

CHAPTER 16

CIVILIAN

EMPLOYEE ASSISTANCE

PROGRAM (CEAP)

NOTE: This chapter should be read in conjunction with local activity instructions and with any negotiated agreements between your activity and an exclusively recognized labor organization. Contract language will take precedence over conflicting provisions in this manual. Areas of uncertainty should be discussed with the Human Resources Advisor.

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CIVILIAN EMPLOYEE ASSISTANCE PROGRAM (CEAP)

NOTE: The Civilian Employee Assistance Program (CEAP) services are contracted out by some activities. The Human Resources Office (HRO) administers the CEAP for those activities internally. The CEAP office and counselor (for CNRNW employees) may be contacted at (360) 476-4455. This office is also the coordinator for contracted CEAP services.

I. DEFINITIONS

- A. **Alcoholism.** A primary, chronic disease with genetic, psychosocial, and environmental factors influencing its development and manifestations. The disease is often progressive and fatal. It is characterized by impaired control over drinking, preoccupation with the drug alcohol, use of alcohol despite adverse consequences, and distortions in thinking, most notably denial. Each of these symptoms may be continuous or periodic.
- B. **CEAP Counselor.** An individual, trained in mental health counseling, designated to conduct the initial interview with an employee, explain the provisions of the CEAP, determine the nature of the personal problem, and refer the employee to a source of assistance located within the community.
- C. **Drug Abuse.** Use of a drug in a manner or to a degree which interferes with the individual's health, interpersonal relations, social behavior, economic functioning, or job performance.
- D. **Rehabilitation.** A process often necessary for successful recovery from alcoholism, drug addiction or other dependencies. Rehabilitation occurs following treatment and normally does not require medical supervision. Ordinarily, rehabilitation involves individual or group counseling or participation in self-help organizations such as Alcoholics Anonymous or Overeaters Anonymous.
- E. **Treatment.** The initial step in the process of recovery from alcoholism, drug abuse or other dependencies. Treatment is conducted under medical supervision and serves to alleviate the physical and psychological effects of substance abuse including withdrawal symptoms and medical conditions resulting from substance abuse. Treatment is a prelude to, and should not be confused with, rehabilitation.

II. PURPOSE AND USE

- A. **Purpose.** The purpose of the CEAP is to help employees whose conduct or performance is adversely affected, or potentially affected, by personal problems. Such problems may be related to alcohol or drug abuse, or to behavioral, emotional, legal, financial, family or other personal situations. [Appendix 16B](#).
- B. **Voluntary Nature of Program.** The CEAP is both a tool for management in attempting to assist employees with work or non-work problems and a method by which an employee can seek help. Although a supervisor can refer an employee to the CEAP, there is no mechanism to mandate an employee's participation except as required by EO 12564, when an employee is found using illegal drugs [\(Chapter 25 DFWP\)](#).

III. SCOPE OF SERVICES [\(For a EAP fact sheet, click here\)](#)

- A. **Managers.** Consultation services to managers and supervisors on how to conduct an interview with the employee who has a problem.

B. Employees

1. Short-term counseling related to problem identification.
2. Referral for treatment and rehabilitation to an appropriate community service or professional resource (treatment at government expense except for qualified military veterans, is prohibited).
3. Referral to information resources, i.e., eldercare.
4. Follow-up to aid an employee in achieving an effective readjustment to his/her job during and after treatment.
5. Referral for employees who have family members who have drug or alcohol problems.
6. Referral to treatment of an employee whose performance is affected by the medical/behavioral problem of a family member is handled in the same way as any other client referral. If, after assistance is offered, performance does not improve, continuing assistance combined with disciplinary action may be appropriate.

- C. **Family Members.** Families of employees who have drug or alcohol problems are eligible for referral.

IV. RESPONSIBILITIES**A. Supervisors** are responsible for:

1. **Identifying and documenting** at an early stage job performance and conduct which adversely impacts job effectiveness.
2. **Documenting and discussing the unacceptable performance or conduct** with the employee.
3. **Discussing the case with the HRO Advisor** and either offer or refer the employee for counseling when the supervisor suspects an alcohol, drug, behavioral, emotional, or other health or personal problem.
4. **If employee declines to cooperate** in the counseling or undertakes a course of treatment/assistance but fails to correct the performance or conduct problems within a reasonable time, proceed with corrective action or further corrective actions, as appropriate. Assisting an employee in denying or covering up a problem is generally most harmful in the long run (to both the employee and the supervisor). [Appendix 16A](#) provides guidelines for dealing with employees suspected of substance abuse.

B. Employees are responsible for:

1. **Correcting unacceptable performance/conduct** with or without assistance through the CEAP.
 2. **Being aware of the provisions and procedures** of the CEAP.
 3. **Cooperating with supervisors** and CEAP counselors in matters relating to CEAP.
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4. **The cost of any treatment or rehabilitation** which results from referral under the CEAP.

IV. CONFIDENTIALITY

- A. **The content of the CEAP counseling interviews shall be kept confidential.** Federal regulations prohibit CEAP from acknowledging whether or not an employee has been seen by CEAP except to verify the employee has/has not kept a specific appointment (during working hours) made by management. [CNRNW Installation 5355.2](#), [Drug and Alcohol Free Workplace Policy](#).
- B. **With the exceptions provided by state and/or Federal regulations**, no information about the counselee or the counseling interview may be given to any person unless the counselee has given written permission to do so.
- C. **The employee's Official Personnel Folder** will not contain any documentation relating to participation in the CEAP as a counselee.

V. SUBSTANCE ABUSE

- A. **Analysis of Employee Infraction.** "Potential for the employee's rehabilitation" is one of the Douglas Factors used to analyze an employee infraction ([see Chapter 17 Employee Corrective, Disciplinary and Adverse Action and associated Appendix 17A Douglas Factors and Appendix 17B Guide for Determining Recommended Remedies for Scheduled Offenses](#)). If there is any relationship to the infraction and an employee's claim of substance abuse, it must be documented as part of the analysis.
- B. **Supervisor Guidelines for Cases of Suspected Substance Abuse.** It is important that supervisors follow established procedures and properly document all actions when dealing with suspected substance abuse. [See Appendix 16A](#).
- C. **Recommended Remedies for Substance Abuse.** A range of remedies is recommended for substance abuse. The remedy depends on many factors including whether or not it is a first offense and how it affects the employee's duties. This is discussed in [Chapter 17 Employee Corrective, Disciplinary and Adverse action and associated Appendix 17C Schedule of Offenses and Recommended Remedies](#).

Appendix 16A
Substance Awareness Guidance for Supervisors
Navy Region Northwest Supplement

Introduction

Drug and alcohol abuse is the fastest growing problem facing the Federal workplace. On-the-job and recreational use of drugs and alcohol cause significant problems in job performance and conduct and addressing these problems can be complicated and confusing. The NRNW approach to creating a drug-free workplace includes the early identification of illegal drug users; rehabilitation of employees responsive to assistance efforts; as well as the firm, constructive use of discipline for those employees who use illegal drugs.

This guide is designed to introduce you to the types of testing available and provide basic information regarding your obligations as a supervisor if illegal drug or alcohol use is negatively impacting your workplace. As individual issues arise, you should work closely with your local Drug Program Coordinator (DPC), Civilian Employee Assistance Program (CEAP) Coordinator and Human Resources (HR) Advisor for assistance specific to your case.

Random Testing

As part of the Drug-Free Workplace Program (DFWP), NRNW has specific positions that are designated by the Department of Navy as "Testing Designated Positions" (TDP). Employees who occupy TDPs can be randomly tested for illegal drug use. Incumbents of these positions are provided written notification of testing requirements before accepting their position. Random testing may only occur when the employee's name is selected through a randomly generated process. In the event you suspect that an employee who occupies a TDP is using illegal drugs, on or off duty, follow the procedures for "reasonable suspicion" testing outlined below.

If you receive notice of a positive finding on a random drug test, contact your local DPC and HR Advisor for information and guidance on taking specific required actions.

Reasonable Suspicion Testing

Only volunteers and employees who encumber TDPs may be randomly tested for illegal drug use. Any NRNW employee, however, may be referred for drug or alcohol testing if reasonable suspicion exists to believe that the employee is performing his or her duties while under the influence of drugs or alcohol. Determining whether "reasonable suspicion" to authorize drug or alcohol testing exists is a very subjective standard. To assist supervisors and managers in making objective determinations, a "Reasonable Suspicion Checklist" has been created and attached to this guidance. Be sure to use this checklist whenever attempting to make a "reasonable suspicion" determination. The checklist, as well as documentation of the circumstances supporting your decision to initiate the testing, will become important evidence in the event administrative or disciplinary action is later taken.

The impact of employee drug and alcohol use is usually presented in one of two ways, i.e., either (1) intoxication or impairment while in the workplace or (2) the off-duty use of illegal drugs or alcohol which causes performance or conduct problems at work.

On duty impairment...

If you encounter an employee actually using intoxicants or illegal drugs while on duty or you suspect such use and have completed the Reasonable Suspicion Checklist, and you have determined that the employee is under the influence, follow these steps:

1. Summon another supervisor or responsible employee to witness the affected employee's behavior, physical appearance and responses to your questions and/or instructions. If the employee is a member of a bargaining unit, and if time and

circumstances permit, request the presence of the shop steward or other union official to witness the employee's behavior.

2. In presence of a witness, confiscate any intoxicating beverage or drugs in the employee's possession and give the employee a receipt describing the contents, if known, and quantity. If the employee is reluctant to surrender the evidence, request assistance from installation security personnel.
3. If you suspect the employee is under the influence of alcohol and a blood alcohol content test machine is close by, offer him/her the opportunity to take a test. Blood alcohol content test machines are located as follows: Building 433, Naval Base Kitsap, Bremerton; Building 1200, Naval Base Kitsap, Bangor; Building 220 Naval Air Station Whidbey Island. If the employee refuses the test, document the refusal and the reasons why.
4. If medical personnel are reasonably available, escort the employee to the medical treatment facility for non-invasive evaluation of the employee's sobriety. If the medical treatment provider is unable to determine whether the employee is impaired, use caution in deciding whether to return the employee to work, offer leave, or assign duties not hazardous to the employee, co-workers, or property. An employee must not be permitted to operate any motor vehicle if there is any belief that the employee is in any way impaired.
5. If the employee is determined to be incapacitated for duty, but does not appear to need medical attention, the employee should be sent home on administrative leave. The employee shall be released to the custody of next of kin, or a relative or friend, if possible. If the incapacitated employee's behavior could constitute a hazard to self or others, or constitutes a violation of state or Federal law, e.g., possession of a controlled substance such as marijuana or cocaine, request assistance from installation security personnel to escort the employee off the station and/or deliver the employee to the custody of appropriate law enforcement authorities
6. If you are reasonably certain that the employee is under the influence of an illegal drug, contact the DPC for advice and assistance in requesting a drug screening test.
7. Contact your local HR Advisor to discuss what has taken place and for advice on what additional action should be taken.
8. Document and discuss the incident with the employee immediately upon the employee's return to duty to get the employee's explanation of the events. Advise the employee of the possibility of disciplinary action, and direct the employee to meet with the Region Civilian Employee Assistance Program (EAP) Coordinator, as needed. Do not refer employees to the EAP if they are intoxicated or otherwise unable to participate in a meaningful discussion and make logical decisions.

If you suspect an employee has a substance abuse problem...

Do **not** attempt to diagnose an employee's illegal drug or alcohol problem, but be alert to indications of a problem such as changes in behavior and/or performance. A supervisor's careful observations are often the strongest evidence in a subsequent disciplinary action case. Use the Reasonable Suspicion Checklist as a tool to record and document your observations and follow these guidelines:

1. Document instances of conduct and performance problems and counsel the employee about these issues. Refer the employee to the EAP and document your referral. The earlier this is done, the greater the chances of effecting change.
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2. If the employee does not show improvement, contact your local HR Advisor to discuss appropriate action. If the situation warrants, the corrective action may be initiated concurrently with the CEAP referral.
3. If the employee declines to cooperate in counseling or under-takes a course of treatment but fails to correct the performance or conduct problems within a reasonable time, proceed with corrective action or further corrective actions, as appropriate. Failure to take prompt appropriate corrective actions assists the employee in denying or covering up a problem and is harmful to both the employee and the supervisor in the long run.

Accident or Unsafe Practice Testing

NRNW is committed to providing a safe and secure work environment. Drug testing after an accident or unsafe practice can provide significant information in furtherance of that interest and will be pursued whenever necessary to determine the cause of serious on-the-job accidents, or unsafe on-duty job-related activity so that appropriate corrective measures can be taken.

Employees may be subject to testing when, based on the circumstances of an on-the-job accident or unsafe, on-duty, job-related activity, their actions are reasonably suspected of having caused or contributed to an accident or unsafe practice that results in a death, personal injury requiring hospitalization, and/or damage to government or private property estimated to be in excess of \$10,000.

Follow-up Testing

NRNW employees who are referred to counseling or rehabilitation through CEAP for illegal drug use may be subject to unannounced follow-up drug testing. Follow-up testing is the final step in an employee's counseling or rehabilitation program and should be performed for a period of at least 1 year or for such time as specified in an abeyance agreement, rehabilitation plan, or other written agreement. Your local DPC will assist you in obtaining authorization for follow-up testing and administering the testing.

Security Clearance

The use of illegal drugs and/or alcohol may impact an employee's security clearance and his/her assignment to a sensitive position. Supervisors who become aware of an issue that may impact an employee's security clearance are required to notify the Security Officer.

Additional Resources

For more information regarding the Department of Navy's Drug-Free Workplace Program, please review COMNAVREG NW INSTRUCTION 5355.2, DRUG-FREE WORKPLACE PROGRAM (DFWP) or contact your local Human Resources Office.

Links and guides to Department of Navy guidance is available at the NRNW Human Resources website: <https://www.cnrw.navy.mil/N01CP/n01cp.asp>. You can also find a guide for supervisors on Alcoholism in the Workplace on the Office of Personnel Management website at: http://www.opm.gov/employment_and_benefits/WorkLife/OfficialDocuments/handbooksguides/Alcohol/index.asp

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**SUPERVISOR'S CHECKLIST FOR MAKING
REASONABLE SUSPICION DETERMINATION**

Employee's name _____
Department _____
Date(s) _____

KNOWING THE SIGNS

The indicators listed below are "warning signs" of drug and/or alcohol abuse and may be observed by supervisors:

Moods:

- Depressed
- Anxious
- Irritable
- Suspicious
- Complains about others
- Emotional unsteadiness (e.g., outbursts of crying)
- Mood changes after lunch or break

Actions:

- Withdrawn or improperly talkative
- Spends excessive amount of time on the telephone
- Argumentative
- Has exaggerated sense of self-importance
- Displays violent behavior
- Avoids talking with supervisor regarding work issues

Absenteeism:

- Acceleration of absenteeism and tardiness, especially Mondays, Friday, before and after holidays
- Frequent unreported absences, later explained as "emergencies"
- Unusually high incidence of colds, flus, upset stomach, headaches
- Frequent use of unscheduled vacation time
- Leaving work area more than necessary (e.g., frequent trips to water fountain and bathroom)
- Unexplained disappearances from the job with difficulty in locating employee

- Requesting to leave work early for various reasons

Accidents:

- Taking of needless risks
- Disregard for safety of others
- Higher than average accident rate on and off the job

Work Patterns:

- Inconsistency in quality of work
- High and low periods of productivity
- Poor judgment/more mistakes than usual and general carelessness
- Lapses in concentration
- Difficulty in recalling instructions
- Difficulty in remembering own mistakes
- Using more time to complete work/missing deadlines
- Increased difficulty in handling complex situations

Relationship to Others on the Job:

- Overreaction to real or imagined criticism (paranoid)
- Avoiding and withdrawing from peers
- Complaints from co-workers
- Borrowing money from fellow employees
- Persistent job transfer requests
- Complaints of problems at home such as separation, divorce and child discipline problems

OBSERVING AND DOCUMENTING CURRENT INDICATORS

Patterns of any of the above conduct or combinations of conduct may occur but must be accompanied by indicators of impairment in order to establish "reasonable suspicion."

Please check all indicators listed below that are **currently** present:

- | | |
|--|---|
| <input type="checkbox"/> Constricted pupils | <input type="checkbox"/> Drowsiness |
| <input type="checkbox"/> Dilated pupils | <input type="checkbox"/> Odor of alcohol |
| <input type="checkbox"/> Scratching | <input type="checkbox"/> Nasal secretion |
| <input type="checkbox"/> Red or watering eyes | <input type="checkbox"/> Dizziness |
| <input type="checkbox"/> Involuntary eye movements | <input type="checkbox"/> Muscular incoordination |
| <input type="checkbox"/> Sniffles | <input type="checkbox"/> Unconsciousness |
| <input type="checkbox"/> Excessively active | <input type="checkbox"/> Inability to verbalize |
| <input type="checkbox"/> Nausea or vomiting | <input type="checkbox"/> Irritable |
| <input type="checkbox"/> Flushed skin | <input type="checkbox"/> Argumentative |
| <input type="checkbox"/> Sweating | <input type="checkbox"/> Difficulty concentrating |
| <input type="checkbox"/> Yawning | <input type="checkbox"/> Slurred speech |
| <input type="checkbox"/> Twitching | <input type="checkbox"/> Bizarre behavior |
| <input type="checkbox"/> Violent behavior | <input type="checkbox"/> Needle marks |

- Possession of paraphernalia (such as syringe, bent spoon, metal bottle cap, medicine dropper, glassine bag, paint can, glue tube, nitrite bulb, or aerosol can)
- Possession of substance that appears to possibly be a drug or alcohol
- Other

DETERMINING REASONABLE SUSPICION

If you are able to document one or more of the indicators above, ask yourself these questions to establish reasonable suspicion:

Y N

Has some form of impairment been shown in the employee's appearance, actions or work performance?

Does the impairment result from the possible use of drugs or alcohol?

Are the facts reliable? Did you witness the situation personally, or are you sure that the witness(es) are reliable and have provided firsthand information?

Are the facts capable of explanation?

Are the facts capable of documentation?

Is the impairment current, today, now?

Do NOT proceed with reasonable suspicion testing unless all of the above questions are answered with a YES.

TAKING ACTION

Reasonable suspicion established

Reasonable suspicion NOT established

Prepared by:

Supervisor's/Manager's Signature:

Date:

Appendix 16B
Civilian Employee Assistance Program (CEAP)
FAQ's

What is the CEAP?

The Civilian Employee Assistance Program is a service for CNRNW employees (supervisory and non-supervisory) and their families to provide confidential, professional assistance with personal problems.

Why is this service being offered?

We know that personal, health, and social problems can seriously impair your ability to perform effectively on the job. Since a healthy, productive employee makes the greatest contribution to mission accomplishment, it is sound management practice to provide programs that help employees deal successfully with personal problems.

What types of problems?

Any personal problem which is or may interfere with job performance, such as:

- Alcohol or Drug Use/Abuse
- Emotional Stress and Personal Problems
- Family or Marital
- Financial

How does the program work?

A trained counselor will help you to clarify what is going wrong in your life and help you work out a solution. The program provides initial counseling, referral for treatment, and follow up.

What does it cost?

There is no fee to you for CEAP services. If it is determined that a referral to a community agency is appropriate, effort is made to take into account your particular circumstances. This includes your health insurance coverage, family, finances, transportation, and needs.

Is CEAP really confidential?

YES. The program is covered by a special provision of the Privacy Act. As provided by law, nothing of your visit will be disclosed to anyone without your written consent.

Won't it look bad on my record?

Not at all. Nothing goes into your Personnel Folder. It is Navy Policy that no employee's job or promotional opportunities will be jeopardized for having sought assistance through the CEAP. In fact, it is policy that employees are to be encouraged to seek help through the CEAP.

What if I may have an alcohol or a drug problem; what if I abuse them?

The Department of the Navy recognizes substance abuse as a treatable health problem. People do recover to become happy and productive. This is why the Navy encourages you to seek help if you believe that alcohol and/or other drugs are a problem in your life.

When should an employee, supervisor, or manager seek assistance?

Just as soon as you think there may be a problem. It often takes prudent, objective outside help before work and personal problems can improve. The longer you wait to seek help, the more serious the problem becomes. So, seek help. You owe it to yourself.

Who do I contact?

Phone (360) 476-4455

Any supervisor or manager can contact the program office and arrange an appointment for you, OR you can call and arrange your own appointment.

Do I have to take time off work?

NO. Check with your supervisor about your appointment time. Administrative time is allowed for the appointment during working hours. For back-shift employees, either odd-shifting or other special arrangements can be made.