

A Needs Assessment for an Employee Assistance Programme in the Jubilee Community Hospital

By

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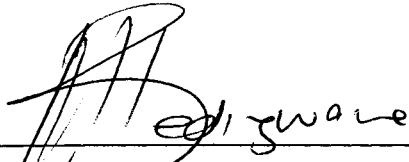
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DECEMBER 2000

DECLARATION

I, **MIGAL BALESENG LEDINGWANE** declare that the study on “ the need for an employee assistance programme in the jubilee community hospital” was concluded by me. I also compiled this research report and all the sources used or cited are acknowledged by means of a complete reference:



MIGAL BALESENG LEDINGWANE

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ABSTRACT

This actually an investigation into the need for an Employee Assistance programme in the Jubilee Community Hospital. This programme is said to be effective in dealing with the employee's problems for it focuses on addressing all the social problems, which influence job performance. The study was conducted within the framework of a survey design. Three categories of questionnaires were designed and handed out to employees, supervisors and members of the management to complete. From their response it was clear that employees at this particular hospital experience problems which influence their job performance and are being left unattended. The study shows that there is no Employee Assistance Programme in this hospital. Most of the troubled employees sought help privately from the neighbouring social workers. This method of seeking help is not convenient to the employees because it is not accessible and it is time consuming as they need to take a day's leave to attend to their problems.

It is evident that there is a need for a qualified employee assistance practitioner in this hospital who will attend mainly to the employees' problems, who will be trained to do so. A formal policy with regard to EAP is also essential in this hospital.

KEY CONCEPTS / SLEUTELBEGRIPE

Organisation	–	Organisasie
Productivity	–	Produktiwiteit
Programme	–	Program
Policy	–	Beleid
Work Performance	–	Werksprestasie
Social problems	–	Maatskaplike probleem
Employer	–	Werkgewer
Employee	–	Werknemer
Troubled Employee	–	Probleem Werknemer
Employee Assistance Programme	–	Werknemerhulpprogram

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CHAPTER ONE

ORIENTATION TO THE STUDY ON AN EMPLOYEE ASSISTANCE PROGRAMME

1. TITLE OF THE STUDY: A NEEDS ASSESSMENT FOR AN EMPLOYEE ASSISTANCE PROGRAMME IN THE JUBILEE COMMUNITY HOSPITAL

1.1. INTRODUCTION

This study discusses the survey conducted at Jubilee Community Hospital in 1999. It also explains what prompted the researcher to study the concept of an Employee Assistance Programme (EAP), the goals and objectives of the study and the manner in which data was gathered and analysed.

1.2. MOTIVATION FOR THE CHOICE OF THE SUBJECT

Organisations are facing serious challenges this days, they have to account for an employees actions, new contracts are emerging between employees, employers and the unions, the restructuring process has a serious impact on them, the issues of downsizing, repositioning, and redeployment and many more are becoming a common practice to change. According to Hutchison in Dickman, Challenger and Emener (1988:67) the biggest Motivation for an early Employee Assistance Programme (EAP) is the need for organisation change, therefore some aspects of the organisational structure or behavior need to be changed. These aspects include, for an example the manner which the organisation addresses the employees' problems such as family, marital dispute, alcohol and drug abuse, absenteeism, and mental health problems of employees.

Social problems in an organisation result in a great loss for that particular organisation. According to Sonnensturhl and Trice (1986:18) every job based programme requires some method of providing help to those employees who wish it. The fact that employees' problems originate both at the workplace and within their families, shows the desperate need for them to be attended to. The employees cannot leave their problems at home when coming to work, and this is costly for an organisation in terms of production and money. A troubled employee in most instances is ineffective in his job performance.

There are quite a number of positive rewards when implementing an Employee Assistance Programme (EAP). Firstly it helps the organisation to retain productive employees. Secondly it reduces the responsibility of supervisory, managerial and union officials attend to the employees' social problems. According to Chiabotta (1987:10) it foster employees' well-being, thus maintaining acceptable standards of job performance and reinforcing job security.

The researcher was motivated in this choice of study by the large number of employees who absent themselves from work especially on Mondays, reporting late at work, whereas others often report to the social workers' offices with alcohol and drug abuse problems, marital, family, financial, and work related problems to seek help. The researcher was also motivated by the high rate of dismissal of valuable employees from the organisation annually.

1.3. **PROBLEM FORMULATION**

The Employee Assistance Programme (EAP) is still a new concept in South Africa and it is adopted and implemented by many companies who believe in the social functioning of the employees and in good productivity.

Landsman and Bulcolo (1987:37) concurred with this when they indicated that, in general, companies are concerned about maintaining and improving employees'

health for reasons that range from emphasizing on bottom-line economic consideration to viewing an EAP as a benefit which attracts good people, keeps them, and creates the image and reputation of the organisation as a company that cares about its people.

Some organisations have not yet realised the importance of putting an EAP in place, but this does not change the need for an EAP in such organisation.

The literature reviewed shows that EAPs in Hospitals are a relatively new concept and has not yet fully come of age. EAP has been accepted on a limited basis, only a few Hospitals have EAPs in place for its staff members.

Due to the high rate of Social problems prevailing in the Health Care setting and where the lives of many people are involved. The question in the Hospitals should no longer be “should we have an EAP” but rather be “what kind of an EAP should we provide?”

A survey was done by Byrne and Grissom cited in Deats, (1995:46) to assess the need for an Employee Assistance Programme. This survey was referred to as the Bina survey (Business and industry needs assessment). The Bina project director Meghan Byrne and principal investigator Grant Grissom, PHD, says their 174 question survey is the first valid self-report survey to estimate the prevalence of Alcohol and other drug (AOD) use among employees. The survey measures 12 wellness and high risk behaviours, including diet and nutrition, work stress, Alcohol and other drug (AOD) use, financial management, coping mechanisms, family satisfaction and depression. The aim of the survey was to measure AOD use among employees, thereby justifying the need for EAPs. Therefore 35 work organisations employing over 8-000 were surveyed. They represented a variety of industries including service, financial, health care and manufacturing. When Byrne analyzed the 7,885 valid employee surveys, the results showed that

- 11,5% to 12,5% were problems drinkers.
- 7,5% - 8.5% had used dagga (marijuana),
- 1% - 2% had used cocaine in the sixth month prior to the survey,
- 47,4% - experienced at least one of the five problems known to reduce productivity on the job,
- 22,6% - met the criteria for high job satisfaction,
- 1,5% - met the criteria for high impairment of work performance due to AOD use,
- 20,9% met criteria for high stress on the job,
- 17,9% met criteria for anxiety,
- 7,0% met criteria for high depression,
- 12,9% fell into two of the above categories,
- 3,9% fell into three of the categories,
- 0,8% fell into four of the categories,
- 0,1 % tested into all five categories.

The results show that there is a serious need for EAP in the organisations. The Jubilee Community Hospital has \pm 1254 staff members, amongst these \pm 800 experience personal problems, financial problems, family and marital problems, alcohol and other drug abuse and work related problems. In the past, when these troubled employees were referred to the chief social worker to seek help, they were given minimum attention, due to insufficient manpower. Presently they consult with the social workers in the subdistricts for help. This result in most of the employees problems remaining unattended to, therefore it leads to a high rate of absenteeism, late-coming, incomplete assignments, tardiness, and on-the-job accidents. No specific person was appointed to assist troubled employees and there is no formal policy for helping such employees to address their personal and work related problems, and this in itself forms the object of this study: “ The absence of Employee Assistance Programme services in the Jubilee Community

Hospital, leading to unattended social problems of employees, also affecting their families”. Focus will now be on the aim and objective of the study.

1.4. **AIM AND OBJECTIVES OF THE STUDY**

1.4.1. **Aim**

To determine whether there is a need for an Employee Assistance Programme in the Jubilee Community Hospital.

1.4.2. **Objective**

- To describe the nature and extent of social problems as experienced by the employees.
- To determine management’s awareness of social problems amongst the workforce.
- To determine to what extent social problems affecting productivity of employees are attended to by the employer.
- To assess the need for an Employee Assistance Programme in the Jubilee Community Hospital.

1.5. **QUESTION OF THE RESEARCH STUDY**

The hypothesis, problem statement, and the research question are important and indispensable tools of a scientific research. According to Kerlinger (1986 : 16) a problem is an interrogative sentence or statement asking what relation exists between two or more variables?. The answer is what is being sought in the research. The problem question of this study:- “Does failure to attend to the employees’ social problems prove the need for an EAP?”

The findings of this study, as outlined in Chapter 5 of this report, serve to respond to this question under the study.

1.6. RESEARCH METHODOLOGY

Research methodology is considered to be the philosophy of the research process (Bailey 1982: 32). This includes the assumptions and values that serve as a rationale for research and the standards or criteria which the researcher uses for interpreting data and reaching conclusions. The following aspects will be dealt with under the research methodology: the type of research procedure and strategy, the pilot study which comprises of literature study, pilot test of questionnaires, description of the research population, and the sampling method.

1.6.1. Type of Research

This is an applied research of quantitative nature for the research problem is based on the natural setting of the population, and there is no manipulation of any variables. This study attempts to determine the need for an Employee Assistance Programme in the Jubilee Community Hospital by measuring the extent to which social problems prevail and the manner in which employers attended to them. Furthermore this study follows through various steps of a research process as outlined by De Vos, Strydom, Fouche, Poggenpoel, and Schurink (1998:38), although the researcher relied more on the data collected from the respondents.

1.6.2. Research Design

The research design serves as a guideline for an investigation activity. Two types of Research Methodology were identified by several authors, which is Qualitative and Quantitative Research Methodologies. They often represent different ways of approaching a research project. The two designs are differentiated as follows: -

1.6.2.1. Qualitative Research Methodology

Qualitative research wants to know the kind of things people are doing. It ask the question “what kind?”. Bogdan and Taylor cited by Guy, Edgley, Arafat, and Allen (1987:256) define qualitative methodologies as research procedures which produces descriptive data: people’s own written or spoken words and observation, whereas the quantitative research is viewed as follows:-

1.6.2.2. Quantitative Research Design

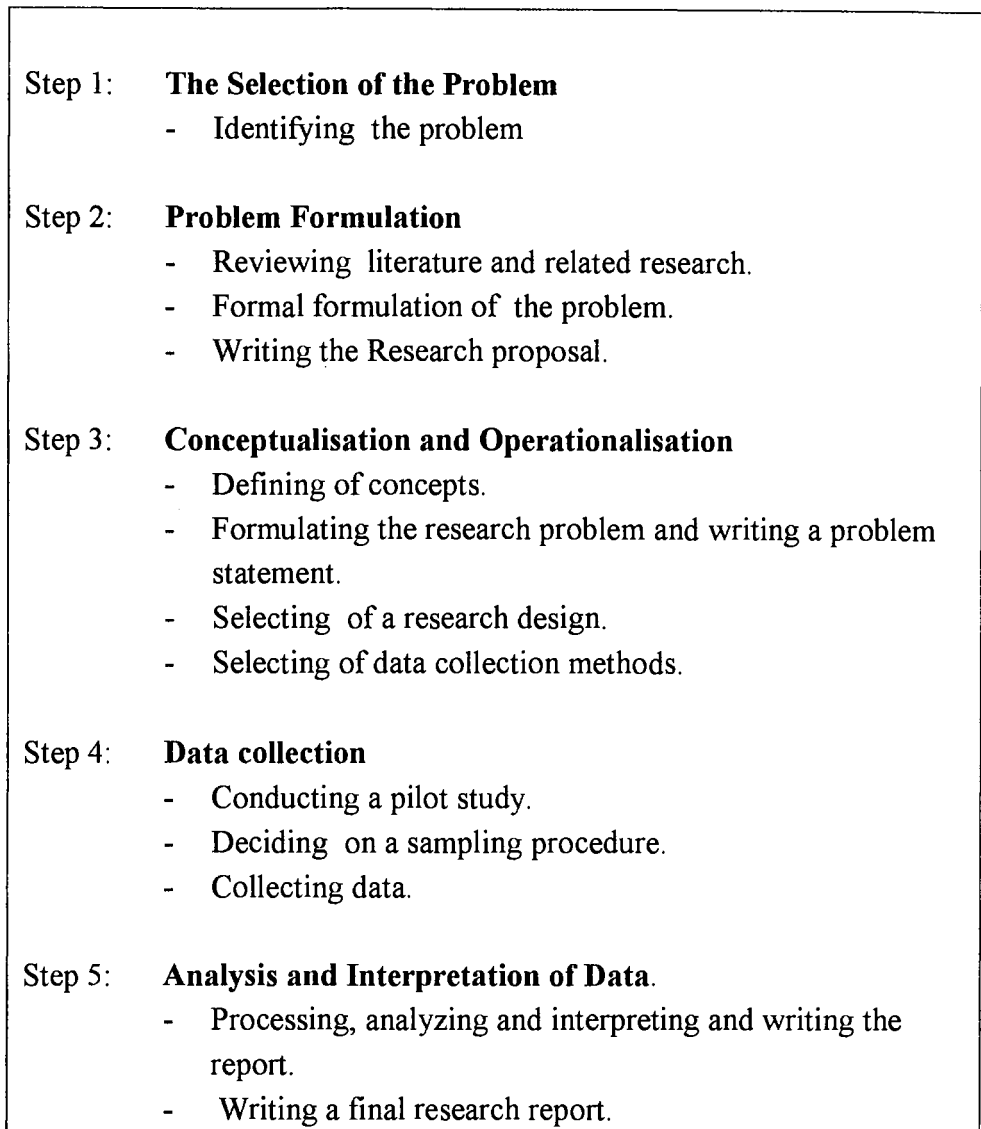
According to Guy, Edgley, Arafat, and Allen (1987:256) quantitative research attempts to make generalization based on precisely measured quantities. The question that informs quantitative research is “How much?”.

For the purpose of this study the researcher will use quantitative methodology to present the findings of the study and to link them with theory. Guy et al (1987:309) further indicated that the researcher with the research objective in mind must decide whether his research is descriptive or inferential. The descriptive design is seen as the most appropriate design to provide a detailed description of the type of problems to be dealt with through the use of EAP.

1.6.3. Research Procedure And Strategy

The research procedure followed during this study is set out in figure 1. The various steps of research design followed are as outlined by De Vos, Strydom, Fouche, Poggenpoel and Schurink (1998:38):-

FIGURE 1



1.6.4. Pilot Study

1.6.4.1. Literature Study

The literature on Employee Assistance Programme was reviewed by the researcher from both the national and international perspectives. This was done basically because the Employee Assistance Programme is an international concept which was adopted nationally by several organisations.

1.6.4.2. Pilot Test of Questionnaires.

The researcher did a pilot test of questionnaires at the neighbouring hospital. Nine questionnaires of different categories were distributed among the supervisors, management, and the general employees in that particular hospital. Six responses were received, and from these it was clear that most of the respondents did not experience problems in understanding the questionnaires for they responded in line with the researcher's expectations.

1.6.4.3. Description of the Research Population

The population in this study consists of the Jubilee Community Hospital Staff Members. According to Grinnel and Williams (1990: 118), a population is defined as the totality of persons or objects which a study is concerned with. Therefore the population of this study comprised 1 254 (one thousand two hundred and fifty four) Jubilee Staff Members of which twelve (12) are members of the Management Team, One hundred and thirty (130) are first-line supervisors, and one thousand one hundred and twelve (1112) are General Employees.

1.6.4.4. Sampling Method

A sample is defined by De Vos, Strydom, Fouche', Poggenpoel, and Schurink (1998: 42) as a small representation of a whole. The most important thing to be considered in sampling is size and representativeness. The researcher selected the sample of this study. The researcher used a

proportional stratified sampling method to select the supervisors and employees who took part in the study.

The researcher used as a tool the list of names of the staff members obtained from the personnel administration of the Jubilee Community Hospital.

Selection was controlled by the total number of each category in the organisation. Therefore the selection was disproportional, as the number of general employees differs from that of supervisors and members of the management team. For the first line supervisors every fifth person on the list was selected, and also from the general employees, therefore separate questionnaires were distributed among supervisors and the management team.

The twelve (12) members of the management team formed part of the sample, and thus they all participated in completing the questionnaires.

Five percent of the supervisors formed part of the sample, of sixty five. Three categories of questionnaires were distributed, that is, twelve to the management, sixty-five to the supervisors and fifty-six to the general employees. From the twelve questionnaires distributed to the management staff only 7 (seven) responses were received, and from the 65 (sixty-five) questionnaires distributed to the supervisors only 37 (thirty-seven) responses were received, and lastly from the 56 (fifty-six) questionnaires distributed to the general employees only 30 responses were received, and and later analysed in chapter 4

1.7. DEFINITIONS OF KEY CONCEPTS

The key concepts in the study are defined as follows:-

1.7.1 Employee Assistance Programme.

“The term Employee Assistance Programme” is defined differently by different authors. The following definitions identify the main ingredients of EAP and are relevant to the purpose of the study:-

According to Googins and Godfrey (1987:102) an Employee Assistance Programme is a set of policies and programme procedures by which a work organisation legitimately intervenes in identifying and treating those problems of employees which have the capacity to impact on their job performance.

Bruce (1990:4) defines an Employee Assistance Programme as a programme designed to meet specific problems of employees by utilizing professional human services and personnel, on either a contractual or an employment basis, to meet the needs of troubled employees.

Furthermore, Sonnensturhl and Trice (1983:1) defines an Employees Assistance Programme as a job based programme operating within a work organisation for the purpose of identifying “ Troubled employees” motivating them to resolve their troubles, and providing access to counseling or treatment for those employees who need the services.

From the above definition it is evident that an Employee Assistance Programme aims at helping employees either by preventing, relieving or eliminating work related and social problems thereby promoting

productivity, job satisfaction, and the employees general social functioning.

Generally an Employee Assistance Programme aims at improving the quality of life of the employees, their families, the community, and the organisation. Its focus is on all the systems which the troubled employee is interacting with.

The Employee Assistance Programme is abbreviated by many authors as EAP, and this acronym will be used throughout this study.

1.7.2 Troubled Employees

According to Myers (1984:12) a troubled employee is an employee who is suffering from any one or a combination of problems which may or may not result in performance deficiencies on the job.

Bruce (1990:5) defines a troubled employee as an employee whose behaviour in the workplace causes reduced productivity and lowered morale for self, co-workers, or supervisor.

Furthermore, Sonnensturhl and Trice (1983:1) defines troubled employees as those individuals whose personal problems (such as alcoholism, drug addiction, marital difficulties, emotional distress pre-occupy them to an extent that in either their own or their supervisors' judgement, their work is disrupted.

A troubled employee is basically a person whose personal problems and work related problems pre-occupy him to such an extent that it renders him ineffective at work and thus his job performance is not within the normal expectations.

The terms troubled employees and problem employees are often used interchangeably. For the purpose of this study, the researcher will use the term troubled employees.

1.8. LIMITATIONS OF THE STUDY

The researcher experienced several problems, especially during data collection period. The respondents were not keen to complete the questionnaire, mainly due to the fact that EAP is a new concept and most of them have difficulty in understanding this concept. The management of the Jubilee Community Hospital were not interested in completing the questionnaire, (which constitute no threat to the researcher and her aims).

Some employees were unable to complete the questionnaire on their own due to the difficulty in understanding the English language, this was mainly due to their level of qualification.

Data was collected over a long period of time, that is, for a period of four months, due to lack of manpower. Field workers who volunteered to help were very few and they could only help during their spare time as they are employed full-time.

CHAPTER TWO

2. LITERATURE REVIEW ON THE EMPLOYEE ASSISTANCE PROGRAMME.

2.1. INTRODUCTION

The Employee Assistance Programme is the most effective method of assisting the employees problems, for it provides counselling service to the employees who experience problems. A good number of organisations have realized the need for putting AN EAP in place in their various organisational structures, mainly because they have realized that employees have different problems which affect them differently and have a serious impact on their job performance. This chapter will embark more on EAP and its origin, the goals of EAP, its rationale, functions, benefits, models, and its different components.

2.2. THE HISTORICAL DEVELOPMENT OF THE EMPLOYEE ASSISTANCE PROGRAMME.

Job related problems associated with alcoholism, drug dependency, emotional disorders, financial pressures, mental health problems, and marital and family discord, have a serious impact on the organisation, the employees, the supervisors and the employers. The Employee Assistance Programme adopted a broadbrush approach with the main aim of addressing all these problems. The historical development of the EAP differs from author to author, but the central historical points seem to be that their origin lies in the social movements and industrial alcoholism programs which developed in the United States in the 1940's, as indicated in the 1989 IPM journal. Bickerton (1990:34) in EAP digest indicated that much of what is known about EAP origins in the early 20th century has been effectively chronicled by Trice, Roman and Blum (1972). Others, notably People, trace the genesis of EAPs to the 1870s, when American business and industry

were confronted by shifts of labour demographics that management viewed as problematic.

According to Googins and Godfrey (1987:112) OAP (Occupational Alcoholism Programmes) is the predecessor of the EAP. Over the years the nature of these programmes changed and came to be described as 'broadbrush' thus the assistance was extended beyond alcohol dependence to a wide range of personal problems. The main reasons for this change was the stigma attached to Occupational Alcohol Programme and the fact that not all problems are caused directly and indirectly by alcohol. Francek, Klarreich and Moore (1985:1) indicated that EAP was initially formulated in an attempt to assist employees with the job performance or to resolve behavioural problems related to alcohol misuse or alcoholism.

2.3. THE GOALS OF EAP

The EAP goals are diverse, primarily because of the varied organisations effort to explain their decisions to implement, adopt and maintain EAP. According to Dickman, Challenger, and Hutchison, (1988:246) goals are action statements related to the programme's mission. In the Employee Assistance Programme (EAP) four major goals have emerged: Firstly, for identifying employees whose personal or health problems are interfering with job performance. Secondly, motivating those individuals to seek and accept appropriate help. Thirdly addressing underlying stressors in the workplace, and lastly assisting both managers and employers in achieving health and productivity (Bruce 1990:123).

From the above-mentioned goals it is clear that EAP believes in retaining healthy, problem-free, and productive employees, which is a considerable investment for an organisation. To achieve the above goals and realise the principles on which they are based, specific individuals must be allocated the responsibility of identifying and assisting employees who are in need of help. Masi (1984:20)

points out that the decision by an employee to use EAP is voluntary, therefore, the supervisor needs not to threaten him/her to use it. Troubled employees must be given a chance to use the EAP. According to Googins and Godfrey (1987:144) the benefit related goal of EAP is to provide a method to control the organisation's health care costs by providing costs-effective treatment to employees before their condition deteriorate.

2.4. THE RATIONALE FOR THE EAP

There are different motives involved in the implementation of the EAP. The rationale behind the introduction and implementation of the EAPs appear to be based on financial and humanitarian reasons. When looking at the financial aspect, EAP is a cost-saving programme that improves the bottomline profits, thus helping the company to achieve a substantial savings through helping troubled employees solve their problems and improving job performance. Jones (1985:7) is also of the opinion that a detrimental effect is experienced by organisations through the termination of valuable employees by the organisation because of alcoholism drug abuse or any other problem can precipitate the EAP implementation.

Secondly, it serves as an aid to management principles, especially those relating to the supervisory role and its responsibilities. EAP promotes healthy relations between employees and management to enable them to tackle problems together for the benefit of everyone in the community. According to Googins and Godfrey (1987:108) it improves labour management relations by providing a forum for jointly addressing problems and issues.

Thirdly, EAP enhance corporate image, thus providing a variety of image messages both within the company and for the company to communicate its willingness to provide for and protect employees with some personal problems.

2.5. THE FUNCTIONS OF AN EMPLOYEE ASSISTANCE PROGRAMME (EAP)

The importance of EAP lies mainly in the different functions it performs. Five management functions of EAP outlined by Roman (1990:10). According to him, the first management function is associated with the Occupational Alcoholism Programme such as the retention of the employees to whom the organisation has provided with substainal training, combined with employees committed to reducing job performance problems and substance abuse, and to the costly impact of turnover.

EAP has different functions. The difference are due to the various EAP models (which will be disscussed later in this chapter) and are greatly moulded by the differences in the manner in which the various functions are handled, more specifically the functions centralised around the assessment and treatment of problem employees. According to Myers (1984:70), there are four management functions performed in establishing and maitaining an EAP, that is: Planning, organisation and implementing, client service and controlling. Those funtions are discussed briefly as follows:-

2.5.1. Planning

Planning is essential in every programme for it serves as a guide, thus determining where to go and how to reach the goal. According to Myers (1984:70) planning means both long and short term run purposes. Thus short term plans, meaning operational or tactical plans, which are policies and procedure. Therefore an EAP is basically established to help the organisation effectively meet its long term goal or purposes. To help achieve these goals, EAP policies must be established. According to Myers (1984:70), other tasks included in the planning functions are analyzing insurance coverage, conducting preliminary cost – benefit

studies, and preparing evaluation procedures. The second function in establishing and maintaining an EAP is organising and implementing.

2.5.2. **Organisation And Implementation**

Organising is basically putting things into a working order for one to be in a position to carry out a particular task. According to Myers (1984:72) this function relates to all the activities of EAP such as training managers and employees in EAP goals, policies and procedures. He also points out that consultation arrangements must be made to assist managers, supervisors, counselors and other systems in the organisation with various problems that arise, particularly during the first few months of the EAPs operation.

2.5.3. **Client Service**

This is the third function in establishing and maintaining EAPs as outlined by Myers (1984:72). This function relates to all the activities involving the client, beginning with either determining the problem of an employee and ending by evaluating the extent to which the employee's needs were met through a service plan. This includes the following stages:-

2.5.3.1. *Assessment*

Assessment is the process of analysing the factors that influence the social functioning of the individual. It involves determining the precise nature of an employee's problem, and of services needed to treat the problem, and the best qualified service provided to meet the client's needs. Assessment ends when the service is being arranged for the employee Myers

(1984:72) further indicates that, the next stage after assessment is diagnosis.

2.5.3.2. *Diagnosis*

The purpose of diagnosis is to determine a suitable service provider for the employee. It is a detailed analysis of a client's problem. According to Myers (1984:72) the diagnosis is necessary if assessment was made or conducted over the telephone because the telephone may not permit an accurate assessment. After analyzing the clients problem, focus will mainly be on case planning.

2.5.3.3. *Case Planning*

This stage follows immediately after diagnosis has been made. The plan must be defined which includes making appointments for the rendering of services needed thus determining the costs, and making the necessary arrangements for the payment of the expenses. This is crucial and needs to be done prior to service rendering.

2.5.3.4. *Service Rendering*

Service rendering is simply the provision of services to the clients, and it covers a broad range of various methods. The service rendered is determined mainly by the type of problem you are addressing, for an example, a financially troubled employee may be equipped with the budgeting skills by a financial counselor. After the service has been rendered to the

client, there is a need to monitor the effectiveness and efficiency of the service being rendered.

2.5.3.5. *Case Monitoring*

The EAP counsellor who monitors individual cases through separate discussion with client and the service provider does case monitoring. The client discussion provides information concerning the appropriateness and quality of service being received by the client. The employee is asked whether the service provider is meeting his/her needs. The information received is not treated confidentially and does not interfere with relationship between the employee and the service provider.

2.5.3.6. *Case Closure*

This refers to the termination of the client service. The case is closed for several reasons, for example, the service plan for the employee may have completed. When a service provider does not see the need for sharing more information, if the employee is not satisfied with the service provided, if the service provider does not seem to be assisting the employee or lastly if the service provider or client did not meet contingent requirements for service continuation. The client must be prepared for termination; it must not be an abrupt action which will have a negative effect on the client.

2.5.3.7. *Case Evaluation*

This is a process whereby both the service provider and the employee appraise the efficiency and effectiveness of the

service provided in accordance with the problem experienced. They examine questions such as whether the treatment plan helped the employee perform better at work and whether the service provider was effective. This is mainly conducted after the case has been closed.

2.5.3.8. *Crisis Intervention*

This intervention is rendered in exceptional cases, where there is a life threatening situation or serious traumatic conditions. It is directed mainly towards the restoration and promotion of the social functioning of the employee, who experiences a crisis as a result of an unexpected event and thus having a low coping mechanisms.

2.5.3.9. *After-Care*

This is the continued treatment of an employee after in-patient care had been provided. According to Myers (1984:73) after-care could include such services as group and individual therapy of orientation and assistance in obtaining membership in self-help groups like Alcohol Anonymous. He furthermore states that after care in an EAP is a combined responsibility of the EAP, the service provider, and the client.

2.5.3.10. *Job re-entry*

In most instances the troubled employee on treatment will always be away from work. Therefore he/she may be apprehensive about the reaction of co-workers when returning to work and about whether they know his /her problems.

According to Myers (1984:74) job re-entry is similar to aftercare in that efforts are made to facilitate the return to work. He further stated that supervisors do not fully understand the significance of stigma and other concerns that employees may have about returning to work. Supervisor visitation where the employee is an in-patient is quite essential.

2.5.3.11. *Control*

This function is also essential in order to determine the effectiveness and efficacy of the program. This has more to do with the control of EAP. According to Myers (1984:74) control requires establishing written EAP performance data to conduct cost-benefit analysis and other evaluations. Reported information is arranged in different formats depending upon the need. This will, therefore enable the organisation to determine the value of EAP services.

There are a number of factors that affect EAP effectiveness although they differs from organisation to organisation. The researcher will later describe these factors briefly, as they have a serious impact on the functions of EAP.

In conclusion, the functions of EAP explicitly shows the importance of its existence in an organisation. Every organisation expects its employees to be productive. EAP proved itself to be effective both at home and at work. Its functions range from planning, and implementation and ends up with evaluation, and this shows that EAP is orderly and procedural in its functioning.

2.6. FACTORS WHICH INFLUENCE THE EFFECTIVENESS OF AN EAP

Several aspects could be raised as the reasons why employees are not using EAP services effectively in organisations where these services are available. According to Myers (1984:74) there are two types of factors which affect EAPs effectiveness, these are human factors, which include. Ease of access, anonymity, confidentiality, counsellor advocacy, employee, manager acceptance. There are also program management factors, which include confrontation, support, and continual interviewing.

2.6.1. Human Factors

2.6.1.1. *Ease of Access*

This is the ease with which employees can make use of the EAP. Access is usually constrained by encumbering producers and choosing a remote EAP site location. Where EAP is located will determine its effectiveness to the potential users. Terblanche (1988:132) concurred with this when he indicated that the programme and its personnel should be physically located in a way that it is visible and accessible, but with due regard to the requirements for confidentiality.

2.6.1.2. *Anonymity*

This is assuring a client that his/her name will not be revealed without first obtaining permission from him/her. According to Myers (1984:75) this aspect is considered by EAP practitioners and researchers to be an absolute requirement for EAP success.

2.6.1.3. *Confidentiality*

Anything discussed during the counseling session by the service provider and the employee will not be disclosed without their permission. According to Myers (1984:75), employees' fear that broken confidentiality may result in co-workers' learning about their problems and in management's using the information to make unfair decisions. Therefore no information on the nature of the employee's problems should be shared with anyone else, including the management unless consent is received from the employee concerned.

2.6.1.4. *Counsellor Advocacy*

The counsellor or service provider must always ensure or see to it that justice is done. He must ensure that clients are treated fairly and their rights are protected. He must make sure that supervisory pressure is not used to influence their decisions, or their counselling will be biased.

2.6.1.5. *Employee Acceptance*

This boils down to employees acknowledging the presence of EAP and making use of it when in need of the service. The competence of EAP determines the rate at which employees will accept it. Union members often prefer to make use of a joint union-management EAP. Some experts believe that the issues of gender have an impact when coming to accepting the EAP to use. Where women preferring female supervisors have a sexist attitude separate EAPs may be developed to be dedicated to women problem employees (Myers 1984: 76).

2.6.1.6. *Manager Acceptance*

It is important for the managers to give the necessary support to EAP. Their co-operation and commitment to EAP will lead to the effective utilization of this programme. According to Myers (1984: 76) managers have failed to accept EAPs for several reasons, that is, some may also resent the apparent of secrecy that often surrounds the EAPs. Some managers are provoked by the fact that they are ill informed about what is happening with their employees. For this reason, co-operation is essential, in order to avoid their suspicion that the employees are being improperly protected.

2.6.1.7. *Privacy*

The counselor's office needs to be private, in order for the clients to be able to consult privately without being seen by others.

2.6.1.8. *Problem Managers*

Some managers also experience problems just like other employees. According to Myers (1984: 77), problems of middle and first-line managers often go undetected for they have a considerable amount of personal control over their attendance and performance. Problem managers received less assistance than employees. Self-referral is difficult for them, they fear that they will soon lose their top jobs as a result of disclosure to the counselor. They require assurance from top management that they won't lose their jobs.

2.6.1.9. *Labour Union Co-Operation*

The labour union plays a vital part in encouraging employees to seek help from the EAP. According to Myers (1984:77) unions and management experience problems with regard the EAP. Some management researchers feel that union involvement diminishes EAP effectiveness, contributing on lot to union –management communication and co-operation problems.

2.6.2. **Programme Management Factors**

There are quite a number of programme management factors that influence EAP effectiveness. These factors are discussed by Myers (1984: 78-82) as follows: -

2.6.2.1. *Confrontation Support*

Confrontation is an essential ingredient in EAP. When the supervisor identifies a problem employee, he must assume his confrontation responsibility and thus refer the employee to seek help from the EAP. The second programme factor is continual interviewing.

2.6.2.2. *Continual Interviewing*

This may establish communication channels between employees and the counsellor. The initial interview often “breaks the ice” between the employees and the counsellor. Once a rapport is established, employees are more prone to

refer themselves for counselling when a need arises. Continual interviewing is essential for several reasons:-

- It helps to prevent, identify and resolve problems.
- It helps to identify employees who need counselling.
- It helps to resolve anxiety produced by fear of being ostracised by co-workers.
- The counsellor can determine employees' feelings on a broad range of topic.

In Conclusion

- EAP like any programme cannot run smoothly. There are quite a number of factors which disturbs its smooth operation. Nonetheless this cannot prevent it from operating effectively. All the necessary components have to be in place, such as the models of an EAP.

2.7. MODELS OF EMPLOYEE ASSISTANCE PROGRAMME

The management should be highly involved in the selection of a particular EAP model to be used in its organisation. This determines the wellness of the model, to what degree it will assist management in the performance of the EAP functions as discussed earlier in this chapter. As a basis for understanding the different models of EAP, a definition of an EAP model is given. According to Myers (1984:69) an EAP model is the structure that an organisation uses to plan, and implement a service, and serve the needs of troubled employees. He added that employees have difficulty in determining the suitable EAP model to use, because of the wide variety of models available, conflicting information about the features of different models, and misunderstandings concerning the advantages and disadvantages. Francek, Klarrench, and Moore (1985:4) also indicated that no one model of program development fits all work situations, because the size,

location, nature of work, and socio-demographics of a given workforce are unique.

Programming EAPs according to the needs and characteristics of organisations may result in one or a combination of models that best fit the organisation and its employees. Myers (1984:70) identified two basic types of EAP models, that is the internal and external EAP models. He indicated that internal models are run by the personnel who are internal to the organisation, whereas external personnel should be engaged by organisations to operate external EAPs which sell EAP services to such organisations.

EAP have developed a number of ways to provide counselling services to employees. Irrespective of the type of EAP model an organisation chooses, it is important that the constructive confrontation strategy highlighted by Archambault Doran, Matlas, Nadolski and Sutton-Wright (1982:14), and the counselling component remains in balance. A model is thus developed to satisfy the unique needs of a specific employer and his employees. According to Myers (1984: 70) there are three external models: hot-lines, consortium, and contractor, and two internal models: the employer and the union model.

2.7.1. The External Models

2.7.1.1. *The off-site or external model*

This model is also called the contractual, external, or vendor model. According to Straussner (1990:6) the work organisation or union makes a contractual arrangement with a self-employed social worker, a group practice or propriety firm or workers. The social worker provides consultation services focusing on a programme desired by the organisation and those programmes are sponsored by the organisation concerned. According to

Chiabotta (1987:45) in this model there is no actual diagnosis, but treatment is provided directly by the organisation.

2.7.1.2. *The hot-line model*

This is either a local or a long-distance telephone service where the troubled employees dial the published number and talk to a listener who is trained to assess problems. The caller (employee) is then referred to an appropriate service provider selected from a directory of service providers in the employee's community. Myers (1984: 82) confirms the fact that hot-line is either a local or long-distance telephone service. It may be publicised on notices, posters, employee bulletin boards, and occasional pay-cheque inserts. The assessment of the employee's problem depends on his/her communication skills and the perceived ability to understand and classify them.

2.7.1.3. *Consortium Model*

This is basically a group of organisation with a similar agreement with a common provider. Myers (1984 : 83) views consortiums as non-profit organisation that receives funding from a number of public sources such as local, country, state and federal governments. They also obtains revenue from the sale of services to private and public organisations. Consortium may serve the population in the area where they are located. Clients organisation are charged for services on a per capital basis, that is, fixed fee per employee, and for the public service charges are based upon the client's ability to pay. The employees should have the necessary cover to enable them to pay for the service. Terblanche (1988:135) concurred with this

when he indicates that if employees do not have the necessary cover, it may lead to unwillingness to use the programme on the basis that it is not affordable. Below are two types of consortiums as identified by Myers (1984:83):-

2.7.1.3.1. Spartan Form/ Consortium 1

This type of consortium offers limited planning capability inorganizing assistance which consist of standard or general purpose policies and procedures. Supervisory training is conducted before the programme is initiated. Crisis intervention is available through hot-line and professional staff.

2.7.1.3.2. Consortium 2

This type only offers services to the sponsor to treat some problems and these services depend upon the client population which the organisation was designed to serve. The occupational social worker consults with first-line supervisors, and with middle and top level managers. Its programmes are flexible so that termination may take place at any time.

2.7.1.4. The Contractor Model

Sometime organisation may contract with a welfare agency or professionals in private practice to undertake employee and family counselling. The contractor's services could be

extended to include other EAP functions such as supervisory training and programme evaluation. This model has three versions:-

2.7.1.4.1. Contractor Model 1

This version provides EAP service for one or two problems, for example, alcohol and drug abuse. (e.g. Family and marriage society of South Africa, Alcohol Anonymous). In this model, the organisation employs a full or part time internal programme-co-ordinator who establishes communication and procedural links between various department and the contractor. According to Googins and Godfrey (1987:120) this model places the major functions of the EAP outside the organisation, but responsible for it. The contractor provides policy and procedural consultative assistance and problem assessment is restricted to one or two problems handled by the contractors. Its primary goal is to serve the employer. This model renders more internal assistance, with cost to the employer in policy and procedural definitions and in consultation. It is characterised by flexibility, and internal organisational procedures. Employees may contact the contractor directly or through the supervisor who makes appointments for them.

2.7.1.4.2. *Contractor Model 2*

In this version additional services are provided to the employees because the contractor is affiliated with other service providers. According to Masi (1982:79) a company can enter into a contract with a university, a human-service provider or a hospital to provide the programme either on the company premises or outside. It also renders aftercare and job-reentry services to facilitate the problem employees reintegration at work. It also gives substantial support to the supervisors and has a strong preventive component.

2.7.1.4.3. *Contractor Model 3*

This model provides the employer with experience in all planning phases including EAP goal and integration with existing goals. This creates an environment where maximum results should be obtained from the EAP, and when the problem occur, the necessary communication links are established to take corrective action. This model uses a combination of public and private service providers to provide a broad range of services.

In conclusion, the models discussed in this chapter play a vital role towards the effectiveness of an EAP. It is a guideline towards determining the best plan in assisting employees in a particular

organisation. There is quite a wide range of them to enable the person to have a broader choice.

2.7.2. The Internal EAP Models

2.7.2.1. *The Employer Model*

There are three versions of the employer model. In the first model, the EAP office is located on the employer's premises. Myers (1984:91) concurred with this, when he indicated that the employer model has an office located on the employers' premises. The counsellor in this regard must help the management in planning and organizing functions of the organisation. He also interviews the employees to assess and refer them to various public and private community resources. The counsellor is therefore expected to have more knowledge about established contracts. His other functions will be those of case monitoring, aftercare, job re-entry and evaluation of services.

The second model includes more internal procedural linkages than the first model, due to service delivery that is rendered. Referrals are made to outside service providers, and also within the counselling unit.

The third model has a management structure which might have EAP co-ordinator who co-ordinates the work of the counselor. It is distinguished from the above two models by its structure, which has strong preventative components, and more services which are also provided internally. It is more expensive and is difficult to terminate.

2.7.2.2. *The Union Model*

Unions can play an essential role in the EAP. The Union's leadership may recognise specific responsibility towards EAP goal accomplishment. The Union will emphasize prevention, early identification, and treatment of employee problems. According to Myers (1984- 94) some union programme are totally union operated, while others are management initiated with various degrees of involvement. The exclusive union model is originated, administered and maintained by union members who usually volunteer for the assignment. In performing their task they identify problem employees who are union members and motivate them to seek assistance. They also monitor and evaluate the employee's performance between counselling sessions and after the completion of treatment. They further help in publicising and providing some limited consultation to supervisors and management. Focus will mainly be on EAP approaches for they are also essential components in EAP.

2.8 EAP APPROACHES

The concepts of approach and model are often used interchangeably by many authors, although within the EAP context, the two do mean the same. EAP approaches can be described as theoretical principles of the EAP. The two basic approaches to employee assistance are prevention and confrontation. Research on existing EAPs indicated that prevention approach and confrontation are the most widely used approaches as it conforms to the traditional management methods and ensures the eventual referral of problem employees. Myers (184:12) identified two types of approaches namely the preventative and the performance approach.

2.8.1 The Preventative Approach.

According to this approach diseases or problems prevention is preferable to correction or treatment. Terblanche (1987: 36) indicated that for an EAP to be really effective, it should also pay attention to prevention of problems. There are three forms of prevention, namely: - primary, secondary and tertiary.

2.8.1.1. *Primary Prevention*

Primary prevention reduces the incidence of problems. Albee and Joppe 1977 cited by Dickman, Challenger, Emener and Hutchison (1988:219) noted that the major goals of prevention programs are to block disfunctioning in those who are currently healthy and prevent the existing problems from growing more serious. Primary prevention is advantageous because it saves time for the employer in disciplining the employee to correct than secondary and tertiary prevention.

2.8.1.2. *Secondary Prevention*

This means early treatment of problems. The problem is treated during its early stages of development. It is less costly and more effective than tertiary prevention, but less effective than primary prevention.

2.8.1.3. *Tertiary Prevention.*

This is the rehabilitation that follows after disease or problem identification and diagnosis. It involves curing rather than

prevention, and it might be costly and less effective than primary and secondary prevention.

furthermore, the prevention approach can be made effective by training and educating employees in understanding employees' problems, symptoms and methods through self-analysis. Employees are also informed about what to do when such symptoms are observed. The prevention approach supports organisational goals through pro-active strategies which emphasize health maintenance and problem avoidance.

It creates a desired set of conditions and shapes behavior through education and reinforcement. According to Yonder-Brown (1994: 26), in theory, an EAP can create a unique blend of all the three levels of prevention, yet, in practice many ignored the value of the primary and secondary levels or have only haphazardly put them in place. EAP professionals also tend to view primary and secondary prevention service as a means to an end, as a way to increase utilization, for example, and not as ends in their own right.

2.8.2 Confrontational Approach

The confrontational approach is normal for it focuses on job performance and its goals are reactive strategies to undesirable outcomes. It disciplines and corrects deficient behaviour. Its policy explains the significance of employees problems and the proportion of the workplace usually affected, and further defines the problem to be treated. According to Archambault, Doran, Matlas, Nadolski (1982: 14), confrontation is based on the documented deterioration of job performance observed by supervisors, union officials and other professionals who are involved in an orderly,

rational fashion. Further development is best described as idiosyncratic, producing numerous programme types and philosophies. Thus, employee assistance for occupational alcoholism there are no universal model.

Conclusion

- The two approaches are essential for the success of an EAP. Terblanche (1987:36) agrees with this approach by stating that for an EAP to be really effective, it should also pay attention to the prevention of problems. Focus will then be on the benefits involved with the use of EAP

2.9 THE BENEFITS OF AN EMPLOYEE ASSISTANCE PROGRAMME.

The benefits of EAPs lie in three main areas namely, fostering employee well-being maintaining acceptable standards of job performance, and reinforcing job security. Employees' problems cost the organisation plenty in terms of lost productivity, theft, medical expenses and human suffering. Therefore the organisation should utilize every means within its power to combat the problems. According to Chiabotta (1987:10), EAP offer the employer a proven cost-effective programme for reducing both the cost and human suffering. EAP generally is of benefit to the employees, employer, supervisors, and the management

2.9.1. Benefits to the Employees

Employees who benefit from the EAP are those who make use of it. In the past, the troubled employees were fired, and went on to another organisation with their problem behaviour which caught up with them again, not having been properly attended to. Employees benefit from the EAP as they are given a chance to rebuild their lives and they have an option to deal with their problems. Employees have a chance to save their

lives or the lives of their dependents. Finally, employees secure meaningful help for a problem that may endanger not only the ability to earn a living, but also the very lives of their dependents. According to Chiabotta (1987 : 11) the winners in EAP are the ones who use it.

2.9.2. **Benefits to the Employer**

EAP gives an employer the opportunity to weigh the costs of dismissing the employee both in terms of the economic costs and social responsibility.

- Thus it saves the employees job,
- It improves productivity and morale,
- It helps avoid costly suits,
- It is cost effective,

Dickman, Challenger, Emener, and Hutchison (1988:19) emphasizes the fact that a well designed EAP has something valuable to offer the company as well, therefore the management support for the EAP is essential.

2.9.3. **Benefits to the Supervisors**

The supervisor does not wish to be part of his employee's personal problems, and of course the majority of them do not qualify to intervene as they lack the necessary skill for assisting the employee who experiences problems. An EAP relieves supervisors from the need to pry into the personal lives of employees and gives them an alternative to the traditional "shape up or ship out" according to Chiabotta (1997:12). In addition, 60% to 80% of the troubled employees can be returned to full productivity.

2.9.4. The benefits to the Management

In the past, the troubled employees were dealt with through transfers, kick-offs, disciplinary action, and employment at will. The employers refused to acknowledge their responsibility in assisting employees to cope with their problems. Recently management, have shifted its view of the troubled employees, and have justified expenditure of funds on the premises that lives of employees on and off the job, is interrelated and cannot be separated with ease. Management came to realise that employees had to deal with their problems on their own. According to Chiabotta (1987: 11) the EAP can be a significant part of the disciplinary process and it also serves as a legal preserver should the employee attempt to make the organisation pay for the employee's productivity by alleging discrimination or abusive action. He further stated that, like any other group of people, management must be convinced that is a productive man on application and will improve their position before they embrace it wholeheartedly.

Conclusion

- From this discussion, it can be concluded that EAP is essential in every organisation, for it does not only benefit employers, but also employees, employers, supervisors and management.
- Focus will be placed on some of the standards elements of EAP, which includes supervisory training, policy and procedure, marketing of the EAP, recording, treatment service, evaluation, accessibility, confidentiality, and identification of troubled employees

2.10. ESSENTIAL STANDARDS OF AN EAP

2.10.1. Supervisory Training

Training is essential to a successful EAP. It helps bring about changes in knowledge and attitude that enable the EAP to realise its objectives within the organisation. It is a powerful tool for communication and change. Its contents include explanation of the EAP itself and training supervisory personnel, administrators and others who might not otherwise understand how best to work with or utilize the EAP (Googins and Godfrey (1987:126) for an example: “I wouldn’t have the confidence to confront any of my employee, I don’t know enough about drug or alcohol treatment ...”

These quotes from a front line supervisor summarizes the feelings of many supervisors and even senior level managers in companies throughout the country (Morse, 1989 : 31).

According to Nelson (1992: 18-20) the supervisor must be skilled (trained) not only in the process of referral, but he must also be able to :-

- define and communicate the performance of his employees.
- recognise and analyse performance problems; this includes sensitivity to personal problems which could interfere with the work performance.
- deal effectively, by means of various interactive skills, with a supervisee whose performance does not meet the necessary criteria for the job, one of these interventions on the part of the supervisor involves confrontation.
- have an understanding and make effective use of disciplinary procedures.
- provide effective feedback to the employee, whether positive or negative.

The extent to which supervisors lack the above skills, may lead to them being poorly prepared to identify problems and handle the confrontational interviews when they occur, and for this reason may tend to avoid or ignore deficiencies on the part of their employees.

On the basis of the above information one can see that there is a serious need for supervisory training. Supervisors are the key people in the EAP' for they are constantly in touch with the employees. One of the essential elements for a successful EAP is that the line managers and supervisors are enthusiastic about the programme, and are willing and able to fulfill their role in implementing it. Again, the manner in which the EAP is introduced is crucial to the success of the programme.

2.10.2. Training Managers And Supervisors

Therefore it is very essential that all the managers and supervisors be required to undergo a training session on EAP. According to Dickman and Emener (1988:14), no success is possible unless the managers are committed to the programme in practice and function as well as in formal policy. These people must be trained to :-

- observe their sub-ordinates in terms of punctuality and general productivity.
- document all instances of unsatisfactory job performance and or poor work habits.
- inform employee of his poor record
- refer the employee to the EAP coordinator or other coordinators or counsellors.

2.10.3. Policy and Procedure

Personnel policies are sanctioned and approved statements that guide the relationship between a company and its employees. These policies reflect a set of values and establish mutual assistance expectations (Googins and Godfrey, 1987 : 125)

Trice and Roman (1987:180) cited by Googins and Godfrey (1987:12), identified three major aims for a written policy related to alcohol and drug use :-

- Inform employees of the consequences of using alcohol and drugs on the job.
- Spell out the distribution of authority and responsibility involved in policy implementation.
- Eliminate the possibility of favouritism.

A policy supporting an EAP is important but is not sufficient for success. The Policy must be operationalized to be effective. It should be viewed within a political context and from the dynamic perspective of organisational receptiveness and commitment as well as the more static dimensions of presence. Programme policy writers need to remember that compatibility with performance appraisal systems and the protection of employees' privacy through strict confidentiality are important to the viability of an EAP. Googins and Godfrey (1987:125) emphasises this by stating that compatibility with performance appraisal system, grievances process, disciplinary procedures, insurance policy, and the protection of employee privacy through confidentiality is significant to the viability of an EAP.

A written policy is very essential to an effective EAP, it is crucial to stipulate specificities with regard to specify aspects to be addressed. The

policy should not only outline the organisation's philosophy and principles pertaining to the only programme, but administrative arrangements have to be outlined too.

In addition, without a clearly written widely publicized policy, supervisors and managers often do not know how to deal constructively with employee's personal problems. Dickman et al (1988:112) suggested that the following aspects should be emphasized in the policy statement:

- The company prefers the problem, to be dealt with professionally as early as possible.
- Problems brought to the EAP will be treated confidentially.
- Alcoholism and other types of drug abuse are diseases to be treated and not a behaviour to be punished.
- The EAP is designed to assist employees and their families and is not a substitute for disciplinary principles and policies.
- In no case will the employee be coerced to utilize the EAP.

If the policy statement is well written it will also attract the employee's interest in making use of the EAP service. The hospital management must also be committed to this programme. According to Terblanche (1988: 126) any programme that is accepted can only be successfully managed if there is a formal commitment from management to the programme. This statement in itself agrees with what Dickman and Emener (1988:14) indicated under the training of managers and supervisors.

2.10.4. Marketing of the EAP

This simply implies selling the EAP to the organisation or to the employees. Marketing of EAPs play an important role in the development and acceptance of EAPs in an organisation. According to Googins and Godfrey (1987:12) after the adoption of the policy and procedures, some

EAPs still find themselves underutilized. The EAP can be marketed in many ways, which include company newsletters, workshops, and presentations at seminars. A marketing plan is needed, as EAP needs to establish methods of calling attention to its services in such a way that appropriate use is made of those services. According to Francek (1985:24) marketing is therefore seen as a systematic tool for achieving the desired results for success.

There are essential components, which constitute an effective marketing plan :-

□ **Mission**

This states clearly the basic or overall purpose of the organisation.

□ **Aims**

The aim is what the programme wants to achieve. This may be stated generally or specifically.

□ **Objectives**

The manner in which the aim will be achieved. These are specified in measurable terms that outline the practical way of reaching the aim. The objectives are said to be “smart”, that is specific, measurable, attainable, reliable and time bound.

□ **Goals**

Achievements or mileposts” to be reached in order to achieve each objective.

□ **Strategies**

This is the overall planning and direction towards the accomplishments of the objectives. The success of marketing is determined by the investigation, exploration, and evaluation of organisational strengths, weaknesses, opportunities and threats in the marketing place. This is simply abbreviated as SWOT analysis. Every programme has its strengths and weaknesses which must not be overlooked in marketing the EAP.

□ **Tactics**

These are the specific plans and schemes by which problems are overcome and obstacles to the achieving of objectives are passed or removed.

Before marketing an EAP externally, the hospital should first consider providing an EAP for its own staff. Internal marketing is marketing within the organisation. This is defined by Klarreich, Francek and Moore (1985:28) as a systematic promotion to the specified employee population of an EAP which is tailored to meet the unique needs of the workforce. This is mostly implemented after the programme has been approved in internal marketing which include programme awareness, visibility, programme promotion and organisational networking.

The EAP marketing should ensure that all the organisational structures are aware of or well informed about the existing EAP services. According to Googins and Godfrey (1987:12), this activity is often called Marketing Plan. This programme itself must be kept visible and accessible to everyone in the organisation. It must be well updated with the current and meaningful information. This will promote the development of relationships with all levels of management, unions,

sections and departments within the hospital. An EAP service is marketed internally mainly to increase utilization of hospital services, to improve the community image, to generate revenue reassure the staff that professional services are available to them, thus leaving the impression that management cares.

2.10.5. Accessibility

This is another essential ingredient of EAP. EAP offices must be located where they will be easy to reach. People who need the services of an EAP should be in a position to be able to reach it easily with ease. People who need the services of an EAP should find the EAP offices in a convenient place. According to Terblanche (1992:20) the physical location of EAPs determines, to a greater extent, the degree of support for the programme. The emphasis should be mainly on confidentiality.

2.10.6. Confidentiality

Without a guarantee of confidentiality, many employees would never agree to use EAP offices. This plays a vital role in enhancing participation in the programme, since the employees are assured that they will not be seen when entering or leaving EAP offices. The EAP service provider should assure the employees that information which entails the professional relationship will not be disclosed without their permission. Correl and Kurtzmits (1986 : 392) also emphasizes that employees must be assured that all information about their problems will be kept confidential by the counsellor. Confidentiality is very crucial in a helping relationship for if it is not well observed, it can destroy an element of trust which will automatically lead to the underutilization of the EAP services. Confidentiality and voluntarism are seen as the two very important principles underlying EAPs.

2.10.7. Record Keeping.

Records are essential program mechanism of any personnel oriented programme. According to Terblanche (1988:133) the EAP must have a recording system which protects the identity of the employee, while making control and management of referral possible at the same time. Confidential record keeping system is viewed as critical to the success of an EAP. According to Googings and Godfrey (1987:127) the EAP record keeping system consists of scrupulously guarded confidential material gathered through approved organisational channels and from outside treatment agencies as well as from the employee problems. These records are tools for assessing the confronting denial and evaluation. EAP records are kept out of personal files. Supervisors can only receive feedback from the EAP, if the employee is willing to share the information with their supervisors.

2.10.8. Treatment Service

The most common EAP service involves treatment for substance abuse, family problems, stress and so on. EAP must be prepared to identify and treat these problems, either within the confines of the EAP or through the auspices of specialized human service agencies, practitioners and self-help groups. Providing treatment service within a setting involves both understanding of treatment within this context and through knowledge of outside treatment resources, thus treatment services have to be understood and incorporated into a workplace framework. According to Googins and Godfrey (187:130) the parallel paths of treatment and management, although complex and touching on legal, labour management, and confidential issues, represent the realities of treatment in work

organisation as opportunity to utilise work-based mechanisms in the treatment process.

2.10.9. Referral Mechanism

This is also one of the program mechanism of EAP. EAPs rarely are complete treatment centers and referral mechanisms are necessary to link the programme with the external treatment systems. According to Googins and Godfrey (1983:18), failure to establish a referral mechanism securely within the EAP severely limits the ability of the programme to provide employees with appropriate and effective services. Wright quoted by Klarreich, Francek and Moore (1983:18) stated that, even when thorough planning and training have been accomplished, confusion in this area should be expected, especially at the beginning of a programme. EAP staff should be familiar with community resources. Their relationship with outside agencies goes beyond sufficient understanding of the agencies to facilitate effective information and referral service of employees.

2.10.10. Re-Intergration

Re-integration is more or less the same as re-entry which was discussed earlier under the functions of EAP. For employees who have completed a treatment programme, re-entering the workplace or workgroup may be difficult. If the employee has had a history of absenteeism, tardiness, and so on, that causes resentment among co-workers and an embarrassment on the part of the employee, the process may be more complicated (Googins and Godfrey, 1987:128-129).

A full treatment and rehabilitation, identifying and assisting with re-entry problems, is necessary. This may be accomplished by working with employees, their workgroups, supervisors, and union stewards to create a

welcoming climate in which problems of re-entry and re-integration are mitigated.

2.10.11. Evaluation

Evaluation was handled initially under the functions of EAP. This is crucial in order to determine whether the programme is functioning well or not. According to Googins and Godfrey (1987:129) evaluation mechanisms vary from simple reviewing of cases to highly sophisticated research to determine programme effectiveness. The need for evaluation has encouraged better record keeping systems and the recruitment of researchers and programme evaluators to assist the EAP. The presence of a programme evaluation mechanism adds to programme, credibility and provides information useful which can be used to improve of the service.

2.10.12. Identification Of Troubled Employees

The identification of employees with problems in work organisation has been the basis for EAP. Supervisor and managers are playing a major role in identifying troubled employees. Googins and Godfrey (1987:143) indicated that measures exist to identify employees with problems directly relating to deteriorating and impaired job performance as perceived by the supervisor and managers. Mechanisms for identification are as follows:

2.10.11.1. Identification Through Observation

The supervisor in his daily control and function and against the background of continuous performance measurement, should be in a position to give a performance profile of all his subordinates at any point in time. Du Plessis (1983:3) agrees that supervisors are key people in the EAP because they are

constantly in touch with the employees. The performance measurement is based mainly on the application of our criteria, that is quality, quantity, and cost efficiency and time limits.

- Quality - is how well the work has been done.
- Quantity - how much was produced.
- Cost efficiency - how well budget cost limits were kept.
- Time limits - how well scheduled time limits are kept.

The above mentioned criteria should always be checked against specific standards known to both. Unsatisfactory work performance should be sufficiently documented, complete with dates, in order to motivate him to make use of the EAP as a means of restoring his productivity.

2.10.11.2. Self-Identification

It should be borne in mind that the use of the EAP essentially remains voluntarily, as indicated earlier in this chapter. The employee can therefore not be forced to make use of the EAP. It is essential that the troubled employee realise that he is having a problem and he needs some assistance. Though contrary to this, Googins and Godfrey (1987:145) believe that confrontation is necessary for linking the employees concerned with the treatment resource. There are three general broad guidelines which may be followed to achieve self-identification, namely: -

- if there is a marked decrease in an employee's productivity,
- if his attitude or behaviour causes his fellow workers productivity to decrease, and

- if he feels that he is losing control over himself and/or his environment.

In most instances a person knows when he is experiencing a problem, but often the above named broad guidelines are not so clearly perceptible.

2.11. SUMMARY

In this chapter, the researcher firstly discussed the historical development of EAPs. EAP's origin is very broad and different authors presenting it differently they are trying to generate a clearer understanding on the origin, progress and direction of EAP. There will never be a definitive history of EAP, it is a history in progress.

The other issue discussed in this chapter is the aim of EAP, which forms the basis for establishing an EAP in an organisation. The aim clearly stipulate the mission of the programme which is based on identification of troubled employees, motivation to seek help and addressing the possible stressors. EAP is being adopted by several organisation for different reasons best known to them. The function of an EAP was also discussed in this chapter and this mainly explain the activities that are carried out by the EAP facilitator to maintain and establish the programme within the organisation. The factors which affect the EAP effectiveness were also discussed in this chapter, for every programme that runs will have some factors that will disturb the smooth running of that particular programme. Quite a number of these factors were identified and this in itself shows that EAP, just like any other programme, is not an exception to the rule.

The EAP models were also discussed, which the researcher views mainly as a guiding tool towards the implementation of EAP in an organisation. These models also have both advantages and disadvantages, but due to the fact that there

are several of them, the organisation stands a good chance to compare these models to come up with a suitable one when implementing an EAP. In addition the three prevention approaches were discussed and that the primary prevention approach proved to be the most relevant, for it is rather more proactive than the two approaches which are more reactive in nature. The benefits of EAP were also discussed to indicate the different systems which will benefit from using this programme.

Furthermore the essential elements of EAP were also discussed in detail to clarify the important aspects to consider for the success of EAP in an organisation, because it includes important aspects such as supervisory training, marketing of the EAP, accessibility, confidentiality, record-keeping, referral mechanisms, and so on.

The discussion led the researcher to continue with chapter three, which focuses mainly on EAP in a hospital setting which forms the basis for this study as it is “ a needs assessment for an Employee Assistance Programme in the Jubilee Community Hospital”

CHAPTER THREE

3. EMPLOYEE ASSISTANCE PROGRAMME IN A HOSPITAL SETTING.

3.1. INTRODUCTION

In this chapter the researcher will focus on EAP as a vital component in a hospital setting, thus suggesting to the hospital management a variety of ways to put EAP concept into action. According to Landesman and Bucolo (1987:37) the concept of EAPs in health care is relatively new and has not yet fully come of age. Hospital and health care today are facing critical issues with regard to human resource management. Focus will be on the need for EAP in a hospital setting, barriers to the acceptance of EAP, patterns of job deterioration amongst health workers, the benefits of EAP and the functions of EAP in a hospital setting.

3.2. THE NEED FOR AN EMPLOYEE ASSISTANCE PROGRAMME IN HOSPITAL

Health workers are not exceptional to the rule, like other employees they experience personal and work related problems. Challenger cited by Dickman et al (1988:413) indicated that it is needless to say, working in the health care profession can itself be:-

- Taxing, mentally and physically.
- An open arena for the procurement of chemicals of all types
- Less rewarding in the recognition of a “job well done”. The nurse of the year award is not enough.

He further indicated that in the hospital setting, work regimen, changes of shifts, hours of work, relocation of duties, can lead to a group of workers “at risk” for chemical dependency.

Unhappy or worn-out employees, whether due to home or work pressures makes more mistakes, loose their ability to be warm and caring as expected, and thus affecting the quality of care and the impression made on patients and families. For the health care workers to provide the quality care they are expected to provide, they must first be enabled to meet their own needs. It is therefore unrealistic to expect that the health care workers will go to work each day free of worry or strive. There must be a mechanism to help them deal with those problems. This is bringing forth an increased awareness of the need for an EAP for health care workers. According to Landesman & Bucolo (1987:7) the implementation of EAPs in a health care setting is a visible and tangible sign to employees that the administration is concerned about them and about the quality of their life both at home and at work. The focus will mainly be on the models of EAP in a hospital setting.

3.3. PROGRAMMES / MODELS IN A HOSPITAL SETTING

In addition to these models, it is important to consider the model which is relevant and most appropriate for implementation of an EAP in a hospital. The two most common models for the provision of EAPs are the in-house and external provider models as discussed earlier. The focus here will be specifically on a hospital setting. Other models to be discussed are the consortium approach, student provider programme, and the use of existing hospital departments.

3.3.1. In-House Programme

The services of an in-house EAP are provided solely by an employee or employees of the hospital and these people may be either full time or part time staff. The employee serving as an EAP Co-ordinator should be familiar with the hospital's internal systems in order to function more effectively.

According to Googins and Godfrey (1987:118), in-house programmes are placed in the mainstream of the work institution, solidifying identity with the institution. Terblanche (1988:62) concurred with this for he sees internal programmes on the whole as managed within the boundaries of a company.

3.3.1.1. *Advantages Of An In-House Programme*

- The individual operating the EAP is familiar with the organisation's internal systems, and therefore can function more effectively.
- Employees may feel more confident with in-house staff because they believe they are more familiar with the organisation and understand the kinds of problems the employees are facing.
- The staff has the ability to access, modify, and improve the programme relating quickly and efficiently
- It is cost effective.
- According to Googins and Godfrey (1987:119) as an integral part of the organisation the EAP is better positioned to the link problems and solutions.

3.3.1.2. *The Disadvantages Of In-House Programme*

- The main disadvantage is in the fact that the EAP is part of the hospital system, and the hospital staff may be skeptical about the staff's ability to maintain confidentiality, (Myers, 1984:92).
- The EAP may be viewed as being too vulnerable to political struggles within the organisation and also as being overly involved in political controversies.

3.3.2. **Combination Approach: In-House and External Programmes**

This approach may be helpful for it divides responsibility for the initial programme development, the assessment and referral functions among in-house staff, and an external provider. The combination approach may be important in hospitals if they have qualified counselors or a staff member who can perform the EAP assessment and referrals functions, but have difficulty with the initial policy, procedure and management decision.

3.3.2.1. *Disadvantages Of the Combination Approach*

- It may be difficult to administer. To be effective there must be someone at the hospital who is assigned an overall responsibility to co-ordinate the programme.

3.3.3. **External Provider Programme**

Services are offered on a contractual basis by a provider who is not a hospital employee. Services may be provided telephonically or through personal visits where necessary. An external provider may offer a full or partial range of EAP services. Myers (1984:70) defines this model as the one operated by personnel who are employed by an organisation that sells EAP services. Therefore, the employer contracts with an independent EAP Service Provider to render EAP services to the staff members. Regardless of how good the model may appear, it will not be perfect. It has both advantages and disadvantages. The advantages and disadvantages of the external model are as follows:

3.3.3.1. *Advantages of an external provider programme*

- It can provide a convenience to a small or medium size hospital that does not have the resources for in-house EAP staff.
- It allows the hospital to acquire staff expertise without paying for the personnel benefits and training costs incurred in hiring a new employee.
- Some employees may view an externally provided EAP as more confidential than an in-house programme and less likely to be involved in the hospital's internal politics.

3.3.3.2. *The Disadvantages of an External Provider Programme*

- The external provider's ability to work within the hospital system is dependent on the skill of the individual provider.
- At times it is difficult for the contractor to fully understand the specific needs of the hospital's employees and managers.
- Some employees may be reluctant to convey the full extent of their problems to an outsider, especially if they feel that such revelations might harm the image and reputation of the hospital.
- Employees may experience difficulty to trust and put confidence in an outside provider or consultant.

3.3.4. Consortium model

This model is developed by several employers who join together to form a consortium to develop an EAP. According to Beugger (1987 : 11) consortiums in terms of an EAP means a group of employers in a given geographical area, joining together in order to establish effective common interest. For example, five small employers, including a hospital, may decide to hire an EAP staff personnel to serve all five organisations. The cost of the EAP is divided amongst the member employers. The consortium approach is more suitable for small or medium sized hospitals.

3.3.4.1. *Advantages of the consortium model.*

- There are more opportunities for the consortium participants to tailor the programme to suit their own needs.
- For the fact that the EAP staff is employees of the consortium members, they are familiar with the formal and informal systems within each of the member organisations.
- EAP costs are shared among the consortium members. Thus cost-sharing may permit smaller employers who could not otherwise afford an EAP employee to benefit from EAP services.

3.3.4.2. *Disadvantages of the Consortium Model*

- There is a possibility that the contractual agreement among the participants could change.

- If one of the employers withdraw from the consortium, it will mean an increase in costs to the remaining members, unless a suitable replacement can be found.
- If the member organisation have widely divergent views about the priorities or operating procedures of the EAP, it could result in a power struggle among members and it will be difficult for the EAP staff to function effectively

3.3.5. Student Provider Programme

Some hospitals work hand in hand with the universities and technikons for student's block placement. In most cases they sent student doctors, social workers, occupational therapists, and psychologists and many others to do their practical work at the hospital. Some of the students may operate the assessment and referral functions of an EAP. In some models, the students may serve as an assistant to the primary EAP staff. According to Dickman, Challenger, Emener, and Huchison (1988:345) in selecting students for this programme the faculty should consider admission criteria relevant to professional practice in EAP.

3.3.5.1. *Advantages of Student Provider Programme*

- It is cost effective, is an established programme with professional EAP staff, and students may provide necessary additional resources to the EAP at relatively low costs.
- An established EAP that offers field placement to students can also serve as an important training ground for the development of EAP professionals.

3.3.5.2. *Disadvantage Of Student Provider Programme*

- Problems may arise if students are used exclusively or without inadequate monitoring.
- If students are not familiar with the political and managerial issues of the hospital, they are less likely to be skilled in the assessment and referral functions than fully trained EAP staff.
- Students may have difficulty in inspiring the trust of highly professional hospital staff, and their tenure in the position will not exceed the length of their field placement, which is usually only one year.

3.3.6. **The Use of Existing Hospitals Departments**

Due to the fact that hospitals frequently employ health professionals skilled in assessment techniques, the functions of an EAP can be divided among various hospitals departments. Commonly used departments include social work, nursing, pastoral care, substance abuse, psychiatry and human resources.

3.3.6.1. *Advantages Of Using Hospital Departments*

- The hospital could implement an EAP with minimal additional costs.
- It reduces inter-staff conflict.

3.3.6.2. *Disadvantages Of Using Existing Hospital Departments.*

- The inconsistency and inefficiency typically associated with more informal EAP arrangement, for existing

departments have other priorities, such as patient care, that may interfere with the EAP.

- The programme is viewed as less capable of independent problem solution than an EAP that is identified as a separate entity.
- It is difficult to gather reliable programme utilizing data when a number of departments are involved in different aspects of EAP work.
- Due to all the negative aspects involved in using the existing hospital departments, most hospitals establish some type of EAP that function separately from any existing hospital departments.

Conclusion

- Models differ and they are equally important in guiding the organisation to plan, implement and serve the needs of EAP. Each model has both the advantages and disadvantages to show that they are not perfect. They are just but a guiding tool to the success of EAP. The main focus will be on the barriers that affect the effectiveness of EAP.

3.4. BARRIERS TO THE ACCEPTANCE OF AN EAP CONCEPT IN THE HOSPITAL SETTING

In every programme there are factors which affect the smooth running of the programme. At times people are not easily convinced about the importance of a programme especially when it is recently introduced in an organisation. According to Landesman and Bucolo (1987:37) there are several barriers that may inhibit acceptance of the EAP concept by health care providers, and such barriers can be categorized into two types, that is:-

- The individual barriers and

- The systemic barriers

3.3.1. **Individual Barriers**

In the hospital setting, the focus is on the patient and the provision of high quality care to those who need help. This “other directed” focus, although essential to the provision of quality patient care, it presents barriers to the acceptance of the EAP concept by health workers.

The attitude that develop is “since we are the ones who make others healthy” that is “we are the experts, we don’t need your help” and we ought to be able to fix things ourselves”. Many in the EAP field have seen the results of these attitudes in clients who self – medicate, have stress related disorders and have problems in relationships. Those who deny the fact that they are human, they develop a crisis orientation to their lives and attend to things only when symptoms becomes so evident that they cannot be avoided.

Health Care Workers are constantly dealing with death, dying and crisis of one sort or another. To cope in such an environment, they must develop an ability to distance themselves from the cries of anguish of a four year old burn-victim, the loss of an infant whose mother was an addict, the emotional shift of a heart of cancer patient, the constantual demands of a constantly changing work environment, the exhaustion of working an extra shift due to staff shortages and so on. Such distance, which is often essential to coping with the work at hand, feeds into health care worker’s denial of the presence or needs of their own, Landesman and Bucolo (1987:37).

3.3.2. Systemic barriers

This is another barrier that inhibits care providers to accept EAP concept. Systemic issues are related to the changes occurring in health care today. Health care since the 1980's has been undergoing a revolution in tradition. Government intervention in the provision of third – party payments to hospitals has caused health care to look at itself critically to find ways to maintain quality care in cost – effective and cost justifiable ways, Landesman and Bucolo (1987:37).

There is a need to keep consumers happy. The marketing of hospital services, definition of service providers, target audiences and so on are guiding the provision of care in today's health care institutions.

3.5. PATTERNS OF JOB PERFORMANCE DETERIORATION AMONGST HEALTH WORKERS.

There are a number of indicators that under the proper circumstances, point to the deteriorating job performance. When these indicators appear in isolated instances, they may be of no significance. In case of a troubled employee, a pattern of job performance deterioration should begin to appear. Different authors such as Myers, Roman, De Board, and Dickman identified several indicators which are discussed as follows:-

3.5.1 Accidents

Accidents mostly occur as a result of employees who come to work being under the influence of alcohol or drugs, those who are unable to concentrate. Myers (1987:48) support this by indicating that accidents usually occurs caused by more than one factor involving unsafe actions and conditions. He further indicate that there are direct and indirect

causes of accidents. Problems employees may substantially increase an organisations accident rate. Other employees end up being involved in accidents caused by the troubled employees. The issue of high accident rate is very crucial in a health care setting for the lives of people are involved. There is a saying that “doctors and nurses mistakes are found in the graves”

3.5.2 **General presentation and behaviour**

The employee returning to work in an obviously abnormal condition. The type of behaviour or actions which may draw comments or complaints from consumers or general public. According to Dickman et al (1988:52) an early sign that an employee is troubled is noticeable change in personal appearance which include things such as personal hygiene, grooming and attire. For example cleanliness, neatness, and dress standards of employees who are employed as nurses must be maintained.

The way an employee presents himself or behave is also essential to the very clients or patients he is rendering a service to. De Board (1983:23) concurs with this statement by indicating that some people have problems or can cause them, simply by the way they behave. He further stated that they may be worried and depressed by lack of confidence or feelings of unworthiness, or else they may be arrogant and dominating continually causing rows and upsets. This type of behaviour can be dangerous when it manifest itself in a hospital setting where patients are also at risk.

3.5.3 **On- the job employee relationships.**

The employee with relationship problems is causing serious problems to the colleagues and the very clientele he is serving. The employee with that problem will in most instances exhibit the reactions such as:-

- Unco-operativeness
- Rapid change of mood
- Over-reaction to real or imagined criticism
- Unreasonable resentments
- Avoidance of associates and
- Complications arising from borrowing money from co-workers.

Dickman et al (1988:50) indicated that naturally everyone has a bad day occasionally and it is unreasonable to expect employees to be perennially co-operative, but the manager should be alert for any sudden behaviour changes that are indicative that an employee may be troubled.

The employees behaviour or personality is crucial to every job situation especially in a hospital setting, for patients need a warm welcome and acceptance as they are being overwhelmed by illnesses. Co-operativeness with fellow workers is also essential, for an example treating the patient together you need to share information constantly if one is uncooperative it may lead to high accident rate as discussed earlier.

3.5.4 **Emergency absences**

Absenteeism is a major problem especially in a hospital setting where manpower is needed on day to day basis. For some employees absenting themselves from work is sporadic and not related to any single factor. According to Myers (1984:42), absenteeism is normally associated with attendance problems relating to tardiness, failure to report, emergency absence, and abuse of paid sick absences. Today's health care system is often characterised as being at a state of crisis. There is constant demand for more and better health care in the face of a declining economy. Health care manager must provide quality care with limited resources especially

limited human resources, thus managing absences is a serious challenge to the hospital management.

Different reasons are being cited for emergency absences, and nurse manager often grapple with the problems of increased absenteeism which depicts lack of commitment and sense of duty. Dickman and Challenger (1988:52) agrees with this when they indicate that another deficiency characteristic of problem employees is repeated absences due to emergencies. These emergencies may occur either prior to the employees reporting or after he has already been working during the workday. The excuses ranges from “ grandmother is ill” to flat tire”. They further stated that some employees who incur excessive absences may resort to creating fictitious emergencies to justify additional absences.

When looking at the demographic factors in the nursing profession females are the most people who often absent themselves from work. Their absence is mainly related to domestic problems, for example child care. The distance the nurses travel when coming to work might also be a contributory factor. For most of the nurses who are travelling long distances to work have a high rate of absences than those who stays nearer to the work place. There are also economical factors which are perceived to be a contributory factor. Limited financial resources deny nurses access to private transport, and the fact that nurses in South Africa are inadequately remunerated and this promote double jobbing which leads to fatigue and absenteeism

Furthermore when employees are dissatisfied about their job they tend to absent themselves from work, for an example if an employee was harassed by his seniors he tends to loose interest on the job and thus exhibit a higher absenteeism rate. Other factors of dissatisfaction might be as a

result of workload, lack of resources, shortage of staff, and conflict in the work situation.

3.5.5 Sick leave abuse

Employees especially in the hospital tend to abuse their sick leave days. The researcher made a constant observation on Mondays and Fridays, they consult with the internal doctors for alleged minor ailments, such as headache, flu, or cold and does be granted a days or two days leave. According to Dickman, Challenger, Emener, and Hutchison, (1988:45) some organisations, most notably those in the federal service, provide a certain amount of sick leave or sick days (usually 13) per year to be used only for illness or specific health related purposes such as dental examination. They further indicated that problem employee frequently resort to using their sick leave for a variety of improper purposes such as recovering from a hangover.

3.5.6 Substance Abuse

Substance abuse is often a cause of increased accidents, confusion, low job efficiency, difficulty to concentrate, uncalled for behaviour and absenteeism. Absenteeism can be related to specific patterns like a person absenting himself from work on Mondays and during pay days.

Drinking does not necessarily affect the job negatively. This statement is supported by Roman (1990:129) when he stated that a problem drinker, whether identified by the stages index or by some other such index, does not necessarily exhibit deteriorating job performance and again impaired job performance does not necessarily elicit employer reactions. Heavy drinkers on-the-job and off-the-job may present a problem to the employer, to the family and the community serviced.

In conclusion patterns of job performance deterioration spells explicitly the problems the hospital management is faced with on daily basis. It also shows that every job based organisation is experiencing serious employees problems especially when there is no formal policy to address these problems. Focus will now be on how EAP functions in a hospital setting.

3.6. EAP AND HOW IT FUNCTIONS IN A HOSPITAL SETTING

EAP make use of three systems of referrals, in order to achieve its goal of identifying troubled employees and assisting them to get the required services:

3.6.1. Self-Referral

Any human problem can be successfully treated, provided it is identified in its early stages and referral is made to an appropriate resource. Employees including student nurses perception of self-referral need to change. Self-referral is not easy for it is an embarrassment to others though to others is a genuine case for they have little knowledge about EAP benefits. It enhances the opportunity for early intervention. According to Fallon and Krueger (1993:30) referral to the EAP is but one means of motivating the student for treatment. When the student views the referral as punishment, the job of the EAP staff person is that much more difficult. Whenever troubled employees seek the help of an EAP coordinator directly, it is known as a case of self-referral. Employees may call for information or make appointments without the knowledge or participation of their supervisors. A self-referral can also be made as the result of an information suggested by a friend, co-worker or someone from the department such as human resources, employee health, and so on. The entire process is treated as confidential even to the entire management.

3.6.2. Referral by family members or other interested parties

An employee with a personal problem may be given advice by the person who is familiar with the EAP services, through having used it himself/herself or through information received from information material.

Family member, friend or colleague who become concerned about an employee may seek the advice of a programme co-ordinator directly. There are also quite a number of people in a hospital who may encourage others to use EAP. All cases of self and family referrals are also treated with outmost confidentiality. Supervisors are also relevant people to refer troubled employees. According to Morse (1989:31) denial, fear, and personal bias can keep supervisor from making referrals to the EAP.

3.6.3. Supervisor or Management Referral

This constitutes a unique feature of an EAP, for it is based on a pattern of declined job performance that is observed over a period of time. An employee whose job performance has dropped noticeably maybe having personal problems that need attention. Bruce (1990:137) concurs with this when he says that, when the problem Employee exhibit behaviour that is beyond the organisations capability, referral to an EAP is in order. Supervisory referral is usually recommended when normal supervisory procedures do not succeed in rectifying the situation. There are certain aspects that need to be considered when coming to referring a troubled employee such as sexual orientation. Deats (1995:33) in the EAP digest indicated that Literature shows that most women and many men would prefer to see a woman therapist. He further stated that female clients prefer female therapists. The EAP can offer practical solutions, but the supervisor must provide an incentive for the employee to use its services

when resistance becomes evident in an employee. The following progressive steps should be taken into consideration by the supervisor as outline in the North West EAP Provincial Manual:-

3.6.3.1. Procedures for Supervisor/Manager's Referral

Step one (1) observation

- The supervisor should first ascertain that the employee knows what is expected of him/her regarding job performance, rules and policies.
- The supervisors should discuss problems observed with that particular employee in an attempt to correct them. He should be alert, through continuing observation, to changes in work and behaviour patterns of all kinds should be documented.

Step two (2) Documentation

- Documentation is very essential to avoid charges of unfair labour practice, should you attempt to impose disciplinary action. All supervisory referrals must be based on documented evidences of poor performance in work quality, work quantity, attendance, conduct and accidents.
- The supervisors should document all specific instances where an employee's work performance or behaviour fails to meet minimum established standards or where an individual pattern of performance appears to be deteriorating. Furthermore it is also important to record any exceptionally good effort that the employee makes to ensure a fair reflection of his general performance.

- Supervisors/managers should avoid making a diagnosis of the causes of employee's job performance problem.
- Therefore documentation should include facts covering the following points about each incidents:-
 - What happened?
 - When and where the incident occurred?
 - Who was involved?
 - Witnesses, if any?
 - Exactly what the employee's deficiencies were?
 - What you as a supervisor did to meet the required standard of job performance?
- Finally all documentation must be kept strictly confidential to avoid invasion into the employee's privacy and possible legal actions. According to Terblanche (1988:132) concurred with this when he states that every EAP must develop a recording system which will protect the industry of the employee, and at the same make control and management of referral possible.

Step three (3) first interview (Informal meeting)

- As a supervisor you need to take the same document, call the employee and discuss the contents of that document with him/her, be specific about what you expect from the employee with regard to the standards laid for job performance.
- While doing this, ensure him your support and concern.
 - explore possible causes of poor job performance
 - listen careful to identify the real cause
 - explore possible solutions to the problem
 - allow him/her a chance to explore possible solutions

- do not attempt to dwell into his/her private life
- Enquire as to whether he/she is aware of the existing EAP services.
- Come to a consensus about plan of action
- Set a follow-up date to review the progress.
- The contents of the first interview should be documented for future reference. After the first interview, then move to the second interview.

Step four (4) second interview (verbal warning)

- The supervisor should be alert to improved job performance followed by a decline. If the employee fails to improve, the supervisor is encouraged to contact the appropriate EAP co-ordinator for advice and guidance prior to actual confrontation with the employee's union representative and the appropriate EAP co-ordinator, to plan for constructive confrontation and union representatives' intervention.
- Implement this plan of action by confronting the employee about continued poor performance and suggest help. At this stage, the decision to use the EAP is still completely voluntary and confidential on the part of the employee.
- The supervisor should ensure that the employee understands that this is a verbal warning and the result of this meeting should be recorded in the employee's confidential file. A follow-up date to review progress should also be arranged.

Step five (5) third interview (written warning)

- The supervisor should prepare himself thoroughly for this interview. He should make sure that he has documented evidences of continued poor performance or unacceptable behaviour. Prior to this, the supervisor should continue monitoring the employee's job performance for a reasonable time to ensure that a satisfactory level of performance is maintained.

- The following procedure should be followed:-
 - follow the disciplinary procedure for poor performance.
 - Arrange the date and time for interview.
 - Inform him/her that you are still concerned about poor performance.
 - List the deficiencies in the employee's performance
 - Be specific, refer to your documents.
 - Where possible relate the employee's job performance to the expected standards.
 - Be objective but kind.
 - Try to get the employee to agree that change is necessary.
 - Tell him/her what is required to improve job performance.
 - Do your best to persuade the person to accept referral to the EAP co-ordinator.
 - Remind the employee of his/her previous undertaking to improve, which have not succeeded.
 - Point out the advantages of accepting referral to the EAP co-ordinator.

- If the employee refuses help, conclude the interview, and keep a copy of the interview's report in the employees confidential file. Consult with your superior, the appropriate union representative, the EAP counsellor and the employee relations personnel to arrange the disciplinary proceedings.

Step six (6) Disciplinary Enquiry

- The decision to refer the employee to the EAP at this stage lies with the committee's chairperson in conjunction with the human resources representative at the inquiry.
- If the employee agree to meet a committee for treatment plan and sign a waiver of treatment, confidentiality, attendance and prognosis report to be made to management, the human resource department will contact the EAP co-ordinator. Thus to arrange the initial counselling session with the coordinator and to monitor the employees' progress on the job.
- The supervisor may be asked by the EAP Coordinator to provide pertinent job performance information. This information will be used by the EAP Counsellor to provide the employee with assessment, short term counselling and referral to community resources or long term treatment.
- Supervisors should bear in mind that the employee cannot be forced to accept help. Generally employees who are not self-motivated, do not respond positively to their treatment.
- Work performance must improve within a reasonable period of time or disciplinary action should be implemented. Terblanche (1988:79) indicated that EAP

helps to avoid dismissal of the problem employee, but not the replacement of disciplinary procedures

3.6.3.2. *Follow-up procedures*

Follow-up is very important to monitor progress. The supervisor should:

- Monitor job performance and the general behaviours closely, bearing in mind the employee will not immediately achieve full capability, but a progressive improvement should be evident.
- Conduct monthly informal interviews with employees for a year and use the formal performance management discussions to ascertain how the employees' recovery programme is progressing.
- Ensure that the employee visit the EAP Counsellor regularly as arranged by the Counsellor.
- Any deviation from a firm and consistent administration of this procedure may lead to further job deterioration, and a delay in the treatment of the employees' personal problem which at times is an extreme risk to his/her health and ultimate recovery.

From the foregoing it will be noted that the troubled employees' immediate supervisor is the keynote for the success of the EAP. With the employees, there is a need for a supervisor to undergo training to facilitate the referral process.

3.7. THE BENEFITS OF A THE HOSPITAL EAP

The EAP benefits in health care settings are the same as those in an industry, that is for humanitarian reasons and cost savings. The availability of an access to personal record, benefit information and health insurance data vary from one organisation to another. These affects the ability of an EAP to produce documentation that indicates cost benefits. To add on the organisation's willingness to participate in the on-going establishment of EAP goals and objectives, as well as to support key programme activities, e.g. supervisory training will affect a programme's success. EAP in a health setting mostly benefits the employees, the families, supervisors, management, and the community at large as indicated in chapter two.

3.8. SUMMARY

This chapter focuses mainly on the most important elements which forms the basis of EAP in a hospital setting. EAP is identified in this very chapter to be a necessary programme to assist the hospital staff members. The need for EAP was clearly discussed in this chapter. Though EAP is seen to be a necessary programme, there are also barriers that hinders the smooth operation of EAP in every organisation. The medical staff or hospital staff may resist consultation with the EAP for most of them assume that they are expects and can sort their problems out on their own. Attitude plays a major role in the acceptance of EAP model, unless they change their attitudes to accommodate this programme, they will not be able to get their problems solved. Patterns of job deterioration amongst the employees were also discussed, which shows that there are no problem free employees, and thus there is a need for an intervention of some sort. Social problems such as accidents, emergency absences, sick leave abuse, substance abuse, strained relationships, and bad behaviours are presenting a serious problem when they manifest themselves in any work organisation

especially in a hospital where patients are suppose to be treated with consciousness, patience, courtesy and love.

Finally EAP is designed to play a vital role in a hospital especially when it is well managed. Its effectiveness depends mainly on the referral system implemented in the hospital by the troubled employees themselves, their families, the supervisors or the management. The correct procedure need to be followed by the supervisors and management in referring the troubled employee to the EAP for help. There are quite a number of benefits available which are similar in a hospital, in an organisation and in industries with the use of EAP. They are geared towards benefiting employees, their families, the employer, the supervisor, the management and the community at large.

CHAPTER 4

4. EMPIRICAL INVESTIGATION INTO A NEEDS ASSESSMENT FOR AN EAP IN THE JUBILEE COMMUNITY HOSPITAL.

4.1. INTRODUCTION

This chapter aims at analysing and interpreting data secured from the Jubilee Community Hospital employees, supervisors and members of the management. The data collected assisted the researcher in delineating the actual situation in this hospital with regard to the need for Employee Assistance Programme. The research findings are also presented in this chapter.

4.2. THE QUESTIONNAIRE

Three sets of questionnaires were compiled by the researcher after an in-depth literature review was made. Each questionnaire was designed in such a way that it will gather specific information from a specific group of people, for example employees, supervisors and members of the management. Simple English was used to assist them to easily understand the questionnaire. Key terms were also designed to facilitate the understanding of the research as a whole.

The first page of each questionnaire explains the aim of the research study and it also provides guidance on how to respond to the questionnaire. It also assures the respondents of confidentiality which is one of the important clinical issue in the research study. This part is basic to every questionnaire or interview.

The questionnaire for employees was divided into the following sections:-

- SECTION 1: Demographical details of employees
- SECTION 2: Goals Aims and the need for EAP
- SECTION 3: Identification of troubled employees

- SECTION 4: Models and approaches of EAP
- SECTION 5: The benefits of EAP
- SECTION 6: Information on EAP

However there was a slight difference in the questionnaires for the supervisors and for members of the management team. They had additional sections such as:

- SECTION 7: Marketing of an EAP
- SECTION 8: Reintegration of employees

The pre-test of the questionnaire was done. The procedure followed during the pre-testing was the actual one which was followed during the real collection of data. The same questionnaire were used to gather information. The only difference is that only nine questionnaires were used during the pre-trial stage. Pre-testing was done at the neighbouring hospital, which is Odi Hospital, with the aim of testing the validity and reliability of those questionnaires.

4.3. DESCRIPTION OF THE EMPIRICAL SURVEY

4.3.1. Procedure

Data was gathered from the employees of the Jubilee Community Hospital. The field workers were instrumental in assisting the researcher to gather data. Selection was controlled by the total number of each category in the organisation. Therefore the selection was disproportional as the number of the general employees differs from that of supervisors and management. For first line supervisors, every fifth person on the list was selected, and also from the general employees. Therefore, separate questionnaires were distributed among supervisors and management. The management team all received questionnaires, and 65 first line supervisors and 56 for the general employees. Only seven 7 members of the management team responded, 30 employees and 37 first line supervisors.

The response was satisfactory, as each category was fully representative.

4.3.2. Target Group

The researcher targeted Jubilee Community Hospital with 1254 employees. The main targets were the employees, supervisors and management. The reason behind this is that employees are the potential users of EAP services. EAP aims at improving the quality of life of the employees and their families through providing professional counselling and health promoting programmes. It addresses life issues (as indicated in chapter one) associated with such conditions as substance abuse, chronic illness (HIV and AIDS), redundancy, stress, depression, and trauma, which result from violence and marital / family problems.

The supervisor, as indicated earlier in chapter 3 is the key person for he plays an important role in the programme by facilitating the early identification of performance impairment and by referring of the troubled employees to the EAP co-ordinators for treatment.

The management also plays a major role in the EAP. They are the decisive body for the organisation as a whole. They are mainly concerned with the smooth running of the organisation. Their responsibilities are as follows:

- To prepare, disseminate and require adherence to EAP policy and procedural statements.
- To implement control mechanism through an appraisal system, in order to ensure that EAP policies and procedures are uniformly and fairly applied.

The involvement of three groups in this research was of utmost significance as the researcher had to obtain their different views with regard to the EAP.

4.3.3. Sampling

The stratified procedure was used to select employees for this study. Due to the disproportional number of employees, supervisors, and management, different percentages were used to determine the number of people to be included in the sample. Therefore 100% of the members of the management team were included as a sample of this study. This was done mainly for the reason that they are a small number. Thus 50% of the first line supervisors formed part of the sample, and 5% of the total number of employees, because employees in this organisation constitute are in a large number.

The administration office in this organisation provided the researcher with information on the total number of employees, supervisors, and managers. In selecting the employees, the researcher used the list of the total number of employees in the organisation.

The total number of employees were multiplied by 5/100

To get number of employees required from the organisation: -

The total number of employees in this organisation was 1112 at the time, and it was calculated as follows: $1112 \times 5 = 56$

$$\frac{\quad}{100}$$

Therefore every 5th person on the list was selected to form part of the sample which led to the total number of 56 employees who were requested to complete the questionnaire.

The total number of supervisors was 130 calculated as follows:

$$\frac{130 \times 50}{100} = 65$$

Therefor every 50th person was selected to form part of the sample

The total number of managers was 12 and it was calculated as follows:-

$$\frac{12 \times 100}{100} = 12$$

All the members of the management team were requested to complete the questionnaires.

4.3.4. Sample size and response

The researcher issued fifty six (56) questionnaires to the employees and 17% were returned, for the supervisors sixty five (65) questionnaires were issued and 19% were returned, and for the management team, 12 questionnaires were issued and seven 60% of them were returned.

The questionnaires were distributed personally to the respondents. A letter to request permission to administer the questionnaire was written to the hospital management headed by and the district manager (see Annexure D and E). After receiving a go ahead from them, field workers assisted in distributing the questionnaires to the respondents. In most instances, the researcher was forced to do personal interviews to assist some respondents with the completion of questionnaires, as this was a new experience for many. The respondents were given a period of ten days to complete the questionnaire. The questionnaires were distributed on the 12th October 1998 and the return date was the 22nd October 1998.

Most of the respondents extended this period until the end of February 1999. The researcher accommodated them due to the fact that the questionnaires were long and some took time to understand the subject under research.

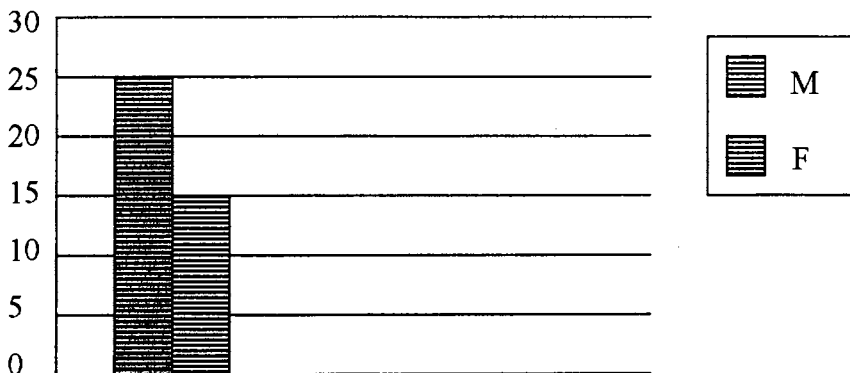
4.4. PRESENTATION OF DATA

The researcher presented the responses from the employees separately whereas similar information obtained from the responses of the supervisors and management were analysed jointly. The research findings are therefore presented in the sequence of the sections as they appear on all questionnaires.

SECTION 1 : DEMOGRAPHIC DETAILS

4.5. A HISTOGRAM OF GENDER DISTRIBUTION OF EMPLOYEES WHO PARTICIPATED IN THE RESEARCH STUDY ON EAP IN THE JUBILEE COMMUNITY HOSPITAL. Question 1.1 - Annexure A

Figure 1. The Gender Details of employees who responded to this questionnaire.

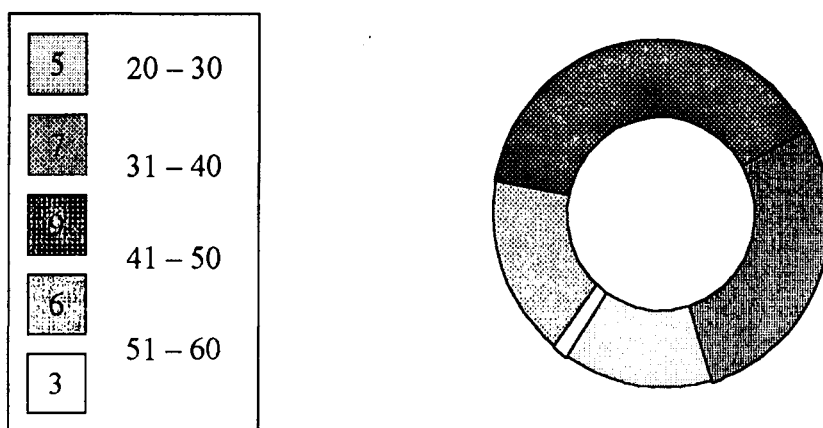


Discussion of figure 1

The number of females who participated in this study is relatively high, this may mean that females in this organisation are in the majority and therefore it may imply that they were over-represented. Further research may prove the validity of this information. The results also indicate that problems identified are experienced by females more often than by males.

4.6. A DOUGHNUT DIAGRAM OF THE AGE DISTRIBUTION OF THE EMPLOYEES WHO PARTICIPATED IN THIS STUDY IN THE JUBILEE COMMUNITY HOSPITAL. Question 1.2 - Annexure A

Figure 2. The Age Distribution of employees who responded to this questionnaire.



Discussion of figure 2

This distribution shows that the majority of employees in this hospital falls within category 41 – 50 yrs. A considerable response came from the younger age group. Older people of 61+ are in the minority mainly because the gender distribution reflected that females are in the majority and they retire at 60 except for a few who volunteered to stay on after 60 years and this leads to a smaller number of them still in the employment. Only a few of them managed to participate in this study, the reason might be that they are about to retire and the introduction of EAP in this organisation won't be of benefit to them, unless they stay employed for a longer period.

4.7. THE MARITAL STATUS OF THE EMPLOYEES WHO PARTICIPATED IN THIS STUDY IN THE JUBILEE COMMUNITY HOSPITAL.

Question 1.3 - Annexure A

Table 4.7: The Marital Status of employees who participated in this study.

Marital Status	Frequency (N=30)	%
Single	16	53
Married	5	17
Separated	4	13
Widowed	2	7
Divorced	3	10
TOTAL	30	100

Discussion of figure 4.7

The distribution shows that the majority of respondents are single in that 30% from this group was once married and 53% was never married. Seventeen percent seem to be still living as husband and wife. There is a great uncertainty as to whether most of the prevailing problems in this organisation are determined by the marital status of the staff members or not. Further research can be made on this subject to check as to whether the marital status has any effect on the social problems. The conclusion can be reached that both married and single employees experience problems. It shows a dire need for an EAP in the organisation.

4.8. THE EDUCATION LEVEL OF EMPLOYEES WHO PARTICIPATED IN THE STUDY IN THE JUBILEE COMMUNITY HOSPITAL.

Question 1.4 - Annexure A

Table 4.8. The Educational Level of employees who participated in this study.

School levels	Frequency (N = 30)	%
Std 5 –7	6	20
Std 8 – 10	5	17
Std 10+	11	36
Tertiary Education	8	27
Total	30	100

Discussion of Table 4.8.

This table shows that 63% of employees, which is the majority, fall between the category of employees with qualifications ranging from Std 10 plus extra courses to the graduates. This might be as a result of the majority of nurses in this hospital who are gradually upgrading themselves in different areas of specialization such as midwifery, pediatric nursing, psychiatric and nursing administration. The result shows that most of the respondents did not experience problems in completing the questionnaire mainly due to their level of education. The few problems experienced during the completion of the questionnaire emerged from those whose qualifications were ranging from Std 5 – Std 10. This in itself has played a major role in exempting the researcher from administering the questionnaires to get a proper response from every respondent. Personal administration of questionnaires were made only to those who do not understand English as it was the language used in the construction of questionnaires.

4.9. **THE DISTRIBUTION OF THE OCCUPATIONS OF THIRTY EMPLOYEES WHO PARTICIPATED IN THE STUDY IN THE JUBILEE COMMUNITY HOSPITAL.** Question 1.5 - Annexure A

Table 4.9: Occupation Class of the respondents

Occupation	Frequency (N = 30)	%
Porter	1	3
Cleaner	5	17
Cook	3	10
Social worker	4	13
Doctor	2	7
Nurse	15	50
Total	30	100

Discussion of table 4.9.

This table indicates the number of respondents who participated in the study were from various occupation classes. The highest response rate was obtained from the nurses (50%), and it can be concluded that nurses were over-represented, as they are in the majority. Only 30% constitute the number of non-professionals who participated in this study. This may imply that although they received the questionnaires, most of them experienced problems in completing them, due to the fact that EAP is a new subject to them altogether, and the language used in the questionnaire, was difficult to understand. Therefore, the researcher and fieldworkers were compelled to conduct self-administered questionnaires for a better response. This table agrees with table 4.4 on the level of education, as \pm 70% can be assumed to be having std 10 plus tertiary education.

4.10. **THE CURRENT POSITION OF EMPLOYEES WHO PARTICIPATED IN THE STUDY IN THE JUBILEE COMMUNITY HOSPITAL.** Question 1.6 - Annexure A

Table 4.10: The Various Positions held by the people who participated in this study.

Current position	Frequent (N = 30)	%
Foreman	5	17
Head of Section	4	13
Chief Nurse	21	70
Supervisor	0	0
Total	30	100

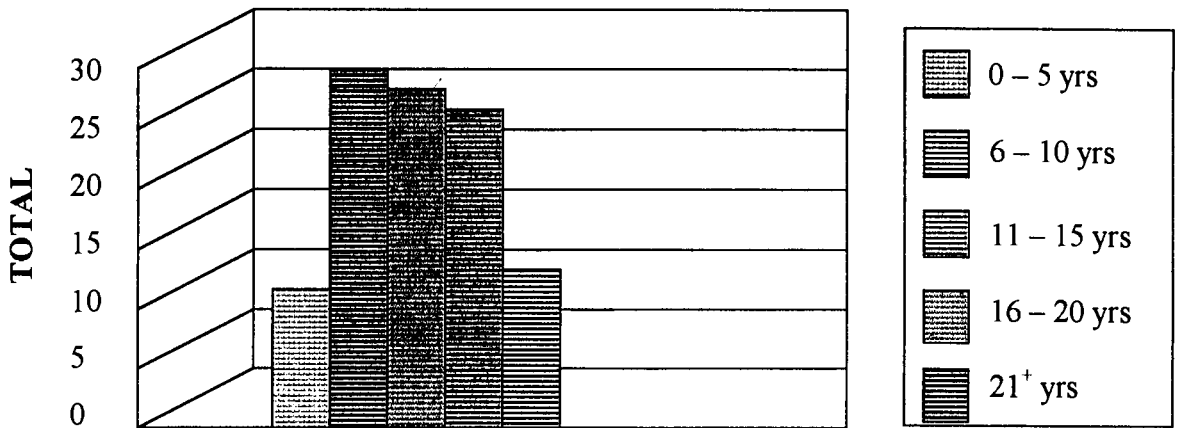
Discussion of table 4.10.

This table indicates the higher response rate of 70% obtained from chief nurses and as compared to the 30% which was obtained from other departmental heads. A high response rate implies that the respondents were quite co-operative and willing to participate in this study as a way to acquire more information in dealing with employees' problems. This may also imply that foremen, heads of sections and chief nurses are aware of and concerned about the employees problems as they view this study as a way to develop a policy to deal with regard to these problems. Supervisors did not participate in completing this questionnaire as they had a separate questionnaire to complete.

4.11. A THREE-DIMENSIONAL HISTOGRAM OF THE DATA ON THE LENGTH OF SERVICE IN THE CURRENT POSITION OF THE PARTICIPANTS IN THE JUBILEE COMMUNITY HOSPITAL.

Question 1.7 - Annexure A

Figure 3. The length of service in the current position of the respondents.



Discussion on figure 3

This distribution shows that the majority of the respondents length of service ranges from 16 – 21⁺ years, mainly because this hospital is more than 35 years old. This may imply that most of the respondents are quite aware of the problems the employees are experiencing, especially job-related problems. It is therefore concluded that the longer they stayed in this organisation, the more problems they experienced or came into contact with. This emphasizes the need for an EAP in this organisation.

SECTION 2 : THE GOALS AND THE NEED FOR EAP

4.12. VIEWS OF EMPLOYEES CONCERNING PERSONAL AND WORK RELATED PROBLEMS EXPERIENCED. Question 2.1 - Annexure 2.1

Table 4.12: Personal and work-related problems as experienced by employees

Personal problems experienced	Frequency (N = 30)	%
Yes	27	90
No	3	10
Total	30	100

Discussion of table 4.12.

From this table it is evident that 90% of employees experience personal problems or work related problems or a combination of both. Life consists of many stressors, problems may occur as an employee is interacting with different systems such as the family, the community, political structures, and the job itself. It is therefore concluded that there is a serious need for an EAP to assist the troubled employees

4.13. **THE TYPES OF PROBLEMS EXPERIENCED BY THE EMPLOYEES IN THE JUBILEE COMMUNITY HOSPITAL.** Question 2.2 - Annexure A

Table 4.13: Types of problems experienced by employees.

Type of problems	Frequency (N = 30)	%
Marital	4	13
Family	6	20
Financial	7	23
Drug abuse	2	7
Alcohol	3	10
Legal	0	0
Chronic illness	0	0
Work related	0	0
None	8	27
Other	0	0
Total	30	100

Discussion of table 4.13.

This distribution confirms the fact that a small percentage of employees are living as married people. 67% of the types of problems experienced by employees are not marriage-related. Only 13% of the employees according to this table are experiencing marital problems. 20% have family problems which include both the married and the single people. A high response implies that problems are prevalent among employees in this organisation and they need to be attended to. It is therefore concluded that an EAP be instituted in this organisation to assist the troubled employees.

4.14. EMPLOYEES' VIEWS CONCERNING THE MANNER IN WHICH PROBLEMS ARE AFFECTING THEIR JOB PERFORMANCE.

Question 2.3 - Annexure A

Table 4.14: The problems affect job performance

Problems do affect job performance.	Frequency (N = 30)	%
Agree	17	57
Agree Slightly	4	13
Not sure	6	20
Slightly disagree	2	7
Disagree Slightly	1	3
Total	30	100

Discussion of Table 4.14.

This table indicates that most of the employees are aware of the negative effects of problems on job performance. Only 3% did not agree with the fact that problems can cause job performance deterioration. This implies that only few people are ignorant about what transpires in this organisation. The high response rate emphasizes the need for an EAP in this organisation.

4.15. **THE EMPLOYEES' TENDENCY OF BECOMING INVOLVED IN THE SPECIFIED BEHAVIOUR PATTERNS.** Question 2.4 - Annexure A

Table 4.15: Employees' tendencies of becoming involved in different behavioural patterns

Type of behaviour pattern	Frequency (N = 30)	%
Absenteeism	7	23
Tardiness	2	7
Work Accidents	4	13
Sick leave abuse	9	30
Incomplete Assignment	8	27
Other	0	0
Total	30	100

Discussion of table 4.15

From this table, one observes that 53% shows the tendency of absenting, themselves from work. This is indicated as the dominant problem, and that in itself, as indicated in Chapter 3, can cause the organisation to work at a serious loss if left unattended. Incomplete assignments (27%) were also noted as a dominant problem among the employees. This might be as a result of irregular attendance, arriving late at work, knocking off earlier, the use of drugs and alcohol, abuse of sick leave, and work accidents. All these problems might also emanate as a result of ineffective methods used by the organisation in trying to assist employees with regard to their personal and job-related problems. It is thus concluded that this depicts the serious need for an EAP in this organisation.

4.16. VIEWS OF THE EMPLOYEES WITH REGARD TO THE NEED FOR SOMEONE TO HELP IN DEALING WITH THEIR PROBLEMS.

Question 2. 5. – Annexure A

Table 4.16: The need for someone to assist employees in dealing with their problems.

The need for someone to assist	Frequency (N = 30)	%
Agree	26	87
Agree slightly	0	0
Not sure	3	10
Disagree slightly	0	0
Disagree	1	3
Total	30	100

Discussion of table 4.16.

From this table it is evident that the employees see the need for an intervention of some sort with regard to their personal and work related problems. Only 3% did not see the need for someone to assist and the reason for such a response might be that they don't experience problems which affect them to an extent that they be unproductive at work. The high response shows that there is a desperate need for an EAP in this organisation.

4.17. THE TYPES OF PROBLEMS EXPERIENCED BY THE COLLEAGUES IN THE JUBILEE COMMUNITY HOSPITAL.

Question 2.6 - Annexure A

Table 4.17: Problems as experienced by the colleagues

Problems experience by colleagues	Frequency (N=30)	%
Marital	5	17
Family	2	7
Financial	9	30
Drug Abuse	3	10
Alcohol Abuse	4	13
Legal	7	23
Total	30	100

Discussion of Table 4.17

From this table it is apparent that the common problems that employees identified in their colleagues are mostly financial (30%) and legal (23%). This implies that when they fail to pay their debts they end up faced with lawsuits. Only 23% were identified to be having problems with the abuse of drugs and alcohol. The lesser response may imply that most of them are not free to expose their use of drugs and they are not yet ready to seek help. The findings in this table support what was indicated in Table 4.13, namely that few employees experience marital problems due to the fact that only 17% of the respondents are living as married couples (see table 4.7). It is concluded therefore that, there is a need for an EAP in this hospital.

4.18. THE EMPLOYEES' VIEWS CONCERNING THEIR OPENNESS TO DISCUSS PERSONAL PROBLEMS WITH THE SUPERVISOR

Question 2.7 – Annexure A

Table 4.18: Employees' openness to share personal problems with the supervisor.

Able to discuss problems with the supervisor	Frequency	%
Yes	9	30
No	21	70
Total	30	100

Discussion of table 4.18

This table indicates the employees' willingness to discuss their personal problems with their supervisors. A high response rate of 70% implies that most of the employees are not free to discuss their personal problems with their supervisors. The problems might be lack of confidence that their problems will be handle with confidentiality. The other contributory factors might be the age gap between the employee and the supervisor, the issue of gender and seniority may also lead to the feeling of insecurity and lack of trust. This in itself emphasizes the need for the organisation to adopt the method that will assist in dealing with the employees' problems.

4.19. AN INVESTIGATION INTO WHETHER HELP IS PROVIDED TO THE TROUBLED EMPLOYEES BY THE ORGANISATION OR NOT.

Question 2.8 – Annexure A

Table 4.19: Help provided to troubled employees by the organisation or not.

Help provided to troubled employees by the organisation.	Frequency (N = 30)	%
Yes	9	30
No	18	60
Not sure	3	10
Total	30	100

Discussion of table 4.19

This table indicates that 70% of the employees are not aware of any help provided by the organisation to the troubled employees. This high response may imply that the employees are aware of the fact that there is no policy designed with regard to the assistance of troubled employees. The majority of them indicated further during the personal interviews that they contact legal advisors and social workers outside the organisation when a need arises.

It is therefore concluded that the majority of social problems are left unattended or receive inadequate attention and therefore the need for an Employee Assistance Programme exists in this organisation.

4.20. **THE NEED FOR A FORMAL POLICY REGARDING THE ASSISTANCE OF TROUBLED EMPLOYEES.** Question 2.9 – Annexure A

Table 4.20: Need for a formal policy in this organisation (employee's views)

Need for a formal policy	Frequency (N = 30)	%
Yes	25	83
No	2	7
Uncertain	3	10
TOTAL	30	100

Discussion of table 4.20

From this table it is clear that 83% of the respondents see the need for a formal policy which will help them to deal with financial problems, marital, family, alcohol and drug abuse and legal problems which influence their job performance. These findings support the need for an Employee Assistance Programme. Furthermore, 17% of the respondents seem to be unaware of the services and benefits available with the use of the Employee Assistance programme. It can therefore be concluded that there is a need for further information on EAP for the employees. The need for EAP is also overemphasized in this table.

4.21. THE EMPLOYEES' VIEWS ON WHETHER THE EAP IS AVAILABLE IN THE JUBILEE COMMUNITY HOSPITAL OR NOT.

Question 2.10 – Annexure A

Table 4.21: Availability of EAP in this organisation.

Availability of an EAP	Frequency (N = 30)	%
Yes	1	3
No	27	90
Uncertain	2	7
TOTAL	30	100

Discussion of table 4.21

A high response rate of 90% shows that no Employee Assistance programme is available in Jubilee Community hospital. The 10% implies that the respondents are confusing EAP with other service providers such as social workers, psychologist and Labour Relation Officer. They need to be informed about EAP and this also shows that there is a serious need for an Employee Assistance Programme in this organisation.

The unavailability of EAP in the Jubilee Community hospital affected the employees' responses, for they were unable to answer some of the questions. The employees did not respond to the following questions effectively:

- Section 2. Question 2.12, 2.13 and 2.14
- Section 5. Question 5.1, 5.3 and 5.4

4.22. **THE VIEWS OF EMPLOYEES ON WHETHER THE FOLLOWING PERSONNEL ARE INVOLVED IN RENDERING THE EAP SERVICE OR NOT.** Question 2.11 – Annexure A

Table 4.22. The personnel involved in rendering EAP services in this organisation.

Personnel Involved	Frequency (N = 30)	%
Doctor	2	7
Social Worker	14	47
Nurse	3	10
Clinical Psychologist	0	0
Employee Assistant Practitioner	0	0
Other	11	36
TOTAL	30	100

Discussion of table 4.22

This table indicates that the “Social Worker” category of personnel involved in rendering the EAP services in this organisation have a greater response. The high response does not imply that the social worker was appointed to render EAP services. The reason for this might be that the respondents are confusing a social worker for an EAP for they seem to be rendering the services that are more or less similar. The other reason that might have contributed to this high response is that social workers are stationed in this organisation, although they are serving the neighbouring community members and not the employees directly. Although some of the employees consult with them when a need arises. The response does not overrule the need for an EAP in this organisation, for social workers are not appointed specifically to help the employees with their problems; and they themselves need EAP services, as they are not exception to the rule.

4.23. **THE EMPLOYEES' VIEWS WITH REGARD TO ACCESSIBILITY OF THE EAP OFFICES TO TROUBLED EMPLOYEES.**

Question 2.12 – Annexure A

Table 4.23: Accessibility of EAP offices in the Jubilee community Hospital.

Accessibility of EAP offices	Frequency (N = 30)	%
Yes	5	17
No	2	7
Not applicable	23	76
Total	30	100

Discussion of table 4.23.

The high response rate confirms the fact that EAP is not available in this organisation. Although 17% of the employees seem to confuse the social workers, labour relations officer, and union officials with employee assistance practitioners, as they, at times, request help from them. This also emphasizes the need to educate employees on EAP; and also the need for an EAP in this organisation.

4.24. **TABLE TO IDENTIFY WHETHER THE EMPLOYEES WERE CONSULTED WHEN THE EAP WAS FIRST DESIGNED IN THE JUBILEE COMMUNITY HOSPITAL:** Question 2.13 – Annexure A.

Table 4.24: Consultation prior to the establishment of the programme.

Consultation during the first establishment of EAP	Frequency (N = 30)	%
Agree	0	0
Agree Slightly	0	0
Not sure	2	7
Disagree Slightly	1	3
Disagree	26	87
No response	1	3
Total	30	100

Discussion of the table 4.24.

This table shows that all the respondents were not consulted with the aim of establishing an EAP. This may imply that the management of this hospital have not yet decided on getting employee's views with regard to the establishment of this programme. It can therefore be concluded that this organisation has not yet seen the need for an EAP. This might be due to little or no information with regard to the benefits involved in getting the EAP in place in an organisation. This does not change the fact that there is a need for such a programme in this organisation in particular.

4.25. **TABLE TO IDENTIFY WHETHER THE EMPLOYEES SEE EAP AS THE RELEVANT METHOD OF ADDRESSING THEIR PROBLEMS OR NOT.**

Question 2.14. – Annexure A

Table 4.25: Employee Assistance Programme, the relevant method for helping troubled employees.

EAP is a relevant method to address problems	Frequency (N = 30)	%
Yes	26	87
No	4	13
Total	30	100

Discussion of table 4.25.

From this table it is obvious that employees (87%) sees a need for a formal policy with regard to the assistance of troubled employees. The 13% who do not see the need for this programme may possibly not understand this programme as a programme that will benefit them and their families. It can therefore be concluded that workshops be conducted to enlightened the employees on the benefits involved in having EAP in-place in the organisation, and also in utilising it. The respondent's motivations supported the need for an EAP in these organisations.

SECTION 3: IDENTIFICATION OF TROUBLED EMPLOYEES.

4.26. TABLE TO IDENTIFY THE PERSON WHO IS RESPONSIBLE FOR IDENTIFYING TROUBLED EMPLOYEES

Question 3.1 - Annexure A

Table 4.26. Identification of troubled employees in the Jubilee Community Hospital

Person responsible for identifying troubled employees.	Frequency (N = 30)	%
Employees themselves	3	10
Supervisors	16	54
Foreman	7	23
Head of section	4	13
Total	30	100

Discussion of table 4.26

From this table it is evident that 54% of the respondents consider supervisors responsible for identifying troubled employees. The foreman in departments, like for instance in the workshop are responsible for identifying troubled employees, and in the dinning hall, the laundry and other sections, the head of section are considered to be responsible. This clearly shows that troubled employees are identified, but help is minimal to non-existence.

4.27. **THE VIEWS OF THE EMPLOYEES WITH REGARD TO THE TRAINING FOR THE PERSONNEL RESPONSIBLE FOR IDENTIFYING THE TROUBLE EMPLOYEES.** Question 3.2. – Annexure A

Table 4.27. Training for the personnel who identifies troubled employees.

Trained personnel	Frequency (N = 30)	%
Yes	2	7
No	18	60
Uncertain	10	33
Total	30	100

Discussion of table 4.27.

From this table it is evident that training is not provided to the people who are responsible for identifying troubled employees. This is supported by the 93% received from those who are uncertain and who indicated that no training is offered. The 7% which responded positively to this question might be referring to the other types of training on other aspects which are job related, but not EAP related. These results also indicate the need for an EAP in this organisation.

4.28. **THE EMPLOYEES' VIEWS CONCERNING THE METHODS USED TO IDENTIFY TROUBLED EMPLOYEES.** Question 3.3. Annexure A

Table 4.28. The methods used to identify troubled employees.

Method used for identification	Frequency (N-30)	%
Observation	18	60
Documentation	6	20
Referral	2	7
Self-report	3	10
Other	1	3
Total	30	100

Discussion of table 4.28.

This table indicates that most of the troubled employees are identified through observation (60%). The percentage on self-report (10%) concurs with table 4.26 where by employees are responsible for identifying themselves. The results may also show the inefficiency on the methods used by this organisation in identifying troubled employees. Documentation and referral are seldom applied in this area and this in itself proves the serious need for an EAP in this organisation.

SECTION 4: MODELS AND APPROACHES OF EAP.

4.29. EMPLOYEES' VIEWS ON HOW TO DEAL WITH THEIR PROBLEMS.

Question 4.1. Annexure A

Table 4.29 The Procedure followed by employees when experiencing problems.

Manner to deal with problems	Frequency (N=30)	%
Deal with it on my own	14	47
Consult the supervisor	4	13
Consult external resource	3	10
Consult internal resource	2	7
Other	7	23
Total	30	100

Discussion on table 4.29.

From this table it is evident that (47%) of the employees prefer to deal with problems on their own rather than consult with their supervisors, external and internal resources. Whereas 23% indicate that they prefer to seek help from other resources such as friends, pastors, marriage counselors, and private doctors. These results may imply that this organisation does not care much about the employee's problems. Everyone is responsible for getting his problem solved. These results show a desperate need for the implementation of EAP in this organisation.

4.30. THE EMPLOYEE'S FEELINGS WHEN THEY KNOW THAT PEOPLE ARE AWARE THAT THEY HAVE PROBLEMS

Question 4.2.- Annexure A

Table 4. 30.: The employees' feelings when they are aware that their problems are known to others.

Type of feelings	Frequency (N=30)	%
Good	0	0
Bad	14	46
Not bad	3	10
Ignore	3	10
Embarrassed	8	27
Not embarrassed	0	0
Other	2	7
Total	30	100

Discussion of table 4.30

From this table it is evident that quite a number of employees feels bad (46%) and embarrassed (27%) about their problems being made known to others. From this table it may be deduced that they prefer their problems to be treated with confidentiality. Only a few respondents indicated that they don't feel bad (10%) and some just ignored it (10%) when people are aware that they experience problems. It is therefore concluded that confidentiality should be highly considered in every helping relationship. This in itself emphasizes the need for an EAP trained to observe the element of confidentiality.

4.31. **THE EMPLOYEES' VIEWS CONCERNING HELP PROVIDED BY THE SUPERVISOR TO THE EMPLOYEES EXPERIENCING PERSONAL PROBLEMS.** Question 4.3. – Annexure A

Table 4.31. Help as provided by the supervisors.

Any Supervisor's Assistance	Frequency (N=30)	%
Yes	5	17
No	25	83
Total	30	100

Discussion of table 4.31.

From this table it is evident that most of the employees (83%) do not receive help from their supervisors, only 17% indicated that they do receive help from them. This might be due to the fact that some of the supervisors are not approachable, some have not shown interest in helping their supervisees, and some may feel that it is not part of their job description. On the other hand the problem might be that the employees themselves do not consult them for help, having doubt that they will receive proper help, or that their problems will be treated with confidentiality. It can therefore be concluded that EAP is needed in this organisation.

4.32. THE EMPLOYEE'S LEVEL OF SATISFACTION WITH THE WAY IN WHICH THEIR PROBLEMS ARE BEING ADDRESSED.

Question 4.4 - Annexure A

Table 4.32. Employees' satisfaction with the way in which problems are handled in this organisation

Satisfied	Frequency (N=30)	%
Yes	2	7
No	28	93
Total	30	100

Discussion of table 4.32.

In view of the results in this table it is evident that most (93%) of the employees are not satisfied with the manner in which their problems are being attended to. Only few (7%) of them responded positively in that they were satisfied with the manner in which the supervisors and social workers help them. It is therefore concluded that there is a serious need for an EAP this organisation.

4.33. EMPLOYEES VIEWS WITH REGARD TO THE METHODS OF DEALING WITH THEIR PROBLEMS.

Question 4.6 - Annexure A

Table 4.33. Methods of dealing with employees problems.

Method preferred in dealing with problems	Frequency (N=30)	%
Staff internal to the organisation	8	27
Staff external to the organisation	17	56
Combination of both	3	10
Not sure	2	7
TOTAL	30	100

Discussion of table 4.33.

From this table it is evident that more than 56% of the respondents prefer to consult staff external to the organisation. This might be due to the fact that, with the internal staff confidentiality is not guaranteed, unless they get assurance from the staff internal to the organisation. As indicated by Correl and Kurtzmits (1986: 392) that employees must be assured that all information about their problems will be kept confidential by the counsellor. Though consulting staff external to the organisation might be expensive and time consuming it is mostly preferred. Only 10% of the total number of respondents were comfortable with both; and 7% was uncertain. It may be concluded that EAP offices should be designed in a way that will suite the majority if not all employees.

SECTION 5: THE BENEFITS OF AN EAP

4.34. VIEWS OF EMPLOYEES CONCERNING THE USE OF EAP TO SOLVE PERSONAL PROBLEMS WHICH INTERFERE WITH THEIR JOB PERFORMANCE. Question 5.1 - Annexure A

Table 4.34: The use of EAP in dealing with personal problems

Use of EAP services	Frequency (N=30)	%
Yes	3	10
No	27	90
Total	30	100

Discussion of table 4.34.

According to this table, the use of EAP services is very low (10%). The reason behind this as indicated earlier in table 4.21 might be that it is not in existence in this particular organisation. Some employees were unable to understand the concept EAP during the interviews for it is a new concept to them. This led to some of them confusing the EAP services with the Social workers services. This in itself also showed the need to educate them about this concept and the benefits that are involved in utilizing it. The results further prove the relevancy of EAP in this organisation.

4.35. **THE EMPLOYEES' VIEWS CONCERNING THE FREQUENT USE OF EAP BY THE TROUBLED EMPLOYEES.** Question 5.2 - Annexure A

Table 4.35: The frequent use of EAP in this organisation.

Use of EAP services	Frequency (N=30)	%
Regularly	2	7
Sometimes	1	3
Not sure	2	7
Not at all	25	83
TOTAL	30	100

Discussion of table 4.35.

From the high response in this table, one may deduce that EAP is not available in this organisation to assist troubled employees with their personal and work related problems. Help provided by other professionals seem to be inadequate for the response shows that their help is utilized less frequently. From those who are receiving help, they indicated that help provided is determined by the type of problem experienced by the employee, mainly work related problems. Other problems, such as family, marital, financial, alcohol and other problems which the employees experience, do not receive adequate attention. This might be the reason why the employees do not perceive the available helping structures as relevant in addressing their problems. These results indicate the need to substitute current help provided to employees by means of an EAP.

4.36. **VIEWS OF EMPLOYEES WITH REGARD TO THE BENEFITS INVOLVED IN USING THE EAP** Question 5.3 - Annexure A

Table 4.36. Benefits involved in using EAP services

Response	Frequency (N=30)	%
Yes	2	7
No	28	93
TOTAL	30	100

Discussion of table 4.36.

From this table, one can observe that the high response (93%) is on the fact that the employees do not benefit at all from using EAP. The reason behind this maybe the fact that there is no EAP in place in this organisation. Some employees are still utilizing the Hospital Social Workers, Labour Relations Officers, Union representatives and supervisors to help them with their personal and work related problems that affect job performance. To those who responded positively to this question seem to be confusing the Employee Assistance Practitioner with other helping professionals. The lowest response rate also indicates that employees benefit at a minimal level from using the existing services. Findings also indicate a need for EAP in this organisation.

4.37. **THE VIEWS OF EMPLOYEES CONCERNING THEIR COLLEAGUES BENEFITING FROM USING THE EAP.** Question 5.4. Annexure A

Table 4.37. **Benefits involved in colleagues using EAP services**

Colleagues benefit from using EAP	Frequency (N=30)	%
Yes	1	4
No	4	13
Unknown	25	83
Total	30	100

Discussion of table 4.37.

From this table it is evident that there is some uncertainty (83%) concerning colleagues benefiting from the use of EAP. This might be because there is no EAP in this organisation. The 13% may know about the absence of EAP in this organisation, and only 4% seem to confuse other helpers with Employee Assistance Practitioners. This also emphasizes the need for EAP in this particular hospital.

SECTION 6: INFORMATION ON EAP

4.38. THE EMPLOYEES' VIEWS CONCERNING THE PAYMENT FOR INFORMATION TO BE PROVIDED BY THE ORGANISATION ABOUT EAP.

Question 6.1. - Annexure A

Table 4.38. Payment for information to be provided about EAP

Payment for information to be provided about EAP.	Frequency (N=30)	%
Yes	28	93
No	2	7
Total	30	100

This table indicates that 93% of the employees are prepared to pay for the services involved in receiving information on EAP. The results imply that the employees are willing and prepared to know more about EAP as it is said to benefit them and their families. The questionnaire might have brought to their attention that they don't understand quiet a number of issues involved with EAP. Furthermore for the fact that EAP is a new subject to them, and they need more information on it to broaden their understanding

4.39. **VIEWS OF EMPLOYEES CONCERNING THE METHODS PREFERRED IN RECEIVING INFORMATION ON EAP.** Question 6.2 - Annexure A

Table 4.39. Methods preferred in receiving information on EAP.

The type of methods preferred	Frequency (N=30)	%
Workshops	14	46
Meetings	2	7
Posters on notice boards	7	23
Newsletter	5	17
Other	2	7
Total	30	100

Discussion of Table 4.39.

This table indicates that the majority of employees prefer workshops as a way of getting more information on EAP. The reason for such a high response might be that workshops are more practical than meetings and other methods of information giving.

4.40. **VIEWS OF EMPLOYEES WITH REGARD TO OBTAINING MORE INFORMATION ON EAP.** Question 6.3. Annexure A

Table 4.40. Provision of more information on EAP

Response	Frequency	%
Yes	26	87
No	4	13
Total	30	100

Discussion of table 4.40.

The response from employees (87%) shows that there is a need to inform them more about EAP, how it functions, its goals and objectives, and the benefits involved in making use of it. This information is supported fully by table 4.25 by the way they view the relevance of EAP in this organisation. This implies that the EAP will be totally accepted and utilized by the troubled employees if it is introduced in the Jubilee Community Hospital.

SECTION 1: DEMOGRAPHIC DETAILS

4.41. GENDER OF THE SUPERVISORS AND MANAGEMENT OF THE JUBILEE COMMUNITY HOSPITAL:

- Question 1.1 - Annexure B
- Question 1.1 - Annexure C

Tables 4.41 Gender of respondents.

Gender	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Male	9	24	3	43
Female	28	76	4	57
Total	37	100	7	100

Discussion of table 4.41

This table indicates that the majority of Supervisors (respondents) are females (76%) and under the management females are also in the majority (57%) as compared to males. It is therefore concluded that females are in the majority in this hospital. The results may imply that the problems identified are mostly often experienced by females rather than males. These results lead the conclusion that

EAP services are more often needed to address the problems of the majority of females who are experiencing personal and work related problems.

4.42. DEMOGRAPHIC DETAILS OF SUPERVISORS AND MANAGEMENT:

- Question 1.2 - Annexure B
- Question 1.2 - Annexure C

Table 4.42. Age of Supervisors and Management

Age	Supervisors (N=37)		Management (N=7)	
	Number	%	Number	%
20-30	1	3	0	0
31-40	10	27	3	42
41-50	20	54	2	29
51-60	5	13	2	29
60 +	1	3	0	0
Total	37	100	7	100

Discussion table of 4.42

The supervisors and management responses were grouped together in one table. This table shows that the majority of supervisors fall between ages 31 – 50 which is (81%) whereas 100% of the management falls between ages 31 – 60 years. This shows that there are no members of the management team between ages 20 – 30 and who are above 60 years of age. This may imply that the majority of employees who are occupying higher positions have a long employment service in this organisation, and they are therefore aware of the employees problems, and the need for formal intervention.

4.43. MARITAL STATUS OF SUPERVISORS AND MANAGEMENT OF THE JUBILEE COMMUNITY HOSPITAL :

- Question 1.3 - Annexure B
- Question 1.3 - Annexure C

Table 4.43: Marital Status of the respondents:-

Marital Status	Supervisor (N = 37)		Management (N =7)	
	Number	%	Number	%
Single	8	22	2	29
Married	14	38	4	57
Separated	6	16	0	0
Widowed	6	16	0	0
Other	3	8	1	14
Total	37	100	7	100

Discussion of table 4.43

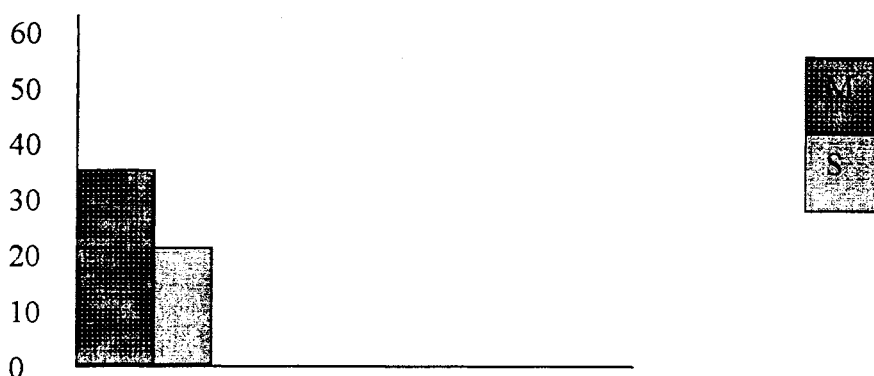
Data shows that the majority of the supervisors (62%) are not living as married couples. This is as a result of separation, widowhood, some are being deserted by their spouse and some are never married. Whereas with regard to the management the highest percentage shows that they are married. When linking this with the aspect of age, it can be concluded that most of the people at a later stage in life prefer to settle together as husband and wife rather than at an early age. This shows that the marital status in this organisation differs with age and position.

4.44. **DURATION OF EMPLOYMENT OF THE SUPERVISORS AND MANAGEMENT IN THIS ORGANISATION.**

- Question 1.4 - Annexure B
- Question 1.4 - Annexure C

Figure 4 The number of years the supervisors and management have worked in this organisation.

Duration



Discussion of figure 4

This figure indicate that the management have worked more than 30 years in this organisation, whereas supervisors have a long service also but 10 years lesser than that of the management. As indicated earlier, this organisation is older than thirty five years. It can therefore be concluded that those who have a long service hold senior positions in this organisation. It might imply that the supervisors and management can understand better the role that EAP would play if it is put in place in this organisation.

4.45. DEMOGRAPHIC DETAILS OF SUPERVISORS AND MANAGEMENT IN THE JUBILEE COMMUNITY HOSPITAL:

- Question 1.5 - Annexure B
- Question 1.5 - Annexure C

Table 4.45. Different positions held by supervisors and management.

Position held	Supervisor (N=37)		Management (N=7)	
	Number	%	Number	%
District manager	0	0	1	14
Assistant director	5	14	1	14
Matron	5	14	1	14
Chief social worker	22	60	2	30
Chief admin officer	2	5	1	14
Other	3	7	1	14
Total	37	100	7	100

Discussion of table 4.45

Data obtained from the supervisors and management from various sections of this organisation who were selected as the respondents in this research study. The chief Social Workers showed a high response rate among supervisors (60%) as compared to the management (30%).

There is no any response rate received from the district manager 0% among the supervisors. Only 14% from the management, which is also the lowest.

A high response rate implies that the respondents were quite co-operative and eager to get more information on ways of dealing with employee's problems. It also indicate a positive attitude of the authorities towards reviewing its methods of helping the employees deal with their problems. The management was free to

discuss it's views generally after they have completed the questionnaire. This may imply that they gradually turn to see the need for an EAP in this organisation.

4.46. LENGTH OF SERVICE OF THE SUPERVISORS AND MANAGEMENT IN THE JUBILEE COMMUNITY HOSPITAL.

- Question 1.6 - Annexure B
- Question 1.6 - Annexure C

Table 4.46. The length of service in the position you are holding

Length of service	Supervisors (N = 37)		Management (N=7)	
	Number	%	Number	%
0 - 5 yrs	0	0	0	0
6 – 10 yrs	3	8	0	0
11 – 15 yrs	7	19	0	0
16 – 20 yrs	23	62	2	29
21 ⁺ yrs	4	11	5	71
Total	37	100	7	100

Discussion of table 4.46

This table shows that majority (81%) of the employees in the supervisory position have a long service. Their length of service ranges from 11 – 20 years. Whereas 100% of the management have their length of service ranging from 16 to 21 years. This may imply that the promotion of the employees in this organisation to the top positions is mainly determined by the period they spend in this particular organisation. The eight percent on the site of the supervisors may be comprising of those supervisors who were transferred into this hospital or who applied for a supervisors post, with regard to EAP this may imply that most of the supervisors and management are aware of the personal and work related problems which are experienced by the majority of employees. It can therefore be concluded that both

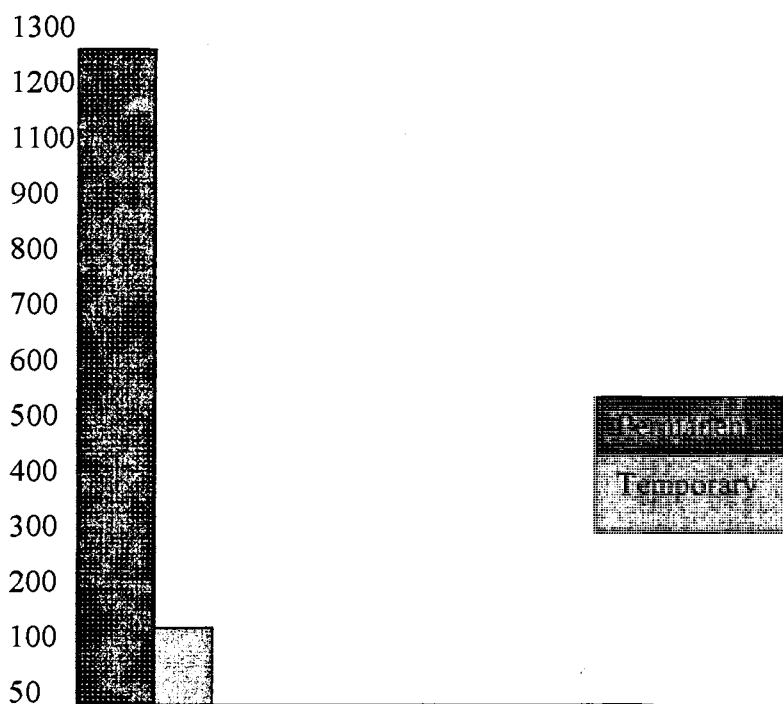
supervisors and the management are the relevant people to can motivate for the inception of EAP in this particular organisation.

4.47. THE TOTAL NUMBER OF EMPLOYEES IN THE JUBILEE COMMUNITY HOSPITAL

Question 1.7 - Annexure B

Question 1.7 - Annexure C

Figure 5: Number of employees in the Jubilee Community Hospital.



Discussion of figure 5

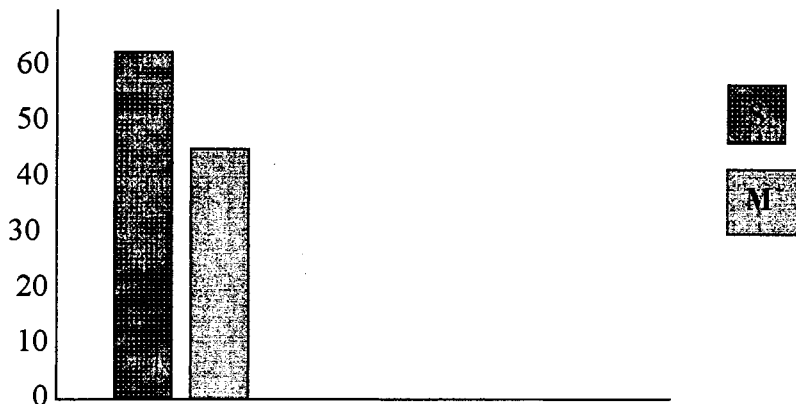
This figure clearly indicates that the number of employees in the permanent post is ± 1250 , and 100 of them are employed on temporary conditions. Therefore the majority of employees in this organisation are standing a chance of benefiting from EAP services, for they are employed on permanent basis.

4.48. **VIEWS OF THE SUPERVISORS AND MANAGEMENT WITH REGARD TO THE TOTAL NUMBER OF EMPLOYEES THEY ARE ACCOUNTABLE FOR.**

Question 1.8 - Annexure B

Question 1.8 - Annexure C

Figure 6 Number of employees you are accountable for



Discussion of figure 6

Most of the supervisors indicated that they are accountable for more than 60 supervisees. Employees are categorized according to various sections or departments in the hospital. One or two supervisors are accountable for each section. This will enable them to can identify troubled employees after they have received the relevant training with regard to the identification of troubled employees. The management oversees the whole sections and they don't have direct contact with most of the employees but mainly with the supervisors. They are generally accountable to every employee in this organisation. It can therefore be concluded that supervisors in this hospital are standing a good chance of being able to function effectively in facilitating referral of employees to EAP.

SECTION 2: GOAL AND THE NEED FOR AN EAP

4.49. SUPERVISORS AND MANAGEMENT VIEWS CONCERNING PERSONAL AND WORK RELATED PROBLEMS AS EXPERIENCED BY EMPLOYEES.

Question 2.1 - Annexure B

Question 2.1 - Annexure C

Table 4.49 Employee personal and work related problems

	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Do employees experience personal work related problems				
Yes	36	97	5	71
No	0	0	0	0
Unknown	1	3	2	29
Total	37	100	7	100

Discussion of table 4.49

This table indicates that both the supervisors and the management agrees that employees experience personal and work related problems. The supervisors have a high response rate of (97%) mainly due to the fact that they have a close contact with their supervisees and therefore they are in a position to can detect the problems that exist. Thus the reason why supervisors in EAP are viewed as very essential when coming to the identification of the troubled employees. The management come to realize that employees have both personal and work related problems at a later stage especially when they start to impact on job performance and they need disciplinary enquiry. Employees problems might be as a result of the inefficiency of the methods used by the organisation in helping the troubled

employees to solve their problems. The high rate of problems shows that there is a serious need for an EAP in this organisation.

4.50. SUPERVISORS AND MANAGEMENT VIEWS ON THE TYPE OF PROBLEMS IDENTIFIED AMONGST THE EMPLOYEES

Question 2.2 - Annexure B

Question 2.2 - Annexure C

Table 4.50 The type of problems identified by supervisors and Management amongst employees

Type of problems identified amongst employees	Supervisors (N =37)		Management (N = 7)	
	Number	%	Number	%
Marital	10	27	2	29
Family	13	35	2	29
Drug Abuse	2	5	1	14
Alcohol abuse	5	14	1	14
Legal	7	19	1	14
Total	37	100	7	100

Discussion of table 4.50

From this table it is apparent that problems identified by both supervisors and management are mainly marital and family problems. This may imply that employees can't afford to live their problems at home when coming to work, they carry them along and this shows that there must be a policy with regard to the assistance of troubled employees. The lowest response rate under the column of supervisors might mean that some of the employees have fears of telling someone about the problems they are experiencing. The problems as identified by the supervisors and the management as being most prevalent in this

organisation falls squarely within the help provided by the EAP functions. It is therefore concluded that EAP be established in this particular organisation, to assist the troubled employees.

4.51. VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO PROBLEMS IDENTIFIED AMONGST THEIR SUPERVISEES:

- Question 2.3 - Annexure B
- Question 2.3 - Annexure C

Table 4.51. Problems amongst Supervisees

Type of Problem	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Emergency absence	10	27	5	71
Alcohol Abuse	4	11	2	29
Sick leave abuse	8	22	4	57
Incomplete Assignments	6	16	2	29
Marital Problems	7	19	3	43
Accidents	2	5	1	14
Drug Abuse	2	5	1	14
Tardiness	3	8	1	14
Other	2	5	0	0

Discussion of table 4.51

The respondents had more than one option to choose from, therefore the total number of responses exceeds the actual number of respondents. According to this table, the respondents identified emergency absence, and sick leave abuse as the major problems amongst the supervisees. This in itself shows that absenteeism is a serious problem in this organisation and therefore productivity is affected. There is a serious need for an EAP in this organisation to assist employees with

personal and work related problems which lead to a high rate of absenteeism and sick leave abuse. The highest response of marital problems (43) concurs with table 4.43 on the marital status of the management which is the highest.

4.52. SUPERVISORS AND MANAGEMENT VIEWS ON WHETHER THE ABOVE MENTIONED PROBLEMS AFFECT EMPLOYEES JOB PERFORMANCE

Question 2.4 - Annexure B

Question 2.4 - Annexure C

Table 4.52. The above mentioned problems and whether they affect job performance.

	Supervisor (N= 37)		Management (N = 7)	
	Number	%	Number	%
Do employees problems affect their job performance				
Yes	35	95	7	100
No	0	0	0	0
Uncertain	2	5	0	0
Total	37	100	7	100

Discussion of table 4.52

This table shows that both the supervisors (95%) and the management (100%) are fully convinced that employees personal and work related problems have a negative influence on the employees' job performance. These findings also prove the need for an EAP in this organisation.

4.53. **SUPERVISORS AND MANAGEMENT VIEWS ON WHETHER THE ORGANISATION ASSIST EMPLOYEES IN SOLVING PROBLEMS WHICH AFFECT THEIR JOB PERFORMANCE OR NOT.**

Question 2.5 - Annexure B

Question 2.5 - Annexure C

Table 4.53 Organisation's assistance to troubled employees

Any assistance from the organisation	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	9	24	1	14
No	28	76	6	86
Total	37	100	7	100

Discussion of table 4.53

From this table it is evident that both supervisors and management agree to the fact that the help provided to the troubled employees is minimum. This may imply that the help that troubled employees are receiving is inefficient for it is provided by people who are not skilled to do this job. Furthermore, for the fact that they are fully aware of the fact that there is no formal policy set in place to address the social problems of the employees. Only union representatives are there to assist employees (their affiliates only) with unfair labour practices, and the medical social worker employed to assist patients in the hospital. The low response rate from both the supervisors and the management shows that there is a need for an EAP in this particular organisation.

4.54. SUPERVISORS AND MANAGEMENT VIEWS ON THE EFFECTS OF EMPLOYEES PROBLEMS ON JOB PERFORMANCE:

- Question 2.6 - Annexure B
- Question 2.6 - Annexure C

Table 4.54: The effects of problems on job performance.

The type of effect	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Lead to more costs on the organisation	19	51	6	83
Poor production	15	43	5	71
Law suits by employees	1	3	0	0
Dismissal of valuable employees	5	14	5	71
Other	2	5	1	14

Discussion of table 4.54

The supervisors and the management were allowed to respond more than once, therefore the total number of responses exceeds the actual number of respondents. This table indicates that both the management and the supervisors identified the effects of problems on the job as being more costly to the organisation and thus lead to poor production. The management further identified dismissal of valuable employees (71%) and poor productivity (71 %) as having a serious effect on this organisation. This shows the desperate need for an EAP to improve the conditions as experienced in this organisation.

4.55. VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING THE NEED FOR A FORMAL POLICY ON ASSISTANCE OF TROUBLED EMPLOYEES:

- Question 2.7- Annexure B
- Question 2.7 -Annexure C

Table 4.55: Formal policy regarding the assistance of troubled employees

Need for a formal policy	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	32	86	6	86
No	5	14	1	14
Total	37	100	7	100

Discussion of Table 4.55

This table shows that both the supervisors (86%) and the management (86%) equally sees the need for a formal policy with regard to the assistance of troubled employees. Co-incidentally both their responses to this question are similar; which imply that EAP is equally important to them to can assist troubled employees in this organisation. It can therefore be concluded that the supervisors and management sees the need for an EAP in this particular hospital.

4.56. SUPERVISOR AND MANAGEMENT VIEWS WITH REGARD TO THE AVAILABILITY OF EAP IN THE JUBILEE COMMUNITY HOSPITAL:

- Question 2.8 - Annexure B
- Question 2.8 - Annexure C

Table 4.56: Availability of EAP in this Organisation

Availability of EAP	Supervisor (n = 37)		Management (n = 7)	
	Number	%	Number	%
Yes	0	0	0	0
No	37	100	7	100
Total	37	100	7	100

Discussion of table 4.56

From this table it is evident that there is no Employee Assistance Programme available in this organisation. The supervisors and the management are fully aware of the fact that there is no EAP in this organisation to address the problems of the employees. During the interview with them it was deduced that they are also aware of the need for a formal policy with regard to addressing the employees problems.

Lack of Employee Assistance Programme in this Organisation lead to certain questions been left unanswered by both the supervisors and the management. The results obtained from this table support the statement of the research study as stated in page 5 of this report.

4.57. VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING PERSONNEL INVOLVED IN HELPING TROUBLED EMPLOYEES SOLVE THEIR PROBLEMS:

- Question 2.9-Annexure B
- Question 2.9-Annexure C

Table 4.57: Personnel helping troubled employees.

Personnel helping troubled employees	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Social worker	24	65	5	72
Doctor	3	8	1	14
Nurse	2	5	0	0
Clinical Psychologist	0	0	0	0
Employee Assistance Practitioner	0	0	0	0
Other	8	22	1	14
TOTAL	37	100	7	100

Discussion of table 4.57

This table indicates that the people involved in helping the troubled employees fall mostly under the category of a “social worker” for both supervisors (65%) and management (72%). It was realized during the interview that this category includes social worker, in the neighbourhood. Doctors and Nurses are trying to help but at a minimum level. These results also indicate the need for an EAP in this organisation, for even though social workers are of assistance but they are not trained Employee Assistance Practitioners.

4.58. **SUPERVISORS AND MANAGEMENT VIEWS ON THE TRAINING OF COUNSELORS WHO FORM PART OF PERSONNEL STAFF COMPONENT.**

Question 2.10 - Annexure B

Question 2.10 - Annexure C

Table 4.58 Training of Counselors who form part of personnel staff component.

Counselors trained	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	7	19	2	29
No	30	81	5	71
Total	37	100	7	100

Discussion of table 4.58

From this table it is evident that minimum training is been offered to counselors who form part of personnel staff. For the fact that both the supervisors and the management were requested to specify the type of training, and it was clear that the type of training did not equip the counselors to be perceived as EAPs. From their responses the type of training entails personal enrichment and staff development issues. This training does not prepare them to be specialist in helping the troubled employees. Therefore there is a need for an EAP co-ordinator who will be more skilled in dealing with the employees problems.

4.59. **VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO THE ACCESSIBILITY OF THE TROUBLED EMPLOYEES TO THE EAP OFFICES**

Question 2.11- Annexure B

Question 2.11- Annexure C

Table 4.59 The accessibility of EAP offices to the troubled employees.

EAP offices accessible	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	0	0	0	0
No	0	0	0	0
Not Applicable	37	100	7	100
Total	37	100	7	100

Discussion of table 4.59

From this table it is evident that there is no Employee Assistance Programme in this organisation for both the supervisors and the management are able to differentiate between social workers, union representatives, Doctors, Counselors and Labour relations Officer rendering counseling services and an Employee Assistance practitioner, unlike the employees who confused these professionals with an EAP. This table concurs with table 4.56 which shows that there is no EAP in this hospital. It is therefore concluded that there is a need for an EAP in this Hospital.

4.60. **MANAGEMENT VIEWS WITH REGARD TO THE CONSULTATION OF THE LABOUR FORCE WHEN FIRST DESIGNING THE EAP FOR THE FIRST TIME IN THE ORGANISATION.**

Question 2.12-Annexure C

Table 4.60. Consultation with labour force when EAP was first designed.

Consultation with labour force	Management (N = 7)	
	Number	%
Yes	0	0
No	0	0
Uncertain	7	100
total	7	100

Discussion of table 4.60

The management were the only ones expected to respond to this question, the reason being that their level of authority and responsibility differs from that of the supervisors. They are the ones mostly expected to take initiative in suggesting the relevant programmes to the top management or to the employer. This table shows that the labour force was never consulted with the issue of designing an EAP. The reason might be that the management never thought of designing EAP for this organisation before. The other reason might be that this research study was an eye opener to them for during the interview they showed a huge interest in getting EAP in place in this particular organisation. It is therefore concluded that EAP be established in consultation with other stakeholders in this hospital.

4.61. **SUPERVISORS AND MANAGEMENT VIEWS WITH REGARD TO CONSULTATION WITH UNION SHOP STEWARDS WHEN EAP WAS FIRST DESIGNED.**

Question 2.13 -Annexure B

Question 2.13 -Annexure C

Table 4.61. Consultation with the union shop steward when EAP was first designed.

Consultation with the union shop stewards	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	0	0	0	0
No	32	86	6	86
Uncertain	5	14	1	14
Total	37	100	7	100

Discussion of table 4.61.

From this table it can be observed that the union shop stewards were never consulted with regard to designing an EAP. This may imply that the establishment of EAP was never thought of by both the Supervisors and the Management as it seem to be a new subject in this organisation. It can therefore be concluded that EAP be designed in this organisation in consultation with the union shop stewards.

SECTION 3: IDENTIFICATION OF TROUBLED EMPLOYEES

4.62. VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO THE PERSONNEL RESPONSIBLE FOR IDENTIFYING TROUBLED EMPLOYEES:

- Question 3.1 - Annexure B
- Question 3.1 - Annexure C

Table 4.62: Personnel responsible for identifying troubled employees

Personnel responsible for identifying troubled employees	Supervisor (N= 37)		Management (N=7)	
	Number	%	Number	%
Supervisor	20	54	6	86
Manager	8	22	1	14
Employees themselves	2	5	0	0
None of the above mentioned	4	11	0	0
Other	3	8	0	0
Total	37	100	7	100

Discussion of table 4.62

From this table it is evident that the supervisors are the ones responsible for identifying troubled employees in this organisation. The management (86%) supported this fact of supervisors being responsible for identifying troubled employees. The Employees (5%) seldom identify themselves when experiencing problems and therefore the conclusion can be made from this table that supervisors in this organisation are the ones responsible for identifying troubled employees. This is supported by the discussion of table 4.49 which emphasises the role of the supervisor in the EAP. The need for an EAP is overemphasizes in this particular organisation.

4.63. **VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING TRAINING OF THOSE WHO ARE RESPONSIBLE FOR IDENTIFYING TROUBLED EMPLOYEES:**

- Question 3.2 - Annexure B
- Question 3.2 - Annexure C

Table 4.63: Training for the personnel who identify troubled employees.

Is training necessary for the personnel who identify troubled employees	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	35	95	5	71
No	2	5	2	29
Total	37	100	7	100

Discussion of table 4.63

In this question the respondents were questioned about the need for training of those who identify troubled employees. From this table it is evident that both the supervisors (95%) and the management (71%) are of the opinion that training be provided to those who are responsible for the identification of the trouble employees. Identification of troubled employees is crucial in EAP and it requires trained personnel to conduct it successfully. These results also indicate the need for an EAP in this organisation.

4.64. **VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING THE METHODS USED IN IDENTIFYING TROUBLED EMPLOYEES:**

- Question 3.3- Annexure B
- Question 3.3 -Annexure C

Table 4.64: Methods used in identifying troubled employees

Methods used in identifying troubled employees	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Observation	27	73	5	71
Documentation	2	5	1	14
Referral	2	5	1	14
Self reports	1	3	1	14
Other	8	22	2	29

Discussion of Table 4.64

The respondents had more than one option to choose from. From the supervisors responses this table shows that observation (73%) is more often applied in identifying troubled employees. Whereas self report is the least preferred methods. This is confirmed by table 4.62, whereby employees seldom identify themselves when experiencing problems. Documentation is also least applied by those people who are responsible for identifying troubled employees and thus it is difficult to assess the improvement of these employees in terms of how they deal with problems that affect job performance or to have a written prove that an employee had a problem that needed intervention of some sort. The management is also of the opinion that observation (71%) is mostly preferred in identifying troubled employees. Other methods such as documentation, referral, and self reports are rarely applied during identification of troubled employees. The results

may also indicate the inefficiency of methods used by the supervisors and the management in this organisation to help troubled employees. These results call for the implementation of EAP in this organisation.

4.65. VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING THE PROCEDURE THEY FOLLOW AFTER THE TROUBLED EMPLOYEES HAVE BEEN IDENTIFIED:

- Question 3.4- Annexure B
- Question 3.4- Annexure C

Table 4.65. Procedure followed by the Supervisors and the management after the identification of the troubled employees.

Procedure followed after identification of troubled employees	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Assessment	8	22	2	28
Refer to internal resource	19	51	4	57
Refer to external resource	1	3	1	14
Disciplinary	15	43	3	43
Other	0	0	1	14

Discussion of table 4.65

The respondents were allowed to choose more than one option. This table indicates that the procedure most commonly followed by both management and supervisors after identifying troubled employees is referral to internal resources and disciplinary procedures. The results shows that though the organisation does not have a trained personnel to assist the troubled employees, they do not prefer to refer to the external resources. They rely on the internal resources which is mainly

the untrained staff. It can therefore be concluded that there is a serious need for an EAP within this organisation.

SECTION 4: MODELS OF EAP

4.66. VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO THE RESOURCES UTILISED BY THE ORGANISATION FOR HELPING THE TROUBLED EMPLOYEES:

- Question 4.1- Annexure B
- Question 4.1- Annexure C

Table 4.66 Resources utilised by the organisation to help troubled employees.

Resources utilised to assist troubled employees	Supervisor (n = 37)		Management (n = 7)	
	Number	%	number	%
External resources	2	5	1	14
Internal resource	30	81	5	72
Both resources	3	8	1	14
None of the above	1	3	0	0
Other	1	3	0	0
Total	37	100	7	100

Discussion of table 4.66

This table indicates that the internal resources are mostly preferred for helping troubled employees deal with their problems. This is also confirmed by table 4.65 which shows that the management and supervisors prefers to refer troubled employees to internal resources rather than external ones. It is therefore

concluded that internal resources are commonly utilised in this organisation. This implies that EAP model which is mostly suitable in this organisation is the internal model. The need for an EAP which will be suitable in this particular organisation is also emphasized. The results also support the need for an EAP which will be most accessible to the employees in this particular organisation.

4.67. VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO THE PERSON WHO WILL BE RESPONSIBLE FOR THE PAYMENT OF TREATMENT COSTS.

- Question 4.2 -Annexure B
- Question 4.2 -Annexure C

Table 4.67 The person who will be responsible for the payment of treatment costs.

The one who will be responsible for payment of treatment costs.	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
The organisation	30	81	0	0
Troubled employees	4	11	5	71
Both the employees and the organisation	2	5	2	29
The union	1	3	0	0
Other	0	0	0	0
Total	37	100	7	100

Discussion of table 4.67

From this table it is evident that the supervisors and the management views concerning the issue of payments differs greatly. The supervisors (81%) feels that the organisation should be responsible for the payment of the EAP services,

though only 3% which is the lowest percent feels that the union should pay for such a service. The reason might be that employees are affiliated to unions and they contribute R20 on monthly basis towards that membership. On the contrary the management (71%) feels that the employees themselves should pay for EAP services as it is to their benefit, lest the government subsidises them on what they are paying. It is therefore concluded that the issue of payment with regard to EAP should be seriously discussed with the top management and the employer.

SECTION 5: BENEFITS OF EAP

4.68. VIEWS OF THE SUPERVISORS AND THE MANAGEMENT WITH REGARD TO THE BENEFITS INVOLVED IN UTILIZING THE EAP:

- Question 5.1 - Annexure B
- Question 5.1 - Annexure C

Table 4.68. The benefits involved in making use of the EAP

Benefits involved in using the EAP	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Improvement of employee's morale	6	16	5	71
Minimise time of discipline	10	27	6	86
Retain well trained employees	28	76	3	43
Improvement of productive employees	4			
	20	54	4	57
Avoid law suits by employee	1	3	1	14
Reduction of costs	3	8	2	29

Discussion of table 4.48

The respondents had more than one option to choose from. In view of the results in this table it is evident that the supervisors and the management views the benefits of EAP to the organisation differently. The management view help offered to the troubled employees as minimizing time of discipline (86%) and also as improving the employees morale (71%) whereas the supervisors view it as working towards retaining well trained employees (76%) and the improvement of productivity (54%). The results concur with the aspects inclined when stating the aims of EAP (see p.5). These results also prove the relevance of EAP in this particular organisation.

4.69. VIEWS OF SUPERVISORS AND MANAGEMENT WITH REGARD TO EAP PROTECTING THEM FROM BEING INVOLVED IN EMPLOYEE'S PERSONAL PROBLEMS.

Question 5.2 - Annexure B

Question 5.2 - Annexure C

Table 4.69 EAP protecting supervisors and management from being involved with employees personal problems.

EAP protecting them from being involved in personal problems	Supervisor (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	35	94	7	100
No	1	3	0	0
Uncertain	1	3	0	0
Total	37	100	7	100

Discussion of table 4.69

From this table it is evident that both the supervisors and the management are fully aware of the fact that the inception of EAP in this organisation will save them from intervening when supervisees or employees are experiencing personal problems especially. They further indicated that this involvement in employees problems form a barrier when coming to supervision for the supervisees expect them to be more understanding or to compromise when the job is not done. Only 3% were not certain as to whether EAP will protect them or not. This emphasizes the need for an EAP in this organisation. The reason might be that they are not aware of the functions of EAP and it's benefits to the supervisors and the management.

4.70. VIEWS OF SUPERVISORS AND MANAGEMENT AS TO WHETHER THEY SEE EMPLOYEES BENEFITING FROM THE USE OF EAP OR NOT.

Question 5.3 - Annexure B

Question 5.3 - Annexure C

Table 4.70 Employees benefiting form using the EAP

Employees benefit from using EAP	Supervisors (N=37)		Management (N=7)	
	Number	%	Number	%
Yes	0	0	0	0
No	35	95%	6	86
Unknown	2	5	1	14
Total	37	100	7	100

Discussion of table 4.70

From this table it is apparent that both the management and the supervisors does not see employees benefiting from using EAP. The high response may imply that the respondents put double meaning to this question. Some thought the question is based on the prevailing situation, whereas other looked into the future benefits of EAP. Nevertheless the high response shows that there is no EAP in this particular organisation, and some of the respondents are unable to tell whether it is of benefit to them or not. This is supporting the fact that there is no EAP available in this organisation, it is thus concluded that there is a need for an EAP to be put in place, to benefit the employees, the supervisors, the management, their families and the community at large.

SECTION 6 MARKETING OF EAP

4.71. VIEWS OF SUPERVISORS AND MANAGEMENT ON WHETHER THE ORGANISATION CONSIDERS IT WORTHWHILE TO ATTRACT TROUBLED EMPLOYEES TO EAP OR NOT.

Question 6.1 - Annexure B

Question 6.1 - Annexure C

Table 4.71. The organisation considering it worthwhile to attract the troubled employees to EAP

Worthwhile to attract troubled employees to EAP	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	37	100	7	100
No	0	0	0	0
Total	37	100	7	100

Discussion of table 4.71

Both the supervisors and management feels that for an EAP to be fully utilized, people must be attracted to it. It is therefore concluded that prior to the inception of EAP in an organisation, it should be well advertised to the employees, and to others who will benefit from it.

4.72. VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING THE METHOD USED TO ATTRACT THE TROUBLED EMPLOYEES TO AN EAP.

Question 6.2. - Annexure B

Question 6.2. - Annexure C

Table 4.72 The method used to attract the troubled employees to an EAP

Type of method used to attract troubled employees to an EAP	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Organisation's News letter.	25	67	4	58
Posters on notice boards	1	3	0	0
Letters to the families	10	27	2	28
Notice attached to	1	3	1	14

payslips				
Other	0	0	0	0
Total	37	100	7	100

Discussion of table 4.72

From this table it is evident that both the supervisors and the management feels that the most suitable method to can attract the employees to the EAP is through the organisation's newsletters. Posters on notice boards and notices attached to pay slips are the least valued methods to can attract the troubled employees, for notice boards are being ignored and the notices attached to the payslip according to them are not that effective; they are easily dismissed by the employees.

SECTION 7: REINTEGRATION OF EMPLOYEES

4.73. THE VIEWS OF SUPERVISORS AND MANAGEMENT CONCERNING THE REINTEGRATION OF EMPLOYEES WHO HAVE COMPLETED TREATMENT INTO THE WORK SITUATION.

Question 7.1 - Annexure B

Question 7.1 - Annexure B

The information obtained from the management and the supervisors indicates that there is no formal policy with regard to the assistance of troubled employee. There is no treatment specifically designed to assist them. Therefore 100% from both sides could not answer this question effectively for there is no EAP in this particular hospital. These results call for the implementation of an EAP in this organisations.

SECTION 8 INFORMATION ON EAP

4.74. THE VIEWS OF SUPERVISORS AND MANAGEMENT ON THEIR INTEREST WITH REGARD TO RECEIVING INFORMATION ON EAP.

Table 4.74 Interest in obtaining more information on EAP

Interested in obtaining more information on EAP	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Yes	37	100	7	100
No	0	0	0	0
Total	37	100	7	100

Discussion of table 4.74

The result shows that both the management and the supervisors are keen to receive more information on EAP. Most of them indicated during the interview that they have got little information on EAP and that's the reason why they would like to increase their knowledge on EAP. This implies that the EAP will be mostly is accepted by the senior people in this hospital.

**4.75. FORMAT PREFERRED FOR RECEIVING EAP INFORMATION:
(SUPERVISORS AND MANAGEMENT VIEWS)**

- Question 8.2 - Annexure B
- Question 8.2 - Annexure C

Table 4.75: Format preferred for receiving EAP information

Type of format preferred	Supervisors (N = 37)		Management (N = 7)	
	Number	%	Number	%
Literature	10	27	2	29
Practical workshop	17	46	4	57
In-service training	6	16	1	14
Consultancy services	1	3	0	0
Other	3	8	0	0
Total	37	100	7	100

Discussion of table 4.75

Data indicates that both the supervisors and the management prefer mostly practical workshop and literature as a way of receiving more information on EAP. Consultancy services is the least preferred method. The high response also shows that there is a need to know more about Employee Assistance Programme in this organisation.

4.76. **WILLINGNESS TO PAY FOR THE INFORMATION RECEIVED ON EAP: SUPERVISORS AND MANAGEMENT VIEWS :**

- Question 8.3 - Annexure B
- Question 8.3 - Annexure C

Table 4.76: Payment to receive information on EAP

	Supervisors (N = 37)		Management (N = 7)	
Willingness to pay	Number	%	Number	%
Yes	28	76	6	86
No	9	24	1	14
Total	37	100	7	100

Discussion of table 4.76

This table shows that both supervisors and management are prepared to pay for the services involved in providing information on EAP. It is therefore concluded that both the management and the supervisors are keen to receive information on this subject, and they are also prepared to pay. These results may also imply that through the provision of information on EAP the methods used to assist troubled employees will be reviewed. The need for EAP in this regard is more overemphasized.

SUMMARY

In this chapter the researcher presented data gathered from the employees, supervisors and management through the use of questionnaires, personal interviews informal conversations and observations. The data is also analysed and interpreted with the aim of

generating findings that will answer the question”. Do failure to attend to the employees social problems prove the need for an EAP?” as stated in the research question of the research study (Chapter 1 see p.5). What the researcher has deduced from the information gathered is that the absence of EAP in this organisation led to most of the employees problem left unattended. Tables 4.21 – 4.25 & 4.56 & 4.59 confirms the unavailability of EAP in the Jubilee Community Hospital. Furthermore the absence of EAP led to some of the questions been left unanswered or partially answered during data collection. The findings under this chapter were essential to help the researcher come to conclusions on this subject and possible recommendations which are discussed in the proceeding chapter.

CHAPTER 5

5. CONCLUSION AND RECOMMENDATIONS

5.1. INTRODUCTION

The main purpose of this study was to assess the need for an Employee Assistance Programme in the Jubilee Community Hospital. Problems experienced by the employees and their effects on the organisation were identified. The researcher also focused on the methods utilised in this organisation to assist troubled employees. Focus is also on the conclusions and recommendations based on the findings of the study. Therefore, conclusions are drawn and recommendations made as follows:-

5.2. CONCLUSIONS AND RECOMMENDATIONS

5.2.1. Goals and the need for EAP

5.2.1.1. *Conclusion*

From the information analysed earlier, it has been noticed that there are a number of indicators that point to deteriorating work performance. This is marked by problems such as experienced by employees in this organisation, examples of which are, excessive absenteeism, family and marital problems, substance abuse, sick leave abuse and incomplete assignments. These problems are costly for the organisation because they lead to poor production. Even though help is provided to the troubled employees, it is still insufficient since it is offered by untrained staff members as indicated earlier under table 4.22. The staff members who are

offering help are just volunteers who are not trained to assist troubled employees to solve their personal nor work related problems. Union representatives focus mainly on unfair labour practice and disregard personal and other work related problems. This leads to employees problems being partially attended to or not unattended at all. The situation in this organisation dictates that someone provide a professional help to the troubled employees. This, therefore, implies that there is a need for an Employee Assistance Programme in this organisation which will ensure that employees' social problems receive professional attention.

5.2.1.2. Recommendations

On the basis of the above information, the researcher recommends that :-

- The organisation be encouraged to acknowledge the effectiveness of EAP in helping troubled employees, and thus accept it as part of their programme.
- There be a formal policy regarding the assistance of troubled employees.
- EAP be implemented to address the social problems of employees. Thus the EAP need to be taken into serious consideration by different organisations including the Government.
- EAP be made available to all employees and their dependants since family problems can adversely affect the performance of employees.
- Employees, Supervisors, Members of Management and Union Representatives be well informed about the EAP.

5.2.2. Identification of Troubled Employees

5.2.2.1. Conclusion

It is evident that the troubled employees are identified by the supervisors, mainly through the methods of observation (see table 4.62 and 4.64). The management seldom identifies the troubled employees for they do not directly interact with them. Troubled employees also seldom referring themselves to the available resources in order to seek for help. Self-referrals are viewed as a good method for it enhances the opportunity for early intervention and possible solutions to the problem. Training is usually offered to senior personnel instead of those responsible for identifying the troubled employees. Those identified troubled employees, are often given very little help due to the absence of EAP in the organisation.

5.2.2.2. Recommendations

The researcher recommends that supervisors be tasked with the responsibility of identifying the troubled employees, since they are expected to render supportive supervision to their supervisees. Training be provided to those supervisors, to enable them to offer the kind of assistance as may be required of them. EAP be established to enable them to refer identified employees.

5.2.3. **Models and Approaches of an Employee Assistance Programme.**

5.2.3.1. *Conclusion*

The free service is offered by internal resources, which include social workers, nurses, doctors, union representatives and the labour relations officers and others. The internal model, as compared to the external model, is more often preferred by the supervisors, management and some employees (see table 4.66). This indicates that the model is suitable for this organisation since it is cost effective and always saves time. In addition employees may feel more confident with inhouse staff because they believe they are more familiar with the organisation and understand the type of problems they are facing with. Though on the other hand when the EAP is part of the hospital system, the hospital staff may be skeptical about the staff's ability to maintain confidentiality; and also the fact that EAP will be too vulnerable to political struggles within the organisation and overly involved in political controversies. Supervisors and management seem to prefer the internal model to the external model for it is cost effective and it also saves time; whereas the employees prefer the external model for they seem to be overly concerned about the issue of confidentiality.

5.2.3.2. *Recommendations*

The researcher recommends that the combination approach be adopted. This approach may be helpful, for it divides responsibility for the initial programme development, the assessment and the referral functions among in-house staff,

and the external provider. The hospital should appoint a qualified counsellor or staff member who can be trained to perform the EAP assessment and referral functions.

5.2.4. The benefits of an Employee Assistance Programme

5.2.4.1. Conclusion

From the above information it is evident that the Employee Assistance Programme is the best method to deal with a broad range of employee problems, which affect the employee's well-being, behaviour and performance capacity on the job. Therefore EAP implementation can benefit, the supervisors, the management, the organisation, the employee, his/her family, and the community at large, for it improves the service standards.

5.2.4.2. Recommendations

It is thus recommended that EAP be established and implemented in this organisation to benefit the above mentioned systems which forms part of the organisation.

5.2.5. Marketing of the EAP

5.2.5.1. Conclusion

Jubilee Community Hospital does not have EAP in place. Most of the employees, supervisors and management staff are not sure about what it entails.

5.2.5.2. *Recommendations*

It is therefore recommended that EAP be put in place in this organisation, whilst the supervisors and management play an important role in educating the employees, union representatives, and all other structures found within the organisation about what EAP entails. It is further recommended that the following methods be used to educate the employees about EAP:- practical workshops, in-service training, and consultancy services. Information should also be distributed through organisation's newsletter, posters on notice boards, notices attached to pay-slips, and lastly letters to inform families of the employees.

5.3. **CONCLUSION WITH REGARD TO THE RESEARCH QUESTION.**

From the above information it can be concluded that this answers the question as stated under the question of the research study (see page 5):- "Does failure to attend to the employees' social problems prove the need for an EAP?" The help provided by this organisation to the troubled employees focused mainly on the unfair labour practices, which include promotions, unpaid overtime and so on, while the personal and other work related problems are being neglected. There are no specific people appointed to deal with employees' problems, in addition to this, there is no programme designed to address such problems. The ineffective methods are being used by the volunteers within the organisation and this led to some problems left unattended or partially attended to.

5.4. **FURTHER RESEARCH**

The following areas could be researched further:-

- The extend of social problems in this organisation.

- The extend to which job performance is affected by social problems of employees
- The extend to which marital status has an impact on the social problems.
- The amount of information employees have about the concept, “EAP”
- Whether personal and work-related problems are experienced by the majority of females.
- Lastly to investigate the attitude of unions towards the implementation of EAP in this organisation.

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ANNETURE A

**JUBILEE COMMUNITY HOSPITAL
REPUBLIC OF SOUTH AFRICA
NORTH WEST PROVINCE**

JUBILEE COMMUNITY HOSPITAL
PRIVATE BAG X449
HAMMANSKRAAL
0400

Dear Sir/Madam

**RE: SUBJECT-THE NEED FOR AN EMPLOYEE ASSISTANCE
PROGRAMME IN THE JUBILEE COMMUNITY HOSPITAL**

I, Migal Baleseng Ledingwane, a Social Worker employed by the Department of Social Services Arts, Culture and Sport (stationed at Jubilee Community Hospital), am conducting a research study to assess the need for an EAP in the Jubilee Community Hospital. I am a registered student at the University of Pretoria, and this will serve as an aid to the partial fulfilment of the requirements of my Master's Degree in Social Work Supervision.

The goal of the study is to determine whether there is a need for an EAP in the Jubilee Community Hospital. To enable the respondent to understand this questionnaire, the following key concepts will be defined:

Employee Assistance Programme (EAP) – as described in this study refers to job – based programs operating within a work organisation for the purpose of identifying “troubled employees” motivating them to resolve their troubles by providing access to counseling or treatment for those who need such services.

Troubled employees – refers to those individuals whose personal problems pre-occupy them to an extent that their work is disrupted. The researcher developed interest in this subject in 1996 when studying theory in EAP linking it with her work situation. It was evident that most of the employees experience personal and work related problems which affect their job performance, especially when they are left unattended.

The finding of this study will be forwarded to the Department of Social Service Arts, Culture and Sport for consideration.

Kindly note the following when answering the questionnaire:-

Answer all the questions as candidly as you can.

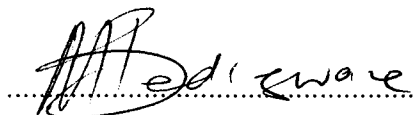
- Anonymity is guaranteed
- Where there are choices, choose only one answer unless the question indicates otherwise
- Indicate your choice of answer by making a tick ✓ in the appropriate box(es)

Looking forward to receiving your response:-

- Distribution Dates : 12th October 1998
- Due Date: 22nd October 1998

Your support will highly be appreciated

Yours faithfully



M.B. LEDINGWANE (MRS)

QUESTIONNAIRE TO THE EMPLOYEES.

SECTION 1: DEMOGRAPHICAL DETAILS.

1.1 GENDER

FEMALE	<input type="checkbox"/>
MALE	<input type="checkbox"/>

1.2 AGE

20-30	<input type="checkbox"/>
31-40	<input type="checkbox"/>
41-50	<input type="checkbox"/>
51-60	<input type="checkbox"/>
61+	<input type="checkbox"/>

1.3 MARITAL STATUS

Single	<input type="checkbox"/>
Married	<input type="checkbox"/>
Separated	<input type="checkbox"/>
Widowed	<input type="checkbox"/>
Divorced	<input type="checkbox"/>

Other (specify) _____

1.4 Highest Educational Qualification.

Std 5-7	
Std 8-10	
Std 10+	
Tertiary Education	

1.5 Type of employment.

Porter	
Cleaner	
Cook	
Social Worker	
Doctor	
Nurse	

Other (specify) _____

1.6 Current position.

Foreman	
Head of section	
Chief nurse	
Supervisor	

1.7 How long have you served in that position?

0-5 yrs	
6-10 yrs	
11-15 yrs	
16-20 yrs	
21+ yrs	

SECTION 2: THE GOALS AND THE NEED FOR EAP.

2.1. Do you ,as an employee, experience personal and work related problems?

Yes	
No	

2.2. If yes which of the following problems do you experience?
 (tick the appropriate box(es).

Marital	
Family	
Financial	
Drug Abuse	
Alcohol	
Legal	
Chronic illness	
Work related	
None	
Other	

Other (specify) _____

2.3. Do the above mentioned problems affect your job performance negatively?

Agree	
Agree Slightly	
Not sure	
disagree Slightly	
Disagree	

2.4. Have you ever been involved in the following?

Absenteeism	
Tardiness	
Work Accidents	
Sick leave abuse	
Incomplete assignment	

Other (specify) _____

2.5. Do you need someone to help you in dealing with these problems?.

Agree	
Agree Slightly	
Not Sure	
Disagree Slightly	
Disagree	

2.6. Indicate which of the problems are experienced by any of your colleagues.

Marital	
Family	
Financial	
Drug abuse	
Alcohol abuse	
Legal	
Chronic illness	
Work related	
None	
Other	

Other (please specify) _____

2.7. Are you free to discuss your problems with your supervisor?.

Yes	
No	

If no indicate reasons _____

2.8. Does your organisation provide assistance to troubled employees?.

Yes	
No	
Not sure	

2.9. Do you see a need for a formal policy regarding assistance to trouble employees?

Yes	
No	
Uncertain	

2.10. Do you have an EAP in your organisation?.

Yes	
No	
Uncertain	

2.11. If yes which of the following personnel is involved in rendering that service?.

Doctor	
Social Worker	
Nurse	
Clinical Psychologist	
Employee Assistance practitioner	

Other (please specify) _____

2.12. Are the EAP offices easily accessible to the troubled employees?

Yes	
No	
Not applicable	

2.13 Were the employees consulted when the EAP was first designed in your organisation?

Agree	
Agree Slightly	
Not sure	
Disagree Slightly	
Disagree	
No response	

2.14 Do you see the EAP as the relevant method of addressing problems of the employees?

Yes	
No	

Please motivate your answer _____.

SECTION 3: IDENTIFICATION OF TROUBLED EMPLOYEES.

3.1. Who is responsible for identifying the troubled employees?.

Employees themselves	
Supervisors	
Foreman	
Head of Section	

3.2. Is he/she trained in identifying the troubled employees?.

Yes	
No	
Uncertain	

3.3. Which of the following methods does the above mentioned personnel use in identifying troubled employees?

Observation	
Documentation	
Referral	
Self-report	

Other (please specify) _____

SECTION 4 : MODELS AND APPROACHES OF EAP.

4.1. How do you deal with your problems?

Deal with it on my own	
Consult the Supervisor	
Consult external resource	
Consult internal resource	

Other (please specify) _____

4.2. How do you feel when people are aware that you have a problem?

Good	
Bad	
Not bad	
Ignore	
Embarrassed	
Not embarrassed	

Others (please specify) _____

4.3. Does your Supervisor provide assistance to you when you are experiencing personal problems?

Yes	
No	

4.4. If yes, are you satisfied with the way in which your problems are addressed?.

Yes	
No	

4.5. If no, please give reasons _____

4.6. Which of the following models do you prefer in dealing with your problem?.

Staff internal to the organisation	
Staff external to the organisation	
Combination of both	
Not sure	
None	
No response	

SECTION 5: THE BENEFITS OF EAP.

5.1. Do you use EAP to solve your personal and work related problems which interferes with your job?.

Yes	
No	

5.2. If yes how frequent do you use it?

Regularly.	
Sometimes.	
Not sure.	
Not at all.	

5.3. Do you benefit from using the EAP?.

Yes.	
No.	

5.4. Do you see your colleagues benefiting from using the EAP?

Yes	
No	
Unknown	

SECTION 6: INFORMATION ON EAP.

6.1. Are you prepared to pay for the information on how you can deal with personal problems which affect job performance?

Yes	
No	

6.2. If yes, which of the following methods do you prefer in receiving that information?.

Workshops.	
Meetings.	
Posters on notice boards	
News letters.	

Other (please specify) _____

6.3. Would you be interested in obtaining more information on EAP?.

Yes.	
No.	

6.4. Are you prepared to pay for the service

Yes	
No	
Not sure	

THANK YOU, FOR YOUR TIME AND VALUABLE INFORMATION.

ANNEXURE “B”

**JUBILEE COMMUNITY HOSPITAL
REPUBLIC OF SOUTH AFRICA
NORTH WEST PROVINCE**

JUBILEE COMMUNITY HOSPITAL
PRIVATE BAG X449
HAMMANSKRAAL
0400

Dear Sir/Madam

**RE: SUBJECT-THE NEED FOR AN EMPLOYEE ASSISTANCE
PROGRAMME IN THE JUBILEE COMMUNITY HOSPITAL**

I, Migal Baleseng Ledingwane, a Social Worker employed by the Department of Social Services Arts, Culture and Sport (stationed at Jubilee Community Hospital), am conducting a research study to assess the need for an EAP in the Jubilee Community Hospital. I am a registered student at the University of Pretoria, and this will serve as an aid to the partial fulfillment of the requirements of my Master’s Degree in Social Work Supervision.

The goal of the study is to determine whether there is a need for an EAP in the Jubilee Community Hospital. To enable the respondent to understand this questionnaire, the following key concepts will be defined:

Employee Assistance Programme (EAP) – as described in this study refers to job – based programs operating within a work organisation for the purpose of identifying “troubled employees” motivating them to resolve their troubles by providing access to counseling or treatment for those who need such services.

Troubled employees – refers to those individuals whose personal problems pre-occupy them to an extent that their work is disrupted. The researcher developed interest in this subject in 1996 when studying theory in EAP linking it with her work situation. It was evident that most of the employees experience personal and work related problems which affect their job performance, especially when they are left unattended.

The finding of this study will be forwarded to the Department of Social Service Arts, Culture and Sport for consideration.

Kindly note the following when answering the questionnaire:-

Answer all the questions as candidly as you can.

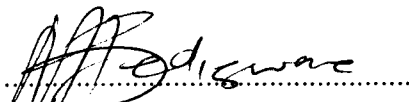
- Anonymity is guaranteed
- Where there are choices, choose only one answer unless the question indicates otherwise
- Indicate your choice of answer by making a tick ✓ in the appropriate box(es)

Looking forward to receiving your response:-

- Distribution Dates : 12th October 1998
- Due Date: 22nd October 1998

Your support will highly be appreciated

Yours faithfully



M.B. LEDINGWANE (MRS)

QUESTIONNAIRE TO THE SUPERVISORS

SECTION 1: DEMOGRAPHICAL DETAILS.

1.1. GENDER.

Male	
Female.	

1.2. AGE.

20-30	
31-40	
41-50	
51-60	
61-+	

1.3. MARITAL STATUS.

Single	
Married	
Separated	
Widowed	

Other (please specify) _____

1.4. Duration of employment.

10 -20 yrs	
21 - 30 yrs	
31 – 40 yrs	
41 – 50 yrs	
51+ yrs	

1.5. Current Position.

District Manager	
Assistant Director	
Matron	
Chief Social worker	
Chief administrative officer	

Other please (specify) _____

1.6. How long have served in that position.

0-5 yrs	
6-10 yrs	
11-15 yrs	
16-20 yrs	
21 + yrs	

1.7. What is the total number of employees in your organisations.

Permanent.	
Temporary	
Uncertain	

1.8. What is the total number of employees you as a supervisor are accountable for?.

5-10	
11-20	
21-30	
31-40	
41-50	
51+	

SECTION 2: GOALS AND THE NEED FOR AN EAP.

2.1. Do your supervisees experience personal and work-related problems?

Yes	
No	
Unknown	

2.2. If yes, which of the following problems have been identified amongst your supervisees? (Tick in appropriate box(es)).

Marital	
Family	
Drug abuse	
Alcohol abuse.	
Legal	

Other (please specify) _____

2.3. Have you noticed the following in the behavior of any of your employees? (tick the appropriate box(es))

Emergency absence	
Tardiness	
Accidents	
Sick leave Abuse	
Leaving Assignment incomplete	
Alcohol abuse	
Family problems	
Family problems	
Drug abuse	
Other	

2.4. Does The above mentioned problems affect employees' job performance?.

Yes	
No	
Uncertain	

2.5. Does your organisation assist employees in solving problems which affect their job?

Yes	
No	

If yes explain how? _____

2.6. What effect does the problem mentioned in 2.2 has on the organisation?
(tick in appropriate box(es).

Lead to more costs on the organisation	
Poor production	
Law suit by employees	
Dismissal of valuable employees	

If other (Please specify): _____

2.7. Do you think there is a need for a formal policy regarding assistance to troubled employees?

Yes	
No	

2.8. Does your organisation have an EAP?

Yes	
No	

2.9. If yes, which of the following personnel is involved in rendering that service?

Social worker	
Doctor	
Nurse	
Clinic psychologist	
Employee Assistance Practitioner	

Other (Please specify) _____

2.10. Does your personnel staff component include trained Counsellor?

Yes	
No	

If yes, specify the nature of such training

2.11. Are the EAP offices easily accessible to the troubled employees?

Yes	
No	
Not applicable	

2.12. Were the union shop stewards consulted when the EAP was first designed in the organisation?

Yes	
No	
Uncertain	

2.13. Do you see the EAP as the relevant method for addressing problems of the Employees?

Yes	
No	

Motivate your answer _____

SECTION 3: IDENTIFICATION OF TROUBLED EMPLOYEES

3.1 Which of the following personnel is responsible for identifying the troubled employees?

Supervisor	
Manager	
Employees Themselves	
None of the above-mentioned	
Other	

3.2. Is there any training provided for the above mentioned personnel?

Yes	
No	

3.3. Which of the following methods do you apply for identifying troubled employees?

Observation	
Documentation	
Referral	
Self report	

Other (Please specify) _____

3.4. Which procedure do you follow after you have identified a troubled employee?

Assessment	
Refer to internal resource	
Refer to external resource	
Disciplinary procedure	

Other (Please specify) _____

SECTION 4: MODELS OF EAP

4.1. Which of the following resources does your organisation use for helping the troubled employees?

External resource	
Internal resource	
Both resource	
None of the above mentioned	
Other	

4.2. Who will be responsible for the payment of the treatment costs?

The organisation	
Troubled employees	
Both the employee and the organisation	
The union	

Other (Please specify) _____

4.3. When do troubled employees utilize the EAP?

During working hours	
During which time	
After hours	
Over the weekends	

Other(Please Specify) _____

SECTION 5: BENEFITS OF EAP

5.1. Which of the following benefits are applicable to the organisation from using EAP?

Improvement of the employee's morale	
Minimization of time in disciplining troubled employees	
Retaining of well trained employees	
Improvement of productive employees	
Avoid law suits from employees	
Reduction of costs	

5.2. As a supervisor the EAP protects you from being involved in your supervisees personal problem?

Yes	
No	
Uncertain	

5.3. Do you see your supervisees benefiting from the EAP?

Yes	
No	
Unknown	

SECTION 6: MARKETING OF EAP

6.1 Does the organisation considered it worth while to attract troubled employees to EAP.

Yes	
No	

If yes, which of the following method is used)
 (tick in appropriate box(es))

Organisation news letter	
Posters on notice boards	
Letter to the families	
Notice attached to payslips	

Other (please specify) _____

SECTION 7: Reintegration of Employees

7. How do you reintegrate employees who have completed treatment into the work situation?

Answer: _____

SECTION 8: INFORMATION ON EAP

8.1. Would you be interested in obtaining more information on EAP (e.g. Models, approaches, Management of EAP, Marketing & Evaluation) ?

Yes	
No	

8.2. If yes, please indicate the format of your choice.

Literature	
Practical Workshop	
Consultancy Service	
In-Service Training	

Other (please specify): _____

8.3. Are you prepared to pay for the services involved for the provision of this Information on EAP

Yes	
No	

THANK YOU FOR YOUR TIME AND VALUABLE INFORMATION.

ANNEXURE “C”

**JUBILEE COMMUNITY HOSPITAL
REPUBLIC OF SOUTH AFRICA
NORTH WEST PROVINCE**

JUBILEE COMMUNITY HOSPITAL
PRIVATE BAG X449
HAMMANSKRAAL
0400

Dear Sir/Madam

**RE: SUBJECT-THE NEED FOR AN EMPLOYEE ASSISTANCE
PROGRAMME IN THE JUBILEE COMMUNITY HOSPITAL**

I, Migal Baleseng Ledingwane, a Social Worker employed by the Department of Social Services Arts, Culture and Sport (stationed at Jubilee Community Hospital), am conducting a research study to assess the need for an EAP in the Jubilee Community Hospital. I am a registered student at the University of Pretoria, and this will serve as an aid to the partial fulfilment of the requirements of my Master’s Degree in Social Work Supervision.

The goal of the study is to determine whether there is a need for an EAP in the Jubilee Community Hospital. To enable the respondent to understand this questionnaire, the following key concepts will be defined:

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Troubled employees – refers to those individuals whose personal problems pre-occupy them to an extent that their work is disrupted. The researcher developed interest in this subject in 1996 when studying theory in EAP linking it with her work situation. It was evident that most of the employees experience personal and work related problems which affect their job performance, especially when they are left unattended.

The finding of this study will be forwarded to the Department of Social Service Arts, Culture and Sport for consideration.

Kindly note the following when answering the questionnaire:-

Answer all the questions as candidly as you can.

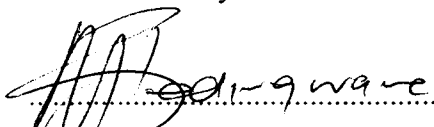
- Anonymity is guaranteed
- Where there are choices, choose only one answer unless the question indicates otherwise
- Indicate your choice of answer by making a tick ✓ in the appropriate box(es)

Looking forward to receiving your response:-

- Distribution Dates : 12th October 1998
- Due Date: 22nd October 1998

Your support will highly be appreciated

Yours faithfully


M.B. LEDINGWANE (MRS)

QUESTIONNAIRE TO THE MANAGEMENT

SECTION 1: DEMOGRAPHICAL DETAILS

1.1. Gender

Male	
Female	

1.2. Age

20 – 30	
31 – 40	
41 – 50	
51 – 60	
1 +	
61+	

1.3. Marital Status

Single	
Married	
Separated	
Widowed	

Other (Specify): _____

1.4. Duration of employment in this organisation

10 – 20 yrs	
21 – 30 yrs	
31 – 40 yrs	
41 – 50 yrs	
51+ yrs	

1.5. Current Position

District Manager	
Assistant Director	
Matron	
Chief Social Worker	
Chief Admin Officer	

Other (Specify): _____

1.6. How long have you served in that position?

0 – 5 yrs	
6 – 10 yrs	
11 – 15 yrs	
16 – 20 yrs	
21+ yrs	

1.7. What is the total number of employees in your organisation?

Permanent	
Temporary	

1.8. What is the total number of employees you as a manager are accountable for?

5 – 10	
11 – 20	
21 – 30	
31 – 40	
41 – 50	
51 +	

SECTION 2: Goal and the Need for an EAP

2.1. Do your employees experience personal and work related problems?

Yes	
No	
Unknown	

- 2.2. If yes, which of the following problems have been identified amongst your employees?

(Tick in appropriate box(es))

Marital	
Family	
Drug Abuse	
Alcohol abuse	
Legal	

- 2.3. Have you noticed the following in the behaviour of any of your employees?

(tick in appropriate box(es))

Emergency abuse	
Tardiness	
Accidents	
Sick Leave Abuse	
Leaving assignments incomplete	
Family problems	
Drug abuse	
Other	

- 2.4. Does the above mentioned problems affect employees job performance?

Yes	
No	
Uncertain	

- 2.5. Does your organisation assist employees in solving problems which affect their job?

Yes	
No	

If yes, explain how _____

- 2.6. What effects do the problems mentioned in 2.2. have on the organisation?
 (Tick in appropriate box(es))

Lead to more costs on the organisation	
Poor production	
Law suits by employees	
Dismissal of valuable employees	

Other (please specify) _____

- 2.7. Do you think there is a need for a formal policy regarding assistance to troubled employees?

Yes	
No	

- 2.8. Does your organisation have an EAP?

Yes	
No	

2.9. If yes, which of the following personnel is involved in rendering that service?

Social Worker	
Doctor	
Nurse	
Clinical psychologist	
Employee Assistance Practitioner	

Other (please specify) _____

2.10. Does your personnel staff component include trained counsellors?

Yes	
No	

2.11. If yes, specify the nature of such training _____

2.12. Are the EAP offices easily accessible to the troubled employees?

Yes	
No	
Not applicable	

2.13. Was the labour force consulted when the EAP was first designed in the organisation?

Yes	
No	
Uncertain	

- 2.14. Were the union shop stewards consulted when the EAP was first designed in the organisation.

Yes	
No	
Uncertain	

- 2.15. Do you see the EAP as the relevant method for addressing problems of the Employees?

Yes	
No	

Motivate your answer; _____

SECTION 3: Identification of Troubled Employees

- 3.1. Which of the following personnel is responsible for identifying the troubled employees?

Supervisor	
Manager	
Employees themselves	
None of the above mentioned	

Other (please specify) _____

3.2. Is there any training provided for the above personnel?

Yes	
No	

3.3. Which of the following methods do you apply for identifying troubled employees?

Observation	
Documentation	
Referral	
Self-report	

Other (please specify) _____

3.4. Which procedure do you follow after you have identified a troubled employee?

Assessment	
Refer to internal resource	
Refer to external resource	
Disciplinary procedure	

Other (please specify) _____

SECTION 4: MODELS OF EAP

- 4.1. Which of the following resources does your organisation use for helping the troubled employees?

External resource	
Internal resource	
Both resources	
None of the above-mentioned	
Other	

- 4.2. Who will be responsible for payment of the treatment costs?

The organisation	
Troubled employee	
Both the employee and the organisation	
The union	

Other (please specify) _____

- 4.3. When do troubled employees utilize the EAP?

During working hours	
During lunch time	
After hours	
Over the weekends	

SECTION 5: Benefits of EAP

- 5.1. Which of the following benefits are applicable to the organisation from using EAP?

Improvement of the employee's morale	
Minimization of time in disciplining troubled employees	
Retaining of well trained employees	
Avoid law suits from employees	
Reduction of costs	

- 5.2. As a manager the EAP protects you from being involved in your employees personal problems?

Yes	
No	
Uncertain	

- 5.3. Do you see your employees benefiting from the EAP?

Yes	
No	
Unknown	

SECTION 6: Marketing of EAP

- 6.1. Does the organisation consider it worthwhile to attract troubled employees to EAP?

Yes	
No	

If yes, which of the following method is used? (Tick in appropriate box(es))

Organisation's news letter	
Posters on notice boards	
Letters to the families	
Notice attached to payslips	

Other (please specify) _____

SECTION 7: Reintegration of Employees

- 7.1. How do you reintegrate employees who have completed treatment into the work situation?

Answer: _____

SECTION 8: Information on EAP?

- 8.1. Would you be interested in obtaining more information of EAP (e.g. Models, approaches, Management of EAP, Marketing & Evaluation).

Yes	
No	

8.2. If yes, please indicate the format of your choice.

Literature	
Practical Workshop	
In-service Training	
Consultancy Service	

Other (please specify) _____

8.3. Are you prepared to pay for the services involved for the provision of this information on EAP?

Yes	
No	

THANK YOU FOR YOUR TIME AND VALUABLE INFORMATION.

ANNEXURE "D"

Enq: LEDINGWANE M.B.
Tel No. (012) 717 2079 Ext. 223

JUBILEE COMMUNITY HOSPITAL
Private Bag x449
HAMMANSKRAAL
0400
11 September 1998

THE MANAGEMENT

Jubilee Community Hospital
Private Bag x449
HAMMANSKRAAL
0400

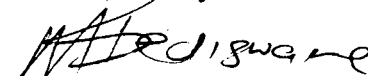
**RE: REQUEST FOR PERMISSION TO CONDUCT A RESEARCH STUDY IN
THE JUBILEE COMMUNITY HOSPITAL**

I, Migal Baleseng Ledingwane, a Social Worker employed by the Department of Social Services, Arts, Culture and Sport request permission to conduct a research study to assess the need for an EAP in the Jubilee Community Hospital. I am a registered student at the University of Pretoria, and this will serve as an aid to the partial fulfillment of the requirements of my Masters Degree in Social Work Supervision.

The findings of this study will be forwarded to the Department of Social Services, Arts, Culture and Sport for consideration.

Hoping for your positive response.

Yours faithfully


M. B. LEDINGWANE (MRS.)

**DEPARTMENT OF DEVELOPMENTAL SOCIAL SERVICES
ARTS, CULTURE AND SPORTS**

**MORETELE DISTRICT HEALTH SERVICES
JUBILEE COMMUNITY HOSPITAL
PRIVATE BAG X449
HAMMANSKRAAL
0400**

TEL.NO.(012) 7172079/2075

FAX (012) 717 8712/7404

10th October 1998

Enq : Ms. Ntlatleng – A.D. Welfare
Mr. D.E. Baloyi – District Manager

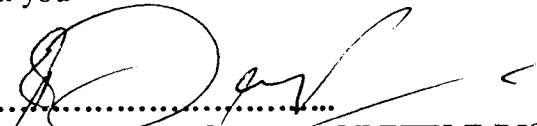
ATTENTION : Mrs M.B. Ledingwane

**Re: PERMISSION TO CONDUCT A RESEARCH STUDY IN OUR
ORGANISATON**

This serves as a response to your letter dated the 11th September 1998. Your request for permission to conduct a research study on Employee Assistance Programme has been granted by the District Health and Welfare Management.

It will be appreciated if the findings of this study would be made available to the management team.

Thank you


.....
DISTRICT MANAGER - MORETELE DISTRICT


.....
ASSISTANT DIRECTOR - WELFARE