



Quality Employee Assistance Programs.

The Frontline Supervisor

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Q. What is “Lone Ranger syndrome” as it pertains to supervisor practices and using the employee assistance program (EAP)?

A. Lone Ranger syndrome describes a set or pattern of behaviors commonly attributed to supervisors who believe they are responsible for managing employee performance problems and helping troubled employees resolve personal issues, typically without relying on organizational resources like the EAP. In short, it refers to a strong, often misguided, sense of independence. These supervisors view themselves as solid and loyal performers, but they risk becoming overwhelmed and easily subject to burnout. Their inability or unwillingness to ask for help is viewed as a risk to the workplace. The term was coined in the 1970s by federal Office of Personnel Management Employee Relations Manager Art Purvis in a widely published and circulated monograph. Examining Lone Ranger syndrome helps supervisors gain self-awareness and understand the value of EAPs in relieving them of the impossible burden of involving themselves in employees’ problems. The key hurdle is convincing oneself that it is okay to ask for help.

Q. How can a supervisor effectively implement a structured debriefing after a workplace incident? Or should we rely on the EAP to help manage these types of events?

A. EAPs are available to help organizations communicate with workers and address the emotional impact of traumatic events. Call upon the EAP when a serious accident, an assault, a robbery, the death of a coworker, or exposure to such events and the resulting secondary trauma affect your workplace. Secondary trauma means that even employees who were not directly involved may experience anxiety, irritability, sleep problems, and changes in work performance. Early EAP involvement helps employees normalize reactions and reduce long-term impact. In the meantime, consider talking with the EAP about your role and your work unit’s needs in advance of an incident. Also review your organization’s critical incident policies and procedures, if available. (Do not wait for an incident to occur before diving into this material.) Conceivably, an incident may require you to take a leadership role in managing a workplace response, and having clarity about expectations, resources, and procedures beforehand will help you step in to manage the situation appropriately and bridge the response until EAP assistance can be arranged.

Q. We have an employee who visited the EAP. She shared with us her struggle with anxiety and burnout and requested time off for a couple of days. Can the EAP help verify whether the work she is doing is too much for her nervous system? She wants to keep her job, but we need expert input.

A. Although the EAP can work with your employee to address her mental health challenges, it cannot render an opinion regarding her ability to perform essential functions of her position. That determination rests with management, in consultation with Human Resources and, when appropriate, occupational health or medical providers whom they may want to consult.

The EAP's role is supportive, focusing on helping employees and connecting them with community resources. It does not assess fitness for duty, certify disability status, or recommend job restrictions. These functions are managerial in scope. EAPs that involve themselves in such roles potentially undermine the program's ability to attract employees. If this happened, word of it would spread fast among employees.

Q. What strategies optimize EAP engagement when employees are reluctant to use external resources due to confidentiality concerns or fear of judgment?

A. EAPs attract employees struggling with personal problems because they are perceived as professional, convenient, at no cost, confidential, and nonjudgmental. These elements should be promoted among supervisors and the organization, with top management especially underscoring them and visually supporting the program. This is how the effective marketing of an EAP occurs. Promoting an EAP is much like marketing any other product—it requires consistent, meaningful communication that builds trust and highlights the program's value. The issue that creates the most concern is whether the EAP is confidential, and the frequent marketing of this aspect of the program is what drives EAP utilization and prevents the erosion of perceived confidentiality that can occur naturally.

Q. How can managers distinguish between performance problems due to skills deficits and those arising from unmanaged mental health problems?

A. This is one of the classic questions of supervisors when first learning about EAPs, but the good news is that you don't have to distinguish between the two to take appropriate action. Keep your focus on attendance, quantity of work, quality of work, attitude, conduct, and availability (being ready and able to work). In other words, simply be a good supervisor and help employees perform to the best of their ability. If problems emerge, persist, fluctuate, or reappear after coaching and corrective steps you take naturally, consider referring the employee to the EAP. Use the procedure recommended by the EAP or established by your organization. Your referral to the EAP should always be based on performance issues, not mental health, or other health problems you believe explain an employee's behavior or performance decline.