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EMPLOYEE ASSISTANCE REPORT

supporting EAP professionals

'What's the Next Step?'

Addressing EARF & EAP Challenges

By John C. Pompe and David Sharar

Much fanfare surrounded the inaugural meeting of the Employee Assistance Research Foundation (EARF) at the 2007 World EAPA Conference in San Diego. The naming of Dr. Paul Roman as Senior Advisor to the EARF Board, and a pledge of matching financial support from the Carl Tisone Family Foundation formalized the presence of this organization within the professional world of EAP.

The event was a true milestone for the EAP field, and Tisone deserves recognition for organizing this initiative. In fact, his "call to action" should be viewed as a wake-up call for our profession. (**Editor's note:** See the January 2008 and April 2008 issues of *EAR*.) However, the infant EARF is charged with a not-so-simple question, *"Now what?"* This article describes a *few* ideas about what to do next.

Redefining EAP

Why do EAPs remain misunderstood, marginalized, and underfunded? While healthcare costs continue to show yearly double-digit increases, both internal and external EAPs fight to merely stay

> *"We fail to invest in our own profession, and then lament the state of EAP."*

solvent. Internal programs are eliminated in favor of capitated affiliate programs. Even successful EAP vendors operate on thin-to-no profit margins, rationed services, and occasionally "spin" utilization reports merely to retain customers and persuade them that EAP activity is robust. Some are even making money by peddling the "free" EAP that is embedded as a "give-away" within an insur-

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Task Force to Revise Code of Ethics

By David Sharar, Ph.D. and Jeff Christie, LCSW

Like any profession, the employee assistance field struggles with an evolving landscape of environmental challenges, business dynamics, and economic forces. Yet, since we are a profession, we also shoulder the ongoing commitment to serve the corporate clients and employees that we vowed to serve.

We carry a distinct and personal moral obligation of accountability for our professional behavior and decision-making. Our work touches many lives, and because of that, we have a duty to regularly reflect on its moral impact.

Today, EAP professionals are coping with numerous marketplace and financial pressures, and as a result, they are confronting new, and unanticipated ethical

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ance product.

We contend that the lack of business-relevant metrics and strong empirical evidence supporting EAP have eroded the field. This weakens the value of EAP under the weight of larger forces, such as its integration into managed behavioral health and human resource outsourcing.

Diabetes as a Model for EAP

Let's consider what the EAP field can learn from the huge health-related and financial impact of diabetes. Studies conducted by Health Partners have demonstrated that when diabetics with no significant co-morbid illnesses reduce their Hba1c by a single point – through treatment compliance and a healthy lifestyle – total healthcare costs can be reduced by as much as $1,205 annually.

It is noteworthy that these studies demonstrate value for the consumer, potential return-on-investment (ROI) for the employer-purchaser, and help make the business case for products sold by a thriving industry. What if an EAP could demonstrate in an article published in the *Journal of Occupational and Environmental Medicine* that even a few of its services:

- Improved depression symptoms by 50%;
- Reduced absenteeism by 9 days annually per employee-client; and
- Decreased total healthcare claims by $800 annually per client.

How might such a study influence EAP sales presentations? How many more companies would invest in EAPs? How would capitated rates or EAP vendor profit margins change?

We desperately need to establish a new scientific standard that demonstrates evidence-based practices and outcomes that are both clinical and business-relevant. While the academic and financial infrastructure to do this does not yet exist, the EARF provides an excellent first step.

We are not suggesting that EAP vendors stop conducting studies that assist in quality management and evaluation. However, the industry needs independent, multi-site control studies that demonstrate the impact of EAP. Put another way, we must prove our value – for both the employee-client and the employer-client.

EARF Obstacles

There are numerous obstacles to the EARF mission. For one thing, securing funding for research is never easy. Another, somewhat subtle barrier lies in the fact that the EAP field has not traditionally been heavily populated with research professionals. Most often, EAP professionals are clinically minded or entrepreneurial and do not come from training programs focused on research methods. As a result, we tend to focus on doing what we do rather than on expanding the knowledge base. We fail to invest in our own profession, and then lament the state of EAP.

The EARF seems intent on addressing these issues. Necessary funding streams can be established through matching grants and fundraising. In our experience, institutions such as the Substance Abuse and Mental Health Services Administration (SAMHSA), National Institutes of Health (NIH), and the Centers for Disease Control and Prevention (CDC) are willing to fund corporate, workplace-focused studies.

In addition, when linked with large corporations, academic institutions are often eager to commit resources to partner in these types of research initiatives.

Another barrier lies in the fact

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a look ahead

UPCOMING EAR FEATURES...

- Gambling
- Comparing EAP Models
- 'Food Fights'

EMPLOYEE ASSISTANCE REPORT

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Editor's Notebook

I am writing this month's notebook one week after a good friend of mine – the best man at my wedding – took his life at the age of 49.

As EAP professionals are aware, words like "took his life" are difficult to hear, comprehend, or even to write. It hurts deeply that any assistance he received proved to be "too little, too late."

EAR has always recognized how important it is for people to receive *effective* treatment for mental-health problems. However, our resolve in this matter has intensified. There's just something about experiencing an issue *personally* that heightens its meaning and significance.

The good news is that EAP professionals are aware that increased <u>education</u> and <u>awareness</u> can help keep others from making the same mistake. It's too late for my friend, but it isn't for others. Until next month.

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the EAP industry is mostly comprised of large vendor corporations, rather than practitioners or internal EAP professionals. Consequently, we envision only marginal support from large EAP vendors for research due to concerns that scant ROIs for purchasers will surface.

Moreover, there is no consistent and well-defined operational definition of an "EAP." This presents yet another obstacle. Therefore, rather than immediately setting out on a path to research "the [cost] effectiveness of EAP," we need to step back, break the practice of EAP into its fundamental components, and define the individual activities that make up EAP practice. Only after we articulate the exact "recipe" for EAP, can we begin asking effective research questions.

Some, if not many, of the concepts that make up EAP will not hold up well under the scrutiny of extensive research. This will challenge our profession – and yet critical examination is necessary for EAP to move to a higher level of professional credibility and reap longer-term financial benefits.

Again, we must be prepared to define what is, and isn't, an EAP. It's possible that research will reveal that EAP does <u>not</u> have a dramatic effect on absenteeism, work-related accidents, or decreased healthcare costs. If so, we would need to decide if we wish to change our practice and services.

However, it should be pointed out that proof of only limited benefits would <u>not</u> mean we would have to stop doing those things considered fundamental to EAP practice. While one ingredient in toothpaste is listed as "active," the remaining 14 are still important to the overall quality of the product.

A Time for Change

History has shown that purchasers will not force the EAP industry to demonstrate value through rigorous scientific research. No one is going to force us to self-evaluate to the degree suggested in this article. However, if we choose not to, the value of EAP will be out of our control and left to the variables and whim of the economy and the purchaser. It is our responsibility to learn what works and what doesn't and to then, in an unbiased and objective fashion, disseminate this knowledge to the field and the purchaser.

It will be at that point – and probably only at that point, where the perceived and true financial value of EAP will grow and no longer stagnate. At that point, EAP will be seen as a practice, product, and a profession that we can provide with unwavering confidence. ■

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dilemmas. At times, we may be forced to decide if we should compromise personal ethics in order to achieve a business or program-related goal.

In recognition of this concern, the EAPA Ethics Committee (now re-organized as the EAPA Ethics Task Force) published findings from a 2007 survey designed to probe the perceptions and attitudes of EAP professionals in regard to ethical issues and challenges.

The first goal of the survey was to objectively and empirically report on the state of ethics in the EAP field. The following is a brief summary of findings:

• Only slightly more than half (56%) of the respondents have used the EAPA Code of Ethics to guide or influence a decision.

• The majority (58%) of respondents believe there has been no change in unethical conduct by EAP practitioners – while 24% believe there has been a decrease, and 18% believe there has been an increase.

• In terms of ignoring unethical conduct, 10% report their EAP firm occasionally ignores unethical conduct, 34% state their firm rarely ignores it, and 56% say unethical conduct never happens in their firm.

• The leading ethical issues facing the field are:

(1) Confidentiality violations;
(2) Use of affiliates or contractors with no or little EAP specific background; and
(3) Shifting from face-to-face to Internet and phone intervention without knowing if these mediums work.

• When examining the top critical issues by respondent characteristics, it is interesting to note that:

1) Counselors/clinical practitioners are more troubled by the shift from face-to-face to phone and Internet services than EAP administrators;
2) Internal EAP managers are concerned with the use of EAP affiliates with little or no EA background; and
3) Large EAP vendors (large may be defined as more than 2 million employees) rank “misrepresentation in marketing” and “quality-eroding capitated rates” as their two principle issues.

Revising Code of Ethics

The second goal of the survey was to address ethical issues that can be critically examined and acted upon. An important way of doing that is to institutionalize a Code of Ethics that is both current and instructive.

Survey results indicate that while the EAP field is largely committed to high ethical standards, there remains significant work in revising and disseminating a new Code that can address new ethical issues in an increasingly technological and complex environment.

As a field, if we do not modify a Code to better fit the contemporary climate in EAP, then we are vulnerable to ethical breaches that are difficult to predict and even contemplate. For example, the current Code, while instructive, has a general lack of guidelines in the areas of business ethics or the use of technology as an intervention medium.

The EAPA Ethics Task Force is currently in the process of revising and updating the EAPA Code of Ethics. The revised Code will be made available for your review and comment in the fall of 2008, prior to its official distribution.

To be effective, the Code must reflect ethical responsibilities typically held by EAP professionals and EAPA members. A guiding question might be, *“What ethical issues do I feel need to be addressed in an EA Code of Ethics?”*

Input is encouraged. Feel free to convey your thoughts to either of us at the email addresses that appear at the end of this article.

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Summary

A professional Code of Ethics is the foundation upon which our professional behavior and actions are guided, and at times, prescribed. We hope the new Code will serve as an applied and relevant guide designed to assist EAP professionals in constructing a course of action that serves those utilizing EAP services and promotes the values of the EAP field. ■

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Resources

📖 ***12 Stupid Things That Mess Up Recovery***, by Allen Berger, Hazelden, (800) 328-9000, www.hazelden.org/bookstore. Any recovering person at any stage in recovery can use this book as a way to determine what areas need more attention.

📖 ***Treating Youth with DSM-IV Disorders***, by Michael Sterba and Tom Dowd, $29.95, Boys Town Press, (800) 282-6657, www.boystownpress.org. This book provides a fresh perspective on helping youth with various disorders.

📖 ***Cyber-Safe Kids, Cyber-Savvy Teens***, by Nancy E. Williams, $14.95, Boys Town Press. The author, an expert on safety and the Internet, explores the appeal and hazards of the online world.

LEGAL LINES

Employee Terminations: Handle with Care – *Part I*

By James W. Bucking

Most employment litigation stems from employee terminations. Nearly 90% of discrimination charges filed with the Equal Employment Opportunity Commission (EEOC) are discharge-related claims.

The reasons are obvious: terminations cause hard feelings, create economic need, provoke lawsuits, and remove the disincentive to sue inherent in an ongoing working relationship.

Litigating termination claims is also expensive – six- and even seven-figure damage awards are not uncommon. A 2004 survey of wrongful discharge cases tried by jury in federal courts revealed a median award of $89,000 with an average award of over $1 million.

As the economy continues to stagger, with or without the official label of a recession, it's certain that the rate of employee dismissals will rise, as companies are forced to lay off large groups of workers, including more senior executives caught in downsizings. This means that not only HR officers, but more line managers, department heads, and business owners are going to have to assume the uncomfortable role of "terminator" for their companies.

The best time to head off a discharge-related lawsuit is at the moment of the termination, if not before. The following are some recommendations. The remaining tips will appear in the August 2008 *EAR*.

✓ **Know the facts.** Talk to supervisors, co-workers and subordinates as appropriate and necessary, and write down what they say. Speak with the employee being terminated — there is nothing to lose, and it's better to know before someone is fired what they have to say than to hear it first at a deposition. If the employee refuses to speak to an employer, or is evasive and/or contradictory in his or her responses, this will tend to reflect badly on credibility in any subsequent litigation.

✓ **Review the documents.** Related to the need to investigate is the need to review documentation concerning an employee about to be fired – especially commonly inflated performance reviews now widespread in workplaces.

Before an underperforming employee is fired, come to terms with any "stellar" performance reviews. Also, review disciplinary records of other employees similarly situated to this employee. There may be perfectly good reasons for treating employees differently, but these disparities need to be considered in advance. Disparate treatment is a big problem in employment litigation, particularly in discrimination claims. Look everywhere for these documents, including supervisor files, electronic records, and emails.

✓ **Create new documents.** Sometimes the problem with a termination is that there are few, if any, documents supporting the decision to fire an employee.

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There is nothing wrong with creating such documents — in fact, it is a good idea. Don't fabricate or backdate, of course. Rather, create documents beforehand that give the full reasons for the decision.

Human memory changes with time; documents do not. We advise clients to give little explanation in termination letters: A good back-up document allows the employer to have a barebones discharge letter without losing the benefit of a written record of motivations.

✓ **The electronic scourge.** Technology can be your friend, or your enemy, and this also applies to employee terminations. Technology keeps a permanent record of the untidy, behind-the-scenes process, which might include a long look at all the possible reasons for letting someone go. In the old days, superseded drafts of termination letters were immediately discarded, and people spoke about issues rather than emailing or instant-messaging.

An attorney should be involved at all stages, cloaking a paper trail in attorney-client privilege. If an attorney is not involved, the employer must take great care to avoid creating a permanent electronic record.

✓ **Tell the truth.** The worst thing an employer can do when terminating an employee is be dishonest. Yet, this is a common mistake, and for the same reason that employers routinely give overly generous performance reviews – that is, employers like to avoid confrontations, so when they fire an employee for poor performance they prefer to characterize it as a "layoff."

The problem is, in a trial situation, the white lies that spared an employee hurtful criticism will be portrayed by the employee's counsel as evidence of discrimination. Having a good reason for termination is not enough; statements and documentation must square with that reason.

NEXT MONTH: The remaining termination tips will be discussed. ■

James W. Bucking is co-head of the Employment Department at Foley Hoag LLP in Boston. He regularly represented corporations and other employees in labor and employment disputes, including those arising from employee terminations. He may be reached at jbucking@foleyhoag.com.

On the Job

Helping a Grieving Co-worker

By Betsy Bottino Arenella

It's Jeffrey's first day back at work since his daughter's sudden death two weeks ago. His co-worker, Holly, sees him walking down the hallway and thinks to herself: *"What will I say?"* The panicky Holly dodges into the nearest empty cubicle and hides until Jeff walks by. She tells herself she'll say something later.

Several minutes later, another co-worker, Mick, enters Jeff's cubicle with a pile of religious pamphlets. Mick, who is very devout, tries to comfort Jeff by telling him that God chooses the best children to become angels, and that his daughter is in a better place.

Both Holly and Mick meant well, but neither one's actions may be helpful to Jeff in his grief. While each person's grief is unique, the following are some guidelines to help co-workers support a grief-stricken colleague:

1. Don't run away. Holly didn't realize that Jeff saw her duck into a cubicle to avoid him. Grief is isolating enough – the person doesn't need to feel that others don't want to be around.

2. Acknowledge the person's loss. A hand clasp, a hug, or an *"I'm so sorry,"* can mean the world to a grieving person. If Jeff breaks down, it's OK. It's normal and healthy for the griever to cry.

3. Don't assume that "comforting" sayings will help. Although Jeff and Mick happen to share the same faith, Jeff's belief in a higher power is being sorely tested right now. Like any parent, Jeff would give anything to have his daughter back here on earth.

4. Just listen. The best way to support someone is to listen sympathetically. Nodding and murmuring are all the feedback the person may need. Second-guessing doctors, or telling stories of your own children's near-misses are *not helpful.* Death brings survivors guilt that does not need to be fed.

5. Ask the griever what he/she needs. Sometimes the griever doesn't know what he/she needs, but that's OK. The person may tell you, *"I need to talk about it,"* or, *"I need to not talk about it for a while."* Either response will give you a sense of what to do. Even better, the grieving person's manager or supervisor may wish to have this conversation, and share the person's wishes with the group.

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6. Bring up the deceased's name. The most painful part of grief can be others' reluctance to mention the person who died. Grievers will tell you that hearing the person's name has a positive, not negative effect.

7. Have reasonable expectations. Grief is physically and emotionally exhausting. The grieving employee may have a hard time concentrating and remembering details. But don't do all of his/her work either – work can be a welcome distraction from grief.

8. Don't put a timetable on it. Just because Jeff may seem better after six months doesn't mean he's still not deeply grieving his daughter. Grief is a lifelong process. Consequently, continue to ask how he and his family are doing. He will appreciate your concern.

9. Recognize anniversaries. The anniversary of the death and other special dates like birthdays can be particularly difficult days for the grieving person. A simple card or flower saying, *"I'm thinking about you today"* can be very comforting to the griever.

10. Honor the deceased. Planting a tree, installing a bench, or donating to the deceased's favorite charity are wonderful symbolic ways to demonstrate caring. These actions are tangible reminders that the deceased is loved and missed. ■

Betsy Bottino Arenella is the author of "Isabelle's Dream: A Story and Activity Book for a Child's Grief Journey," Quality of Life Publishing (www.qolpublishing.com).

Tip: A McDonnell Douglas report estimated that its EAP saved the company $5.1 million due to fewer sick days, lower turnover, and fewer medical claims.

On the Job

Warning Signs and Risk Factors of Suicide

Understanding that there are often warning signs and risk factors can help you to react effectively if you encounter someone who is potentially suicidal. While no single variable can predict a future suicide attempt, knowing the danger signs can help you react more effectively. They include:

- ☒ A previous suicide attempt;
- ☒ Verbal threats such as "You'd be better off without me";
- ☒ Changes in behavior;
- ☒ Signs of depression;
- ☒ Interpersonal problems;
- ☒ Preparations for death such as "putting affairs in order" or giving away possessions may be signals that a person is preparing to die; and
- ☒ A sudden lift in spirits. The person may feel relief that their "problems will soon be ended."

If you suspect someone you know may be suicidal, call your EAP for assistance in providing appropriate services to this person.

Regardless if an employee is grieving due to a suicide, <u>or *any* loss due to *any* death</u>, the accompanying story on page 6 offers suggestions on assisting grieving co-workers.

Source: RaeAnn Thomas, executive director of Associated Employee Assistance Services (800) 540-3758. ***Editor's note:*** *This article appears in memory of the editor's good friend, who died April 27, 2008 at the age of 49. Suicide myths versus facts are addressed in the "Dealing With Suicide" article in the May 2007 EAR.*

Quick Ideas

Dealing with a Pessimist

By Tom Terez

No one likes pessimists very much, but we must be careful to avoid the urge to dismiss their negative outlook entirely.

While focusing your attention solely on positive workers is certainly more enjoyable, it risks alienating a pessimist and making him/her feel even more negative. And it also keeps you from getting at underlying issues and helping to change the negative person's attitude.

When a pessimist starts to generalize, ask why and gently press for specifics and solutions. Pessimist: *"There's no way that plan is going to work!"* You: "*Why do you say that?"* Pessimist: *"It's unrealistic."* You: *"In what way?"* Pessimist: "*The assumptions on which it's based are are completely subjective. We don't have enough hard data."* You: *"Which assumptions in par-*

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ticular?" Pessimist: *"The ones about buying trends in the young-adult market over the next two years."* You: *"How could we get better data?"*

As you can see, it's a matter of asking questions to turn generalizations into specifics — and to get the person engaged in solving the problem.

As ideas and action steps take shape, people often get carried away with enthusiasm — and they fail to see potential pitfalls that can hurt a plan as it's implemented. You can guard against this by putting the pessimist to work in the role of a "healthy skeptic." Ask for candid feedback while things are still on the drawing board. Ask questions like: *"What are we not considering?"* or, *"What could go wrong in implementation?"*

When the pessimist insists that things won't work, share one or two recent success stories as evidence that it just might be possible. If the person bemoans the fact that a team approach will take too much time, share the story about the team that used a "blitz" approach last year to complete their big project in one week. ■

Tom Terez is a speaker, workshop leader, and author of "22 Keys to Creating a Meaningful Workplace." For more information, visit http://BetterWorkplaceNow.com.

Clinical Perspective

Be Sun-Savvy this Summer –

Hold Off Winter Depression Now

By James Dowd, M.D.

It's long been assumed that Seasonal Affective Disorder (SAD) is caused by the lack of sun exposure. However, the shortest day of the year is Dec. 21, which means that SAD *should* be at its worst just before the end of the year. The reality is that we feel lousier in February and March. Why is that?

It turns out that it's not the lack of sunlight that's the problem. Rather, it's the lack of vitamin D that we make from it. People in the Midwest and Northeast stop making vitamin D from sunlight in October, and it can't be made again until late March or April. So although the shortest day of the year is in late December, vitamin D levels don't bottom out until March.

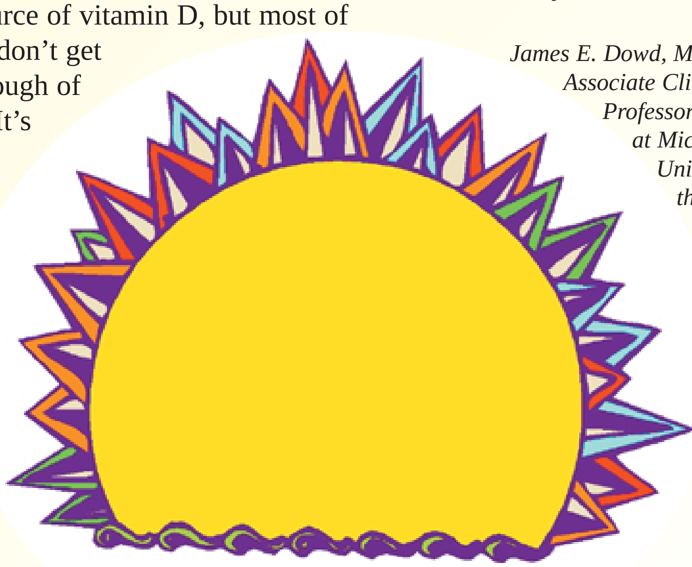
Studies confirm that vitamin D replacement relieves symptoms of SAD. Moreover, increasing intakes of certain foods – fish, fruits, and vegetables – can also enhance the power of vitamin D to elevate mood.

The good news is that making simple lifestyle changes this summer can boost vitamin D and make next winter depression-free. The following are a few ideas:

☑ **Start a no-SAD diet.** With the arrival of summer's fresh seafood and produce, it's a great time to make dietary changes to vitamin D and nutrient-packed foods that anyone who suffers from SAD should start eating now.

☑ **Become sun-savvy this summer.** Sunlight is a primary source of vitamin D, but most of us don't get enough of it. It's the perfect time to build vitamin D "stores" and get the lowdown on what the latest scientific research tells us about the sun. Chronic underexposure to the sun is actually more dangerous than overexposure. You need to avoid overexposure, but you also need enough sun to increase vitamin D levels.

☑ **Consider vitamin D supplements.** Supplements are often necessary, but do you know which ones to buy? What dosage to take? What the risk of side effects and toxicity are? ■



James E. Dowd, MD, FACR, is Associate Clinical Professor of Medicine at Michigan State University, and the author of "The Vitamin D Cure," $24.95, Wiley.