## THE CONTINUUM EDGE

## **INFORMATION FOR LEADERS**



He has been with us 17 years, and I think he has gotten used to a simple satisfactory level of performance. However, I think it is below his true potential.

A: Encouraging an employee to demonstrate more motivation and initiative can be a delicate task, but it is the primary role for any supervisor, so knowing what works and what's "state of the art" is essential.

How do I motivate an employee to give more to the work unit?

In other words, don't reinvent the wheel. Start with a candid conversation. Failing to help employees improve usually starts when you miss this step.

Discuss performance and potential and rely on your observations and belief in his capabilities. Dive into this topic. Link these things to his aspirations and goals. He almost assuredly has some, or at least imagines a few; this is true for almost everyone, despite their non-action. Draw these out.

State your expectations in a positive way and what you believe success for him looks like, but also point out opportunities for growth and advancement. Get agreement on a few changes and begin. Offer feedback frequently, recognize improvements, and offer training and new learning experiences to complement his development of new skills and knowledge.



I understand how supervisors should focus on performance and not attempt to diagnose employees. I do think it is natural to consider and figure out what's causing problems with an employee. So how are supervisors supposed to overcome this tendency?

A: It is natural for supervisors to consider what personal problems might be contributing to an employee's performance issues. The real problem is what often follows: giving consideration, time, discussion, attention or even inappropriate accommodations to help the employee, even while the unsatisfactory performance continues. Historically, this has occurred within companies that did not have an EAP. The caution against directly diagnosing employees is tied to the potential consequences of allowing an employee to persist in their illness, encountering ongoing challenges, and making unfulfillable promises regarding treatment or seeking assistance. The recommended alternative involves referring the employee to Continuum EAP, minimizing the risk of losing the worker and mitigating the various costs associated with retaining a troubled employee.



I've noticed over the years that employees who are more likeable as people tend to get more positive performance evaluations. I think many supervisors are not aware of their lack of objectivity in evaluating the performance of people they like. Why does this happen?

This is called the "halo effect." This is a bias where a positive impression of a person in one area (i.e., liked for being charismatic and jovial) leads to an overall positive perception of that person. In the workplace, an employee who fits the above description might get a higher performance evaluation than they deserve because the halo effect influences how the supervisor perceives and evaluates the employee. The risk of being unaware of this dynamic is that the supervisor will be accused of playing favorites, not giving enough feedback or overlooking errors.

Even worse, this can affect performance and pay raises that appear discriminatory. The solution is to use objective criteria for evaluations and, more importantly, to conduct them regularly because not doing so can lead to biases and potentially to risks of the halo effect.





After a small truck accident, my employee admitted to smoking pot before I asked. He also shared a bunch of personal problems affecting him, so I made an EAP referral instead of testing him. I felt we were past the need for a test because of his honesty. Was this a mistake?

**A:** You should always act on the requirements of your company's drug testing policy, which could include a referral to the EAP or other appropriate administrative action.



However, many safety and risk issues come with your decision to not test, which include not knowing if other substances are involved, the inability to do follow-up testing, risk of public and associated legal jeopardy, and lack of leverage linked to job security that naturally creates greater urgency to remain in appropriate treatment if recommended.