

**EMPLOYEE ASSISTANCE PROGRAM MONITORING FORM**

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| --- | --- |
| **Name of institution** |  |
| **Reporting quarter** | [ ]  1 [ ]  2 [ ]  3 [ ]  4 |
| **EAP services available** | [ ]  In-house clinic/health center/EAP[ ]  Schedule of external services/providers[ ]  Hybrid (in-house and external)[ ]  Other (specify)  |
| **Indicators** | **Details** | **Remarks** |
| Sensitization on available EAP services. If yes, how many employees reached? | [ ]  Yes [ ]  No\_\_\_\_\_\_\_\_\_\_\_ |  |
| Types of problems manifested/identified (Tick all that apply) | [ ]  Low productivity/declining performance/decreasing work quality[ ]  Lack of attention or focus[ ]  Poor decision-making[ ]  Poor judgement[ ]  Unusual carelessness[ ]  Unsteady gait[ ]  Excessive mood swings[ ]  Appearance of being high, unusually energetic or sedated[ ]  Repeated lateness[ ]  Increased absenteeism including unexplained absences[ ]  Smell of alcohol or tobacco[ ]  On-the job accident[ ]  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Identification method used (Tick all that apply) | [ ]  Self-referral[ ]  Informal referral[ ]  Formal referral  |  |
| Number of staff/students referred for counselling |  |  |
| Number of staff/students referred for drug treatment and rehabilitation |  |  |
| Number of staff/students who utilized counselling services |  |  |
| Number of staff/students who went for treatment and rehabilitation |  |  |
| Job category of staff who went for counselling or treatment and rehabilitation (Tick all that apply) | [ ]  Top Management[ ]  Middle Management/Station Head[ ]  Technical Staff[ ]  Support Staff |  |
| Issues addressed in EAP (Tick all that apply) | [ ]  Alcohol and drug use[ ]  Work-related stress[ ]  Depression or other mental health issues[ ]  Family issues[ ]  Personal challenges/difficulties[ ]  Financial or legal[ ]  Illness/health problems[ ]  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| ***Demographics of EAP users:***Gender | \_\_\_ males \_\_ females |  |
| Age | [ ] <10 [ ] 10 – 18 [ ] 19 – 25 [ ] 26 – 35 [ ] 36 – 45 [ ] >45 |  |
| Staff vs dependants | \_\_ Staff \_\_Children \_\_Spouses |  |
| Number of staff vs dependants receiving after-care services | \_\_ Staff \_\_Children \_\_Spouses |  |
| Challenges (if any) encountered when implementing the EAP | 1.2.3.4.5. |  |