



# The Frontline Supervisor

November 2024

**Q. I recently saw a news article about “pink cocaine” and a person who had it in their system when they died. What is this all about? I have drug awareness training but have not heard about this one. There are so many crazy-sounding drugs. Is it necessary to keep up with this sort of information?**

A. Demonstrating some knowledge of substance trends helps maintain your credibility as a supervisor who is well informed. Employees are more likely to take policies seriously, and it also shows you are not naïve about these emerging risks. So, it is better to appear knowledgeable and also be knowledgeable in discussions about substance abuse if they occur, but such knowledge would never be appropriate to diagnose employees. Here is information from an authoritative website: “Pink cocaine is a powdered mixture of drugs that usually does not include cocaine but a combination of other drugs. It is pink in color due to the addition of food coloring and sometimes strawberry or other flavorings. It is most commonly used by young people in the club scene. Pink cocaine is usually either ingested in pill form or snorted as a powder. Rarely, it is injected.” Many club drugs like this one have a “tripping speed-like” effect, a combination of hallucinogenic and stimulant response, and a high risk of out-of-control behavior for the user. Source: [/www.poison.org/articles/pink-cocaine](http://www.poison.org/articles/pink-cocaine)

**Q. I met with my employee to confront him about performance and attendance issues, but I was taken aback when he confronted me about my own behaviors—coming in late and communicating poorly. He isn’t wrong, but this undermined my ability to feel in control and take charge. What should I do now?**

A. Seek guidance from the EAP to better manage this discussion and confrontation with your employee. Obviously, performance cannot remain unsatisfactory despite the issues you face. Consider role-playing the conversation to build confidence and improve your approach. Don’t dismiss your employee’s comments. Do the opposite—thank him for his feedback and tell him you will improve your own conduct. Then, after acknowledging his points, steer the discussion back to his performance and attendance issues. Schedule another meeting focused solely on his performance and attendance. Remember to document, follow up, and implement accountability. Self-awareness and consistency in leadership are important, so focus on correcting your performance. Many supervisors do not realize that their actions set the tone for their team or department. Their behavior directly influences whether the workplace becomes positive and productive or heads in the opposite direction. Their behavior also shapes employee expectations accordingly.

**Q. I was speaking with my employee about performance issues, and there was a definite mismatch between his cooperation with me and his nonverbal cues. He seemed defiant. Should I ignore the nonverbal stuff and just go with what I can quantify?**

A. Ignoring behaviors like crossed arms, lack of eye contact, or a dismissive tone could leave hidden issues associated with productivity and behavioral problems unaddressed. Nonverbal behaviors reveal underlying emotions or attitudes that words alone may not express. These might include disengagement, frustration, or dissatisfaction—any of which could be associated with additional risk issues for the employer. Perhaps you have seen employees in the past whose unchecked nonverbal cues became habitual. Over time, the undermining of authority followed, and team morale was negatively affected. Count on the EAP to help you understand how to address attitude and performance issues so that underlying problems can be properly identified and resolved before they escalate. The term “attitude performance” refers to nonverbal cues like tone of voice, facial expressions, and general disposition, which you should consider when judging the emotional orientation employees have toward their jobs, coworkers, and the work environment. They can be tricky to document, but the EAP can help you understand how to do it.

**Q. Three weeks ago, I recommended that my employee visit the EAP to get help with serious financial issues affecting his performance. He did not know where to turn, but I knew the EAP could help. He just told me the EAP has not referred him to a source of help yet. I’m baffled. What should be my next move?**

A. The fact that your employee hasn’t connected with a referral source could be due to several factors, and it’s unlikely that the EAP has failed to follow through, forgotten the employee’s needs, or been unable to locate a resource this far from the original assessment. While the employee may claim they haven’t received a referral, EAP experience suggests that a lack of follow-up often reflects a loss of motivation to seek help. However, other factors—such as anxiety, delays in communication with the EAP or a source of help, resistance to outside support, or a new desire to handle the issue independently—could be at play. A reported problem by the employee, such as financial issues, may really be caused by something else, such as a gambling problem. This could also explain resistance to treatment. By formalizing the referral process and requesting a signed release, you can confirm participation and reinforce the employee’s commitment to engaging with the program.

**Q. My employee sees a psychiatrist every few months, I think, for medication checks and possible therapy. She has been seeing the doctor for about three years. Recently, she has been coming to work late. It’s getting chronic, so I am worried. Should I encourage her to speak with her doctor or the EAP?**

A. Recommend the EAP to your employee or use a formal referral process if you’ve already addressed the tardiness issues with her. Since you aren’t in a position to diagnose her, avoid making assumptions about her health or whether her attendance issues are connected to the original problem she sought treatment for years ago. Her issues may have nothing to do with therapy, medication, or even a personal health matter. To get clarity, you should ask directly why she is coming in late all of a sudden. Listening to her response may help identify whether work-related factors, such as workload, team dynamics, or unclear expectations, are involved—which might need to be addressed.

**Questions? Call during business hours 815.748.8334, or after hours at 800.373.3327**