cases of emergency to offer support to the counsellor. The statement is emphasised by Bhoodram (2010:209) in that regular consultations with the manager and amongst EAP professionals themselves are essential to address the therapeutic concerns of the practice, case discussions and mentoring of less-experienced practitioners. Standards Committee of EAPA (2010:16) stated that professionals can

meet monthly after the Chapter meeting to discuss case management and external clinicians may be contracted to provide weekly clinical supervision to the therapist.

Munson (2002:176), supported by Mboniswa (2005:79) stated that supervision or consultation will add value if conducted for 45 to 60 minutes to give both the supervisor and supervisee enough time to discuss those aspects agreed to in the contract. UK EAPA (2000:49) suggested that supervision be conducted for one-and-a-half hours per month. There is a belief that this time will be sufficient to accommodate discussion on administrative, educational and support issues. An agreement can be reached between supervisors and supervisees regarding time allocation that will be sufficient to accommodate different aspects and can be reviewed as required.

Different authors shared different views on the frequency of supervision, therefore a conclusion can be reached that it is the prerogative of both the supervisor and supervisee to come to an agreement as to the frequency based on the identified needs. However, the objectives and functions of supervision should always be considered for both parties to make a commitment and to capture those objectives and functions in the annual performance plan.

2.3.7 Intervention modes for supervision

Kadushin and Harkness (2002:100) identified four intervention modes, namely individual, group, dyadic and live; however, only individual and group intervention modes will be discussed for the purpose of this research.

2.3.7.1 Individual supervision

Individual supervision is conducted on a one-on-one basis between the supervisor and supervisee. According to Mboniswa (2005:35), during sessions discussions are focused on administrative, clinical and personal problems that have a negative impact on performance as well as to identify the strengths. In order for supervision to be effective, sound interpersonal

relationships have to be fostered to promote openness, trust and honesty. Supervision helps the supervisee to identify any limitations based on personal and learning needs and this will help to pave the way for future CPD and personal care, which can be arranged externally so that therapy can be provided to support the professional to address issues.

2.3.7.2 Group supervision

The supervisor works with a group of professionals with the aim to have an understanding of challenges and needs as well as sharing best practices. The advantages of group supervision are identified by Kadushin and Harkness (2002:110), namely to minimise costs, save time and promotes learning from each other through discussion of variety of cases and experiences as well as team building to provide support. Both negative and positive feedback will be shared and helps with self-awareness and facilitating growth. The above authors emphasised that group supervision will be effective through the creation of an environment that promotes trust, caring and consideration for group norms.

2.4 Professional development (Standard 10)

Standards Committee of EAPA-SA (2010:13) maintained that “EAP professionals must engage and participate in professional development activities.”

2.4.1 Goals

The goal of the standard is clearly stated by Standards Committee of EAPA-SA (2010:9) as to ensure delivery of quality services.

2.4.2 Objectives of professional development

The objectives of professional development are identified by Kearns (2000:5), UK EAPA (2000:51), and Standards Committee of EAPA-SA (2010:9) as follows:

- To enhance knowledge and skills of EAP professionals with a view to maintaining the highest level of professionalism.
- To empower professionals with ethical theories and principles that will assist in the resolution of ethical dilemmas.
- To prevent professional burnout and increase support and motivation
- To provide opportunities for on-going self-development and to acquire new information and developments in the EAP field.
- Provide approaches to self-awareness while focusing on relations to self, co-workers and clients as well as realisation of any professional incompetence.

Based on the objectives above, it is concluded that EAP professionals need to have an understanding of the importance of development and takes the necessary steps that such initiatives takes place to the benefit of their own professional careers which will impact positively on both clients and the organisation. During developmental workshops, EAP professionals network with each other to discuss challenges in the practice, suggest solutions as well as share best practices. Such networking assists professionals to allay fears of malpractices, reduce professional isolation, realise limitations and receive motivation from others as well as to keep up with new trends in the EAP field.

2.4.3 Identification of professional developmental needs

According to Richard et al., (2009:53), “EAP professionals need to possess comprehensive knowledge and proficiency in dealing with the diagnosis and treatment of problems such as alcohol abuse, emotional, financial as well as legal troubles.” It is therefore the responsibility of the professional and his/her organisation to ensure that personnel identify relevant training needs based on key performance areas and attend training to acquire more knowledge and keep abreast with current developments in the EAP profession. The above author further states that staff development should be identified during performance appraisal sessions where there is a conversational exchange between supervisor and the EAP professional regarding

achievements and non-achievements. It is during this exercise where the subordinate with the assistance of the supervisor, can identify the necessary training needs to address non-performance. Staff development plans should be an integral part of the service planning timetable and structure in the organisation and should be linked to the performance management and budget plan in order to take into account the needs and interests of the individual.

EAP professional supervision or consultation is another platform to identify the developmental needs of the EAP professional. Educational, administrative and supportive functions of supervision as identified by Kadushin and Harkness (2002:18) and discussed above in paragraph 2.3.7 will help to expose administrative deficiencies and personal developmental needs such as care of the caregiver, policy implementation and Code of conduct to offer employees skills and support to cope with professional demands and prevent burnout and low morale.

Through identification of learning needs for management, professionals and administrative support, staff development can address the shortfalls in the competencies and knowledge base of various levels of personnel that might otherwise present obstacles to achieving organisational goals.

2.4.4 Ways to address professional needs

Professional development can be conducted either internally through in-service training by experienced employees to the less skilled as well as external consultants including continuous education, (Richard et al., 2009:208; UK EAPA, 2000:44). The idea is supported by Standards Committee of EAPA-SA (2010:8) emphasising that the EAP professional should be encouraged to attend meetings and network with other internal units such as Human Resources, Labour Relations, service benefits, etc. to acquire knowledge that will be crucial for referrals of client employees for further intervention. Professional development through continuing education is achieved by means of professionals attending workshops and sessions with

external service providers as identified during the performance appraisals in order to address skills shortages.

Professional development can also be attained through personal therapy where the EAP professional is referred to an external therapist for counselling. Given the complex nature of EAP work, at times professionals need to address employees' problems that reflects on their personal lives as this can lead to withdrawals whereby cases which will evoke personal feelings are avoided. Lilly (2007:56) believes that on-going personal therapy provides personal support and a safe environment in which the professional can explore the roots of any personal issues interfering with client counselling. Continuous Professional Development (CPD) can be successful when EAP managers are sensitive to each individual's own developmental requirements in a flexible and supportive manner.

It is also important for the EAP professional to have access to EAP journals, attend EAP conferences as well as EAPA-SA local chapter activities in order to network with other professionals in order to share best practices and to acquire more knowledge as well as earn CPD points, according to the Standards Committee of EAPA-SA (2010:9).

This statement is supported by SACSSP (2010:7) which highlighted the need to support professionals to upgrade and enhance their skills and knowledge and to comply with the requirements of continuous professional development as prescribed by the various professional bodies. The CPD system is described as an activity that requires professionals to be involved in activities of a professional nature with the aim to render quality services to the service users. The SACSSP requires of Social Workers to attain 20 CPD points per annum which can be obtained through attendance of either group or individual activities, (SACSSP, 2010:7). Other professionals such as Psychologists and Occupational Therapists involved in EAP work are also regulated by their statutory bodies to comply with the CPD system. Standards Committee of EAPA-SA (2010:9) stipulates that EAP professionals should attend 75% of chapter activities, annual conferences and annual general meetings as well as having access to EAP journals. The above-mentioned committee further

mentioned that professionals should attend conferences and training programmes.

It can be concluded that professional development is an integral part towards upliftment of the profession, to professionalise services and to compete with other professions in the Human and Social Science environment.

2.5 Confidentiality (Standard 11)

According to Standards Committee of EAPA–SA (2010:9), “Confidentiality is a cornerstone of the profession, consistent with all the professional standards, ethics and legal requirements that regulate the management of information.”

2.5.1 Definition of confidentiality

Winegar (2005:57) refers to confidentiality as the personal information shared during the therapeutic process and where the therapist has an obligation to protect the employee being counselled. Confidentiality is defined by Midgely and Cowley (2010:26) as a professional norm that information shared by clients will not be shared with others. The two authors above emphasized the importance to protect the information shared by clients during the helping process. This is essential as highlighted by Standards Committee of EAPA-SA (2010:9), that confidentiality is the cornerstone of the profession and essential for employees to feel confident and protected to use the programme. The management of confidentiality needs to be clarified during the marketing and intake session and be incorporated in the organisational policy and operational procedure. However, there are limitations to disclosure of confidentiality. Such limitations are demonstrated by The Health and Social Care Information Centre (2013:13), maintained that professionals should have an understanding of their duties in order to share confidential information in the best interest of the client provided they follow the prescribed procedures for disclosure. Those limitations will be discussed in more detail in paragraph 2.5.4 below.

The goal and objectives of the “Confidentiality” standard is to promote confidentiality and professionalism, protect the privacy of individual employees and stakeholders with a view to preventing litigation, (Standards Committee of EAPA-SA, 2010:9). Confidentiality is also emphasised in the Basic Conditions of Employment Act 75 of 1997: Chapter Eleven). The Act stipulates that the employee’s right to confidentiality should be respected at all times in matters pertaining to personal information, medical records as well as financial status.

It is therefore essential that EAP professionals respect confidentiality of clients at all times. The perceptions of employees about the EAP is very crucial and employees accessing the services share their personal feelings, thoughts and circumstances and if there is no trust and assurance that the information will be kept strictly confidential, this will negatively affect service utilisation.

2.5.2 The importance of confidentiality

Studies conducted by Wright (2002:68) demonstrated that confidentiality is crucial to ensure a high level of employee participation, which is a criterion of success for the EAP programme. The above statement implies that when confidentiality is maintained, employees develop trust and confidence in the programme and services will be highly accessed to resolve both work and personal problems that might have a negative impact on performance. This will directly benefit the organisation since healthy employees are more productive and the objectives of the employer will be achieved. It is therefore crucial that the clients are well informed about how their private information will be handled as well as understanding the circumstances that might lead to disclosure of confidential information.

Proper maintenance of confidentiality fosters a sense of respect for the profession as well as gaining confidence of clients who perceive the programme as a safe environment where their personal issues are addressed in a professional manner. Bhodram (2010:210) and EAPA (2010:21) both agreed that credibility and success of EAP will also be measured in terms of the number of litigations brought against the professionals themselves.

It can be concluded that confidentiality is an essential element in the EAP for clients to feel confident in using the service. It is expected of professionals to have a clear understanding of the issues relating to confidentiality as well as to abide by the prescribed code of conduct in order to protect confidentiality.

2.5.3 Promotion of confidentiality

Different authors highlighted a number of mechanisms to promote confidentiality. Manzini (2005:39) indicated that the maintenance of sound EAP relationships based on confidentiality should be reflected in a policy document. Ways to safeguard confidentiality should be clearly reflected in the policy as well as marketing material in the organisation and be accessible to all employees to sensitize and give assurance that their problems will be kept in the strictest confidence. Both Mnisi (2005:54) and UK EAPA (2000:65) concurred with the above statements by stating that the promotion of confidentiality should be in the form of a written policy statement and operational procedures document, which should also clarify ways in which confidentiality will be promoted as well as the steps to be taken to address any breaches of confidentiality. EAP professionals should take responsibility to spearhead the drafting of the policy and operational procedures document as well as the review thereof and to involve relevant internal stakeholders to ensure that the policy covers all relevant aspects. EAPA (2010:21) maintained that the above-mentioned documents should be evaluated to ensure continuing compliance in line with developments in the field and that on-going communication within the organization be conducted to keep employees informed.

The other criterion for the promotion of confidentiality is the location of the EAP offices. According to Daniels and Teems (2008:38), "The perception of confidentiality is as important as the fact and the goal is not just to maintain a safe place for employees to visit, but also ensure that employees see the EAP as a safe place to discuss personal and sensitive concerns." EAP offices should be located and designed in a user-friendly environment to protect the privacy of the clients. The offices might be in a one-stop health centre, be it on-site or off-site to provide reasonable accommodation for employees not to be

labelled as this might negatively impact accessibility and service utilisation. Hence some organisations adopted the external EAP model, which has an arm-length relationship and the location of their offices outside the premises of the organisation. The correct location of EAP offices has a positive impact on service utilisation since employees do not have to fear to disclose their personal problems because they are unknown to the therapist and not seen by their peers visiting EAP offices.

Proper record maintenance is another requirement to promote confidentiality. Luepker (2003:61) states that EAP professionals should take precautionary measures to protect both verbal and written information pertaining to clients issues. Proper recordkeeping will promote trust from clients as well as the success of the programme because employees will utilise the programme to address their challenges therefore benefitting the organisation through enhanced productivity. More aspects on confidential record management will be discussed under the recordkeeping standard.

2.5.4 Disclosure of confidential information

Standards Committee of EAPA-SA (2010:9); UK EAPA (2000:64) as well as EAPA (2010:21) provided guidelines on limits to confidentiality.

It is the responsibility of the EAP professionals to inform clients about the limits to confidentiality which are impacted by either the statutes or organisational policy. The three authors above maintained that individual privacy must be regulated by confidentiality requirements and procedures. Mayne (2004:20) also emphasised that employees who access EAP services must be certain that their information will be treated as confidential, except in special circumstances. It is crucial that those circumstances be specified in policy and operational procedures for employees and managers to be informed. The following paragraphs will highlight circumstances that lead to disclosure of confidentiality:

2.5.4.1 Limitation of confidentiality

2.5.4.1.1 Disclosure without written consent

Exceptional circumstances that might lead to a breach of confidentiality include threats of serious bodily harm to clients and others, incidences of child abuse and mental illness as well as a court order instructing the release of information, (Standards Committee of EAPA-SA, 2010:9). In such circumstances the professional has a responsibility to disclose confidential information to relevant others with a view to protect the client self or other people who might be at risk. Should the court require information to be released there should be a request letter, or a court summon and this should be discussed with the client to have an understanding and to give consent and should client refuses then the information will be released without his consent as per the court order. It is crucial that employees be sensitized to this information during marketing sessions and also highlighted in the policy and operational procedures document. Canadian Association of Social Workers (2005:7) maintained that during contracting sessions EAP professionals are ethically and legally bound to inform clients about the limitations to confidentiality and clarify incidences that require breaching of confidentiality as well as ensuring the signing of the statement of understanding.

2.5.4.1.2 Written consent

When confidential information has to be disclosed, the request has to be done in writing by the requestor, citing specific reasons for the disclosure as well as the implications thereof. This will allow the client to make an informed decision about signing the consent form to release the confidential information. Couzins (2005:25) emphasised that the client should be made aware of his right to withdraw the statement if need be based on the understanding of the implications as clarified by the EAP professional. According to Standards Committee of EAPA-SA (2010:9), written consent should specify the following:

- The specific information to be disclosed.
- The person to receive the information.
- Purpose of the disclosure and validity period of the information.
- Signature of both client and EAP professional.

Circumstances that may require the client to sign a consent form to release confidential information are for referral purpose to another service provider, for the safe and effective care of a client, e.g., admission to rehabilitation, hospitalization of client or services at the children's court. It is therefore crucial that a client be well informed of the reasons for the disclosure before giving consent.

2.5.4.1.3 Managerial referral

Managers should be equipped with skills on how to confront troubled employees, refer employees for professional intervention and maintain confidentiality with both verbal and written information as well as the type of feedback to be released based on the intervention provided (Richard et al., 2009:201). There might be circumstances that require the release of confidential information to the manager and that should be clarified during the referral process with manager and client. The manager will be provided with a feedback report entailing the dates of sessions, findings and recommendations which will be essential to assist in supporting employees to cope and improve performance. Personal information will be withheld to protect the employee's privacy. During the intake session the issue of confidentiality needs to be discussed with the client and a statement of understanding be signed for the promotion of integrity of the client and the programme as highlighted by Standards Committee of EAPA-SA (2010:9).

2.6 Recordkeeping (Standard 12)

In accordance with Standards Committee of EAPA-SA (2010:9), "The EAP must maintain records."

2.6.1 Definition of recordkeeping

Recordkeeping is defined by Leupker (2003:2) as systematic control, organisation, access to and protection of information in various forms, from retention to legal destruction. Bodek (2010:3) refers to recordkeeping as the systematic process wherein administrative and clinical records are created, captured, and stored. Protection of Personal Information, Act No. 4 (2013:18)

emphasised that personal information should be safeguarded by third parties and accountability be exercised in disclosing and disposing such data.

For the purpose of this discussion EAP recordkeeping refers to the maintenance of clinical and administrative records in the organisation. Clinical records refer to client records of assessment, care plan, referrals and termination. Administrative data includes marketing material, minutes, policies and other HR-related information essential for the daily operations of the EAP unit. Recordkeeping has to be done in a systematic way that is accurate and efficient, timely and for data to be easily retrieved by authorised personnel.

2.6.2 Objectives of record keeping

Objectives of recordkeeping are discussed by UK EAPA (2000:53), National Council of Social Service (2007:5), and Standards Committee of EAPA-SA (2010:10), as follows:

2.6.2.1 Continuity of care

Intention for recordkeeping is to ensure continuity of care, through available case history which will allow for follow-up services and for the case management supervisor to monitor the work done. Recordkeeping will also be of assistance in cases of resignation or leave of absence of the original case manager in order for a client to continue receiving services. NCSS (2007:6) highlights the challenges faced by organisations wherein professionals leave employment without proper termination with clients and with incomplete closing or handing over of reports. This is said to have a negative effect on clients' continuity of care and affects the integrity of the profession. It is therefore the responsibility of the case management supervisors to ensure proper updating and handing over of records during service termination.

2.6.2.2 Service improvement

Proper recordkeeping provides an opportunity for evaluation of services with a view to programme improvement. Bodek (2010:5) supports the above authors in that recordkeeping allows for the identification of trends for reporting purposes to management, multidisciplinary teams as well as other relevant stakeholders and to highlight the need for programme review and amendments in order to render quality services to both clients and the organisation. Recordkeeping is also essential for providing data that may be used for continuing professional development as well as research purposes to address a specific phenomenon with a view to improving the programme. It is therefore essential that both clinical and administrative data be properly captured for this purpose.

2.6.2.3 Accountability

It is important for EAP professionals to provide consistent and accurate information at any given time and proper recordkeeping, to promote accountability and facilitate trust as well as professional relationship between the client and the service provider. The professional is accountable to both the profession, the client and the organisation and it is crucial that information be maintained as prescribed by legal and ethical guidelines. Hugman (2003:103) believes that recordkeeping should be done based on the requirements as prescribed by the state accreditation programme, third-party players as well as professional bodies. Proper recordkeeping and maintenance will help with the timely availability of reliable data, which will demonstrate professionalism.

2.6.2.4 Risk management purposes

National Council of Social Service (2007:5) maintained that proper records will provide evidence to protect the practitioner against any litigation and complaints relating to professional discipline. Failure to document and produce required data can lead to the practitioner being found guilty of an offence either by the court or the professional body despite verbal confession that a specific procedure and task was done in compliance with the standards.

In conclusion it is evident based on literature that recordkeeping is an essential requirement in the EAP. It is therefore critical that information should be kept secure, maintained and updated regularly to ensure quality service provision, continuity of care for clients as well as evaluation of the services.

2.6.3 Different types of records

Standards Committee of EAPA-SA (2010:9) indicates that the system should comply to capture and maintaining clinical records, administrative matters, corporate client information, minutes, marketing and training material as well as progress reports. A few of these will be discussed in the following paragraphs.

2.6.3.1 Clinical records

Clinical records refer to intake forms, consent forms, process and progress reports, as well as any other information gathered with a view to render professional services to the client (NCSS, 2006:7). Clinical records are vital for continued service and are irreplaceable since they record clients' feelings and thoughts at a given moment. This information is captured in the client's care plan and stored for purposes of continued care, compiling reports, referrals for further intervention as well as when required by court of law for investigation purposes. UK EAPA (2000:55) stated that there may be instances whereby the court may require that records be produced, therefore it is crucial that EAP professionals comply with the prescribed format of writing reports to capture any critical information.

2.6.3.2 Marketing and promotional material

The rationale for developing marketing and promotional material is to provide employees with relevant information about different EAP services, benefits thereof and accessibility with a view to increasing awareness (Bhoodram, 2010:238). The EAP has a wide variety of awareness material such as brochures, wallet cards, EAP posters and banners as well as

electronic data. In organisations budgets should be reserved to develop the information and it is therefore critical that the marketing information be developed by the internal EAP staff, in collaboration with the internal communication team. Mnisi (2005:72) maintained that this approach promotes consistency and value for money as well as proper branding. The produced marketing information produced should be maintained and stored in line with the organisation's communication and information management policies to ensure compliance with standardisation and prevention of any external contamination in electronic data.

2.6.3.3 Administrative information

National Council of Social Service, (NCSS, 2007:7) mentioned that minutes of meetings, case conferences and email exchanges should be properly compiled and archived since they provide information as to why certain decisions had been taken. Human Resources records such as professional qualifications, registration with professional bodies as well as copies of indemnity insurance for both the internal EAP and Service providers should be kept for referencing and monitoring purposes to ensure compliance, (UK EAPA, 2000:54). Given the complicated nature of EAP services when dealing with clients, there might emerge some situations where an EAP professional has to undergo a disciplinary procedure and the relevant documents will be required to assess the qualifications and other compliance measures, it is therefore vital that the documents are maintained accordingly.

2.6.4 Disclosure of records

NCSS (2007:11) mentioned that when clients are given access to their records, the EAP professional or manager should take reasonable steps to protect confidentiality of other people identified in the report. The statement is supported by UK EAPA (2000:55) which emphasised the need to comply with the provisions of the Act. In South Africa access to personal information is regulated by Promotion of Access to Information Act 2, (2000:17) wherein clients or their representatives may be supplied with copies of the

reports. However it is essential that the report be requested in writing, with an application form, explaining the purpose or usage of the report and the duration of the intended use. The EAP professional has a duty to consult with the supervisor and the legal consultant in the organisation to discuss the release of the report and to ensure the relevant consent form is signed and filed accordingly. Reasonable steps should also be taken to limit the use of EAP reports in matters of arbitration or litigation, and the EAP should guard against such practices as they might affect service utilisation. Ethical consideration should be considered to ensure client and customer protection, professional behaviour and to guide practitioners to release information in line with the code of conduct as specified by the professional body, organisational policies, and laws of the country (Standards Committee of EAPA-SA, 2010:6).

2.6.5 Storage and destruction of EAP information

2.6.5.1 Storage of data

Standards Committee of EAPA-SA (2010:10); UK EAPA (2000:54) and Nicholson (2011:34) specified that EAP records should have a life-cycle; be maintained, archived and disposed of accordingly. The above authors concur that confidentiality of client records must be a priority even when filing paper records and should be stored in lockable filing cabinets with access to keys being restricted to the relevant personnel. When filing written records precautionary measures should be taken to avoid labelling that might lead to identification of confidential information. When the EAP service providers are changed, there must be careful consideration of the transfer of records to ensure continuity of care as well as confidentiality (Standards Committee of EAPA, 2010:19). It is therefore the responsibility of the EAP manager, when outsourcing services, to enter into a service-level agreement with service providers regarding the ownership of records and procedures for transfer during contract termination. Care should also be exercised in terms of confidential information transmitted through fax, email, etc. for the sender and receiver to handle the information appropriately to prevent violation of privacy, therefore it should contain a clause on the limits of disclosure.

2.6.5.2 Protection of electronic data

Standards Committee of EAPA SA (2010:10) states that for all electronic data it is necessary to install data security measures as well as a back-up system. The information management systems should be in compliance with the policies and procedures of the organisation and country. In South Africa electronic data is managed in compliance with the Electronic Communication and Transaction Act 25 (2002, Chapter 85). The Act states that a user should be issued with a password to access electronic data and proper training must be provided on how to manage electronic data as well as the available disciplinary steps for violation of the compliance policies. Given recent technological developments, EAP professionals are exposed to serious breaches of confidentiality such as leakages and interceptions, (Leupker, 2003:49). It is therefore crucial for the Information Technology (IT) department to ensure information risk management and restricted passwords for the users.

2.6.5.3 Duration of data storage

The EAP unit should store records for the duration as prescribed by law and the policies of the organisation, (UK EAPA, 2000:55; EAPA, 2010:18; Hoke, 2011:65). This is necessary to afford the client access and opportunity to challenge the services provided, requests of reports for further intervention as well as when required by a court of law for investigative purposes.

Different authors hold different views for the duration of information storage. NCSS (2007:12) stated that clinical records should be stored for at least three years and financial records for a minimum of seven years. Standards Committee of EAPA SA (2010:10) maintained that records should be stored for a minimum of 5 years according to the legal requirements. UK EAPA (2000:55) failed to prescribe a minimum period of time for recordkeeping. However each organisation's information management system will provide guidelines on duration of data storage.

2.6.5.4 Disposal of data

Disposal or destruction of EAP information should be conducted in a manner to assure confidentiality. UK EAPA (2000:55) and NCSS (2007:12) stated that record destruction should be carried out in such a manner as to protect confidentiality and according to government policies. Electronic records should be weeded out of the system through physical destruction or magnetically wiped. Softcopies should be destroyed through a shredder machine or burnt in a document incinerator by the authorized person. This is all done with the view to protect confidentiality and to avoid documents landing in the wrong hands.

It is evident that proper recordkeeping is essential for the operations in an EAP organisation as this will assist with evaluation, service improvements and continuity and even for audit purposes. It is therefore the responsibility of both professionals, managers and administrative staff to maintain all types of records as discussed above for the smooth operation of the EAP unit and for accountability purposes.

2.7 Professional liability insurance (Standard 13)

Standards Committee of EAPA-SA (2010:10) stated that “All EAP professionals must have adequate professional liability insurance”.

2.7.1 Definition of professional liability insurance

Professional liability insurance, also referred to as professional indemnity insurance is a cover intended to protect professionals during allegations of malpractice or civil suits. The nature of EAP work is very sensitive and at times malpractice may occur. According to the Standards Committee of EAPA-SA (2010:10); UK EAPA (2000:59) and EAPA (2010:19), the objective of the standard is “To protect the corporate client and the service providers against legal action by clients alleging malpractice.”

EAP utilises legal counsel to clarify matters relating to the releasing of confidential information, investigations and representation of clients in court

proceedings. It is therefore a necessity in all organisations implementing the EAP programme to have professional liability cover to protect professionals during incidences of malpractice.

Reamer (2013:182) and Reardon (2010:22) identified the following common malpractices in the EAP field:

- Treatment without proper consent.
- Breach of confidentiality.
- Negligence or breach of care.
- Dishonesty.
- Loss of data due to damage or negligence.

Malpractice occurs when there is evidence that the professional violated the legal or professional duty towards the client in one way or another. It can also occur when the professional failed to offer services as required by the Code of ethics as well as policies and procedures of the organisation.

According to Banks (2006:168) during practice, professionals are faced with ethical issues, problems and dilemmas about the actions and decisions taken in practice. It is therefore crucial to ensure compliance and to operate within the scope of practice as well as to attend case management and supervision to discuss challenging cases with the supervisor. Professional liability insurance will help minimise great financial losses due to exposure to litigation.

2.7.2 Responsibility for professional liability

Bhoodram (2010:214) indicated that the standard is a necessity in all organisations implementing the EAP. It is the responsibility of the employer to orientate and initiate the EAP professional upon appointment, on the type of insurance coverage as well as provide a list of credible insurance companies. UK EAPA (2000:60) maintained that organisations need to be clear about their respective liabilities aligned to their professional duties and it is crucial to clarify these duties in the recruitment process and appointment contract to ensure compliance. Standards Committee of EAPA-SA (2010:09) is of the view that employers should take responsibility to pay for the insurance premiums and the required budget be available. The employer should

ensure registration and compliance with the terms and conditions of the insurance company and the employer should monitor to ensure annual renewal.

Professional liability insurance should be obtained from a credible suitable company with a good record,(UK EAPA,2000:60).EAP Professionals should take responsibility to screen the insurance company and be vigilant of the fly-by-night companies that are not registered and recognised by the state.

In conclusion, it is required that EAP professionals should understand their roles and responsibilities, professional limitations, code of conduct as well as the operational procedures and policies of their respective organisations to ensure quality services in order to minimise the risk of disputes and litigation arising from malpractice. A study by Youngberg (2007:18) proved that litigation may have a negative impact on the career as well as the psychological well-being of the professional. A steady increase was reported in the number of malpractices from the 1980's to the 1990's and the amount of money spent to protect professionals. The above author stated that professionals develop litigation stress symptoms such as anxiety, fatigue and depression as a result of the litigation process. It is therefore the responsibility of the organisation as well as the professional to use the available platforms such as training and development, supervision and case consultation as well as self-care to minimise those incidences.

2.8 Ethics (Standard 14)

According to Standards Committee of EAPA-SA (2010:11),“EAP practitioners must maintain the highest level of ethical consideration.”

2.8.1 Definition of ethics

Ethics is defined by Dolgoff, Loewenberg, and Harrington (2005:19) as “A branch of philosophy that concerns itself with human conduct and moral decision making.”

Gray and Webb (2010:19) referred to ethics as guidelines adopted by a profession for regulation purposes in order to make professionals accountable. Another definition is by Reamer (2013:3) who stated that “Ethics are principles of conduct governing an individual or a profession”.

In summary, ethics are elements in the profession to maintain the standard for individuals to adhere to. Ethics bring about accountability, responsibility and trust to the individuals being served. It is therefore essential that professionals be trained and guided on what ethical behaviour is. Ethics are concerned with moral directives which guide the relationship between the professional and others as well as help to distinguish between right and wrong. Professional Associations including National Association of Social Work; SACSSP; EAPA-SA; EAPA and even Professional Educators Associations in different countries developed Codes of Ethics to regulate the conduct and behaviour of their professionals.

2.8.2 Purpose of the code of ethics

Anderson and Handelsman (2010:75) and Standards Committee of EAPA-SA (2010:11) identified the following regarding the purpose of a code of ethics:

- To guide professionals to identify relevant considerations when professional obligations or ethical dilemmas arise.
- To socialise new professionals about the missions, values, ethical principles and standards.
- To ensure that practitioners practise within the scope of their qualifications and experience.
- To protect clients from unethical behaviour by incompetent practitioners and to hold the practitioner accountable.
- To protect professionals from litigation.

Ethical standards focus on human behaviour and motivations that aim at the highest ideals of human interaction. EAP professionals have a duty to understand and adhere to the requirements of this standard to ensure accountability and responsibility to clients and other relevant stakeholders. The ethics are based on the premise that professionals have a responsibility to their clients, organisation, family as well as external service providers for the unique nature of helping relationships and they combine both highminded ethical principles and elements of criminal law. The rationale for developing ethics was to assist the EAP with general guidance on conduct, protect the professional from outside regulation, establish norms related to

the profession and identify standards that can help to adjudicate the allegations of misconduct.

2.8.3 Ethical issues relating to the EAP

Sharar, White, and Funk (2002:3) as well as Anderson and Handelsman (2010:73) identified and discussed the following ethical issues relating to EAP:

2.8.3.1 Confidentiality

EAP professionals are encouraged to inform clients during the intake phase about their rights and responsibilities pertaining to confidentiality and to clarify the following:

- Signing of the consent form.
- Violation of privacy as instructed by a court of law or investigations relating to self-harm or child abuse.
- Proper storage of clients' confidential information.

In so doing the client will develop trust and confidence in the professional and a good client/practitioner relationship will develop, thus promoting professionalism.

2.8.3.2 Respect for human dignity

Banks (2006:47) supports the above authors by stating that EAP professionals should strive to counter discrimination, promote people's right to choice and allow for clients' self-determination. The role of the professional is not to decide for clients, but to provide information and clarity as well as support the client to make an informed decision regarding the best possible solution to the identified problem.

2.8.3.3 Ethical responsibilities towards colleagues and other stakeholders

It is expected of professionals to show respect to their colleagues and manager as well as uphold treatment of confidential information shared by colleagues. During

client referrals for further intervention it is the responsibility of the professional to have client files updated and to follow proper referral procedures and to make the necessary follow-up. This will enhance performance and upholding the integrity of the profession (Standards Committee of EAPA-SA, 2010:11).

2.8.3.4 Ethical responsibility to the profession

Ethical responsibilities are not only limited to clients but should also include the profession itself. EAP professionals are expected to be competent in knowledge relating to work, policies and EAP technologies. Professionals should also recognise their limitations and practise within those boundaries as well as thrive for development to increase their knowledge and skills.

2.8.3.5 Violation of the code of ethics

The role of professional statutory councils is to control the behaviour of professionals towards their clients and to ensure that professionals maintain the highest standard acceptable to society (SACSSP, 2011:12). The statement is supported by Standards Committee of EAPA-SA (2010:11) which maintains that reference should be made to the code of conduct of the EAPA-SA for guiding members as well as non-members on promotion of ethical behaviour and the importance of adhering to the code of ethics. Members who violate the code of ethics should be subjected to disciplinary steps as mandated by the Disciplinary committee of the relevant professional body. Discipline can be implemented internally by the organisation as well as by professional council, which might include a fine or termination of the practice licence.

It can be argued that ethics in workplace counselling become more complex as opposed to private practice, given the complex nature of relationships. The professional has to balance on the one side, the employer and on the other side the interest of the employee. Signing of consent form by the employee does not exclude the professional from the ethical responsibility of balancing employer and employee interests. The professional needs to be perceived as trustworthy, be seen by the

employer as adding value to the organisation and still needs to maintain a therapeutic relationship and trust with the client.

2.9 Summary

Based on the literature review it can be concluded that the administration and management standard is an essential element in the EAP profession.

Human resources are the most essential asset in the organisation and literature has revealed that it is necessary for the EAP component to have sufficient professionals both on operational, management and supervisory level to provide staff care, performance monitoring as well as professional development. The EAP professionals have a duty to advise the employer on organisational profiling with a view to selecting the correct EAP model and staffing to ensure that the employee receives quality services which will lead to improved performance amongst the employees.

Several authors concurred that professional development may be identified during performance assessment and supervision, and can be attained through attendance of on-going training, conferences, EAPA chapter meetings as well as reading and discussion of professional articles.

The literature findings highlighted that supervision and consultation is necessary to provide professional growth, clarify roles and responsibilities as well as provide support to reduce stress amongst professionals and emphasized the importance for the supervisor to be a clinical person with the required qualifications and experience to provide quality service. Different authors presented different views relating to the frequency and length of supervision however this can be determined by the supervisor and the EAP professional in different EAP settings to identify the setup that can be suitable to their organisation.

Confidentiality is regarded as the cornerstone of the EAP profession and a number of authors hold the same view that information shared by clients should not be shared with others. However there are limitations to confidentiality in circumstances such as protecting the interest of the child, life of a client and others as well as when

ordered by the court. Confidentiality also applies to management of records. Different authors agree that recordkeeping is essential for service delivery.

Literature has also shown that it is essential that EAP professionals be registered with the relevant statutory bodies and that they comply with the requirement thereof as well as to acquire professional indemnity insurance to protect the professional and organisation against legal action. Different authors held different views as to who should take responsibility for the payment of fees; some indicated that the organisation should pay the annual fees whereas some felt it is the responsibility of the professional since the indemnity insurance is important for own career.

According to literature it is necessary for professionals to comply with ethical and legal requirements of the profession. Ethics are important in maintaining accountability and responsibility to the profession, and those in violation of these ethics should be held accountable and the relevant disciplinary measures be implemented as per the specified policies.

Both clinical and administrative records should be preserved taking in cognisance the policies and procedures of the organisation relating to confidentiality. Some authors presented different views on the duration of storing records, others recommended a minimum of 5 years and some mentioned a duration of seven years, however the discretion will be based on the organisation. Destruction of information should be done as prescribed by the policies and several authors concurred that care should be exercised on confidentiality as to who destroys the records and how. Most authors recommended shredding and incineration by an authorised person.

From the literature review it can be concluded that management and administration in EAPs, although not part of the core technologies, should be recognised for its importance. Should management and administration not be effectively dealt with during practice the EAP practitioners may experience serious challenges to render services according to the core technologies.

CHAPTER 3

Empirical investigation into the Management and Administration Practice Standards in South African Employee Assistance Programme

This research project focused on benchmarking whether EAPA-SA members apply the Management and Administration Standard in their daily practice, as prescribed by Standards Committee of EAPA-SA 2010. The employee assistance programme is crucial in organisations to assist and support employees to address both work and personal problems that might have a negative impact on performance. Healthy employees tend to be productive and contribute positively towards the attainment of organisational goals and objectives. It is therefore essential that the EAP be capacitated with the relevant professional team, which is qualified and knowledgeable on aspects of confidentiality and record management, adhering to the code of ethics as well as compliant to the standards of practice of the professional association.

In this empirical chapter the researcher will describe the research methodology applied in the study, discuss the empirical data presented in tables and figures, followed by a discussion of the analysed data.

3.2 Research methodology

3.2.1 Research approach

There are two types of research approaches in social research namely, qualitative and quantitative paradigms (De Vos, Strydom, Fouche & Delport, 2011:63). Quantitative approach was applied for reasons that it seeks to explain the relationship between variables through measuring and uses inquiry and description methods to understand a social phenomenon. In this current research project implementation of the EAPA-SA administration and management standard was

explored and benchmarked against EAPA-SA standards. The researcher needed to explore whether EAP professionals implemented the standard as prescribed by Standards Committee of EAPA-SA.

The study was exploratory in nature with the objective to gain an understanding of the problem at hand. According to Terre Blanche, Durrheim, and Painter (2006:44), exploratory studies are used to investigate unknown areas and use open and flexible approaches to search for new insights into the problem. The researcher needed to explore the administration and management phenomenon in order to have an understanding on how the South African EAP professionals implement the administration and management standard in the field to achieve the best results.

3.2.2 Type of research

Applied research was implemented in the current study and according to Kumar (2005:9), it is mostly concerned with the collection of information to enhance a social phenomenon. The aim of applied research is to develop solutions to problems and applications in practice. The focus of the study was on describing and understanding a social phenomenon, i.e. the practice of the EAP administration and management standard as to whether it meets the set goals and objectives. The researcher believes that the findings and recommendations will help to improve on the application of the standard in practice.

3.2.3 Research design

Research design refers to all the issues involved in planning and executing a research project, from identifying the problem through to reporting and publishing the results (Punch, 2005:63). The research design focuses on all the steps in the process to achieve the anticipated outcomes. The proposed study applied a survey design to collect data and the choice was influenced by the reasons that data can be collected from large groups of people. Questions are developed and distributed through various forms to willing people for responses and focus on capturing attitudes,

values, beliefs and opinions. For this research a group consisting of EAPA-SA members were approached for data collection and were required to provide their attitudes and opinions on the management and administration standard.

The study consisted of an electronic survey for registered EAPA-SA members accessed through the website. De Vos et al., (2011:156) mentioned that the benefits of an electronic survey are that it is cheap and easy to create and administer.

3.3 Research methods

3.3.1 Research population and sampling

The study excluded sampling procedures for reasons that the total population of registered EAPA-SA individual members had been included in the study to ensure a high as possible response rate. The total registered EAPA-SA members with email addresses were included in the research population to facilitate gathering of sufficient data.

3.3.2 Data collection

There are different techniques of data collection according to the quantitative approach, including administering a questionnaire during interview and observation of participants. The proposed study applied a structured questionnaire. Kumar (2005:25) highlighted that in developing a questionnaire it is important to consider the structure of the questions, taking into account the factual and background information, measuring attitudes as well as opinions and beliefs the respondents hold about the phenomenon under investigation. The developed questionnaire comprised a variety of open-ended, closed-ended and multiple-choice questions, and gave allowance for other comments with a variety of subjects covered. The research study was a group project to benchmark the EAP standards as applied in practice by EAPA-SA professionals against the existing EAPA-SA standards. The goals and objectives of the study were jointly explored; however every researcher developed his own set of questions based on the selected standard. The researcher focused on

the management and administration standard as outlined by Standards Committee of EAPA-SA. Questions on the different categories of standards were put together into one document which was distributed to all registered members of EAPA-SA, through a link provided in an email.

The Department of Statistics, University of Pretoria, was requested to assist in the development and refinement of the data-collection instrument. The Qualtrics IT software was utilised and proven to be an effective tool for data collection and analysis. The software was regarded as a useful tool to the researcher to identify key information and differences. A written request was submitted to the EAPA-SA Board to give permission (**See Permission letter attached as Annexure 1**) for the on-line study to be conducted with its registered members.

The developed questionnaire (**Annexure 4**) was attached to a link which was distributed through email to registered members of EAPA-SA. An introduction and consent letter (**Annexure 3**) were attached as the first page of the on-line questionnaire to enable respondents to understand the objectives of the study and decide whether they agreed to participate or by ticking the relevant box to give consent before proceeding to the survey. The total population of registered EAPA-SA members numbered 217 at that particular period and emails were circulated to all of them. About 23 emails bounced back due to incorrect or inactive email addresses. A total of 194 emails were successfully delivered. Of the 194 sent emails, 91 members responded successfully.

Two reminder emails were sent to encourage members to return the questionnaires. Electronic questionnaires have advantages such as a high rate of distribution and minimal paper work, it is less expensive and offers anonymity (Delpont & Roestenburg, 2011:187). The data collection method had an added advantage in the current study whereby the responses were sent to a central point to be accessed for analysis and the identity of the respondents could not be identified.

3.3.3 Feasibility of the study

With reference to validity of the data-collection instrument, Delpport and Roestenburg (2011:173-174) refer to content validity and face validity, which need to be established prior to data collection. A data-collection instrument which was developed and applied, namely Qualtrics software, captured the contents of the questionnaire in a manner that provided a strong correlation with the EAP Standards document, a document which all individual members of EAPA-SA are familiar with as it is part of the documentation provided to all new members joining the EAPA-SA. The document is available on the EAPA-SA website (www.eapasa.co.za).

Reliability refers to the ability of the measuring instrument to yield the same results more than once. If the same instrument is administered at different times to different respondents, the same results should be derived (Delpport&Roestenburg, 2011:177).

The questionnaire included more than two questions on different items of the management and administration standard, in order to ensure that respondents will have sufficient opportunity to make a contribution. The researcher ensured that the questions were clear and specific by including a description of items in the management and administration standards as outlined in Standards Committee of EAPA-SA (2010:7-11). Clear instructions were provided to avoid confusion. The questions allowed for a definite “yes” or “no” as well as room for other comments to allow for more data collection and clarity on a specific topic.

There was consistency in scoring procedures and the data and scoring sheets were developed by the group of researchers with the assistance of experts from the Statistics Department: University of Pretoria. Precautionary measures were also taken through developing a non-editable document to avoid external contamination.

3.3.4 Data analysis

Babbie (2004:26) define quantitative data analysis as a technique applied to convert the collected data into numerical and statistical form. This data collection technique assists to interpret the data into meaningful information. Data was reduced to an easily interpretable form to allow for comparisons on the research problem in order

to reach conclusions. Data preparation was conducted through checking and editing and then followed by coding. Data cleaning was carried out and 27 responses removed to improve the quality of data and make it fit for use. Data can be analysed manually or by computer and in this current research project a computer was utilised with the assistance from the Statistics Department: University of Pretoria.

3.3.5 Pilot study

A pilot study was used to identify possible problems with the proposed research, using a small sample of respondents before the main study was conducted. The purpose of a pilot study is to improve the success and effectiveness of the investigation (Terre Blanche et al., 2006:490). A pilot study was conducted with three EAP professionals registered with EAPA-SA to identify any areas that required improvement. From the criticism and comments made, changes were effected to draw up the final questionnaire. Data obtained from the pilot study was not included in the main study.

3.4 Ethical consideration

In order for the research to be successful, there are a number of ethical issues that need to be considered. Gray and Webb (2010:19) refer to ethics as guidelines adopted by a profession for regulation purposes in order that professionals are held accountable. The purpose for ethics was to protect the research subjects against abuse, as well as to ensure the information collected was not mishandled and misused. The Research Ethics Committee of University of Pretoria analysed and granted ethical clearance for this current research project (see letter on **Ethical clearance attached as Annexure 2**). The following research ethics were considered for the purpose of the present study:

3.4.1 Voluntary participation

According to Leedy and Ormond (2004:105), respondents should participate voluntarily in the study and must not be coerced to do so. Voluntary participation ensures that participants are free to answer the questions without fear. After

obtaining approval from the EAPA-SA Board, respondents were contacted through the address list of the EAPA-SA. The Board member for membership of the EAPA-SA assisted by availing an email address list to the supervisor and project leader as the address list was not supposed to be available to the researchers to promote anonymity. Communication was initiated through a covering letter to explain the objectives, process and to obtain informed consent for voluntary participation.

3.4.2 Informed consent

Kumar (2000:215) is of the view that research participants should be informed of the nature and activities of the study to be conducted, its activities as well as a choice as to whether to participate or not. Informed consent is necessary to ensure that the respondents participate with a full understanding of the process as well as the advantages and disadvantages. The questionnaire accessed through the EAPA-SA link provided a covering letter with instructions and a tick box for participants to tick in order to give consent before proceeding with the questionnaire. Respondents were also made aware of their right to withdraw from the study if they so wish Kumar (2000:215).

3.4.3 Violation of privacy

A research study should respect a participant's right to privacy and under no circumstances should a research report be presented in a way that others are aware of their names and responses, unless permission is granted (Jackson, 2008:43). In this present research project, information regarding case management and organisational operations will be divulged and it is the responsibility of the researcher to assure the EAP professionals that the information will be protected and that respondents' and names of organisations will not be divulged. The researcher did not have access to the names of the respondents since the questionnaires were administered through a link distributed to members via email. The data collection method applied facilitated protection of privacy of the respondents.

3.4.4 Avoidance of harm

Respondents should not be exposed to situations that might cause harm, be it physical or emotional. Participants may experience harm with regard to their family life or relationships with other clients, even in the employment environment (Strydom, 2011:115). There might be questions which require the professional to share information on some previous cases (respecting anonymity of the client's names) and this sharing process might evoke emotions. The researcher took reasonable steps to minimise harm by asking questions which were less sensitive and the focus was based on factual information from the Standards document which will benefit the respondents as well as the EAP profession in improving the application of the standard.

3.4.5 Publication of findings

Mboniswa (2005:13) is of the view that researchers should be open with their results allowing interested groups to utilise the information to improve and enhance performance. The goal and objectives of the study was to explore the implementation of administration and management as an EAP standard in order to share best practices and to make recommendations to the EAPA-SA Board on the adjustment regarding compliance. It is therefore necessary that the results be published through the relevant channels to allow the respondents and the larger EAP community to be aware of the findings to the advantage of the profession, clients as well as organisations. The Management and administration standard is crucial for compliance relating to EAP staffing, professional development as well as issues of confidentiality, hence the need to share the results with the respondents.

3.5 Research findings

The research questionnaire was divided into three sections namely demographic data, information on the EAPA-SA Standard document and lastly management and administration standard. The research findings are presented as such.

3.5.1 Section 1: Demographic and general information

3.5.1.1 Gender of participants (Question 1.1)

Table 1: Gender (N=64)

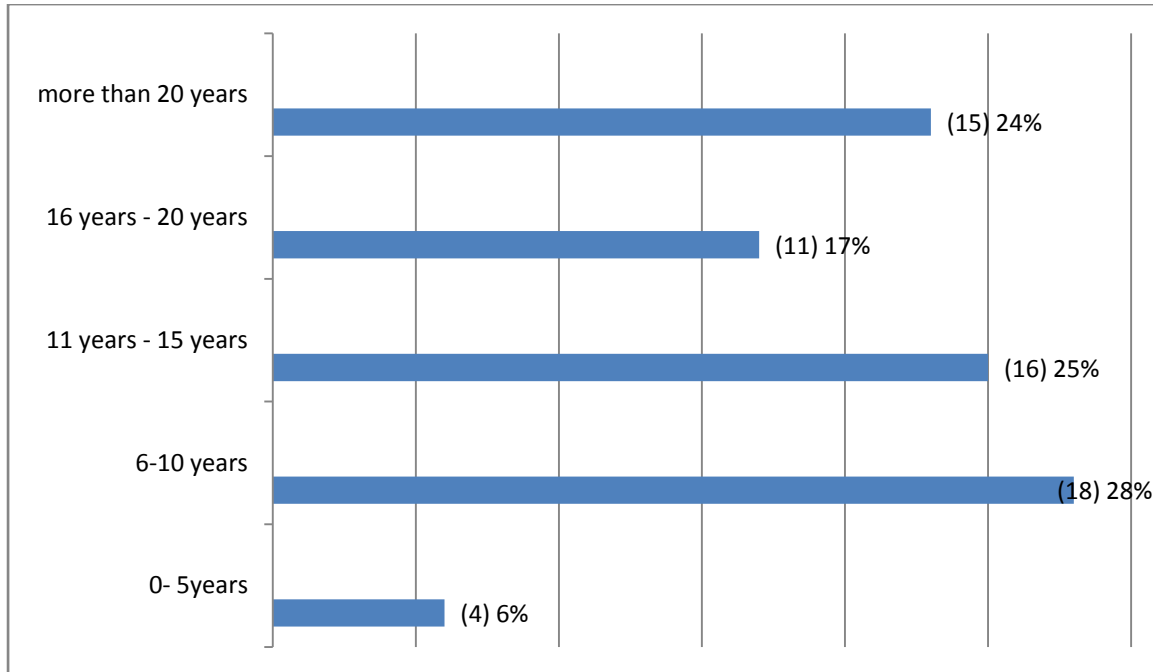
Answer	Response	Percentage
Male	20	31%
Female	43	67%
Missing data	01	2%
Total	64	100%

Discussion of data

Table 1 indicates that majority of respondents were female at 67% as compared to males at 31%.The difference can be attributed to the fact that the helping professions were historically female dominated.

3.5.1.2 Duration of work history as a professional person
(Question 1.2)

Figure 1: Duration of work history (N=64)



Discussion of data

The majority of the respondents have a service period of 6 to 20 years and a minority of 4% reflected a service period of less than 5 years. Furthermore, the data show that 15 employees have been employed for more than 20 years. The results present a positive indication that EAP programmes in organisations are provided by staff with sufficient experience in the field to render psychosocial support to employees.

It is a requirement of the Standards Committee of EAPA-SA that professionals rendering EAP services should have knowledge and skills acquired through work experience to address problems such as substance abuse, marital, financial as well as workplace issues affecting performance.

3.5.1.3 Duration of work history as a practitioner/professional

(Question 1.3)

Table 2: Duration of work (N=64)

Answer	Response	Percentage
0-5 years	18	28%
6-10 years	25	39%
11-15 years	15	24%
16-20 years	6	9%
More than 20 years	0	0
Total	64	100%

Discussion of data

The majority of respondents have a service period of 20 years or less as practitioners and professionals. This acquired data is positive affirmation that the EAP programme is implemented by professionals and practitioners that have sufficient EAP experience. The researcher noted that there were no respondents with more than 20 years' service as EAP practitioners and professionals. The reason behind that might be the period in which EAPs were introduced in South Africa, around 1996 which is a 19 year period. It was around that timeframe when the Department of Public Service and Administration initiated the introduction of EAPs in the public sector (Govender, 2009:31).

3.5.1.4 Sector of employment

(Question 1.4)

Table 3: Sector of Employment (N=64)

Answer	Response	Percentage
Public sector	47	74%
Private sector	6	9%
Private practice full -time	2	3%
Employed by EAP service provider	2	3%
Public sector with part-time private practice	2	3%
Private sector with part-time private practice	0	0%
Other (please specify)	4	6%
Missing data	1	2%
Total	64	100%

Discussion of data

The above table reflects that the public sector is the largest employer of EAP professionals at 74% as compared to other sectors. The positive response supports the mission of Department of Public Service and Administration that all government departments should have EHWP programmes to build and maintain a healthy workforce through care and support to employees with a view to enhance performance (Department of Public Service and Administration, 2008:16)

3.5.1.5 Explain job content/title

(Question 1.5)

Text responses summarised

The job content of the respondents are summarised as follows :

Employment in the health and wellness field

- Manager, employee health and wellness programme: responsible for implementation of four integrated employee health and wellness policies.
- Health and wellness coordinator and social work manager in an organisation where the EAP is outsourced, rendering supportive and EAP service to previous clients.
- EAP practitioner responsible for brief counselling, developing treatment plans as well as referral to community services for further intervention.

- Strategic health and wellness management client relations: integration of EAP services, BI, project management, and assist staff with psychosocial issues.

Consultant

- As consultant/lecturer: advise corporate clients on issues of EAP, OHS, physical wellness, HIV, productivity management, and spiritual Personal Assistant wellness.

Discussion of data

The data above reflect that most of the respondents are working as EHWP/EAP practitioners responsible for integrated wellness services with both internal and outsourced services. One is a consultant lecturer providing training to a company on wellness issues. The responses give an indication that the majority of the respondents are correctly placed according to their profession as EHWP practitioners or professionals performing EAP-related tasks such as counselling, HIV care and support, and physical and spiritual services. All these services reflect the migration towards an integrated and multidisciplinary approach; however, it is still required that the EAPA-SA take the necessary precautions to safeguard the EAP against being overshadowed by other Health and Wellness programmes. This process can be achieved through implementing the relevant scientific assessments to guide organisations on needs profiling to ensure that the most appropriate EAP programmes are designed (Standards Committee of EAPA-SA, 2010:4).

3.5.2 EAPA-SA Standards document

3.5.2.1 Awareness and utilisation of the EAPA-SA Standards document

(Question 2.1.1 and Question 1.3)

Table 4: Awareness of the EAPA-SA Standards document and duration of employment (N=64)

How long have you been working as as EAP professional							
Are you aware of the EAPA-SA standard document?	0-5 years	6-10 years	11-15 years	16-20 years	More than 20 years	Total	%
Yes	18	22	14	6	0	60	94%
No	0	3	1	0	0	4	6%
Total	18	25	15	6	0	64	100%

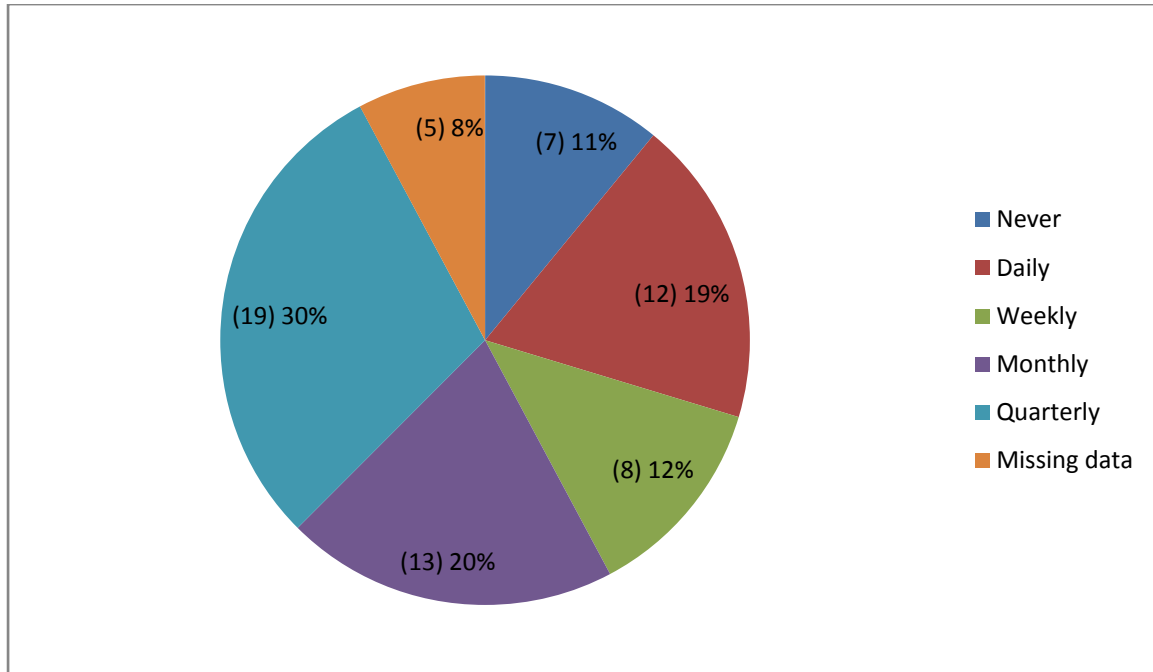
Discussion of data

The majority of the respondents with a service record of between 0 and 15 years stated that they were aware of the EAPA-SA standards. The response gives a positive indication that a high number of EAP professionals are knowledgeable about the Standards document. It is a requirement of the EAPA-SA that professionals use the document as a guiding tool during their daily practice to benchmark and to implement the programme in line with standards to ensure rendering of quality services.

3.5.2.2 Use of the EAPA-SA Standards document

(Question 2.1.2)

Figure 2: Utilisation of the EAPA-SA Standards document (N=64)



Discussion of data

The above graph reflects that 30% of respondents made use of the Standards document on a quarterly basis, 20% on a monthly basis and 19% on a daily basis. The responses give a vast difference as compared to 11% who did not make use of the mentioned document at all. The results affirm that the EAPA-SA standards document is being utilised and as such the EAPA-SA Board succeeded in its intentions to be of assistance to its members by providing them with essential information to be implemented during practice.

3.5.2.3 Lack of consultation of the EAPA-SA Standards document

(Question 2.1.3)

Table 5: Reasons for non-consultation of the Standards document (N=13)

Answer	Response	Percentage
I was not aware of the EAPA-SA document	1	8%
I do not have access to the Standards document	2	15%
The Standards document is impractical	2	15%
* Other (add comments)	8	62%
Total	13	100%

(Question 2.1.4)

Text responses and general comments on the lack of consultation of the EAPA-SA Standards document.

Respondents cited reasons of having enough experience and as such have no need to consult the Standards document. Some make reference to the social work principles and ethics and also that the EAPA-SA Standards document needs to be amended to incorporate new developments in the EAP field.

Discussion of data

From Table 5 above and the text response, it is evident that not all EAPA-SA members are aware and some do not have access to the Standards document which can be regarded as by the researcher as a form of ignorance. Others indicated that based on their years of experience there is no need to refer. The responses raise a concern because lack of reference to the standards document might result in violation of the ethical conducts such as protection of confidentiality and records management which is a crucial factor to maintain professionalism and increase service utilisation (Bhoodram, 2010:210). To ensure accessibility the EAPA-SA standard document 2010 is available on the EAPA-SA website for easy reference.

Please note:

There is a gap in the sequence of numbering due to some topics being discussed by other members of the group research project. The researcher will discuss management and administration standard as section 3 under heading 5 of the questionnaire.

3.5.3 Section 3: Management and administration of staff

3.5.3.1 Level of qualifications

Table 6: Highest qualification (N=64)

Answer	Response	Percentage
Matric	1	2%
Diploma	1	2%
Bachelor's degree: 3 years	5	7%
Bachelor's degree: 4 years	30	47%
Honours	2	3%
Master's degree	7	11%
Master's degree in EAP	8	12%
Doctoral degree	1	2%
Other (please specify)	5	8%
Missing value	4	6%
Total	64	100%

Discussion of data

The abovetable reflects that 47%of respondents havea 4 yearsbachelor's degree followed by master's degrees in EAP at 12% and other fields of practice. Thisresponse showsa positivereflection on the qualificationsof EAP professioanals/practitioners.EAPA-SA requires that qualifications for registration be at a fourth-year level or more and a need for further professional development is encouraged specifically for the respondents with matric, a diploma and three-year degreeto comply with the required standard of qualification.

3.5.3.2 Required number of EAP staff to render services as expected (Question 5.1.2 and Question 1.4)

Table 7: Number of staff and sector of employment (N=64)

Is the number of EAP staff members sufficient to render services as expected ?				
Sector of employment	YES	NO	TOTAL	%
Public sector	8	34	42	66%
Private sector	2	3	5	8%
Private practice full- time	2	0	2	3%
Employed by EAP Service provider	2	0	2	3%
Public sector with part-time private practice	1	1	2	3%
Private sector with part-time private practice	0	0	0	0%
Other (please specify	2	2	4	6%
Missing data	0	0	7	11%
Total	17	40	64	100%

Discussion of data

The table above reflects that the public sector did not employ sufficient EAP personnel to provide services, which can be attributed to the fact that most respondents were from the public sector as compared to the private sector. Hughes and Wearing (2013:14) maintain that insufficient staff to render EAP services might lead to too much workload and burnout resulting in the non-attainment of organizational goals and objectives. The questionnaire did not explore the reasons for insufficient staffing.

3.5.3.3 Usefulness of staffing guidelines

(Question 5.1.3)

Table 8: Is the number of staff sufficient to render services? (N=64)

Answer	Response	Percentage
Yes	36	56%
No	7	11%
Never applied the guidelines	8	13%
Was not aware of the guidelines	7	11%
Missing data	6	9%
Total	64	100%

Discussion of data

Based on the table above it is evident that the majority of respondents considered the staffing guidelines to be useful. Proper staffing of the EAP component is critical to the internal programme as professionals may be expected to provide an integrated and comprehensive service but due to insufficient personnel the credibility of the programme becomes compromised. A concern is raised where respondents indicated that guidelines are not useful, were not applied, and some were not aware of their existence of the guidelines. This non-implementation of the staffing guidelines might attribute to the insufficient staffing as reflected above.

3.5.3.4 Application of staffing guidelines

(Question 5.1.4)

Table 9: Is the staffing guidelines useful (N=64)

Answer	Response	Percentage
Yes	15	24%
No	38	59%
Missing data	11	17%
Total	64	100%

Discussion of data

The majority of the respondents indicated the staffing guidelines are not implemented in the appointment of EAP professionals. This statement supports the illustration in Table 8 above that the guidelines are not taken into account during the

staffing process, hence the appointed staff being insufficient to render EAP services. The non-compliance is a serious concern which might lead to the available professionals being overworked and this can lead to stress and burnout thereby compromising the quality of service.

3.5.3.5 Reason for not applying staffing guidelines

(Question 5.1.5)

Table 10: Reasons for non-application of staffing guidelines (N=38)

Answer	Response	Percentage
Unaware of the staffing guidelines	13	34%
Not important	2	5%
Not practical	9	24%
*Other (please specify)	19	50%

Summary of text responses

The positive comment is that the staffing is done per site and consideration given to the different numbers of staff per site. The staffing guidelines were applied in the selection of the service delivery model.

A number of negative responses reflected that in some organisations the EAP professionals are not involved in the staffing establishments and some sectors consider EAP as less important. Some cited lack of financial resources and insufficient managerial support in EAP issues as reasons for not applying the guidelines for the appointment of EAP professionals.

Discussion of data

A large proportion of respondents was unaware of the staffing guidelines (34%) which raises concerns about the process of the appointment of their staff. Other respondents were aware of the staffing guidelines however experienced challenges to implement them since they are not directly involved in organisational design and human resource staffing. The lack of knowledge to implementing the staffing guidelines contribute to the EAP component not having enough staff to render services as expected. A lack of support and insufficient budget were also indicated and can be concluded that the EAP component are not considered important to be

sufficiently capacitated. It is required that the EAP component conduct an evaluation and monitoring process as required by the Standards Committee of EAPA-SA (2010:5) and to consult with management on a continuous basis to report on the trends and positive impact of EAP in the organisation in terms of enhancing performance. The EAP feedback will portray to management the importance of the EAP and the need to allocate sufficient financial resources for staffing.

3.5.3.6 EAP staff versus employee ratio

(Question 5.1.6)

The ratio of staff to employees served varied from 1/280, 1/11000, 3/33 000 and 1:/960. Respondents failed to highlight the specific model of service delivery as well as the functions performed.

Discussion of data

The responses reflect that in some organisations the prescribed EAPA-SA staffing ratio is considered whereas in some it is not applied. The non-implementation raises concern that some professionals are overloaded and this might lead to burnout and poor performance. UK EAPA (2010:15) emphasised that the size of the workforce and geographical location are important factors in determining the staff ratio and hence the need for organisational profiling to design an appropriate service-delivery model based on organisational and client needs.

3.5.3.7 Consideration of cultural diversity in the EAP

(Question 5.1.7 and Question 1.4)

Table 11: Staffing component and sector of employment (N=64)

Is cultural diversity considered in your EAP staffing component					
Indicate the sector where you are currently employed	Yes	No	Missing data	Total	%
Public sector	27	15		42	65%
Private sector	1	4		5	6%
Private practice full-time	1	1		2	4%
Employed by EAP Service provider	1	0		1	2%
Public sector with part-time private practice	0	2		2	4%
Private sector with part-time private practice	0	0		0	0%
Other (please specify)	3	1		4	7%
Missing data				8	12%
Total	33	23	8	64	100%

Discussion of data

The majority of respondents indicated that cultural diversity is considered in staffing of their organisations and most were from the public sector with a record of 65%. The data provides a positive reflection that the employees' needs are addressed by professionals who relate well with them on cultural and religious aspects and this should also be considered for outsourced EAP services. Organisations that responded negatively to the matter of cultural diversity needs to review the staffing criteria in their future appointments.

3.5.4 EAP professional consultation or supervision

3.5.4.1 Access to an experienced EAP professional for purposes of consultation (Question 5.2.1)

Table 12: Access to professional consultation (N=64)

Answer	Response	Percentage
Yes	49	76%
No	8	13%
Missing data	7	11%
Total	64	100%

Discussion of data

The above table indicates that the majority of respondents(76%) did have access to professional consultation. The responses reflect a positive indication that EAP professionals are getting support and care to address both personal, professional growth and development as well as to prevent burnout and to discuss challenging cases. It is only a minority who do not undergo consultation and it is a concern as to how they address their clinical and administrative challenges.

3.5.4.2 Frequency of consultation with experienced consultant (Question 5.2.2)

Table 13: Frequency of consultation (N=49)

Answer	Response	Percentage
Never	3	6%
Never – no need	3	6%
Less than once a month	14	29%
Once a month	11	23%
2-3 times a month	5	10%
Once a week	6	12%
2-3 times a week	1	2%
Daily	6	12%
Total	49	100%

Discussion of data

Most of the respondents attend consultations less than once a month, whilst the second largest group attend consultation on a monthly basis. This response provides

a positive reflection that these professionals are receiving supervision and consultation to take care of their professional growth and development as well as personal care as prescribed by (UK EAPA,200:5). Only 12% reflect that there is no need for consultation and a concern is how do they cope and manage when they experience personal and clinical challenges.Lack of consultation and supervision might lead to the non-clarification of roles and lack of support resulting in frustration, stressand poor performance.

3.5.4.3 Employment of a consultant on an in-house basis (Question 5.2.3)

Table 14: Do you have an in-house consultant? (N=64)

Answer	Response	Percentage
Yes	24	37%
No	19	30%
Missing data	21	33%
Total	64	100%

Discussion of data

In the majority of cases the consultant is on an in-house basis indicating that the consultant is either the supervisor or manager in the section. UK EAPA (2000:48) emphasisedthat it is crucial for the consultant supervisor to have the recommended qualifications, knowledgeable on aspects of the EAP profession as well as to attendcontinuous professional development to be aware of new developments in the EAP field. Thirty per cent (30%) did not have an in-house consultant but alternativeplans for support were not explored through the questionnaire.

3.5.4.4 Reasons for no access to professional consultation

(Question 5.2.4)

Table 15: Reasons for no access to professional consultation (N=8)

Answer	Response	Percentage
Limited funds for EAP	20	
Employers not acknowledging the need for consultants	9	
* Other (please specify)	6	

More than one answer could be selected. The numbers per option however exceeded the total number of respondents (8), which means the above numbers cannot be interpreted.

* Others

Other reasons included a lack of budget as well as the service provider being responsible for consultation.

Additional comments

- Peer-group supervision is applied, and in some instances peer supervision is rare due to the profile structure.
- EAP consultants are paid by Head Office, whereas in some organisation the service provider offers consultation.
- Care for the caregiver is needed.

Discussion of data

Reasons provided above indicate that some organisations do not consider supervision and consultation essential and this is a worrying factor since the process is essential for personal care and growth. Positive responses included peer-group supervision and the organisation providing budget for consultation. The compliance confirms that different systems are in place to provide consultation, which is a requirement as emphasised by Mboniswa (2005:18) that it helps to reduce stress and clarify roles and responsibilities.

3.5.5 Professional development

3.5.5.1 Registration with professional body

(Question 5.3.1)

Table 16: Registration with body (N=64)

Answer	Response	Percentage
Yes	48	75%
No	9	14%
Missing data	7	11
Total	64	100%

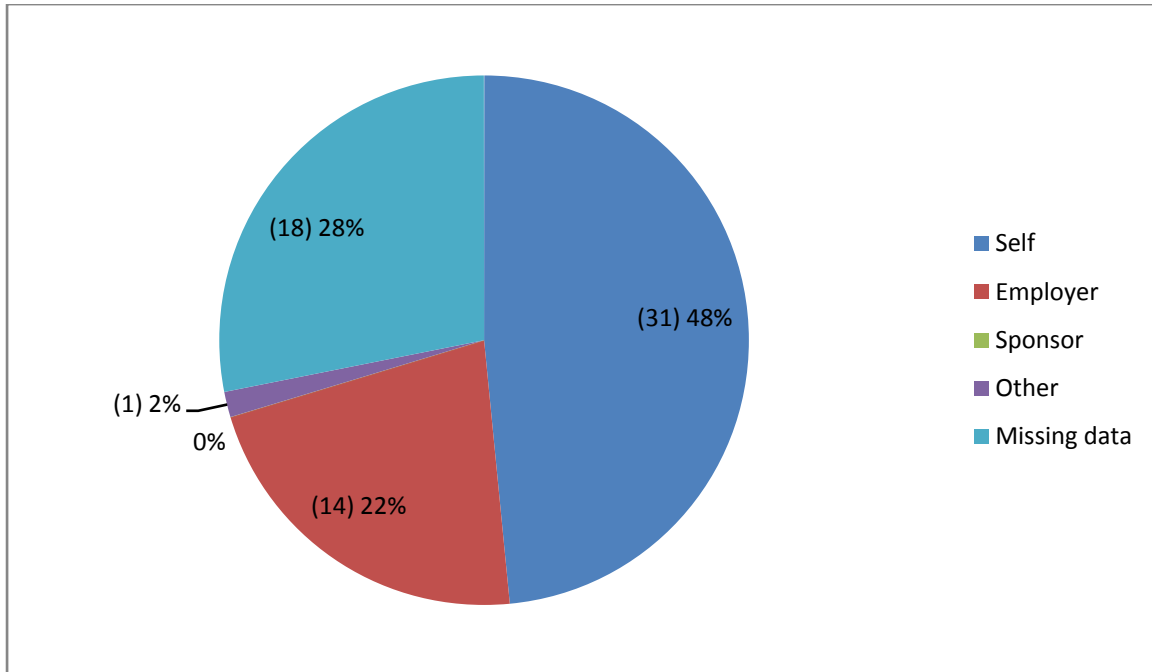
Discussion of data

The majority of the respondents wereregistered with the statutory bodies and this is a positive indication that most EAPA-SA members are active members and also professionals. Fourteen per cent (14%) responded that they are not registered, and it can be concluded that they are not regulated by any professional body which may be a concern and non-compliance to regulations on issues of ethics and Continuous Professional Development as required by the (South African Council for the Social Service Professions, 2010:7).

3.5.5.2 Payment of annual registration fees

(Question 5.3.2)

Figure 3: Responsibility for payment of annual registration fees (N=64)



Discussion of data

The above graph depicts that the majority of EAP professionals were responsible for payment of their own annual fees. The responses give an indication that even though the employer does not provide financial assistance, professionals take responsibility because professional registration is crucial for their own professional careers.

3.5.5.3 State statutory body where registered

(Question 5.3.3)

Table 17: Name of statutory body (N=47)

Answer	Response	Percentage
SACSSP	34	73%
HPCSA: Psychologist	2	4%
HPCSA: Psychometrics	0	0%
HPCSA: Medical Doctor	0	0%
SA Nursing Council	2	4%
* Other (please specify)	9	19%
Total	47	100%

* Other responses included registration with EAPA-SA, SACE, SAIPS, SIOPS, AHPCSA and counsellors.

Discussion of data

Amongst the EAPA-SA members the majority (73%) were registered as Social Workers, followed by others at 19%. Some are registered with other statutory bodies while others listed professional associations instead of statutory bodies. The responses give an indication that the EAPs in different organizations are coordinated and managed by a high percentage of professional persons, mostly Social Workers, who are qualified and registered as per the required standards.

3.5.5.4 Professional development actions during the past 12 months

(Question 5.3.4)

Table 18: Professional development activities (N=64)

Answer	Response	Percentage
Obtained additional relevant qualification	12	19%
Attended at least one conference	40	62%
Attended one professional development meeting	24	37%
Attended at least one EAPA-SA chapter meeting	23	36%
Read at least one scientific journal/article on EAP related matters	27	42%
* Other activities (please specify)	9	14%

More than one answer could be selected. The numbers per option however exceeded the total number of respondents (64), which means the above numbers cannot be interpreted.

* Other activities of professional development included attending the facilitation course, two members were studying for a Master's degree, attending a short course on EAP as well as EAPA-SA Board meetings.

Additional comments cited were as follows:

- Lack of funding.
- Internal training provided.
- Lack of consistency in government departments where some pay for professional development and others do not.
- CPD requirements assist members to obtain assistance for training opportunities.
- Statutory body for EAPs can assist in professional development.
- Members with HR qualifications do not have the opportunity to register with a professional body.
- EAP-related fields such as HIV, AIDS, TB management, as well as SHERQ to be considered for updating.

Discussion of data

The responses reflected that EAPA-SA members do participate in professional development activities mostly attending annual conferences and chapter meetings as well as reading EAP articles. The responses give a positive indication that EAPA-SA members are informed about the conferences and chapter meetings and use them as platforms for professional development which is considered essential for their own personal growth and for networking purposes. This practice is in compliance with the goals and objectives of Standards Committee of EAPA-SA (2010:9) that professional development is crucial to enhance knowledge and skills of professionals in order to ensure delivery of services.

A challenge is identified where other organisations fail to budget for training purposes. This is a limitation because the CPD programme and Standards Committee of EAPA-SA requires professionals to attend training, and if the requirement is not met it results in the professionals not complying and lagging behind in new developments in the EAP field which might impact negatively

on their service delivery. Some professionals might have an interest to attend training but lacks the financial means to pay for such training.

3.5.6 Confidentiality

3.5.6.1 Promotion of confidentiality through EAP policy, and storage of client records (Question 5.4.1 and Question 5.5.2)

Table 19: Confidentiality through EAP policy (N=64)

Does EAP promotes confidentiality						
Is confidential information kept under secured conditions	Yes	No	Not sure	No policy in existence	Total	%
Yes	47	0	0	2	49	76%
No	3	0	0	0	3	5%
Missing data	0	0	0	0	12	19%
Total	50	0	0	2	64	100%

Discussion of data

The majority of respondents (76%) indicated that their policy promotes confidentiality and this is clearly indicated by the responses that clinical information is kept under secured conditions. Only 5% indicated that they do not adhere to the standard and this is in violation of the code of conduct on recordkeeping as emphasised by Nicholson (2011:34) that EAP records have a lifecycle and should be maintained and stored accordingly to prevent unauthorised access.

3.5.6.2 Promotion of confidentiality through EAP operational guidelines (Question 5.4.2)

Table 20: Confidentiality through EAP operational plan (N=64)

Answer	Response	Percentage
Yes	50	78%
No	0	0%
Not sure	1	2%
No operational guidelines in existence	5	8%
Missing data	8	12%
Total	64	100%

Discussion of data

The above table reflects that the majority of respondents have an operational guideline document that shows how confidentiality should be protected. The concern is with the 8% that indicated that they do not have operational guidelines in their organisation and it is questionable how confidentiality and other EAP implementation are managed.

3.5.6.3 Confidential information released with written permission from the *employee only* (Question 5.4.3)

Table 21: Release of information with written consent (N=64)

Answer	Response	Percentage
Yes	53	83%
No	3	5%
Not sure	0	0%
Missing data	8	12%
Total	64	100%

Discussion of data

The data reflect that the majority of respondents confirmed that confidential information is released with written permission from the employee. This is a good indication that clients' confidential information is respected and protected and this will promote trust amongst the EAP and employees and that may increase utilisation of services. Although only a few respondents do not comply, it remains a concern that the management of confidential information of clients may be at risk of being misused.

or provided to unauthorised people, if not dependent on the written permission for the release of information.

3.5.6.4 Confidential information without written permission is released to the employer, in terms of the following:

(Question 5.4.4)

Table 22: Release of information without written consent (n=64)

Question	Yes	No	Not sure	Missing data	Total responses	%
Confirmation of attendance/non-attendance of counselling sessions	35 (55%)	18 (28%)	0 (0%)	11 (17%)	64	100%
Confirmation of cooperation/non-cooperation with treatment plan	33 (52%)	20 (31%)	0 (0%)	11 (17%)	64	100%
Confirmation of progress/lack of progress	32 (50%)	21 (32%)	1 (2%)	10 (16%)	64	84%

Discussion of data

With the multitude responses, the majority of responses reflected that guidelines for the release of a client's confidential information to the referring manager are applied correctly to report attendance, cooperation as well as progress. Some responses were negative on this aspect and the researcher was uncertain how the referring managers were informed on a client's progress since information on the matter of release of information was not further explored.

3.5.6.5 Guidelines on release of contents in operational guidelines of EAP

(Question 5.4.5)

Table 23: Guidelines on release of information in operational plan (N=64)

Answer	Response	Percentage
Yes	38	59%
No	8	13%
Not sure	7	11%
Missing data	11	17%
Total	64	100%

Discussion of data

Positive feedback is reflected in the above table where the majority of respondents affirmed that the guidelines are included in the operational guidelines document. These responses confirmed good practice to protect clients, organisation as well as the EAP programme. This corresponds with existing literature as cited by Manzini (2005:39) that “Maintenance of a sound EAP relationships based on confidentiality should be reflected in a policy document.” Only a minority do not comply and there is a need for improvement on that aspect.

3.5.7 EAP recording

3.5.7.1 Type of EAP-related information recorded and duration for storage of *data*
 (Question 5.5.1 and Question 5.5.3)

Table 24: Type of EAP information and duration of storage

Stipulate duration of period for storage of data								
Indicate if the following EAP-related information is recorded. You may select more than one option	One year	Two years	Three years	Four years	Five years	Other, please specify	Total	%
Administrative information	1	2	7	1	29	4	44	90%
Document of meetings	1	2	9	1	28	5	46	92%
Clinical information	0	2	8	1	29	4	44	90%
Corporate client information	1	1	6	1	21	4	34	67%
Evaluation data	1	1	7	0	20	5	34	67%
Marketing and promotional material	1	1	6	1	20	4	33	65%
Training material	0	2	8	1	21	3	35	68%
Progress reports on projects	1	2	9	1	28	4	45	88%
Other, please specify	0	0	1	0	1	1	3	6%

Discussion of data

The majority of respondents stipulated that administrative, minutes, clinical and projects information are stored for a period of five years. Additional information was that the records are kept by service providers, which is also a good practice however the organisations should ensure that handing over is done properly during termination to comply with the objectives of record management on continuity of care and accountability as prescribed (Standards Committee of EAPA- SA, 2010:18).

3.5.7.2 Conditions for securing of clinical information

(Question 5.5.2)

Table 25: Is there controlled access to clinical information ? (N=64)

Answer	Response	Percentage
Yes	49	77%
No	4	6%
Missing data	11	17%
Total	64	100%

Additional comments regarding record keeping

EAP professional in control of records – but measurements are not sufficient to prevent access.

- Access demanded by managers – despite measures in place.
- Need for electronically formatted records – seen as an improvement on current system of hard copies.
- Strict security protocol – confirmed by single respondent.
- Period of storage of information – determined by the duration of employee being in service.

Discussion of data

The majority of respondents stated that there is controlled access to clinical information. This shows a positive response since clinical records are confidential as such records relate to clients' personal information and it is crucial that records will only be accessed by the authorised personnel, preferably the EAP professionals. One of the respondents indicated that a manager demanded access.

Demanding such access would be a violation of the standard if the manager is a non-professional and not registered with the relevant statutory body as required.

3.5.8 Professional liability insurance

3.5.8.1 Professional liability

(Question 5.6.1)

Table 26: Do you have a professionals liability insurance?(N=64)

Answer	Response	Percentage
Yes	8	13%
No	45	70%
Missing data	11	17%
Total	64	100%

Discussion of data

A negative response was reflected by 70% of respondents who did not have liability insurance. It is an indication that professionals do not adhere to the EAPA-SA standard requirement of having such insurance. Only 13% confirmed that they have the insurance. This raises a concern since insurance is a requirement for dealing with clinical services for the professional to be protected and represented in case of litigation.

3.5.8.2 Party responsible for payment of malpractice insurance

(Question 5.6.2)

Table 27: Payment of malpractice insurance (N=8)

Answer	Response	Percentage
Self	3	38%
Employer	4	50%
EAP service provider	1	12%
Other (please specify)	0	0%
Total	8	100%

Discussion of data

The majority of the respondents have their employers responsible for payment of their own professional indemnity insurance and this shows that the employer is aware of the need and importance since any litigation might affect the professional and the organisation. Thirty eight percent pay for their own insurance and this displays that professionals are taking responsibility to protect themselves and their profession. It should however be taken into consideration that these percentages are based on a very low response (13%- see Table 26) having insurance in place.

3.5.8.3 Reason for not having liability insurance (Question 5.6.3)

Table 28: Possession of malpractice insurance (N=45)

Answer	Response	Percentage
Do not see the need for insurance	7	16%
Do not have money to pay the premium	21	47%
Employer refuses to pay premiums	9	20%
* Other (please specify)	15	33%

Note: More than one response was possible

*Other

- Ignorance – A number of respondents were unaware of the existence of or the need to have malpractice insurance in place.
- Lack of knowledge about this type of insurance.
- Some members are protected by malpractice insurance provided by their employers.

Additional comments regarding the malpractice insurance

- Acknowledge the need for cover.
- Expectation that the employer needs to provide payment for insurance.
- Expect the EAPA-SA to provide more detailed information on this type of insurance and to motivate members to obtain insurance.

Discussion of data

The above table reflects that the majority of respondents do not have enough funds to pay for their insurance and their employers are not providing any financial support. It is also evident that some members are not aware of the existence of such insurance policy but acknowledge the need to have such insurance. The lack of insurance places their professional at risk should they become involved in malpractice and need to face legal action.

3.5.9 Ethics

3.5.9.1 Training on professional ethics

(Question 5.7.1 and Question 1.3)

Table 29: Training on professional ethics and years of experience as a professional (N=64)

Have you been trained on professional ethics ?					
How long have you been working as an EAP practitioner /professional	Yes	No	Missing data	Total	%
0 - 5 years	13	1		14	22%
6 - 10 years	21	0		21	33%
11 - 15 years	12	1		13	20%
16 - 20 years	6	0		6	9%
more than 20 years	0	0		0	0%
Missing data			10	10	16%
Total	52	2	10	64	100%

Discussion of data

The above table reflects a positive indication that the majority of the respondents with a service period of 5 to 15 years have been trained on professional ethics as compared to a minority not having been trained. The responses give a positive reflection that professionals take cognisance of the need for professional

development to be aware of the code of conduct. This is regarded as important by Anderson and Handelsman (2010:75) in guiding and ensuring that professionals practise within the scope of practice in order to avoid ethical dilemmas that might lead to litigation. Text data also affirmed that a total of 20% of newly appointed staff had undergone training to be orientated on the vision, mission and ethical principles as required.

3.5.9.2 Knowledge about the contents of the EAPA-SA code of ethics
 (Question 5.7.2)

Table 30: Do you have knowledge about EAPA-SA code of ethics ? (N=64)

Answer	Response	Percentage
Yes	50	78%
No	4	6%
Missing data	10	16%
Total	64	100%

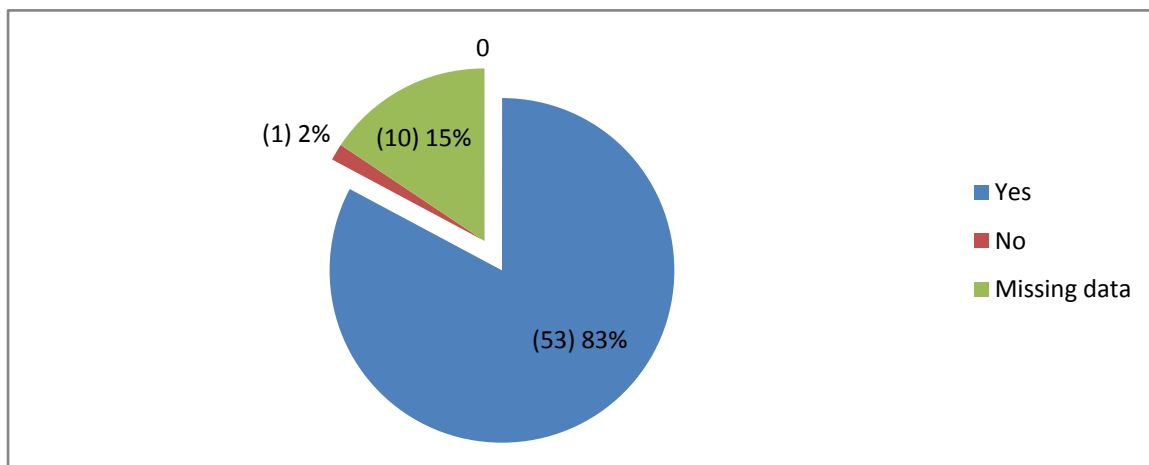
Discussion of data

A total of 78% of respondents indicated that they are aware of the contents of the document which can be concluded on that the members are practising in line with the code of ethics.

The code of ethics of EAPA (2010:20) and Standards Committee of EAPA-SA (2010:11) outline issues of confidentiality, respect for human dignity, records management as well as displaying ethical responsibility to the profession. It is expected that professionals should understand and practise in line with the code of conduct to ensure quality service and maintain professionalism.

3.5.9.3 Relevance of a code of ethics for the EAP
(Question 5.7.3)

Figure4: (N=64)



Discussion of data

The majority of respondents (83%) agreed that the Code of Ethics is relevant for the EAPs. This can be confirmed by literature that, since EAP professionals are often involved in clinical work, it is essential for them to practise in line with the code of good conduct in order to uphold the interests of the client, the organization and the profession.

3.5.9.4 Awareness of unethical behaviour amongst EAP professionals
(Question 5.7.4)

Table 31: Are you aware of any unethical behaviour by EAP professional? (N=64)

Answer	Response	Percentage
Yes	26	41%
No	27	42%
Missing data	11	17%
Total	64	100%

Additional text comments on Ethics:

- Non-professionally trained practitioners not bound by ethical behaviour.
- Some people who are not registered with statutory bodies are not adhering to the code of practice, as often stated in the Public sector that anybody can do EAP.

- Lack of understating of ethics by supervisors/manager – results in a situation where a supervisor may misuse position to access data.
- Confidential information is shared with colleagues.

Discussion of data

From the above table and additional comments it can be concluded that there is some observance of unethical behaviour where non-professionals practice EAP and where managers demand to have access to clients' confidential information which results in the information being shared with colleagues. This unauthorised practice and access is a serious violation of the code of conduct of different statutory bodies. Standards Committee of EAPA-SA (2010:9) states that confidentiality of clients' information should be respected at all times and access be restricted to authorised personnel. Authorised personnel are professionals who are qualified and registered with the relevant statutory bodies to render clinical services.

3.6 Summary of empirical investigation

The focus of data analysis in this chapter was on the demographics of EAPA-SA members, the awareness and utilisation of the EAPA-SA Standards document and only one of the categories of the EAPA-SA Standard, namely Management and Administration.

(The remainder of the standards were covered by fellow students being part of a group research project – and reported on other sections of the Standards document in their individual mini-dissertations.)

CHAPTER 4

Key findings, conclusions, and recommendations

4.1 Introduction

In this chapter the researcher will firstly highlight the key findings from the analysed data presented in the previous chapter. Secondly, the discussion will focus on the conclusions and recommendations directed to the EAPA-SA Board and its members regarding the revision of and compliance with the EAPA-SA standards. Lastly, the researcher will comment on the achievement of goals and objectives of this study which were to explore whether or not management and administration standards are applied in practice as well as to identify operational challenges in adhering to the Management and Administration Standard of EAPA-SA, (Standards Committee of EAPA-SA, 2010).

4.2 Demographics

4.2.1 Key findings on demographics

From the analysed data, it is evident that majority of respondents are females working as EAP practitioners and professionals in the public sector, with a service period of 5 to 20 years. The job content reflected that a vast number of EAPA-SA members are appointed as employee assistance professionals and employee health and wellness coordinators and managers responsible for HIV and EA programmes. Some are responsible for offering brief trauma and counselling services, as well as consulting/lecturing in EAP, OHS, and HIV management. It can therefore be concluded that EAPA-SA members have the required experience and are correctly placed in the relevant units to render EHWP services. These positive findings affirm that employees in both the public and private sectors are receiving quality EAP services as prescribed by Standards Committee EAPA-SA, (2010:9). These quality services are essential and enable staff to gain experience and skills in order to maintain the highest level of professionalism.

4.2.2 Conclusions on demographics

EAPA-SA has more female than male members and majority of these members are employed in the public sector rendering employee assistance and health and wellness services. This finding reflects a shortage of male EAP practitioners which might impact negatively on service delivery.

4.2.3 Recommendations on demographics

It is recommended that the EAPA-SA liaise with stakeholders such as the Departments of Basic Education and Higher Education to market the EAP during career drives and to encourage males to pursue a career in the EAP with the aim of achieving gender balance to accommodate employees who have preferences for counselling services.

4.3 EAPA SA Standards document

4.3.1 Key findings on the EAPA-SA Standards document

Analysed data reflected that majority of EAPA-SA members are aware of the Standards document and reference to it is made regularly by professionals with a service record of 5 to 15 years. Some respondents indicated that they are not aware of the Standards document or have no access to the document. Only a limited number do not make use of the Standards document for reasons varying from their having enough experience to practise without, or that the Standards document is outdated and needs to be reviewed.

4.3.2 Conclusions on the EAPA-SA Standards document

EAPA-SA members are aware of and refer to the Standards document on a regular basis. This demonstrates an achievement on the part of the EAPA-SA that its members have knowledge of the document. However, it is clear that those who do not make use of the document have valid reasons for not doing so.

4.3.3 Recommendations on the EAPA-SA Standards document

It is recommended that greater awareness of the Standards document be created and that newly appointed professionals undergo compulsory training. EAPA-SA should advocate for accredited undergraduate training of EAPs at tertiary institutions and that the Standards document is included as one of the modules. It is further recommended that the Standards document be reviewed and amended to include new developments in the EAP field and accessibility to the document be increased through various platforms.

4.4 Management and administration

4.4.1 Key findings on staffing

The acquired data reflected that most of the respondents have the requisite Bachelor's and/or master's degrees. Exposure to relevant literature from the standards committees of different countries such as EAPA-SA and UK-EAPA can only enhance the capabilities of EAP professionals. However, the EAP components are understaffed due to budget limitations and because EAP staff are not considered during the HR staffing process. The staffing guidelines are considered essential even though they are not implemented by a number of organisations; the reasons given are that they are not aware of these guidelines or not involved in the recruitment process. The ratio of EAP staff versus company employees seems to be inadequate; however, cultural diversity is recognised in organisations, mostly the public sector. It is essential that organisational profiling be conducted to determine cultural, disability, and geographical aspects to allow for proper and sufficient staffing in the organisation (Standards Committee of EAPA-SA, 2010:7).

4.4.2 Conclusions on staffing

Most EAP professionals have the requisite qualifications; however, there is insufficient staffing to adequately render EAP services, which is a critical factor in service delivery. Although they are not always implemented due to insufficient funds and a lack of management support, staffing guidelines are considered essential in order to capacitate the EAP component which is regarded as a valid support

function. Public sector EAP staffing is based on cultural and religious affiliation for reasonable accommodation.

4.4.3 Recommendations on staffing

It is recommended that EAPA-SA conducts a monitoring and evaluation process through the Department of Public Administration (DPSA) and relevant private organisations to ensure compliance with the staffing guidelines, with the aim of achieving the objective of sufficient staffing of the EAP section, to prevent burnout amongst professionals and to improve service delivery.

EAP managers should demonstrate the value of EAPs as a return on investment in their reports to management for buy-in and to motivate for sufficient budget allocation to capacitate the EAP component.

4.5 Professional consultation or supervision

4.5.1 Key findings on professional consultation or supervision

Majority of respondents do have access to monthly professional consultation with an in-house consultant. This is in line with the view of Bhoodram (2010:209) that consultation should be conducted on a regular basis to address therapeutic concerns and mentoring of the less experienced. However, the frequency of the consultation is still a concern, specifically for inexperienced staff that requires constant support and monitoring to practise in line with EAP standard guidelines and core technologies.

Other responses indicated that 42% of professionals do not undergo consultations due to budget constraints and employers not acknowledging the need for consultation. As reflected in some responses the profile structure creates a limitation for manager consultation in situations where a supervisor is a non-professional but is expected to manage and provide consultation to professionals. This non-compliance is a serious challenge considering the need for and importance of consultation and supervision for purposes of professional growth, clarifying roles and responsibilities, as well as reducing stress and burnout amongst professionals (Hawkins & Shoheit, 2006:57).

4.5.2 Conclusions on professional consultation and supervision

Supervision and consultation which provides monitoring and support to professionals are largely considered. Compliance is a positive step towards getting the necessary support to prevent stress and burnout amongst professionals as well as ethical violations, considering the sensitive nature of EAP services. Supervision of professionals by non-professionals poses a serious ethical concern in terms of confidentiality. Some EAPA-SA members also indicated budget constraints as a limitation to consultation.

4.5.3 Recommendations on professional consultation and supervision

Organisations should ensure that consultation is conducted through various means such as peer group supervision or EAP interdepartmental assistance when experiencing insufficient funds to obtain outside consultation. EAPA-SA chapter meetings could reserve sessions for case consultation in their meetings for support and to share best practices. The frequency of consultation should be increased to accommodate newly appointed staff. It will be beneficial to review organisational structures and ensure that EAP staff is qualified and supporting personnel experienced to carry out supervision and consultation, a requirement for professional and personal support as well as growth.

4.6 Professional development

4.6.1 Key findings on professional development

Amongst EAPA-SA members, Social Workers have been rated as the single largest professional group registered with a statutory body. Most of the respondents are responsible for payment of their own annual registrations fees since some employers are not prepared to assist financially. Registration with the statutory body is an essential requirement for the regulation of professional conduct to protect the employee and the profession; hence EAPA-SA members take responsibility to pay their own fees when the employer is unable to offer financial support. The responses reflect positive output on how members use different platforms such as conferences and chapter meetings for the professional development required for

empowerment, knowledge and skills, as well as personal care and growth. This is in line with the goals and objectives of Standards Committee of EAPA-SA, (2010:9), namely that professional development is crucial to enhance knowledge and skills of professionals in order to ensure delivery of quality services.

4.6.2 Conclusions on professional development

Majority of EAPA-SA members are registered as Social Workers with the relevant statutory bodies, but although only a few are not registered it remains a concern for ethical reasons since they deal with confidential issues affecting employees. Organisations fail to take financial responsibility for the statutory registration of members hence professionals pay their own annual fees. Members utilise the available platforms offered by the EAPA-SA for development purposes, although some have yet to attain postgraduate qualifications. This tendency is reflected in Table 7.

4.6.3 Recommendations on professional development

Organisations rendering EAP services need to monitor compliance with the registration policies of statutory councils as required by EAPA-SA standards, SACSSP, HPCSA and other statutory bodies and to provide financial support for the payment of annual fees. In order to elevate the EAP, EAPA-SA should cooperate with the Department of Higher Education and the relevant SETA to develop specific guidelines for the accreditation of the EAP qualification from the undergraduate level and for institutions to provide EAP-specific theory and practice. This initiative will decrease the notion that even lay people can perform EAP functions, and will provide a pool of appropriately qualified EAP professionals at entry level. EAPA-SA Board should recruit and encourage EAP professionals to become affiliated with these associations and to participate in Chapter meetings countrywide for developmental purposes and encourage them to study towards master's and doctoral degrees.

4.7 Confidentiality

4.7.1 Key findings on confidentiality

Majority of responses indicated that confidentiality is supported and promoted by both policy and operational guidelines, this is a positive reflection that the standard is widely considered. This corresponds with existing literature as cited by Manzini (2005:39) that “Maintenance of a sound EAP relationship based on confidentiality should be reflected in a policy document.” Storage of data under secured conditions with controlled access is essential to secure client confidentiality and responses were positive on that aspect.

Release of confidential information such as reports and referral letters for further intervention is applied correctly with written permission from the employee. In the case of reporting progress made in the utilisation of EAP services to the manager, written consent is not required from the employee. However, it is crucial that employees and supervisors be sensitised to the protection and release of information during referral and intake sessions (Richard, Emener&Hutchinson,2009:201).

4.7.2 Conclusion on confidentiality

Confidentiality is maintained through inclusion in both the operational plan and policy document, which is a good practice to promote credibility of the programme and improve service utilisation. Positive practice was reported regarding proper record maintenance in terms of data storage under secured conditions with controlled access to protect clients’ confidential information. Release of clients’ confidential information with or without written permission was also done in accordance with prescribed guidelines by the majority of respondents to protect the integrity of both the client and the profession. It can be concluded that the standard is upheld by the majority of respondents, with only a few having reported negatively on this aspect.

4.7.2 Recommendations regarding confidentiality

It is recommended that EAPA-SA Board – through, for example, chapter meetings – introduce monitoring and evaluation techniques in partnership with different

organisations to address non-compliance with regard to confidentiality and to ensure that the standard is implemented as set out in the prescribed guidelines.

4.8 Recordkeeping

4.8.1 Key findings on recordkeeping

Majority of respondents confirmed that both clinical and administrative data was kept for a minimum period of five years, with controlled access. This is a positive response supported by Standards Committee of EAPA-SA, (2010:10). Different authors such as the UK EAPA (2000:55) and the National Council of Social Service (2007:7) prescribed different lifecycles for data storage. Several authors share the same view that an adequate period of time and proper storage of data are crucial to assist in providing continued care, service improvement and when required by a court of law. Another identified challenge is when unauthorised managers require access to client files, which is regarded as a serious violation of the ethics as stated by EAPA-SA (2010:8) and UK-EAPA (2000:48), namely that the supervisor should have a minimum of five years' experience coupled with the recommended qualification and registration with a relevant statutory body and that he/she should abide by the code of conduct of such a statutory body.

4.8.2 Conclusions on recordkeeping

Proper record keeping is exercised by the respondents and this is a positive achievement for EAPA-SA that the standard is widely upheld. Non-professionals are not supposed to have access to confidential information since they are unauthorised and this is a violation of the code of conduct on the protection of confidentiality.

4.8.3 Recommendations on record keeping

EAP professionals have a responsibility to protect their clients as well as their careers, and it is recommended that any violation of confidentiality be reported to EAPA-SA Board as well as the relevant statutory body of the errant practitioner. EAPA-SA and the statutory body should consider platforms to address such malpractice within the organisation to prevent similar incidences which might have a

negative impact on the credibility of the EAP programme, the EAP professional's career, as well as the reputation of the organization.

4.9 Professional liability insurance

4.9.1 Key findings on professional liability insurance

It was identified that majority of respondents do not have liability insurance and this is a concern since the professional and the organisation might be at risk of litigation. Half of the respondents (50%) indicated that their employers are responsible for payment of their registration fees. Should the employer not take responsibility for payment of the insurance, it is the responsibility of the member to protect his/her own profession. Banks (2006:168) emphasised the need to have malpractice insurance since the EAP professional's activities, based on the sensitive nature of the work, expose professionals to ethical dilemmas such as a breach of confidentiality, treatment without proper consent and dishonesty extending to actions and decisions taken. Some members acknowledged the need for this insurance cover as well as the lack of information on how and where to obtain such insurance.

4.9.2 Conclusions on professional liability insurance

Of the whole EAPA-SA members do not make provision for coverage through professional liability insurance. Only a few respondents have their employees pay for their annual registration.

4.9.3 Recommendations on professional liability insurance

The researcher recommends that EAPA-SA apprise its members of the importance of liability insurance and to provide professionals with a list of reputable companies. This information may be shared via the EAPA-SA website, chapter meetings, annual conferences, and journals, to mention but a few. A monitoring process for compliance on liability insurance should also be introduced.

4.10 Ethics

4.10.1 Key findings on ethics

Majority of the members are trained in upholding the principles pertaining to ethics and have knowledge of the contents regarding the ethics relevant to the EAP profession. This is positive feedback and an achievement for EAPA-SA. There is acknowledgement of unethical behaviour in the field of practice where non-professionals practise an EAP and where some supervisors demand access to clients' confidential files without the required authorisation. This is in violation of the regulations of statutory councils such as SACSSP (2011:12) and Standards Committee of EAPA-SA (2010:11), both of which maintain that adherence should be a key factor in the code of ethics document for guiding members as well as non-members on the promotion of ethical behaviour with a view to protecting the client, the organisation as well as the profession as a whole.

4.10.2 Conclusions on ethics

It is concluded that majority of members are trained and knowledgeable about the code of conduct of EAPA-SA. A violation of the code of conduct pertains to unauthorised practice and access to confidential information. Such violation is viewed as a serious breach of the codes of conduct of different professional bodies and might lead to litigation should clients come to realise that their confidential information is not well managed.

4.10.3 Recommendations on ethics

It is recommended that the EAPA-SA empower and support its members to report to management of their organisations any violation of ethics by managers demanding access to confidential information as well as the implications thereof based on organisational policies and operational plans. At times professionals experience challenges to prevent and report this unauthorised practice and access due to protocol and fear of victimization. A recommendation is made to EAPA-SA members to report malpractice to EAPA-SA Board as well as the relevant statutory body for

intervention to address such incidences which may result in professionals facing litigation from clients due to failure to protect confidential information.

4.11 Concluding summary

The goal of this research study was to benchmark the nature of administration and management of the EAP as applied in South Africa against EAPA-SA standards. In an attempt to improve EAP services in organisations, the study endeavoured to explore whether or not the management and administration standard was adequately applied in practice to promote efficiency in assisting clients to resolve problems, in order to attain maximum performance.

In pursuit of the goal, the following objectives were formulated:

- To conceptualise management and administration as an EAP standard.
- To explore the practice of the following sub-standards in order to benchmark them against EAPA-SA standards:
 - Staffing.
 - EAP professional consultation or supervision.
 - Professional development.
 - Confidentiality.
 - Recordkeeping.
 - Ethics.
 - Professional liability and insurance.
- To identify operational challenges in adhering to the management and administration standard.

From the literature review, data analysis, key findings and conclusions it is evident that the research study was successful and the goals and objectives achieved. The study explored the practices and it was identified that EAPA-SA members are knowledgeable about the management and administration standard and its contents.

A positive finding from the study was that a vast number of professionals are qualified, are registered with the relevant statutory bodies, pay their annual fees and regularly attend professional development activities. Guidelines for the

release of confidential information and proper records management are also adhered to, which is regarded as good practice.

Operational challenges were identified in terms of insufficient staffing of the EAP components and staffing guidelines being ignored when staffing the unit. Other identified challenges are inadequate consultation and supervision, non-compliance with confidentiality standards where non-professional personnel render EAP services and have unauthorised access to confidential information. Majority of EAPA-SA members do not possess professional indemnity insurance, which can be equated with serious malpractice.

In order to address identified challenges, the following recommendations are suggested:

- That EAPA-SA consider vigorous marketing to create awareness amongst its members, introduce monitoring and evaluation measures to ensure compliance, as well as consider accreditation of the EAP training programme at entry level to ensure a pool of adequately trained professionals.
- That the EAPA-SA members have a clear understanding of the management and administration standard, engage more actively in professional development activities identify and report any acts of misconduct that might jeopardise the clients, the profession and the organization.

REFERENCES

- Anderson, K.S. & Handelsman, .M.M. 2010. *Ethics for Psychotherapists and Counsellors: A Proactive Approach*. Library of Congress: Cataloguing-in-Publication Data.
- Babbie, E. 2004. *The Practice of Social Research*. 10th edition. Belmont: Wadsworth /Thomson Learning
- Basic Conditions of Employment Act, 75 of 1997 (Government Gazette 15999. Pretoria: Government Printer.)
- Banks, S. 2006. *Ethics and Values in Social Work*. 3rd edition. New York: Palgrave Macmillan.
- Bechet, T.P. 2008. *Strategic Staffing: A comprehensive system for the Effective Workforce Planning*. New York: American Management Association.
- Bhoodram, P.A. 2010. *An evaluation of the Employee Assistance Programme in the Department of Correctional Services benchmarked against the standards of the Employee Assistance Association of South Africa*. Pretoria: University of Pretoria (DPhil thesis).
- Bodek, H. 2010. *Clinical Documentation and Record keeping*. New York: Society for Clinical Social Work.
- Canadian Association of Social Workers 2005. *Code of Ethics*. Canada [sn].
- Chabeli, T. 2007. Perceptions of employees regarding the utilization of the in-house Employee Assistance Programme model in North West Department of Education. Pretoria: University of Pretoria (MA dissertation).
- Coulshed, V. & Mullender, A. 2001. *Management in Social Work*. New York: Palgrave Macmillan.
- Couzins, M. 2005. Expert's view: Anna Oldman on implementing an EAP. *Personnel Today*. Available: <http://0-ebcohost.com.innopac.up.ac.za>. Accessed 2014/03/12.

Daniels, A. & Teems, L. 2008. Crossing the Quality Chasm: Opportunities for the Employee Assistance Program Field. *Employee Assistance Quarterly*, 19(3):27-43.

Delport, C.S.L. & Roestenburg, W.J.H. 2011. Quantitative Data-Collection Methods: Questionnaires, Checklists, Structured Observation And Structured Interview Schedules. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. *Research at Grass-Roots: For the Social Sciences and Human Service Professions*. Pretoria: Van Schaik.

De Vos, A., Strydom, H., Fouché, C., & Delport, C. 2011. *Research at Grassroots*. 4th edition. Pretoria: Van Schaik.

Denhardt, R.B., Denhardt, V.J., & Blanc, A.T. 2009. *Public Administration. An Action Orientation*. Australia: Wadsworth Cengage Learning.

Department of Public Service and Administration 2008. Employee Health and Wellness Strategic Framework for the Public Service. Final draft, November 2008.

Dolgoff, R., Loewenberg F.M., & Harrington, M. 2005. *Ethical Decisions for Social Work Practice*. Canada: Brooks/Cole/Thomson Learning.

Electronic Communication and Transaction Act, 25 of 2002. (*Government Gazette* 1046. Pretoria: Government Printer).

Employee Assistance Professional Association. 2000. Standards and Professional Guidelines for Employee Assistance Programs. Arlington: Employee Assistance Professionals Association.

Employee Assistance Professionals Association of South Africa. 2011. Constitution of the Employee Assistance Professional Association of South Africa . Pretoria: EAPA South Africa Branch.

Govender, T. 2009. *A Critical Analysis of the Prevalence and Nature of Employee Assistance Programmes in the Eastern Cape Buffalo City Municipality*. Pretoria: University of Pretoria (MA dissertation).

Gray, M. & Webb, S.A. 2010. *Ethics and value perspectives in Social Work*. New York: Palgrave Macmillan.

Hawkins, P. & Shohet, R. 2006. *Supervision in the helping professions*. England: British Library Cataloguing-in-Publication Data.

Health and Social Care Information Centre. 2013. *A Guide to Confidentiality in Health and Social Care: Treating Confidential Information with Respect*. United Kingdom. [sn].

Hoke, G. 2011. Recorded Lifecycle. *Information Management Journal*. Available at: <http://0-webebcobhost.com.innopac.up.ac.za>. Accessed 2014/03/25.

Hughes, M. & Wearing, M. 2013. *Organizations and Management in Social Work*. London: Sage.

Hugman, R. 2003. Professional Values and Ethics in Social Work: Reconsidering Postmodernism? *British Journal of Social Work* (33):1025-1041.

Jackson, S.L. 2008. *Research Methods: A Modular Approach*. USA: Thomson Wadsworth.

Kadushin, A. & Harkness, D. 2002. *Supervision in Social Work*. 4th edition. New York: Columbia University.

Karson, M. 2006. *Using Early Memories In Psychotherapy: Roadmaps To Presenting Problems And Treatment Impasses*. United Kingdom: Library of Congress Cataloguing-in-Publication Data.

Kearns, P. 2000. *Maximise Your ROI Training. Delivering Measurable Added Value Through Employee Development*. United Kingdom: Prentice Hall.

Kumar, R. 2005. *Research Methodology: A Step-By-Step Guide for Beginners*. 2nd edition. London: Sage

Leedy, P.D. & Ormond, J.E. 2005. *Practical Research Planning and Design*. New Jersey: Pearson Education.

Lilly, A. 2007. Supporting Caregivers Returning To Work Following Humanitarian Missions. *Journal of Employee Assistance*, 37(1)18.

Luepker, E.T. 2003. *Record Keeping in Psychotherapy & Counselling. Protecting Confidentiality and the Professional Relationship*. New York: Brunner-Routledge.

Lussier, N.R. 2013. *Human Resource Management*. New York: Sage.

Mahlahlane, C.H. 2003. The factors influencing supervisory referrals to the Employee Assistance Programme in Telkom area. Pretoria: University of Pretoria. (MA dissertation).

Maiden, R.P. 1992. *Employee Assistance Programs in South Africa*. New York: The Haworth Press.

Maiden, R.P. 2003. *Accreditation of Employee Assistance Programs*. London: Haworth.

Manzini, K. M. 2005. *Factors that Hinder the Utilization of the Employee Assistance Programme in the Department of Labour*. Pretoria: University of Pretoria (MA dissertation).

Mayne, M. 2004. Ensuring Executive Confidentiality. *Journal of Employee Assistance*, 33(3):13-15.

Mboniswa, B. 2005. Perspectives of Social Workers regarding Supervision in The Department of Social Development, Johannesburg. *Pretoria: University of Pretoria* (MA dissertation).

Midgley, J & Cowley, A. 2010. *Social Development Theories and Skills for Developmental Work*. New York: Oxford University Press.

Mnisi, M.A. 2005. The evaluation of the Employee Assistance Programme's internal marketing strategy in the National Prosecuting Authority. Pretoria: University of Pretoria

Mulvihill, M. 2003. *The definition and core practices of wellness*, *Journal of Employee Assistance*, 33(3): 13-15.

Munson, C.E. 2002. *Handbook of Clinical Social Work Supervision*. Binghamton: Haworth Press.

National Council of Social Service (NCSS) 2007. *Documentation and Record Keeping: A Guide for Service Providers*. Singapore: National Council of Social Services.

Nicholson, S.K. 2011.*Electronic Media Records. P.T.in Motion*. Available: <http://0-web.ebcohost.com.innopac.up.ac.za>. Accessed 2014/03/13.

Parrish, M. 2010. *Social Work Perspectives on Human Behaviour*. United Kingdom: Library of Congress Cataloguing-in-Publication Data.

Peters, B.G. & Pierre, J. 2007.*Handbook of Public Administration*. London: Sage.

Promotion of Access to Information Act, 2 of 2000. (*Government Gazette* 2085. Pretoria: Government Printer).

Protection of Personal Information Act, 4 of 2013 (Published in the *Government Gazette*, 37067 Pretoria: Government Printer).

Punch, K.F. 2005.*Introduction to Social Research: Quantitative and Qualitative Approaches*. 2nd edition. London: Sage.

Reamer, F.G. 2013.*Social Work Values and Ethics*. 4th edition. New York: Columbia University Press.

Reardon, C. 2010. A Malpractice Insurance Primer. *Journal of Social Work*, 10(5):22.

Richard, M.A., Emener, W.G., & Hutchinson, W.S. 2009. *Employee Assistance Programme: Wellness /Enhancement Programming*. 3rd edition. Illinois: Charles C Thomas .

Ritzer, G. & Goodman, J.G. 2004.*Modern Sociological Theory*. New York: Library of Congress Cataloguing-in-Publication Data.

Robbins, P.R. & Decenzo, D.A. 2004.*Supervision Today*. New Jersey: Pearson, Prentice Hall.

Seel, R. 2000. Culture and Complexity: New Insights on Organisation Change. *Organizations and People*, 7(2):2-9.

Sharar, D.A. White, W. & Funk, F.R. 2002. Business Ethics and Employee Assistance: A National Survey of Issues and Challenges. *Employee Assistance Quarterly*, 18(2): 39-59.

South African Council for Social Services Profession (2010):2(2). Pretoria.

South African Council for Social Services Profession (2011):1(1). Pretoria.

Standards Committee of EAPA-SA. 2010. Standards for Employee Assistance Programmes in South Africa. Pretoria: EAPA South Africa Branch.

Strydom, H. 2005. Ethical Aspects of Research in the Social Sciences and Human Profession. In De Vos, A.S., Strydom, H., Fouché, C.B. & Delport, C.S.L. (ed). *Research at Grassroots for the Social Sciences and Human Science Professions*. 3rd edition. Pretoria: Van Schaik.

Terre Blanche, M. Durrheim, K. & Painter, D. (eds.) 2006. *Research in Practice: Applied Methods for the Social Sciences*. 2nd edition. Cape Town: University of Cape Town.

United Kingdom Employee Assistance Programme Association (UK EAPA) 2000. *Standards of Practice and Professional Guidelines*. United Kingdom: UK EAPA.

Vorster, C. 2003. *General Systems Theory and Psychotherapy: Beyond Post-Modernism*. Pretoria: Satori.

Weinbach, W. & Taylor, L.M. 2015. *The Social Worker as a Manager*. Pearson: South Carolina Education.

Weiss, R.M. 2003. Effects of Program Characteristics on EAP Utilization. *Employee Assistance Quarterly*, 18(3):61-70.

Winegar, N. 2002. *Employee Assistance Programme in Managed Care*. New York: Best Business Books.

Wireman, N. 2004. *Employee Assistance Programme in Managed Care*. New York: Library of Congress Cataloguing-in-Publication Data.

Wright, B.T. 2002. Privacy is Key to EAPs. *Credit Union Magazine*, 68(1):54.

Youngberg, B.J. 2007. Litigation Stress Support Groups for Health Care Professionals: Risk Manager's Role. *Journal of Healthcare Risk Management*

Available at: <http://www.ashrm.org>. Accessed 2014/03/13.

ANNEXURES

Annexure 1: Permission letter from EAPA-SA Board

The Employee Assistance Professionals Association of South Africa

PO Box 11166; Hatfield, Pretoria, 0028
admin@eapasa.co.za
www.eapasa.co.za



18 July 2013

Supervisor: Group Research Project
Department of Social Work and Criminology
University of Pretoria
PRETORIA
0002

Dear Prof Terblanche

PERMISSION FOR GROUP RESEARCH PROJECT: EAP MASTERS STUDENTS

I wish to refer to your letter requiring authorisation by the EAPA-SA Board for the group research project on the EAPA-SA EAP Standards – dated 21 May 2013.

The EAPA-SA Board hereby grants permission to the following students, registered for either of the following programmes at the Department of Social Work and Criminology, University of Pretoria:

MSW (EAP) or M Soc Sci (EAP):

- A Lefakane
- M Kubheka
- E Monama
- H Caleni
- M Mogashoa.

Permission is granted based on the information as was provided in your letter, regarding the title, goal and objectives of the group study – although it is understood that each student's study will be acknowledged and forms part of his/her individual academic requirements.

Permission also provides for the practical assistance from the administrative officer of the Board, regarding:

- assistance in the process of adding the link to the EAPA-SA website and communication with members electronically;
- EAPA-SA webmaster, to upload the electronic version of the questionnaire to an identified website approved for purposes of the envisaged survey; and
- Practical and logistical assistance during the EAPA-SA Conference in September 2013 for delegates to complete the questionnaire.

No costs will be covered by the EAPA-SA Board, unless such costs had been approved prior to the actual costs being paid. As such any **costs** incurred by this request, will be paid by the students or another approved source.

Possible benefits for EAPA-SA as a voluntary association, can be summarised as follows:

- results will provide a proper indication of the current status in the application of EAPA-SA Standards in the field of the EAP
- benchmarking will be possible between best practices and the prescribed EAPA-SA standards, which could result in a more focused application of the EAPA-SA Core Technologies.
- Results could be used in the revision of the 2010-version of the EAPA-SA EAP-Standards.

It is also confirmed that the respondents approached for data, will all be EAP professionals registered with EAPA-SA in the category 'Individual member' and will participate in the study in the mentioned capacity. As such no additional permission needs to be obtained from employers of individual EAP professionals – as data will be based on the EAPA-SA membership and the application of the EAPA-SA EAP standards.

As such a copy of the final report/s is required.



Tshifhiwa Mamaila
EAPA-SA President

EAPA-SA Board: T Mamaila (President) Dr P Bhoodram N Bilili M Borchers T Chabalala (Vice-President)
P Egan T Govender I Koto J Makasane N Mokubedi Z Mxalisa R Vandayar

Administrative Officer: R Selolo

Annexure 2: Ethical clearance letter from the University of Pretoria



UNIVERSITEIT VAN PRETORIA
UNIVERSITY OF PRETORIA
YUNIBESITHI YA PRETORIA

Faculty of Humanities
Research Ethics Committee

3 July 2014

Dear Prof Lombard

Project: Management and administration practice standards in South African Employee Assistance Programmes
Researcher: EM Monama
Supervisor: Prof LS Terblanche
Department: Social Work and Criminology
Reference number: 12233464

Thank you for the application that was submitted for ethical consideration.

I am pleased to inform you that the above application was **approved** by the **Research Ethics Committee** on 3 July 2014. Data collection may therefore commence.

Please note that this approval is based on the assumption that the research will be carried out along the lines laid out in the proposal. Should the actual research depart significantly from the proposed research, it will be necessary to apply for a new research approval and ethical clearance.

The Committee requests you to convey this approval to the researcher.

We wish you success with the project.

Sincerely

Prof Karen Harris
Acting Chair: Postgraduate Committee & Research Ethics Committee
Faculty of Humanities
UNIVERSITY OF PRETORIA
e-mail:Karen.harris@up.ac.za

Research Ethics Committee Members: Dr L Blokland; Prof Prof M-H Coetzee; Dr JEH Grobler; Prof KL Harris (Acting Chair); Ms H Klopper; Dr C Panebianco-Warrens; Dr Charles Puttergill; Prof GM Spies; Dr Y Spies; Prof E Taljard; Dr P Wood

Annexure 3: Informed Consent form

▼ Informed consent form Block Options ▼

Q1.1

SURVEY ON EAP STANDARDS

You are invited to participate in the survey following this introduction and informed consent letter. **It will take between 40 and 45 minutes to complete the questionnaire.** Completed responses are automatically saved and allow any participant to proceed at a later stage with the total completion, without losing information already provided. **Please do not complete the questionnaire more than once.**

The goal of the project is to explore, through benchmarking against EAPA-SA standards, the practices of EAP professionals with regard to different EAP standards.

This survey is part of a group research project launched by four students, registered for a master's programme in EAPs offered by the Department of Social Work and Criminology at the University of Pretoria. The supervisor of these four students, is **Prof Lourie Terblanche**, previously President of EAPA-SA and the programme manager of the mentioned master's programme. **The students involved are: Ms Andiswa Lefakane, Mr Moses Kubheka, Ms Hlobokazi Caleni and Ms Ephenia Monama.**

This research project is carried out in close co-operation with the EAPA-SA Board. Written permission had been obtained from the President of EAPA-SA in order to request all registered individual members of EAPA-SA to participate in this survey in their own capacity as EAP practitioners.

In order to participate in the survey, every participating member of EAPA-SA is required to give informed consent – which can be done by clicking on the relevant button at the end of this page.

Participation in this project is subject to valid registration as an individual member of EAPA-SA, which is confirmed by the fact that you have been approached to participate. However, participation is voluntary and anonymous and responses can in no way be linked to the respondent or his/her employer. Data will at all times be handled in a confidential manner.

The researchers wish to thank you for your time and valuable input towards improvement of the EAP practice in South Africa.

I disagree to participate in the survey

I agree to participate in the survey

< >

If I disagree to participate I... Is Selected, Then Skip To End of Survey

Annexure 4: Questionnaire

▼ Informed consent form Block Options ▼

Q1.1

SURVEY ON EAP STANDARDS

You are invited to participate in the survey following this introduction and informed consent letter. **It will take between 40 and 45 minutes to complete the questionnaire.** Completed responses are automatically saved and allow any participant to proceed at a later stage with the total completion, without losing information already provided. **Please do not complete the questionnaire more than once.**

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In order to participate in the survey, every participating member of EAPA-SA is required to give informed consent – which can be done by clicking on the relevant button at the end of this page.

Participation in this project is subject to valid registration as an individual member of EAPA-SA, which is confirmed by the fact that you have been approached to participate. However, participation is voluntary and anonymous and responses can in no way be linked to the respondent or his/her employer. Data will at all times be handled in a confidential manner.

The researchers wish to thank you for your time and valuable input towards improvement of the EAP practice in South Africa.

I disagree to participate in the survey

I agree to participate in the survey

< _____ >

If I disagree to participate I... Is Selected, Then Skip To End of Survey

▼ Demographic Details Block Options ▼

Q2.1

What is your gender?

Male Female

< _____ >

Q2.2

How long have you been working as a professional person?

0 - 5 years 6 - 10 years 11 - 15 years 16 - 20 years more than 20 years

< _____ >

Q2.3

How long have you been working as an EAP practitioner/professional?

0 - 5 years 6 - 10 years 11 - 15 years 16 - 20 years more than 20 years

< _____ >

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Q2.4 Indicate the sector where you are currently employed

Public sector

Private sector

Private practice full-time

Employed by EAP Service provider

Public sector with part-time private practice

Private sector with part-time private practice

Other (please specify)

Q2.5 If you are currently not involved in EAP practice, shortly explain your job contents and/or job title.

General information Block Options

Q3.1 Are you aware of the EAPA-SA Standards document?

Yes No

If No is Selected, Then Skip To End of Block

Q3.2 Indicate how frequent you make use of the EAPA-SA Standards document.

Never Daily Weekly Monthly Quarterly

Q3.3 If you do not consult the EAPA-SA Standards document, please select most relevant reason

I was not aware of the EAPA-SA Standards document

I do not have access to the Standards document

The Standards document is impractical

Other, add comments

Q3.4 Add general comments regarding the utilisation of the EAPA-SA Standards document, if needed

EAP Programme Design: Advisory-EAP-WebPhase 02a (11/2015) (6 Questions) Block Options

Programme Design: Organisational Profiling (3 Questions) Block Options

Programme design: Service delivery models and processes (19 Questions) Block Options

Programme design: Costing models (4 Questions) to show questions Block Options

Implementation of the EAP: Policy (6 Questions) to show questions Block Options

Implementation of the EAP: Operational guidelines (4 Questions) Block Options

Implementation: Implementation Plan (5 Questions) to show questions Block Options

Management and administration of the EAP: Staffing Block Options

Q11.1
Select your highest qualification

Matric

Diploma

Bachelor's degree: 3 year

Bachelor's degree: 4 year

Master's degree

Master's degree in EAPs

Doctoral degree

Other, please specify

Q11.2
Is the number of EAP staff members sufficient to render services as expected?

Yes

No

Q11.3
Do you find the guidelines provided in the EAPA-SA Standards document on the ratio for EAP staff/employees useful?

Yes

No

Never applied the mentioned guidelines

Was not aware of the mentioned guidelines

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Q11.4
Were these staffing guidelines applied in the appointment of EAP staff?

Yes
 No

< _____ >

If Yes is Selected, Then Skip To Please indicate your current EAP Staf...

Q11.5
If no, please indicate the reasons. You may select more than one option

Unaware of these staffing guidelines
 Not important
 Not practical
 Other, please specify

< _____ >

Q11.6
Please indicate your current EAP Staff/employees ratio. Ensure to comment on the model that you apply and core functions performed by EAP staff.

< _____ >

Q11.7
Is cultural diversity considered in your EAP staffing component?

Yes No

< _____ >

Q11.8
Add comments regarding Staffing, if needed

< _____ >

Management and administration: EAP professional consultation and supervision Block Options

Q12.1
Do you have access to an experienced EAP professional for purposes of consultation?

Yes No

< _____ >

If No is Selected, Then Skip To If you do not have access to a profes...

Q12.2 If 'yes', how often do you consult with this experienced consultant?

Never

Never - no need

Less than once a month

Once a month

2 - 3 times a month

Once a week

2 - 3 times a week

Daily

Q12.3 Is the mentioned consultant employed internal to your organisation?

Yes

No

Page Break

Q12.4 If you do not have access to a professional consultant, please indicate reasons. You may select more than one option.

Limited budget for the EAP

Employer does not acknowledge the need for a consultant

Other, please specify

Q12.5 If needed, add comments regarding EAP Professional consultation and supervision.

Page Break

Management and administration Professional development Block Options

Q13.1 Are you registered with any relevant statutory body?

Yes

No

If No is Selected, Then Skip To Add comments regarding Professional d...

Q13.2
If registered with a statutory body, indicate who is responsible for the payment of annual registration fees

Self
 Employer
 Sponsor
 Other, please comment

Q13.3
If registered, stipulate the name of the statutory body

SACSSP
 HPCSA - as psychologist
 HPCSA - as psychometrist
 HPCSA - as a medical doctor
 SA Nursing Council
 Other, please specify

Q13.4
Indicate all actions regarding your own professional development, during the past 12 months. (You may select more than one).

Obtained an additional relevant qualification
 Attended at least one conference
 Attended at least one professional development meeting
 Attended at least one EAPA-SA Chapter meeting
 Read at least one scientific journal article on EAP-related matters
 Other activities - please specify

Q13.5
Add comments regarding Professional development, if needed

Page Break

Management and administration: Confidentiality Block Options

Q14.1
Does your EAP policy promote Confidentiality?

Yes No Not sure No Policy in existence

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Q14.2 Does your **Operational guidelines** promote confidentiality?

Yes No Not sure No operational guidelines in existence

Q14.3 Confidential information is only released with written permission from the employee. Do you agree?

Yes No Not sure

Q14.4 Confidential information without written permission is released to the employer, in terms of the following:

	Yes	No	Not sure
Confirmation of attendance/non-attendance of counselling sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confirmation of cooperation/non-cooperation with the treatment plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confirmation of progress/lack of progress	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Q14.5 Guidelines regarding release of contents do exist in the Operational Guidelines of the EAP

Yes No Not sure

Q14.6 Add comments regarding **confidentiality**, if needed

Page Break

Management and Administration: Record keeping

Block Options

Q15.1 Indicate if the following EAP-related information is recorded. You may select more than one option.

- Administrative information
- Document of meetings
- Clinical information
- Corporate client information
- Evaluation data
- Marketing and promotional material
- Training material
- Progress reports on projects
- Other, please specify

Q15.2 Is clinical information kept under secured conditions, i.e. controlled access?

Yes No

Q15.3 Stipulate period for storage of data

One year
 Two years
 Three years
 Four years
 Five years
 Other, please specify

Q15.4 Add comments regarding Record keeping, if needed

Page Break

Management and administration: Professional liability insurance Block Options

Q16.1 Do you have mal-practice insurance?

Yes No

If No is Selected, Then Skip To If you do not have mal-practice insur...

Q16.2 If 'yes', who pays the premiums?

Self
 Employer
 EAP service provider
 Other, please specify

Q16.3

If you do **not** have mal-practice insurance, indicate the reason. You may select more than one option.

- Do not see the need for insurance
- Do not have the money to pay premiums
- Employer refuses to pay the premiums
- Other, please specify

< >

Q16.4

Add comments regarding mal-practice insurance, if needed

< >

Page Break

Management and Administration: Ethics Block Options

Q17.1

Have you been trained on professional ethics?

Yes No

< >

Q17.2

Are you familiar with the contents of the EAPA-SA Code of Ethics?

Yes No

< >

Q17.3

Is a Code of Ethics relevant for the EAP?

Yes No

< >

Q17.4

Are you aware of any unethical behaviour by EAP professionals in the EAP practice?

Yes No

< >

Q17.5

Add comments on Ethics, if needed

< >

Page Break

EAP Clinical services (19 Questions) Block Options

Non-clinical services: Organisational consultation (5 Questions)	Click to show questions	Block Options
Non-clinical services: EAP training (9 Questions)	Click to show questions	Block Options
Non-clinical services: Marketing (5 Questions)	Click to show questions	Block Options
Preventative services (3 Questions)	Click to show questions	Block Options
EAP Networking (5 Questions)	Click to show questions	Block Options
Monitoring and Evaluation in the EAP (5 Questions)	Click to show questions	Block Options
General Comments		Block Options
Q25.1	Add comments regarding any of the questions included in this questionnaire - if needed and if you have not done so as yet.	
	<input type="text"/>	
	< >	
Q25.2	Thank you for your time and effort in participating in this important survey!	
	< >	

Annexure 5: Declaration form for storage of data



UNIVERSITEIT VAN PRETORIA
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YUNIBESITHI YA PRETORIA
FACULTY OF HUMANITIES
RESEARCH PROPOSAL AND ETHICS COMMITTEE

Declaration for the storage of research data and/or documents

I/ We, the principal researcher(s) EPHENIA N MONAMA

and supervisor(s) Prof L S Terblanche

of the following study, titled Management and administration
Practice Standards in South African EAP

will be storing all the research data and/or documents referring to the above-mentioned study in the following department:

Social Work and Criminology

We understand that the storage of the mentioned data and/or documents must be maintained for a minimum of 15 years from the commencement of this study.

Start date of study: February 2012

Anticipated end date of study: August 2015

Year until which data will be stored: 2030

Name of Principal Researcher(s)	Signature	Date
Ephenia Monama	<i>Ephenia Monama</i>	09 October 2015
Name of Supervisor(s)	Signature	Date
Prof L S Terblanche		
Name of Head of Department	Signature	Date
Prof A Lombard		