

A critical evaluation of an employee health and wellness programme of the Department of Education

A case study of the Motheo District in the Free State Province

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ABSTRACT

The primary aim of the Employee Health and Wellness Programme (EHWP) is to make a positive contribution towards maximum employee productivity and effectiveness in the workplace. Various organisations have implemented the EHWP, but the achievement of its aims and objectives need to be investigated in order to ascertain whether the service is successful. In order to achieve this, the article aims to evaluate the effectiveness of the EHWP services in the Free State Department of Education, Motheo District.

In order for the DoE to comply with legislation they need to ensure that there is adequate provision of human and capital resources. Employees should be knowledgeable on the content of policy guidelines and procedures to promote utilisation. Accessibility of the programme will depend on the restructuring of the EHWP section from being a subsection to a Directorate. An appropriate structure can make the EHWP section more effective. Staffing, competency, integration and early identification can be dealt with if the DoE can employ personnel with appropriate skills. Confidentiality and the model through which EHWP services are rendered are challenges in the DoE as this influences the utilisation of EHWP services.

INTRODUCTION

In South Africa the public sector is undergoing a period of major change in terms of improving service delivery for the achievement of government objectives. Public sector managers are under constant pressure to improve the performance of their institutions. The *White Paper on Human Resource Management* (1997) and the *Public Service Regulations*



(2001) signal a new approach to performance management and development in the South African public sector.

Performance management is a broad term that encompasses all the management tools necessary to ensure the achievement of performance goals. These become a challenge for managers, and it is often difficult to identify the underlying causes of valued employees' poor or declining performance.

These causes are complex, often involving matters personal to the individual and beyond the expertise or responsibility of the managers. To address this matter, the *Public Service Regulations 2001* (*Government Gazette* No. 20271) determine that all national and provincial administrations are legally required to render an Employee Health and Wellness Programme (EHWP) to their employees. These regulations play a vital role in minimising the personal challenges faced by employees that impact negatively on their productivity or job performance.

The Department of Education (DoE) in the Free State Province offers an Employee Health and Wellness Programme (EHWP) to its employees to assist with their personal or work-related problems and strives to ensure that its employees receive effective and efficient EHWP services. EHWP is a planned, systematic programme designed to provide professional assistance to all employees and their immediate families who may be experiencing, among other things, alcohol, drug, emotional or personal crises or other problems (for example health, marital, family, stress, financial, traumatic, other personal concerns and/or legal matters) which interfere with their job performance.

This article will *firstly* describe wellness programmes and their benefits. *Secondly*, the wellness programme applied in the Republic of South Africa (RSA) will be explained. *Thirdly*, the ideas of focus group respondents on the EHWP will be described. *Lastly*, recommendations, as derived from the respondents of a focus group and a questionnaire, will be made to enhance an EHWP.

WELLNESS PROGRAMMES

According to the Queensland University of Technology, cited in Maiden *et al.* (2005:12), the wellness concept came to the fore in the USA in the late 19th and early 20th centuries. The wellness concept encompasses the conscious and responsible actions to balance the integrated dimensions of one's existence (i.e. physical, emotional, intellectual, otherworldly, occupational and social) to achieve the highest potential for personal health and wellbeing (Queensland University of Technology, cited in Maiden *et al.* 2007:12). Van der Merwe (2007:21) concurs with this definition and adds that all the dimensions mentioned can be maintained further by appropriate diet, exercise and a healthy lifestyle.

Wolfe and Parker (cited in Janice 1997:127) define wellness programmes as long-term organisational activities designed to promote the adoption of organisational practices and personal behaviour conducive to maintaining or improving employees' physiological and mental wellbeing. Governmental support resulted in the establishment of comprehensive health management services, including fitness centres, health screening, health risk appraisals, educational activities, behaviour change programmes and high-risk intervention (Attridge *et al.* 2005:72).

Craig and Rhodes (2004:40) discovered a wellness programme that was sophisticated and regarded as going “beyond wellness” in Appleton Headquarters in the USA. They report that this wellness programme has been developed in such a way that it offers an on-site wellness centre. The centre’s staff promote a proactive approach to injury management, prevention and rehabilitation by offering regular educational programmes on topics such as ergonomics, lower-back injuries, musculoskeletal disorders and other health-related topics, including stress management, proper nutrition, smoking cessation, breast cancer awareness, teens sport conditioning and childcare seat safety. In support of Craig and Rhodes, Attridge *et al.* (2005:71) reiterate that wellness programmes have advanced, hence the spread of corporate fitness centres that have also been developed lately.

Attridge *et al.* (2005:72) further state that as wellness programmes gain popularity, they will be integrated into numerous health and productivity programmes, including disease management, demand management (self-care), disability management and other employee benefit programmes.

Benefit of the wellness programmes

According to Wong (1993:19), the following are the benefits of wellness programmes:

- reduced cost associated with employee health plans and worker compensation;
- reduced cost of replacing valued employees lost to injury or illness;
- increased employee retention by providing an additional benefit;
- satisfying the humanitarian concern for employees’ wellbeing.

Lynch (cited in Attridge *et al.* 2005:43), emphasises the benefit of employee wellness and states that the scientific evidence to date offers a documented correlation between (a) multiple risk factors and lower productivity, (b) chronic illness and lower productivity, and (c) participation in health management programmes and improved work performance.

Wellness programmes have far-reaching benefits for the organisation, if implemented appropriately. The involvement of senior management should go beyond merely an endorsement, but they should be actively involved in the design, implementation and maintenance of the wellness programme.

EMPLOYEE HEALTH AND WELLNESS STRATEGIC FRAMEWORK IN THE SOUTH AFRICAN CONTEXT

The National Department of Public Service and Administration (DPSA) has developed the Employee Health and Wellness Strategic Framework (referred to from here on as the EHWP Strategic Framework). EHWP addresses the need for an integrated, needs-driven, participative and holistic Employee Health and Wellness Programme for the public service in the Republic of South Africa.

In this Framework the DPSA (2008:8) deepens its definition of employee health and wellness. In the EHWP Framework the measures to ensure employee health and wellness are defined as follows:



- promotion and maintenance of the highest degree of physical, mental, spiritual and social wellbeing;
- prevention of illness caused by working conditions;
- protection of employees in their employment from risks resulting from factors adverse to health;
- placement and maintenance of employees in an occupational environment adapted to optimal physiological and psychological capabilities; and
- adaptation of work to employees and of each employee to his/her job.

The DPSA (2008:8) has four key areas in which employee health and wellness are to be promoted. These are specific functional support areas or pillars that impact directly on the roles and responsibilities of the managers, as well as on health and wellness practitioners in government. The four key areas or pillars will be described below.

Pillar 1: HIV/AIDS and tuberculosis management

The primary purpose of introducing this HIV/AIDS pillar is to reduce the incidence of HIV/AIDS and the impact on individuals, families, communities and society. The EHWP Strategic Framework aligns itself with the HIV/AIDS and Sexually Transmitted Infections strategic plan for South Africa 2007–2011 in endeavouring to reduce the number of new infections by 50% and to reduce the impact on individuals, families, communities and society by providing access to appropriate treatment and care to at least 80% of all people diagnosed with HIV/AIDS (DPSA 2008:29).

The DPSA (2008:9) indicates that South Africa is one of the 22 high-burden countries that contribute approximately 80% to the total global burden of all tuberculosis (TB) cases. Therefore, health care systems should ensure as a first priority that individuals suspected of having TB have access to rapid diagnosis, appropriate treatment and adequate support systems to ensure treatment completion.

Pillar 2: Health and productivity management (HPM)

HPM in the workplace refers to the management of chronic diseases, infectious diseases, disability and occupational diseases so as to reduce the burden of disease management programmes in order to enhance productivity in the public service.

HPM activities are convergent efforts to promote and maintain the general health of employees through prevention programmes, risk assessment and support. These activities lessen the impact and effect of communicable and non-communicable diseases as well as injuries on quality and the productivity of individuals in the workplace (DPSA 2008:29).

Pillar 3: Safety, healthy environment, and risk and quality management (SHERQ)

This SHERQ pillar deals with tangible and intangible factors of safety, a healthy environment, and risk and quality management. The purpose is the optimal occupational health and safety of employees, the safety of citizens, the sustainability of the environment, the management

of occupational and general risks, as well as the quality of government products and services (DPSA 2008:36).

Pillar 4: Wellness management

This wellness management pillar addresses individual and organisational wellness in a proactive manner. Individual wellness is the promotion of the physical, social, emotional, occupational and intellectual wellness of the individual. The intended outcome of wellness management is to maximise the potential of human resources, which may result in an effective and efficient public service that is responsive to the needs of the public.

DEPARTMENT OF EDUCATION (DOE) IN THE FREE STATE PROVINCE, MOTHEO DISTRICT

Motheo District is the biggest district in the Free-State province in terms of the number of people employed by the DoE. The employees at Head Office number about 1 000, at the district offices there are 1 000 employees and in the schools (institutions) there are 3 000 educators and non-educators (Persal Report Employment Statistics 2005).

The DoE outsourced the EHWP services to two companies: RTM Joint Venture and ICASA/WELLCORP. Both companies are responsible for 4 000 employees in five districts.

Objectives of the EHWP policy in the Department of Education

The objectives, as proposed in the policy document, articulate what is to be achieved through the introduction of the EHWP in the Department. The objectives stated in the EHWP policy of the DoE (2001:6) are listed below.

- assist managers and supervisors to deal appropriately with the difficulties and challenges that confront employees in the workplace;
- assist employees to seek professional help for the challenges that impact on their work and interpersonal relationships at work;
- provide appropriate mechanisms for intervention and confidential counselling for employees to address challenges that they face at the workplace;
- promote cooperation, motivation and improve employee morale in order to improve productivity and workplace efficiency; and
- reduce absenteeism, staff turnover, interpersonal conflicts, grievances and work-related accidents in the Free State, DoE at provincial and district level.

EHWP pilot project

The large number of employees in the DoE made it too difficult for the Department to introduce the EHWP at once. The Department therefore adopted a phased approach. It started piloting the programme in a small district named Xhariep.

In 2004 the EHWP component contracted the Careways Group to conduct a survey. The Careways Group used a behavioural wellness profile (BWP) to determine the level of



corporate, personal and social functioning. According to the Careways Group (2004:8), a BWP is a self-report suited to providing a baseline assessment of needs for an EHWP. If an EHWP is implemented, it can be used to measure change over time. At the end of the contract, the Careways Group presented the Department with a summary report of the usage trends.

According to the Report, the services that were used most frequently were face-to-face counselling (41%), financial advice services (23%), legal advice services (17%), and the telephone service for emotionally abused people (4%). The calls were mostly self-referrals (88%), with some managerial referrals (11%) (Careways Utilization Report for the EHWP 2006:11). The Careways Report concluded that the problems employees experienced were more personal challenges and not work related.

Motheo District

According to Newman (2001:143), a research question refers to the relationship between one and a small number of variables that can be generalised to a specific universe. De Vos *et al.* (1998:115) and De Vos and Fouche (1998:104) state that research often starts with one or more questions or a hypothesis. According to De Vos and Strydom (1998:268), the question sets boundaries for what will be studied. The research objectives were to determine the effectiveness of the EHWP in the Motheo District and to make recommendations regarding inefficiencies that were identified. Both quantitative (questionnaires) and qualitative (focus group) methods were employed to generate data (Rakepa 2012). In comparing these two approaches, Mears (cited in De Vos *et al.* 1998:17), cautions that neither of these approaches is better than the other, but they complement each other.

For the questionnaire a sample was drawn from the employees of the DoE (the population), narrowing it down to Motheo District. Currently the population in the Free State Province is 30 000 employees distributed across five districts. It is estimated that there are 5 000 people employed in the target district. Only 500 employees were included in the study from the estimated 5 000, i.e. approximately 10% of the population. 300 out of 500 employees responded to the questionnaire. Data from the questionnaire will be incorporated under *Recommendations*.

The qualitative method was applied through a focus group interview with EHWP officials. Welman and Kruger (2002:211) state that what is fundamental in collecting data via focus groups is to identify themes before, after and during the data collection.

ANALYSIS AND INTERPRETATION OF QUALITATIVE DATA (FOCUS GROUP)

• Policy implementation

The feedback from the focus group participants (the officials of the EHWP section) was that the EHWP policy has only been implemented to a certain extent. The following were stated as challenges that hinder optimal implementation:

- limited capacity;
- budget constraints;

- lack of commitment among senior managers;
- lack of support from other sections within the Department;
- difficulties in implementing marketing strategy; and
- reactive approach and therefore no proactive management of workplace problems or envisioning of potential workplace programmes.

● ***Training and development of the EHWP officials***

The participants in the focus group were confident that they had the necessary training and skills on stress management, family therapy, the development of substance abuse programmes and facilitation skills for the job. They acknowledged that there was room for development in the EHWP section. The focus group participants indicated that they still needed empowerment in areas that were not core to their academic training.

The EHWP officials (focus group) indicated that in their daily interaction with employees multiple problems surfaced that were not areas of their competence. These included, but were not limited to, legal and financial problems. Therefore development in such areas is of the utmost importance for them to deliver a comprehensive package to individual employees and avoid unnecessary referrals.

● ***Management support***

The commitment and leadership of top management have proven to be among the most important aspects influencing the successful functioning of an EHWP. The focus group participants felt that top managers were not seriously committed to the strengthening of the EHWP. Officials in the focus group indicated that their activities should be endorsed by top management, for without the necessary support from top management the EHWP is viewed as a form of entertainment or a second-rate, marginally effective activity. The EHWP officials frequently echoed the need for financial support during the focus group interview. Sufficient funds are needed to successfully carry out EHWP activities.

● ***Outsourcing of the EHWP***

The most frequently used service was counselling and that influenced the Department in outsourcing counselling as the most regularly used service. According to Arthur and Arthanasiades (2008:175), negative preconceptions of counselling (the need for counselling is seen as implying failure in life) had a discouraging effect, making participants sceptical about, or hesitant to use, workplace counselling. In support of Arthur and Arthanasiades, the focus group indicated that employees were given an option (to use either external or internal services) to address the issue of counselling in the workplace. The implication is that people will have a choice in terms of the kind of service that they need.

During quarterly meetings the service provider gives feedback on all referred cases. It is through these meetings that the EHWP section is able to evaluate the performance of the service provider. It was established that there is 100% client satisfaction with service delivery in that referred cases are attended to immediately and are beneficial to the employees in terms of confidentiality.

According to the focus group, the DoE is not intending to decentralise services in the near future. This section with limited resources is left to devise a strategy on how it will attend to all five districts. EHWP officials stated that the current situation is not cost effective, because of the distance between Motheo District and the other districts.

- **Programme evaluation (2009–2010)**

- The focus group indicated that the goals and objectives for the year 2009/2010 were not fully achieved due to the lack of human capacity. The resignation of one of the service providers, RTM Joint Venture, in 2008 had negative implications for the EHWP section as this increased the caseload for these officials. These challenges are seen as a stumbling block, as from time to time plans within the section need to be changed to address a shortage of personnel, thus disrupting programmes.
- The EHWP section caters for the whole province, involving 32 000 employees, and it functions with a skeleton structure of seven officials; considering the number of employees to be catered for, preventative programmes are not effective.
- The availability of funds, for example, cost containment, also has a negative bearing on service delivery for the EHWP section.

The focus group participants stated the following as achievements of the EHWP section:

- EHWP policy is developed and implemented.
- A 24-hour telephone counselling service is effective, as it is delivered by an external service provider and clients are receiving prompt service.
- The EHWP section engaged in negotiations with wellness centres, such as Super Sport and Virgin Active, which enables the employees of the DoE to receive discount upon registration with these fitness or wellness centres.
- Awareness and education programmes are in place for nutrition, weight control, medical check-ups, life style and chronic diseases.
- Systems are in place for dissemination of medical information electronically and in print to all employees.
- Health professionals, such as dieticians, nurses and doctors, are invited to wellness days to provide information and education on health and wellness issues.
- Prevention and curative programmes for managing emotional wellness are in place to enhance the emotional intelligence, self-esteem, optimism, sense of coherence and resilience of employees.
- Programmes are established to promote social, financial and spiritual wellness.

It is evident that it was difficult for the EHWP section to reach its target. The fact that the EHWP expectations deviated significantly from actual performance should have raised concern for senior managers who receive quarterly reviews.

Recommendations for a EHWP

- Compliance with applicable legislation

Corrective actions that can be taken in terms of legislation are indicated below.

- The *Basic Conditions of Employment Act, 1997* should be adhered to; employees should work eight hours per day, as stipulated by the Act. In the DoE employees work overtime but are not compensated. To ensure compliance, the Department should employ a reasonable number of employees to make the workload manageable.
- EHWP section and the Human Resources section should work together, particularly in cases where disciplinary action that can lead to dismissal is imminent. Also, in

cases of ill health where an employee was attending sessions with the EHWP, there needs to be discussions between the EHWP and the Human Resources (leave) section before any decision is taken.

- The *Occupational Health and Safety Act*, 85 of 1993 should be adhered to and the Occupational Health and Safety section should ensure that the employer take precautionary measures by fumigating the offices on a regular basis to prevent occupational diseases.
 - The *Employment Equity Act*, 55 of 1998 should be adhered to, so that employees who are disabled can gain access to the workplace. There should be ramps within the buildings to ensure accessibility for employees with disability.
 - The *Skills Development Act*, 97 of 1998 should be adhered to and employees should be empowered to enhance performance. The Skills Development section should be informed by the EHWP on employees' training needs.
- Policy guidelines and procedures

Currently, the EHWP section has no policy in place regarding health and productivity management and HIV/AIDS. The following are corrective actions to be taken in terms of policy guidelines and procedures:

- the development of an HIV/AIDS policy should help to ensure that those employees who are affected by the illness are not unfairly discriminated against in terms of employment policies and practices;
- the development and implementation of relevant programmes should be aimed at preventing new HIV infections and at providing care and support for those employees who are affected;
- development of a health and productivity management policy should ensure that there are mechanisms in place for the management of chronic, infectious and occupational diseases, as well as disability; and
- the DoE should develop different programmes to promote and maintain the general health of employees through prevention programmes, risk assessment and support. Such activities would alleviate the impact and effect of communicable and non-communicable diseases and promote workplace productivity.

In practice a combination of qualified and registered professionals should ensure the correct prognosis. The multidisciplinary team would hold a case meeting after a case has been referred. The case manager, as the person who has interviewed the employee, would present the case to the team for further analysis and recommendations. Once recommendations have been made, the person to whom the case is allocated would handle the case from then on, with the maximum number of sessions required.

● Accessibility of the EHWP

According to the respondents on a questionnaire the EHWP should be rendered more accessible by means of taking into consideration the factors indicated below.

- The majority of respondents preferred offsite counselling services sourced by a service provider. Confidentiality was one of the reasons given.
- Employees are unaware that they are allowed to access the EHWP without their being referred by supervisors, which implies that employees do not understand the related policies and procedures.



- The majority of respondents from the district rated the services provided by the EHWP as poor. The institutions concerned indicated that if such services could be decentralised, they would be more accessible. Currently, the EHWP services are considered as inaccessible.
- The DoE should consider restructuring the EHWP section by elevating the status of the EHWP subsection to that of a Directorate, in order that its services might be decentralised. The consequent shift away from a centralised operation, in which the service is not reaching its intended beneficiaries, to being a decentralised operation would allow officials to respond to the needs of those requiring their aid at grassroots level.

- Elevation of the EHWP subsection to the level of a Directorate

To upgrade the EHWP the following should take place:

- the Organisational Development section should evaluate the present capacity, namely the capacity of the present personnel, the number of employees to be serviced, and the level of responsibility and skills required; and
- the Organisational Development section should submit the outcomes of its evaluation, together with its recommendations, to the committee which has as its key responsibility ensuring that correct procedures are followed before the section is elevated to a directorate.
- Management activities required for the EHWP

According to the respondents, there is evidently a lack of support from senior management in the DoE regarding the EHWP with, for example, the allocation of funds not being sufficient to cater for the needs of the EHWP.

The following corrective actions should be taken in connection with management activities:

- It is imperative that the Human Resource Director communicate with the District Director to endorse EHWP activities in all sections, as without such District Director backup, the implementation and development of the EHWP in the DoE would be difficult.
- In order for the EHWP to be effective, the departments should be compelled to develop requirements in line with the performance agreement of senior management members. Such members would be responsible for implementing a fully functioning integrated EHWP programme, equipped with all the necessary human and capital resources.
- Number of employees receiving services and the type of service to be received

The fact that employees opt out of therapeutic services, no matter whether the service is provided by an on-site or off-site counsellor, is of concern. Such opting out might imply that employees are not satisfied with the service. A range of factors could be associated with any dissatisfaction with the service, including the breaching of confidentiality, the incompetence of case managers and incorrect diagnosis.

The following corrective actions should be taken to improve the EHWP services.

- The EHWP section needs to revise its marketing strategy if it wants to encourage a larger number of employees to utilise the programme. It could publish cases with which it has had success, either anonymously or with the consent of an employee

who benefited from EHWP intervention. Such success stories could be publicised in the staff newsletter.

- Different sections and schools could be encouraged to share the improvements (such as enhanced stress and financial management, and the provision of sound legal advice) brought about by educational programmes, as well as publish news regarding such improvements in the staff newsletter.
- Staffing, competency, integration and early identification

The proposed actions as illustrated above could help to ensure that the needs of employees in Motheo District are catered for. For the DoE to realise its objectives by reaching out to a large number of employees, service integration is paramount. According to Swihart and Thompson (cited in Attridge *et al.* 2005:3), integration involves bringing together, in a synergistic way, the specialised knowledge and trained expertise of professionals in different but related fields to better serve organisations and their employees. They could work in teams to cover the range of activities outlined in the Operational Plan of the schools in Motheo District.

Possible corrective actions for staffing, competence, integration and early identification could entail the following:

- The DoE should employ staff with different specialities;
- A multidisciplinary approach in the assessment of cases should be implemented.
- Departmental strategic goals regarding the EHWP

As an organisation exists, by definition, to achieve one or more strategic goals, successful goal accomplishment is an appropriate measure of effectiveness. Departmental strategic goals should be specific, measurable, attainable, realistic and time-bound (SMART). The strategic goals of EHWP are not SMART. The strategic goals should be concise statements of expected accomplishment.

The following corrective actions could be taken in terms of meeting departmental strategic goals:

- Strategic planning training is crucial for senior management so that it can formulate the correct strategic goals;
- If the EHWP section should be elevated to a directorate in the DoE, it should be able to concentrate its effort on core competencies, which are managerial functions, rather than on its operational competencies, which would be more the focus of the district level;
- The director of EWHP should have input into the strategic planning of the DoE, at which level all directors represent their sections;
- The director should ensure that the goals of the DoE in relation to the EHWP are clear so that the EHWP section could align its objectives accordingly;
- If the strategic goals are clear, the EHWP directorate in the provincial sphere should be able to assist the district with its work plans, which would reflect performance targets that are quantifiable and achievable.
- Marketing strategy of the EHWP

The EHWP in the DoE has operated since 2005, with the assumption that all the employees were supposed to be aware of and utilising its services. However, such has not been the case in the DoE as several problems have been experienced with marketing the service.



- Marketing the EHWP programme to employees has not always been easy, because the officials concerned often had to market a product that was originally designed with little consideration given to end-user preferences.
- Employees tend to resist change, particularly in relation to their reliance on traditional employer health care provisions. Most employees also tend to rely on traditional corrective medicine to remedy any health problem that they have.
- Employees view the EHWP as a counselling service, as they fail to understand the scope of the section. If the EHWP were to be well marketed, the employees would come to know of other benefits that could be provided by the EHWP.
- Due to a lack of information, employees tend to associate the EHWP with the disciplinary process, leading to their distrusting the programme, as it is viewed as a management tool.
- Accessibility might be one of the factors that affect the utilisation of the EHWP. The fact that areas are widely dispersed in Motheo District has a limiting effect on the awareness and utilisation of the services provided.

The following corrective actions could be taken in relation to marketing:

- The EHWP section should design and package a programme that will be compatible with employees' needs. The employees should then feel part of the process and make more use of the services provided. EHWP activities have little relevance unless employees' needs are satisfied.
- Marketing strategies should be implemented such as the distribution of booklets that clearly state the vision, mission, aims and objectives, the services offered and who is eligible to use the EHWP. The cover of the booklet should include the statement, "The EHWP will not be used as part of the disciplinary process", so that those employees who read the booklet can come to trust the EHWP processes.

The EHWP should request a slot in the following meetings:

- Director's road show: All departmental (district and institutional) employees should be invited to the director's road show, which is held at the beginning of each year in Motheo District. At the road show the heads of the sections from the districts and schools should make presentations about their year plans;
- Principals' conference: The empowerment of principals should take place at the conference, at which different issues, including but not limited to leadership and management skills and governance issues, are covered;
- Union meetings is yet another platform that can be used for the marketing of the EHWP, union meetings should provide an opportunity for all site representatives to be empowered regarding labour issues.
- Confidentiality regarding EHWP models

According to Ligon and Yegidis (1998:194), confidentiality is a key principle of an EHWP, as it fosters trust in the service, which consequently promotes its utilisation. The employees therefore seemed to assume that if the EHWP services were rendered outside the working environment, this would reduce the likelihood of their being stigmatised for their use of such services. However, the services of the EHWP can be rendered successfully by means of an in-house model, provided that the issue of confidentiality is properly managed.

Possible corrective actions to be taken in respect of ensuring the confidentiality of EHWP models are the following:

- the anonymity of those utilising the services provided by EHWP officials should be ensured. For instance, EHWP officials should allow employees to consult them by telephone;
- legal steps should be followed should a breach of confidentiality occur; and
- professional ethics, such as those prescribed in the code of ethics for social workers, psychologists and other medical health practitioners, should be adhered to at all times.

CONCLUSION

Possible inefficiencies were identified in the implementation of the EHWP in the DoE in the Free State Province. In order for the DoE to comply with legislation, the Department should ensure that adequate provision is made regarding human and capital resources. Employees should be knowledgeable regarding the content of policy guidelines and procedures in order to promote the utilisation of the services provided. Accessibility will depend on the restructuring of the EHWP section from a subsection to a Directorate. Putting an appropriate structure in place should make the EHWP section more effective.

Such a transformation would ensure role clarification in the sense that the Provincial Office would focus on management issues and the co-ordination of services, with the district focusing on operational issues. Management support is crucial, because if senior managers endorse the activities of the EHWP, other sections would also be supportive of the section. Issues of staffing, competence, integration and early identification could be dealt with effectively, if the DoE were to employ personnel with appropriate skills. Confidentiality and the modus operandi according to which the EHWP services are rendered are challenges in the DoE because they influence the utilisation of EHWP services.

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