

Missouri National Guard Regulation 600-86 (Army)  
30-3 (Air)

Headquarters  
Missouri National Guard  
Office of the Adjutant General  
2302 Militia Drive  
Jefferson City, MO 65101

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EMPLOYEE ASSISTANCE PROGRAM FOR MILITARY AND COMPETITIVE  
TECHNICIANS AND ACTIVE GUARD/RESERVE

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Summary. This regulation combines Missouri National Guard Technician Personnel Regulation 792-5 and Missouri National Guard Regulations (AR) 600-86/(AF) 30-3 pertaining to Active Guard/Reserve personnel, Army and Air.

Applicability. This regulation applies to all Missouri National Guard technicians and AGR personnel.

Internal Control Systems. This regulation does not contain information that affects the new manning system.

Supplementation. Supplementation of this regulation is prohibited without prior approval from the Human Resources Office (NGMO-HRE).

Suggested Improvements. Users of this regulation are invited to send comments and suggested improvements to NGMO-HRE, 2302 Militia Drive, Jefferson City, MO 65101-1203.

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This regulation supersedes MONGR (AR) 600-86/MONGR (AF) 30-3, dated 1 January 1995.

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1. References. The references listed in this regulation are on file in the Human Resources Office (HRO).

- a. Public Law 91-616, Comprehensive Alcohol Abuse and Alcoholism Prevention/Treatment Act of 1970.
- b. Public Law 92-255, Drug Abuse and Treatment Act of 1972.
- c. Title 5, Part 792, Section 101, Federal Employees' Health and Counseling Programs.
- d. Public Law 99-570, The Federal Employee Substance Abuse Education and Treatment Act of 1986, and title 5 Code of Federal Regulations (CFR) Part 792, require Federal agencies to establish appropriate prevention, treatment, and rehabilitative programs and services for alcohol and drug abuse problems for Federal civilian employees and to report annually to Congress on these programs (5 U.S.C. §§ 7361 and 7362).
- e. Executive Order 12564 requires agencies to establish drug-free Federal workplace programs, including an Employee Assistance Program (EAP).
- f. AFI 31-501, Personnel Security Program Management.
- g. AF Policy Directive 36-27, Social Actions.
- h. ANGR 30-2, Social Actions Program.
- i. ANG Instruction 36-101, The Active Guard/Reserve (AGR) Program.
- j. AFI 36-3209, Separation and Retirement Procedures for Air National Guard and Air Force Reserve Members.
- k. ANGI 36-103, Suicide Prevention Program.
- l. NGR (AR) 600-5, The Active Guard/Reserve (AGR) Program, Title 32, Full-Time National Guard Duty (FTNGD).
- m. AR 380-67, Personnel Security Program.
- n. AR 600-85, Alcohol and Drug Abuse Prevention and Control Program.

- o. NGR (AR) 600-85, Drug Abuse Prevention and Control Program.
- p. AR 635-100, Processing Personnel for Separations.
- q. AR 635-200, Personnel Separations, Enlisted Personnel.

## 2. Definitions.

a. Troubled Employee. Any military or competitive technician (employee) or AGR member of the Missouri National Guard with a problem(s) adversely affecting his/her behavior and/or job performance.

b. Alcoholic/Problem Drinker. An employee whose use of alcohol impairs his/her job performance and/or behavior.

c. Alcoholism. A progressive, treatable illness in which the individual's use of alcohol negatively affects his/her work performance, physical well being, emotional stability and/or social functioning.

d. Drug. Any narcotic, marijuana, alcohol, amphetamine, barbiturate, hallucinogenic or non-narcotic that is habit forming or has a potential for abuse.

e. Drug Abuse. The illegal, wrongful or improper use, transfer, sale or possession of any of the drugs described above, which impairs an employee's health, behavior, social functioning and/or job performance.

f. Problem. Any factor impairing an employee's job performance and/or interpersonal relationships. Particular emphasis is placed on personnel with problems related to alcohol and drug abuse. Other problems may include, but are not limited to, marital, financial, emotional disturbances, legal, parent-child relationships, aging, health and learning disabilities.

g. Screener Agency/Resource Agency. An organization, hospital or facility that provides professional care, treatment, counseling or therapy to a troubled employee. The screener agency will give the individual the names of three facilities/providers and allow the employee to choose the treatment provider.

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h. State Employee Assistance Program Coordinator (SEAPC). Is appointed by the Adjutant General to administer the Employee Assistance Program and provide guidance to EAPMs.

i. Employee Assistance Program Manager (EAPM). Is appointed by the Adjutant General to administer the Employee Assistance Program in a designated region.

### 3. General.

a. Public Law 91-616 and Public Law 92-255 provide for establishing prevention, treatment rehabilitation programs and services for alcoholism and alcohol and drug abuse among Federal employees. The MONG has implemented an EAP to help employees reduce losses due to alcoholism, drug abuse and other problems interfering with work performance.

b. When an employee is experiencing conduct problems or unsatisfactory performance, the manager/supervisor can neither tolerate nor ignore these employees. For this program to achieve its intended goal, the employee must utilize this service.

c. Employees may seek assistance voluntarily or be referred by their supervisors. Participation in the program is voluntary. The goal is restoration to acceptable job performance and prevention of job performance problems.

### 4. Policy.

a. The Missouri National Guard recognizes alcoholism as preventable and treatable. All levels of management are responsible for adhering to and support of this program. All supervisors and managers will have a working knowledge of the Employee Assistance Program.

b. As an employer, the Missouri National Guard is concerned with accomplishing the mission and maintaining employee productivity. When an employee's use of alcohol and/or drugs impairs efficient and safe performance of duties, reduces dependability or reflects discredit on the Missouri National Guard, managers and supervisors will initiate actions listed in this regulation or in appropriate disciplinary regulations.

c. The employee labor organization having exclusive recognition with the Missouri National Guard will be consulted

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prior to implementing this program or changes to protect the rights and options of their members.

d. An employee with alcohol, drug or other problems affecting job performance has a right to seek assistance from the State EAP Coordinator or the EAP Case Manager assigned to his/her specific region.

(1) When assistance is offered and refused by the employee and his/her problem continues to impair job performance, disciplinary action will then be considered based upon job performance.

(2) When an employee accepts assistance, disciplinary action may be held in abeyance for a reasonable period of time to allow an opportunity for recovery and improved job performance.

e. Any employee possessing, using, selling or distributing illicit drugs or controlled substances on Government premises or in a duty status will be considered for disciplinary action and/or separation for misconduct (reference MOTPR 752).

f. Military technicians may also be subject to discipline under applicable Army and Air regulations.

(1) Army National Guard officers, warrant officers and noncommissioned officers (E5-E6) identified as drug abusers will be processed in accordance with AR 635-100 and AR 635-200.

(2) Army National Guard soldiers (E1-E4) who are identified in two separate occurrences, since 1 July 1983, as using illegal drugs will be processed for separation from the Missouri National Guard.

(3) Air National Guard officers, noncommissioned officers (E5-E9) and airmen (E1-E4) identified as drug abusers will be processed for separation from the Missouri Air National Guard (IAW the applicable regulations).

g. Public Law 91-616 and Public Law 92-255 state that no person may be denied or deprived employment solely on the grounds of prior alcohol abuse, alcoholism and/or drug abuse. An employee will not have his/her job security or promotional opportunities jeopardized by his/her request for assistance or

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referred rehabilitation, except for sensitive positions defined in AR 380-67 and AFI 31-501.

h. Few supervisors or managers possess the professional qualifications to evaluate whether an employee may be experiencing alcoholism, financial hardship or other personal or medical problems. Supervisors will initiate procedures established in this regulation when the supervisor observes a progressive decline in efficiency/performance.

i. Supervisors, managers and/or union officials assisting troubled employees will neither reveal the name of the employee nor discuss the employee's problems with anyone except the personnel specified in paragraphs 9, 10 and 11 of this regulation.

j. Both the employee and the Missouri National Guard can benefit if the program established under this policy is properly administered. Paternalism, "witch hunting" or prying into an employee's private life will not be tolerated; however, there should be no intentional oversight or cover up of observed impairment or deterioration of job performance.

k. The Adjutant General or his designee may reassign an individual working in a sensitive position, as defined in AR 604-5 and AFI 31-501, while undergoing treatment or recovery from alcoholism, drug abuse or other problems, until he/she satisfactorily completes a rehabilitation program, unless such reassignment action is prohibited by law, regulation or directive.

l. An employee's off duty activity is solely his/her responsibility. That activity becomes management's concern only when it impairs the employee's ability to perform his/her assigned duties or reflects negatively upon the image of the Missouri National Guard.

## 5. Responsibilities.

### a. The Adjutant General.

(1) Ensures that an Employee Assistance Program policy is written and implemented based on guidance from National Guard Bureau, Army/Air Regulations and Office of Personnel Management.

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(2) Ensures that all personnel adhere to the policy and procedures contained in this program.

(3) Assigns program responsibility for administration to the State Employee Assistance Program Coordinator (SEAPC) to provide guidance in operating this program.

(4) Makes determination of employability of persons in relation to an indicated use of drugs and/or alcohol consistent with both PL 91-616 and 91-255.

(5) Takes other actions as necessary to carry out the mission of this program in the Missouri National Guard.

b. The Equal Employment Manager.

(1) Provides overall supervision of the MONG Employee Assistance Program. Advises the Adjutant General on program effectiveness, success and/or problems.

(2) Determines program priorities and plans for implementing procedures from a program assessment in consultation with the SEAPC.

(3) Performs other duties relating to the Employee Assistance Program as directed or necessary.

(4) Furnishes the SEAPC with information and assistance for developing and implementing this program.

(5) Assists supervisors and managers contemplating removal or disciplinary actions against an employee whose job performance is unsatisfactory.

(6) Provides information to employees about hospitalization coverage (FEHBP) in connection with this program.

(7) Provides information to new employees concerning the EAP program during initial employment orientation.

(8) Assists SEAPC in arranging Employee Assistance Program training classes for newly promoted supervisors and managers.



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(9) Takes other action or renders assistance as necessary.

c. State Employee Assistance Program Coordinator (SEAPC). The Adjutant General or his designee appoints the State Employee Assistance Program Coordinator duties to an existing position as a collateral duty. The SEAPC will be allotted sufficient official time to implement and oversee the program. The program coordinator will:

(1) Arranges for and/or conducts supervisory and managerial training programs.

(2) Distributes educational materials designed for prevention and discouragement of alcohol/drug abuse and other problem areas.

(3) Develops and disseminates a referral resource manual dealing with all types of employee problems.

(4) Establishes and maintains liaison with community education, treatment and rehabilitation facilities and resources, including state agencies throughout Missouri.

(5) Establishes measurement criteria for evaluating program results and effectiveness. Submits required reports to appropriate agencies and/or personnel.

(6) Assists managers, supervisors or other personnel, when requested, with referral and/or confrontation of an employee.

(7) Appoints additional managers, as needed.

(8) Train EAPMs through state, OPM or other educational programs and training seminars.

d. Employee Assistance Program Case Manager (EAPCM). The EAPCMs are appointed by the Adjutant General to provide program continuity in areas of concentrations of personnel assigned (i.e., St. Louis, Kansas City and Springfield). The Program Case Manager duties will be assigned to an existing position as a collateral duty. Managers will:

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(1) Train supervisors and managers about the EAP in their assigned regions.

(2) Distribute educational materials designed for prevention and to discourage alcohol/drug abuse and other problem areas.

(3) Develop and disseminate a referral resource manual dealing with all types of employee problems.

(4) Establish and maintain liaison with community education, treatment and rehabilitation facilities and resources.

(5) Assist managers, supervisors or other personnel, when required, to refer and/or confront an employee.

(6) Assist troubled employees so they may successfully complete rehabilitation and/or treatment.

(7) Submit required reports to the SEAPC.

e. Supervisors. The individual's supervisor is the key to a successful program. The immediate supervisor is usually the first person to be aware of an employee's deteriorating job performance. This may be the first indication of a developing problem. The supervisor may be able to motivate an employee to seek professional help before his/her job performance deteriorates to the point where he/she must be discharged. The troubled employee should be educated about available resources and should realize that seeking help can be the deciding factor in saving his/her job. When alcohol or drug problems are the underlying factors in poor performance, timely intervention is essential. During an intervention, supervisors should identify specific expectations of an employee's job performance and behavior. When an employee fails to meet these expectations, supervisors have the right and obligation to provide opportunities to employees to correct their problems. Early intervention is the key to the success of this program. The supervisor will:

(1) Be alert and observe changes in work and employee behavior.

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(2) Document specific instances when an employee's work performance, behavior and attendance fail to meet minimum standards or appear to be deteriorating.

(3) Interview the employee, focus on improvement of documented poor work performance. Inform the employee about the Employee Assistance Program and the services available.

(4) If the employee refuses help and performance is unsatisfactory, provide a firm choice to either accept assistance through the EAP and cooperate in the identified treatment or be subject to disciplinary action based on unacceptable work performance.

f. Employee. The employee is responsible for maintaining a positive attitude, attending counseling, improving performance, keeping supervisor and/or employee assistance program manager informed, involving family members for support, etc. An employee may obtain assistance by self-referral or referral by a supervisor, co-worker, family member, labor organization representative, occupational health service, physician or chaplain. Regardless of acceptance of the referral, the employee is responsible for correcting any documented job performance deficiencies.

g. Labor Organization Responsibilities.

(1) All EAPCMs will cooperate and coordinate with labor organizations to ensure program acceptance throughout the Missouri National Guard. The labor organization is encouraged to appoint representatives to consult and assist the SEAPC and EAPCMs with overall administration of the EAP for bargaining unit members only.

(2) Union representatives will be invited to participate in supervisory training sessions on the Employee Assistance Program.

(3) Cooperation between shop stewards and supervisors working together toward the mutual objective of this program will significantly reduce work performance problems.

6. Education and Training.

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a. All EAPCMs will receive training on implementing a viable program. Training includes, but is not limited to, DOD service schools, OPM courses, State Employee Assistance Program training, consultation with state occupational program coordinators, local government programs, colleges universities, hospitals and treatment centers.

b. The SEAPC will arrange for training all full-time unit support supervisors and managers. Personnel will receive a certificate of training.

c. Employees will be made aware of this program and its purpose through pamphlets, orientation sessions, newsletters, policy statements, etc.

d. New employees will receive a pamphlet describing the EAP during new employee orientation. The pamphlet will include:

- (1) Purpose of the Employee Assistance Program.
- (2) Goals and objectives of the program.
- (3) Supervisor's involvement.
- (4) Role of the Employee Assistance Program Manager.
- (5) Relationship to disciplinary actions.

## 7. Observation and Documentation.

a. Observation. Supervisors should be alert to detect behavior and performance patterns that appear to differ from the employee's norm. (See Appendix A for examples.) Remember, most employees exhibit some job performance problems occasionally. It is the pattern of repeated problems over a period of time that should be noted and documented.

b. Documentation. Record each occurrence and patterns of deteriorating job performance for technicians on the employee's NGB Form 904-1, Supervisor's Record of Technician Employment. Record each occurrence and patterns of deteriorating job performance for AGR employees on DA Form 4856, General Counseling Form, or AF Form 174, Record of Individual Counseling (ANGI 36-101, para 6.5.2.1).

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(1) The supervisor's responsibility is to observe and document job performance deficiencies. Supervisors should not attempt to diagnose alcoholism, drug abuse or other employee problems. The supervisor uses documented performance deficiencies as the groundwork when referral or disciplinary actions take place.

(2) The supervisor will not discuss or counsel the employee on any personal problem. The discussion is limited to documented job performance.

c. Confrontation. The most and crucial aspect of this program is the supervisor confronting an employee whose job performance is deficient. The supervisor must not avoid this confrontation when an employee's job performance indicates that it is warranted.

(1) Preparation.

(a) Review and organize documentation on the employee's performance or conduct and refer to this documentation during the discussion with the employee.

(b) Consult with the EAP coordinator if unsure of the appropriate course of action to take.

(c) Decide course of action necessary. The following regulations should be reviewed when considering disciplinary action: Paragraph 8-26, 27; NGR 600-200; ANGI 36-101; TPR 752.

(d) Be consistent. Treat all employees fairly and equally.

(e) Select a time and place that offers privacy for a discussion. No one enjoys criticism, however appropriate, but criticism in the presence of co-workers can cause even more difficulty.

(2) Discussion.

(a) Preface a discussion of performance deficiencies by pointing out to the employee that the Guard recognizes his/her value, experience, skills, past performance, previous level of competence and dependability.

(b) Be firm and honest. Use documentation to tell the employee exactly what has been unsatisfactory. Base the discussion on the individual's performance rather than on the individual.

(c) Request an explanation of the poor performance. If the employee blames his/her poor performance on some off-the-job problem, do not offer any personal advice. Your course of action is to refer the individual to the SEAPC or EAPM assigned to your area.

(d) Explain the options for disciplinary action. This will help the employee understand your position and the seriousness of this matter.

(e) Write up a performance improvement plan and get a commitment from the employee and document it. Set down specific work criteria and goals which the employee agrees to work toward during a specific time frame.

(f) Refer employee to EAP in writing. (See Appendix G.)

(3) Relationship to Disciplinary Actions. This program supplements existing disciplinary procedures for dealing with problem employees. The program is non-disciplinary and is aimed at treatment and/or rehabilitation of problem employees. It is not to be used or implied as a means of tolerating inefficiency, absenteeism or poor performance when an employee fails to seek assistance or it is offered. Disciplinary actions will occur if job performance does not improve to an acceptable level after notification. A reasonable period of time is allowed when counseling and/or treatment is initiated, but not completed.

## 8. Treatment.

a. Cost. Neither Public Law 91-616 nor Public Law 92-255 provides for payment of treatment and/or rehabilitation costs. Technicians are responsible for the cost of treatment of an alcohol or drug abuse problem; however, as with other illnesses, benefits may be available through the Federal Employees Health Benefits Program (FEHBP). AGR personnel may utilize treatment facilities at active duty locations at no charge.

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b. Leave Status. Technicians will be afforded an opportunity for counseling or other assistance on a confidential basis, including confidentiality of their medical records. Employees suffering from alcoholism or personal problems will be extended the following benefits:

(1) Use of sick leave for treatment and/or rehabilitation (technician only).

(2) Use of annual leave (technician and AGR).

(3) Use of leave without pay (technician only).

(4) AGR employees will be extended an appropriate leave status or duty status.

c. Relationship to Disability Retirement. This program is not designed to jeopardize an employee's right to disability retirement if his/her condition warrants and eligibility requirements are met.

d. The EAPM or SEAPC will communicate with the referral resource and management and observe confidentiality requirements. The EAPM or SEAPC will contact the employee to assess if his/her needs are being met by the referral resource. They will contact the employee's supervisor to determine if his/her work performance remains acceptable. The EAPM or SEAPC will not discuss work issues with the supervisor (if self-referral) when the employee's work performance is satisfactory. The EAPM or SEAPC will ensure:

(1) The employee referrals are made to appropriate treatment resources.

(2) The employee is cooperating in the treatment and/or rehabilitation program through written follow-up with the referral resource agency.

(3) Treatment resource is effectively providing the necessary services to the employee.

## 9. Confidentiality and Disclosure.

a. General. Public Law 93-282 requires that information relating to the identity, diagnosis, prognosis or treatment of

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any employee/patient maintained in connection with the Employee Assistance Program is confidential and may be released only under the following circumstances.

b. Communication Not Constituting Disclosure.

(1) Communication of information with the EAP by personnel having a need for this information in connection with their duties.

(2) Communication between the EAPM and a referral resource agency needed by the agency to perform its services.

(3) Reporting demographic information which does not include employee/patient identifying information, case numbers or symbols assigned by EAPMs (i.e., annual report to NGB).

c. Disclosure Without Consent. Whether or not the employee gives his or her written consent, the contents of the employee record may be disclosed:

(1) To medical personnel to the extent necessary to meet a bona fide medical emergency.

(2) To qualified personnel for the purpose of conducting scientific research, management audits, financial audits or program evaluation. These individuals may not identify, directly or indirectly, individual employees in any research report, audit or evaluation or otherwise disclose employee/patient identity in any manner.

(3) If authorized by an appropriate court order having jurisdiction, granted after application showing good cause.

(4) Disclosure to appropriate authorities of suspected child abuse or threats of harm to self or others in accordance with appropriate laws (Appendix G).

d. Disclosure with Consent.

(1) Circumstances in which disclosure may be made with the employee's consent.

(a) Diagnosis, treatment and rehabilitation.



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- (b) Prevention of certain multiple enrollments.
- (c) Legal counsel for employee.
- (d) Patient's family and others.
- (e) Third party payers and funding resources.
- (f) Employers and employment agencies.
- (g) Criminal justice system.
- (h) Situations not otherwise provided for.

(2) Consent for disclosure must be in writing and contain the following. (See Appendices B and C for the release and disclosure consent forms.)

(a) The name of the program or referral resource agency making the disclosure.

(b) The name or title of the person or organization to which disclosure is to be made.

(c) The name of the employee/patient.

(d) The purpose or need for the disclosure.

(e) The extent or nature of information to be disclosed.

(f) A statement that consent is subject to revocation at any time, except to the extent that action has been taken in reliance therein, and a specified date, event or condition when it will expire without expressed revocation.

(g) Signature of the employee/patient and date.

#### 10. Maintenance Security of Records.

a. Records on employees referred to the EAP will be kept in a locked file cabinet when not in use. Only designated EAPMs will have access to these records. EAPMs will maintain these records and process inquiries and requests for employee information.

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b. Official Personnel Folders will not include information concerning an employee's alcohol/drug abuse problems or rehabilitation efforts, except as they apply to specific charges leading to disciplinary or separation actions.

c. Records will be maintained for a period of two years.

11. Employment Considerations. Release of information to prospective employers is allowed only with the employee's written consent. Such information may be requested only when the applicant is known to the prospective employer as having a history of alcohol or drug abuse. It may not be requested for the purpose of certifying whether an applicant has ever had such problems.

12. Follow-up Support.

a. Troubled employees who undergo treatment for certain problems may require outpatient care or therapy as part of an aftercare plan. Supervisors or managers should grant employees sick leave for this treatment when arrangements cannot be made during non-duty hours.

b. After an employee completes treatment and/or rehabilitation, the supervisor should monitor his/her work performance in normal day-to-day supervision. If the supervisor observes the employee's job performance or dependability is falling below satisfactory standards, he/she should counsel the employee immediately. By doing so, the employee can be offered the support that may be needed for complete recovery.

c. Supervisor Notification.

(1) When an employee is referred to a resource agency for unsatisfactory job performance, the supervisor will be provided a progress report on the following information.

(a) Did the employee keep his/her scheduled appointment(s)?

(b) Did employee agree to undergo treatment?

(c) When may the supervisor expect the employee to return to work, if appropriate?

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(d) Is the employee participating satisfactorily in a prescribed treatment program?

(2) Supervisors will not be notified of an employee's participation unless:

(a) The referral is a result of a supervisor calling a resource agency and arranging an appointment for the employee.

(b) The supervisor has the employee sign a consent/release form (Appendix D).

(c) A supervisory referral was made to either the EAPM or SEAPC and has requested employee information for good and just reasons in accordance with the information allowed in (1) above.

(d) Upon the employee's request to provide their immediate supervisor treatment program information resulting from an employee self-referral (Appendix D).

13. Resource Agencies. A current listing of resource agencies is on file with the EAP Coordinator. These agencies may be of assistance to all Missouri National Guard employees and supervisors and managers of employees who have off-the-job problems contributing to deficient job performance. Do not hesitate to utilize the assistance they offer.

APPENDIX A

POSSIBLE PATTERNS OF PERFORMANCE DETERIORATION

A-1. ABSENTEEISM.

- Unauthorized leave.
- Excessive sick leave.
- Monday and/or Friday absences.
- Repeated absences of 2-4 days.
- Excessive tardiness, e.g., Monday mornings or returning from lunch.
- Leaving work early.
- Peculiar or increasingly improbable excuses for absences.
- Unsatisfactory performance of duties.

A-2. HIGH ACCIDENT RATES.

- On the job.
- Off the job, which affect work performance on the job.

A-3. DIFFICULTY IN CONCENTRATION.

- Job takes more time than usual.
- Hand tremors while concentrating.

A-4. CONFUSION.

- Difficulty recalling instructions and details.
- Increasing difficulty handling complex assignments.
- Difficulty recalling own mistakes.

A-5. SPORADIC WORK PATTERNS.

- Very high and very low production, differential increase.
- Coming to work in an obvious abnormal condition.
- Missing deadlines.
- Making mistakes due to inattention or poor judgment.
- Wasting materials.
- Making bad decisions.
- Complaints from individual's co-workers.
- Improbable excuses for poor performance.

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A-6. EMPLOYEE RELATIONS ON THE JOB.

- Overreacts to real or imagined criticism.
- Wide variance in morale.
- Avoids co-workers.
- Uncooperative.
- Borrows money from co-workers continuously.

REMEMBER: Most employees exhibit some of these job performance problems occasionally. It is the repeated pattern of these problems over a period of time that should be noted and documented.

## APPENDIX B

### RECOGNIZABLE EFFECTS OF MOST FREQUENTLY USED DRUGS

There are thousands of licit and illicit drugs available today. The substances listed are the most prevalent and frequently abused. The effects are well known, and detailed physiological/psychological data on these substances is omitted. The most common observable effects are identified.

The effects of any drug depend on amount taken, physical and psychological state, tolerance level, experience of the user, other chemicals used, method of administration of drug, length of time an individual has used the substance and other variables.

The symptoms listed occur when the drug is having its effect.

The effects of a substance are not the same for everyone. Emotional (mood) differences vary from individual to individual. Physical changes may be dramatically different, depending on the variables above. Also, effects may be paradoxical, i.e., a depressant may cause agitation and an increase in activity levels. Because of varying drug effects, "obvious changes in behavior without obvious causes," may be the most reliable key to recognizing substance abuse.

ALCOHOL - The obvious effects of alcohol use include, but are not limited to:

- Impaired coordination (fluid movement becomes difficult).
- Blurred vision.
- Flushed skin.
- Slurred or very deliberate speech.
- Mood changes (range from overly friendly to aggressive, usually out of (sober) character).
- Cognitive abilities usually decrease (judgment, decision making).
- A detectable odor of alcohol.
- Behavior may be unpredictable.

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MARIJUANA - The most obvious effects of marijuana use are representative of hashish, as well as, marijuana. They include, but are not limited to:

- Impaired intellectual function (at times, thoughts flow freely and seem profound to speaker).
- Mood change is frequent.
- Reddened eyes (glassy appearance).
- Appetite may increase dramatically (referred to as "the munchies").
- Level of activity may decrease to the point of apathy or sleepiness.
- Depth perception and sense of time are distorted, resulting in obvious danger, if driving.
- Behavior may become unpredictable.

AMPHETAMINES - The most commonly known drugs in this group include Benzedrine, Dexadrine, Biphedamine and various diet pills. The most obvious effects include, but are not limited to:

- Decreased appetite.
- Dilated pupils
- Talkativeness, restlessness.
- Excitation with an increase in energy.
- Difficulty sleeping.
- Grinding teeth
- Emotional changes ranging from euphoria to deep depression, as the drug wears off.
- Individual seems intense and easily agitated.
- Breathing quickens.
- Behavior may become unpredictable.
- Needle marks from injecting the drug may be present.

COCAINE - The obvious symptoms of cocaine are very similar to the amphetamine. Its effects are of short duration. Because of the prevalence of inhalation the nose may appear red or runny. Also, needle marks may present, if the drug is injected.

HALLUCINOGEN - These effects are representative of LSD, Mescaline, PCP, Psilocybin and numerous other hallucinogens. The most obvious effects include, but are not limited to:

- Dilated pupils (eyes may have a bizarre glassy appearance).
- Thoughts may be verbalized in incoherent, fragmented fashion.
- Mood changes can run from euphoria to panic in minutes.
- Staring into space may occur due to mild or strong hallucinations.
- Individual may seem detached from her/his surroundings.
- Person may become isolated or feel a strong need to be outdoors (claustrophobic feelings are common).
- The user usually handles any stress or confrontation with overreaction.
- Behavior becomes unpredictable.

SOLVENTS/INHALANTS - The most common solvents/inhalants are plastic cement, airplane glue, nail polish remover, cleaning fluid and gasoline. The most obvious effects of solvents include, but are not limited to:

- Confused, incoherent and/or slurred speech.
- Dizziness.
- Glazed or red eyes.
- Staggering (coordination impaired).
- Nausea, sneezing, and coughing.
- Depression and headaches.

TRANQUILIZERS - The observable effects of tranquilizers include, but are not limited to:

- Disorientation.
- Drowsiness and reduced alertness.
- Some loss of inhibitions.
- Personality changes.
- Slurred speech.
- Mimics many of alcohol's effects.

These effects are representative of Valium, Librium and Miltowns.



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BARBITURATES - The barbiturate effects include, but are not limited to:

- Calmness, sleepiness.
- Drunken behavior. Like the tranquilizers, this class of drugs mimics alcohol's effects.
- Relaxation of normal emotional controls.
- Slurred speech.
- Impairment of coordination.

These effects are representative of Secobarbital, Amobarbital, Butisol and Tuinal.

OPIATES - The opiate effects include, but are not limited to:

- Euphoria
- Drowsiness
- Constricted pupils
- Nausea
- Detachment from the person's surroundings.
- Reduction in hunger, pain and sexual urges
- User may be "on the nod," an alternately wakeful and drowsy state.
- Constipation.

These effects are representative of morphine, heroin, opium and codeine.

PHYSICAL DEPENDENCE develops when a user cannot stop using the substance without suffering withdrawal symptoms. They vary according to the drug, the amount used and the length of time it has been used. Symptoms often include tremors, vomiting, delirium, cramps and in severe cases, convulsion, even death. This happens because the body has adapted (physiological changes) to the presence of the drug, and when it is withdrawn, the body reacts.

PSYCHOLOGICAL DEPENDENCE is a condition in which the drug user becomes preoccupied with taking the drug; it is hard for him to abstain. This is often characterized by intense cravings or a compulsion to continue the drug-using behavior. Psychological dependence is more difficult to treat than physical dependence, since withdrawal of most drugs can be achieved in a few weeks or less.

TOLERANCE to a drug develops when the individual requires larger amounts to achieve a given effect. Heroin, for example, is capable of producing profound tolerance. An individual using the drug regularly must take much more than the novice user requires. Tolerance to cocaine is still being researched.

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## APPENDIX C

### HOW TO CONFRONT A TROUBLED EMPLOYEE

1. BE AWARE of your own expectation. How much irresponsibility will you tolerate? What is acceptable and unacceptable to you?
2. DOCUMENT all absenteeism, poor job performance, etc. Specific behavioral descriptions are necessary.
3. BE CONSISTENT - Don't tolerate more with one employee than you would with another because you feel sorry or inadequate.
4. AVOID LABELING - Don't be an "armchair diagnostician."
5. BASE THE CONFRONTATION ON JOB PERFORMANCE - Not alcoholism, drug addiction, schizophrenia, etc.
6. BE FIRM - But tell her/him you are there to help. Try to gain her/his trust.
7. BE HONEST - Don't hedge; speak with authority. She/he will respect you for it.
8. ACCEPT NO EXCUSES - If you accept excuses for failure, you don't really care and the employee will know it. If she/he uses excuses, go back to the specific job criteria you expect her/him to meet.
9. ACKNOWLEDGE THE PROBLEM - Try to get her/him to acknowledge the problem, then, work from that.
10. SET UP A PLAN FOR IMPROVEMENT. Establish a progress slope so that you both know if she/he is making progress. Evaluate performance periodically together.
11. DON'T MAKE VALUE JUDGMENT - Better to say: "I don't like this or that," than "I think you are wrong." Rely on your own feelings and specific job performance criteria.
12. DON'T MORALIZE. Avoid the appeal to "should" and "shouldn't." (Don't tell her/him what she/he should do or shouldn't do.) This creates hostility. Better to tell her/him what you expect.

13. NEVER ASK WHY do you do this or that or why do you drink so much, etc. Why serves as an excuse for her/him. Remember that she/he is responsible for his own behavior, always.

14. Try to get the EMPLOYEE to tell what the problem is, even if you know. Avoid saying so if she/he resists. Indicate your willingness to get involved or indicate your concern and desire to get the problem resolved for her/his own sake.

15. If she/he says they are "SICK" - or makes other excuses, let her/him know that there is no excuse for prolonged, impaired job performance; it is her/his responsibility to seek help.

16. DON'T GET "BOXED IN" - Hold fast to your contention that it's her/his responsibility to improve her/his job performance by seeking help. Yours is a therapeutic and legitimate argument - hers/his isn't!

17. USE THE UNION - Don't let her/him play you against higher management and/or the union; you're not in the middle here; she/he is - NO UNION EVER PRAISED POOR JOB PERFORMANCE. Ideally, the employee should eventually be confronted by both the supervisor and the union representative together. Many times the union can be of valuable assistance in motivating the employee. A combined labor management effort increases her/his chances for improvement.

18. GET A COMMITMENT - Set down specific work criteria, which the employee agrees to work for during a certain time period. DOCUMENT the goals and expectations agreed upon.

19. DON'T MAKE IDLE DISCIPLINARY THREATS - Follow through with your warnings. (Use specific time intervals: day, week, certain number of shifts, etc.)

20. WHEN CONFRONTING a problem drinker or other troubled employee, identify specific behavior when you discuss her/his job performance. A legitimate and effective approach may be one similar to the following: "It is possible that personal problems may contribute to your impaired job performance. Therefore, I strongly urge you to contact a medical department or a local agency. Whether you do or not, I will meet with you again (at a specific time and day) to consider more severe disciplinary action if there is no significant improvement."

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21. Take the responsibility to intervene. Don't be afraid to get involved. You have a legitimate right to intervene when her/his behavior is interfering with job performance. Remember that it is highly probable that a troubled employee's performance (both on and off the job) will improve when she/he is confronted constructively and consistently. It is a fact that she/he may get worse if she/he is ignored or just warned occasionally.

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APPENDIX D

\_\_\_\_\_  
(Employee's Name)

\_\_\_\_\_  
(Date)

MEMORANDUM FOR Missouri National Guard Employee Assistance  
Manager

SUBJECT: REQUEST FOR/CONSENT TO RELEASE CLIENT/EMPLOYEE  
INFORMATION

I authorize \_\_\_\_\_ to disclose to \_\_\_\_\_  
\_\_\_\_\_ the following information (specify  
extent or nature of information to be disclosed)

\_\_\_\_\_  
The purpose or need for which information is to be used \_\_\_\_\_

\_\_\_\_\_  
AUTHORIZATION: I certify that this request has been made freely,  
voluntarily and without coercion and the information given above  
is accurate to the best of my knowledge. This consent for  
disclosure may be revoked by me at any time except to the extent  
the action has been taken in reliance therein.

This consent, unless expressly revoked earlier, expires on \_\_\_\_\_  
(Specify date, extent or condition upon which it will expire)

\_\_\_\_\_  
SIGNATURE OF CLIENT/EMPLOYEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF WITNESS

\_\_\_\_\_  
DATE

NOTE: THE INFORMATION REQUESTED ON THIS FORM IS SOLICITED  
PURSUANT TO PUBLIC LAW 93 282 FEDERAL REGULATIONS (42 CFR Part  
2). THE EXECUTION OF THIS FORM DOES NOT AUTHORIZE RELEASE OF  
INFORMATION OTHER THAN THAT SPECIFICALLY DESCRIBED ABOVE.

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APPENDIX E

Missouri National Guard Employee Assistance Program Manager

MEMORANDUM FOR \_\_\_\_\_

SUBJECT: Release of Employee Information

In accordance with the enclosed "Consent for the Release of Employee Information," we have released information to you concerning

\_\_\_\_\_  
(Employee's Name)

This information has been disclosed to you from records whose confidentiality is protected by Federal law. Federal regulations (42 CFR Part 2) prohibit you from making any further disclosure of it or as otherwise permitted by such regulations. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

\_\_\_\_\_  
Employee Assistance Program Manager

APPENDIX F

This information should be sealed in an envelope, marked to the Attention of the State Employee Assistance Program Coordinator (SEAPC) and sent to the Office of the Adjutant General, NGMO-HRE, 2302 Militia Drive, Jefferson City, MO 65101-1203.

a. How was the employee identified?

- (1) Self
- (2) Co-worker
- (3) Declining job performance
- (4) Behavior
- (5) Other (specify)

b. How was the employee offered assistance?

- (1) EAPM referral
- (2) Self-referral
- (3) Supervisor referral

c. Did the employee accept offered assistance of the EAPM?

- (1) Yes
- (2) No
- (3) Other (specify)

d. If assistance was accepted, is performance back to expected level?

- (1) Yes
- (2) No
- (3) Other (specify)

e. If assistance was refused, what was the disposition of the employee?

- (1) Counseled
- (2) Official reprimand
- (3) Disciplinary action (type?)
- (4) Termination



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APPENDIX G

MISSOURI NATIONAL GUARD EMPLOYEE ASSISTANCE PROGRAM

STATEMENT OF UNDERSTANDING

Information relating to the identity, diagnosis, prognosis or treatment of any employee/patient, which is maintained in connection with the Employee Assistance Program (EAP), is confidential. However, confidential information may be released under the following circumstances. (References: Public Law 93-282, Title 42 CFR Part 2, and MONGR (AR) 600-86/MONGR (AF) 30-3.)

1. The EAP does not protect the confidentiality of illegal drug use by military personnel. Information may be released to those in command/supervisory channels with a "need to know."
2. Information may be released if the disclosure is necessary to protect against an existing threat to life or serious bodily injury to self or another person. This includes circumstances that constitute suspected child abuse and/or neglect and verbal threats against third parties.
3. Information may be released if an employee occupies a sensitive position or has access to sensitive materials, i.e., military classified documents, etc.
4. Information may be released to medical personnel to the extent necessary to meet a genuine medical emergency.
5. Information may be released if the employee consents in writing.

References containing further information pertaining to confidentiality are available upon request.

I have read and understand the above.

\_\_\_\_\_  
(Employee's Printed Name)

\_\_\_\_\_  
(Employee's Signature)

\_\_\_\_\_  
(Date)

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I have discussed the above statements with the employee and he/she has acknowledged an understanding of the statements.

\_\_\_\_\_  
(EAP Manager's Printed Name)

\_\_\_\_\_  
EAP Manager's Signature)

\_\_\_\_\_  
(Date)

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APPENDIX H

\_\_\_\_\_  
(Supervisor's Office Symbol)

\_\_\_\_\_  
(Date)

MEMORANDUM FOR \_\_\_\_\_(Employee's Name)\_\_\_\_\_

SUBJECT: Referral to Employee Assistance Program

1. I am referring you to the Missouri National Guard Employee Assistance Program (EAP) IAW MONGR (AR) 600-86/MONGR (AF) 30-3. The reason for this referral is your \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

2. I have scheduled an appointment for you with the Employee Assistance Manager at \_\_\_\_\_ on \_\_\_\_\_.

3. During this meeting you will have the opportunity to identify problems that are affecting your \_\_\_\_\_ and specific actions you can take to correct this situation.

4. The contents of your discussion with the EAP will be held confidential. However, the EAPM will advise me that you kept the appointment and that you have agreed to participate. The EAP is strictly voluntary.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Supervisor's Name/Grade)

I acknowledge receipt and understanding of this referral.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Signature