

THE MISSING LINK

by

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Industrial Liaison at the Smithers

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What's been missing in the world of industrial alcoholism programming is someone to bridge the gap between the demands of treatment centers and the needs of industrial alcoholism programs. This gap has now been filled by the creation of a new professional role: the Industrial Liaison. The overall responsibility of the industrial liaison is to strengthen the relationship between the treatment center and those industrial alcoholism programs (Employee Assistance Programs and Mental Wellness Programs). It is estimated that there are over 2,000 such occupational programs nationwide.

One of many reasons why the role of industrial liaison was created was to free up the rest of the treatment team to work more effectively in their own area of expertise. However, the most important reason why the role was created was to break down barriers of communication between alcoholism treatment centers and industrial alcoholism programs' demands of continual reporting and constant feedback.

The exchange of communication between an industrial alcoholism program and a treatment center can be divided into three stages: initial contacts; treatment contacts; and discharge contacts (which includes after-care and follow-up contacts). During each stage sets of discreet tasks must be accomplished in order to facilitate effective treatment. During the initial contacts stage the following information is exchanged:

- vital data about patient being referred
- checking on insurance benefits
- giving patient a time and date to report for treatment
- confirming arrival date with referral source
- calling back after patient contact is made
- sending release of information form to industrial referral source.

treatment contacts:

- treatment counselor contacts referral source concerning early progress report
- on-going progress reports are verbally reported
- long-range goals are discussed

discharge contacts:

- informing industrial referral as to discharge date
- reporting of prognosis to industrial referral
- written discharge plans are sent
- after-care plan implemented

At any time during the three stages there can be a breakdown in communication. One reason for this is because the industrial referral source might have to communicate with the admissions coordinator, the patients' primary counselor, the nurse, the after-care coordinator and the out-patient counselor.

Two major problems may arise during the three stages: first, the patient may "fall through the cracks" of the system and get lost, second, communication (written or verbal) may be broken down through forgetfulness, misunderstanding or lack of knowledge about the referring organizations needs. The latter is usually the most common case.

Members of the treatment team cannot be expected to "ride shotgun" over the system. Clinical demands on their time prevent them from monitoring the system. The treatment center administrator, the treatment team counselors, the admissions coordinator, the nurses, the medical director or the clinical supervisors cannot be involved in the big picture of responding to the needs of an industrial alcoholism program.

The missing link in this picture is the industrial liaison. This treatment center based professional is not an administrator and not a clinician. The overall responsibility of the industrial liaison is to strengthen the relationship between the treatment center and the industrial alcoholism programs. The relationship building is developed through personal contacts and written communication. The industrial liaison must maintain high visibility in the corporate and union worlds of occupational alcoholism programs, employee assistance programs and mental wellness programs. The high visibility is maintained in the following ways: attendance at all professional meetings; presenting programs at conference, workshops and seminars; conducting workshops at the treatment center on treatment issues; speaking at in-house corporate seminars, publicizing new treatment policies, pro-

cedures and programs; visiting on-site programs; writing articles in appropriate journals about alcoholism treatment and occupational programs.

Besides reaching out to industrial alcoholism programs, the industrial liaison is responsible to his own treatment center for a variety of tasks. The most important task is to notify the admissions and treatment staff as to the status of industrial contacts, i.e. changes in staffing, changes in industrial policies, procedures or insurance coverage. The industrial liaison must sensitize the treatment staff to the special needs of "the world of work". This sensitizing process can best be handled by the industrial liaison coordinating an in-service training program for the staff on the inner workings of corporate and union-based alcoholism programs. This program should be conducted by an industrial alcoholism program manager. Staff will then have a clear idea as to what happens in the work setting.

There are five additional roles that the industrial liaison must play.

1. Public Relations Counselor:

The industrial liaison must "spread the word" to corporate and union based alcoholism programs about policies, procedures and treatment services available. The industrial liaison must reach out to organizations who are starting programs and sensitize them to the scope and nature of alcoholism treatment. The public relations function can be accomplished by writing articles in appropriate journals, keeping an on-going personal dialogue with corporate and union program managers, conducting mini-press conferences for the corporate and union program managers on the development of new and innovative programs.

2. Marketing Coordinator:

Marketing activities play a key role in developing new industrial contacts. The industrial liaison must, through a marketing effort, build awareness of the existence of the treatment facility, motivate industrial programs to use the treatment center and enhance the image of the treatment center. The industrial liaison must monitor the marketing effort and evaluate its effectiveness. The industrial liaison must, with the help of professional advertising consultants develop printed material, media ads and advertising concepts.

3. Troubleshooter:

The industrial liaison does not become involved with the clinical and treatment aspects of a patient. The industrial liaison does, however, get involved with the referral source in understanding the nature of insurance coverage, patient transfer, admissions and discharges and explaining the philosophy of treatment.

The troubleshooting is done if there is a breakdown in communication.

4. Public Speaker/Workshop Coordinator:

The industrial liaison is called upon to address a wide variety of professional groups. These talks focus on the relationship between industrial alcoholism programs and community based treatment centers. The industrial liaison should coordinate workshops for nurses, social workers, physicians and counselors on alcoholism treatment issues.

5. Technical Consultant:

The industrial liaison offers assistance to organizations on treatment aspects of industrial alcoholism programming. The development of guidelines for referrals is critical in the consulting role. Most technical assistance takes the form of socializing organizations into the informal network of treatment providers, management consultants and professionals in similar setting. The technical consultant role also provides organizations with access to written materials on program development and treatment concerns.

What are the qualifications for the role of industrial liaison? This person should have prior experience in consultation with business and industry with relation to personnel or health related problems. This person should have direct experience in alcoholism (treatment, training or program development). This role demands a wide range of knowledge and experience with the operation of personnel, medical and employee assistance programs both from a corporate and union perspective.

The industrial liaison should have an advanced degree in either social work, human resources, or industrial relations with extensive prior experience in a business or industrial setting. This person must be flexible enough to fit into both the world of treatment and the world of work. Both worlds have to feel comfortable working with him or her on an on-going basis. And finally, the industrial liaison must be creative and out-going to meet the ever changing needs of corporate and union-based alcoholism programs.