

**APPENDIX A – FORM N: PROVIDER’S EFAP SERVICE AVAILABILITY CHECKLIST \*\***

SERVICE	AVAILABLE AND INCLUDED IN FORM B: PRICES (YES OR NO)	IF “YES” STATE WHICH ITEM NUMBER THIS PERTAINS TO (E.G. 1, 2A, 2B, 2C OR 3)
<b>ADDICTION:</b>		
Alcohol		
Drugs		
Food		
Gambling		
Sex		
Smoking		
Other Addictions		
<b>EMOTIONAL AND MENTAL HEALTH:</b>		
Stress		
Depression		
Anxiety		
Psychological and Emotional Disorders		
Sleep Disorders		
Suicide		
Anger Management		
Trauma		
Personal Adjustments		
Psychopathology		
Personality Development		
Grief/Bereavement		
Other Emotional and Mental Health Issues		
<b>WORKPLACE ISSUES:</b>		
Work/Life and Wellness		
Education and Career Planning		
Harassment		
Occupational Stress/Adjustment		
Conflict Resolution		
Retirement Adjustment		
Onsite Employee Crisis Support		
Other Workplace Issues		

FAMILY ISSUES:		
Marital/Relationship		
Conflict Resolution		
Elder Care (Aging Parents)		
Child Care		
Child Development		
Family Dynamics and Family Illnesses		
Physical and Sexual Abuse		
Single Parenting		
Special Needs of Children		
Legal Concerns		
Financial Support Services		
Other Family Issues		
OTHER:		
Health Information Services		
Nutrition Support Services		
Assistance Finding a Doctor		
Disability and Accessibility		
Midlife and Retirement		
Chronic Pain and Disease		
Home Buying		
Personal Growth		
Spiritual Counseling		
Indigenous-specific Services		
Health and Fitness		
Human Learning/Motivation		
Communication Problems		
Legal Concerns		
Other		

**\*\* FAILURE TO PROVIDE A RESPONSE TO ANY SERVICE OR ATTRIBUTE AN ITEM NUMBER TO THAT SERVICE WILL BE EVALUATED AS A “NO”.**