

***2007 Workplace SBI Survey Report:  
An Assessment of Employer Practices &  
Vendor Products & Services***



THE GEORGE WASHINGTON UNIVERSITY MEDICAL CENTER

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## 2007 WORKPLACE SBI SURVEY REPORT: AN ASSESSMENT OF EMPLOYER PRACTICES AND VENDOR PRODUCTS AND SERVICES

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## BACKGROUND

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The Network of Employers for Traffic Safety (NETS), through a Cooperative Agreement with the National Highway Traffic Safety Administration (NHTSA) and support from The PEW Charitable Trusts, contracted with Ensuring Solutions to Alcohol Problems at The George Washington University Medical Center, Department of Health Policy, to lead a study on workplace alcohol screening and brief intervention (SBI). The study spanned over two years (beginning in 2005) with research activities that included an extensive literature review, in-depth telephone interviews, a multi-year survey of SBI practices, convening of an SBI advisory panel, and development of an online [Workplace SBI Toolkit](#) and resource guide for workplace practitioners. A brief description of Year One and Year Two research activities and links to brief reports summarizing the findings are provided below. A comprehensive review of all findings and a copy of the draft prototype resource guide are contained in the annual Final Reports and are available upon request.

The activities conducted in [Year One](#) of the project included an examination of peer-reviewed literature supporting the effectiveness of SBI; the use of SBI as a clinical practice standard; SBI training and competency recommendations; government health services and foundations that invest in developing SBI demonstration projects; and, economic and clinical outcomes of SBI.<sup>1</sup> The first year of the project also included a survey (i.e., 2005 Workplace SBI Survey) of more than 700 employers and behavioral health vendors using both web-based assessments of SBI practices, and products and services, and selected telephonic interviews. The substantial body of peer-reviewed literature showed that SBI is an effective technique in primary healthcare and hospital emergency care for detecting and treating people who misuse alcohol. Ensuring Solutions researchers also found that alcohol SBI was endorsed or recommended by professional medical societies (e.g., American Society of Addiction Medicine), international health organizations (e.g., World Health Organization), business groups (e.g., National Business Coalition on Health, NETS), federal agencies (e.g., NHTSA, National Institute on Alcohol Abuse and Alcoholism, Substance Abuse and Mental Health Services Administration, Veterans Health Administration, Office of National Drug Control Policy) and medical profession associations (e.g., American Medical Association, American College of Emergency Physicians, American College of Surgeons, American Psychiatric Association). After gathering and analyzing Year One data, study researchers determined that the effectiveness and success of SBI programs in healthcare settings could be transferred to workplace settings and developed a [conceptual model of workplace SBI](#) to operate as a framework from which employers can build tailored approaches for specific work-related settings (see Appendix A).

In late 2007, study researchers began [Year Two](#) of the project by convening an advisory panel of employers, behavioral health vendors, SBI experts, clinicians, drug testing vendors, occupational health and health promotion professionals, and researchers. The panel worked with the research

team over the course of the year to inform the development of the online toolkit and resource guide<sup>2</sup> for workplace practitioners as well as flesh out the essential elements of a workplace-based SBI program.<sup>3</sup> After completing Year Two of the project, the research team conducted the 2007 Workplace SBI Survey – a follow-up survey to the 2005 Workplace SBI Survey of employers and behavioral health vendors.

The purpose of this report is to provide an overview of activities and findings to-date from the 2007 Workplace SBI Survey. Main findings from the 2005 Workplace SBI Survey are discussed in the [Year One Executive Summary](#) along with highlights from the literature review. Ensuring Solutions researchers examined data from both surveys to establish whether previous survey participants (as well as new survey participants) were using the same kinds of SBI techniques in 2005 and 2007. Data analysis also assessed changes employers and vendors made to their policies and practices to improve access to alcohol treatment. Unfortunately, analysis of change over time for 2005 participants was not feasible because few of them completed the survey at both time points. Consequently, the data collected in 2005 and 2007 represent a cross-section of employers and vendors at two points in time.

A discussion of the survey methods and results of the 2007 survey are present in detail below. A more brief review of main findings is presented in the [2007 Workplace SBI Survey Executive Summary](#).

## METHODS

### PARTICIPANTS

Over 100 professional organizations, associations, businesses, vendors, and consultants were contacted by email and telephone to assist with recruiting employers and vendors of products and services and/or participate themselves in the web-based survey of alcohol screening and brief intervention practices. Recruitment information was disseminated by email, member listserv, telephone, website announcements, newsletters, and person-to-person contact. Recruitment efforts were cast broadly and the “snowball technique” was used to attract a wide variety of participants in terms of size (small, medium, and large employers) and type (e.g., vendors of employee assistance programs; human resources/benefits consulting; managed care/behavioral healthcare services; and occupational health/ wellness and disease management programs).

**Employers (n=471).** At the 3-month recruitment period 471 employers accessed the online survey. These employers varied in size, geographical location, and industry.

#### Small, medium and large companies were well represented:

Small (less than 100 employees)	29%
Medium (100 – 499 employees)	23%
Large (500+ employees)	46%

#### All 10 geographical regions of the U.S. and its territories were represented by employers (main headquarters and regional offices locations). The industry sector included:

◆ Construction	6%	◆ Transportation of goods or passengers	4%
◆ Professional services (health, medical, education)	23%	◆ Retail/wholesale	4%
◆ Manufacturing	18%	◆ Public administration (fire, police)	11%
◆ Banking/insurance/real estate	7%	◆ Communications/public utility	2%
◆ Services (hotel, business, personal, repair)	7%	◆ Other industry sectors	19%

**Vendors (n=103).** Over 100 vendors accessed the survey about the types of alcohol screening and brief intervention products and services offered to their client companies (employers). Vendor service areas were represented across all 10 regions of the U.S.

### MEASURES

Ensuring Solutions developed and implemented two forms of the survey for the 2007 Workplace SBI Survey. They were designed to catalog current SBI approaches and techniques and assess changes in SBI policies and practices. One survey was designed to gather information on alcohol screening and brief intervention practices and approaches used by *employers*, and the other was

aimed at identifying SBI products and services offered by *vendors*, for the purpose of detecting and treating people who use alcohol in unhealthy ways. The surveys were web-based and made available 24 hours per day/7 days a week through Survey Monkey. A description of these measures is provided below and a hardcopy of each is included in Appendix B and C.

### **Operational Definitions of SBI**

The following operational definitions of alcohol screening and brief intervention were provided to respondents as part of instructions presented prior to completing the survey.

## **DEFINITIONS OF ALCOHOL SCREENING AND BRIEF INTERVENTION**

**Alcohol Screening:** The use of a valid brief questionnaire about the context, frequency and amount of alcohol used by an individual. Alcohol screening provides a quick way to identify individuals whose drinking patterns indicate that they have an alcohol problem or are at risk for developing one. Examples of valid questionnaires are: AUDIT (Alcohol Use Disorder Identification Test), MAST (Michigan Alcohol Screening Test), and CAGE (4 question screener).

**Brief Intervention:** The healthcare provider (e.g., EAP counselor, nurse), using the results of a screening questionnaire that indicates an alcohol problem, expresses concerns about the individual's drinking and advises the individual to cut down on his/her drinking. The healthcare provider helps the individual to develop an action plan to achieve this goal. Brief interventions are not designed to treat alcoholism, which requires greater expertise and more intensive care management.

### **Employer Assessment**

The employer survey consisted of 24 items that assess: a) employer concern about alcohol problems among employees; b) treatment benefit adequacy and changes to improve access to alcohol treatment; c) availability of alcohol screening, the types of resources/business units responsible for conducting it, types of events that trigger screening; and mechanisms by which screening is conducted and specific tools used; d) availability of brief intervention, resources/business units used to provide it, the quantity of sessions allowable and availability, and availability of referral for intensive treatment; e) types of training provided for those responsible for conducting alcohol SBI; f) outcomes the employer considers to be important in assessing the value of an alcohol SBI program; g) importance of having an SBI program and interest in developing and testing the effectiveness of an alcohol SBI program in the employer's workplace; and h) general descriptive information (size of business, industry type, geographic region).

### **Vendor Assessment**

The vendor survey consisted of 17 items that assess: a) adequacy of and changes made to products and services offered to client businesses to improve access to alcohol treatment; b) availability of and resource approaches used to offer alcohol screening to client businesses, mechanisms by which screening is conducted and specific tools used; and supports/benefits offered if screening is positive; c) availability of brief intervention products and services to client businesses and resource approaches used to offer interventions; d) types of training the vendor

provides for conducting alcohol SBI; e) outcomes the vendor considers to be important in assessing the value of alcohol SBI; f) importance of offering client businesses alcohol SBI products and services and interest in developing and testing the effectiveness of an alcohol SBI product that can be offered to client businesses; and g) service areas/geographic regions serving client businesses.

## **ANALYSIS**

Descriptive statistics were used to analyze data collected from the survey items discussed above. Content analysis was conducted on qualitative data.



# RESULTS

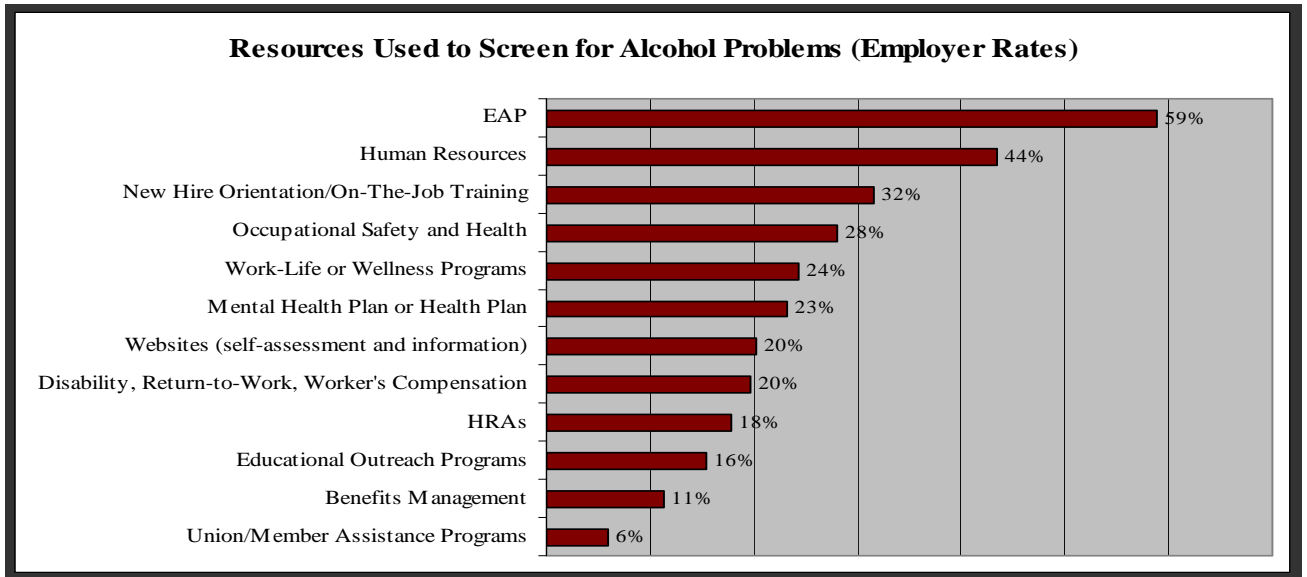
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## EMPLOYER ASSESSMENT

**Concern about alcohol problems.** More than 81% of employers surveyed reported that their company was either “very concerned” or “moderately concerned” about alcohol problems among employees. Only 19% of employer participants reported that they were “not concerned.”

**Assessing benefit adequacy.** In the two years between the 2005 survey and 2007 survey, 40% of employer participants revealed their companies assessed the adequacy of its alcohol treatment benefits offered to employees. Similarly, 36% of employers reported that they did not conduct such an assessment and almost 25% reported not knowing whether an assessment of adequacy had been performed. Employers were also asked whether they had made any changes to improve access to alcohol treatment for employees in the last two years. Of the employers that reported assessing the adequacy of their company alcohol treatment benefits, 44% reported making specific changes to improve access to alcohol treatment for employees. Some employer participants gave explicit examples of the types of changes made to improve access; many of these improvements included providing better access to EAP services which included adding an EAP program or additional services to an already existing program, or revising triage processes to ensure employees’ direct access to EAP services. Other changes reported included lowering service prices and having services offered at no charge, making information more accessible to employees, and instituting various kinds of drug-free workplace initiatives.

**Alcohol screening.** Of the 400 employers who responded to the question about when they began conducting screening, 9% (35) revealed that alcohol screening became available relatively recently (“within the last two years” ) while 21% (83) reported that it became available “over two years ago.” Thirteen percent (50) of employers acknowledged that alcohol screening was available but that they did not know when it began. Thus, in total 42% (168) of employers reported conducting screening. The remaining 58% (232) reported that they did not conduct alcohol screening. As shown in the figure below, of the employers who did screen, most (59%) reported using the EAP to conduct the screening.

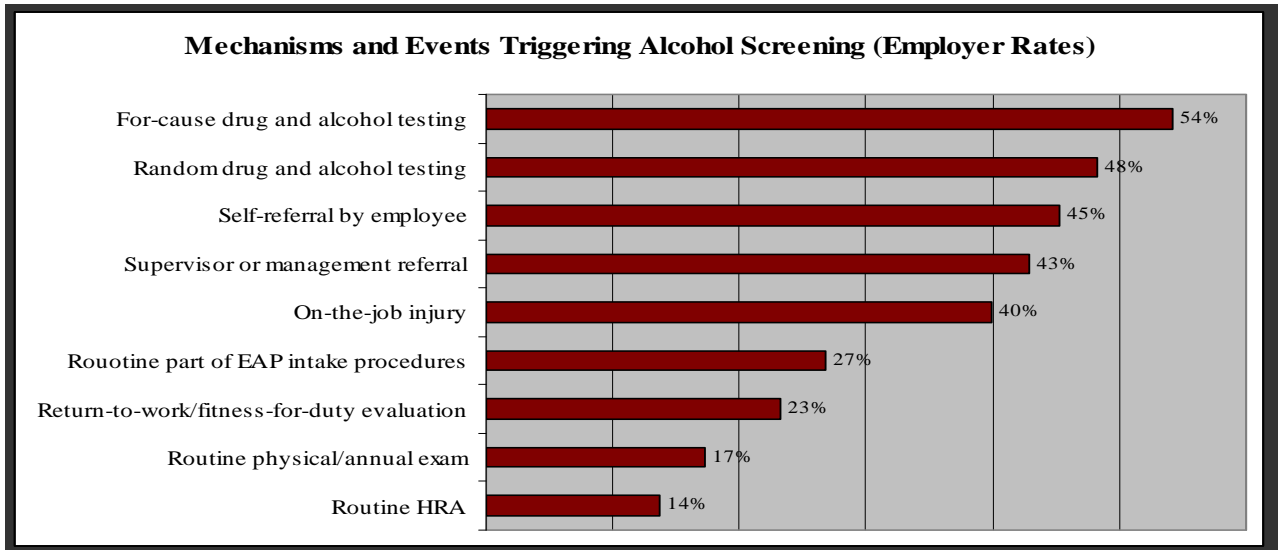


Employer participants that conducted alcohol screening also reported information about whether or not alcohol screening was given in conjunction with screening for other physical or mental health issues. More than 26% reported that alcohol screening was conducted independent of other issues. When combined with other screenings, alcohol screening was most likely to be paired with depression screening (17%) and stress screening (16%). Alcohol screening was least likely to be paired with screening for other (undefined) chronic diseases (6%).

Almost 43% of employers that reported alcohol screening indicated that face-to-face screening was the preferred form of delivery. Other delivery modalities included self-administered computer/web-based (19%), telephone (16%), and self-administered paper-and-pencil (5%). Twenty percent did not know how it was delivered.

Moreover, among employers that screened, quantity/frequency screeners (e.g., how many drinks do you have in a typical day) and standardized questionnaires (e.g., AUDIT, MAST, or CAGE) (70%) were the preferred screening methods. Single-item screeners (e.g., in the last 30 days, on how many days have you consumed more than 5 drinks on one occasion) (11%) and screeners using the ASAM criteria (10%) used less often.

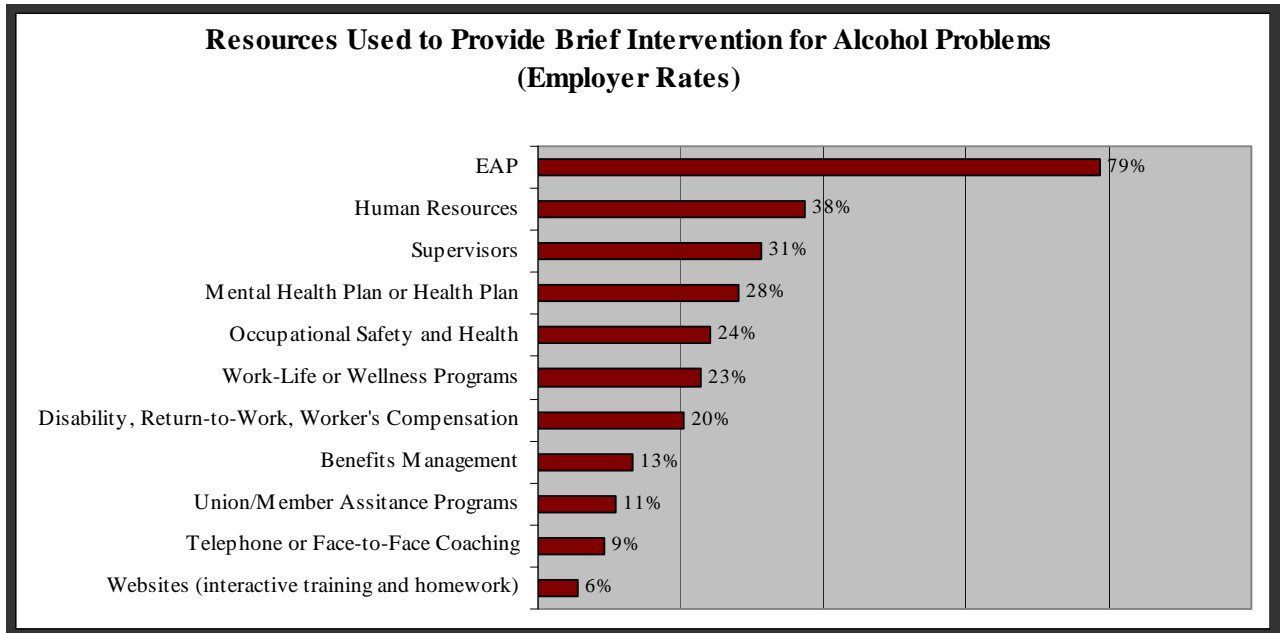
Most employers whose companies or vendors conducted alcohol screening indicated that for-cause drug and alcohol testing was the event that triggered the screening (54%). The figure below illustrates the rate at which other events or mechanisms triggered alcohol screening.



After screening positive for an alcohol problem 56% of employer participants reported that the person screening positive would receive a referral for treatment; 44% reported that the person would be offered further assessment or evaluation; more than 38% reported that the person would be given educational materials and information; 23% reported that the person would be given a warm transfer to either a telephone counselor or treatment program; and 19% of employer participants reported that brief intervention would commence immediately.

**Brief intervention.** Employers who reported conducting alcohol screening were asked about brief intervention practices in their workplace. Of the 168 who screened for alcohol problems, 71 (42%) also conducted brief intervention (i.e., they do both) and 97 (58%) only screened. An additional 57 employers reported conducting brief intervention without conducting screening (i.e., brief intervention was done alone). Thus, a total of 128 employers reported offering brief intervention. As shown in the figure below, the most frequently used resources for conducting it was EAP (79%). Online programs (6%) and face-to-face or telephone coaching programs (9%) were the least likely to be used to deliver brief intervention.

### Resources Used to Provide Brief Intervention for Alcohol Problems (Employer Rates)



After a positive screen for alcohol problems, most (66%) offered brief interventions either immediately following screening (40%) or within 1-2 days (26%). Approximately 9% of employers who conducted brief intervention reported a waiting period of 3-7 days and only 3% had a waiting period of longer than seven days.

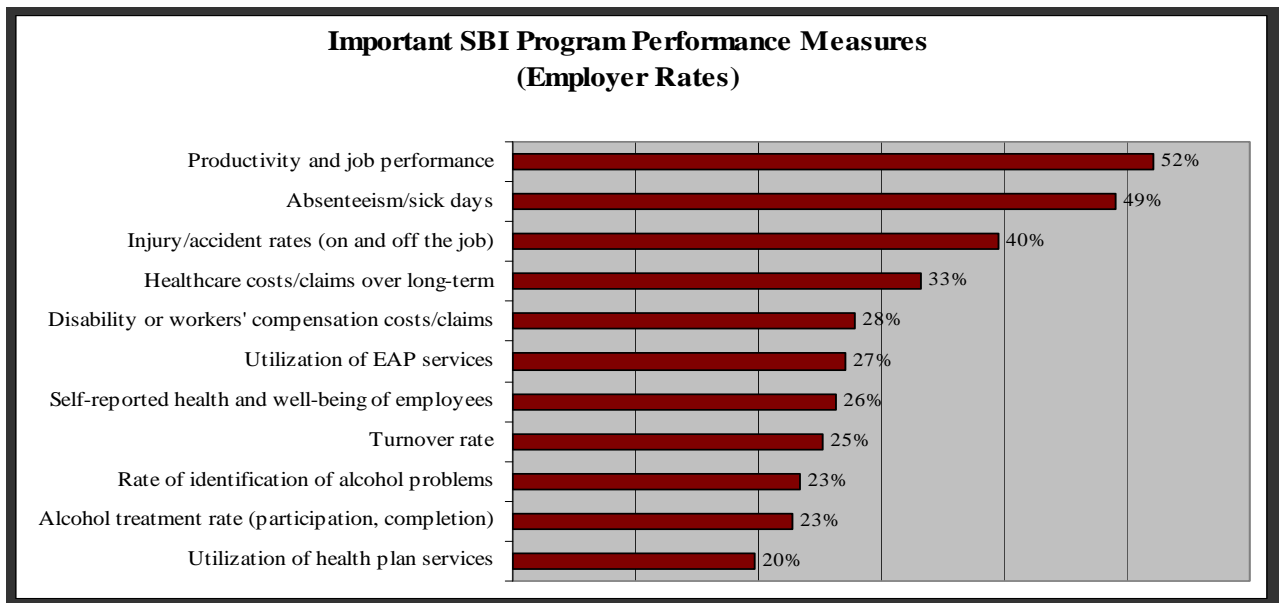
When brief intervention was accessed, employees were allotted a varied number of sessions: 1-3 session (16%); 4-6 sessions (22%); 7 or more sessions (8%); and “as many as needed/no limit” (32%). Twenty-two percent of employers didn’t know how many sessions were allotted.

Among the 128 employers that provided brief intervention, 92% (107) reported providing referrals for employees who needed treatments for alcohol abuse and/or dependency that is more intensive than is offered through brief intervention.

**Training.** Employers that responded to the survey also reported information about specific training on alcohol screening and/or brief intervention provided to those responsible for conducting alcohol SBI. Approximately 27% of employer participants who indicated that their company or its vendors conducted alcohol screening reported that training was provided. Of the employers who indicated that that their company or its vendors conducted brief intervention, 39 (31%) reported that training was provided.

**Evaluation of SBI program performance.** Most employer participants (52%) indicated that in assessing the value of an alcohol SBI program in their respective companies, the most important outcomes to company leadership were productivity and job performance. Absenteeism and sick days were also cited by 49% of the employer participants as outcomes of importance in evaluating

SBI program performance. The figure below illustrates the proportion of employers that valued productivity and other outcomes to assess the value of alcohol SBI.



**Importance and interest in developing an alcohol screening and brief intervention program.**

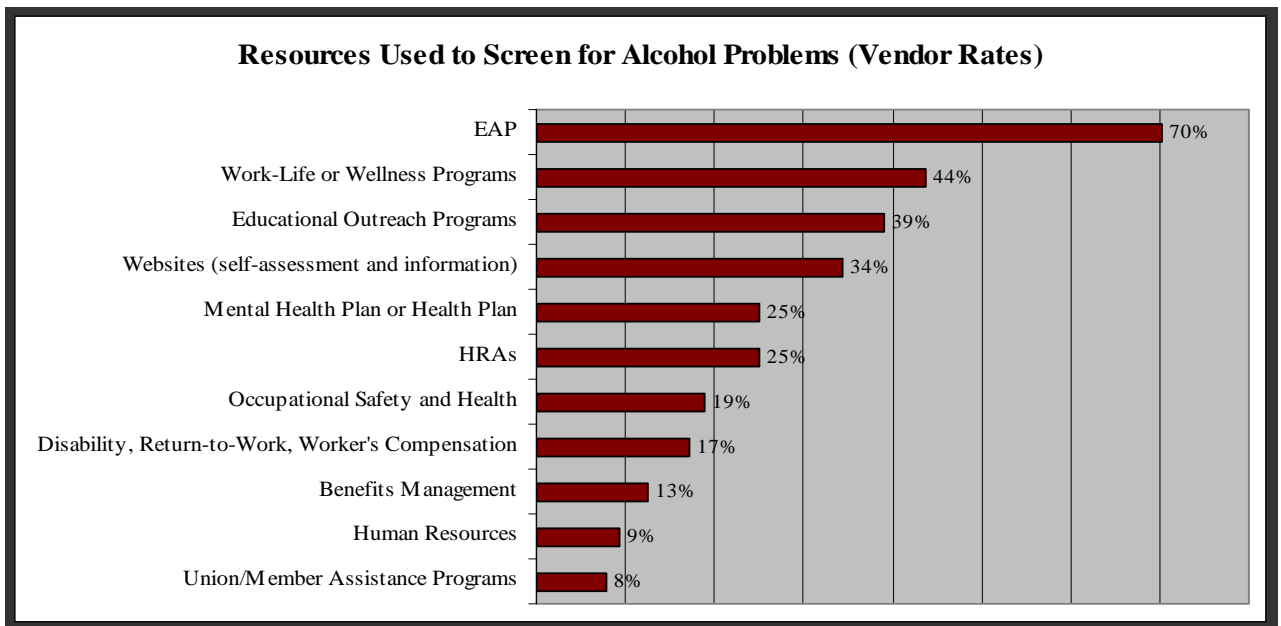
Among the ~ 300 employers that responded to these questions, about 46% reported that having an SBI program or doing SBI better was “very important” (17%) or “important” (29%) to their company; while others answered that this was “neither important or unimportant” (26%), “somewhat important” (16%), and “not important at all” (12%). Moreover, almost half expressed interest in developing an SBI program for use in their workplace.

**VENDOR ASSESSMENT**

**Assessing product and service adequacy.** In the two years between the 2005 survey and the 2007 survey, 64% of the participating behavioral health vendors indicated that they had assessed the adequacy of the alcohol treatment products and services offered to client businesses; 25% of vendors surveyed disclosed that they did not assess these products and services, and 11% reported not knowing whether an assessment had been done.

Of the vendors that did assess adequacy, more than 71% also made specific changes to products and services to improve access to alcohol treatment. Examples of the improvements their companies made included implementing standardized alcohol screening tools at intake, instituting additional mechanisms for screening (e.g., online, telephonic), adding more online assessments and self-help materials to client educational caches, creating better referral linkages between EAP and treatment programs, offering alcohol disease management programs, and making changes to/entering into new contractual agreements with providers offering more treatment/service options.

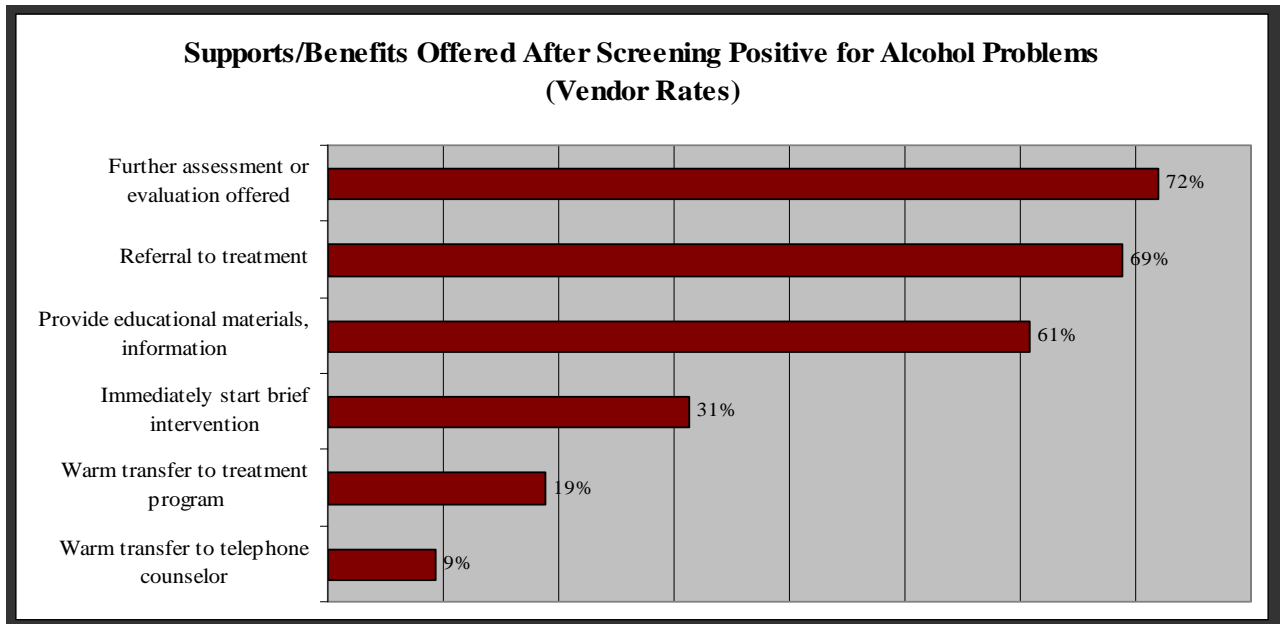
**Alcohol screening.** Of the 87 vendors who responded to the question about when they began offering screening to client businesses, more than 17% (15) reported that alcohol screening became available relatively recently (“within the last two years”) while 47% (41) reported that it became available “over two years ago.” Nine percent (8) of vendors acknowledged that alcohol screening was available but they did not know when it began. Thus, in total 74% (64) of vendors reported offering alcohol screening to its client businesses. The remaining 26% (23) did not offer screening. As shown in the figure below, the most common approaches used to conduct screening were EAP, work-life/wellness programs, educational outreach programs, and websites (e.g., self-assessment). Vendors were least likely to offer screening through benefits management, human resources, and union/member assistance programs.



Vendor participants that offered alcohol screening also reported whether or not alcohol screening was given as a component of a product or service that screens for other physical or mental health issues. More than 34% reported that alcohol screening was conducted independent of other issues. Fifty-nine percent of vendors reported that alcohol screening was part of depression screening, 48% reported it as part of stress screening and 19% reported it was part of screening for another chronic disease.

Face-to-face was the primary way that alcohol screening was delivered to employees of client businesses (70%). Vendors also offered telephone screening (31%) and self-administered computer-based (33%) screening at similar rates. Self-administered paper-and-pencil was the least likely delivery modality used by vendors (19%). Less than two percent did not know how it was delivered.

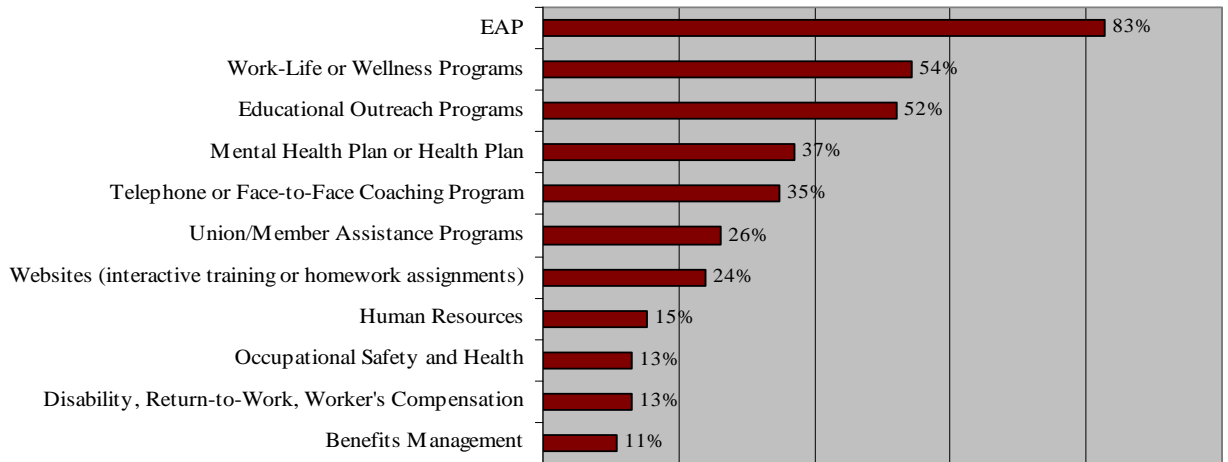
If an employee of a client business screens positive for an alcohol problem, 72% of vendors indicated that the person would be offered further assessment or evaluation and almost 70% offered referral to treatment. Many provide educational information. Almost one-third offered brief intervention immediately upon screening positive. The figure below illustrates additional supports vendors offer to employees of client businesses that screen positive for alcohol problems. Other supports/benefits included offering a 12-step program.



Moreover, among vendors offering screening, most recommended standardized questionnaires/screeners (e.g., AUDIT, MAST, or CAGE) (66%). Quantity/frequency screeners (e.g., how much do you typically drink and how often do you drink) were recommended by 39%, using ASAM criteria was recommended by 33%, and single-item screeners (e.g., one binge drinking item) by only 9% of vendors. Other recommended methods included the use of psychosocial assessments and comprehensive assessment tools (e.g., SASSI, SUDDS-IV, ASI).

**Brief intervention.** Of the 64 vendors that offered screening, 39 (61%) indicated that brief intervention products or services are also offered in cases where an individual screens positive for an alcohol problem (i.e., both screening and brief intervention are offered to client businesses) and 25 (39%) only offered screening. An additional seven vendors (15%) reported offering brief intervention alone (i.e., without offering alcohol screening). Thus, a total of 46 vendors reported offering brief intervention. As shown below, the most common resources used by vendors to provide brief intervention were EAP, work-life/wellness programs and educational outreach programs. The least likely were occupational safety and health, disability/return-to-work/worker's compensation, and benefits management.

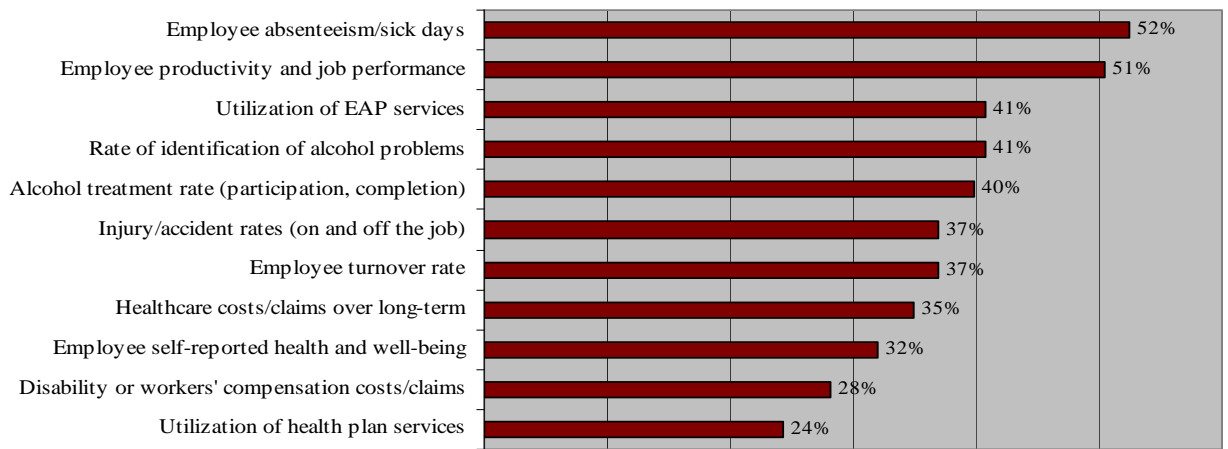
### Resources Used to Provide Brief Intervention to Client Businesses (Vendor Rates)



**Training.** Almost 80% of vendors that responded to the survey report that specific training on alcohol screening and/or brief intervention is provided to the individuals responsible for conducting alcohol SBI. Among the 64 vendors that offer screening, more than 60% (39) indicate that they train the individuals responsible for conducting it. Of the 46 vendors that offer brief intervention to client businesses, 70% (32) provide training to the individuals who deliver the service.

**Evaluation of SBI product and service performance.** Most vendor participants indicated that in assessing the value of an alcohol SBI program offered to client businesses, the outcomes of most importance were employee absenteeism and sick days (52%) and employee productivity and job performance (51%). The figure below illustrates the proportion of vendors that valued these and other outcomes to assess the value of alcohol SBI.

### Important SBI Program Performance Measures (Vendor Rates)





***Importance and interest in offering an alcohol screening and brief intervention program.***

Among the 67 vendors that responded to these questions, about 81% reported that offering client businesses an alcohol SBI product or service was “very important” (45%) or “important” (36%). Thirteen percent said it was “neither important nor unimportant” and 3% thought it to be “somewhat important”. Very few (3%) consider it “not at all important.” Furthermore, over two-thirds expressed interest in developing an alcohol SBI program that could be offered as a product or service to their client businesses.

## CONCLUSION

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Results from the 2007 Workplace SBI Survey revealed that employers remain concerned about alcohol problems among employees. Many employers and vendors agree that having or improving an alcohol SBI program is “important” or “very important”. However, it appears that employers may benefit from additional information about the importance and benefits (health and economic) of alcohol SBI given that about half of employers report it is “neither important nor unimportant”, “somewhat important” or “not at all important.” Both groups also expressed interest in learning more about developing their own alcohol SBI programs and services and agree that employee productivity/job performance and absenteeism/sick days are the top two priorities when evaluating an alcohol SBI program. Both groups are also willing to make changes in their current activities in order to improve access to alcohol services and treatment. Moreover, it appears from those already conducting SBI that companies are amenable to integrating SBI (and vendors are offering products and services) using various resources and departments/divisions within the workplace as delivery vehicles, particularly the EAP.

Because of its advances in the health industry, alcohol SBI—given the availability of quick screening tools and simplified approaches to brief intervention—is also well-suited for the workplace. Despite a limited amount of evidence-based literature validating the implementation of SBI in the workplace, the first year of the NETS/NHTSA project found some evidence supporting the effectiveness of workplace SBI. SBI could be offered to workers and their families through a number of company resources and program; e.g., EAP, health promotion and wellness programs, occupational health and safety clinics, health fairs, employer-sponsored health insurance plans, disease management, or disability/rehabilitation programs (see Appendix D and E). The second year of the project provided the detailed information needed to conceptually develop a customizable SBI program that could be implemented through one or more of those resources. Given what has been gleaned from review of the SBI literature and other research activities over the course of the project, it is reasonable to expect that by incorporating alcohol SBI into workplace settings, employers will save money on healthcare costs, raise productivity, and contribute to employee well-being. Many workplaces—whether through EAPs or some other resource—are prepared to address alcohol problems through workplace SBI. Consequently, in the next phase of the NETS/NHTSA project, the study team has proposed a series of pilot tests/case studies examining the feasibility and impact of workplace SBI on organizational processes and employee outcomes. In addition, the third biennial Workplace SBI Survey is planned for 2009.

## REFERENCES

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<sup>1</sup> Goplerud, E. & McPherson, T.L. (2006). Alcohol screening and brief intervention in the workplace: Year One Final Report. Network of Employers for Traffic Safety (NETS) as part of Cooperative Agreement with the National Highway Traffic Safety Administration (NHTSA). Washington, DC. [Executive Summary available at: [http://www.ensuringsolutions.org/usr\\_doc/NETS\\_Year\\_One\\_Summary.pdf](http://www.ensuringsolutions.org/usr_doc/NETS_Year_One_Summary.pdf).]

<sup>2</sup> McPherson, T.L. & Goplerud, E. (2008). Screening and brief intervention (SBI): Guide and Resource Manual for Workplace Practitioners. Year Two Final Report: Appendix B submitted to the Network of Employers for Traffic Safety (NETS) as part of Cooperative Agreement with the National Highway Traffic Safety Administration (NHTSA). Washington, DC.

<sup>3</sup> Goplerud, E. & McPherson, T.L. (2008). Alcohol screening and brief intervention in the workplace: Year Two Final Report. Network of Employers for Traffic Safety (NETS) as part of Cooperative Agreement with the National Highway Traffic Safety Administration (NHTSA). Washington, DC. [Executive Summary available at: [http://www.ensuringsolutions.org/usr\\_doc/Executive\\_Summary\\_of\\_Year\\_2.pdf](http://www.ensuringsolutions.org/usr_doc/Executive_Summary_of_Year_2.pdf).]

## **CONTENTS OF APPENDICES**

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**A: WORKPLACE CONCEPTUAL MODEL**

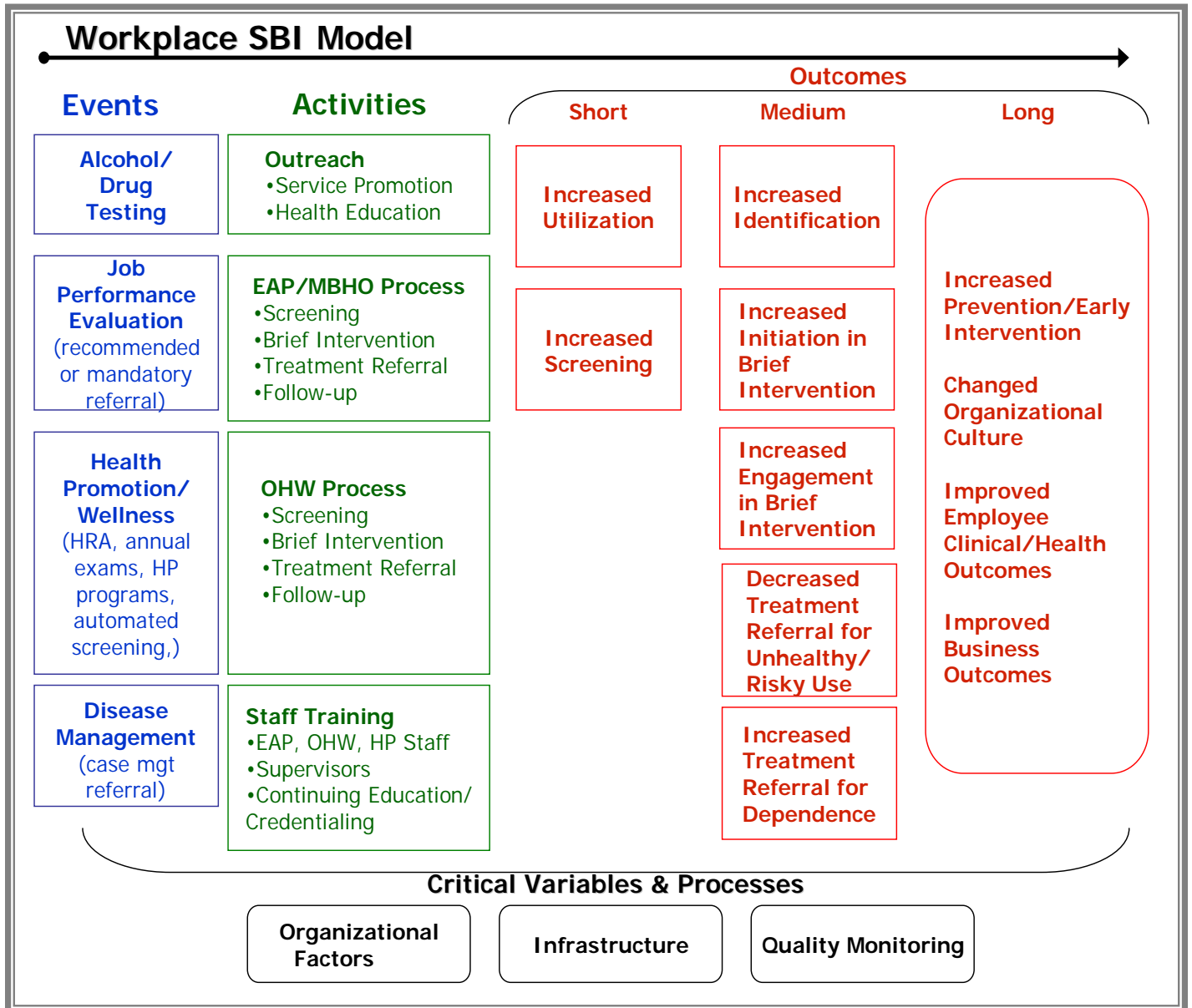
**B: WORKPLACE SBI INITIATIVE POST EMPLOYER SURVEY**

**C: WORKPLACE SBI INITIATIVE POST VENDOR SURVEY**

**D: POST-BIOASSAY EAP APPROACH**

**E: OCCUPATIONAL HEALTH & WELLNESS/EAP APPROACH**

## APPENDIX A: WORKPLACE CONCEPTUAL MODEL



## APPENDIX B: WORKPLACE SBI INITIATIVE 2007 EMPLOYER SURVEY

CONCERN ABOUT ALCOHOL PROBLEMS		
How concerned is your company about alcohol problems among employees?	<input type="checkbox"/> 1 Very concerned <input type="checkbox"/> 2 Moderately concerned <input type="checkbox"/> 3 Not concerned	
PEW DELIVERABLE ITEMS		
In the last two years, has your company assessed the adequacy of its alcohol treatment benefits (EAP, MBHO, health plan) offered to employees?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
In the last two years, has your company made any changes to improve access to alcohol treatment for employees?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
>(Skip pattern question) You answered "yes" to the previous question. What changes did your company make to improve access to alcohol treatment for employees? [text box]		
ALCOHOL SCREENING		
When did your company or its vendors begin conducting alcohol screening?	<input type="checkbox"/> 1 Within the last two years <input type="checkbox"/> 2 Over 2 years ago	<input type="checkbox"/> 3 Don't know when it began <input type="checkbox"/> 4 Don't conduct screening/NA
>(Skip pattern question) If 1, 2, or 3: You indicated that your company conducts screening. Please answer the following questions. >If 4, branch to BI section		
The following is a list of resources/business units that companies use to screen for alcohol problems. <u>Check all that apply</u> to your company.	<input type="checkbox"/> 1 Benefits Management <input type="checkbox"/> 2 Human Resources <input type="checkbox"/> 3 EAP (Employee Assistance Program) <input type="checkbox"/> 4 Union/Member Assistance Program <input type="checkbox"/> 5 Mental Health Plan or Health Plan <input type="checkbox"/> 6 Work-Life or Wellness Programs <input type="checkbox"/> 7 Educational Outreach Programs (health fairs, bulletin boards, workplace kiosks) <input type="checkbox"/> 8 Occupational Safety and Health	<input type="checkbox"/> 9 Disability, Return-to-Work, or Workers' Compensation Programs <input type="checkbox"/> 10 Websites offering self-assessment and educational information <input type="checkbox"/> 11 New hire orientation/on-the-job training programs <input type="checkbox"/> 12 HRAs (health risk assessment or health risk appraisals) <input type="checkbox"/> 13 Other (please specify) [insert textbox] <input type="checkbox"/> 14 Don't know
In your company, do any of the following mechanisms/events trigger alcohol screening? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Routine physical/annual exam <input type="checkbox"/> 2 Routine HRA <input type="checkbox"/> 3 Routine part of EAP intake procedures <input type="checkbox"/> 4 Supervisor or management referral <input type="checkbox"/> 5 Self-referral by employee <input type="checkbox"/> 6 Random drug and alcohol testing	<input type="checkbox"/> 7 For-cause drug and alcohol testing <input type="checkbox"/> 8 Return-to-work/fitness-for-duty evaluation <input type="checkbox"/> 9 On-the-job injury <input type="checkbox"/> 10 Other (please specify): [insert textbox] <input type="checkbox"/> 11 Don't know
Is alcohol screening conducted as part of screening for any of the following physical or mental health issues? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Depression <input type="checkbox"/> 2 Stress <input type="checkbox"/> 3 Chronic diseases	<input type="checkbox"/> 4 Other physical or mental health issue (please specify) [insert textbox] <input type="checkbox"/> 5 Alcohol screening is conducted independently <input type="checkbox"/> 6 Don't know
How is alcohol screening delivered? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Face-to-face <input type="checkbox"/> 2 Telephone <input type="checkbox"/> 3 Self-administered computer/web-based	<input type="checkbox"/> 4 Self-administered paper-and-pencil <input type="checkbox"/> 5 Other (please specify): [insert textbox] <input type="checkbox"/> 6 Don't know
Do you recommend the use of any of the following screening methods? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Single-item screener (e.g., one binge drinking item) <input type="checkbox"/> 2 Quantity/Frequency screener (e.g., how much do you typically drink and how often do you drink)	<input type="checkbox"/> 3 Standardized questionnaire, e.g., AUDIT (Alcohol Use Disorder Identification Test), MAST (Michigan Alcohol Screening Test), or CAGE (4 question screener). <input type="checkbox"/> 4 ASAM criteria <input type="checkbox"/> 5 Other (please specify): [insert textbox]
What happens if a person screens positive for an alcohol problem? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Further assessment or evaluation offered <input type="checkbox"/> 2 Referral to treatment <input type="checkbox"/> 3 Warm transfer to telephone counselor <input type="checkbox"/> 4 Warm transfer to treatment program	<input type="checkbox"/> 5 Immediately start brief intervention <input type="checkbox"/> 6 Provide educational materials, information <input type="checkbox"/> 7 Other (please specify): [insert textbox] <input type="checkbox"/> 8 Don't know
BRIEF INTERVENTION		
Does your company or its vendors provide brief interventions for individuals who screen positive for alcohol problems?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
> (Skip pattern question) If 1: You answered "yes" to the previous question. Please answer the following questions. >If 2 or 3, branch to Training section		
The following is a list of resources/business units that companies use to provide brief intervention for alcohol problems. <u>Check all that apply</u> to your company.	<input type="checkbox"/> 1 Supervisors <input type="checkbox"/> 2 Benefits Management <input type="checkbox"/> 3 Human Resources <input type="checkbox"/> 4 EAP (Employee Assistance Program) <input type="checkbox"/> 5 Union/Member Assistance Program <input type="checkbox"/> 6 Mental Health Plan or Health Plan <input type="checkbox"/> 7 Work-Life or Wellness Programs <input type="checkbox"/> 8 Occupational Safety and Health	<input type="checkbox"/> 9 Disability, Return-to-Work, or Workers' Compensation Programs <input type="checkbox"/> 10 Telephone or Face-to-face Coaching Programs <input type="checkbox"/> 11 Websites offering interactive training or homework assignments <input type="checkbox"/> 12 Other (please specify) [insert textbox] <input type="checkbox"/> 13 Don't know
Generally, when is brief intervention conducted following a positive screen for alcohol problems?	<input type="checkbox"/> 1 Immediately, with the same person who does screening <input type="checkbox"/> 2 Within 1-2 days	<input type="checkbox"/> 3 Within 3-7 days <input type="checkbox"/> 4 Longer than 7 days <input type="checkbox"/> 5 Don't know
Once identified with a positive screen, approximately how many brief intervention sessions for an alcohol problem is an employee allowed?	<input type="checkbox"/> 1 1-3 sessions <input type="checkbox"/> 2 4-6 sessions <input type="checkbox"/> 3 7 or more sessions	<input type="checkbox"/> 4 As many as they need/no limit <input type="checkbox"/> 5 Don't know
Does your company or its vendors provide referral for employees who need treatments that are more intensive than brief interventions?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
TRAINING		
Is specific training on alcohol screening and/or brief intervention provided to those responsible for conducting it?	<input type="checkbox"/> 1 YES, screening <input type="checkbox"/> 2 YES, brief intervention	<input type="checkbox"/> 3 NO training provided <input type="checkbox"/> 4 DON'T KNOW

EVALUATION OF SBI PROGRAM PERFORMANCE		
In assessing the value of an alcohol screening and brief intervention program in your company, what outcomes would be of most importance to your leadership? <u>Check all that apply.</u>	<input type="checkbox"/> 1 Rate of identification of alcohol problems <input type="checkbox"/> 2 Absenteeism/sick days <input type="checkbox"/> 3 Turnover rate <input type="checkbox"/> 4 Productivity and job performance <input type="checkbox"/> 5 Healthcare costs/claims over long-term <input type="checkbox"/> 6 Alcohol treatment rate (participation, completion)	<input type="checkbox"/> 7 Disability or workers' compensation costs/claims <input type="checkbox"/> 8 Utilization of EAP services <input type="checkbox"/> 9 Utilization of health plan services <input type="checkbox"/> 10 Self-reported health and well-being of employees <input type="checkbox"/> 11 Injury/accident rates (on and off the job) <input type="checkbox"/> 12 Other (please specify) [insert textbox]
PRIORITY OF & INTEREST IN SBI		
How important is it to your company to have an SBI program, or to do SBI better?	<input type="checkbox"/> 1 Very Important <input type="checkbox"/> 2 Important <input type="checkbox"/> 3 Neither Important or Unimportant	<input type="checkbox"/> 4 Somewhat Important <input type="checkbox"/> 5 Not at all important
Would you like more information on developing a program for screening and brief intervention for alcohol problems?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO	
Are you interested in participating in a demonstration or pilot project to develop and test the effectiveness of SBI in your company?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 MAYBE	
What is the <u>primary</u> business of your company?	<input type="checkbox"/> 1 Services (hotel, business, personal, repair) <input type="checkbox"/> 2 Manufacturing <input type="checkbox"/> 3 Transportation of goods or passengers <input type="checkbox"/> 4 Communications or public utility (phone, cable, electric, gas, water, refuse collection) <input type="checkbox"/> 5 Retail store or wholesale distributor	<input type="checkbox"/> 6 Banking, insurance, or real estate <input type="checkbox"/> 7 Public administration (fire, police, administration of government programs) <input type="checkbox"/> 8 Professional services (health, medical, education, engineering) <input type="checkbox"/> 9 Construction <input type="checkbox"/> 10 Other (please specify) [insert textbox]
COMPANY INFORMATION		
Approximately how many individuals are employed by your company?	<input type="checkbox"/> 1-99 <input type="checkbox"/> 100-499 <input type="checkbox"/> 500-999 <input type="checkbox"/> 1,000-4,999	<input type="checkbox"/> 5,000-9,999 <input type="checkbox"/> 10,000-49,000 <input type="checkbox"/> 50,000 or more <input type="checkbox"/> Don't know
Please indicate all of the regions in which your company is located.	<input type="checkbox"/> 1 New England Region: CT, ME, MA, NH, RI, VT <input type="checkbox"/> 2 Eastern Region: NY, NJ, PR, VI <input type="checkbox"/> 3 Mid-Atlantic Region: DE, DC, MD, PA, VA, WV <input type="checkbox"/> 4 Southeast Region: AL, FL, GA, KY, MS, NC, SC, TN <input type="checkbox"/> 5 Great Lakes Region: IL, IN, MI, MN, OH, WI <input type="checkbox"/> 6 South Central Region: AR, LA, NM, OK, TX, Indian Nations <input type="checkbox"/> 7 Central Region: IA, KS, MO, NE <input type="checkbox"/> 8 Rocky Mountain Region: CO, MT, ND, SD, UT, WY <input type="checkbox"/> 9 Western Region: AZ, CA, HI, NV, American Samoa, Guam, Marianas <input type="checkbox"/> 10 Northwest Region: AK, ID, OR, WA	
Please provide your contact information below.	Name: [insert textbox] Title: [insert textbox] Organization: [insert textbox] Telephone: [insert textbox] Email: [insert textbox]	
Please provide your mailing address below.	Street: [insert textbox] Street: [insert textbox] City, State, Zip: [insert textbox]	

## APPENDIX C: WORKPLACE SBI INITIATIVE 2007 VENDOR SURVEY

PEW DELIVERABLE ITEMS		
In the last two years, has your company assessed the adequacy of its alcohol treatment products and services offered to client businesses?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
In the last two years, has your company made any changes to its products and services to improve access to alcohol treatment??	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
>(Skip pattern question) You answered "yes" to the previous question. What product or service changes did your company make? [text box]		
ALCOHOL SCREENING		
When did your company begin offering alcohol screening to client businesses?	<input type="checkbox"/> 1 Within the last two years <input type="checkbox"/> 2 Over 2 years ago	<input type="checkbox"/> 3 Don't know when it began <input type="checkbox"/> 4 Don't conduct screening/NA
>(Skip pattern question) If 1, 2, or 3: You indicated that your company offers screening. Please answer the following questions. >If 4, branch to BI section		
The following is a list of approaches that vendors use to screen for alcohol problems. Check all that apply for your company in terms of ways you offer alcohol screening to client businesses.	<input type="checkbox"/> 1 Benefits Management <input type="checkbox"/> 2 Human Resources <input type="checkbox"/> 3 EAP (Employee Assistance Program) <input type="checkbox"/> 4 Union/Member Assistance Program <input type="checkbox"/> 5 Mental Health Plan or Health Plan <input type="checkbox"/> 6 Work-Life or Wellness Programs <input type="checkbox"/> 7 Educational Outreach Programs (health fairs, bulletin boards, workplace kiosks) <input type="checkbox"/> 8 Occupational Safety and Health	<input type="checkbox"/> 9 Disability, Return-to-Work, or Workers' Compensation Programs <input type="checkbox"/> 10 Websites offering self-assessment and educational information <input type="checkbox"/> 11 HRAs (health risk assessment or health risk appraisals) <input type="checkbox"/> 12 Other (please specify) [insert textbox] <input type="checkbox"/> 13 Don't know
Is alcohol screening offered as a component of a product/service that screens for any of the following physical or mental health issues? Check all that apply.	<input type="checkbox"/> 1 Depression <input type="checkbox"/> 2 Stress <input type="checkbox"/> 3 Chronic diseases	<input type="checkbox"/> 4 Other physical or mental health issue (please specify) [insert textbox] <input type="checkbox"/> 5 Alcohol screening is conducted independently <input type="checkbox"/> 6 Don't know
How is your alcohol screening product(s) delivered to employees of client businesses? Check all that apply.	<input type="checkbox"/> 1 Face-to-face <input type="checkbox"/> 2 Telephone <input type="checkbox"/> 3 Self-administered computer/web-based	<input type="checkbox"/> 4 Self-administered paper-and-pencil <input type="checkbox"/> 5 Other (please specify): [insert textbox] <input type="checkbox"/> 6 Don't know
Do you recommend the use of any of the following screening methods? Check all that apply.	<input type="checkbox"/> 1 Single-item screener (e.g., one binge drinking item) <input type="checkbox"/> 2 Quantity/Frequency screener (e.g., how much do you typically drink and how often do you drink)	<input type="checkbox"/> 3 Standardized questionnaire, e.g., AUDIT (Alcohol Use Disorder Identification Test), MAST (Michigan Alcohol Screening Test), or CAGE (4 question screener). <input type="checkbox"/> 4 ASAM criteria <input type="checkbox"/> 5 Other (please specify): [insert textbox]
If an employee of a client business screens positive for an alcohol problem, which (if any) of the following supports/benefits are provided? Check all that apply.	<input type="checkbox"/> 1 Further assessment or evaluation offered <input type="checkbox"/> 2 Referral to treatment <input type="checkbox"/> 3 Warm transfer to telephone counselor <input type="checkbox"/> 4 Warm transfer to treatment program <input type="checkbox"/> 5 Immediately start brief intervention	<input type="checkbox"/> 6 Provide educational materials, information <input type="checkbox"/> 7 Other (please specify): [insert textbox] <input type="checkbox"/> 8 Don't know <input type="checkbox"/> 9 Don't provide employee with supports/benefits after screening positive
BRIEF INTERVENTION		
Does your company offer brief intervention products or services to businesses for their employees who screen positive for an alcohol problem?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 DON'T KNOW	
> (Skip pattern question) >If 1: You answered "yes" to the previous question. Please answer the following questions. >If 2 or 3, branch to Training section		
The following is a list of resource approaches that companies use to offer brief intervention for alcohol problems. Check all that apply for your company in terms of what you offer client businesses.	<input type="checkbox"/> 1 Benefits Management <input type="checkbox"/> 2 Human Resources <input type="checkbox"/> 3 EAP (Employee Assistance Program) <input type="checkbox"/> 4 Union/Member Assistance Program <input type="checkbox"/> 5 Mental Health Plan or Health Plan <input type="checkbox"/> 6 Work-Life or Wellness Programs <input type="checkbox"/> 7 Educational outreach programs (e.g., health fairs)	<input type="checkbox"/> 8 Occupational Safety and Health <input type="checkbox"/> 9 Disability, Return-to-Work, or Workers' Compensation Programs <input type="checkbox"/> 10 Telephone or Face-to-face Coaching Programs <input type="checkbox"/> 11 Websites offering interactive training or homework assignments <input type="checkbox"/> 12 Other (please specify) [insert textbox] <input type="checkbox"/> 13 Don't know
TRAINING		
Does your company provide specific training on alcohol screening and/or brief intervention to the individuals responsible for conducting screening and/or brief intervention? If yes, check the one(s) that apply.	<input type="checkbox"/> 1 YES, screening <input type="checkbox"/> 2 YES, brief intervention	<input type="checkbox"/> 3 NO training provided <input type="checkbox"/> 4 DON'T KNOW
EVALUATION OF SBI PROGRAM PERFORMANCE		
In assessing the value of an alcohol screening and brief intervention product or service offered to client businesses, what outcomes would be of most importance to your book of business?	<input type="checkbox"/> 1 Rate of identification of employee alcohol problems <input type="checkbox"/> 2 Employee absenteeism/sick days <input type="checkbox"/> 3 Turnover rate <input type="checkbox"/> 4 Productivity and job performance <input type="checkbox"/> 5 Healthcare costs/claims over long-term <input type="checkbox"/> 6 Alcohol treatment rate (participation, completion)	<input type="checkbox"/> 7 Disability or workers' compensation costs/claims <input type="checkbox"/> 8 Utilization of EAP services <input type="checkbox"/> 9 Utilization of health plan services <input type="checkbox"/> 10 Employee self-reported health and well-being <input type="checkbox"/> 11 Injury/accident rates (on and off the job) <input type="checkbox"/> 12 Other (please specify) [insert textbox]
PRIORITY OF & INTEREST IN SBI		
How important is it to offer client businesses an alcohol SBI product or service?	<input type="checkbox"/> 1 Very Important <input type="checkbox"/> 2 Important <input type="checkbox"/> 3 Neither Important or Unimportant	<input type="checkbox"/> 4 Somewhat Important <input type="checkbox"/> 5 Not at all important
Would you like more information on developing an alcohol SBI program that can be offered as a product or service to client businesses?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO	
Are you interested in participating in a demonstration or pilot project to develop and test the effectiveness of alcohol SBI program?	<input type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO <input type="checkbox"/> 3 MAYBE	



**COMPANY INFORMATION**

Please indicate all of the regions in which your company serves client businesses.

- 1 New England Region: CT, ME, MA, NH, RI, VT
- 2 Eastern Region: NY, NJ, PR, VI
- 3 Mid-Atlantic Region: DE, DC, MD, PA, VA, WV
- 4 Southeast Region: AL, FL, GA, KY, MS, NC, SC, TN
- 5 Great Lakes Region: IL, IN, MI, MN, OH, WI
- 6 South Central Region: AR, LA, NM, OK, TX, Indian Nations
- 7 Central Region: IA, KS, MO, NE
- 8 Rocky Mountain Region: CO, MT, ND, SD, UT, WY
- 9 Western Region: AZ, CA, HI, NV, American Samoa, Guam, Marianas
- 10 Northwest Region: AK, ID, OR, WA

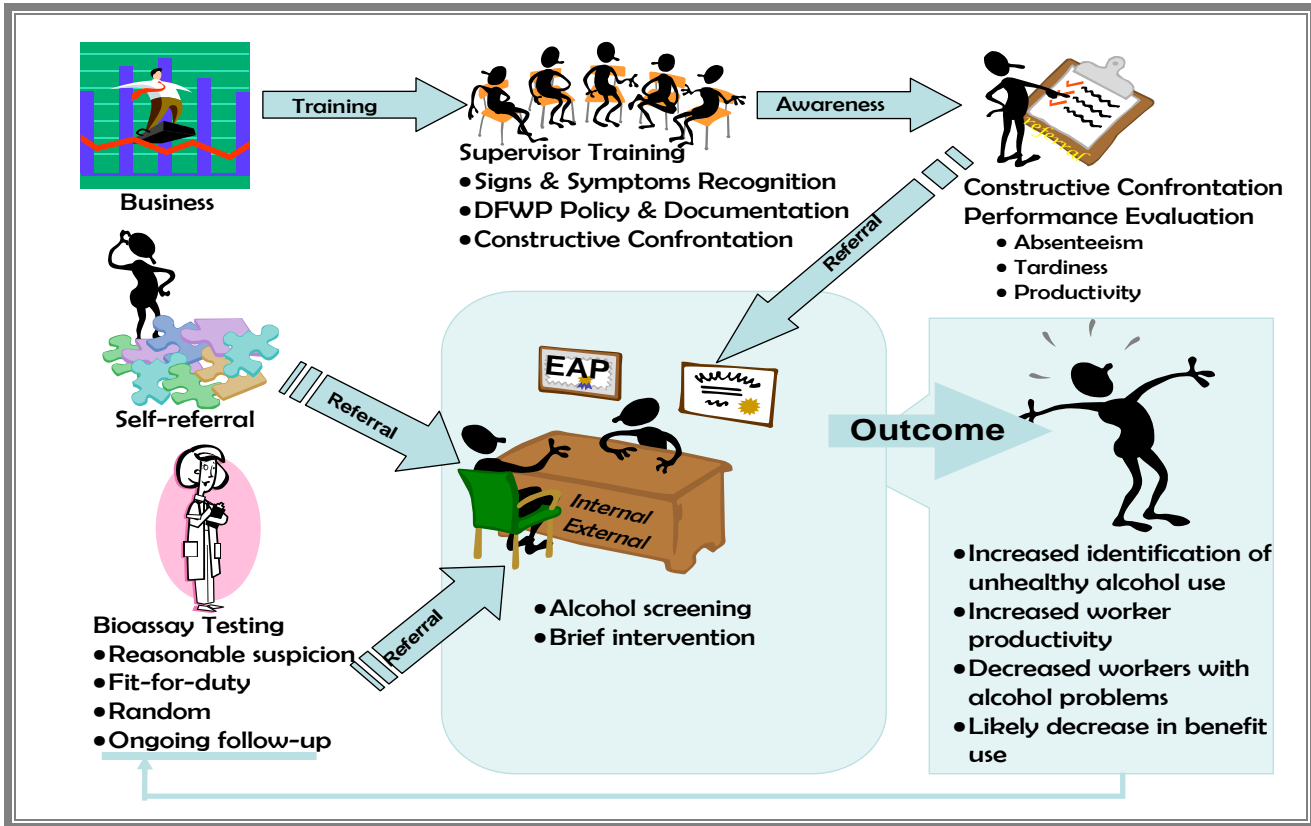
Please provide your contact information below.

Name: [insert textbox]  
Title: [insert textbox]  
Organization: [insert textbox]  
Telephone: [insert textbox]  
Email: [insert textbox]

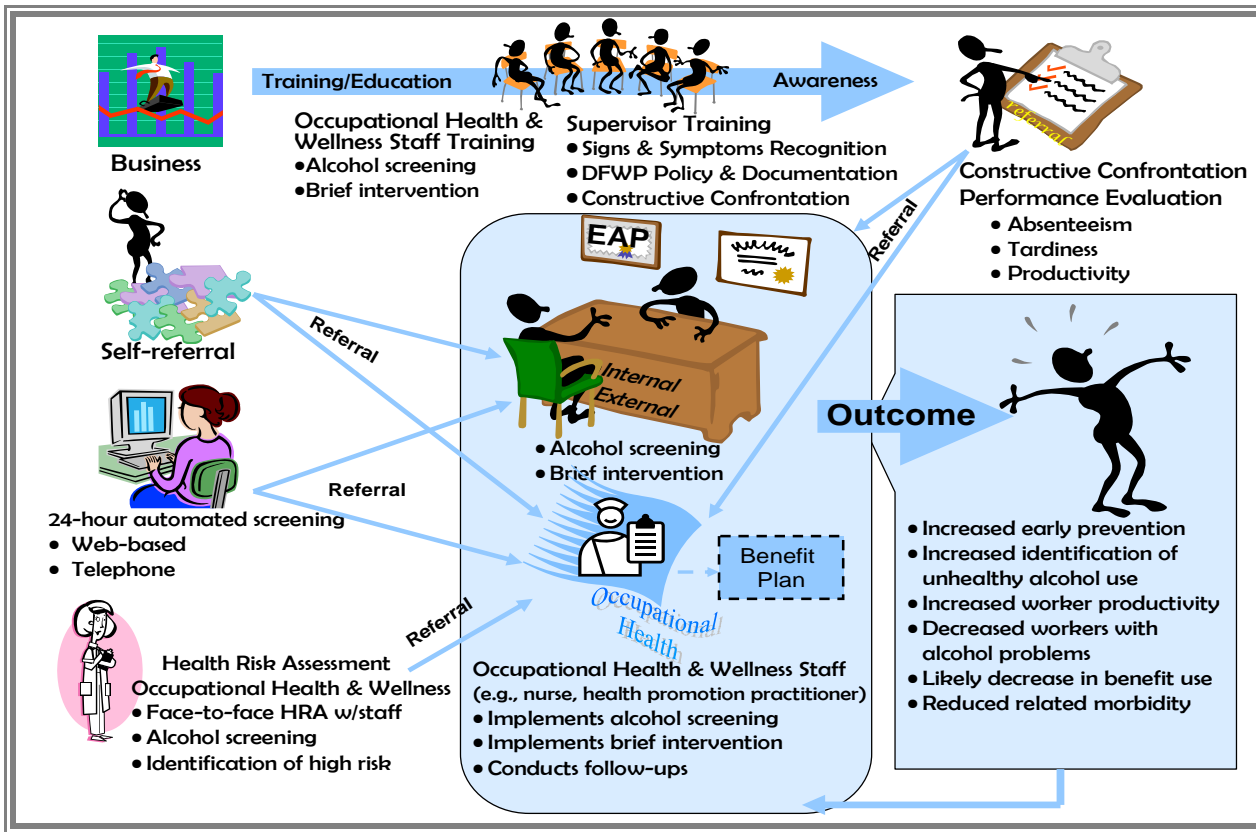
Please provide your mailing address below.

Street: [insert textbox]  
Street: [insert textbox]  
City, State, Zip: [insert textbox]

## APPENDIX D: POST-BIOASSAY EAP APPROACH



# APPENDIX E: OCCUPATIONAL HEALTH & WELLNESS/EAP APPROACH



## About Ensuring Solutions

Ensuring Solutions to Alcohol Problems develops authoritative, research-based information about problem drinking for business leaders, policymakers, and others working to save lives and money by increasing access to treatment. Ensuring Solutions, based at The George Washington University Medical Center, is funded by The Pew Charitable Trusts. For more information about materials referenced in this report, workplace SBI research at Ensuring Solutions, or to participate in a pilot workplace alcohol SBI program, contact Tracy McPherson, PhD, at [tracym@gwu.edu](mailto:tracym@gwu.edu) or 202-416-0413.

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## Contributors

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